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REVIEW ARTICLE

Sexual and reproductive rights for women in primary health care

Derechos sexuales y reproductivos de las mujeres en la atención primaria de salud

Direitos sexuais e reprodutivos para mulheres na atenção primária à saúde

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Abstract

This study aimed to describe the importance of sex education and reproductive rights for women of reproductive age within primary health care. It was a descriptive, qualitative, integrative review conducted through searches of the LILACS, SciELO, BVS, and MEDLINE databases, using the following descriptors: "Sexual and Reproductive Rights," "Reproductive Health," "Women," "Nurse," and "Primary Health Care." Inclusion criteria covered articles published between 2020 and 2025, available in full text and written in Portuguese, English, or Spanish, that addressed sexual and reproductive rights or sex education. Exclusion criteria encompassed studies outside the specified timeframe, incomplete studies, or those that did not directly address the topic. After screening, nine articles met the criteria and were analyzed, allowing the findings to be organized into three thematic categories: barriers to women's access to basic reproductive health services; the importance of nurse training; and the nurse's role in supporting women's reproductive planning. The study concludes that sex education plays an indispensable role in strengthening female autonomy and realizing sexual and reproductive rights, particularly in primary health care, where nurses act as a leading agent.

Descriptors: Sexual and Reproductive Rights; Reproductive Health; Women's Health; Nursing; Primary Health Care.

Resumén

El objetivo fue describir la importancia de la educación sexual y los derechos reproductivos para las mujeres en edad reproductiva en atención primaria. Esta fue una revisión integradora, de naturaleza descriptiva y con un enfoque cualitativo, llevada a cabo a través de búsquedas en las bases de datos LILACS, SciELO, BVS y MEDLINE, utilizando los descriptores: "Derechos sexuales y reproductivos", "Salud reproductiva", "Mujeres", "Enfermera" y "Atención primaria de salud". Los criterios de inclusión comprendieron artículos publicados entre 2020 y 2025, con texto completo disponible y escritos en portugués, inglés o español, que abordaran los derechos sexuales y reproductivos o la educación sexual. Los criterios de exclusión comprendieron estudios fuera del período de tiempo, estudios incompletos o aquellos que no abordaran directamente el tema. Después de la selección, nueve artículos cumplieron los criterios y fueron analizados, lo que permitió organizar los hallazgos en tres categorías temáticas: Dificultades en el acceso de las mujeres a los servicios básicos de salud reproductiva; La importancia de la capacitación de enfermeras; El rol de la enfermera en el seguimiento de la planificación reproductiva de las mujeres. Se concluye que la educación sexual desempeña un papel indispensable en el fortalecimiento de la autonomía femenina y en la realización de los derechos sexuales y reproductivos, especialmente en la Atención Primaria, donde la enfermera actúa como agente principal.

Descriptores: Derechos Sexuales y Reproductivos; Salud Reproductiva; Salud de la Mujer; Enfermería; Atención Primaria de Salud.

Resumo

Objetivou-se descrever a importância da educação sexual e dos direitos reprodutivos das mulheres em idade reprodutiva na atenção básica. Tratou-se de uma revisão integrativa, de caráter descritivo e abordagem qualitativa, realizada por meio de buscas nas bases LILACS, SciELO, BVS e MEDLINE, utilizando os descritores: "Direitos Sexuais e Reprodutivos", "Saúde Reprodutiva", "Mulheres", "Enfermeiro" e "Atenção Primária à Saúde". Os critérios de inclusão contemplaram artigos publicados entre 2020 e 2025, com texto completo disponível e escritos em português, inglês ou espanhol, que abordassem direitos sexuais e reprodutivos ou educação sexual. Os critérios de exclusão englobaram estudos fora do recorte temporal, incompletos ou que não abordassem diretamente a temática. Após a triagem, nove artigos atenderam aos critérios e foram analisados, permitindo a organização dos achados em três categorias temáticas: Dificuldades de acesso das mulheres ao serviço básico de saúde reprodutiva; A importância da capacitação do enfermeiro; e O papel do enfermeiro no acompanhamento do planejamento reprodutivo da mulher. Conclui-se que a educação sexual desempenha papel indispensável para o fortalecimento da autonomia feminina e para a efetivação dos direitos sexuais e reprodutivos, especialmente na Atenção Básica, onde o enfermeiro atua como agente protagonista.

Descritores: Direitos Sexuais e Reprodutivos; Saúde Reprodutiva; Saúde da Mulher; Enfermagem; Atenção Primária à Saúde.

Introduction

This study focused on the educational strategies adopted by nurses to combat misinformation regarding women's sexual and reproductive rights in primary health care.

The concept of sexual and reproductive rights emerged around the 1970s, near the end of the military regime, alongside the rise of new social movements focused on issues such as ethnicity, gender, and social class. This concept was driven by the feminist movement, which championed women's rights over their own bodies, linking them to principles of freedom and autonomy, and coined the slogan "Our bodies belong to us." Consequently, key causes within this movement came to include the right to choose whether to conceive, bodily autonomy, and the right to abortion, issues that also formed part of the international feminist struggle[1].

Sexual and reproductive health is significant in all aspects of a woman's life, whether cultural, religious, or social. In this context, the definition of sexual and reproductive rights regarding power and resources is grounded in the ability to make decisions based on reliable information concerning fertility, child-rearing, pregnancy, gynecological health, and sexual activity, as well as the means to safely act upon that information[1]. Nurses, in turn, play a crucial role in providing guidance and information regarding these rights, particularly those working in primary care or Family Health Strategy settings, as they serve as the link through which women and the general public gain access to safe, reliable information on topics such as contraceptive methods, family planning, and forms of contraception[2].

Nowadays, technological advancements have made information more accessible, particularly through websites and social media; however, alongside the wealth of useful and relevant information available, there is also a prevalence of fake news and misinformation regarding various topics, including health-related issues. In this context, it is crucial to exercise extreme caution regarding health-related content found online, always verifying the source of the information before adopting or sharing it[3].

Misinformation regarding sexual and reproductive health is undoubtedly a public health issue, given that the population may view basic health units as inappropriate places to discuss such topics due to societal taboos, whether religious or cultural. Furthermore, there is a general lack of trust in healthcare institutions, which limits access to reliable information[4].

Educational activities regarding sexual and reproductive health are somewhat complex and challenging for the population to adopt. These educational practices include discussion circles and awareness campaigns, which require creating spaces where people can voice their doubts and ask questions, feeling welcomed and safe enough to express themselves, thereby enabling them to develop greater control and autonomy over their health[5].

The role of the nurse in combating misinformation is indispensable; these professionals must seek a scientific basis for information, always verifying the accuracy of what they receive to correctly guide the public with reliable information and dispel myths surrounding these issues.

Primary Health Care plays an essential role in promoting women's sexual and reproductive rights, serving as the first point of contact with the Unified Health System (SUS). In this context, implementing educational strategies within this setting is crucial for combating misinformation and fostering sexual and reproductive autonomy. Recent studies show that using digital platforms, such as social media, can be effective in disseminating sexual health information among women, especially when combined with health education practices tailored to local and cultural realities. Furthermore, the continuous training of health professionals is necessary to ensure sensitive, informed care capable of meeting this population's specific needs. Integrating educational initiatives into Primary Health Care helps reduce risks associated with sexual and reproductive health, promoting a comprehensive and equitable approach for women[6].

Considering the foregoing, this study aimed to discuss the educational actions adopted by nurses to combat misinformation regarding sexual and reproductive rights for women in primary health care.

This research aimed to help dispel misconceptions regarding these rights, thereby enabling the implementation of educational strategies that foster greater public engagement with the topic, a matter relevant to the population's healthy development and the prevention of numerous sexually transmitted diseases. The study holds scientific significance by investigating educational strategies designed to combat misinformation about women's sexual and reproductive rights within the context of primary health care. By addressing sexual and reproductive education as tools for promoting health, autonomy, and gender equity, the study contributed to strengthening evidence-based practices in public health, focusing on disease prevention and expanding access to reliable information.

Methodology

This study was an integrative literature review of a descriptive nature employing a qualitative approach. Materials were selected through searches in the following databases: Latin American and Caribbean Health Sciences Literature (LILACS), SciELO, BVS, and MEDLINE.

The following descriptors were used for the search: “Sexual and reproductive rights,” “Reproductive health,” “Women,” “Nurse,” and “Primary health care.” This integrative review was guided by the following research question: “What educational strategies can nurses adopt to combat misinformation regarding sexual and reproductive rights for women in primary health care?” This question was formulated based on the PICo strategy (Chart 1), where P = population, patient, or problem addressed in the study; I = phenomenon of interest; and Co = context.

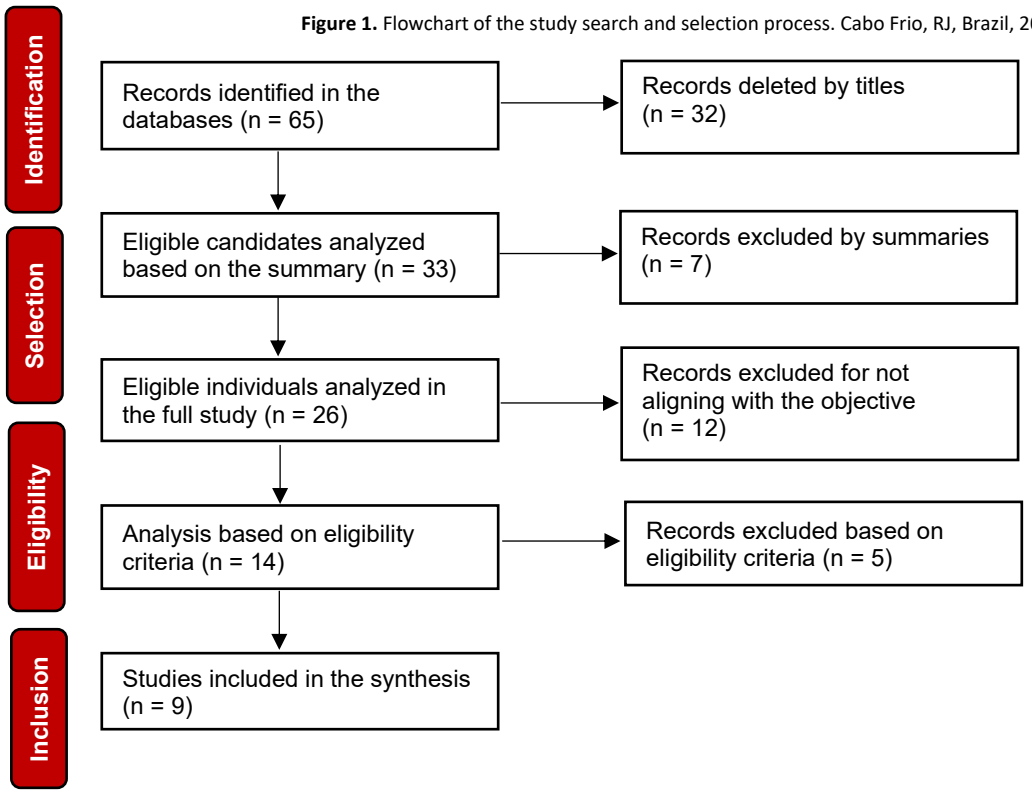
The inclusion criteria adopted were articles published between 2020 and 2025, available in the databases with full-text access, written in Portuguese, English, or Spanish, and addressing sexual and reproductive rights and/or sex education. Exclusion criteria included

studies that did not directly address sexual and reproductive rights or sex education, as well as articles considered too old, falling outside the established timeframe. The study search and selection strategy was based on Health Sciences Descriptors (DeCS), a standardized terminology recommended for health research, ensuring precision and uniformity in data retrieval. To broaden the search's scope and sensitivity, these terms were combined systematically using the Boolean operators "AND" and "OR," following the logic of how the concepts relate: the "OR" operator was used to group synonyms or terms related to the same thematic axis, thereby expanding the range of results, while the "AND" operator was used to link different conceptual axes, restricting results to materials that addressed all the research's core elements. Combinations such as ("Sexual and reproductive rights" OR "Reproductive health") AND "Women" AND "Nurse" AND "Primary health care" were thus constructed, alongside other variations that cross-referenced the descriptors in different ways, aiming to capture all possible article indexing methods within the databases.

Chart 1. PICo Strategy. Cabo Frio, RJ, Brazil, 2025

Acronym	Definition	Application
P	Population, patient, or problem studied	Educational actions adopted by the nurse
I	Interest	Educational strategies to combat misinformation regarding women's sexual and reproductive rights
Co	Context	Primary health care

Figure 1. Flowchart of the study search and selection process. Cabo Frio, RJ, Brazil, 2025



Data collection took place between September and October 2025, in accordance with the established schedule. The selected studies were organized into a table to facilitate the visualization of results. This tool enabled the grouping of key information from each selected study, creating a database for the final stage of the research. The information extracted from the selected articles for inclusion in the table consisted of the title, authors, main results, and conclusion. The data were analyzed thematically, aiming to identify better sex education strategies for women of reproductive age and to highlight the importance of such education. The article selection process followed the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses)[7] flow guidelines and recommendations, encompassing the stages of identification, screening, eligibility, and inclusion. The process began with the identification stage, yielding 65 studies; of these, 32 were excluded based solely on title analysis because they did not align with the research topic or general criteria, leaving 33 items for the next phase. During the selection stage, the abstracts of these 33 articles were read and evaluated; 7 were discarded for lacking content relevant or appropriate to the study's objective, leaving 26 studies to proceed to analysis following a full-text review. In this stage, 12 articles were excluded after a detailed

assessment revealed they did not match the investigation's purpose or failed to meet established methodological requirements; this left 14 items to undergo analysis based on pre-defined criteria regarding quality, relevance, and suitability. Following this rigorous evaluation, another 5 studies were eliminated, resulting in a final sample of 9 articles from the LILACS and MEDLINE databases. These articles, selected based on the topic and criteria, met all inclusion requirements, served as the basis for the review, and were subsequently organized into discussion categories.

Results and Discussion

The articles and their data collection are represented in the chart below.

Chart 2. Analytical classification of the articles included in this review, categorized by author, title, year of publication, objectives, and results. Cabo Frio, RJ, Brazil, 2025

Author	Title	Year	Objectives	Results
Rodrigues, G.A. et al	Planejamento reprodutivo e inserção de dispositivo intrauterino realizada por médicos e enfermeiras no Brasil	2023	Analyze records of reproductive planning consultations and intrauterine device insertions performed by physicians and nurses in primary health care.	The article identified a need to invest in the training of physicians and nurses to expand women's access to their right to sexual life and reproductive health in the country.
Justino, G.B.S. et al.	Educação sexual e reprodutiva no puerpério: questões de gênero e atenção à saúde das mulheres no contexto da Atenção Primária à Saúde	2021	Understand the challenges faced by health professionals in carrying out sexual and reproductive education actions in the context of primary health care.	The study revealed a lack of space for sharing experiences, as well as insufficient investment in human and material resources to ensure access to contraceptive methods and to facilitate broader, comprehensive discussions on sexual and reproductive rights.
Paula, M.B.M. et al.	Dimensão identitária da mulher rural e a saúde sexual e saúde reprodutiva	2022	Analyze the representation of rural women in the context of sexual and reproductive health.	It was observed that the sexual and reproductive health of rural women is overshadowed by the sexism and conservatism imposed upon them by society, and that there is a significant need to address these women's sexual and reproductive health.
Pereira, A. K. da S. et al.	Atuação do enfermeiro na promoção da saúde sexual e reprodutiva às mulheres: revisão integrativa	2024	Identify the role of the nurse in promoting sexual and reproductive health among women.	It was concluded that the nurse plays a significant role in developing educational initiatives regarding family planning and the use of contraceptive methods.
Borges, A.L.V. et al.	Uso de métodos contraceptivos de emergência entre mulheres atendidas em serviços de Atenção Primária à Saúde em três capitais brasileiras	2021	Analyze the use of emergency contraceptives. Sample of 2,051 women aged 18 to 49 who were users of 76 Basic Health Units in São Paulo (SP), Aracaju (SE), and Cuiabá (MT).	It was observed that young, more educated, working women who are not in a stable partnership use this type of contraception more frequently, and it is more commonly used by women who do not employ a contraceptive method.
Silva, D.D. et al.	O impacto da capacitação do enfermeiro na inserção do dispositivo intrauterino de cobre TCu 380ª	2022	Report on the theoretical and practical training of nurses for IUD insertion during nursing consultations.	An increase was achieved in the number of IUD insertions performed by nurses within the primary care network, expanding women's access to this contraceptive method.
Pscheidt, E.; Levandowsk, T.	Saúde reprodutiva e autonomia: papel da enfermagem no atendimento de mulheres vulneráveis na atenção primária	2025	Identify nurses' strategies for promoting women's autonomy and reproductive planning, focusing on the socially vulnerable population.	The need was recognized to provide continuous training and education for nurses, enabling them to work effectively and with enhanced proficiency in the areas of reproductive planning and autonomy.
Santos, E.G. et al.	Acesso de mulheres à consulta de enfermagem com ênfase na saúde reprodutiva: revisão integrativa	2023	Recognize nursing actions in Primary Health Care that promote women's sexual and reproductive health.	Was demonstrated that nursing practice within the context of women's sexual and reproductive health must foster women's autonomy and freedom by providing comprehensive care and promoting health protection through education, guidance, and care.
Paula M.B.M. et al.	Saúde sexual e reprodutiva de mulheres que vivem no contexto rural: revisão integrativa	2022	Examine the literature for perspectives regarding the sexual and reproductive health of women living in rural areas.	Geographic and economic barriers related to healthcare accessibility were identified, alongside gender inequality, which causes domestic violence to interfere with these women's sexual and reproductive health.

Analysis of the articles made it possible to identify relevant and recurring aspects regarding the importance of sex education and women's sexual and reproductive rights within primary care, as well as to highlight key points

concerning the nurse's role in these initiatives. Based on this, three thematic categories emerged: (1) Barriers to women's access to basic reproductive health services; (2) The importance of nurse training; and (3) The importance of the nurse in supporting women's reproductive planning.

Barriers to women's access to basic reproductive health services

This category describes the difficulties women face in accessing basic reproductive health services, whether due to social stigmas (such as sexism) or economic barriers, geographical obstacles, and gender inequality, thereby further hindering access to what is a fundamental health need for these women.

The article by Paula et al.[8] addresses women's lives in rural settings in general and the difficulties they face in accessing health services; often, these women are deprived of their autonomy and the right to make their own decisions, including those regarding their own bodies, while also contending with issues of sexism and domestic violence, which further diminish their chances of accessing healthcare.

Geographic and socioeconomic barriers can be considered among the greatest obstacles to such access; women often face significant difficulty traveling to care facilities, which are frequently distant and inaccessible, particularly in rural contexts. From a socioeconomic perspective, many are unable to leave their agricultural work to attend to their health needs. These difficulties have a profound impact on women's health; for instance, regarding the cytopathological exam, one of the methods for the early detection of cervical cancer, women facing access barriers are left in a state of uncertainty and unable to engage in preventive care, thereby reducing their chances of a cure through early detection.

The study by Paula et al.[9] highlights the difficulties faced by women in rural settings, as many of them shoulder a triple burden: farm work, household chores, and raising their children on their own. Although the vast majority are married, their partners do not assist with the division of tasks or child-rearing; consequently, these women lack the time to even consider their own needs, including their overall health and reproductive health. This creates significant socioeconomic barriers to accessing healthcare services, as they lack a support network from their partners, and many also suffer from domestic violence. According to the Brazilian Public Security Forum, 258,000 women suffered intentional bodily injury in a domestic setting in 2024[10]; that breeds insecurity and fear of one's partner, necessitating concealment when he is drunk, and some women even suffer sexual abuse at the hands of their partners, causing them to view sexuality as something perverse and harmful rather than a source of pleasure and enjoyment. Rural women are particularly affected by these issues, especially regarding motherhood, since a lack of sex education prevents them from protecting themselves against pregnancy, meaning that most sexual encounters result in childbirth; this contrasts with the urban context, where women, being more informed, tend to view motherhood not merely as a natural process but as a matter of choice. All these themes highlight the importance of paying greater attention to women's reproductive health; there is an urgent need to expand care in this area, making it equitable and accessible across all social strata, thereby restoring these women's right to sexual and reproductive health.

The importance of nurse training

This category addresses the importance and distinctive nature of professional training for nurses in the face of challenges encountered in primary care regarding women's health, given that their role is essential, particularly during nursing consultations, which require skilled listening, the ability to identify women's needs, and the development of nursing plans aimed at high-quality, effective implementation. Study[11] indicates that nurses play a major role in fostering women's autonomy and freedom, and that it is vital to provide comprehensive care that promotes and protects women's health through health education and guidance, such as counseling on family planning, clinical procedures, and the monitoring of clinical interventions, while also fulfilling objective and subjective roles to ensure care regarding women's sexual and reproductive freedom and the protection of their overall health.

Professionals operating in this context must possess technical competence and cultural knowledge to provide guidance and care regarding sexual and reproductive health; however, poor management of healthcare services can lead to a lack of knowledge and limited access to contraceptive options, resulting in resistance and issues regarding acceptance among these women[11].

The professional's role also extends to the sex education of young people and adolescents. Leite et al.[12] indicate that interventions by the nursing team significantly reduce the incidence of teenage pregnancy and help prevent sexually transmitted infections. These actions stem from the context of sex education and family planning, representing yet another of the many responsibilities of nurses working in primary health care.

Another important role of the nurse lies in health promotion and prevention, acting proactively and identifying care needs during the earliest stages of disease. Training ensures that professionals are familiar with the most effective prevention strategies, such as sex education for adolescents and young adults, the use of and guidance on contraceptive methods, and counseling on safe sexual practices[13].

Sexual and reproductive health is directly linked to women's autonomy and well-being. A qualified nurse must be able to provide comprehensive, humanized care that respects a woman's needs, desires, and rights, while fostering active and welcoming listening; indeed, Justino et al.[14] report that many women do not feel safe sharing personal matters with healthcare professionals, which hinders treatment and the resolution of their issues.

This reveals that their knowledge must be exceptional, prompting us to question the importance of investing in the continuing education of these professionals; those responsible must prioritize knowledge regarding

legislation and government programs, thereby ensuring that the professional stays constantly updated on new developments in the healthcare sector.

The importance of the nurse in monitoring women's reproductive planning

Nurses play an unparalleled role in health promotion and prevention, whether regarding sexual or reproductive health, possessing the potential and competence to either uphold women's autonomy or undermine their reproductive and sexual rights. Consequently, the role of nurses is undeniably significant in developing educational initiatives, facilitating access to information on family planning and contraceptive methods, and fostering active individual participation in primary health care services; such efforts are essential to mitigating major issues associated with this subject, including STIs, unintended pregnancies, and misinformation[15].

Federal Law No. 9.263 of January 12, 1996, establishes that family planning "[...] is a right of every citizen and is characterized by a set of fertility regulation actions that guarantee equal rights regarding the decision to have, limit, or increase the number of children, whether for the woman, the man, or the couple". Thus, it is the right of the man and the woman to choose the most appropriate time to have children, with a guarantee of all necessary assistance[16].

In the realm of sexual and reproductive health, healthcare professionals must directly engage in counseling regarding family planning, as well as clinical procedures and actions related to comprehensive health care. Nurses must perform both subjective and objective roles, ensuring care for women while respecting their sexual and reproductive freedom and safeguarding their health. In Brazil, these rights are guaranteed by the National Policy for Comprehensive Women's Health Care and the National Policy on Sexual and Reproductive Rights, which guide actions in the field of sexual and reproductive health[17].

Contraception is a right guaranteed by public policies such as those mentioned above; for it to be a truly informed choice, everyone must have access to reliable information and available contraceptive methods. Contraceptive methods available through the SUS (Unified Health System) include: combined oral contraceptives, combined injectable contraceptives (administered monthly), progestogen-only injectable contraceptives (administered every three months), progestogen-only pills, emergency oral contraception (commonly known as the "morning-after pill"), internal and external condoms, subdermal implants, and copper IUDs; surgical procedures such as tubal ligation and vasectomy are also offered. Under Law No. 14.443/2022, the criteria for accessing these surgical procedures include being over 21 years of age and not requiring spousal authorization; furthermore, according to Ordinance No. 405 of May 8, 2023, having two or more children is no longer a requirement for undergoing the procedure[14,17].

The role of the nurse in supporting women's reproductive planning is of great importance, as it involves providing qualified technical guidance, promoting informed choices, and identifying specific health needs early on. Furthermore, nurses strengthen women's autonomy by providing clear information on contraceptive methods, risks, benefits, and ongoing care, thereby contributing to a reproductive experience that is safer, healthier, and aligned with each woman's personal choices[18].

Conclusion

The discussion regarding women's sexual and reproductive rights within Primary Health Care highlights the urgent need to strengthen educational strategies that promote autonomy, knowledge, and equitable access to health services. When integrated into care practices, sex education becomes an essential tool for preventing health issues, promoting health, and fostering female empowerment, enabling women to make safe, informed decisions about their bodies and reproductive plans. The results analyzed in this study demonstrate that Primary Health Care plays a fundamental role in this process, as it serves as the population's first point of contact with the health system and offers the most favorable setting for continuous, welcoming, and locally-based interventions. Thus, the importance of skilled professionals, especially nurses, working on the front lines is recognized; they provide guidance and support while ensuring that women's rights are respected and upheld. Consequently, it is concluded that sex education should not be viewed merely as an informational strategy, but as a transformative resource capable of reducing vulnerabilities, expanding access to rights, and promoting gender equality. Investing in this approach within primary care represents a step forward in building a society that is more just, informed, and committed to women's comprehensive health.

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