

## Approaching the topic of abortion in undergraduate education in the perspective of newly graduated nurses

*Abordagem do tema do aborto no ensino de graduação na perspectiva das enfermeiras recém-graduadas*

*Enfoque del tema del aborto en la enseñanza de graduación en la perspectiva de enfermeras recién graduadas*

*Mariana Santana Schroeter<sup>1</sup>; Adriana Lenho de Figueiredo Pereira<sup>II</sup>*

### ABSTRACT

**Objective:** to describe the approach to the subject of abortion in undergraduate education and its relation with critical education from the perspective of newly graduated nurses. **Method:** qualitative study carried out with 26 newly graduated nurses and enrolled in residency programs in the city of Rio de Janeiro. Individual interviews took place from April to July 2016, being analyzed by dialectic hermeneutics and under Paulo Freire's perspective. The study was approved by Ethics Research Committee. **Results:** The subject of abortion has a limited approach in undergraduate education. It was taught in few moments and as morbidity factor during pregnancy-puerperal cycle. Nurses feel unprepared to assist women in legal abortion. **Conclusion:** the restricted approach to the topic of abortion means a poor contribution to a critical-reflexive awareness and seems to favor the reproduction of common sense about abortion.

**Descriptors:** Abortion; women's health; nursing; nursing education.

### RESUMO

**Objetivo:** descrever a abordagem do tema do aborto no ensino da graduação e seus nexos com a formação crítica na perspectiva das enfermeiras recém-graduadas. **Método:** pesquisa qualitativa realizada com 26 enfermeiras recém-graduadas e matriculadas em programas de residência no município do Rio de Janeiro. As entrevistas individuais ocorreram no período de abril a julho de 2016, sendo analisadas pela hermenêutica-dialética e com base referencial de Paulo Freire. O estudo respeitou as normas éticas e obteve aprovação por Comitê de Ética. **Resultados:** a abordagem do tema do aborto na graduação é limitada, pois foi ensinado em poucos momentos e como morbidade do ciclo gravídico-puerperal. As enfermeiras se sentem despreparadas para assistirem as mulheres no aborto legal. **Conclusão:** o tema do aborto apresenta uma abordagem restrita para a formação da consciência crítico-reflexiva e parece favorecer a reprodução do senso comum sobre o aborto.

**Descritores:** Aborto; saúde da mulher; enfermagem; educação em enfermagem.

### RESUMEN

**Objetivo:** describir el enfoque del tema del aborto en la enseñanza de la graduación y sus nexos con la formación crítica en la perspectiva de las enfermeras recién graduadas. **Método:** investigación cualitativa realizada con 26 enfermeras recién graduadas y matriculadas en programas de residencia en el municipio de Rio de Janeiro. Las entrevistas individuales ocurrieron en el período de abril a julio de 2016, siendo analizadas por la hermenéutica dialéctica y con base referencial de Paulo Freire. El estudio respetó las normas éticas y fue aprobado por comité de ética. **Resultados:** el abordaje del tema del aborto en la graduación es limitado, pues fue enseñado en pocos momentos y como morbilidad del ciclo embarazo-puerperio. Las enfermeras se sienten despreparadas para asistir a las mujeres en el aborto legal. **Conclusión:** el tema del aborto presenta un abordaje restringido para la formación de la conciencia crítico-reflexiva y parece favorecer la reproducción del sentido común sobre el aborto.

**Descritores:** Aborto; salud de la mujer; enfermeira; educación en enfermería.

## INTRODUCTION

Abortion is a major cause of maternal death in Brazil, and voluntary termination of pregnancy is provided for by law only in cases of life-threatening conditions for the mother, rape and fetal anencephaly. An estimated number of 416,000 women had abortions in 2015 alone. Half of them used abortion drugs, and nearly 50 percent of such women were hospitalized to complete abortion<sup>1</sup>.

These restrictions on the access to legal abortion procedures compel women with unwanted pregnancies to resort to unsafe abortion in clandestine settings. When there are complications, they resort to health services and, depending on their severity, such complications can lead to death<sup>2</sup>. In addition to risk of death, these women present psychophysical suffering as a result of clandestinity, social judgment and criminalization. They also face unwelcoming, discriminatory and sometimes punitive professional attitudes<sup>3</sup>.

<sup>I</sup>Nurse. MNSc. Rio de Janeiro State University. Rio de Janeiro, Brazil. E-mail: [mariana.uerj.2010.1@gmail.com](mailto:mariana.uerj.2010.1@gmail.com)

<sup>II</sup>Nurse. PhD. Associate Professor. Rio de Janeiro State University. Rio de Janeiro, Brazil. E-mail: [adrianalenho.uerj@gmail.com](mailto:adrianalenho.uerj@gmail.com)

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In view of this important public health problem, it is expected that education can promote, in future professionals, an understanding of the complexity of the aspects involved in the abortion-related issue; attitudes of respect for human, sexual and reproductive rights, and skills for qualified, integral and humane care<sup>4</sup>.

Therefore, undergraduate programs in health and nursing should encourage their students to reflect critically on the issues surrounding abortion and adopt pedagogical strategies that make it possible to overcome the contradictions between what is expected in professional education and the reality of care for women in an abortion situation<sup>3,4</sup>.

Considering the problem described and that the development of critical thinking in undergraduation enhances the technical and scientific, ethical and humanistic skills indispensable to nursing care, the following guiding question was outlined: How was the topic of abortion approached in the education provided by the undergraduation program in the view of newly graduated nurses?

The study aimed to describe the approach to the subject of abortion in undergraduate education and its links with the development of critical thinking from the perspective of newly graduated nurses.

This study is justified by the possibility of broadening the understanding of how the subject of abortion is taught in undergraduate programs in order to contribute to the reflection on its pedagogical approach with reference to the development of critical thinking on the subject and, indirectly, foster the improvement of care provision to women facing an abortion situation.

To achieve that purpose, the theoretical framework of critical education was chosen, specifically Paulo Freire's pedagogical concepts concerning critical-reflective education, which will be presented below.

## **THEORETICAL FRAMEWORK**

Nursing teaching has been influenced by the progressive education movements that propose the problematization of reality to promote students' autonomy in knowledge construction and to comply with the National Curriculum Guidelines, which advocate generalist, humanist, critical and reflective education<sup>5</sup>.

Among these educational trends, Paulo Freire's pedagogical thinking is noteworthy as it theorized about dialogue and reflective action in the educational process. Reflective action is necessary for the process of awareness of oneself and of the world, and it takes place through the transitivity of consciousness. Consciousness becomes transitive when dialogue with other people and the world expands. Initially, it goes through the naive transitivity phase, when consciousness still retains simplicity in interpreting problems and the worldview is shaped by the ideas, beliefs, and values of the dominant culture<sup>6</sup>.

When consciousness reaches critical transitivity, one is able to go through the surface of phenomena, and that enables in-depth interpretation of problems, which is necessary to exercise social and political responsibility as well as to perceive oneself with an ethical commitment to respect human dignity and autonomy. Thus, education becomes libertarian and humanizing<sup>6,7</sup>.

Education should provide students with consistent and meaningful information for knowledge construction through dialogue and understanding of the problems and conflicts involved in the reality under analysis. In this way, students can develop sociabilities that can resist the dominant logic attempting to conform consciences to the acceptance of social contradictions<sup>8,9</sup>.

Therefore, Freirean pedagogy has humanization as its intrinsic value, since it develops the inherent capacity of human beings to understand these contradictions and adopt critical and loving attitudes capable of overcoming the mechanisms of social oppression that generate violence in society<sup>8,9</sup>.

From this educational perspective, the future professional will be able to overcome common sense and act on changing the reality of inequities and discrimination that women in an abortion situation suffer, which are the results of a social context riddled with moral, religious and cultural values. In addition, there are underlying gender issues that determine differences in the roles, norms, behaviors and attributes of females and males. For, in every case of abortion, there is a man involved who is co-responsible for the conception<sup>3,4</sup>.

Therefore, the teaching of the subject of abortion in undergraduate nursing programs should consider the various facets of this phenomenon and provide critical reflection on its social determinants and gender-related inequities in order to enable humanistic, reflective and critical professional training<sup>3-5</sup>.

## **METHODOLOGY**

Qualitative study conducted with newly graduated nurses linked to fourteen residency programs of a public higher-education Institution (HEI) based in a university hospital, family health units and public maternity hospitals located in the city of Rio de Janeiro.

The participants were twenty-six nurses attending the first year of the residency program. This group was considered a priority for the study because it had a predominant profile of newly graduated professionals and, therefore, the memories of their undergraduate education were more vivid, which favored the achievement of the study objective herein described. It was a group composed mainly of females, as only two participants were males. We chose to designate these nurses by the distinctive attribute of their professional profile, newly graduated.

These nurses were intentionally selected from an eligible group of 115 nurses attending the first year of the fourteen residency programs in 2016. The participants included in the study met the following inclusion criteria: being a nurse regularly registered in a residency program, attending the first year of the program and having completed their undergraduate nursing program between January 2015 and February 2016. The nurses who participated in the residency program but were on a leave of absence during the data collection period, from April to July 2016, were excluded.

As a data collection strategy, eligible nurses were invited to participate in the study at intervals or at the end of the theoretical classes of their residency programs at the HEI. Those who showed interest in participating in the study and met the inclusion criteria were contacted to schedule interviews on regular school days, in a reserved facility and by observing the diversity of training fields in the residency program, such as the family health segment; the clinical-surgical segment, represented by clinical, surgical and intensive-care specialties; and the maternal and child segment, concerning the specialties of the obstetric, pediatric and neonatal fields.

The interviews were individual, recorded and guided by a previously tested semi-structured script consisting of seven questions designed to characterize the participants and of sixteen open questions concerning the research object.

After transcription, the statements were analyzed by dialectical hermeneutics, a method that combines the hermeneutic phase - aiming at understanding the meanings and significations that emerge from texts, narratives, interviews and other documents - with the dialectical phase, which intends to analyze such meanings and significations critically in order to seek their ambivalences, incompleteness, dissent and contradictory nuclei, as well as their relations with the social context<sup>10</sup>.

The operational steps of this analysis are: a) data ordering, with exhaustive reading of the transcribed contents; b) data classification, seeking to reveal the central ideas about the object of study by thematic grouping and from common meanings and significations; and c) final analysis, when the dialectical movement is established between the empirical material and the theoretical perspective of the study, enabling the formation of interpretative syntheses<sup>10</sup>.

The research complied with the ethical standards for research involving human subjects, obtaining the confirmation number 1.533.584 and CAAE no.52508915.8.0000.5282. Coding was adopted by using the letter E, followed by a number indicating the order in which the interview was granted, such as E1, E2, E3 and so on, in order to maintain participants' anonymity.

## RESULTS

The mean age of the twenty-six nurses participating in the study was 25.3 years, ranging from 22 to 40 years. They had completed their undergraduate nursing programs at twelve HEIs, of which ten were public and private institutions in Rio de Janeiro state, and the others were public HEIs located in Minas Gerais and Rio Grande do Sul. There was a predominance of nurses from undergraduate programs provided by public HEIs (19) and of those who had completed their undergraduate programs in 2015 (20).

As for the specialized residency segments, twelve nurses were attending the first year of the obstetric, pediatric and neonatal nursing programs; eight participants were specializing in clinical, surgical and intensive-care nursing, and six nurses were from the family health program.

The following are the two categories that emerged from the process of dialectical hermeneutic analysis.

### **The superficial approach to the topic of abortion in undergraduate nursing education**

The newly graduated nurses considered that the topic of abortion was seldom addressed in the undergraduate nursing program, as it was mainly taught in the course on women's health by focusing on the morbidity of the pregnancy-puerperal cycle:

*I think that little attention is still given to this topic [...]. It should be more thoroughly addressed in class, so that future professionals can be more aware of it from the beginning of the undergraduate program, and not only in one course [...]. (E9)*

*More in terms of its physiopathological aspects [...] or also in terms of public health [...] in relation to girls seeking [unsafe abortion], [...] and not so much for the psychological issue [...], whether they want to carry on with a pregnancy or not. This was not satisfactorily approached. (E2)*

The approach of the topic of abortion in the clinical perspective was perceived by the interviewees as a strategy to minimize the possible controversies raised by the topic in class. The problem of clandestinity was also not extensively discussed in the undergraduate courses:

*In fact, I felt that people [teachers] were somehow afraid to bring up that subject due to all the controversy that it could cause, because of the religion of many students who disagreed. (E7)*

*They [teachers] talked about abortion in relation to the treatment for miscarriages. They never talked about induced abortions, but always about miscarriages [...]. (E17)*

The participants mentioned the little emphasis given in class to situations of legal abortions or to the nursing professional's role in the care to be provided in such situations:

*I don't remember it being addressed [legal abortion]. I am not sure that it wasn't, but I don't remember it. Also, I don't know what the nurse's role in legal abortion is. (E4)*

Despite these limitations in the teaching of abortion-related content, one segment of participants mentioned that they had had classes using the problematization methodology and focusing on female issues:

*With impartiality, I remember this well [...]. It is like taking a different look at these women [...] embracing and trying to understand and help them. (E26)*

*Before talking about abortion itself, there was a discussion on gender characteristics and gender oppression on women [...]. They [teachers] wanted us to reflect critically on this subject and on the kind of professionals that we would like to be as nurses. (E1)*

### **Newly graduated nurses' ambivalent conceptualizations of abortion**

The newly graduated nurses expressed the influence of moral values and a stereotypical view on the care for women in an abortion situation, as shown by the following statements:

*Ah, I think that from the moment of fertilization, there is life. If there is an embryo, it is an abortion, no matter what the gestational age is [...]. (E12)*

*I just think it's not a good idea to legalize abortion [...], if you go there and tell a story and say that you have been abused, they won't ask any questions; they will just perform the abortion. (E26)*

When seeing themselves as professionals who can assist women that are entitled to legal abortion, the nurses expressed their moral conflicts in providing care to them:

*I don't know about me as a professional, if it were a legal [abortion] situation, [...] having an abortion, for me, goes against some laws, especially against the law of reincarnation [...]. Also, I don't know if I have the right to refuse to do it [participate in the procedure] if any such situation comes to me in the health service (E11).*

Despite these influences and conflicts, a group of participants acknowledged that women's rights should be respected and that abortion should be viewed as a public health problem:

*Abortion should be seen more as a preventable cause of death if it were further discussed. (E15)*

*Women have their reasons, they have their own contexts, and we must support them. [...] I think the government, the State, should provide women with all this support. (E17)*

As newly graduated nurses, they considered themselves unprepared to assist women in an abortion situation and attributed their unpreparedness to the outdated approach to the subject in undergraduate education:

*I think I didn't have enough training during the undergraduate program to deal with this topic, I definitely didn't. (E12)*

*Our courses did not address the topic according to the present reality. Now, feminism is very much in focus, and many women have been fighting for this right [to abortion] [...]. I think [our training] was kind of old fashioned. (E13)*

### **DISCUSSION**

At first, we point out the limitations of the study because it focused on the view of a particular group of newly graduated nurses, because it did not include the perspective of professors or other methodological methods that would make it possible to broaden the understanding of the phenomenon herein studied.

Despite these limits, the study showed that the topic of abortion was given little attention in undergraduate courses, according to the study participants. Such little prominence was also observed in the analysis of undergraduate nursing course syllabuses of public universities, which may denote a tendency to silence this topic in nursing education<sup>11</sup>.

The selection of curriculum content is not a neutral or unintentional option, even when pedagogical action is thought to stem from supposed political neutrality. A curriculum is a cultural production and, as such, there are tensions and negotiations produced within the social relations, knowledge and powers that constitute it epistemologically. Therefore, it implies a selectivity of discourses and knowledge that are negotiated, debated, agreed upon and, finally, legitimized, causing other positions or perspectives to be denied or erased from the curriculum repertoire<sup>12</sup>.

In addition to the discretion with which the topic of abortion is addressed in the undergraduate curriculum repertoire, there is also a tendency to teach it based on the fragmented biologicist model and without emphasis on the socio-political, emotional and gender issues associated with the abortion phenomenon<sup>3</sup>. Such narrow perspective of education undermines the reflective action needed to understand the social, historical and cultural realities that permeate the health of women in an abortion situation, as well as the female-gender issues underlying their reproductive and sexual health<sup>13</sup>.

Such restriction in education favors the reproduction of vulgar and thoughtless thinking about the issue, which is referred to as common sense, as well as the persistence of prejudice, stereotypes and discrimination that women face in society and health services, and it can impair and dehumanize care provision<sup>14</sup>.

Nursing education has also shown to be limited in terms of training students to care for women in a legal-abortion situation, according to the newly graduated nurses, which undermines attitudes that defend women's rights and a change in the adverse reality that they experience in health services<sup>13</sup>.

It is noteworthy that rape is the main reason for legal abortion in Brazil, accounting for 94% of cases from 2013 to 2015<sup>15</sup>. Despite this sad scenario, there are inadequacies in health services due to technical standards, lack of legislation knowledge by professionals and manifestations of conscientious objection to perform the procedure<sup>16</sup>.

Therefore, the response from nursing to the magnitude and perversity of this gender violence may be limited due to how this subject has been conducted in undergraduate courses by leading students to limited reflection on the determinants of this reality, their ways to confront it and the implications for practicing the profession, in addition to favoring the persistence of the dominant moral and religious values and the naive view in principles and the consequences from the premises of a conservative society<sup>17</sup>.

The approach to the subject of abortion in undergraduate education is also influenced by traditional education, but the statements shed light on other pedagogical perspectives that problematize the topic and aim to arouse reflection in students about ethical, gender and professional-role issues. The critical unveiling of the issues underlying the abortion phenomenon can broaden the perception of reality and lead to overcoming the restrictions in nursing education herein revealed.

However, the perception of what is real is only effective when the naive view is surpassed and the concrete reality is understood in order to construct another reality on democratic bases. One cannot be neutral before the world and dehumanization, and an option must be made by either adhering to change that meets the true humanization of human beings or favoring the permanence of what dehumanizes the world, as warned by Paulo Freire<sup>7</sup>.

## CONCLUSION

There are limitations to the approach of the topic of abortion in undergraduate nursing education, both in relation to the number of classes intended for the subject during undergraduation and due to the traditional way in which the subject is pedagogically conducted by teachers. These limitations favor the persistence of the influence of conservative moral values on students and cause conflicts in them between their personal beliefs and their professional role, making them feel unprepared to perform in the care for women in abortion situations as provided for by law.

Despite the reports on the problematizing educational perspective, undergraduate nursing education seems to enable the persistence of the naive view and the reproduction of common sense regarding abortion, being restricted in terms of developing critical-reflective awareness in students.

Further studies on the teaching of the topic of abortion and its interfaces with nursing practice in this important health problem in the country are suggested.

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