ABSTRACT:
Introduction: In recent years the Acquired Immunodeficiency Virus (HIV) has become a major challenge for society due to the magnitude and extent of the damage caused to populations, especially adolescents.
Objective: To analyze the contextual aspects of nursing care for adolescents in situations of vulnerability to HIV.
Method: This is a narrative literature review with a search carried out in the databases Elsevier SciVerse Scopus, Scientific Electronic Library Online, Latin American and Caribbean Literature in Health Sciences and Google Scholar, in the period of December 20, 2020 to January 20, 2021. The material was analyzed in accordance with the theoretical contribution proposed by Hinds, Chaves and Cypress, which indicates four layers of interrelated contextual relationships that better understand the phenomenon: immediate, specific, general and metacontextual.
Results: Eight studies were selected, categorized into sub-themes according to each context: adolescents in a situation of vulnerability to HIV/AIDS (immediate context); the insertion of adolescents vulnerable to HIV/AIDS in Primary Health Care (specific context); nursing care for adolescents in situations of vulnerability to HIV/AIDS in Primary Health Care (general context); and public policies aimed at adolescents in situations of vulnerability to HIV/AIDS (metacontext). Conclusion: It can be
concluded that understanding the phenomena allows for greater reflection on the reality studied in order to improve nursing care in the face of the problems encountered.

**Keywords:** HIV; Acquired Immunodeficiency Syndrome; Adolescent; Health Vulnerability.

**RESUMO:**
**Introdução:** Nos últimos anos o Vírus da Imunodeficiência Adquirida (HIV) tornou-se um grande desafio para a sociedade pela magnitude e extensão dos danos causados às populações, em especial aos adolescentes.

**Objetivo:** Analisar os aspectos contextuais da assistência de enfermagem aos adolescentes em situação de vulnerabilidade ao HIV.

**Método:** Trata-se de uma revisão narrativa de literatura com busca realizada nas bases de dados Elsevier SciVerse Scopus, Scientific Electronic Library Online, Literatura Latino-Americana e do Caribe em Ciências da Saúde e Google Scholar, no período de 20 de dezembro de 2020 a 20 de janeiro de 2021. O material foi analisado em acordo com o aporte teórico proposto por Hinds, Chaves e Cypress, que indica quatro camadas de relações contextuais inter-relacionadas que melhor compreendem o fenômeno: imediata, específica, geral e metacontextual.

**Resultados:** Foram selecionados oito estudos categorizados em subtemas seguindo cada contexto: adolescente em situação de vulnerabilidade ao HIV/Aids (contexto imediato); a inserção do adolescente vulnerável ao HIV/Aids na Atenção Primária à Saúde (contexto específico); assistência de enfermagem a adolescentes em situação de vulnerabilidade ao HIV/Aids na Atenção Primária à Saúde (contexto geral); e políticas públicas voltadas para adolescentes em situação de vulnerabilidade ao HIV/Aids (metacontexto).

**Conclusão:** Pode-se concluir que compreender os fenômenos permite uma maior reflexão sobre a realidade estudada com o intuito de melhorar a assistência de enfermagem diante dos problemas encontrados.

**Palavras-chave:** HIV; Síndrome da Imunodeficiência Adquirida; Adolescente; Vulnerabilidade em Saúde.

**RESUMEN:**
**Introducción:** En los últimos años el Virus de la Inmunodeficiencia Adquirida (VIH) se ha convertido en un gran desafío para la sociedad debido a la magnitud y extensión de los daños que ocasiona a las poblaciones, en especial a los adolescentes.

**Objetivo:** Analizar los aspectos contextuales del cuidado de enfermería a adolescentes en situación de vulnerabilidad al VIH.

**Método:** Se trata de una revisión bibliográfica narrativa con búsqueda realizada en las bases de datos Elsevier SciVerse Scopus, Scientific Electronic Library Online, Latin American and Caribbean Literature in Health Sciences y Google Scholar, en el periodo del 20 de diciembre de 2020 al 20 de enero de 2021 El material fue analizado de acuerdo con el aporte teórico propuesto por Hinds, Chaves y Cypress, que señala cuatro capas de relaciones contextuales interrelacionadas que mejor comprenden el fenómeno: inmediata, específica, general y metacontextual.

**Resultados:** Se seleccionaron ocho estudios, categorizados en subtemas según cada contexto: adolescentes en situación de vulnerabilidad al VIH/SIDA (contexto inmediato); la inserción de adolescentes vulnerables al VIH/SIDA en la Atención Primaria de Salud (contexto específico); atención de enfermería a adolescentes en situación de vulnerabilidad al VIH/SIDA en la Atención Primaria de Salud (contexto general); y políticas públicas dirigidas a adolescentes en situación de vulnerabilidad al VIH/SIDA (metacontexto).

**Conclusión:** Se puede concluir que la comprensión de los fenómenos permite una mayor reflexión sobre la realidad estudiada para mejorar la atención de enfermería frente a los problemas encontrados.

**Palabras clave:** HIV; Síndrome de inmunodeficiencia adquirida; Adolescente; Vulnerabilidad de la salud.

**INTRODUCTION**

In recent years, infection with the Human Immunodeficiency Virus (HIV) or Acquired Immunodeficiency Syndrome (Aids), in addition to being a chronic disease, has
become a major challenge for society due to the magnitude of the damage caused to populations (1).

During adolescence, there is an intense process of biopsychosocial transformations, stigmas and prejudices, lack of necessary inputs and difficulty in accessing health services, which expose this public to vulnerability to HIV/AIDS (2,3).

This fact is reflected in the increasing number of adolescents with HIV/AIDS: in 2015 there were 4.1 million adolescents in the age group from 15 to 24 years, representing 11.1% of the total population affected by HIV/AIDS in worldwide (4). In Brazil, in 2010, 587 cases of HIV/AIDS were reported in people aged 15 to 19 years, which in relation to 2020, indicates a growth of 12.9% (5).

In an attempt to change this situation, the Ministry of Health (MOH) has been seeking to implement intervention strategies such as "Combined Prevention" that have a relevant impact on the prevention of the epidemic, in order to avoid HIV infection and, consequently, AIDS (6).

However, despite all these strategies in the field of public health, there is currently an epidemiological transition marked by vulnerability to HIV, with a notable sharp increase of adolescents acquiring the virus at this stage of life (7).

In this sense, nursing care aimed at adolescents followed by Primary Health Care (PHC) becomes challenging because nursing professionals must seek to understand the entire biopsychosocial-spiritual context of vulnerability of adolescents and young people, and devise applicable, multiprofessional, transversal strategies that contribute to minimize the risk of illness in this group (8).

Thus, the importance of this study lies in the possibility of offering theoretical support to nursing professionals, in order to contribute to the improvement of health care for adolescents in situations of vulnerability to HIV/AIDS.

Therefore, this research intends to answer the following guiding question: What contextual aspects influence nursing care for adolescents and young people in situations of vulnerability to HIV? Therefore, the aforementioned study aims to analyze the contextual aspects of nursing care for adolescents in situations of vulnerability to HIV.

**MATERIAL AND METHOD**

The present study consists of a narrative literature review to analyze, in the light of the Contextual model of Hinds, Chaves and Cypress (9), the contextual aspects of nursing care for adolescents in situations of vulnerability to HIV/AIDS. For this, initially a previous search was made in the databases to verify the existence of context analyses focused on the study theme and it was found that there are no published studies. This research took place at the beginning of December 2020.

After that, an adapted protocol was built, which consisted of: title; objective; research question; inclusion and exclusion criteria; search strategy; databases, data extraction
As a search strategy, the following controlled descriptors from the Health Sciences Descriptors (DeCS)/Medical Subject Headings (MeSH) list were used: “HIV” OR “Acquired Immunodeficiency Syndrome”, “Adolecent” and “Health Vulnerability”. The Boolean operator “AND” was used in the process of crossing the aforementioned descriptors, and the Boolean operator “OR” was used only for the descriptors “HIV” and “Acquired Immunodeficiency Syndrome”.

The search was conducted from December 20, 2020 to January 20, 2021 in the following databases: Elsevier SciVerse Scopus (Scopus), Scientific Electronic Library On-line (SciELO), Latin American and Caribbean Literature in Health Sciences (LILACS) and Google Scholar.

The following inclusion criteria were stipulated: articles from studies available in full, without time limit, in Portuguese, Spanish and/or English and that answered the research question. Experience reports, editorials, abstracts published in annals of scientific events were excluded.

The Contextual Analysis model of Hinds, Chaves and Cypress (9) was considered for the analysis of the collected material. This model is explained by the existence of four interactive context levels that facilitate the understanding of the phenomenon: the immediate that involves relevant aspects of the present and immediately where the phenomenon occurs; the specific that has the characteristic of encompassing the immediate past and the relevant factors of the phenomenon at the time it is occurring; the general starts to consider the understanding of life that was generated based on past and current interactions; the meta-context, on the other hand, incorporates past and future in the formation of socially shared knowledge.

It is worth mentioning that these contextual levels are interrelated in such a way that they facilitate the visualization of each layer and the understanding of the context as a whole, in order to reach the Gestalt medium of the phenomenon.

**RESULTS**

The initial screening using the aforementioned descriptors resulted in a total of 214 articles. From this amount, those who responded to the eligibility criteria and the research objectives were selected, and 08 articles were included.

The results found were categorized into sub-themes according to the conceptual understanding of each context layer. This categorization is illustrated in Figure 1.
DISCUSSION

The adolescent in a situation of vulnerability to HIV/AIDS

Adolescence is the stage of life in which numerous biopsychosocial, cultural and spiritual transformations occur, in which risk behaviors are often underestimated and reflected in other stages of life \(^{(8)}\).

This is due to the sum of several factors such as inexperience, emotional instability, early initiation of sexual life, multiple partners, not using condoms in sexual intercourse, influences from the media and the need for acceptance in groups can increase vulnerability to HIV/AIDS \(^{(2,10)}\).

Furthermore, when living conditions, housing, schooling, family and social relationships are weakened, they become potential influencers in the development of situations of vulnerability to HIV/AIDS \(^{(2)}\).

Some studies show that adolescents are now able to have broad access to information sources and strategies, as well as public policies on sexual and reproductive health in various spheres of the life cycle. However, even with knowledge about HIV/AIDS, some adolescents expose themselves to risk for trusting their sexual partner, for not liking to use condoms, for “thinking” that the partner does not have HIV; persisting in the false idea of invulnerability to sexually transmitted infections \(^{(8,11)}\).

In this sense, vulnerability to Aids stands out for having a complex concept that encompasses several dimensions that involve the state of being/being in danger or...
exposed to potential harm associated with individual, collective, subjective and adverse situations and contexts, particularities and specificities that vary according to the population addressed (12).

Souza et al (8) highlights that the female population becomes more vulnerable to HIV/AIDS, as there is still a large relationship of inequality between the sexes, permeated by stereotyped cultural constructions of domination, inferiority and neglect, which in turn, they deny women the right to exercise their full sexuality.

In addition, this exposure to the virus happens due to some factors such as early sexarche, ease of access to the use/abuse of alcohol and other drugs, low adherence to condoms, associated with greater sexual freedom, emotional instability, lack of information, gender inequity, predominant culture of masculinity and machismo, gender violence and lack of definitions of effective public health policies that have applicability to the existing reality (8).

The insertion of adolescents vulnerable to HIV/AIDS in primary health care

Primary Health Care has an important role in the identification of existing problems within the community, in the resolution, prevention, promotion and rehabilitation of health. It is, therefore, a gateway for adolescents vulnerable to HIV through early capture, home visits, consultation with the multidisciplinary team, routine monitoring and educational activities (13).

The inclusion of adolescents in PHC becomes evident through educational actions such as recreational activity workshops, active methodologies focusing on the clarification of the theme, forms of transmission and prevention. For this, the school becomes the ideal place for providing knowledge and means of learning that contribute to improving health and preventing diseases (13,14).

The identification of problems as a priority for monitoring and flexibility in the way of working with adolescents can be considered a means of consolidating them in primary care, making them co-responsible for the prevention of HIV/AIDS. The diversity of subjects during the service is also necessary to promote involvement with the adolescents, form a bond and identify possible aspects of vulnerability (13).

In addition, to facilitate the client's visit to the basic health unit, another means found is the use of the adolescent's health book in order to make him/her participative, not just a passive client in listening (13). This booklet, implemented in Brazil by PHC professionals, is an educational material, attractive and practical, which informs adolescents about the main discoveries and changes in this phase of life, addressing relevant issues that gradually make them responsible for their own health (14).

It is worth noting that professionals often report that this clientele is resistant to seeking primary care, which confirms that assistance is limited. This emerges from the need to encourage action-reflection strategies with adolescents about their threshold of vulnerability, empowerment and co-responsibility, since individuals who do not feel vulnerable to a given disease do not seek to adhere to preventive measures (13).

It is essential that the community health workers carry out the capture and orientation of this public, offering a more detailed attention, and that other team members
collaborate with the reception, establishing a more open and close dialog with the needs of adolescents, either individually or in groups in the community or schools, through peer education or other participatory methodologies, maintaining a sensitive and free listening of discriminatory principles \(^{(15)}\).

**Nursing care for adolescents in a situation of vulnerability to HIV/Aids in Primary Health Care**

In PHC, the role of nurses stands out in nursing consultations, home care, educational activities, sexual and reproductive activities, in addition to intermediating in the prevention, promotion, recovery and rehabilitation of health. This complex professional activity seeks to reach the sociocultural, institutional, family, subjective and behavioral processes that generate vulnerabilities to face problems related to HIV/Aids \(^{(8)}\).

With regard to adolescents in situations of vulnerability, it is observed that nurses use their interpersonal skills to involve this public in the health service, encouraging critical-reflexive reasoning, as well as making them important protagonists of their health \(^{(8,16)}\). It is noted that the activities carried out by nurses are organized according to the needs of this group, which happens sporadically during the adolescents’ visit to the health unit or when nurses visit schools \(^{(13)}\).

The nursing consultation should be an opportunity to capture needs, should focus on an intervention through a clinical and educational perspective, seeking to avoid the traditional, vertical and transmitting practice. It should also be a means of exchange and mutual growth for the construction of new values that make assistance more dynamic \(^{(13)}\).

It is worth mentioning that not all professionals have the skills to work with this public. In order to be a facilitator in this process, nurses also need training for the transmission of adequate knowledge, in such a way as to provide the effective capture of this clientele \(^{(2,13)}\).

This problem is not only related to the receptivity of the nurse's assistance, because during academic training there is no teaching aimed at this approach to adolescents, which becomes a challenge for the professional with regard to care related to vulnerabilities \(^{(13)}\).

The articulation between the theme in question and nursing care in primary care has an urgency to happen, as this allows overcoming the logic of specialization and fragmentation of care through shared responsibility, where users can be assisted in their community and understood and embedded in their complexity.

**Public policies aimed at adolescents in situations of vulnerability to HIV/Aids**

Adolescent health care is considered a complex and multifactorial process, since the social context influences behavior patterns and conditions of access to information and health. With this in mind, the Joint United Nations Programme on HIV/AIDS (UNAIDS, as per its acronym) has sought to implement strategies of combined prevention as a way to intervene simultaneously in different prevention approaches (biomedical, behavioral and structural), applied to the individual or community, according to the social context where it is inserted. \(^{(17)}\).
In addition, in 2007, the School Health Program (PSE, as per its Portuguese acronym) was established, which is a strategy for integration of health and education for the development of citizenship and the qualification of Brazilian public policies (18). Moreover, in 2010, the National Guidelines for Comprehensive Adolescent Health Care were created, which monitor and evaluate actions and programs, as well as contribute to its consolidation as a public health policy (19).

Associated with this policy, there is the importance of incorporating other public health policies to complement and provide care to adolescents vulnerable to HIV/AIDS in a comprehensive/holistic way, since the reception, social policies, sexual, reproductive and education represent some of these axes.

Although public policies and applicable strategies aimed at adolescents exist, they are still in an incipient phase when compared to other policies aimed at other life cycles, such as the health of children, women and the elderly (15).

The precarious living and health conditions of adolescents also point to their vulnerability, which requires an expanded, comprehensive and non-vertical view of public policies that effectively care for and protect them from HIV/AIDS infection (13, 15).

The adolescent population is a group with little investment in health, and is not yet a priority for Brazilian public health. The flaw can already be identified in the academic training of health professionals, where there is little or no qualification for specific attention to the needs of adolescents in situations of vulnerability to the acquired immunodeficiency virus (13).

Thus, Brazil needs to make more investments in health policies that involve the context of vulnerability in adolescents, in order to solve the main health and social problems identified, considering that inhibiting these gaps reduces vulnerability, and consequently, the number of adolescents infected with HIV/AIDS.

And nurses, as members of the health team responsible for conducting public policies and providing assistance to various services, become fundamental pieces for the direction and control of HIV, to intervene in the factors that influence vulnerability, in order to understand the complexity of the adolescent carrier of the virus.

As it is a narrative literature review, the study selection process may present a possible selection and evaluation bias, since this methodology does not require detailed data, which characterizes a limitation of this study. However, this research addresses an extremely relevant topic as it involves all contextual aspects of the adolescents with the acquired immunodeficiency virus, whose scientific publications are still scarce.

**CONCLUSIONS**

The results showed that adolescents are vulnerable to HIV/AIDS due to several factors such as early initiation of sexual life, multiple partners, ease of access to the use/abuse of alcohol and other drugs, non-use of condoms in sexual intercourse due to trust in the partner, not liking to use condoms or even due to the “thinking” that the partner does not have HIV. In addition, difficulties were identified in the access and
insertion of primary health care services, the existence of public policies that are still incipient in the face of the problem and lack of training and qualification of professionals for better care and nursing care.

Therefore, this study was relevant for analyzing the contextual aspects that involve the vulnerability of adolescents to HIV/AIDS in the context of primary care, as well as better understanding the phenomenon and the context, allowing for greater reflection on how nursing care can contribute for the resolution of health problems and for the transformation of work processes, production of new knowledge and ways of thinking and acting in health.

REFERENCES


