

CHILD CARE IN VULNERABLE TERRITORIES: AN INTEGRATIVE REVIEW

O CUIDADO ÀS CRIANÇAS EM TERRITÓRIOS DE VULNERABILIDADE: UMA REVISÃO INTEGRATIVA

EL CUIDADO DE LOS NIÑOS EN TERRITORIOS DE VULNERABILIDAD: UNA REVISIÓN INTEGRADORA

 <https://doi.org/10.56238/sevened2025.036-053>

Denise Santana Silva dos Santos¹, Camila Miranda Santos², Jadiane Barros de Cerqueira³, Raquel de Souza Bonfim⁴

ABSTRACT

Objective: To analyze the main types of care provided to children living in vulnerable territories.

Methodology: This is an integrative, descriptive, and exploratory review with a qualitative approach, developed through the analysis of scientific articles published between 2019 and 2024. The search was conducted in the MEDLINE, BDENF, LILACS, and SciELO databases, accessed via the Virtual Health Library (VHL). Study selection followed the PRISMA protocol, and the data were examined using Thematic Analysis, based on Bardin's Content Analysis method.

Results: Three thematic categories emerged: (1) Care for vulnerable children exposed to situations of violence; (2) Interaction methods for providing care to children; and (3) Government strategies aimed at child care in contexts of vulnerability.

Conclusion: The study highlighted the multiple levels of vulnerability faced by children and the need to expand care strategies that promote welcoming, qualified listening, and protection. It also emphasized the importance of coordination among the State, health professionals, and the community to ensure effective and integrated actions in support of childhood.

Keywords: Child. Vulnerability. Care.

¹ Post-Doctorate researcher in Nursing. Universidade do Estado da Bahia (UNEB).
E-mail: dssantos@uneb.br Orcid: <https://orcid.org/0000-0002-3954-027X>
Lattes: <http://lattes.cnpq.br/2392355664098132>

² Post-Graduate Student in Pediatrics and Neonatology. Universidade do Estado da Bahia (UNEB).
E-mail: camilamirandas915@gmail.com Orcid: <https://orcid.org/0009-0008-4919-8579>
Lattes: <https://lattes.cnpq.br/8066909547875992>

³ Nurse. Universidade do Estado da Bahia (UNEB). E-mail: cbarrosjadiane@gmail.com
Orcid: <https://orcid.org/0009-0008-4866-8057> Lattes: <http://lattes.cnpq.br/8487572330110021>

⁴ Master's student in the Graduate Program in Health Care Sciences.
Universidade do Estado da Bahia (UNEB). E-mail: raquelbponfim08@hotmail.com
Orcid: <https://orcid.org/0009-0002-2574-6071>
Lattes: <http://lattes.cnpq.br/0381051857054342>

RESUMO

Objetivo: Analisar os principais cuidados prestados às crianças em territórios de vulnerabilidade.

Metodologia: Trata-se de uma revisão integrativa, descritiva e exploratória, com abordagem qualitativa, desenvolvida por meio da análise de artigos científicos publicados entre 2019 e 2024. A busca foi realizada nas bases MEDLINE, BDENF, LILACS e SCIELO, acessadas pela Biblioteca Virtual em Saúde (BVS). A seleção dos estudos seguiu o protocolo PRISMA, e os dados foram analisados por meio da Técnica de Análise Temática, conforme o método de Análise de Conteúdo proposto por Bardin.

Resultados: Emergiram três categorias temáticas: (1) O cuidado à criança vulnerável em situação de violência; (2) Métodos de interação para a prestação de cuidados à criança; e (3) Estratégias governamentais voltadas ao cuidado da criança em contextos de vulnerabilidade.

Conclusão: O estudo evidenciou os múltiplos níveis de vulnerabilidade enfrentados por crianças e a necessidade de ampliar estratégias de cuidado que promovam acolhimento, escuta qualificada e proteção. Ressalta-se, ainda, a importância da articulação entre Estado, profissionais da saúde e comunidade para garantir ações efetivas e integradas em prol da infância. Incluir o resumo.

Palavras-chave: Criança. Vulnerabilidade. Cuidado.

RESUMEN

Objetivo: Analizar los principales cuidados brindados a los niños en territorios de vulnerabilidad.

Metodología: Se trata de una revisión integradora, descriptiva y exploratoria, con enfoque cualitativo, desarrollada a través del análisis de artículos científicos publicados entre 2019 y 2024. La búsqueda se realizó en las bases de datos MEDLINE, BDENF, LILACS y SciELO, accesadas a través de la Biblioteca Virtual en Salud (BVS). La selección de los estudios siguió el protocolo PRISMA, y los datos fueron examinados mediante la Técnica de Análisis Temático, conforme al método de Análisis de Contenido propuesto por Bardin.

Resultados: Surgieron tres categorías temáticas: (1) El cuidado del niño vulnerable en situación de violencia; (2) Métodos de interacción para la prestación de cuidados al niño; y (3) Estrategias gubernamentales orientadas al cuidado del niño en contextos de vulnerabilidad.

Conclusión: El estudio evidenció los múltiples niveles de vulnerabilidad enfrentados por los niños y la necesidad de ampliar estrategias de cuidado que promuevan acogida, escucha calificada y protección. Asimismo, se resalta la importancia de la articulación entre el Estado, los profesionales de la salud y la comunidad para garantizar acciones efectivas e integradas en favor de la infancia.

Palabras clave: Niño. Vulnerabilidad. Cuidado.

1 INTRODUCTION

Thinking about the child's territory goes beyond simple geographical delimitation. It implies considering the space where they live and interact with their family and community, which is the concrete and symbolic scenario of health care. Reflecting on the territory requires understanding its multiple meanings in the social sciences and collective health, in addition to the practical implications for child care (Souza Prado & Caetano, 2024).

Territorialization in health initially involves revisiting the historicity of the concepts of "territory" and "territoriality", especially in their appropriation by the health sector. Etymologically linked to land possession and symbolic domination, territory has carried material and symbolic dimensions of power since its origin. In the current context, it is also understood as a space of existence, identity, and belonging (Fiocruz, 2023).

In the field of collective health, the territory is seen as a socially produced space, permeated by political, cultural, and economic relations that directly influence living and health conditions. This approach goes beyond a merely technical-administrative view and promotes a broader reading of social flows, structural determinants, and collective identities (Souza Prado & Caetano, 2024; Silva & Oliveira, 2021).

This broader conception also emphasizes that territory is both physical space and "territoryexistence": a place of identity, belonging, and everyday life (Fiocruz, 2023).

In this context, territorialization is configured as an analytical method and strategic practice in primary care. It allows us to know local realities, identify needs, plan interventions, and reveal critical inequalities among children in vulnerable contexts (Ferreira & Lima, 2022; Fiocruz, 2023). By mapping social determinants, such as housing, income, education, and access to services, it promotes more equitable and contextualized actions (Silva & Oliveira, 2021).

Children's social vulnerability reflects inequalities in the social determinants of health (SDH) and a lack of effective policies. Programmatic vulnerability, on the other hand, points to the limitations of the health system and other public policies in ensuring full protection. Children in vulnerable situations face structural and symbolic barriers that compromise their development, citizenship, and well-being (Souza Prado & Caetano, 2024; Ferreira & Lima, 2022).

In this scenario, the strategic role of primary care is strengthened, with qualified teams, capable of working in vulnerable territories in dialogue with communities. The Family Health Strategy, in line with the guidelines of the National Policy for Comprehensive Child Health

Care (PNAISC), defines responsibilities by territory, adjusting the population load according to local vulnerability (Brasil, 2021).

The training of professionals, with teaching-service integration, is fundamental: it requires data systematization, territorial analysis, and permanent education to strengthen a critical approach to health work processes (Silva & Oliveira, 2021; Fiocruz, 2023).

Despite the relevance of the theme, there are still few studies that discuss the organization of comprehensive child health care from the perspective of territorialization and care networks, with a focus on situations of vulnerability. There is, therefore, a scientific and political gap to be addressed.

In this context, the present study is justified by its timeliness and novelty, by proposing a reflective analysis of child care in territories marked by vulnerability. This is a relevant contribution to collective health and nursing, evidencing the strategic role of professional performance in promoting the health of child populations in contexts of risk and inequality.

Therefore, the objective of this study is: To analyze the main care provided to children in vulnerable territories.

2 METHODOLOGY

Study Type

A literature review was carried out of a quantitative nature in relation to the number of selected articles and qualitative in relation to the discussion of the articles (Pereira et al., 2018; Gil, 2017).

This is a bibliographic research of the integrative, descriptive and exploratory review type, with a qualitative approach, which aims at a deep understanding of the phenomenon studied through the analysis of previously published articles (Souza; Silva; Carvalho, 2010).

The integrative review followed six stages: identification of the theme and formulation of the research question by the acronym PICo; establishment of inclusion and exclusion criteria; categorization of studies; evaluation of the selected articles; interpretation of results and synthesis of knowledge (Mendes; Scott; Galvão, 2008).

Search Strategy

To elaborate the research question, the PICo strategy was used, defined as population (children), intervention (care) and context (territories of vulnerability).

Health Sciences descriptors (DeCS) were selected: child, vulnerability, and care, in addition to the MeSH terms: child, care, and vulnerability, combined by the Boolean operator "AND" to optimize the search in Portuguese, English, and Spanish.

Data Collection

Data collection took place electronically between March and April 2024, in the Latin American and Caribbean Literature on Health Sciences (LILACS), Nursing Databases (BDENF), MEDLINE, and Online Scientific Electronic Library (SCIELO) databases, accessed electronically through the Virtual Health Library (VHL). This study used the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) instrument, which consists of a flowchart for the selection of articles, promoting a systematization of the data in order to obtain greater clarity in the research.

Articles available in full and free of charge, which adhered to the theme/objective of the study, scientific articles in Portuguese, English, and Spanish, and in the time frame of the last five years, between 2019 and 2024, were considered.

Duplicate studies, identified by the Rayyan software, studies outside the child age group, and those that did not describe a context of vulnerability were excluded.

Data Analysis

For data analysis, the Thematic Analysis Technique based on the Bardin (2011) method was applied, involving three phases: pre-analysis, exploration and inference. Initially, the collected material was read and organized; then, the recurring themes were identified; and, finally, there was the selection and categorization of the themes, culminating in the critical interpretation of the results (Santos, 2012). The categories were elaborated 'a priori', and the analysis allowed us to evaluate the production of knowledge and discuss the findings.

Ethical Aspects

As this is an integrative review, without direct contact with human beings, submission to the Ethics Committee is waived, according to Resolution No. 466/2012 of the National Health Council. It should be noted that copyright was respected in accordance with Law No. 12,853/2013.

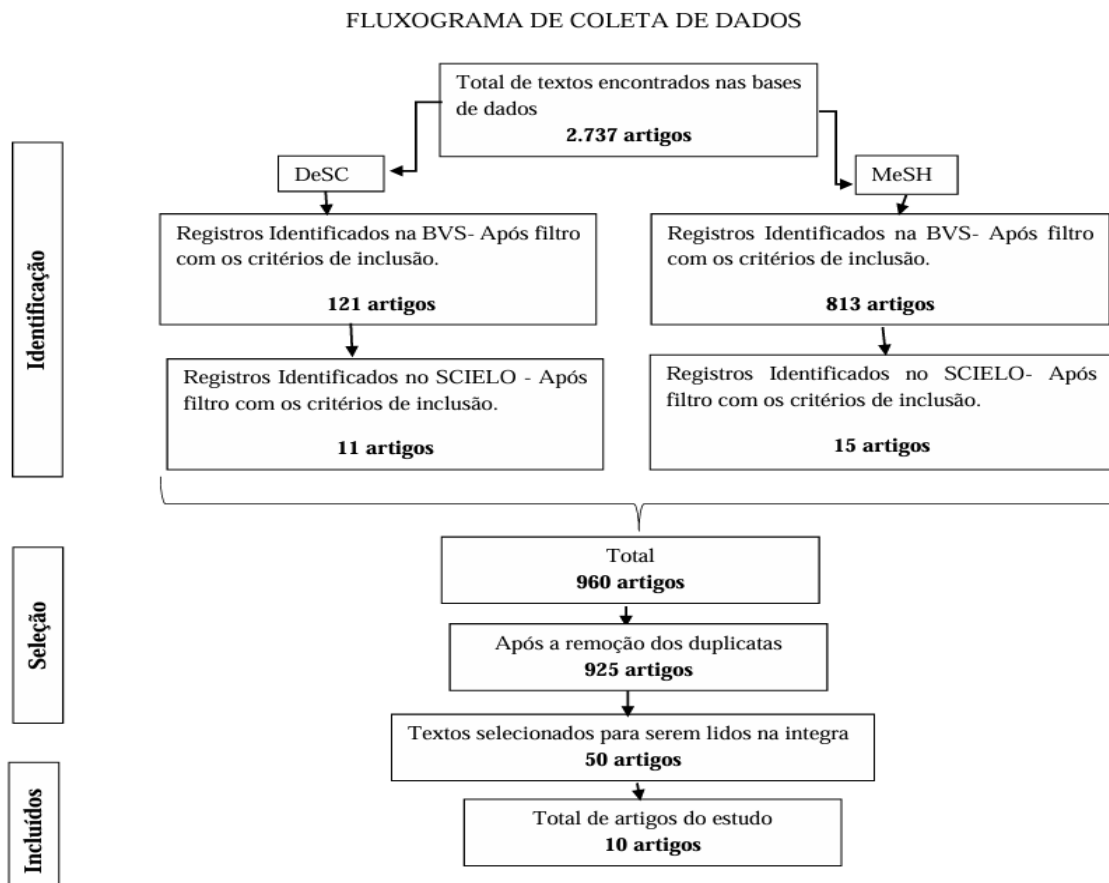
3 RESULTS

Initially, 2,737 articles were identified in the databases, after filtering, 960 remained. Among these, after the elimination of duplicates, through the Rayyan application, 50 were selected to be read in full and of these 10 were selected to compose the study. The screening

process and the number of publications obtained in each stage are exposed in the demonstrative flowchart, shown in Figure 1.

Figure 1

Flowchart demonstrating the search strategies in the databases



Source: Prepared by the authors.

A synoptic table was prepared in order to synthesize the main information of the selected articles. Thus, it became possible to view the title, author, year, objective, method, and journal of publication of the articles included in the review, as described in Chart 1. The articles, when cited in the tables, are represented by the alphanumeric symbology A1, A2... A10.

Table 1

Characterization of the articles analyzed in the integrative review on the care of children in vulnerable territories. Salvador – Bahia, Brazil, 2024, (n=10).

No.	Title	Author	Year	Journals	Goal
A1	Brazilian and Portuguese guidelines for the protection of children vulnerable to violence in the COVID-19 pandemic.	Cabral, L.E. et al	2021	Anna Nery School	Identify and analyze measures to protect children/adolescents vulnerable to violence in the COVID-19 epidemic in Brazil and Portugal.
A2	Psychosocial care for children and adolescents who are victims of sexual violence: perceptions of psychologists from a Creas/Paefi	Martins, J.S; Santos, D.K.	2022	Psychology Science and Profession	To problematize the perceptions of psychologists from a Creas/Paefi in the metropolitan region of Florianópolis about psychosocial care for children and adolescents in situations of sexual violence.
A3	Narratives of child care in a FHSC: The conversation circle strategy	Alaion, AR; Machado, A.M.	2021	Psychology and Society	Contextualize the territory and the implementation of the developed strategy - the Conversation Circle held in a NASF.
A4	Speech-Language Pathology and Audiology performance in a social project: a preliminary study	Puygserver, R.M.M. et al.	2020	Communication Disorders	Propose a speech-language pathology intervention project in a childcare institution; collect data about the children's language before and after the speech-language pathology intervention; to make it possible to overcome language alterations.
A5	Medical student in action: promoting protective factors against sexual violence in vulnerable children	Touso, M.F.S. et al.	2021	Rev. Medicine	To analyze the repercussions of health education activities on sexual violence against children in situations of social vulnerability, enabling a reflection on the exercise of child protection in medical education.
A6	Representations of oral health care for vulnerable children in a city in northeastern Brazil	Cavalcante, P.S.; Gonzalez, R.H.	2022	Health and Society	To analyze the social representations of oral health care for vulnerable children

A7	RISC Units: a strategy for assessing health risks in children in contaminated communities	León-Arce, M. et al.	2023	Rev Panamericana de Salud Pública	Assess and mitigate health risks in children living in areas with environmental contamination.
A8	Full-time education: from deprivation to protection	Rodrigues, M.R.; Santiago, E.J.F.; Rota Júnior, C.	2021	Educational Psychology	To investigate how school education professionals, directly involved with this proposal and who have experienced the daily work in the context of full-time education, have apprehended such changes and, above all, how they perceive the public with which they are dealing: children and adolescents.
A9	Developmental Health in the context of an early childhood program in Brazil: the experience of better early childhood	Gonçalves, T.R.; Duku, E.; Janus, M.	2019	Public Health Notebook	The objective of this study was to identify family and child characteristics associated with developmental health outcomes in children aged 4 to 6 years who participated in Primeira Infância Melhor (PIM), a home visiting program in the state of Rio Grande do Sul, Brazil.
A10	Children and adolescents in situations of social vulnerability in Brazil	Rezende, K.; Cappellari, H.C.L.; Pagani, L.A.G.	2022	Research, Society and Development	To analyze the situation of social vulnerability in our country, through the study of the concepts of social vulnerability, life in society and the meaning of dignity of the human person, in order to understand what the situation of social vulnerability is, as well as the ways to detect it, the pictures as it presents itself in our daily lives.

Source: Prepared by the authors.

Finally, a descriptive analysis was carried out, adopted for the organization and discussion of the evidenced results, in which a synthesis of each study included in the review was presented, organized into thematic categories.

Thematic Categories

Categorization, according to Bardin (2011), aims to simplify raw data through condensation, organizing them into a system of categories. This process can be carried out in two ways: by "boxes" (a priori categories), in which the categories are defined before the analysis based on theoretical foundations, or by "miles" (a posteriori categories), in which the

categories emerge after the analysis of the content. Also, according to the author, good categories should be mutually exclusive, homogeneous, pertinent, objective, faithful and productive.

In view of this, the deductive method (a priori) was chosen. Based on the theoretical foundations, the information was carefully analyzed in line with the specific objectives of this review. Thus, three categories emerged, presented in Chart 2.

Table 2

Analytical categories that emerged from the integrative review on the care of children in vulnerable territories. Salvador – Bahia, Brazil 2024 – Dates

Categories	Title
Category 1	Care for vulnerable children in situations of violence
Category 2	Methods of interaction for child care
Category 3	Government strategies for the care of children in vulnerable situations

Source: Prepared by the authors.

4 DISCUSSION

Care for vulnerable children in situations of violence

Violence against children — physical, psychological, sexual and neglect — constitutes a serious violation of human rights and a challenge to public health. According to Cabral et al. (2021), these forms of aggression affect different age groups and can occur both in the domestic environment and outside it. The situation of social isolation, as experienced during the Covid-19 pandemic, intensified the exposure of children to intrafamily violence, demanding more incisive responses from health and assistance services.

During the pandemic, the protection measures recommended in Brazil included actively listening to victims, removing aggressors, monitoring by health and social assistance professionals, and encouraging reporting through social networks and institutional channels. These strategies were essential, especially in contexts of social vulnerability, in which children already had a history of rights violations (Cabral et al., 2021).

Among the various types of violence, sexual violence is considered the most impactful in childhood. To address it, public policies such as the Specialized Reference Center for Social Assistance (CREAS) and the Specialized Protection and Care for Families and

Individuals (PAEFI) play a fundamental role in the care of victims and their families, with a focus on qualified listening and the construction of protective bonds (Martins & Santos, 2022).

Methods of interaction for child care

Health care for children in vulnerable situations requires the adoption of diverse care technologies, which go beyond equipment (hard technologies), incorporating knowledge (light-hard) and, mainly, interpersonal relationships (soft technologies), such as bonding and welcoming (Alaion & Machado, 2021).

In this sense, strategies such as playful games, conversation circles and the use of drawing as a symbolic expression were pointed out as effective instruments to establish communication with children and collect relevant data about their health. For example, Puygserver et al. (2020) used playful activities to assess children's oral language before and after the speech-language pathology intervention, promoting early diagnosis and appropriate follow-up.

Conversation circles, held in Family Health Support Centers (NASF), also proved effective in addressing topics such as child mental health, enabling a collective space for reflection and listening (Alaion & Machado, 2021). Touse et al. (2021) highlight the importance of health education through playful dynamics, especially in coping with sexual violence, allowing children to recognize risk situations and express their experiences safely.

Another relevant example is the use of the drawing-story technique, reported by Cavalcante and Gonzales (2022), as a tool for understanding children's perceptions of oral care, promoting a space for subjective expression about everyday health practices.

Government strategies for the care of children in vulnerable situations

Given the complexity of the factors involving child vulnerability, intersectoral government strategies become fundamental. León-Arce et al. (2023) propose, for example, the creation of Child Risk Units in Contaminated Areas (RISC), aimed at caring for children exposed to contexts of syndemic vulnerability, which involve overlapping environmental, social, and health risks.

Another essential factor for the child's care is nutritional status. According to Baptista (2019), childhood anemia, associated with poverty, impairs physical, cognitive, and emotional development. In this context, programs such as the National Iron Supplementation Program (PNSF) and Bolsa Família have contributed to improving the nutritional status of children served by the Family Health Strategy.

At the interface between education and health, the More Education Program seeks to extend the school day and strengthen the curriculum in schools with low development indexes, located in vulnerable territories (Rodrigues, Santiago & Rota Junior, 2021). These actions aim not only at school performance, but also at the social protection of children at risk.

In this sense, Primeira Infância Melhor (PIM), a state program of home visits, focuses on the integral development of the child from pregnancy to six years of age. Studies such as the one by Gonçalves, Duku and Janus (2019) reveal positive impacts of PIM on children's development, especially at the time of transition to schooling, reflecting the importance of early care in vulnerable territories.

Finally, despite all the state apparatus aimed at protecting the rights of children and adolescents, the study by Rezende, Cappellari and Pagani (2022) concludes that it is essential that society is sensitized to this reality and acts in accordance with current legal norms. The collaboration of all is essential to promote the integration and protection of this group, respecting their rights and particularities. In this way, in addition to ensuring the healthy development of these — who represent the future — it contributes to the continuity of life in society and to the strengthening of the future of the nation.

5 FINAL CONSIDERATIONS

The analysis of the literature shows that child care in vulnerable territories demands interdisciplinary, intersectoral and territorialized approaches, capable of articulating public policies in the areas of health, education and social assistance.

It is essential to have continuous and qualified training of primary care professionals, so that they can act sensitively and effectively in the face of the multiple expressions of child vulnerability.

The reviewed studies reinforce the importance of strategies that not only guarantee physical care, but also promote the welcoming and active listening of children, respecting their singularities and considering the social contexts in which they are inserted. It is also emphasized the need for accessible and integrated interventions in the territory, which recognize and enhance local resources.

The articulation between the State, health professionals and the community is essential for the implementation of sustainable and transformative actions, capable of promoting equity in child care.

Although this study has limitations regarding the time frame of the publications analyzed, it contributes with relevant subsidies for the understanding of the complexity involved in the care of children in contexts of vulnerability and points out ways to build more integrated and humanized practices.

REFERENCES

- Alaion, R., & Machado, T. C. A. (2021). Tecnologias leves no cuidado infantil: O brincar como ferramenta de intervenção na atenção primária. *Revista Brasileira de Enfermagem*, 74(3), Article e20200313. <https://doi.org/10.1590/0034-7167-2020-0313>
- Baptista, M. N. (2019). Impacto da anemia na infância e políticas públicas de suplementação no Brasil. *Revista de Nutrição em Saúde Pública*, 25(1), 35–41.
- Bardin, L. (2011). *Análise de conteúdo* (1ª ed.). Edições 70.
- Brasil. Ministério da Saúde. (2021). *Política Nacional de Atenção Integral à Saúde da Criança (PNAISC)*.
- Cabral, M. R., & et al. (2021). Violência contra crianças durante a pandemia de COVID-19: Desafios e estratégias na atenção primária. *Ciência & Saúde Coletiva*, 26(4), 1425–1434. <https://doi.org/10.1590/1413-81232021264.42002020>
- Cavalcante, L. B., & Gonzales, R. (2022). Técnicas expressivas no cuidado odontológico infantil: O uso da desenho-estória. *Revista de Saúde Coletiva da Criança*, 14(1), 77–85.
- Ferreira, D. B., & Lima, R. C. (2022). Territorialização e equidade na atenção básica: Desafios para o cuidado em saúde da criança. *Ciência & Saúde Coletiva*, 27(4), 1239–1248. <https://doi.org/10.1590/1413-81232022274.04322022>
- Fiocruz. (2023). Território e territorialização na saúde. *Dicionário da Educação Profissional em Saúde. Fundação Oswaldo Cruz*. <https://www.sites.epsjv.fiocruz.br/dicionario/verbetes/tersau.html>
- Gil, A. C. (2017). *Como elaborar um projeto de pesquisa* (6ª ed.). Atlas.
- Gonçalves, T. R., Duku, E., & Janus, M. (2019). Avaliação do Programa Primeira Infância Melhor no desenvolvimento infantil. *Psicologia: Teoria e Prática*, 21(2), 67–83.
- León-Arce, D. G., & et al. (2023). Unidades de Riscos Infantis em Áreas Contaminadas: Proposta intersetorial de proteção à saúde infantil. *Revista Brasileira de Saúde Ambiental*, 28(2), 105–112.
- Martins, M. L., & Santos, E. M. (2022). O papel do CREAS no enfrentamento da violência sexual infantil. *Revista de Políticas Públicas e Sociais*, 10(2), 91–100.
- Mendes, K. D. S., Silveira, R. C. C. P., & Galvão, C. M. (2008). Revisão integrativa: Método de pesquisa para a incorporação de evidências na saúde e na enfermagem. *Texto & Contexto Enfermagem*, 17(4), 758–764. <https://doi.org/10.1590/S0104-07072008000400018>

- Pereira, A. S., Shitsuka, D. M., Parreira, F. J., & Shitsuka, R. (2018). Metodologia da pesquisa científica [eBook gratuito]. Editora da UFSM. <https://repositorio.ufsm.br/handle/1/15824>
- Puygserver, A., & et al. (2020). Avaliação da linguagem oral de crianças em vulnerabilidade social. *Revista CEFAC*, 22(5), 1–9.
- Rezende, K., Cappellari, H. C. L., & Pagani, L. A. G. (2022). Crianças e adolescentes em situação de vulnerabilidade social no Brasil. *Research, Society and Development*, 11(1), Article e18611124587. <https://doi.org/10.33448/rsd-v11i1.24587>
- Rodrigues, C. S., Santiago, E. B., & Rota Junior, L. G. (2021). Programa Mais Educação: Política pública e a redução das desigualdades sociais. *Revista Educação em Foco*, 16(1), 75–89.
- Santos, M. L. S. (2012). Técnica de análise de conteúdo: Ferramenta para análise qualitativa de dados em pesquisas sociais. EDUFBA.
- Silva, T. M., & Oliveira, F. J. (2021). Determinantes sociais da saúde e territorialização: Contribuições para o cuidado em saúde da criança. *Revista Brasileira de Enfermagem*, 74(Supl. 1), Article e20201342. <https://doi.org/10.1590/0034-7167-2020-1342>
- Souza Prado, M. R., & Caetano, S. C. (2024). Territorialização e vulnerabilidade infantil: Perspectivas para a saúde coletiva. *Saúde em Debate*, 48(Supl. 2), Article e8730. <https://doi.org/10.1590/0103-11042024E8730>
- Souza, M. T., Silva, M. D., & Carvalho, R. (2010). Integrative review: What is it? How to do it? *Einstein (São Paulo)*, 8(1), 102–106. <https://doi.org/10.1590/S1679-45082010RW1134>
- Touso, M. F., & et al. (2021). Educação em saúde e a prevenção da violência sexual infantil: Experiências lúdicas em escolas públicas. *Revista Brasileira de Enfermagem Escolar*, 2(1), 59–67.