


Obstetric violence and the multidisciplinary team

 <https://doi.org/10.56238/sevened2024.016-028>

Isabelle Melo Martins¹

ABSTRACT

Obstetric violence is a broad, complex and multifaceted public health problem, which causes economic impacts and morbidity and mortality rates in women, generating many victims with physical and emotional sequelae, often permanent. Currently, there are high rates of obstetric violence in the care sectors for these women. The deficit in the training of health professionals on this topic compromises the reduction of cases of this type of violence. Learning about the recognition, prevention and notification of obstetric violence improves health professionals about obstetric violence. This chapter presents information on the rights of parturients, the identification of obstetric violence, and the prevention of obstetric violence, with the objective of training health professionals about obstetric violence and impacting the perception of obstetric violence, consequently improving the quality of obstetric care.

Keywords: Obstetric Violence, Health Education, Women's Health.

¹ Nurse Master in Health Care Practice
Federal University of Ceará
E-mail: isabelle_martins@hotmail.com
ORCID: <https://orcid.org/0000-0002-4455-0499>



INTRODUCTION

Violence is a broad and multifaceted public health problem, which has a great impact on society, generating victims and resulting in physical and emotional sequelae, often permanent (SOUTO et al., 2017).

Women are a large group of people vulnerable to violence, and violence directed at this group is considered gender-based, usually practiced by those who have the greatest share of power in a relationship and transform this power into a hierarchical relationship.

The expression gender violence emerged in the 1990s in order to give visibility to violence committed against women (HASSE, 2016).

In this group there is a specific type of violence, obstetric violence, which are violent actions that harm women's health during the phases of pregnancy, childbirth and puerperium, proving to be another type of gender violence (BRITO, OLIVEIRA and COSTA, 2020).

It is also institutional violence, as it occurs in institutions that provide health care, and violence is carried out by health professionals (LIMA, 2019).

Thus, any type of negligence or abuse in care, social discrimination, verbal violence (rude treatment, threats, reprimand, yelling, intentional humiliation), interventions practiced without explicit and informed consent, physical violence, and sexual abuse with pregnant women, parturients, or postpartum women during obstetric care is characterized as obstetric violence (PAIVA et al., 2022).

BRANDT et al. (2018) reveal that one in four women who have already experienced childbirth have suffered some form of obstetric violence at least once during their lives.

The types of obstetric violence that most women suffer in health services are: verbal violence, omission of health care, physical and psychological violence (OLIVEIRA et al, 2020).

In 2022, in Santa Catarina, the Law that provides for Public Policies to Combat Violence Against Women was sanctioned and measures were implemented to inform and protect pregnant and parturient women against obstetric violence, characterizing the practices of obstetric violence, aiming at their knowledge and eradication (SANTA CATARINA, 2022).

In view of this theme, the importance of studies, training and guidance of multidisciplinary health professionals on the identification and combat of obstetric violence is perceived.

Orso et al. (2021) report that many professionals are unaware of the term obstetric violence.

Multidisciplinary health professionals play an important role in reducing the practice of violence in the obstetric field due to their work during the clinical phases of the prepartum, childbirth, and puerperium process, both vaginal and cesarean section (ISMAEL et al., 2020).



The Code of Ethics for Nursing Professionals - CEPE, Resolution No. 564/2017, Chapter I – Rights – in its Article 6 and the Code of Ethics for Medical Professionals establish that it is the right of health professionals to improve their technical, scientific and cultural knowledge (COFEN, 2020).

In view of this, multidisciplinary health professionals must always be looking to improve their skills.

In addition, to ensure care that respects and meets the needs of women, it is essential that multidisciplinary health professionals who provide care to victims of violence in the obstetric field exercise and recognize their role in the face of cases, helping to reduce resistant attitudes regarding the recognition of this process and carrying out health education actions (SOUSA et al., 2021).

The authors Martins and Macedo (2024) produced a training guide for professionals on violence in the obstetric field, which can be a search material for the improvement of multidisciplinary health professionals.

The training of multidisciplinary health professionals is essential for a good development of the work process and should provide understanding capable of impacting care practice (GRAY et al., 2019).

Antunes and Martins (2022) report that the insertion of obstetric nurses in the care of parturients generates a reduction in interventionism in low-risk normal childbirth and an increase in the performance of practices based on scientific evidence, which is also a WHO recommendation.

It should also be noted that multidisciplinary health professionals must respect their Codes of Ethics regarding their responsibilities and duties with the profession, exercising the profession with justice, commitment, equity, problem-solving, dignity, competence, responsibility, honesty and loyalty, and basing their relationships on law, prudence, respect, solidarity and diversity of opinion and ideological position, in addition to communicating to its corresponding professional councils and competent bodies, facts that infringe legal provisions and that may harm professional practice (COFEN, 2020).

In view of this, it is believed that the debate and training on obstetric violence by multidisciplinary health professionals are essential for the evolution of the protection of women's rights in childbirth, but that it still requires expansion, better applicability, and greater space for the dissemination of information, in order to enable its prevention, in order to promote the physical and mental well-being of these women and humanized care throughout the prepartum process. childbirth and puerperium, through the implementation of campaigns and improvement courses aimed at combating this violence (SOUSA et al., 2021).

This chapter confirms that it is possible to foster studies to support the knowledge of professionals about obstetric violence, as well as to stimulate education with the use of technologies that enable innovation, open knowledge and free access, considering that multidisciplinary health



professionals who participate in improvement and qualification courses in a given practice have higher levels of perception than those who have never undergone any training.



REFERENCES

1. Souto, R. M. C. V., et al. (2017). Perfil epidemiológico do atendimento por violência nos serviços públicos de urgência e emergência em capitais brasileiras, *Viva 2014. *Ciência & Saúde Coletiva*, 22*(9), 2811-2823. Disponível em: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1413-81232017002902811&lng=pt&nrm=iso. Acesso em: 13 jun. 2022.
2. Hasse, M. (2016). **Violência de gênero contra mulheres: em busca da produção de um cuidado integral** (Dissertação de Mestrado, Escola de Enfermagem de Ribeirão Preto da Universidade de São Paulo). Disponível em: <https://www.teses.usp.br/teses/disponiveis/83/83131/tde-13022017-204029/pt-br.php>. Acesso em: 05 ago. 2022.
3. Brito, C. M. C. de, Oliveira, A. C. G. de A., & Costa, A. P. C. de A. (2020). Violência obstétrica e os direitos da parturiente: O olhar do poder judiciário brasileiro. **Cadernos Ibero-Americanos de Direito Sanitário*, 9*(1). Disponível em: <https://doi.org/10.17566/ciads.v9i1.604>. Acesso em: 23 jun. 2022.
4. Lima, T. M. M. de. (2019). **Violência obstétrica: As disputas discursivas e a luta das mulheres** (Tese de Doutorado, Universidade Federal de Pernambuco). Disponível em: <https://repositorio.ufpe.br/handle/123456789/33886>. Acesso em: 05 jun. 2022.
5. Paiva, A. de M. G., Pereira, A. M. M., Dantas, S. L. da C., Rodrigues, A. R. M., Silva, F. W. O. da, & Rodrigues, D. P. (2022). Representações sociais da violência obstétrica para puerperas e profissionais da saúde: Análise fatorial de correspondência. **Cogitare Enfermagem*, 27*, 75198. Disponível em: <https://www.scielo.br/j/cenf/a/QwjYXhTt8BKBzhqcn3RRLqv/abstract/?lang=pt>. Acesso em: 03 ago. 2022.
6. Brandt, G. P., Souza, S. J. P. D., Migoto, M. T., & Weigert, S. P. (2018). Violência obstétrica: A verdadeira dor do parto. **Revista Gestão e Saúde*, 19*(1), 19-37. Disponível em: <https://www.herrero.com.br/revista/19/01>. Acesso em: 05 maio. 2022.
7. Oliveira, M., et al. (2020a). Mulher e parto: Significados da violência obstétrica e a abordagem de enfermagem. **Revista Enfermagem UFPE Online**. Disponível em: <https://pesquisa.bvsalud.org/portal/resource/pt/biblio-1096980>. Acesso em: 11 ago. 2022.
8. Santa Catarina. (2022). Lei Nº 18.322, de 05 de janeiro de 2022. Consolida as Leis que dispõem sobre Políticas Públicas de Enfrentamento à Violência Contra as Mulheres. Santa Catarina: Assembleia Legislativa de Santa Catarina. Disponível em: http://leis.alesc.sc.gov.br/html/2022/18322_2022_lei.html. Acesso em: 17 jun. 2022.
9. Orso, L., et al. (2021). Violência obstétrica: Experiência da equipe multidisciplinar em saúde. **Revista Enfermagem UFPE Online**. Disponível em: <https://periodicos.ufpe.br/revistas/revistaenfermagem/article/view/246960/39477>. Acesso em: 03 ago. 2022.
10. Ismael, F. M., Souza, G. K. R., Esteves, N. S., & Aoyama, E. D. A. (2020). Assistência de enfermagem na prevenção da violência obstétrica. **Revista Brasileira Interdisciplinar de Saúde**. Disponível em: <https://revistarebis.rebis.com.br/index.php/rebis/article/view/92>. Acesso em: 05 jun. 2022.



11. Conselho Federal de Enfermagem (COFEN). (2020). *Código de Ética dos Profissionais de Enfermagem*. Disponível em: http://www.cofen.gov.br/wp-content/uploads/2012/03/resolucao_311_anexo.pdf. Acesso em: 03 jun. 2022.
12. Sousa, M. P. V. D., Santos, L. S. A., Caldas, G. R. F., Batista, F. A. M., & Lopes, C. R. da S. (2021). Violência obstétrica: Fatores desencadeantes e medidas preventivas de enfermagem. *Revista Nursing (São Paulo), 24*(279), 6015-6024. Disponível em: <https://pesquisa.bvsalud.org/portal/resource/pt/biblio-1343402>. Acesso em: 09 jul. 2022.
13. Martins, I. M., & Macedo, L. C. (2024). *Capacitação profissional acerca da violência obstétrica: Pelo combate à violência*. Fortaleza: IMAC.
14. Gray, T., Mohan, S., Lindow, S., & Farrell, T. (2019). Obstetric violence: Clinical staff perceptions from a video of simulated practice. *European Journal of Obstetrics & Gynecology and Reproductive Biology: X, 1*. Disponível em: <https://www.sciencedirect.com/science/article/pii/S2590161319300432>. Acesso em: 05 ago. 2022.
15. Antunes, M. D. C., & Martins, W. (2022). Nursing assignments in the face of obstetric violence. *Revista Científica Multidisciplinar, 3*(8). Disponível em: <https://recima21.com.br/index.php/recima21/article/view/1793/1389>. Acesso em: 08 jul. 2022.