Healt education about sexually transmitted infections in the female prison environment: integrative review

Educación para la salud sobre las infecciones de transmisión sexual en el entorno prisional femenino: revisión integrativa

Educação em saúde acerca das infecções sexualmente transmissíveis no ambiente prisional feminino: revisão integrativa

ABSTRACT
Objective: Analyse in the scientific literature the themes addressed in health education about Sexually Transmitted Infections in the female prison environment. Method: Integrative literature review, carried out with articles published in Portuguese, English and Spanish in the databases: LILACS, BDENF, IBECS, MEDLINE, SCOPUS, CINAHL, COCHRANE and the SCIELO library. Results: Ten articles were selected. As a health education approach for women in deprivation of liberty were: HIV/STI prevention and reduction, partner violence, male and female condom use, health promotion and prevention policies, use of illicit drugs, contraception and pre counseling-conception. Conclusion: Knowing the educational themes developed about STIs in the female prison environment, reinforces the development of strategies that reach the real needs of this target audience.

DESCRIPTORS: Prisoners; Sexually Transmitted Infections; Health Education; Woman.
INTRODUCTION

According to the National Penitentiary Department (DEPEN), in 16 years, Brazil presented a 698% increase in its female prison population. In the year 2000, the population was estimated at 5,601, in 2016 that population increased to 44,721 women in deprivation of liberty.¹

The number of prison units in the country is not sufficient to meet this demand, leading to prison overcrowding with repercussions on the quality of life of this population, which should be deprived only of liberty.²

Studies show that the conditions in which women are deprived of their liberty, such as overcrowding, low ventilation, drug use and low socioeconomic status predispose them to Sexually Transmitted Infections (STIs).³

The increase in STIs in the prison environment represents a challenge for health professionals, especially with regard to the extreme situations to which these women are exposed, requiring a reflection of the Health Care model.⁴

Worldwide, it is estimated that more than one million Sexually Transmitted Infections occur daily, including syphilis. In Brazil, from 2010 to June 2016, 227,663 cases of acquired syphilis were reported.⁵

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The condition of being imprisoned alone increases the risk of hepatitis B infection and especially when associated with the structural quality of the confinement and the marginal social position predominantly occupied by the population deprived of liberty.⁶

Health education becomes an even more important mechanism for achieving quality of life, as it works as a chain of transmission, where each citizen aware of their duties in this process transmits to others their acquired knowledge about the means of transmission.⁷

Given this scenario, the present study aims to analyze in the scientific literature the themes addressed in health education about Sexually Transmitted Infections in the female prison environment.

METHOD

The integrative literature review aims to synthesize the results obtained in research on a topic or issue, in a systematic, orderly and comprehensive manner. It is called integrative because it provides broader information on a subject/problem, thus constituting a body of knowledge.⁸

For the construction of the integrative review, five different stages were covered,
namely: problem identification, literary search, data evaluation, data analysis and presentation.\textsuperscript{9}

The research question was elaborated according to the PICO strategy (P- Patient, I- Intervention, C- Comparison and O - Outcome): “What evidence is available in the literature on the themes used for health education about the STI in the female prison environment?”. For this study, the following elements were adopted: P - female prison population, I - themes for health education about STIs, C - no comparison, O - use.\textsuperscript{10}

The search for the articles, carried out in June 2020 occurred in the following databases: Medline/Pubmed, Scopus, Cinahl, Scielo library, Web Of Science, Lilacs and Cochrane. A cross was made with the Health Sciences Descriptors (DeCS) and the respective Medical Subject Headings (MESH) terms with the Boolean operator “AND”: 1) “Prisons/Prisioneiros”, “Sexually Transmitted Diseases/Infecções Sexualmente Transmissíveis”, “Health Education/Educação em Saúde”, “Woman/Mulher”.

Complete original articles, published in English, Portuguese and Spanish, that answered the guiding question of the review were included. Duplicate articles were computed only once, according to the search order in the databases. The period of publication was not a criterion for the selection of articles, in order to obtain the frequency of publications over time.

After carefully reading the titles of the 507 articles found in the chosen databases, 459 articles were excluded because they did not meet the theme of the study. Then, the study abstracts were read in full from the remaining 48 articles, excluding another 22 because they did not meet the object of the research. The remaining articles (19) were read in full for the analysis of the adequacy to the inclusion criteria of the research, of these, 10 were selected for the development of the study.

The search for articles in the databases was carried out by two researchers individually, using the same crossing strategy, in order to validate the research stage. To assess the methodological rigor of the publications, an instrument adapted from the Critical Appraisal Skills Program (CASP) was used, consisting of ten items from which the studies are classified into two categories - A and B - according to the score obtained.

RESULTS

The articles were published between 2009 and 2018. Six articles achieved level 2\textsuperscript{12, 13, 14, 15, 16, 17}, three achieved level 5\textsuperscript{18, 19, 20} and one achieved level 6.\textsuperscript{21}

Among the countries that published the articles, six were from the United States\textsuperscript{13, 14, 15, 17, 18, 20}, followed by two published in Brazil\textsuperscript{19, 21}, one in Cuba\textsuperscript{12} and one in Canada.\textsuperscript{16}

Among the 10 studies analyzed, 9 obtained CASP classification A\textsuperscript{12, 13, 14, 15, 16, 17, 19, 20} and 1 obtained classification B.\textsuperscript{21} As for the methodological design, 6 articles\textsuperscript{12, 13, 14, 15, 16, 17} have a randomized approach, followed by 2 descriptive studies\textsuperscript{18, 20} and 2 qualitative.\textsuperscript{19, 21}

The health education approaches for women in deprivation of liberty were: HIV prevention, HIV/STI risk reduction, partner violence and HIV, STI and male and female condom use, STI, Health promotion and prevention policies STI, STI and HIV, HIV prevention and illicit drug use, contraception, STI and preconception counseling and HIV/STI prevention.

DISCUSSION

When faced with the nationality of the studies, it is clear that the majority was developed in North America and is consistent with the American reality.\textsuperscript{13, 14, 15, 17, 18, 20}

Regarding the purpose of the study, the most used theme about STIs within women's prisons was HIV. Such information corroborates the data from the National Penitentiary Department of
<table>
<thead>
<tr>
<th>AUTHORSHIP/DATABASE</th>
<th>OBJECTIVE/TYPE OF STUDY</th>
<th>SAMPLE/COUNTRY/HEALTH EDUCATION THEMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staton M, Strickland J, Webster M, Leukefeld C, Oser C, Pike E.</td>
<td>Decrease HIV risk behaviors of women in rural prisons.</td>
<td>199 women in prison</td>
</tr>
<tr>
<td>MEDLINE</td>
<td>Randomized</td>
<td></td>
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<tr>
<td>MEDLINE</td>
<td>Qualitative</td>
<td></td>
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<tr>
<td>MEDLINE</td>
<td>Randomized</td>
<td></td>
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<tr>
<td>Amorim RPL, Ribeiro SG, Nicolau AIO, Pinheiro PNC, Vieira NFC, Pinheiro AKB.</td>
<td>To report an experience of an educational strategy on sexually transmitted diseases in a female prison in the state of Ceará</td>
<td>26 women in prison</td>
</tr>
<tr>
<td>CINAHL</td>
<td>Descriptive</td>
<td></td>
</tr>
<tr>
<td>Malpica KG, Díaz, BTM.</td>
<td>Conduct research on health systems and services.</td>
<td>122 women in prison</td>
</tr>
<tr>
<td>SCIELO</td>
<td>Randomized</td>
<td></td>
</tr>
<tr>
<td>Filho ACAA, Feitosa, KVA, Sales IMM, Moura FMJSP.</td>
<td>To report the experience of nursing students as assistance in the area of reproductive and sexual health of women prisoners.</td>
<td>100 women</td>
</tr>
<tr>
<td>LILACS</td>
<td>Descriptive of the type of experience report</td>
<td>Brazil Policies for health promotion and STI prevention.</td>
</tr>
<tr>
<td>Jeffrey H, Deborah J, Gelaude, MA.</td>
<td>Test the effectiveness of a behavioral intervention adapted to sexually transmitted infection (STD)</td>
<td>521 women in prison</td>
</tr>
<tr>
<td>COCHRANE</td>
<td>Randomized</td>
<td></td>
</tr>
<tr>
<td>Knudsen HK, Staton-Tindall M, Oser CB, Leukefeld HCG.</td>
<td>Reduce sexual HIV risk behaviors among women with a history of drug use.</td>
<td>444 women in prison</td>
</tr>
<tr>
<td>COCHRANE</td>
<td>Randomized</td>
<td></td>
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</tbody>
</table>
Women report that syphilis and HIV are the STIs that most affect the female population of the national prison system. \(^22\)

When brought up the reality of women drug users, in general, they are more likely to have partners who are also drug users and, with less economic resources to buy drugs, they are more likely to engage in sexual interchange to obtain these substances. \(^16\)

In relation to detained teenage women, they are at substantial risk for acquiring STIs and HIV, including risky sexual behaviors, family violence, trauma and sexual abuse, negative peer influences, mental disorders and substance abuse. \(^18\)

In the prison population, the spread of STIs is highlighted due to sexual promiscuity and the precariousness of actions to control them, including the fact that some prisoners never had access to health care before being in prison. \(^19\)

Instability in sexual life before entering prison, personality disorders, family abandonment situations, conflicting homes and crime rates since adolescence are factors that contribute to this occurrence. \(^12\)

The National Health Plan in the Penitentiary System (PNSSP - Plano Nacional de Saúde no Sistema Penitenciário), foresees actions for the diagnosis, counseling and treatment of STIs, as well as diagnostic and treatment actions, according to the Syndromic approach. The development of actions and works that contribute to the objectives of the PNSSP are achieved, and that guarantee that the guidelines and principles proposed in the National Plan for Integral Assistance to Women’s Health reach women in the prison system, is the biggest challenge in the attention to the health of the population. \(^23\)

Understanding that the female prison population is vulnerable, the National Policy for Attention to Women in Situation of Deprivation of Liberty and Prisoners (PNAMPE - Política Nacional de Atenção às Mulheres em Situação de Privação de Liberdade e Egressas do Sistema Prisional) was created, according to Inter Ministerial Ordinance No. 210, of January 16, 2014. \(^25\)

The Protocol of Primary Health Care for Women, covers the care of women with greater scope, lists conditions for changing habits such as health education, but does not explain step-by-step how to develop and apply educational practices. \(^26\)

Therefore, knowing the approaches used to develop health education strategies helps to recognize possible gaps in knowledge and to improve educational strategies. \(^25\)

Adapting evidence-based interventions is a strategy for developing interventions that can protect detained women from adverse sexual health outcomes. \(^17\)

Thus, an HIV/STI prevention intervention with women in deprivation of liberty can significantly reduce sexual risk behaviors and increase protective behaviors after reintegration into the community. \(^13\)

**CONCLUSION**

STIs were evidenced as a reality within the female prison environment, being, in most cases, linked to the use of drugs and unprotected sex.

Thus, knowing the literature developed on STIs in the female prison environment, reinforces the development of reliable educational strategies that consequently will bring benefits to the population and change, positively, the epidemiological in-
Finally, it is opportune for health professionals, especially nurses, to seek to understand the demands of this population and develop their role as a health educator in this community.

REFERENCES


