


Developmental transition experienced by liberty-deprived adolescents

Transição desenvolvimental vivenciada por adolescentes em privação de liberdade

Transición de desarrollo que viven los adolescentes privados de libertad

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ABSTRACT

Objective: to analyze the transition processes experienced by liberty-deprived adolescents. **Method:** this is a descriptive qualitative study based on the theoretical framework developed by Afaf Meleis, conducted with female adolescents at a female juvenile detention center in a capital city in northeastern Brazil. Data collection was conducted between September 2023 and January 2024 following authorization from the institution and approval from the Research Ethics Committee. **Results:** this study utilized participant observation and a discussion group consisting of seven adolescents to identify and analyze organizational transitions. **Conclusion:** transitions are a central focus for nurses especially when they affect health outcomes or are influenced by health-related behaviors during the transition process.

Descriptors: Nursing Theory; Prisoners; Adolescent; Growth and Development.

RESUMO

Objetivo: analisar as transições vivenciadas por adolescentes em privação de liberdade. **Método:** trata-se de um estudo descritivo de natureza qualitativa, pautado no referencial teórico de Afaf Meleis, realizado em uma Unidade de Internação Feminina, com adolescentes do sexo feminino em uma capital do Nordeste Brasileiro. A coleta de dados ocorreu entre setembro de 2023 a janeiro de 2024, após a autorização da instituição e a aprovação do Comitê de Ética em Pesquisa. **Resultados:** neste estudo foi realizada a observação participante e grupo de discussão com sete adolescentes, identificando e discutindo a transição do tipo organizacional. **Conclusão** a transição é uma área de atenção dos enfermeiros quando interfere com a saúde ou quando a resposta à transição é mediada por comportamentos que se relacionam com a saúde.

Descritores: Teoria de Enfermagem; Pessoa Privada de Liberdade; Adolescente; Desenvolvimento.

RESUMEN

Objetivo: analizar las transiciones que experimentan los adolescentes privados de libertad. **Método:** se trata de un estudio descriptivo de carácter cualitativo, basado en el marco teórico de Afaf Meleis, realizado en una Unidad de Internación Femenina, con adolescentes del sexo femenino, de una capital del Nordeste de Brasil. La recolección de datos se llevó a cabo entre septiembre de 2023 y enero de 2024, con autorización previa de la institución y aprobación del Comité de Ética en Investigación. **Resultados:** en este estudio se realizó observación participante y grupo de discusión con siete adolescentes, se identificó y discutió la transición del tipo organizacional. **Conclusión** la transición es un área de atención que le compete a los enfermeros cuando afecta la salud o cuando la respuesta a la transición está mediada por conductas que se relacionan con la salud.

Descriptores: Teoría de Enfermería; Prisioneros; Adolescente; Crecimiento y Desarrollo.

INTRODUCTION

This study examines the transitions experienced by adolescents deprived of their liberty. The term "transition" refers to the process of being in transit, moving from one place to another, or undergoing some form of treatment. Any significant change requires a transition process¹. Numerous transitions occur throughout human life, starting at birth and continuing through a series of diverse everyday experiences. These transitions can encompass changes in the human life cycle, such as the progression from childhood to adolescence and adulthood, as well as shifts in location, status, and the onset of new beginnings and cycles².

According to Law No. 8069/1990, which outlines the Statute of the Child and Adolescent (*Estatuto da Criança e do Adolescente - ECA*), adolescence is defined as the period between twelve and eighteen years of age. This age group is entitled to all fundamental human rights along with comprehensive protection, which includes access to opportunities for physical, mental, moral, spiritual, and social development in an environment that fosters dignity and freedom³.

The transition from adolescence to adulthood is marked by the development of new strategies for managing various situations, with a particular emphasis on interpersonal dynamics, including those within the professional sphere. The situations that emerge during this transitional process can influence the young person's behavior and are deeply connected to their social context⁴. Adolescents have increasingly faced the adversities and complexities of the modern

world, where violence and criminality permeate the social environment. Crime rates among adolescents have reached alarmingly high levels, highlighting the urgent need for effective educational policies⁵. According to the ECA, adolescents are held accountable for unlawful acts through socio-educational measures. In this context, the pedagogical role emerges as the core principle for re-educating and reintegrating this group into society⁶.

Scientific literature indicates that adolescents who are not exposed to criminality and deprivation of liberty generally undergo a healthier transition process as they benefit from established support networks and better opportunities to develop self-care practices. In this context, fostering a more positive future through improved access to resources and education promotes personal development and paves the way for new perspectives in adulthood⁷.

Deprivation of liberty refers to the legal restriction of an individual's freedom and autonomy, limiting their ability to make independent decisions. During adolescence, this deprivation aims to correct unlawful behavior. However, the concept of punishment should be rejected in favor of adopting an educational approach⁸. In this context, it is important to highlight the healthcare system's role in supporting adolescents, encouraging discussions on care that address the various factors influencing the health-illness process⁹.

Thus, nursing care is essential to provide comprehensive, humanized assistance tailored to the specific needs of this group, offering interventive actions while maintaining a focus on direct, holistic healthcare throughout all stages of human life¹⁰.

Given this context, this study aims to explore the transitions experienced by liberty-deprived adolescents and address the following guiding question: What transitions do adolescents undergo while deprived of liberty?

METHOD

This is a descriptive qualitative study grounded in the theoretical framework of Afaf Meleis. It was conducted at a Female Juvenile Detention Center (*Unidade de Internação Feminina – UIF*) located in a capital city in northeastern Brazil. The center accommodates adolescents aged 12 to 21, either with a defined sentence or one that is still pending. The location was chosen because it is the only facility in the city that accommodates female adolescents who have committed offenses. The inclusion criteria required participants to be female adolescents deprived of liberty for at least one month, while the exclusion criteria applied to those unable to participate at the time of data collection.

Data collection took place from September 2023 to January 2024 following authorization from the institution and approval from the Research Ethics Committee (*Comitê de Ética em Pesquisa – CEP*) of the proposing university under CAAE No. 66204222.2.0000.5013.

The research adhered to the ethical guidelines set forth by the National Health Council in Resolution No. 466 of December 2012 which underscores the importance of human dignity and the special protection of participants in scientific research involving human beings. These principles are embodied in the core values of beneficence, non-maleficence, justice, equity, and autonomy. The participants' desire to contribute and remain involved in the study was fully respected. Comprehensive explanations were provided, and signatures were obtained on an Informed Assent Form (*Termo de Assentimento Livre e Esclarecido – TALE*) for minors or individuals with limited capacity, written in clear and accessible language, or on an Informed Consent Form (*Termo de Consentimento Livre e Esclarecido – TCLE*) for individuals over 18 years of age.

Data was collected using the techniques of Participant Observation and focus group discussions. The combination of both techniques aimed to capture a broader range of information. Participant observation allows the researcher to closely engage with the research setting, immersing themselves in the context as if they were an integral part of it¹¹. Therefore, this technique provided valuable insights into the research environment, including the institution's routine, rules and regulations, and the daily lives of the adolescents involved in the study. It also played a key role in fostering rapport with both the participants and the UIF staff, contributing to a more in-depth understanding of the context. A field diary was used to document key events experienced during the process.

The discussion group, on the other hand, was organized as a group interview to promote active participation, allowing participants to share their perspectives and experiences based on their life context¹². Activities aimed at strengthening the bond between the participants and the research team were employed to guide the group. Two meetings were held with the discussion group. With the participants' consent, a voice recorder was used to capture the discussions, and the recordings were subsequently transcribed. To ensure anonymity, participants were assigned codes consisting of the letter 'P' followed by numbers ranging from one to seven (P1 to P7).

The material produced was carefully and thoroughly reviewed, with emerging themes identified and subsequently coded and categorized. As a result, statements were selected based on their level of representativeness and relevance, focusing on excerpts that best illustrated the identified categories and the participants' views on the phenomenon being studied.

Thus, the information was analyzed through the triangulation of field diary entries, discussion groups, and Afaf Meleis' theoretical framework. Afaf Meleis' Transition Theory is a mid-range theory in nursing science that addresses specific phenomena and concepts, which can be applied in clinical, administrative, and educational practice^{13,14}.

This theory comprises several variants organized into three core constructs: the types, patterns, and properties related to the nature of transitions; the factors that may act as facilitators or inhibitors of the referred transition; and the response patterns, which describe how individuals react to transitions. This final construct includes both process and outcome indicators, outlining a healthy transition and highlighting nursing interventions that can support and facilitate this process¹⁴.

RESULTS AND DISCUSSION

The participants in this study were aged between fifteen and nineteen, and their socio-educational measures generally lasted from ten months to two years. Six of the seven participants lived in the state where they were serving their socio-educational measure, while one participant was from a neighboring state.

Participant observation was carried out in parallel with the discussion groups. This strategy was important for building bonds with the participants, thus creating a space of reception and trust as they were initially quite withdrawn. In this way, the researchers' immersion occurred gradually. It is important to note that, although it is an institution for socio-educational measures with distinct characteristics, the context under study follows rules similar to those of the prison system.

Thus, the observation process also allowed for monitoring and understanding the dynamics within that space, including the healthcare provided in coordination with the health network, social assistance services, partner organizations, as well as aspects like job market integration and ongoing education. The latter, in particular, promotes autonomy and enhances the agency of individuals in semi-open custody, as they attend school independently.

The approach with the first discussion group served as an "icebreaker", with both participants and researchers forming a circle for introductions. The participants were invited to introduce themselves by sharing their name, age, and the length of time they had been in the system. Shortly after, the research objectives were explained, and the research team distributed images intended to represent moments experienced by the adolescent girls. They were also provided with school supplies such as pens, pieces of paper, glue, and colored pencils, to create a panel that either represented themselves or depicted activities they enjoyed.

The second discussion group focused on the transition process for the adolescent girls, exploring their shift from life in freedom to life within the socio-educational system, as well as their future perspectives following their release. A keyword activity was conducted, where the researchers provided cards featuring words that represented various emotions, such as joy, sadness, hope, faith, and others.

The activity took place through a conversation circle in which each teenage girl chose one, two, or as many words as they wished. While in the circle, they explained why they chose those words and how they connected to the changes brought about by their deprivation of liberty, their experiences throughout this process, and their expectations for the future.

Transitions can be classified into four types based on their nature: developmental, situational, health/illness-related, and organizational. Developmental transitions involve complex and dynamic processes linked to the biological stages of growth in individuals, encompassing the changes that occur throughout the life cycle, including birth, adolescence, aging, and death. It is well known that the life of a young offender deprived of liberty and confined to an institution can be marked by experiences of suffering, humiliation, anger, outbursts, and other factors that typically define transitional periods¹⁵.

Afaf Meleis' theory addresses life transitions and social roles. It encompasses the significant changes faced by individuals while adapting to new contexts. This is evident in the participants' statements, which reflect elements such as adaptation, engagement in new activities, and personal reassessment¹⁶.

I can't really say that I loved this place right from the start, but today I can say that I do, and I'm grateful for the opportunities it has provided me [...] I have a great interest in sewing and crafts. I didn't know they had all these activities available here, but I've been trying to make some clothes whenever I can. (P1)

Next month will mark a year. I've learned a lot about being here, living with others, and being more mindful of how I communicate with them [...] I've been learning to navigate and experience this. In the past, I used to complain a lot, but now I no longer dare complain to God, because He sees what we cannot see and hears what we cannot hear. (P4)

Positive experiences may emerge in daily life, while new meanings can be attributed to this transitional process. These may include newfound opportunities within the system, established routines, new dietary plans, detachment from addictions, and relief from past dangers—factors that often contrast sharply with the reality they faced outside¹⁷.

The adaptation process of individuals to the social system of incarceration is often incomplete and marked by contradictions, as those who are imprisoned develop strategies and find ways to resist. These transitional patterns are diverse and emerge from the daily realities inherent in incarceration. During this period, negative perceptions are shaped by feelings of exclusion and the vulnerabilities individuals face within the system, including separation from their families¹⁸.

The entire process of liberty deprivation represents a sense of double punishment, characterized by both external and internal suffering. The former refers to the very act of deprivation, and, consequently, the limitation of personal freedom as a punishment for the offense committed. The latter manifests as feelings of guilt, aversion, regret, and a heavy conscience, fostering a sense of sadness and emptiness within the individual. On the other hand, internal punishment may lead to the desire to avoid remaining in prison - in other words, it may be linked to the desire to turn one's life around and reintegrate into society¹⁷.

In the discussion groups, each participant's story was highlighted, exploring the reasons that led them to the system and identifying the factors that shape their unique experiences. Developmental transition encompasses changes throughout the life cycle, including shifts in health status and other transformations that occur over time. It includes the process of flow, movement, and development¹⁹. In this context, it is important to highlight the experience of motherhood for four participants in detention, two of whom went through pregnancy and postpartum while incarcerated.

Motherhood in adolescence can result from various factors, including lack of guidance, family support, and communication, limited social interaction, inadequate access to healthcare, social vulnerability, and other elements that may influence this experience²⁰. Teenage pregnancy leads to various physical, psychological, and social changes. During this stage of life, a young woman's body is still developing, particularly her sexual and reproductive organs, which are maturing to support reproduction in ways that reduce risks for both the mother and the child. Due to these changes, teenage pregnancy can result in serious social and family challenges²¹.

According to the Federal Constitution, women deprived of liberty in Brazil have the right to keep their children with them during the breastfeeding period, which lasts for six months. The Statute of the Child and Adolescent (ECA) reinforces the following guidelines:

"Care mentioned in paragraph 4 of this article must also be provided to pregnant women and mothers who express an interest in giving their children up for adoption, as well as to pregnant women and mothers who are incarcerated."^{3:15}

"It is the responsibility of the public authorities to ensure that pregnant women and women with young children under custody in a detention facility are provided with an environment that meets the sanitary and healthcare standards set by the Unified Health System for childcare, in coordination with the relevant education system, aiming at the child's holistic development."^{3:15-16}

The laws governing the prison system ensure that a child's needs are addressed during their stay, emphasizing their rights to life, health, dignity, and respect. They also guarantee the child's right to be raised in a family and community environment, alongside their incarcerated mother²².

I was actually pregnant when I got here [...] He had given me some money to buy contraceptive pills to prevent it. But hunger spoke louder. So, I ended up buying some acai and a snack, you know? I chose to buy snacks instead, and now my belly is showing. But I'm happy to be pregnant because I'm sure that after giving birth, my mindset will change a lot. And I want to give them all the love I never had [...] I've always been rejected, you know? Just knowing that it will be my child and that I'll be able to look after them in my own way means a lot to me. (P1)

I see myself as a person full of dreams to fulfill, full of goals to achieve, and with the desire to give my child what I never had [...] He came here with me. He stayed here until he was four months old because he eventually got sick, he caught tuberculosis and had to spend four months in the HGE [hospital]. So, on December 13th, he went away. He went to live with my mother and my husband. (P2)

I had postpartum depression, so my husband's mother [paternal grandmother] started pressuring me every week to transfer custody of my son to her name. Eventually, I couldn't take it anymore and gave in, but it was a moment of weakness. When I get out of here, I'll get him back. (P4)

Motherhood within the prison system differs significantly from that experienced by women in freedom, particularly regarding access to healthcare, family interactions, and challenges related to family ties. These factors,

among others, are crucial during this phase of life²³. Thus, experiencing pregnancy and postpartum while deprived of liberty is a formative experience. This experience represents a paradox: on one hand, there is the sense of rupture; on the other, the tenderness of motherhood. These women endure the suffering of being separated from their children, where the punishment for their offense is intensified by the emotional pain of this separation²⁴.

Thus, experiencing motherhood while still in the institution provided these women with new perspectives on life and new choices, evoking an ambivalent mix of hope, care, restored bonds, and fear.

At first, I had lost some of the bond I shared with my son, but then God blessed me, and I was able to reconnect with him. But he always knew I was his mother, though he was very attached to my mom. Thank God now he always wants to be with me [...] But I was really sad that my son had to stay here for a while- he didn't do anything wrong, I did. (P2)

I'm glad that my son is doing well and that everything went smooth during labor... I'm also happy that his father registered our child. I wasn't particularly fond of the moment he was born; he didn't cry and had difficulty breathing. I was scared and apprehensive. My love for him grows stronger with every minute, every day. I want to do everything for him. I don't want him to go through what I went through. He's mommy's little baby. (P1)

Here's the word I chose: Longing. That's it. I miss my children. I miss having hope and freedom! Freedom is all I want. (P6)

The anguish and guilt of being unable to closely monitor or actively participate in their children's development²⁵ emerged as a recurring theme in nearly every meeting held for this study. In this sense, regaining freedom and reconnecting with their children is one of the main goals expressed by the interviewees. The suffering caused by the absence of their children can be divided into two interconnected moments: the first occurs after the six-month breastfeeding period, when mothers are separated from their children, and the second arises during scheduled visits, when mothers and children must part at the end of each visit, or when the mother is required to return to the institution if confined in minimum-security facilities²⁶.

Still in the context of developmental transitions, it is worth highlighting the story of P7, an adolescent and transsexual woman who had been in the system for ten months. It is important to note that all adolescents, upon entering the system, undergo an initial assessment before being assigned to the appropriate facilities. P7 shares that she spent much of this process in a male facility, and she describes this experience in her own words:

At first, I thought no one would bother me, but the boys were prejudiced and didn't speak to me. As soon as I entered the facility and they noticed the way I acted, they immediately said, 'Look, he's gay', and no one would speak to me. It was very difficult; they could have even attacked me, as the boys there are very unruly. I kept saying that to the members of the staff, and I spent a lot of time at the PHC. I kept asking them to send me here [to the women's facility], because I knew I could be attacked there and that I would never be accepted. There are too many boys there, and the officers can't control them because there are so few, which created a real risk of them attacking or harming me. But most of that time I would stay at the PHC, and to avoid staying at the facility, I would cut myself; I would cut my arms just to go to the PHC". (P7)

The experience described above prompts a reflection on the rights and public policies related to this context, which significantly impact the socio-educational system. The historical journey toward securing human rights in Brazil emerged from numerous struggles and political debates aimed at addressing issues of race, sexuality, gender, and the needs of groups marginalized by discriminatory practices. During the 1980s, as Brazil underwent re-democratization and social movements gained momentum, discussions on gender began to take center stage²⁷.

Still in the 1980s, the first institutions focused on this area of action were established, such as the Women's Protection Police Station in São Paulo in 1985. In the same year, the Ministry of Justice established the National Council for Women's Rights to integrate gender issues into the field of Health²⁸.

The government in Brazil has been currently emphasizing transversal policies, with the Gender and Race Equity Plan for 2024-2025 emerging as a key initiative. The plan seeks to implement actions that promote diversity and tackle the challenges within this process²⁹. However, there is a lack of studies examining the implementation of these transversal policies within the socio-educational system, especially regarding the entry of young offenders into the system. This is evident in the experience shared above, which highlights the significant challenges faced by a transsexual woman who endured a traumatic experience in a male facility.

When applying Meleis' theory, particularly in relation to process indicators, this experience impacts both the individual's health and well-being, as well as the risks and vulnerabilities encountered during their transition. The transfer of the teenage girl to the UIF (female unit) aligns with the outcome indicators proposed by the theory, emphasizing the importance of trust-building and fostering new perspectives for a healthy transition¹⁴.

Finally, it is important to highlight that transitions are not experienced the same way, even in similar circumstances. For the adolescent girls who participated in this study, the shift from freedom to a new condition [deprivation of liberty] may lead to an awareness of both the changes they have already experienced and those still to come. Therefore, awareness is a key element for a healthier transition. However, experiences are subjective, and each adolescent has her own unique pace in navigating the transition and understanding how it impacts her.

FINAL CONSIDERATIONS

The study offered an opportunity to analyze and understand the experiences of adolescents deprived of liberty, as well as the transitions they undergo throughout this process. It aimed to explore the complexity of these transitions through Afaf Meleis' theoretical framework, with a focus on developmental transitions.

Scientific research that has adopted the theory of transitions as a theoretical framework aligns with one of Meleis' key assertions: transitions are a key focus for nurses, particularly when they impact health or when the response to the transition is influenced by health-related behaviors.

Another key aspect highlighted in scientific studies applying the theory discussed here is the focus on exploring and reflecting on the nurse's role in supporting and guiding individuals through transition processes. Therefore, this highlights the importance of a theoretical framework that guides nursing professionals, both in their research efforts and in providing effective care.

REFERENCES

1. Meijerink HJ. Transição: a mudança do velho para o novo - o que isso faz com você [Site de Internet]. Holambra: Centro Para Liderança Horizontal; 2011 [cited 2024 Feb 15]. p. 1-6. Available from: https://febrapdp.org.br/download/publicacoes/Mudancas_e_Transicoes.pdf.
2. Müller E. O conceito de transição no curso da vida contemporâneo. RF. 2014 [cited 2024 Feb 15]; 1(3):e29995. Available from: <https://periodicos.ufba.br/index.php/feminismos/article/view/29995>.
3. Ministério da Saúde (Br). Lei nº 8.069, de 13 de julho de 1990. Dispõe sobre o Estatuto da Criança e do Adolescente e dá outras providências. Brasília: Diário Oficial da União; 1990 [cited 2024 Feb 20]. Available from: https://www.planalto.gov.br/ccivil_03/leis/l8069.htm.
4. Leme VBR, Fernandes LM, Jovarini NV, Falcão AO, Moraes GA. Percepções de jovens sobre a transição para a vida adulta e as relações familiares. Gerais, Rev. Interinst. Psicol. 2016 [cited 2024 Feb 20]; 9(2):182-94. Available from: https://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S1983-82202016000200003.
5. Coutinho MPL, Estevam ID, Araújo LF, Araújo LS. Prática de privação de liberdade em adolescentes: um enfoque psicossociológico. Psicol. Estud. 2011 [cited 2024 Feb 20]; 16(1):101-9. Available from: <https://www.scielo.br/j/pe/a/5Q6FNm8J7TtVff99GhxKZs>.
6. Ministério da Saúde (Br). Diretrizes nacionais para a atenção integral à saúde de adolescentes e jovens na promoção, proteção e recuperação da saúde. Brasília: Ministério da Saúde; 2010 [cited 2024 Feb 21]. Available from: https://bvsms.saude.gov.br/bvs/publicacoes/diretrizes_nacionais_atencao_saude_adolescentes_jovens_promocao_saude.pdf.
7. Fonseca PN. O impacto do acolhimento institucional na vida de adolescentes. Rev Psicopedagogia. 2017 [cited 2023 Dec 08]; 34(105):285-96. Available from: http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S0103-84862017000300006&lng=pt&tlng=pt.
8. Gomes M, Silva J, Santos M. A privação de liberdade e seus impactos no desenvolvimento de adolescentes: reflexões sobre a internação. Rev Bras Ter Comport Cogn. 2017 [cited 2024 Feb 21]; 3(3):189-202. DOI: <https://doi.org/10.1590/S1517-97022006000100005>.
9. Alves SAA, Silva KN, Machado MFAS, Cavalcante EGR, Albuquerque GA, Bezerra IMP, Lopes MSV. Digital booklet on sustainable practices for promoting adolescent health. Ciênc. saúde coletiva. 2023 [cited 2024 Feb 21]; 28(8):2215-26. DOI: <https://doi.org/10.1590/1413-81232023288.07222023>.
10. Santos, JLR, Aguiar RS. Cuidado de enfermagem aos adolescentes em cumprimento de medida socioeducativa. Cereus. 2020 [cited 2024 Feb 21]; 12(1):184-92. Available from: <http://ojs.unirg.edu.br/index.php/1/article/view/2992>.
11. Marietto ML. Observação participante e não participante: contextualização teórica e sugestão de roteiro para aplicação dos métodos. Rev. Ibero-Am. de Est. 2018 [cited 2024 Feb 21]; 17(4):5-18. DOI: <https://doi.org/10.5585/riae.v17i4.2717>.
12. Godoi CK. Grupo de discussão como prática de pesquisa em estudos organizacionais. Rev. adm. Empresa. 2015 [cited 2024 Feb 22]; 55:632-44. DOI: <https://doi.org/10.1590/S0034-759020150603>.
13. Guimarães MS, Silva LR. Conhecendo a Teoria das Transições e sua aplicabilidade para enfermagem. Jornal de Dados PPGENFBIO. 2016 [cited 2024 Feb 21]; 1-6. Available from: <https://jornaldedados.files.wordpress.com/2016/10/conhecendo-a-teoria-das-transic3a7c3b5es-e-sua-aplicabilidade.pdf>.
14. Meleis AI. Transitions Theory: middle range and situation specific theories in nursing research and practice. New York: Springer; 2010.
15. Oliveira MCSLD, Vieira AOM. Narratives about the deprivation of freedom and the development of the adolescent self. Educ. Pesq. 2006 [cited 2024 Feb 25]; 32:67-83. DOI: <https://doi.org/10.1590/S1517-97022006000100005>.

16. Lima CFM, Santos JLG, Magalhães ALP, Caldas CP, Erdmann AL, Santos I. Integrating Transitions Theory and Grounded Theory for nursing research and care. *Rev. enferm. UERJ*. 2016 [cited 2023 Dec 08]; 24(5):e19870. DOI: <https://doi.org/10.12957/reuerj.2016.19870>.
17. Caçador BS, Silva LVC, Batista GC, Garcia MA, Resende MAS, Nogueira AP, et al. Viver privado de liberdade e implicações na produção de cuidado percebido por indivíduos no cárcere: estudo fenomenológico. *Rev. Pesq. Qual.* 2024 [cited 2024 Feb 25]; 12(29):78-94. Available from: <https://editora.sepq.org.br/rpq/article/view/615>.
18. Onofre EMC. Educação escolar para jovens e adultos em situação de privação de liberdade. *Cad. CEDES*. 2015 [cited 2024 Feb 25]; 35:239-55. DOI: <https://doi.org/10.1590/CC0101-32622015723761>.
19. Meleis AI, Sawyer LM, Im EO, Hilfinger Messias DK, Schim SM. Experiencing transitions: an emerging middle-range theory. *Adv Nurs Sci*. 2007 [cited 2023 Dec 08]; 30(2):142-56. DOI: <https://doi.org/10.1097/00012272-200009000-00006>.
20. Kudłowiez S. Gravidez na Adolescência e Construção de um Projeto de Vida. *Psico*. 2014 [cited 2024 Mar 01]; 45(2):228-38. DOI: <https://doi.org/10.15448/1980-8623.2014.2.14282>.
21. Rodrigues LS, Silva MVO, Gomes MAV. Gravidez na adolescência: suas implicações na adolescência, na família e na escola. *Psico*. 2019 [cited 2024 Mar 01]. DOI: <https://doi.org/10.15448/1980-8623.2014.2.14282>.
22. Ministério da Saúde (Br). Resolução n. 210 de 5 de junho de 2018. Dispõe sobre os direitos de crianças cujas mães, adultas ou adolescentes, estejam em situação de privação de liberdade. Brasília: Diário Oficial da União; 2018 [cited 2024 Mar 01]. Available from: <https://www.gov.br/mdh/pt-br/assuntos/noticias/2018/junho/conanda-publica-resolucao-sobre-garantia-dos-direitos-de-criancas-com-maes-privadas-de-liberdade>.
23. Veríssimo L, Miranda FAN, Costa GMC. Motherhood experience for prisoners. *Rev. Eletr. Enf.* 2015 [cited 2024 Mar 01]; 17(2):360-9. DOI: <https://doi.org/10.5216/ree.v17i2.29784>.
24. Medeiros ABD, Silva GWDS, Lopes TRG, Carvalho JBLD, Caravaca-Morera JA, Miranda FAND. Re Social representations of motherhood for women deprived of liberty in the female prison system. *Ciênc. Saude Coletiva*. 2022 [cited 2024 Mar 07]; 27:4541-51. DOI: <https://doi.org/10.1590/1413-812320222712.11522022>.
25. Ormeño GR, Maia JMD, Williams LCDA. Crianças com pais ou mães encarcerados: uma revisão da literatura. *RPCA*. 2013 [cited 2024 Mar 10]; 4(2):141-61. DOI: <https://doi.org/10.34628/cev1-3344>.
26. Flores N, Portugal M, Smeha LN. Mães presas, filhos desamparados: maternidade e relações interpessoais na prisão. *Physis*. 2019 [cited 2024 Mar 10]; 28:e280420. DOI: <https://doi.org/10.1590/S0103-73312018280420>.
27. Correia SC. Problemas de gênero e sexualidade vivenciados por adolescentes e jovens em situação de privação de liberdade [Dissertação de Mestrado]. Salvador: Universidade Federal da Bahia; 2021 [cited 2024 Mar 10]. Available from: <https://repositorio.ufba.br/handle/ri/33316>.
28. Cirilo ARO, Mesquita RF. Revisão panorâmica da análise das políticas públicas de gênero no Brasil (2016-2020). *O Social em Questão*. 2021 [cited 2024 Mar 12]; 4(52):107-30. Available from: <https://www.redalyc.org/journal/5522/552269635006/html>.
29. Ministério da Justiça (Br). Senado Federal. Plano de Equidade de Gênero e raça: 2024 a 2025. Brasília: Ministério da Justiça; 2024 [cited 2024 May 01]. Available from: <https://www2.senado.leg.br/bdsf/handle/id/647324>.

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