

SCHOOL FAILURE AND HEALTH AND SOCIAL ASPECTS: A CROSS-SECTIONAL STUDY WITH ADOLESCENTS

REPROVAÇÃO ESCOLAR E ASPECTOS SOCIAIS E DE SAÚDE: ESTUDO TRANSVERSAL COM ADOLESCENTES

REPROVISIÓN ESCOLAR Y ASPECTOS SOCIALES Y DE SALUD: ESTUDIO TRANSVERSAL CON ADOLESCENTES

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Objective: To check the association between school failure and socio-demographic, sexual/reproductive variables, and intrafamily violence among adolescents in the public school system. **Method:** this is a quantitative, cross-sectional study with the aim to check the association between dependent and independent variables. Stata software was used, the variate analysis of which was performed by Pearson's Chi-square test. **Results:** Data analysis allowed the identification of a positive and statistically significant association between school failure and the experience of sexual intercourse. Although not statistically significant, the study also revealed an association between the experience of psychological violence and school failure. A positive relationship among the following variables was also observed: black ethnicity, not having any religion, working to contribute to family support, and pregnancy. **Conclusion:** school failure is associated with social and health aspects among adolescents, such as sexual initiation and psychological violence.

Descriptors: Adolescent. Public health nursing. Health education. School nursing services.

Objetivo: verificar associação entre reprovação escolar e variável sociodemográfica, sexual/reprodutiva e violência intrafamiliar em adolescentes da rede pública de ensino. *Método:* trata-se de uma pesquisa quantitativa, do tipo transversal. Para verificar associação entre variáveis dependentes e independentes, utilizou-se o programa Stata, cuja análise bivariada foi realizada pelo Teste Qui-quadrado de Pearson. *Resultados:* a análise dos dados permitiu identificar associação positiva e estatisticamente significativa entre reprovação escolar e o fato de ter tido relação sexual. Embora sem significância estatística, o estudo também revelou associação entre vivência de violência psicológica e reprovação escolar. Verificou-se ainda que a problemática guarda relação positiva com as seguintes

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variáveis: raça negra, não praticar religião, trabalhar para contribuir com o sustento da família e gravidez. Conclusão: a reprovação escolar guarda associação com aspectos sociais e de saúde em adolescentes, a exemplo da iniciação sexual e da vivência de violência psicológica.

Descritores: Adolescente. Enfermagem em saúde pública. Educação em saúde. Serviços de enfermagem escolar.

Objetivo: verificar asociación entre reprobación escolar y variable sociodemográfica, sexual/reproductiva y violencia intrafamiliar en adolescentes de la red pública de enseñanza. Método: investigación cuantitativa, del tipo transversal. Para verificar la asociación entre variables dependientes e independientes, se utilizó el programa Stata, cuyo análisis bivariado fue realizado por el Test Qui-cuadrado de Pearson. Resultados: se identificó asociación positiva y estadísticamente significativa entre reprobación escolar y el hecho de haber tenido relación sexual. Aunque sin significancia estadística, el estudio también reveló asociación entre vivencia de violencia psicológica y reprobación escolar. La problemática guarda relación positiva con las siguientes variables: raza negra, no practicar religión, trabajar para contribuir con el sustento de la familia y embarazo. Conclusión: la reprobación escolar guarda asociación con aspectos sociales y de salud en adolescentes, a ejemplo de la iniciación sexual y de la vivencia de violencia psicológica.

Descriptores: Adolescente. Enfermería en salud pública. Educación en salud. Servicios de enfermería escolar.

Introduction

In the national scenario, school failure persists as a relevant problem due to its high prevalence, especially among adolescents. The consequences are damages to the full development of the individual, seriously affecting the social stratum. This is a problem that requires attention in the intersectoral public policies planning, aiming at directing actions to groups that are more vulnerable to learning difficulties.

The international context presents a worrisome situation regarding adolescents' school performance. Studies in Colombia discuss the problem of low school performance in adolescents, with one of them presenting 41.6% of failure in basic science subjects, such as mathematics⁽¹⁻²⁾. This reality of school failure was also evidenced in a study conducted in Uganda, an African country⁽³⁾. In Argentina, a study was carried out with 554 adolescents enrolled in three public schools, the results of which showed that 27.6% had insufficient school performance⁽⁴⁾.

According to data from the Ministry of Education, adolescents throughout Brazil represent the main public with alarming failure rates. Since 2006, this problem has been monitored every two years by the Todos Pela Educação Program, which carries out an analysis of students' performance in primary and high

school. This report reveals that, in 2015 and 2016, adolescents presented stagnant school performance and, in some states of the country, such as Bahia, they presented setbacks in this indicator. Low school performance of Brazilian adolescents enrolled in high school was also observed in a historical series that considered the period from 1999 to 2014. This study results pointed out that the average rate of school failure in Brazil increased from 8.7% to 13.1%. In the state of Rio Grande do Sul, this rate reached 20.7%⁽⁵⁾. This situation was even more alarming in the findings of a study carried out in São Paulo, evidencing that 50% of the participants did not perform satisfactorily⁽⁶⁾.

This context of school failure among adolescents concerns both education and health professionals, because low school performance results in damages to the health of this population group⁽⁷⁾. An international study, with a sample of 10,803 adolescents between 12 and 18 years of age, revealed an association between delayed school progression and mental disorders in adolescence⁽⁸⁾. A study carried out in Colombia adds that the demotivation and frustration generated when the adolescent fails in several school grades may cause low self-esteem and, in certain cases, lead to suicidal behavior⁽⁹⁾. In

addition to problems in adolescents' health, the issue of school failure can take on broader proportions when it reaches the social stratum, generating unemployment, poverty, social exclusion and increased crime in the country⁽¹⁰⁾. National studies that investigated the socio-demographic profile of people in the prison system indicate that most of them have low levels of education, suggesting the relationship between school failure and criminal acts⁽¹¹⁻¹²⁾.

The consequences of poor school performance indicate the need for interventions to prevent and address this problem, especially with the joint efforts between the education and health sectors. The Saúde na Escola Program (PSE, as per its acronym in Portuguese), an intersectoral public policy instituted in 2007, is a strategy for integrating the School, aiming at facing vulnerabilities that could jeopardize the full development of children and adolescents. This is a privileged space for nurses to work through the development of health education actions with students, especially those who are most exposed. Therefore, the identification of this target audience becomes relevant.

National and international studies point to some factors associated with school failure among adolescents, including being black, child labor, malnutrition, family conflicts, and unwanted pregnancies^(7,13-14). With the scientific evidence about the interface of demographic, social and sexual/reproductive health aspects with school failure, the following research question was outlined: Is there an association between school failure and socio-demographic, sexual/reproductive variables and intrafamily violence? To answer this question, the objective of this study was to check the association between school failure and socio-demographic, sexual/reproductive variables and intrafamily violence among adolescents of the public school system.

Method

This is a cross-sectional study based on data from a larger study called "Universidade e Escola Pública: Buscando Estratégias para Enfrentar

os Fatores que Interferem no Processo Ensino/Aprendizagem" (University and Public School: Looking for Strategies to Manage Factors that Interfere in the Teaching/Learning Process), held at a public elementary school located in a neighborhood on the outskirts of the city of Salvador, state of Bahia, Brazil.

Sample calculation was performed considering the total number of adolescents enrolled in the afternoon shift in 2014 (n = 276), resulting in a sufficient sample of 210 students, considering a sample error of 2.35%. However, we opted to include all students aged 10 to 19 years who were found after two collection attempts, totaling 239 participants.

The research project was approved by the Research Ethics Committee of the Nursing School of the Federal University of Bahia (CEPEE/UFBA), under the Consubstantiated Report no. 384208. Data collection took place in two moments. The first one was carried out in the period between October 2014 and January 2015, in which data on the adolescents' socio-demographic and sexual/reproductive profile, and the history of intrafamily physical and psychological violence were obtained. These data were collected in a standardized form, developed by the researchers based on the review of the evidence on the subject. The questions included the following variables: socio-demographics, sexual/reproductive health, and history of intrafamily violence.

In the second moment of data collection, performed in September 2016, the students' school reports were checked in the school administrative office, to identify the students who passed and those who failed. Data were organized in Excel, and processed in Stata software, version 12. The bivariate analysis was performed using Pearson's Chi-square test (χ^2) to evaluate possible associations among the dependent variable, school failure and the independent variables: socio-demographics (sex, age, race, religion, work), sexual/reproductive (sexual intercourse, pregnancy) and violence (psychological, physical).

This association magnitude was measured using the prevalence ratio, considering a 95%

confidence interval. All variables worked in the bivariate analysis were included in the multivariate model. The adjustment of variables was performed based on the backward model, considering the probability of less than 5% ($p < 0.05$), in order to obtain estimates of odds ratio.

It is worth mentioning that the entire process of development of this scientific production was carried out considering the principles of justice, non-maleficence, beneficence and autonomy required by Resolution n. 466/2012 of the National Health Council. Following these principles, a written consent was requested from the adolescents who agreed to participate in this study, by signing a free and informed consent form. The authorization of the adolescents' legal representative was also requested, formalized through the signature of free prior informed consent forms. For non-literate parents, fingerprints were collected.

Results

Study participants were 239 adolescents of an elementary public school, of which 31.38% ($n = 75$) failed in 2015. Observation of the socio-demographic variables showed that 54% ($n = 129$) of the sample were males, 59.8% ($n = 143$) were between 10 and 14 years, 76.6% ($n = 183$)

self-declared to be black, 53.1% ($n = 127$) reported that they did not belong to any religion, and 95.4% ($n = 228$) did not work. Regarding sexual/reproductive variables, 36.4% ($n = 87$) reported having had sexual intercourse, and 2.09% ($n = 5$) had already been pregnant or got their partners pregnant.

Based on the results of the bivariate analysis (Table 1), the study identified an association between psychological violence and school failure, but it was not statistically significant (PR = 1.24 and 95% CI: 0.69-2.22). The experience of sexual intercourse was a positive and statistically significant association with school failure (PR = 2.41 and 95% CI: 1.37-4.23). School failure, although not statistically significant, was positively related to the following variables: black ethnicity (PR = 1.5 and 95% CI: 0.79-2.95), no religion (PR = 1.5 and 95% CI: 0.86-2.61), working to contribute to family support (PR = 1.88 and 95% CI: 0.55-6.36) and pregnancy (PR = 3.37 and 95% CI: 0.55-2.63). It was also observed that the female gender was negatively associated with school failure (PR = 0.64 and 95% CI: 0.37-1.12), and belonged to the oldest age group (PR = 0.71 and 95% CI: 0.40-1.25) and experienced situations of physical violence (PR = 0.62 and 95% CI: 0.35-1.08).

Table 1 – Association between school failure among adolescents and violence experience, according to socio-demographic and sexual variables. Salvador, Bahia, Brazil – 2015 ($n = 239$) (to be continued)

Variables	n Total (%)	Success (%)	Failure (%)	Prevalence ratio (PR)	CI (95%)
Gender					
Male	129 (54.0)	83 (64.34)	46 (35.66)	1	
Female	110 (46.0)	81 (73.64)	29 (26.36)	0.64	0.37 – 1.12
Age					
10 to 14 years	143 (59.8)	94 (65.73)	49 (34.27)	1	
15 to 19 years	96 (40.2)	70 (72.92)	26 (27.08)	0.71	0.40 – 1.25
Ethnicity					
Non-black	56 (23.4)	42 (75.0)	14 (25.0)	1	
Black	183 (76.6)	122 (66.67)	61 (33.33)	1.5	0.79 – 2.95
Religion					
Yes	112 (46.9)	82 (73.21)	30 (26.79)	1	
No	127 (53.1)	82 (64.57)	45 (35.43)	1.5	0.86 – 2.61
Labor					
Yes	11 (4.6)	6 (54.55)	5 (45.45)	1.88	0.55 – 6.36
No	228 (95.4)	158 (69.30)	70 (30.70)	1	

Table 1 – Association between school failure among adolescents and violence experience, according to socio-demographic and sexual variables. Salvador, Bahia, Brazil – 2015 (n = 239) (conclusion)

Variables	n Total (%)	Success (%)	Failure (%)	Prevalence ratio (PR)	CI (95%)
Sexual intercourse					
Yes	87(36.4)	49 (56.32)	38 (43.68)	2.41	1.37– 4.23
No	152(63.6)	115 (75.66)	37 (24.34)	1	
Pregnancy					
No	234 (97.91)	162 (69.23)	72 (30.77)	1	
Yes	5 (2.09)	2 (40.0)	3 (60.0)	3.37	0.55 – 20.63
Psychological violence					
Yes	75 (31.38)	49 (65.33)	26 (34.67)	1.24	0.69 – 2.22
No	164 (68.62)	115 (70.12)	49 (29.88)	1	
Physical violence					
Yes	118 (49.37)	87 (73.73)	31 (26.27)	0.62	0.35 – 1.08
No	121 (50.63)	77 (63.64)	44 (36.36)	1	

Source: Created by the authors.

In the multivariate analysis (Table 2), all the variables worked in the binary model were included. Its final model showed that school

failure was still associated with the variable sexual intercourse, with statistical significance (OR=2.38 and CI 95%:1.35-4.19).

Table 2 – Odds ratio and respective 95% confidence interval for associations between school failure and the variables psychological violence, gender, age, ethnicity, religion, labor, sexual intercourse and pregnancy. Salvador, Bahia, Brazil – 2015 (n= 239)

Variables	Initial model OR CI 95%	Final model OR CI 95%
Gender		
Female	0.64 (0.34 – 1.17)	0.64 (0.34 – 1.17)
Age		
15 to 19 years	0.69 (0.38 – 1.26)	0.69 (0.38 – 1.26)
Ethnicity		
Black	1.57 (0.76 – 3.24)	1.57 (0.76 – 3.24)
Religion		
No	1.56 (0.87 – 2.81)	1.56 (0.87 – 2.81)
Family life		
Others	0.57 (0.32 – 1.04)	0.57 (0.32 – 1.04)
Labor		
Yes	1.17 (0.31 – 4.43)	1.17 (0.31 – 4.43)
Sexual intercourse		
Yes	1.69 (0.79 – 3.62)	2.38 (1.35 – 4.19)
Pregnancy		
Yes	2.29 (0.33 – 15.84)	2.29 (0.33 – 15.84)
Psychological violence		
Yes	1.17 (0.63 – 2.18)	1.17 (0.63 – 2.18)
Physical violence		
Yes	0.62 (0.35 – 1.08)	0.62 (0.35 – 1.08)

Source: Created by the authors.

Discussion

The study shows that the female gender is negatively associated with school failure. Therefore, it is clear that, during adolescence, girls obtain better levels of school performance when compared to boys. A study carried out at a public school in the metropolitan region of the city of Campinas, in the state of São Paulo, Brazil, to investigate differences between students with satisfactory and insufficient school performance, also identified that most of students with satisfactory school performance are female⁽¹⁵⁾. This situation is consistent with research showing that girls are more dedicated to studies, both at the elementary level and in secondary and higher education⁽¹⁶⁾.

Regarding age group, the study identified that adolescents aged between 15 and 19 years show less failure, since the older age group had a negative association with school failure. Different from what was found, the national literature shows that the highest rates of school failure are found among adolescents between the ages of 15 and 19^(7,17-18).

School failure was also associated with the black ethnicity, a reality that is also measured in a survey carried out in state schools in nine cities of the state of Minas Gerais, in the metropolitan area of the city of Belo Horizonte, Brazil⁽⁷⁾.

These data reflect the situations of social inequalities experienced by this population, although ethnic-racial studies show that race does not determine the intellectual and/or human being's cognition. In Brazil, a country originated from a colonization whose economic base was black slavery, the population still faces a false racial democracy because, in general, black people have fewer opportunities than white people, especially in the areas of studies and professional career⁽¹⁹⁻²⁰⁾.

There was also an association between not having a religion and failing at school, as observed in a study conducted in the city of Natal, state of Rio Grande do Norte, Brazil, which showed that religiosity and spirituality have a positive influence on mental health,

favoring adolescents' learning⁽²¹⁾. Religion plays an important role in people's lives, especially when it comes to coping with stressful events, among which social inequities are inserted. Thus, it can be noticed that the psychological support acquired through religiosity/spirituality can allow good school performance, even in adverse situations, and avoid school failure. In addition, religious practices tend to encourage, and consequently influence more conservative behaviors⁽²²⁾, such as attendance, punctuality, fulfillment of academic activities, self-discipline, among others.

Regarding employment relationships, the study evidenced a relationship with school failure in adolescence, corroborating findings of a study conducted in seven Brazilian capitals (Porto Alegre, Recife, São Paulo, Belo Horizonte, Brasília, Campo Grande and Manaus) with the aim to contribute to the understanding of the relationship between work and adolescents' school life⁽¹³⁾. It is believed that sometimes adolescents of lower social classes and in poverty are faced with the need to work to contribute to family support. In this perspective, school dropout, as well as the increase in the number of absences to classes, can be a consequence of this situation and impact students' academic performance, leading to school failure.

Another important factor observed in this study was the association between sexual intercourse and school failure. This is worrisome, because in addition to academic repercussions, early initiation of sexual activity makes adolescents vulnerable to the risk of sexually transmitted infections (STIs) and to have an unwanted pregnancy. In Belo Horizonte, state of Minas Gerais, Brazil, a study observed that the chances of failure are higher among pregnant students⁽⁷⁾, signaling the relevance of actions in education and health that raise questions about sexuality and unplanned pregnancy in adolescence.

The fact that physical violence is negatively associated with school failure stands out, although having no statistical significance. It is a specificity of the sample, which can be explained by the high proportion of students who experience physical

aggression in the intrafamily environment. In addition, it is assumed that physical violence can be naturalized by adolescents, because it still is an educational method widely used by parents and guardians, as indicated in a study carried out in a public school in the city of Salvador, Bahia, with the objective to identify if adolescents who experienced intrafamily violence recognized themselves in such a situation⁽²³⁾.

Different from physical violence, the study showed the association between school failure among adolescents and the psychological violence experience. Although not statistically significant, this association is worrisome, mainly due to the severity of the phenomenon of violence, which is characterized as an important public health problem. It is a reality observed in studies conducted in the international environments, and in the Brazilian territory, where findings corroborate the association between the experience of this aggravation and low school performance by adolescents, besides an increase in the rate of school dropout and grade retention⁽²⁴⁻²⁵⁾.

This interface is related to the damage caused by intrafamily violence to adolescents' mental health, who tend to show signs, such as low self-esteem, anguish, demotivation, anger and depression, confirming the results of an international study which evaluated 21,538 cases of sexual violence against children and adolescents under the age of 18 that are followed by the South African Police Service⁽²⁶⁾. When they are not early identified and treated, these symptoms can lead to disinterest in life. This is confirmed by the research carried out in Mérida, Venezuela, with the objective to explain the behavior of suicidal ideation in adolescent students. It revealed that the experience of violence constitutes a stressful variable for adolescents, causing eating disorders, impulsivity, social isolation and even suicidal thoughts⁽²⁷⁾.

Due to the severity of these manifestations, identifying them, still in the teenage phase, is crucial because the early treatment of these problems may prevent them from becoming more complex. A Brazilian study with adolescents

that were victims of domestic violence identified that 54.4% presented emotional problems, 45.6% developed attention/hyperactivity problems, 52% relationships problems, and 66.3% behavior problems⁽²⁵⁾. According to these data, most adolescents presented behavioral disorders as a consequence of aggression, such as getting up and leaving the classroom when they are expected to sit, "skipping" classes, among other violations of school rules. These behaviors make it difficult to concentrate in the classroom, reduce students' participation in academic activities, and compromise school performance, leading to failure⁽²⁵⁾.

Considering the relevance of learning for human development, intervention actions with students are necessary to prevent and cope with issues associated with low school performance, as is the case of teenage pregnancy and the experience of intrafamily violence. These actions can be coordinated between the health and education sectors, including the PSE program, which integrates an intersectoral policy aimed at citizenship and the full biopsychosocial development of children and adolescents⁽²⁸⁾. In this process, the work of nursing professionals should be highlighted, because of the professional approach to health promotion and prevention of diseases and injuries, and the possibility of working with students, for example, in reducing the rates of sexual initiation and early labor, as well as the violence experienced in the family setting.

Considering the naturalization that permeates intrafamily violence, especially in face of the culture of physical and psychological punishment as a means of education^(23,29-30), it is necessary to consider the possibility that students do not recognize themselves in such a situation. Even in face of this limitation, the study points to low school performance as a marker for investigations of domestic abuse in adolescents.

Conclusion

The study identified that school failure has a direct and significant relationship with

sexual initiation in adolescence. Although not statistically significant, the study also revealed an association with the experience of psychological violence. It was also noted that the problem is positively related to the following variables: black ethnicity, no religion, working to contribute to family support, and pregnancy. Thus, it can be concluded that school failure is associated with social and health aspects in adolescents, such as sexual initiation and psychological violence.

Regarding early sexual intercourse, the vulnerability of students to STIs and unwanted pregnancies stand out; these situations may favor absenteeism and/or impair school performance. Therefore, educational actions with this public are needed. These actions should permeate the field of sexual and reproductive rights and lead to reflections on the responsibility of adolescents for safe sexual practice, considering the concept of freedom with responsibility.

Another contribution of this study concerns the aspects associated with school failure, allowing the knowledge of adolescents' profiles, for whom health education actions should be prioritized to improve school performance. These initiatives can be developed by professionals in the area of education and/or health, such as nurses, preferably linked to the PSE program, which is an indispensable tool for coping with vulnerabilities that jeopardize the full development of adolescents in the public education system.

Collaborations:

1. conception, design, analysis and interpretation of data: Raiane Moreira dos Santos, Nadirlene Pereira Gomes, Rosana Santos Mota and Gleide Santos de Araújo;

2. writing of the article and relevant critical review of the intellectual content: Raiane Moreira dos Santos, Nadirlene Pereira Gomes, Rosana Santos Mota, Telmara Menezes Couto and Nildete Pereira Gomes;

3. final approval of the version to be published: Nadirlene Pereira Gomes and Telmara Menezes Couto.

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