

LEGAL ABORTION IN CHILDHOOD PORTRAITED BY THE BRAZILIAN WRITTEN PRESS: PERSPECTIVES FOR CARE

ABORTO LEGAL NA INFÂNCIA RETRATADO PELA IMPRENSA ESCRITA BRASILEIRA: PERSPECTIVAS PARA O CUIDADO

ABORTO LEGAL EN LA INFANCIA RETRATADO POR LA PRENSA ESCRITA BRASILEÑA: PERSPECTIVAS PARA EL CUIDADO

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Objective: to identify and interpret, based on the gender and generation categories, the contradictions contained in Brazilian written press reports on a case involving a girl victim of sexual violence and consequent legal abortion. **Method:** this is a documentary study with a qualitative approach. Data were collected through 78 reports published in 2 newspapers from august to october 2020, using a semi-structured instrument. The treatment was performed by thematic content analysis with support from *webQDA*. **Results:** three empirical categories were identified: Child protection expressed in legislation and the discourse of public agents; Conceptions about abortion and the inviolability of the child's integrity; Adult volition versus child autonomy. **Final considerations:** the results reveal the contradictions identified in the case of a Brazilian girl, whose autonomy, as well as the right to protection of childhood and decriminalization of abortion, were not respected.

Descriptors: Abortion. Child Abuse, Sexual. Child Abuse. News. Qualitative Research.

Objetivo: identificar e interpretar à luz das categorias gênero e geração as contradições contidas em reportagens da imprensa escrita brasileira sobre caso envolvendo uma menina vítima de violência sexual e consequente aborto legal. *Método:* estudo documental de abordagem qualitativa. Os dados foram coletados por meio de 78 reportagens publicadas em 2 jornais no período de agosto a outubro de 2020, por meio de instrumento semiestruturado.

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O tratamento foi realizado por análise de conteúdo temática com apoio do webQDA. Resultados: foram identificadas três categorias empíricas: Proteção da infância expressa na legislação e no discurso dos agentes públicos; Concepções sobre o aborto e a inviolabilidade da integridade da criança; Volição dos adultos versus a autonomia da criança. Considerações finais: as contradições identificadas nas reportagens da mídia escrita brasileira no caso de uma menina desvelaram que sua autonomia, assim como o direito à proteção da infância e descriminalização do aborto, não foram respeitados.

Descritores: Aborto. Abuso Sexual na Infância. Maus-Tratos Infantis. Notícias. Pesquisa Qualitativa.

Objetivo: identificar e interpretar, a la luz de las categorías de género y generación, las contradicciones contenidas en los reportajes de la prensa brasileña sobre el caso de una niña víctima de violencia sexual y consecuente aborto legal. Método: estudio documental con enfoque cualitativo. Los datos fueron recolectados a través de 78 reportajes publicados en 2 periódicos de agosto a octubre de 2020, utilizando un instrumento semiestructurado. El tratamiento se realizó mediante análisis de contenido temático con apoyo de webQDA. Resultados: se identificaron tres categorías empíricas: Protección de la niñez expresada en la legislación y en el discurso de los agentes públicos; Concepciones sobre el aborto y la inviolabilidad de la integridad del niño; Voluntad adulta versus autonomía infantil. Consideraciones finales: los resultados revelan las contradicciones identificadas en el caso de una niña brasileña, cuya autonomía, así como el derecho a la protección de la infancia y la despenalización del aborto, no fueron respetados.

Descriptores: Aborto. Abuso Sexual Infantil. Maltrato a los Niños. Noticias. Investigación Cualitativa.

Introduction

Sexual violence against children is a worldwide phenomenon and it is more pronounced for females and in low- and middle-income countries. While in the United States of America (USA), for example, the phenomenon affects 26.6% of girls and 5.1% of boys, in Haiti, Kenya, Swaziland, and Zimbabwe, it varies from 26 to 38% for girls and 2 to 9% for boys⁽¹⁾. According to a report by Dial 100, in 2019 there were 28,184 reports of sexual violence against children and adolescents in Brazil⁽²⁾.

Behind these more than expressive numbers, some children had their life trajectories marked and changed as a result of sexual violence. This investigation aims to analyze the case of a 10-year-old girl, a victim of sexual violence committed by her uncle in the domestic space since she was six years old. The case had great repercussions in the Brazilian press when the pregnancy was diagnosed and the victim opted for a legal abortion⁽³⁾.

Pregnancy is one of the consequences of sexual violence. An *umbrella*-type review on long-term responses to childhood sexual violence showed a high risk for psychosocial, psychiatric, and physical problems. It also found

a high association between childhood sexual abuse and schizophrenia, post-traumatic stress disorder, and substance misuse⁽⁴⁾.

In addition to causing short- and long-term damage to the lives of victims, sexual violence has a strong economic impact due to health care expenses from the violence, special education, and outcome such as suicide. It is estimated that in the USA the total lifetime cost for a victim of sexual violence in childhood is US\$9.3 billion, US\$8.5 billion for girls, and US\$758 million for boys⁽¹⁾.

The case of the 10-year-old girl, reported by the Brazilian press, had as an outcome the denunciation of sexual violence and the termination of pregnancy through legal abortion. However, the process took place in a tumultuous way, characterized by facts of great national repercussion, accentuated by the social markers of gender and generation, which reveal the intersection between the subalternity of power of girls in gender relations and children in generational relations.

In adult-androcentric societies, especially in those where there is an asymmetry of gender and generation power, violence against girls is

naturalized and it is almost an exception for them to reach adulthood without having experienced violence of all kinds. Sexual violence against children remains a serious problem, whose understanding and coping are complex and involve intersectoral actions. When sexual violence results in pregnancy and the need for abortion, the complexity increases⁽⁵⁾.

In Brazil, according to the Hospital Information System, there were 117 abortions for medical reasons in girls aged 10 to 14 years in 2021⁽⁶⁾. However, this data reveals only part of the phenomenon, as it represents the number of girls who managed to have access to legal abortion. World report on abortion highlights that in some countries data are not consistently available due to the absence of reporting systems and complete information in official records⁽⁷⁾. However, in addition to the numbers, it is also important to know the life trajectory of girls who seek the health system to terminate a pregnancy through legal abortion.

From this perspective, an Australian survey showed the role of nurses and midwives in the care and support of patients who seek the health system for the termination of pregnancy as a result of gender violence. The research results showed that during the period of graduation, the participants did not feel adequately prepared for the care of patients who sought an abortion, and there was a need for further studies. The authors of the research also suggest that the lack of qualification of professionals on the subject may explain the re-victimization of patients by the health system⁽⁸⁾.

Also, the discussion on abortion is essential for promoting the sexual and reproductive rights of girls and women. In the case of girls, it is urgent to expand knowledge about the intricacies of interrupting pregnancy in childhood and adolescence since the phenomenon brings together different types of violations. In this way, the analysis of the path of girls who are victims of sexual violence to access legal abortion is important for breaking down barriers that make their journeys even more onerous and painful than what is inherent in an exceptional procedure.

The problem is aggravated in cases in which there is great media repercussion since, in times of globalization, the media constitute a space of excellence for the production and reproduction of social consciousness. This movement is more expressive when it comes to a strong issue such as abortion⁽⁹⁻¹⁰⁾.

Given the above, this study sought to answer the following question: What are the contradictions in the national written press reports regarding the case of sexual violence and pregnancy interruption of a 10-year-old girl? The objective was to identify and interpret, based on the gender and generation categories, the contradictions in Brazilian written press reports about the pregnancy of a girl victim of sexual violence and consequent legal abortion.

Method

This is a documentary study, with a qualitative approach, based on the Theory of Practical Intervention in Nursing in Collective Health (Teoria da Intervenção Prática de Enfermagem em Saúde Coletiva-TIPESC). Anchored in the historical and dialectical materialist worldview, the TIPESC was built to understand the contradictions of objective reality linked to Collective Health Nursing, as a theoretical and practical field⁽¹¹⁾.

The source of empirical data was the set of reports published in electronic format in two widely circulated Brazilian newspapers, in this study called Newspaper A and Newspaper B. Both were selected according to the geographical location of the educational institution to which the authors are linked and the fact that they are vehicles of national circulation. The data collection period was from August 7th to October 21st, 2020. The start date corresponds to the first disclosure of the case in the Brazilian press and the end date corresponds to the follow-up of the repercussion of the case, two months after the girl's admission to the witness protection program.

The search for the reports was carried out by daily monitoring of publications in the two

newspapers. We included reports that were centrally about the object of study, excluding those that only cited the fact, without exploring its triggers, and texts associated with blogs or readers' opinions.

Initially, we selected 63 publications in Newspaper A and 98 in Newspaper B, totaling 161 reports. After reading and applying the eligibility criteria, 78 reports were selected for analysis. Data collection was performed using a semi-structured script, adapted to an *Excel* spreadsheet, containing: the date and time of publication, data source, data source session, gender of the author of the report, text extension according to the number of lines, presence of images and discourses associated with the scientific question. For this study, we only considered data collected in textual format.

The selected reports were saved in *Portable Document Format*. Then there was the creation of a shared folder on the *Google Drive* platform. The documents were divided among three study authors to read and fill in the instrument, each one being responsible for reading 26 reports. The other authors were responsible for the internal validation of the records in the *Excel* spreadsheet. At the end of completing the instrument, there was a virtual meeting through the *Google Meet* platform to discuss differences related to the inclusion of reports and the establishment of consensus.

The data corresponding to the discourses associated with the scientific question was submitted to the thematic content analysis technique, which includes the following steps: pre-analysis, material exploration, treatment of results, interpretation, and inference⁽¹²⁾. Data analysis was supported by *webQDA* software, which is structured in four systems: sources, space destined for data insertion; coding, responsible for creating descriptive and empirical categories; questioning, which has tools that help to deepen the analysis of data, and management, which allows the organization of the work process⁽¹³⁾.

The information entered in the *Excel* spreadsheet was incorporated into *webQDA* through the direct coding functionality, which

automatically coded the descriptive data (date and time of publication, data source, data source session, gender of authorship, text extension according to the number of lines and presence of image) and made the others available in the system of internal sources. Through the coding system, the tree codes resulting from the reading of the reports in their entirety were constructed, considering the analytical categories of gender and generation. The coding of the contents was carried out by one of the authors, responsible for managing the project. The internal validation of the data coded according to the analytical categories of gender and generation was performed by two other authors of the study.

The gender category refers to the process of the social construction of differences between men and women, constituting social relations understood as power relations, as a field in which and through which power is articulated⁽¹⁴⁾. The generation category refers to the social statutes of age groups, according to temporal-spatial, political and ideological similarities⁽¹⁵⁾. In this study, childhood was considered a generational category, as it refers to the place occupied by children in the structure of society⁽¹⁵⁾.

The research did not require the approval of the Research Ethics Committee, as it used publicly available publications. The anonymity of the data sources was guaranteed by replacing the names with the expressions: Newspaper A (NA) and Newspaper B (NB), followed by an Arabic numeral. The instrument *Consolidated Criteria for Reporting Qualitative Research* (COREQ) was used to guide the methodological procedures.

Results

Of the 78 articles selected, 53 were published by Newspaper B and 25 by Newspaper A. Regarding the date of publication, the 17th (n=8) and 18th (n=13) of august had the highest number of publications. The first publication was held on august 14 and the last was on october 10, 2020. Regarding the time of publication, the night period was more expressive (n=42). The number of reports by female authors (n=38)

published in the *Cotidiano* and *Notícias* sessions was highlighted, each with 22 publications. Fifty-seven of the total number of reports had images. Regarding the length of the text, most had less than 50 lines and only five had more than 100 lines.

Regarding the name of the victim, the reports generally referred to her as a girl or child, associating her age (10 years old), her origin (Capixaba, São Mateus, Espírito Santo, Brazilian), the situation of violence (raped, vulnerable, abused, a victim of violence or sexual abuse) and the consequence of violence (pregnant, who had an abortion). In addition, a smaller portion of the texts referred to her as poor, black, small, suffering, niece, and murderer. The perpetrator of the violence was widely cited in the reports by the degree of kinship with the victim (uncle, husband/partner of an aunt) or as a suspect in the crime. A minority associated it with rape (rapist, abuser, aggressor, pedophile, monster, defendant, author, accused, fugitive, and criminal).

Data analysis allowed the identification of three empirical categories: Child protection expressed in legislation and the discourse of public agents; Conceptions about abortion and the inviolability of the child's integrity; Adult volition versus child autonomy.

Child protection is expressed in legislation and the discourse of public agents

We observed that the reports were supported by Brazilian legislation to defend the guarantee of children's rights. The excerpts from the laws highlighted in the reports were also used in opposition to the discourse of public agents from different governmental levels and linked to religious institutions.

Part of the reports highlighted the article of the Brazilian Federal Constitution that makes the family, society, and the State responsible for guaranteeing care during childhood. Thus, it is considered that the answer to the problem is not restricted to the child's singular dimension, but other dimensions of reality.

Article 227 of the Constitution stipulates that it is 'the duty of the family, society, and the State to guarantee children, adolescents, and young people, with absolute priority, the right to life, health, food, education, leisure, professionalization, culture, dignity, respect, freedom and family and community life, in addition to protecting them from all forms of negligence, discrimination, exploitation, violence, cruelty, and oppression. (NB 12).

Another part of the report cited the Statute of Children and Adolescents (ECA-*Estatuto da Criança e do Adolescente*) which highlights the need to protect physical, psychological, and moral integrity during child development, as well as the implementation of public policies to promote children's well-being.

Article 7 of the ECA states that 'children and adolescents have the right to protection of life and health, through the implementation of public social policies that allow healthy and harmonious birth and development, in dignified conditions of existence.' (NB 12).

Article 17 of the ECA states that the right to respect consists of the inviolability of the physical, psychological, and moral integrity of children and adolescents, encompassing the preservation of the image, identity, autonomy, values, ideas and beliefs, spaces, and personal objects. (NB 24).

However, in the case analyzed, we found that the content of Brazilian legislation is not expressed similarly in the discourse of public officials, who are primarily responsible for its dissemination and implementation. On the contrary, there was a lack of respect for the protection and guarantee of children's rights, and there were several pronouncements, especially linked to religious institutions, reinforcing the influence of religion on political discourse, as a way of legitimizing it.

It is regrettable to witness those who represent the Law and the State with the mission of defending life decide to kill a child of just five months whose mother is a ten-year-old girl. Two heinous crimes. Sexual violence is terrible, but the violence of abortion cannot be explained in the face of all the existing resources available to guarantee the lives of the two children. (NB 53).

The Minister of Women, Family and Human Rights [...] declared that the child should carry the pregnancy to term and called the legal and health authorities that authorized and directed the performance of legal abortion irresponsible. (NB 28).

The act, called by deputies from the evangelical bench of Pernambuco, provoked a riot in front of the hospital this Sunday afternoon. According to witnesses, the participants even called the child a 'murderer'. (NA 12).

Most of the speeches of public agents blamed the justice system for ensuring the right to

abortion, criminalizing it, defending the life of the unborn child, and the existence of resources that could give continuity to pregnancy and accountability for the child as a donation, for example. We could not measure the extent to which the position expressed in these speeches influenced public opinion; however, a portion of the professionals who worked in the protection network was against the implementation of abortion, both at the municipal and state levels.

The secretary says that guardianship counselors act in situations like this to delay the gestational age so that there is no option of abortion at the appropriate time, the result of a conservative conception in these groups. More than half of the tutelary councils are made up of fundamentalist, religious advisers. (NB 45).

The doctors of Espírito Santo did not want to perform the abortion; they were willing to make the anticipation of delivery. It was not the child to go until the ninth month,' he stated. 'Another two weeks, a cesarean could have been performed on this girl, take the child out, put it in an incubator. If she survives, she survived. If not, she died a dignified death.' (NB 38).

The overlapping of conservative discourses by public agents on Brazilian legislation proved to be an important barrier to the protection and guarantee of children's rights guaranteed at the constitutional and statutory levels.

Conceptions about abortion and the inviolability of the child's integrity

In the reports, the demonstrations about abortion were both against and in favor of the child's decision. The justification of the opposing ones was the protection of the unborn child as a helpless human being and the trauma generated by the procedure, justified as the interruption of life in formation.

The murder of a defenseless human being is worse than rape. (NB 53).

With proper care, the hospital could have achieved not the elimination of an almost six-month-old fetus, but a premature birth, since at that gestational age there is a chance of survival. Giving birth to a dead child, after all, cannot be less traumatic than giving birth to a live child. (NB 2).

The conceptions in favor of abortion were based on the need to protect the victim since child pregnancy was the result of sexual violence. Therefore, abortion was understood as a health

need and a way to ensure the girl's development, respecting her dignity.

'Child pregnancy is torture. It means the denial of many rights and the interruption of a future, exposing the child to many other forms of vulnerability,' they said in a statement. (NB 36).

This is a paradigmatic case of the terrible effects of criminalizing a health need or criminalizing a way to protect girls' dignity, life, and their sense of future. (NB 33).

Child pregnancy was associated with the interruption of the girl's future, as it would early transform her social position from being cared for (child) to the caregiver (adult). It was also argued that child pregnancy would put at risk the child's life, as it was a still developing body.

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The risks in the case of pregnancy of a child under 14 are undeniable. 'What are these risks? Premature birth. Mother's malnutrition, because there are two growths, the girl's and the baby's. [...] There are also risks for the baby. He is born premature, small for gestational age, and underweight.' [...] The doctor, people need to focus on the idea that a child's pelvis is not ready for delivery. 'No! The body is not prepared. This girl's biological process is maturing'. (NB 12).

Although the positions against abortion negatively influence the child's access to the legally guaranteed right to an abortion, some supported his decision, such as the judge who received the abortion request and the health service professionals where the termination of the pregnancy was performed.

To support his decision, the judge said in his order that he granted the victim's wish, who does not want to continue the pregnancy. (NB 29).

Inside the maternity hospital, at times, we heard some noises from outside [the protests], but we managed to keep the girl outside and oblivious to what was happening there. We knew what it was, but in our space we were taking care of her, making the procedure happen, and explaining it to her properly. So that she would feel welcomed and safe with whoever was there with her. (NA 17).

Adult volition versus child autonomy

According to the reports, the first voice that was imposed on the protection of the child was that of the perpetrator of the sexual violence that resulted in the unwanted pregnancy. He

used the threat as a tool to practice successive episodes of rape and prevent reporting to other family members and the protection network.

In conversation with doctors and the aunt who accompanied her, the child reported that her uncle had been raping her since she was 6 years old. She said that she had not told her family why she was afraid, as he was threatening her. (NA 17).

The second voice that overlapped the child's desire was that of the health professionals who performed the first care. They considered that, according to the care protocol of the hospital, the termination of pregnancy could not be carried out, by law. In addition, they stated that the pregnancy was not life-threatening for the girl.

The hospital in Vitória refuses to perform an abortion, based on federal regulations that recommend evaluating care in cases of more than 20 weeks of gestation or fetal weight greater than 500 grams. (NB 38).

She had to leave her state because the hospital sought by the family in Vitória, [...] refused to do the legal procedure urgently [...]. The superintendent of the Espírito Santo hospital also said that, although the girl had developed gestational diabetes, she was not at imminent risk of death. (NB 16).

The third voice to intervene in children's rights was that of the Brazilian State, represented mainly by the Ministry of Women, Family and Human Rights (MMFDH-*Ministério da Mulher, da Família e dos Direitos Humanos*) and Ministry of Health (MH). In the case of the MMFDH, a group of people was sent to the municipality to monitor and ensure the continuity of the pregnancy, preventing abortion. In the case of MH, an omission was identified, as there was no official statement regarding the case.

The group arrived with a ready plan on what should happen to the girl: abortion would not be authorized; instead, the child, accompanied by a family member, would be taken to a pregnant women's shelter and accompanied. (NB 31).

The interim minister [...] was left out of the complex logistics for performing the abortion on the 10-year-old raped girl. According to those involved, the general did not call, nor did the ministry offer help given the difficulty in finding a hospital for action. (NB 13).

According to the reports, from the moment the child received the diagnosis of pregnancy, she expressed a desire to terminate it, so there was no doubt that it was an unwanted pregnancy that caused deep suffering.

In his order, the magistrate reproduced the child's despair when he was attended to by a social worker. Upon being informed by the professional that she was pregnant, the girl 'enters into deep suffering, screams, cries and says she does not want to carry the pregnancy forward'. (NB 16).

She went to the hospital accompanied by her grandmother and expressed a desire to terminate the pregnancy. (NB 44).

Although the child's autonomy was respected in the desire to have an abortion, part of the reports made a point of highlighting characteristics that referred to childhood: the description of the girl's physical appearance, holding a teddy bear during the procedure and the desire to play again after hospital discharge.

At the age of ten, a girl from Espírito Santo "still looking like a baby", as nurses noted, clung to a plush giraffe while terminating her pregnancy. It was her wish and that of her family. (NB 25).

[The nurse] says that the girl seemed to understand everything the medical team explained to her and was very cooperative. At the hospital, while a TV was broadcasting a football game, she said that she also likes to play soccer. She told me like this: 'I'm dying to get well, to play football', she says. (NB 34).

Discussion

In this study, TIPESC was used as an instrument to identify the contradictions in textual reports in the Brazilian press. This theory considers that contradictions are established from the relationship between two opposite poles, although complementary⁽¹¹⁾. Thus, from the results, three contradictions were identified: protection and neglect of childhood; criminalization and decriminalization of abortion; adult domination and child autonomy. The use of the social categories of gender and generation made it possible to interpret the phenomenon and its contradictions in the dialectical perspective of appearance and essence, reality and possibility, to overcome the problem⁽¹⁵⁾.

The results of the study reveal that, in addition to legislation and the child protection network, it is necessary to consider how public agents and professionals working in health services understand sexual violence, childhood pregnancy, and legal abortion. We found that the ideological conceptions expressed by them overlapped with the child's autonomy in the

decision-making process about terminating the pregnancy.

The analysis of the contradictions contained in the reports contributes to the discussion around the guarantee of rights and the protection of children in Brazil. The main character of the case was exposed to violations perpetrated by those who should guarantee their rights with absolute priority. The uncle, society, and the State were not able to guarantee that she was safe from different expressions of violence, revictimizing her.

The speeches of public agents and a portion of the professionals of the child protection network revealed that greater importance was given to the criminalization of the interruption of pregnancy than to the sexual violence experienced by the child, leading to the belief that the rights of the unborn were considered superior to those of the girl's sexual and reproductive rights. By recognizing abortion as an ethical and moral act, legislation should above all protect the victim and not disregard their will, overcoming the idea that it is a mere personal decision of someone else or a merely medical procedure, to be understood as a social act, linked to sexual and reproductive rights.

More than a medical procedure, abortion must also be understood as a women's right. Ethnographic research carried out in Argentina on women's access to legal abortion showed that, despite the country's lack of legislation on the subject, there are activist health professionals who support women who wish to terminate a pregnancy, as they consider it a woman's right, and that the continuation of an unwanted pregnancy can cause damage to their biopsychosocial health. Because of this, the denial of abortion is a health risk, as forced motherhood can change women's lives, directly interfering with their life projects, family relationships, education, the possibility of employment, and continuous contact with abusive family members and the child's father⁽¹⁶⁾.

Motherhood cannot be a social imposition on women and the denial of abortion in the case of an unwanted pregnancy is a violation of their sexual and reproductive rights, as it does

not respect their freedom of decision. It is also a gender issue, as the woman who becomes pregnant is responsible for the consequences, and it is then up to her to decide on whether to continue or interrupt the pregnancy. Also, it must be considered that abortion can involve social discrimination, as poorer women are more exposed to clandestine, precarious, and unsafe practices⁽¹⁷⁾.

In this particular case, the sexual violence and the resulting pregnancy were direct expressions of the violation of the victim's sexual and reproductive rights. Sexual violence was only known to the family and the child protection network when the symptoms of pregnancy demanded health care. Only at that moment was there an opportunity for the girl to denounce the situations of sexual violence to which she had been exposed since she was six years old.

The disclosure of sexual violence is complex, especially when experienced in childhood. Research carried out with 76 university women who suffered child sexual abuse found that 54.28% of the participants disclosed the rape. Those who did not was because of emotional distress, not wanting to confuse, or not knowing how to tell other people as reasons. The victim's age at the time of abuse influenced the disclosure of violence, as adolescents revealed it more often than children⁽¹⁸⁾.

In cases of rape, the difficulty of talking about sexual violence to the family or the child protection network can directly influence the diagnosis of pregnancy on time and make legal abortion even more difficult. According to the Brazilian technical standard, the legal termination of pregnancy is foreseen until the 20th or 22nd week and with the fetus weighing less than 500 grams⁽¹⁹⁾. In the case of the girl who is the target of this study, the first health service that performed the care refused to perform the procedure, justifying technical incapacity due to gestational age. Thus, there was a need to transfer her to another state and, consequently, delay the solution of the problem even further.

A survey carried out with 204 pregnant women who sought a legal abortion in countries such as

the Netherlands and the United Kingdom found that 79.0% of the participants cited gestational age as the main barrier to having an abortion in their country of origin. This aspect was associated with the fact that the period provided for in the abortion legislation was exceeded, the late identification of the pregnancy, the difficulty in accessing health services, and the lack of accessible information about the process of terminating a pregnancy⁽²⁰⁾.

In the case of the girl in this study, the interval between the diagnosis of pregnancy and the abortion was 10 days. From the moment she received the diagnosis, she expressed the desire to terminate the pregnancy, and this decision was made in agreement with her grandmother, her legal guardian. However, the reports showed attempts to interfere in this decision by public agents and professionals from the child protection network, advocating that the pregnancy should be monitored until delivery, as this would guarantee that two lives would be saved.

Participants in a survey conducted in Texas with 20 adolescents aged 16 to 19 years who sought legal abortion through the justice system described the experience as humiliating, as they had to present details of their lives to strangers to justify their choice of termination of pregnancy and lack of parental consent. Some of the adolescents said that the judges responsible for judging the case did not hide their disapproval of abortion. In addition, a part of them justified that abortion was denied due to the immaturity of adolescents in decision-making, despite considering them mature enough to have a child⁽²¹⁾.

The interference of professionals and public agents in the decision of women and girls about abortion represents not only a violation of their sexual and reproductive rights but also institutional violence. In this study, sexual violence was just the tip of the iceberg of a series of violations to which the girl was exposed, even when she sought to guarantee her right through legal means, supported by the Federal Constitution and the ECA.

The results revealed a deep subalternity of the girl in the different power relations established mainly with adult men, the same ones who occupy most of the spaces in the superstructure of society, representing political and religious institutions.

The study presents as an implication for Nursing the need for gendered and generationalized care, from the diagnosis of pregnancy to the moment after the abortion, overcoming the exclusively biological perspective. We also believe that the implications of this study are not restricted to health professionals who, in this case, were responsible for the first care and for carrying out the pregnancy termination procedure, but to all those who work in the child protection network. The identified contradictions give rise to reflections on the pressing need to implement actions to prevent sexual violence and to implement girls' sexual and reproductive rights in different dimensions of society.

The limitation of our study was the analysis of Brazilian written press reports from only two communication vehicles. We believe that the expansion to other national, state, and municipal vehicles, as well as to other types of media, could expand the data. Another limitation is that the results are not generalizable, as the selected reports are related to the case of a 10-year-old, black, poor girl. Thus, it is not possible to state that the contradictions identified in the study apply to all Brazilian girls.

Despite these limitations, the results contribute to the advancement of scientific knowledge about legal abortion in Brazil, especially when it comes to children in situations of sexual violence.

Final Considerations

The results of this study reveal the contradictions identified in the case of a Brazilian girl, whose autonomy, right to childhood protection and decriminalization of abortion were not respected, even though guaranteed by the Federal Constitution, the ECA, and the Penal Code. However, during the search for legal abortion, she suffered successive violations

of different types, in different contexts (family, child protection network, and the Brazilian State), which made it difficult to implement her right and her decision to terminate the pregnancy.

The child's voice was silenced by the adults' voice. Despite being widely defended by legislation, childhood proved to be weakened in the face of the strength of the speeches of public agents and a portion of the professionals who assisted her. The situation of sexual violence suffered proved to be of lesser importance when compared to the criminalization of abortion. If it were not for the action of the women's movements and other instances of social control, her life would have been seriously compromised, contrary to what is expected in a society that values the future of its generations.

The use of the written press as a source of data proved to be powerful in capturing the different perceptions associated with sexual violence and legal abortion in childhood. In general, the media can influence and be influenced by public opinion. In this way, the qualitative approach to research proves to be an important tool to capture the transversal discourses to the contents conveyed by the media to identify contradictions that can be overcome through interventional actions in the objective reality.

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References

1. Letourneau EJ, Brown DS, Fang X, Hassan A, Mercy JA. The economic burden of child sexual abuse in the United States. *Child Abuse Negl.* 2018;79:413-22. DOI: 10.1016/j.chiabu.2018.02.020
2. Brasil. Ouvidoria Nacional de Direitos Humanos. Disque Direitos Humanos: Relatório 2019 [Internet]. Brasília (DF); 2019 [cited 2021 Oct 7]. Available from: https://www.gov.br/mdh/pt-br/centrais-de-conteudo/disque-100/relatorio-2019_disque-100.pdf
3. Egry EY, Fornari LF, Fonseca RMGS, Borges WD, Elias ARR, Oliveira MAC. Infância violada: estudo de reportagens veiculadas na imprensa sobre a menina vítima de estupro e consequente aborto legal. In: Fornari L, Oliveira ESF, Oliveira C, Faria BM, Ribeiro J, Higa EFR, organizadores. *Investigação Qualitativa em Saúde: avanços e desafios*. Aveiro (PRT): Ludomedia; 2021. p. 44-52.
4. Hailes HP, Yu R, Danese A, Fazel S. Long-term outcomes of childhood sexual abuse: an umbrella review. *Lancet Psychiatry.* 2019;6(10):830-9. DOI: 10.1016/S2215-0366(19)30286-X
5. Santos DLA. *Mulheres na busca pelo aborto legal: rota crítica percorrida e necessidades em saúde suscitadas [tese]*. São Paulo (SP): Escola de Enfermagem, Universidade de São Paulo; 2019.
6. Brasil. Ministério da Saúde. *Morbidade Hospitalar do SUS* [Internet]. Brasília (DF); 2022 [cited 2022 Jun 13]. Available from: <http://tabnet.datasus.gov.br/cgi/tabcgi.exe?sih/cnv/niuf.def>
7. Singh S, Remez L, Sedgh G, Kwok L, Onda T. *Abortion Worldwide 2017: Uneven Progress and Unequal Access*. New York (USA): Guttmacher Institute; 2018.

8. Mainey L, O'Mullan C, Reid-Searl K. Working with or against the system: Nurses' and midwives' process of providing abortion care in the context of gender-based violence in Australia. *J Adv Nurs*. 2022. DOI: <https://doi.org/10.1111/jan.15226>
9. Torrentes Gomes FM, Zucco LP. Aborto e mídia: um estudo a partir do feminismo decolonial. *Zona Franca* [Internet]. 2018 [cited 2021 Oct 1];(26):107-39. Available from: <https://zonafranca.unr.edu.ar/index.php/ZonaFranca/article/view/81>
10. Belin LL, Rizzotto CC. Menos Estigma, Pouco Aprofundamento: Uma Análise de Enquadramento Noticioso sobre o Direito ao Aborto. *ECO-Pós*. 2021;24(1):159-87. DOI: 10.29146/ecopos.v24i1.27609
11. Egry EY. Saúde Coletiva: Construindo um novo método em enfermagem. São Paulo (SP): Ícone; 1996.
12. Bardin L. Análise de conteúdo. São Paulo (SP): Edições 70; 2011.
13. Minayo MCS, Costa AP. Techniques That Use Speech, Observation and Empathy: Qualitative Research in Action. Aveiro (PRT): Ludomedia; 2019.
14. Scott JW. Gender: A Useful Category of Historical Analyses. In: Scott JW. *Gender and the Politics of History*. New York (USA): Columbia University Press; 1988. p. 28-50.
15. Egry EY, Fonseca RMGS, Oliveira MAC. Science, public health and nursing: highlighting the gender and generation categories in the episteme of praxis. *Rev Bras Enferm*. 2013;66(esp):119-33. DOI: 10.1590/S0034-71672013000700016
16. McReynolds-Pérez J. Abortion as empowerment: reproductive rights activism in a legally restricted contexto. *BMC Pregnancy Childbirth*. 2017;17(Suppl 2):350. DOI: 10.1186/s12884-017-1498-y
17. Holanda ACP, Xerez RM. The Handmaid's Tale and Abortion in Brazil: the Absence of Freedom of Woman over Her Own Body. *Rev Estud Femin*. 2021;29(1):e61052. DOI: 10.1590/1806-9584-2021v29n161052
18. Winters GM, Colombino N, Schaaf S, Laake ALW, Jeglic EL, Calkins C. Why do child sexual abuse victims not tell anyone about their abuse? An exploration of factors that prevent and promote disclosure. *Behav Sci Law*. 2020;38(6):586-611. DOI: 10.1002/bsl.2492
19. Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde. Departamento de Ações Programáticas Estratégicas. Atenção Humanizada ao abortamento: norma técnica [Internet]. Brasília (DF); 2014 [cited 2021 Oct 1]. Available from: https://bvsms.saude.gov.br/bvs/publicacoes/atencao_humanizada_abortamento_norma_tecnica_2ed.pdf
20. Zordo S, Zanini G, Mishtal J, Garnsey C, Ziegler A-K, Gerdtts C. Gestational age limits for abortion and cross-border reproductive care in Europe: a mixed-methods study. *BJOG*. 2020;128(5):838-45. DOI: 10.1111/1471-0528.16534
21. Coleman-Minahan K, Stevenson AJ, Obront E, Hays S. Young Women's Experiences Obtaining Judicial Bypass for Abortion in Texas. *J Adolesc Health*. 2019;64(1):20-5. DOI: 10.1016/j.jadohealth.2018.07.017

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