

## **UNPLANNED PREGNANCY IN QUILOMBOLA COMMUNITIES: PERCEPTION OF ADOLESCENTS**

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### **ABSTRACT**

**Objective:** to understand the perception of adolescents living in Quilombola community regarding unplanned pregnancy and its repercussions on community life.

**Methodology:** descriptive, qualitative research using the creative and sensitive method through the dynamics of creativity and sensitivity: Shortening Distances and Body Knowledge. Participants were adolescents living in a Quilombola community in the rural area of the municipality of São Mateus, Espírito Santo (Brazil). The meetings took place at weekends, on three Sundays in December 2018. The results were organized by the Iramuteq® software and the images and narratives were developed by the content analysis method.

**Results:** nine adolescents, catholic, single, with a family income of less than one minimum wage, living in their own home and living on subsistence agriculture participated. They have access to the public health service, which they use when they get sick. The *software* demonstrated that the words “pregnant” and “work” are central to their narratives. The experiences of adolescents were expressed by the following categories: Repercussion of pregnancy for adolescents in the Quilombola community; Rights of pregnant women in the community; and Behavior of families and adolescents towards pregnancy.

**Conclusion:** the understanding of unplanned pregnancy, taking into account racial ethnic aspects, makes it possible to develop health education strategies that respect the cultural and social aspects of this community, so that the actions can be successful, which is a great challenge for the professionals involved.

**DESCRIPTORS:** Adolescent pregnancy. Pediatric nursing. Behavior and behavioral mechanisms. Group with ancestors from the African continent. Health policies.

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## GRAVIDEZ NÃO PLANEJADA EM COMUNIDADES QUILOMBOLAS: PERCEPÇÃO DOS ADOLESCENTES

### RESUMO

**Objetivo:** compreender a percepção de adolescentes residentes em comunidade Quilombola quanto à gravidez não planejada e suas repercussões na vida em comunidade.

**Metodologia:** pesquisa descritiva, qualitativa utilizando o método criativo e sensível por meio das dinâmicas de criatividade e sensibilidade: Encurtando Distâncias e Corpo Saber. Participaram adolescentes residentes em comunidade Quilombola de zona rural do município de São Mateus, Espírito Santo (Brasil). Os encontros ocorreram nos finais de semanas, três domingos do mês de dezembro de 2018. Os resultados foram organizados pelo *software* Iramuteq® e as imagens e narrativas desenvolvidas pelo método de análise de conteúdo.

**Resultados:** participaram nove adolescentes, católicos, solteiros, com renda familiar de menos de um salário mínimo, residentes em casa própria e que vivem da agricultura de subsistência. Possuem acesso ao serviço público de saúde, que utilizam, quando adoecem. O *software* demonstrou que as palavras “gravidar” e “trabalhar” são centrais em suas narrativas. As experiências e vivências dos adolescentes foram expressas pelas categorias: Repercussão da gravidez para os adolescentes na comunidade Quilombola; Direitos da gestante na comunidade; e Comportamento das famílias e dos adolescentes frente à gravidez.

**Conclusão:** a compreensão da gravidez não planejada, levando em consideração aspectos étnicos raciais, possibilita elaborar estratégias de educação em saúde que respeite os aspectos culturais e sociais dessa comunidade, para que se tenha êxito nas ações, sendo esse um grande desafio para os profissionais envolvidos.

**DESCRITORES:** Gravidez na adolescência. Enfermagem pediátrica. Comportamento e mecanismos comportamentais. Grupo com ancestrais do continente africano. Políticas de saúde.

## EMBARAZO NO PLANIFICADO EN COMUNIDADES QUILOMBOLA: PERCEPCIÓN DE ADOLESCENTES

### RESUMEN

**Objetivo:** comprender la percepción de las adolescentes que viven en la comunidad Quilombola sobre el embarazo no planificado y sus repercusiones en la vida comunitaria.

**Metodología:** investigación descriptiva, cualitativa utilizando el método creativo y sensible a través de la dinámica de la creatividad y la sensibilidad: Acortando distancias y conocimiento corporal. Los participantes fueron adolescentes residentes en una comunidad Quilombola en el área rural del municipio de São Mateus, Espírito Santo (Brasil). Las reuniones tuvieron lugar los fines de semana, los tres domingos de diciembre de 2018. Los resultados fueron organizados por el *software* Iramuteq® y las imágenes y narrativas fueron desarrolladas por el método de análisis de contenido.

**Resultados:** participaron nueve adolescentes, católicos, solteros, con un ingreso familiar menor a un salario mínimo, que viven en su propia casa y viven de la agricultura de subsistencia, que tienen acceso al servicio público de salud, que utilizan cuando se enferman. El *software* demostró que las palabras “embarazada” y “trabajo” son fundamentales para sus narrativas. Las experiencias de las adolescentes se expresaron en las siguientes categorías: Repercusión del embarazo para las adolescentes de la comunidad Quilombola; Derechos de las mujeres embarazadas en la comunidad; y Comportamiento de familias y adolescentes hacia el embarazo.

**Conclusión:** la comprensión del embarazo no planeado, tomando en cuenta los aspectos étnicos raciales, permite desarrollar estrategias de educación en salud que respeten los aspectos culturales y sociales de esta comunidad, para que las acciones sean exitosas, lo cual es un gran desafío para los profesionales involucrado.

**DESCRIPTORES:** Embarazo adolescente. Enfermería pediátrica. Comportamiento y mecanismos conductuales. Grupo con ancestros del continente africano. Políticas de salud.

## INTRODUCTION

For the World Health Organization<sup>1</sup>, adolescence is the period of life that lasts between 10 and 19 years of age, with its subdivisions between minors (10 to 14 years) and older (15 to 19 years). It is a phase of life in which changes occur ranging from bodily changes to the need to adapt to the organization of psychological and environmental structures, imposed by the socio-economic-cultural environment in which one lives<sup>1</sup>. In this sense, thinking about adolescent health implies reflecting on the various ways in which they live within their reality. In turn, it leads to a movement of (re-)thinking about health and health education practices of this public which has its own specificities and is going through one of the most difficult stages, which is the entry into adulthood<sup>2</sup>.

In Brazil, in 2015, there were three million births to adolescent mothers between 10 and 14 years of age, highlighting the need for urgent commitment of the authorities and society to reverse this problem<sup>3</sup>.

Although the Ministry of Health recorded a 17% reduction in the incidence of teenage pregnancy, in Brazil, in 2017<sup>4</sup>, unplanned pregnancy is considered one of the major public health problems, because it is related to the increase in infant mortality.

Unplanned pregnancy is a pregnancy that is not planned by the woman, and can also be called unwanted and inopportune, when it happens at a time of life that is considered inappropriate. It can also be considered as an accident or a mistake that happened in the wrong time and that was not planned for a certain stage of life<sup>5</sup>.

Regarding the factors that predispose to the increase in unplanned pregnancy in adolescence, social, economic, family, gender, cultural and educational issues stand out as well as difficulties in accessing family planning programs<sup>6-7</sup>.

As for the repercussion of an unplanned pregnancy in adolescence, it affects both the adolescent and the newborn. Adolescents, especially girls, may present undesirable and distinct feelings, such as nervousness, sadness and fear, abandonment of studies, leisure activities and living with friends because they start to devote most of their time to the daily care of the child. It can also affect the physical and psychological health of the newborn<sup>8</sup>.

In this sense, it is necessary to make it clear that gender issues are a strong marker of teenage pregnancy, given that girls are not recognized as sexual people in our patriarchal society, which inhibits adolescents from saying "no" to unwanted sex, negotiating the practice of safe intimate relationship and having access to contraceptive methods and condoms. In addition, the impact of teenage pregnancy is also not equitable for boys and girls, as girls move away from school to care for their children and are usually abandoned by their partners. This reality has been combated through policies such as the United Nations Development Program (UNDP), which has sustainable development goals (SDGs) such as gender equality and empowerment of women and girls<sup>9</sup>.

In an attempt to reduce adolescent vulnerability, the National Week for the Prevention of Teenage Pregnancy was instituted, through Law No.13,798/2019, which aims to disseminate information on preventive and educational measures that can effectively contribute to the reduction of teenage pregnancy<sup>10</sup>.

The literature indicates that the outcome, pregnancy, is not the same for all adolescents, but studies are conducted with young residents in the urban environment and of white race who have easier access to the health service and information, leaving out residents in rural areas and blacks, who are the majority (54% are black or brown), according to the last census of the Brazilian Institute of Geography and Statistics<sup>11</sup>. The Annual Report on Racial Inequalities in Brazil reports a decrease in the quality and life expectancy of the black population, and less access to health services, especially among black youths, when compared to the rest of the population.

Scientific evidences indicate that racial inequalities directly interfere with reproductive health in young women, and in access to health care services<sup>12</sup>. Therefore, it is essential to know this public better since the health of the black population and traditional communities is one of the themes that composes the Research Priorities Agenda of the Ministry of Health<sup>13</sup>, due to its singularities and the need to prevent harm.

In this sense, Quilombola communities, understood by people of African descent according to criteria of self-attribution, permeated by cultural singularities, suffer from situations of social vulnerability, which impact their health conditions, especially those located in rural areas<sup>14</sup>.

This study is based on Freirian precepts, with attention to the experiences of the individual and their reading in relation to other cultures, with respect and dialogue in face of the specificities of the historical-cultural context of the local reality, as each one presents a way of being and living in the world. It starts from the assumption that human beings are historical and the more they reflect critically on their existence, the more they can influence themselves and become freer<sup>15</sup>.

Thus, there is a need to work on the theme of unplanned pregnancy within the Quilombola community, in understanding the way of life and the particularities of this public, in order to improve health care, education and public policies aimed at the real needs of this population. population. Therefore, the objective of the study is to understand the perception of adolescents living in the Quilombola community regarding unplanned pregnancies and their repercussions on community life.

## METHOD

This is a participant research<sup>16</sup> with a qualitative approach, which used the Sensitive Creative Method (SCM) of group research based on art<sup>17</sup>. The SCM favors the expression of reflexive criticism of the stages of transitive consciousness and dialogicity belonging to the investigate human phenomenon. This method aims to access and approximate the experience centered on the concrete existential conditions of the social life of the participants with the object investigated, in addition to being corroborated with the use of Frerian conceptions to value the singularity, realization and valorization of the experiences of the collectivity. It presents a diversity in the construction of knowledge, in addition to its production being made from the common census and also from scientific knowledge<sup>17</sup>.

The method also allows the participant, through creativity and sensitivity, to express their thoughts, actions and concepts about the world and of themselves, using Creativity and Sensitivity Dynamics (CSD). The CSD consists of five moments of the SCM, the first being the individual and collective presentation, making the material available for the activity to be carried out in the environment, providing the generating question for debate (QGD) and explaining the activity; the 2nd moment for the production of the suggested/explained activity; the 3rd exhibition of artistic productions, when they feel ready; in the 4th, group discussion takes place, based on the generating question; and in the 5th moment, the researcher summarizes the set of themes and subthemes, and the group validates. The research was carried out in the oldest Quilombola community of São Mateus, founded in 1822, in the rural area, on the banks of the *Cricaré* River in the region known as *Sapê do Norte*, with an area of 2,543 km<sup>2</sup>, which is 44 kilometers from the city, north of the state of Espírito Santo (Brazil). Resolution no. 466/2012 of the National Health Council was respected in order to carry out this research.

The community leadership and the community health agent distributed invitations to the families of the adolescents, to a meeting in the local Catholic Church, on the first Sunday of December 2018, where the research proposal and invitation to parents and adolescents to participate in the study was exposed given. Afterwards, the content of the Terms (Free and Informed Consent, for parents/guardians and adolescents) of the research was read and explained, followed by the collection of signatures, in agreement with their participation. The adolescents were entitled to anonymity, that is, their name was not exposed, and were identified by the acronym AD followed by gender and order (ADM1, ADF4 ...).

Nine adolescents participated in the research, three boys and six girls in all stages, who met the inclusion criteria: attending elementary school or high school in public school, rural, living in the community, being in the age group between 10 and 19 years<sup>1</sup>, having cognitive and motor ability to participate in the CSD. Adolescents outside the minimum schooling system were excluded.

Data generation was implemented with two CSDs, whose minimum duration was 40 minutes and maximum of 1 hour and 30 minutes, without interference from the research team. In the first dynamic - "Shortening distances", held at the first meeting, the HQ "I am... I want to..." favored the formation of the group identity of the participants for the purposes of the research. In addition, it helped with the integration and construction of the feeling of belonging in the group, involving the participants, the researcher and the research assistants. Free time was given for them to complete the sequence of questions in an individual assignment. At the end, each participant presented and discussed, in groups, what they produced, summarized and validated the generating themes encoded in each participant's biography, and at that moment, it was revealed that in the group there were brothers and all the participants were blood relatives, especially, cousins.

In the second dynamic, "Body knowledge, the QGD: "What is your perception of unplanned pregnancy in adolescence"? brought the latent memory of the perception of adolescents living in the Quilombola community regarding unplanned pregnancy and its behavioral manifestations to imagine the situation of an unplanned pregnancy. The application of this dynamic helps to understand the adolescents' view of the body in its physical and social dimension as the main way of access to the care experience<sup>18</sup>. With the material supplied (cardboard, pen and glue) and around 118 words, the group elaborated the artistic production. The concern was to provide words that involved the topic of pregnancy. There was a natural separation of boys and girls and each group was invited to draw the silhouette of a pregnant woman on the card, from there the group focused on the artistic production, pasting the keywords offered by the researcher or writing new ones, in the parts of the body that they considered pertinent, in order to respond to the QGD, during the necessary free time. During the manual activity, the group talked and shared the material provided.

The meetings took place in one of the two classrooms of the community school on three Sundays in December 2018. The research took place over the weekend so that participants who studied at the Agricultural Family School, on a weekly alternation basis, could participate.

The textual corpus was organized by the Iramuteq® 0.7 Alfa 212 software which is a free computer program, which has been increasingly present in studies in the area of Human and Social Sciences, because it allows different forms of statistical analysis on textual corpus and on tables of individuals by words<sup>19</sup>. Its scope contains five different analyses, named: classical order statistics of texts; research of specific groups; classification by hierarchy in the descending perspective; analysis of similarities and words in cloud. Using the latter, in the processing of the collected data, graphically describing the grouping of keywords culminating in the research. It is a simple lexical analysis, whose structure of the figure is created according to the numerical number of occurrences that each word has in the result of the analysis carried out by the software, the larger and more centralized a word is in the cloud, the greater the degree of its enunciation by the subjects and the further away and smaller its size, the lower its degree of evocation<sup>20</sup>.

Afterwards, thematic content analysis<sup>21</sup> of the textual corpus (written and imagery) of the CSD was performed, with successive readings of the material, words, expressions, textual fragments of the experiences and experiences of adolescents about unplanned pregnancy were coded, expressed in the images of the artistic productions that were grouped in the themes: repercussion of pregnancy for adolescents in the Quilombola community; rights of pregnant women in the community and behavior of families and adolescents towards pregnancy in the Quilombola community. To conclude the fieldwork, two principles of data saturation were adopted: repetition and the relevance of the participants' narratives<sup>21</sup>.

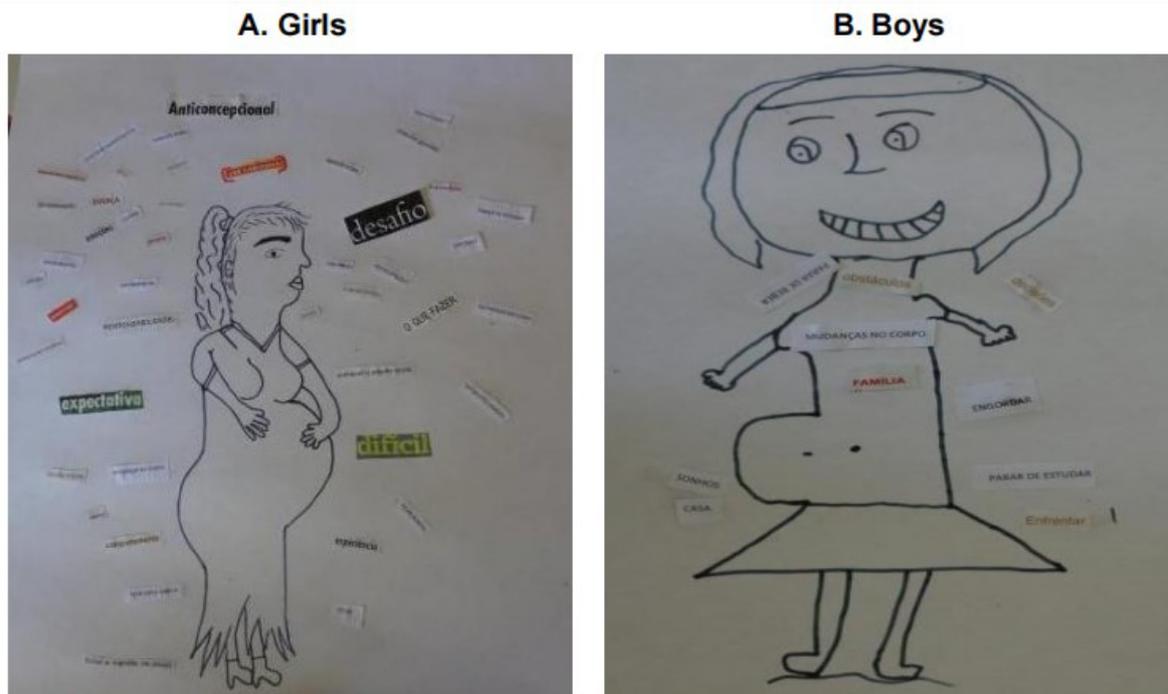
## RESULTS

The six girls and the three participating boys were between 11 and 15 years old, Catholics and all were single. Three studied at the community's multi-teaching school (pre-5th grade of elementary school) and six at the Agricultural Family School (6th grade elementary school to high school). The nine lived in their own home and had a monthly family income below one minimum wage. The financial support of families came from work in the small properties where they planted conilon coffee, black pepper and fruits (coconut, jackfruit, banana, mango, avocado, among others) and the social benefit was provided by the Federal Government Income Transfer Program (*Bolsa Família*). Regarding access to the health service, all used the public health service, which is 12 km away, which is only used when they get sick, likely due to the difficulty of transport, because the community is in rural area and is reached by a dirt road, becoming even more difficult due to bad conditions such as with potholes, erosions and quagmires in the rainy season.

The dynamics "Body knowledge" was applied to know the experiences of adolescents about unplanned pregnancy and the repercussions on community life that were expressed by artistic production, and the corpus of analysis was the images and narratives of the young participants. Thus, the mosaic belonging to the girls' artistic production revealed the silhouette of the pregnant woman (Figure 1 A) surrounded by 45 words (Figure 1 Aa) expressing how much pregnancy affects the girl's life. On the other hand, the boy's mosaic (Figure 1 B) revealed the use of 10 words (Figure 1 Bb), which was 4 times smaller when compared to the girls, evidencing the impact of unplanned pregnancy on their lives. It was also noted that the words "obstacles", "family" and "changes in the body" were placed in the pregnant woman's body, suggesting central words and more prominent for the group of boys, with the other words fixed around the silhouette of the pregnant woman.

The narratives of the adolescents, during the group discussion, expressing experiences with unplanned pregnancy, were organized by the software that divided the corpus into 19 texts, 309 occurrences, 131 forms, 79 hapax, which was 25.57% of the occurrences in 60.31% of the forms – hapax, which are the words presented in the texts only once. The average number of occurrences per text was 1,626.

In lexical analysis, using the word cloud, which groups them and organizes them graphically, depending on their frequency, we obtained the comparison of similar words or expressions that were most repeated. Figure 2 presents 14 more frequent words than the others, thus demonstrating their prominence in the research analysis corpus. Thus, it was observed that the word "*gravidar*" was highlighted followed by "work", that is, in the opinion of adolescents, pregnancy mainly affects getting a job to earn money and support the child, a statement that is supported by other words less frequently, such as responsibility, cohabitating (which for them means living together with someone without legal or formal ties), stop studying, responsibility of boy and girl. It is important to point out that the term "*gravidar*" does not exist, only the verb to become pregnant, but the system, due to its French origin, has limited Portuguese vocabulary.



a) Difficult, expectation, contraceptive, what to do? Stop drinking, commitment, healthy eating, death, body change, rights, etc. b) Obstacles, family, changes in the body, stop drinking, gain weight, stop studying, confront, home, dreams and decisions.

Figure 1 – Artistic productions of five girls (A) and three boys (B) and words related to pregnancy chosen by girls (Aa) and boys (Bb) adolescents from a Quilombola community, CSD “Corpo saber”. São Mateus, ES, Brazil, 2018.

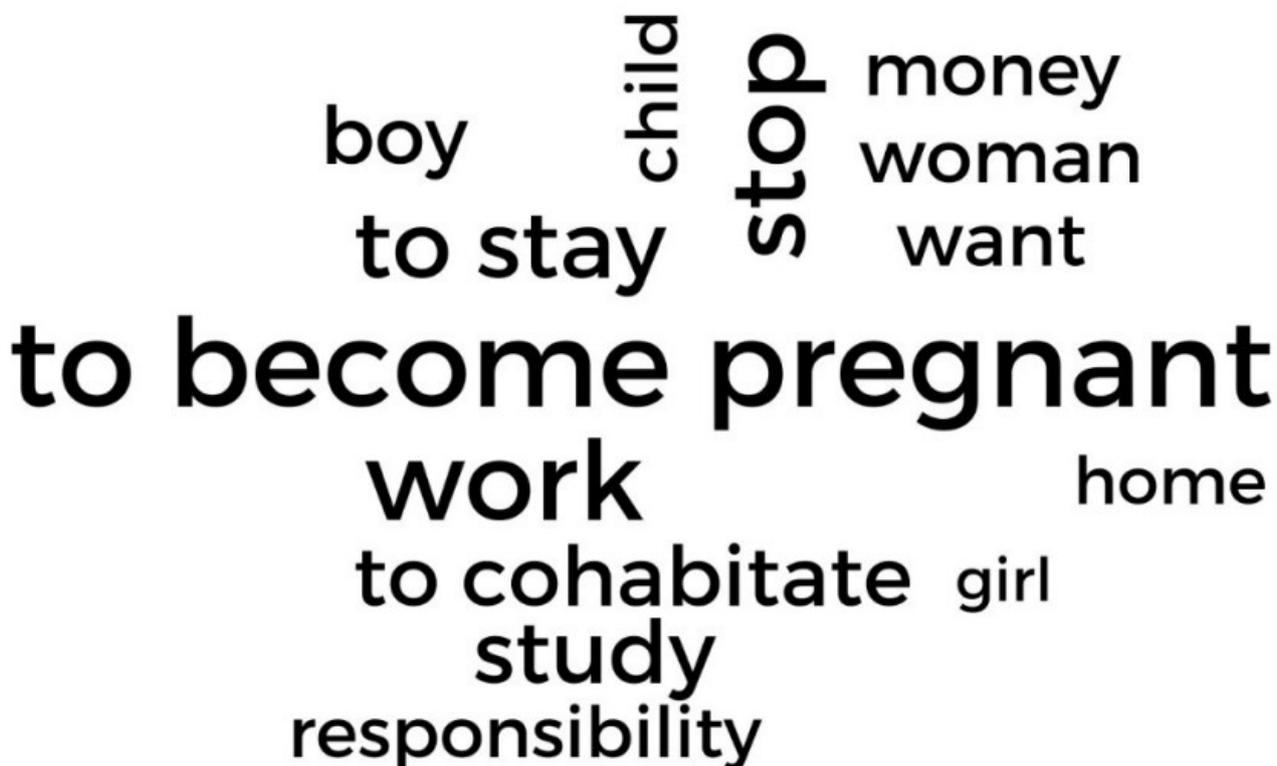


Figure 2 – Word Cloud, São Mateus, ES, Brazil, 2019. Note: Organized based on the Iramuteq® 0.7. Software

In the theme “Repercussion of pregnancy for adolescents in the Quilombola community”, the narratives of the adolescents revealed that unplanned pregnancy brings changes in the adolescent’s life and one of the issues addressed concerns the responsibility, especially of girls. There was insecurity of something that is unknown and the criticism that a girl made when revealing that some of them have no commitment in caring for their child. [...] *The first child is a lot of responsibility, you don’t know what it’s going to be like!* (ADF8).

[...] *Everything changes because you have to have more responsibility!* (ADF4). [...] *There are many pregnant women who have no commitment to their children, who have no responsibility!* (ADF4).

The criticism is more evident and characterized with the narrative of a girl when she states that the adolescent continues to drink alcohol, even during pregnancy. [...] *There are many girls who drink beer and when she gets pregnant it is a responsibility... yet they continue to drink!* (ADF4).

Another repercussion, in the pregnant adolescent’s life, is related to the symptoms of pregnancy, according to the narrative of one of the young participants. [...] *Their body changes, they become swollen! Their feet swell, they have nausea, these things* (ADF8).

Unplanned pregnancy has repercussions on several changes in the lives of boys and girls in the Quilombola community and is related to dropping out of school to work on family property or another to support the child who will be born. It is observed, according to the report of boys and girls, that the child’s support is male competence; while the role of child care is the responsibility of the woman, evidencing the gender issues that are present in their daily life. [...] *many stop studying* (ADF6).

[...] *the girl and the boy study/, then the girl becomes pregnant with the boy/, the boy has to stop studying to get a job and the girl also stops studying* (ADM1).

[...] *you’re going to have to stop studying!* [...] *the time you’ve stopped studying is going to be something you’re going to lose!* (ADM2). [...] [...] *Then the boy has to work if not how will he support his son? He works on the farm!* (ADM3).

[...] *Usually the mother is the one who raises the child and participates more, the man just cares about the farm!* (ADF6).

The narrative of a boy showed, even more, the gender difference existing in the Quilombola community, where the adolescent assumes the role of “man”, replicating attitudes considered as common, in the social environment where they live. Pregnancy can be configured as a rite of passage from childhood to adulthood for boys and girls in the community, marked by the abandonment of school to assume responsibility for the care of the child and domestic activities, for girls, and the acquisition of employment for the support of the family, for the boys.

[...] *the man is the provider//, then he gets the salary at work, gives a little money for women to make purchases and the rest goes to the farm!* (ADM1).

“Rights of pregnant women in the community” allowed us to understand the rural way of life of this Quilombola group, marked by the difficulty in maintaining a pregnancy in relation to the economic situation and the impediment of the girl to work, in the rural environment, because it is considered an arduous craft, offering risks to pregnancy, according to the participants. [...] *Many pregnant women are not able to buy good food!* [...] *They don’t allow pregnant women in the fields! She could fall or get hurt! Then they stay at home asleep, doing nothing* (ADF4).

During the dialogue and group discussion, they exposed the importance of the rights of pregnant adolescents, such as access to health, being accepted, etc... [...] *Here, it is the community health agent who schedules the first prenatal consultation.* [...] *Because if she is pregnant she is entitled to everything, example welcoming, family...* (ADF4; ADF8).

In the theme “Behavior of families and adolescents faced with pregnancy in the Quilombola community”, the participants revealed that, in the community, it is not in the habit of marrying, but rather of “joining”/“cohabitating”, without thinking about the near future, and that usually the girl is

the one who moves to the boy's house. [...] *here in the community, adolescents cohabit with each other* (ADF4). [...] *don't get married!* (ADF6).

[...] *Look here it's all kind of crazy! They live together early on, without wanting to know what's ahead and then they separate, they say they don't want to be together anymore* (ADF8). [...] *they always start living with the family! // but then they build their own home, and sometimes the child stays with the grandmother!* (ADF8). [...] *when you have a pregnant woman, the woman moves into the man's house!* (ADM3).

As revealed during the group discussion, it was evident that the adolescent is welcomed by the family in the community, if the pregnancy occurs in adolescence. It is common for the community to support these adolescents who are about to start a family. [...] *here in the community, everyone supports and welcomes pregnant women* (ADF4).

It can be seen, according to the above report, that teenage pregnancy is a period of great change, mainly due to the interruption of studies to assume work to support the new family. However, with the support of the community, family and partner, accompanied by the rights and care of the adolescent, pregnancy becomes a less arduous experience.

## DISCUSSION

The Quilombola community, where the research was developed, has significant cultural and social characteristics, such as, for example, conservative and traditional principles based on Catholic philosophy, reproduction of values and behaviors acquired in the family context and a strong patriarchal culture.

Thus, the images of the pregnant women's silhouette, accompanied by words associated with the issue of pregnancy, represented by adolescents, in their artistic productions, revealed, in the group's imagination, that the repercussions of an unplanned pregnancy in the Quilombola community have a greater impact on the lives of girls than in that of boys.

This is in line with a study<sup>18</sup> that highlights that this gender iniquity is a socially constructed stereotype, especially in rural areas, whose social relations are based on patriarchal values forged by the male, where traditionally, from Brazilian colonization to the present day, one has the idea that women are responsible for domestic activities and man to provide for the family.

In this sense, in our culture, the repercussion of a teenage pregnancy requires the responsibility of the girl in caring for her child, while the boys are responsible for seeking a job to support the family, a fact that is clearly represented by the adolescents in the research.

Social roles are well defined in the Quilombola community, where men perform agricultural activities, the basis of the rural economy; and women have a greater participation in domestic tasks<sup>22</sup>. In the participating community, inequality between genders was observed, in which the female is submissive to the male, a value hereditarily cultivated and which can influence the adolescent's lack of autonomy, regarding the idea productive rights; it represents a historical-cultural construction of Brazilian society, in the sexist molds, in which the man is superior to the woman<sup>23</sup>.

Ethnographic study<sup>24</sup> developed in the same Quilombola community of this research, reveals that there is a tendency of the younger members to follow the professional model of parents and/or their ancestors, where they are stimulated by the family and the Agricultural Family Schools, which in addition to teaching disciplines of the curricular component, stimulate learning and professional training for the young person in the field, qualifying them both to continue their studies, as well as to dedicate themselves to family farming or other properties. Those who wish to acquire another type of training, seek the headquarters of the municipality that is 44 kilometers from the community, a practice not common due to the related high costs, mainly, to transportation and food. Still, some women occasionally work in agricultural activities, being paid per day worked.

Body changes and pregnancy symptoms have repercussions on work activities in the swidden and may become an impediment to working in the field, being considered an acquired right for pregnant adolescents, because it involves a risk to the health of the baby and pregnant women. This behavior is similar in traditional indigenous communities already studied<sup>25</sup>, demonstrating the understanding that work in the field requires physical effort that places pregnant women in a vulnerable situation.

Another repercussion of pregnancy in adolescence is related to the abandonment of studies, depending on the social class in which the adolescent is inserted. In Brazil, adolescents who belong to the upper classes, this period can be dedicated exclusively to studies and experimentation, without major emotional, economic and social consequences. In the lower classes, there are more risks and consequences for adolescents, this being a period that simply precedes the constitution of the family itself, which may affect, especially, youth and the possibility of elaborating a stable life project<sup>26</sup>.

However, what was observed in the community in question is that pregnancy is synonymous with responsibility, due to the fact that they become parents, and the plans for the future, for most of the interviewees, would be to work on the family's property or in other areas. properties to guarantee the livelihood of his family.

Alcohol consumption in adolescence was also evidenced in the discourses, where the girl must stop drinking so as not to cause harm to her child, who considers herself a responsible attitude for adolescents. A Study<sup>24</sup> showed that alcohol in the Quilombola community is culturally and socially accepted. Alcohol consumption is more evident among men, represented by the image of their father, uncle and grandfather, than among women. Men consume alcohol in their backyards, in the bars and on the community soccer field, while they consume mainly at community parties. The experimentation and use of alcohol among adolescents are attitudes that, especially, boys reproduce as part of the rites of passage into adulthood, in the construction of their masculinity, taking as a reference model living in a consumer environment permissive and a challenge for health professionals, in health promotion and education, with these adolescents.

In relation to health care, the people who live there have the primary health care provided by the Basic Health Unit, which is 12 kilometers from the community. According to the adolescents, the community health agent, who lives in the community itself, schedules the first prenatal consultation, considered one of the rights of pregnant women, in addition to the right to care, family and quality food.

Thus, it is noted that pregnant women in the community have access to the health unit for prenatal care, which has the function of monitoring the development of the pregnancy. However, studies show that pregnant adolescents have difficulties in attending prenatal care with less than six routine visits, bringing risks to the health of adolescents and children, in addition to the repercussion for family and society, increasing the costs to the health system, by raising mortality rates, in addition to impacting the future of those involved<sup>7</sup>. Regarding the behavior of families, it is clear that although unplanned pregnancy in adolescence is a time of great change, the Quilombola family welcomes the adolescent. This acceptance is initially due to the physical union of the couple, which usually occurs in the boy's house.

Studies show that unplanned pregnancy in adolescence is not a homogeneous phenomenon, because it all depends on the social situation in which the adolescent is inserted. Families of middle and upper social class, not Quilombolas and residents in urban areas, support adolescents to ensure that pregnancy does not harm the path of schooling and professionalization; already in the lower social class, adolescents stop studying to get a job, leading to low wages and lack of professionalization<sup>26</sup>.

Family support for adolescents who become young parents is extremely important, as they are going through a critical moment, full of uncertainties and insecurities as to what to do<sup>27</sup>. In most cases, when a teenager discovers that she is pregnant, there is not much doubt about the baby's welcome: it will be welcomed, either by her parents or grandparents. The relevant issue is that, with rare exceptions, family members do not know how to deal with the new situation<sup>28</sup>.

The experience of an early and unplanned pregnancy is often full of significant transformations, with implications in the family environment, leading to misadjustment, driving the family and adolescent to reorganize their life projects<sup>28</sup>. The transformations resulting from a pregnancy of this nature can be identified as a problem for adolescents, where they will start a family that will affect, especially, their youth and the possibility of developing a stable life project<sup>29</sup>, for adolescents from urban areas, not Quilombolas. However, for those from the Quilombola community, it was evident that, despite the reported repercussions (responsibility, abandonment of studies, acquisition of jobs to support the family, unity of the adolescents), families come together to welcome and support young people in their needs.

Although teenage pregnancy is not seen as a problem, in itself by the participants of this research, it is known that adolescence is a phase of life defined by stimuli that influence habits and behaviors, exposing this population to various vulnerabilities. In rural areas, where there is a greater difficulty in accessing health services and contraceptive methods, there is a need to develop strategies together with education and civil society in order to perform effective actions with adolescents, discussing and informing that teenage pregnancy can present maternal, fetal and neonatal complications, in addition to aggravating existing socioeconomic problems<sup>7</sup>. Thus, it is relevant that schools partner with health services and develop adequate knowledge, awareness and prevention work for teenage pregnancy, offering moments of dialogue, listening and information as a means of guiding this public about the risks and consequences of this occurrence<sup>30</sup>.

One of the main limitations of the study is related to the generalization of the data, since it was developed in a Quilombola community. However, the objective of understanding the perception of adolescents living in the Quilombola community regarding unplanned pregnancy and its repercussions on community life was achieved with the use of the SCM, which favored the expression of reflexive criticism, and it is possible to observe that early pregnancy, in the adolescence phase in the Quilombola community, differs from young people inserted in other contexts, cultures and social classes.

## CONCLUSION

This study found that rural life in the Quilombola community presents its own aspects, the identity of a people, which permeates and guides the daily life of families, and that unplanned pregnancy in adolescence has its repercussions, but is not seen by the participating adolescents as a problem and, rather, as a transitional phase of life, marked by the abandonment of studies, acquisition of employment, stable union, acquisition of responsibilities that needs the support of families.

Thus, health education strategies among adolescents living in Quilombolas communities must respect the cultural and social aspects of this locality in order to succeed in the actions. However, it is a great challenge for professionals involved in these strategies, since there is a fine line between respect for these singularities and maternal, fetal and neonatal complications that may involve a pregnancy in adolescence, in addition to the challenge for the implementation of the Sustainable Development Goal, with regard to gender equality and the empowerment of women and girls in the world, in a patriarchal community.

This research can contribute to the development of other studies and the creation of new health education strategies, such as the production of educational care technologies, as it is necessary to innovate in adolescent health care policies, adopting methodologies capable of stimulating new truths, modify concepts, practices and behaviors, in search of a healthier life.

## REFERENCES

1. World Health Organization. Young people's health - a challenge for society. Report of a WHO study group on young people and health for all. Technical Report Series 731 [Internet]. Geneve (CH): WHO; 1986 [cited 2020 Jul 21]. Available from: [http://apps.who.int/iris/bitstream/10665/41720/1/WHO\\_TRS\\_731.pdf](http://apps.who.int/iris/bitstream/10665/41720/1/WHO_TRS_731.pdf)
2. Collière MF. Cuidar. A primeira arte da vida. 2nd ed. Loures (PT): Editora Lusociência; 2003.
3. Ministério da Saúde (BR). Diretrizes nacionais de assistência ao parto normal: versão resumida. Brasília, DF(BR): Ministério da Saúde; 2017 [cited 2020 Jul 20]. Available from: [http://bvsms.saude.gov.br/bvs/publicacoes/diretrizes\\_nacionais\\_assistencia\\_parto\\_normal.pdf](http://bvsms.saude.gov.br/bvs/publicacoes/diretrizes_nacionais_assistencia_parto_normal.pdf)
4. Ministério da Saúde (BR). Sistema de Informações sobre Nascidos Vivos – SINASC [Internet]. Brasília, DF(BR): Ministério da Saúde; 2017 [cited 2019 Apr 3]. Available from: <http://tabnet.datasus.gov.br/cgi/tabcgi.exe?sinasc/cnv/nvuf.def>
5. Evangelista CB, Barbieri M, Silva PLNJ. Unplanned pregnancy and the factors associated with the participation in the family planning program. *Rev Pesq Cuid Fund Online* [Internet]. 2015 [cited 2019 May 17];7(2):2464-74. Available from: <https://doi.org/10.9789/2175-5361.rpcfo.v7.3633>
6. Araújo AKL, Nery IS. Knowledge about contraception and factors associated with pregnancy planning in adolescence. *Cogitare Enferm* [Internet]. 2018 [cited 2019 Jul 10];23(2):e55841. Available from: <https://doi.org/10.5380/ce.v23i2.55841>
7. Azevedo AEBI. Guia prático de atualização: prevenção da gravidez na adolescência. *Adolesc Saúde* [Internet]. 2018 [cited 2019 Aug 15];15(Suppl 1):86-94. Available from: [http://www.adolescenciaesaude.com/detalhe\\_artigo.asp?id=763](http://www.adolescenciaesaude.com/detalhe_artigo.asp?id=763)
8. Tabora JA, Silva FC, Ulbricht L, Neves EB. Consequências da gravidez na adolescência para as meninas considerando-se as diferenças socioeconômicas entre elas. *Cad Saúde Colet* [Internet]. 2014 [cited 2018 Dec 2];22(1):16-24. Available from: <https://doi.org/10.1590/1414-462X201400010004>
9. Santos BR, Magalhães DR, Mora GG, Cunha A, eds. Gravidez na adolescência no Brasil: vozes de meninas e de especialistas. Brasília, DF(BR): Indica; 2017.
10. Brasil. Lei nº 13.798, de 3 de janeiro de 2019. Acrescenta art. 8º-A à Lei nº 8.069, de 13 de julho de 1990 (Estatuto da Criança e do Adolescente), para instituir a Semana Nacional de Prevenção da Gravidez na Adolescência. *Diário Oficial da União, Brasília, DF(BR)*; 04 Jan 2019 [cited 2020 Mar 20]. Available from: <http://pesquisa.in.gov.br/imprensa/jsp/visualiza/index.jsp?data=04/01/2019&jornal=515&pagina=3>
11. Santos NLB, Guimarães DA, Gama CAP. A Percepção de mães adolescentes sobre seu processo de gravidez. *Rev Psicol Saúde* [Internet]. 2016 [cited 2019 June 20];8(2):83-96. Available from: [https://doi.org/10.20435/2177-093X-2016-v8-n2\(07\)](https://doi.org/10.20435/2177-093X-2016-v8-n2(07))
12. Cotrim IA, Silva LJ, Souza R. Cenários da saúde da população negra no Brasil. *Cad Saúde Pública* [Internet]. 2017 [cited 2019 June 22];33(10):e00143517. Available from: <https://doi.org/10.1590/0102-311x00143517>
13. Ministério da Saúde (BR). Agenda de Prioridades de Pesquisa do Ministério da Saúde. Brasília, DF(BR): Ministério da Saúde; 2018 [cited 2019 Feb 02]. Available from: [https://bvsms.saude.gov.br/bvs/publicacoes/agenda\\_prioridades\\_pesquisa\\_ms.pdf](https://bvsms.saude.gov.br/bvs/publicacoes/agenda_prioridades_pesquisa_ms.pdf)
14. Rezende LC, Caram CS, Caçador BS, Brito MJM. Nurses' practice in quilombola communities: an interface between cultural and political competence. *Rev Bras Enferm* [Internet]. 2020 [cited 2020 Jul 20];73(5):e20190433. Available from: <https://doi.org/10.1590/0034-7167-2019-0433>

15. Galli EF, Braga FM. O diálogo em Paulo Freire: concepções e avanços para transformação social. *Quaestio* [Internet]. 2017 [cited 2019 June 20];19(1):161-80. Available from: <https://doi.org/10.22483/2177-5796.2017v19n1p161-180>
16. Dias S, Gama A. Community-based participatory research: foundations, requirements and challenges for researcher. *Rev Enferm UFSM* [Internet]. 2019 [cited 2020 Jan 22];9:e48. Available from: <https://doi.org/10.5902/2179769232536>
17. Cabral IE, Neves ET. Pesquisar com o método criativo e sensível na enfermagem: fundamentos teóricos e aplicabilidade. In: Lacerda RM, Costenaro RGS, eds. *Metodologia da pesquisa para a enfermagem: da teoria à prática*. Porto Alegre, RS(BR): Moriá; 2016. p. 325-50.
18. Balbinotti I. A violência contra a mulher como expressão do patriarcado e do machismo. *Rev Esmesc* [Internet]. 2018 [cited 2018 Mar 25];25(31):239-64. Available from: <https://doi.org/10.14295/revistadaesmesec.v25i31.p239>
19. Salvador PTCO, Gomes ATL, Rodrigues CCFM, Chiavone FBT, Alves KYA, Bezerril MS, et al. IRAMUTEQ nas pesquisas qualitativas brasileiras da área da saúde: scoping Review. *Rev Bras Promoç Saúde* [Internet]. 2018 [cited 2019 Feb 01];31(Suppl):1-9. Available from: <https://doi.org/10.5020/18061230.2018.8645>
20. Kami MTM, Larocca LM, Chaves MMN, Lowen IMV, Souza VMP, Goto DYN. Working in the street clinic: use of IRAMUTEQ software on the support of qualitative research. *Esc Anna Nery Rev Enferm* [Internet]. 2016 [cited 2019 Feb 10];20(3):e20160069. Available from: <https://doi.org/10.5935/1414-8145.20160069>
21. Mendes RM, Miskulin RGS. A análise de conteúdo como uma metodologia. *Cad Pesqu* [Internet]. 2017 [cited 2018 Feb 17];47(165):1044-66. Available from: <https://doi.org/10.1590/198053143988>.
22. Partelli ANM, Cabral IE. Stories about alcohol drinking in a quilombola community: Participatory methodology for creating-validating a comic book by adolescents. *Texto Contexto Enferm* [Internet]. 2017 [cited 2019 Jan 8];26(4):e2820017. Available from: <https://doi.org/10.1590/0104-07072017002820017>
23. Souza VP, Gusmão TLA, Frazão LRSB, Guedes TG, Monteiro EMLM. Protagonism of adolescents in planning actions to prevent sexual violence. *Texto Contexto Enferm* [Internet]. 2020 [cited 2020 Sept 28];29:e20180481. Available from: <https://doi.org/10.1590/1980-265x-tce-2018-0481>.
24. Moraes-Partelli AN, Cabral IE. Images of alcohol in the adolescents' life of one quilombola community. *Rev Bras Enferm* [Internet]. 2019 [cited 2019 Feb 18];72(2):468-75. Disponível em: <https://doi.org/10.1590/0034-7167-2018-0264>
25. Igansi MI, Zatti CA. Gestaç o: conhecendo a realidade das aldeias ind genas no Brasil. *Braz J Surg Clinic Res* [Internet]. 2018 [cited 2019 May 09];23(1):48-52. Available from: [https://www.mastereditora.com.br/periodico/20180606\\_085304.pdf](https://www.mastereditora.com.br/periodico/20180606_085304.pdf)
26. Pinheiro YT, Freitas GDM, Pereira NH. Perfil epidemiol gico de pu rperas adolescentes assistidas em uma maternidade no munic pio de Jo o Pessoa - Para ba. *Rev Ci nc M d Biol* [Internet]. 2017 [cited 2020 Jan 20];16(2):174-9. Available from: <https://doi.org/10.9771/cmbio.v16i2.21906>
27. Nunes GP, Sena FG, Costa CC, Kerber NPC, Zanchi M, Gonalves CV. Gestante adolescente e seu sentimento acerca do apoio familiar. *Rev Enferm UFSM* [Internet]. 2018 [cited 2019 May 08];8(4):731-43. Available from: <https://doi.org/10.5902/2179769227161>
28. Munslinger IM, Silva SM, Bortoli CFC, Guimar es KB. A maternidade na perspectiva de m es adolescentes. *Rev Bras Promo Sa de* [Internet]. 2016 [cited 2019 May 05];29(3):357-63. Available from: <https://doi.org/10.5020/18061230.2016.p357>

29. Rodrigues ARS, Barros WM, Soares PDFL. The prevention of teenage pregnancy in adolescent's view. *Texto Contexto Enferm* [Internet]. 2015 [cited 2020 Jan 21];24(1):30-7. Available from: <https://doi.org/10.1590/0104-07072015000130014>
30. Brum MLB, Motta MGC, Zanatta EA. Bioecological systems and elements that make adolescents vulnerable to sexually transmissible infections. *Texto Contexto Enferm* [Internet]. 2019 [cited 2020 Sept 28];28:e20170492. Available from: <https://doi.org/10.1590/1980-265X-TCE-2017-0492>



## NOTES

### ORIGIN OF THE ARTICLE

Article extracted from the research - Translation of knowledge and narratives of adolescents from the Quilombola Community regarding unplanned pregnancy through the drawing of comics, linked to the Health Research Center, *Universidade Federal do Espírito Santo, Centro Universitário Norte do Espírito Santo*, in 2019.

### CONTRIBUTION OF AUTHORITY

Study design: Moraes-Partelli AN.

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Data analysis and interpretation: Moraes-Partelli AN, Coelho MP.

Discussion of results: Moraes-Partelli AN, Coelho MP.

Writing and/or critical review of the content: Moraes-Partelli AN, Coelho MP, Freitas PSS.

Review and final approval of the final version: Moraes-Partelli AN, Coelho MP, Freitas PSS.

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### APPROVAL OF ETHICS COMMITTEE IN RESEARCH

Approved by the Ethics Committee in Research with Human Beings of the *Universidade Federal do Espírito Santo, Centro Universitário Norte do Espírito Santo*, opinion no.2,934,899, Certificate of Presentation for Ethical Appreciation 99138718.1.0000.5063.

### CONFLICT OF INTEREST

There is no conflict of interest.

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