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Ramos, Larissa de Andrade Silva; Pereira, Eliel dos Santos; Lopes, Kelvya
Fernanda Almeida Lago; Araujo, Augusto Cezar Antunes de; Lopes, Naiara Coelho

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USE OF CONTRACEPTIVE METHODS BY ADOLESCENT WOMEN OF A PUBLIC SCHOOL*

Larissa de Andrade Silva Ramos¹, Eliel dos Santos Pereira², Kelvya Fernanda Almeida Lago Lopes³, Augusto Cezar Antunes de Araujo Filho⁴, Naiara Coelho Lopes⁵

ABSTRACT: Objective: to identify the use of contraceptive methods by adolescents of a public school in the state of Maranhão. **Method:** a quantitative, descriptive-exploratory, cross-sectional study was conducted between November and December 2015, with high school adolescents from a public school in the state of Maranhão. Descriptive statistical analysis of the data was performed. **Results:** of the adolescents, 199 (88.1%) reported having information on contraceptive methods, which was mainly obtained from their mothers, by 139 (69.8%). Of the young women who had information, 184 (92.5%) reported knowing about the male condom. Of the adolescents who had already started sexual activity, some reported not using any method, despite having the information, and 59 (76.6%) young women reported having used the male condom. **Conclusion:** there is a need to constantly develop health actions in order to allow adolescents to exercise their sexuality more safely, so they avoid sexually transmitted infections and unplanned pregnancies.

KEYWORDS: Contraception; Adolescent; Reproductive Health; Public Health; Nursing.

USO DE MÉTODOS ANTICONCEPCIONAIS POR MULHERES ADOLESCENTES DE ESCOLA PÚBLICA

RESUMO: Objetivo: identificar o uso de métodos contraceptivos por adolescentes de uma escola pública do interior do Maranhão. **Método:** estudo de abordagem quantitativa, descritivo-exploratório, de corte transversal, realizado entre os meses de novembro e dezembro de 2015, com adolescentes do ensino médio de uma escola publicoado interior maranhense. Foi realizada a análise estatística descritiva dos dados. **Resultados:** das adolescentes, 199 (88,1%) referiram possuir informações sobre métodos contraceptivos, que foram obtidas principalmente com as mães, por 139 (69,8%). Das jovens que possuíam informações, 184 (92,5%) relataram conhecer a camisinha masculina. Das adolescentes que já tinham iniciado a vida sexual, algumas referiram não ter utilizado qualquer método, apesar das informações, e 59 (76,6%) jovens relataram ter utilizado a camisinha masculina. **Conclusão:** há necessidade de desenvolver constantemente ações de saúde, a fim de oportunizar que os adolescentes exerçam sua sexualidade de maneira mais segura, para evitar infecções sexualmente transmissíveis e gravidez não planejada.

DESCRIPTORES: Anticoncepção; Adolescente; Saúde Reprodutiva; Saúde Pública; Enfermagem.

USO DE MÉTODOS ANTICONCEPTIVOS EN MUJERES ADOLESCENTES DE ESCUELA PÚBLICA

RESUMEN: Objetivo: Identificar el uso de métodos contraceptivos en adolescentes de una escuela pública del interior de Maranhão. **Método:** Estudio de abordaje cuantitativo, descriptivo-exploratorio, de corte transversal, realizado entre noviembre y diciembre de 2015 con adolescentes cursando enseñanza secundaria en escuela pública del interior de Maranhão. Se realizó análisis estadístico descriptivo de los datos. **Resultados:** Entre las adolescentes, 199 (81,1%) refirieron tener información sobre métodos anticonceptivos, transmitida especialmente por sus madres en 139 (69,8%) casos). De las jóvenes que tenían información, 184 (92,5%) expresó que conoce el preservativo masculino. De las adolescentes que habían iniciado su vida sexual, algunas manifestaron no haber utilizado ningún método, aún contando con información, y 59 (76,6%) jóvenes informaron haber utilizado preservativo masculino. **Conclusión:** Es necesario desarrollar constantemente acciones de salud buscando que los adolescentes ejerzan su sexualidad de manera más segura, para evitar infecciones sexualmente contagiosas y embarazos no planificados.

DESCRIPTORES: Anticoncepción; Adolescente; Salud Reprodutiva; Salud Pública; Enfermería.

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¹Nurse. Specialist in Higher Education Teaching. Grajaú, MA, Brazil.

²Nurse. MSc in Bioengineering. PhD candidate in Biotechnology from the Northeast Network of Biotechnology/Federal University of Piauí. Professor of the Nursing Department of the State University of Maranhão. Grajaú, MA, Brazil.

³Nurse. MSc in Family Health. Professor of the Nursing Department of the State University of Maranhão. Caxias, MA, Brazil.

⁴Nurse. MSc in Nursing. PhD candidate of the Graduation Program in Nursing of the Federal University of Piauí. Teresina, PI, Brazil.

⁵Nurse. Specialist in Management and Auditing in Health Services. Grajaú, MA, Brazil.

Corresponding Author:

Augusto Cezar Antunes de Araujo Filho
Universidade Federal do Piauí

Av. Universitária, 64049-550. Universidade Federal do Piauí, Campus Ministro Petrônio Portella, Departamento de Enfermagem – Bloco 12. Teresina, PI, Brazil.

Email: araujoaugusto@hotmail.com

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● INTRODUCTION

The World Health Organization considers adolescence to be the period between 10 and 19 years of age, in which various biological, psychological and social changes occur⁽¹⁾, producing uncertainties, insecurities, doubts and discoveries about oneself and about one's own sexuality⁽²⁻³⁾. These changes are related to physical growth, sexual maturation and reproductive capacity^(2,4), and therefore, in this stage of life, the onset of sexual activity tends to occur for a large part of this group⁽⁵⁾. According to the National School Health Survey (PeNSE, 2016), this usually occurs between 13 and 15 years of age, especially in males⁽⁶⁾.

It is known that sexuality is intrinsic in adolescence, and is something that goes beyond the biological, being considered, thus, a psychological and social phenomenon, being influenced by sociocultural factors, such as beliefs and values⁽³⁾, which play a role in the sexual behavior of adolescents⁽⁴⁾. Therefore, sexuality in adolescence becomes an important issue for public health, considering that this period is marked by behaviors and attitudes capable of potentializing vulnerabilities^(4,7).

It is understood that the exercise of sexuality in adolescence can have negative consequences in the life of the adolescent, which interfere in their way of life, such as early and unwanted pregnancy or Sexually Transmissible Infections (STIs), and also limit the performance of these young people^(2-4,8). Thus, it is considered necessary to encourage the use of contraceptive methods, before the start of sexual activity, and also to understand the adolescents as coparticipants in their care, in order to act in the prevention of early pregnancy and STIs^(2-3,8).

Considering the relevance of the topic and the importance of the use of contraceptive methods as an ally in the prevention of factors that interfere in the way of life of young people, this study aimed to identify the use of contraceptive methods by adolescents of a public school of the state of Maranhão.

● METHODOLOGY

This was a quantitative, descriptive-exploratory, cross-sectional study conducted from November 30 to December 4, 2015, in a public school of the state of Maranhão, which operated, during the collection stage, with 696 students distributed over the three periods. The inclusion criteria were: female adolescents, who were regularly enrolled in the public institution and attended high school in the year 2015. Thus, out of a total of 299 female adolescents, the population was constituted for 226 of them, as 16 were excluded due to not being present in the classroom at the time of collection and 57 because they were over 19 years of age.

Data collection took place in each classroom, conducted with a structured and self-administered questionnaire divided into two stages. The first allowed the characterization of the subjects, with variables such as age, color, marital status, religion, schooling, housing, children and family income. The second dealt with the reproductive planning of the adolescents, involving knowledge, accessibility and use of the contraceptive methods.

After collection, the data were processed and analyzed using the Microsoft Excel® program, in which descriptive statistical analysis was performed. It should be highlighted that regarding the variables 'sources of information', 'methods known', 'methods used' and 'place of access' the adolescents could list more than one alternative, thus configuring these as multiple-response variables. The study was approved by the Research Ethics Committee (CEP) of the State University of Maranhão, authorization No. 1.286.760, confirming the commitment to respect human dignity.

● RESULTS

Regarding the sociodemographic characteristics, 58 (25.7%) of the adolescents were 16 years of age, 171 (75.7%) declared themselves to be brown, 181 (80.1%) were single, 133 (58 (34.9%) were in the second year of high school, 143 (63.3%) were Catholic, 149 (65.9%) lived with their parents and 111 adolescents (49.1%) had a family income of one minimum wage (Table 1).

Table 1 - Sociodemographic characteristics of the adolescents enrolled in a public school in the state of Maranhão (*n*=226). Formosa da Serra Negra, MA, Brazil, 2015

| Variable | <i>n</i> | % |
|--------------------------------|----------|------|
| Age | | |
| 14 | 12 | 5.3 |
| 15 | 48 | 21.2 |
| 16 | 58 | 25.7 |
| 17 | 56 | 24.8 |
| 18 | 32 | 14.2 |
| 19 | 20 | 8.8 |
| Color | | |
| White | 50 | 22.1 |
| Brown | 171 | 75.7 |
| Black | 5 | 2.2 |
| Marital status | | |
| Single | 181 | 80.1 |
| Married | 29 | 12.8 |
| Stable Union | 16 | 7.1 |
| Religion | | |
| Catholic | 143 | 63.3 |
| Protestant | 77 | 34.1 |
| Others | 6 | 2.6 |
| High school grade | | |
| 1 st grade | 75 | 33.2 |
| 2 nd grade | 77 | 34.1 |
| 3 rd grade | 74 | 32.7 |
| Live with parents | | |
| Yes | 149 | 65.9 |
| No | 77 | 34.1 |
| Started sexual activity | | |
| Yes | 93 | 41.2 |
| No | 133 | 58.8 |
| Have children | | |
| Yes | 15 | 6.6 |
| No | 211 | 93.4 |
| Family income | | |
| <Minimum wage | 72 | 31.9 |
| = Minimum wage | 111 | 49.1 |
| >Minimum wage | 43 | 19.0 |

There was a predominance of information, in all ages, on some contraceptive method, 199 (88.1%). Regarding the use of the methods, 149 (65.9%) reported having used no contraceptive method prior to the data collection (Table 2).

Table 2 - Information and use of some type of contraception method by the adolescents enrolled in a public school in the state of Maranhão, according to age ($n=226$). Formosa da Serra Negra, MA, Brazil, 2015

| Variable | Age | | | | | | | | | | | | | |
|-------------------------|----------|-----|----------|------|----------|------|----------|------|----------|------|----------|-----|----------|------|
| | 14 | | 15 | | 16 | | 17 | | 18 | | 19 | | Total | |
| | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % |
| Have information | | | | | | | | | | | | | | |
| Yes | 11 | 4.9 | 39 | 17.3 | 50 | 22.1 | 51 | 22.6 | 30 | 13.3 | 18 | 8.0 | 199 | 88.1 |
| No | 1 | 0.4 | 9 | 4.0 | 8 | 3.5 | 5 | 2.2 | 2 | 0.9 | 2 | 0.9 | 27 | 11.9 |
| Used some method | | | | | | | | | | | | | | |
| Yes | 2 | 0.9 | 7 | 3.1 | 20 | 8.8 | 23 | 10.2 | 13 | 5.8 | 12 | 5.3 | 77 | 34.1 |
| No | 10 | 4.4 | 41 | 18.1 | 38 | 16.8 | 33 | 14.6 | 19 | 8.4 | 8 | 3.5 | 149 | 65.9 |

It was observed that, of the 199 adolescents who reported having information on contraceptive methods, 139 adolescents (69.8%) received this information, mainly from their mothers (Table 3).

Table 3 – Sources of information regarding contraception methods of the adolescents enrolled in a public school in the state of Maranhão, according to age ($n=199$). Formosa da Serra Negra, MA, Brazil, 2015

| Variable | Age | | | | | | | | | | | | | |
|-------------------------------|----------|-----|----------|------|----------|------|----------|------|----------|------|----------|-----|----------|------|
| | 14 | | 15 | | 16 | | 17 | | 18 | | 19 | | Total | |
| | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % |
| Source of information* | | | | | | | | | | | | | | |
| Father | 3 | 1.5 | 13 | 6.5 | 18 | 9.0 | 18 | 9.0 | 10 | 5.0 | 7 | 3.5 | 69 | 34.7 |
| Mother | 7 | 3.5 | 35 | 17.6 | 35 | 17.6 | 32 | 16.1 | 20 | 10.1 | 10 | 5.0 | 139 | 69.8 |
| Healthcare professional | 1 | 0.5 | 12 | 6.0 | 11 | 5.5 | 14 | 7.0 | 5 | 2.5 | 8 | 4.0 | 51 | 25.6 |
| Uncles/Aunts | 2 | 1.0 | 10 | 5.0 | 15 | 7.5 | 9 | 4.5 | 5 | 2.5 | 3 | 1.5 | 44 | 22.1 |
| Teachers | 1 | 0.5 | 16 | 8.0 | 27 | 13.6 | 22 | 11.1 | 9 | 4.5 | 11 | 5.5 | 86 | 43.2 |
| Friends | 2 | 1.0 | 21 | 10.6 | 29 | 14.6 | 20 | 10.1 | 9 | 4.5 | 5 | 2.5 | 86 | 43.2 |
| Siblings | 1 | 0.5 | 6 | 3.0 | 13 | 6.5 | 6 | 3.0 | 3 | 1.5 | 2 | 1.0 | 31 | 15.6 |
| Others | - | - | 1 | 0.5 | 2 | 1.0 | - | - | 1 | 0.5 | 1 | 0.5 | 5 | 2.5 |

*Multiple response

Concerning the contraceptive methods known, it was verified that, of the 199 adolescents who reported having information about contraceptive methods, 184 (92.5%) reported knowing about the male condom, which was the most known method of contraception (Table 4).

Table 4 – Contraception methods known about by the adolescents enrolled in a public school in the state of Maranhão, according to age ($n=199$). Formosa da Serra Negra, MA, Brazil, 2015

| Variable | Age | | | | | | | | | | | | | |
|--------------------|----------|-----|----------|------|----------|------|----------|------|----------|------|----------|-----|----------|------|
| | 14 | | 15 | | 16 | | 17 | | 18 | | 19 | | Total | |
| | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % |
| Methods known* | | | | | | | | | | | | | | |
| Male condom | 10 | 5 | 38 | 19.1 | 45 | 22.6 | 50 | 25.1 | 23 | 11.6 | 18 | 9 | 184 | 92.5 |
| Female condom | 8 | 4 | 28 | 14.1 | 43 | 21.6 | 32 | 16.1 | 18 | 9 | 12 | 6 | 141 | 70.9 |
| Rhythm | 3 | 1.5 | 14 | 7 | 18 | 9 | 11 | 5.5 | 7 | 3.5 | 7 | 3.5 | 60 | 30.2 |
| Contraceptive pill | 11 | 5.5 | 30 | 15.1 | 47 | 23.6 | 28 | 14.1 | 21 | 10.6 | 13 | 6.5 | 150 | 75.4 |
| Hormone Injection | 3 | 1.5 | 11 | 5.5 | 29 | 14.6 | 17 | 8.5 | 7 | 3.5 | 6 | 3 | 73 | 36.7 |
| Morning after pill | 9 | 4.5 | 32 | 16.1 | 41 | 20.6 | 35 | 17.6 | 15 | 7.5 | 17 | 8.5 | 149 | 74.9 |
| IUD | 4 | 2 | 10 | 5 | 21 | 10.6 | 11 | 5.5 | 4 | 2 | 2 | 1 | 52 | 26.1 |
| Diaphragm | 2 | 1 | 6 | 3 | 9 | 4.5 | 7 | 3.5 | - | - | 2 | 1 | 26 | 13.1 |

*Multiple response

Regarding the contraceptive methods used by the 77 adolescents who had already started sexual activity, it was observed that the male condom was the method most used by the young women, 59 (76.6%), and that it was used by adolescents of all ages. Considering the place of access, according to the adolescents who had already used contraceptives, the school was highlighted as the main place of access, by 25 (32.5%) (Table 5).

Table 5 – Place of access and contraception methods used by the adolescents enrolled in a public school in the state of Maranhão, according to age ($n=77$). Formosa da Serra Negra, MA, Brazil, 2015

| Variable | Age | | | | | | | | | | | | | |
|----------------------|----------|-----|----------|-----|----------|------|----------|------|----------|------|----------|------|----------|------|
| | 14 | | 15 | | 16 | | 17 | | 18 | | 19 | | Total | |
| | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % | <i>n</i> | % |
| Methods used* | | | | | | | | | | | | | | |
| Male condom | 2 | 2.6 | 2 | 2.6 | 13 | 16.9 | 22 | 28.6 | 11 | 14.3 | 9 | 11.7 | 59 | 76.6 |
| Female condom | - | - | - | - | 2 | 2.6 | 1 | 1.3 | 1 | 1.3 | 1 | 1.3 | 5 | 6.5 |
| Rhythm | - | - | 1 | 1.3 | 2 | 2.6 | - | - | - | - | 3 | 3.9 | 6 | 7.8 |
| Contraceptive pill | - | - | 1 | 1.3 | 6 | 7.8 | 13 | 16.9 | 5 | 6.5 | 4 | 5.2 | 19 | 24.7 |
| Hormone Injection | - | - | 1 | 1.3 | 2 | 2.6 | 3 | 3.9 | - | - | 6 | 7.8 | 12 | 15.6 |
| Morning after pill | - | - | 5 | 6.5 | 9 | 11.7 | 18 | 23.4 | 9 | 11.7 | 12 | 15.6 | 53 | 68.8 |
| Place of access* | | | | | | | | | | | | | | |
| Pharmacy | - | - | 2 | 2.6 | 3 | 3.9 | 4 | 5.2 | 7 | 9.1 | 3 | 3.9 | 19 | 24.7 |
| Hospital | - | - | - | - | 4 | 5.2 | 6 | 7.8 | 6 | 7.8 | 5 | 6.5 | 21 | 27.3 |
| School | 1 | 1.3 | 5 | 6.5 | 9 | 11.7 | 5 | 6.5 | 4 | 5.2 | 1 | 1.3 | 25 | 32.5 |
| Primary Health Unit | - | - | 4 | 5.2 | 4 | 5.2 | 6 | 7.8 | 5 | 6.5 | 1 | 1.3 | 20 | 26 |
| Does not have access | 1 | 1.3 | - | - | 5 | 6.5 | 5 | 6.5 | 4 | 5.2 | 3 | 3.9 | 18 | 23.4 |
| Others | 1 | 1.3 | - | - | 1 | 1.3 | 1 | 1.3 | 1 | 1.3 | - | - | 4 | 5.2 |

*Multiple response

● DISCUSSION

In this study, of the 226 adolescents, 199 reported having information on some type of contraceptive method. This fact is a relevant factor, since it is known that knowledge about these methods reduces unplanned pregnancy and STIs⁽⁹⁾. However, it was observed that a significant portion still did not have information. Therefore, in order for all adolescents to be able to enjoy their sexuality in a healthy way, with responsibility and safety, it is considered imperative that health professionals promote daily actions that address sexual and reproductive health in adolescence⁽³⁻⁴⁾.

Of the 226 adolescents in this study, 133 reported not having started sexual activity. This fact can also be considered a positive point for the health of these young women, since the early onset of sexual activity can cause negative repercussions on the sexual and reproductive health of the adolescents⁽⁹⁻¹⁰⁾. This is related to the fact that, often due to the lack of knowledge, guidance, reflection and critical awareness regarding sex, the adolescent adopts sexual behavior without adequate preventive care related to early pregnancy and STIs^(2,8-9).

Regarding the use of some type of contraceptive method, of the 93 adolescents who had started sexual activity, only 77 reported this use. This shows that some adolescents did not use contraceptive methods in their first sexual relations. It is known that the non-use or the infrequent use of contraceptives is associated with a greater risk of exposure to STIs and the occurrence of unplanned and early pregnancies⁽¹¹⁻¹²⁾. This finding, therefore, demonstrates the vulnerability that this population is exposed to and reinforces the need and importance of constant approaches regarding contraceptive methods, especially prior to sexual initiation^(9,13).

Therefore, there is an evident need to develop and implement health actions in the school context that address issues related to vulnerability and sexuality⁽⁴⁾. A study with PeNSE data for the year 2012 verified that not receiving information on sexual and reproductive health in school increased the chance of having sexual intercourse, with a greater likelihood of having unprotected sex⁽¹⁴⁾. It is understood, therefore, that it is essential not only to inform, but to investigate what adolescents think and the deficiencies between knowledge and use⁽²⁻³⁾.

In the present study, the main sources of information about contraceptive methods reported by the adolescents were their mothers, followed by teachers and friends. This finding was also noted in studies carried out in a state school in Santa Catarina⁽¹⁵⁾ and in a public school in Rio Grande do Sul⁽¹⁶⁾, however, this differed in a study carried out in Caxias-MA⁽¹⁷⁾, in which as main sources of information were the school, the media and mothers, respectively. Considering this finding, it should be noted that the young people did not seek out health professionals to receive information on contraceptive methods. This is a negative point for adolescent health, with a study in Ghana⁽¹⁸⁾ finding that the professional activity has the capacity to improve contraceptive use among female adolescents and in women in general, since adolescents who visited health services or who received visits from health professionals were more likely to use some type of contraceptive⁽¹⁸⁾.

It can be considered that health professionals play a fundamental role in this process and, therefore, should be constantly promoting health actions that generate an exchange of information related to sexual and reproductive health, in order to empower adolescents regarding good contraceptive practices⁽⁹⁾. The nurse, in turn, should implement preventive measures and carry out health actions that help reduce adolescents' vulnerability to STIs and early pregnancy⁽⁷⁾. For this, the importance of working with the perspective that sexuality is something intrinsic to the human being and that adolescents should be instructed to experience their sexuality in a healthier way is emphasized⁽¹¹⁾.

The contraceptive methods most known to the adolescents in this study were the male condom and the contraceptive pill, respectively, corroborating studies carried out in some public schools of Santa Catarina⁽¹⁵⁾ and Bom Jesus-PI⁽¹⁹⁾, in Family Health Units of Ribeirão Preto-SP⁽²⁰⁾ and in a reproductive planning service in Fortaleza-CE⁽⁹⁾. It is known that the knowledge of adolescents regarding the different contraceptive methods is increasing, with there being a consensus that the methods most known about by young Brazilians are the male condom and the contraceptive pill^(5,19).

Among the contraceptive methods most used, the male condom and the morning after pill have gained prominence. In a study carried out in Colombia, condoms were reported as the method used by adolescents⁽²¹⁾. An investigation carried out in Porto Alegre was in contrast to the data of this study, finding that the most used methods were the contraceptive pill and condom, respectively⁽²²⁾.

In the present study, the school was cited as the main place for access to contraceptives, which diverges from other studies, such as one conducted in Goiânia-GO⁽⁴⁾, in which the contraceptive methods indicated by the adolescents were obtained from the pharmacy, the health unit and/or the partner (4); and a study conducted in Colombia⁽²¹⁾, in which the majority of respondents reported that they obtained the contraceptives from the pharmacy⁽²¹⁾.

The limitations of this study are related to its design, considering that possible biases may occur in cross-sectional studies, such as information biases, memory failure and responses that do not reflect the reality due to fears that information could be accessed by parents or school authorities, although this was impossible and stressed in all the interviews.

● CONCLUSION

The results of this study demonstrate that many of the adolescents had information about contraceptive methods, mainly the male condom and the contraceptive pill. However, some of the adolescents still stated that they did not have information about these methods. It should be noted that, although the majority had information, the use of the methods did not reach the number of adolescents who said they had already started sexual activity. In addition, the reduced visibility of health professionals was observed, cited by few as sources of information.

These issues support the need to constantly develop health actions that improve adolescents' knowledge about contraception so that they can exercise their sexuality more safely. In addition, this envisages the involvement of parents, teachers and health professionals in this process, in order to minimize the vulnerabilities that adolescents can expose themselves to during this period.

As an implication for nursing, the importance of the role of nurses, especially educators, is highlighted as a way of intervening in the difficulties and fragilities that adolescents present, so that they can fully perform their sexuality in a healthy way.

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