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Feelings of discrimination among students: prevalence and associated factors

ABSTRACT

OBJECTIVE: To estimate the prevalence of and factors associated with feelings of discrimination among students.

METHODS: Cross-sectional study with a representative sample of 1,170 students from a total of 2,282 students enrolled in the 7th grade of an elementary school of the city of Gravataí, Southern Brazil, in 2005. Participants were selected by conglomerate random sampling. Data were obtained from self-applied instruments (Global School-based Student Health Survey, Body Shape Questionnaire, socioeconomic classification) that were completed in the classroom. Cox regression, modified for cross-sectional studies, was employed, according to a four-stage hierarchical model.

RESULTS: Prevalence of feelings of discrimination was 21.0%. These feelings were more prevalent among: girls (PR=1.93, 95% CI 1.51;2.46); those showing school absenteeism (PR=1.54, 95% CI 1.21;1.97); those who had used tobacco in their lives (PR=1.53, 95% CI 1.18;1.98); those concerned about their body image (PR=1.42, 95% CI 1.07;1.88); those with feelings of loneliness (PR=2.50, 95% CI 1.80;3.46) and sadness (PR=1.29, 95% CI 1.02;1.62); those with sleep difficulties (PR:1.41, 95% CI 1.08;1.83); those with suicidal ideation (PR=1.45, 95% CI 1.13;1.85) and those who had suffered some type of accidental (PR=1.56, 95% CI 1.23;1.97) or intentional injury (PR=2.04, 95% CI 1.51;2.76).

CONCLUSIONS: Feelings of discrimination were associated with sex and experience with tobacco. Its association with psychosocial factors indicates the coexistence of adverse situations, such as dissatisfaction with body image, depressive symptoms and presence of insults. These findings show the importance of health professionals and teachers acting together to identify these feelings early on, and guide and follow adolescents facing such situations.

DESCRIPTORS: Adolescent. Students. Prejudice. Interpersonal Relations. Socioeconomic Factors. Adolescent Psychology. Cross-Sectional Studies.

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INTRODUCTION

Violence among students is a worldwide problem, relevant for both public and schoolchildren health, representing a challenging critical issue.[23] The impact of violence on child and adolescent development may be harmful to cognitive abilities,[3] and emotional and neuroendocrine responses,[7] in addition to interfering with routine activities, school performance, leisure motivation and often forcing them to adapt abruptly and suddenly.[11]

In Brazil, the costs of violence are high. According to the *Banco Internacional de Desenvolvimento* (*BID* – International Bank for Reconstruction and Development), public, private and institutional expenses totaled US$ 30 billion. Considering the fact that many violent acts occur within the school environment, this cost, both human and material, is also significant for schools.[1,2,23]

Based on the World Report on Violence and Health, violence is "the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation".[16] Discrimination is also a type of violence and it can be understood as "discriminatory treatment of certain social and racial groups". This comes from social and cultural beliefs that each individual or group has towards others and also from the ways to control and oppress that are considered as manifestations of the fight to keep power and privileges.[13]

In the school environment, discrimination can involve teachers, employees, family members and students, all of whom can be discriminatory agents.

When this occurs among students, the discriminated adolescent is not the only victim; the aggressor is also a victim, often feeling insecure and having social relationship problems. In addition to the aggressor and the victim, there are the witnesses to this situation, who remain silent as they are afraid to become the next victim and, for this reason, also turn into aggressors at times.[18]

Discrimination is not a problem restricted to the school environment; it also occurs in families, in communities and in society in general. Despite its relevance, studies on this problem among students are scarce. The majority of studies on this theme focused on the general population, mentioning discrimination associated with ethnicity/skin color,[13] sexual behavior, obesity[10] and suicidal ideation,[5] people with HIV/AIDS[a] and the female sex.[14] As a result, this study aimed to estimate the prevalence of and factors associated with feelings of discrimination among students.

METHODS

This study used a cross-sectional design, performed with a representative sample of 7th grade students from public elementary schools of the city of Gravataí, state of Rio Grande do Sul, in 2005. This city is located in Southern Brazil, 22 km from the city of Porto Alegre, and it has a significant industrial sector, of which the automotive, commerce and service sectors stand out. The city's population was approximately 270,763 inhabitants in 2005, predominantly urban (91.2%), with a life expectancy of 73.6 years. The target population was constituted by 2,282 students enrolled in the 7th grade, distributed in 75 classes, in 52 schools located in the urban area and 14 schools in the rural area. This group was selected due to the school's role in promoting adolescent health and preparing them to become citizens, as well as the operational advantages it offers to obtain a sample.

To calculate the sample size, a 50% prevalence as a reference point for feelings of discrimination, a 0.05 significance level, a maximum error of 3%, and a design effect of 1.5 were used as parameters, resulting in 728 students. To replace possible losses, the sample was increased by 20%, totaling 1,312 students. As this number represented about half of the 2,282 students enrolled in the 7th grade of the city of Gravataí's municipal schools, half plus one of the existing classes were randomly selected in each of the administrative areas. Once the classrooms were selected, all students were included.

At the end of the conglomerate sampling process, 1,366 adolescents of 53 classes were selected, representing 30 day schools, once the city did not have night schools. Of all these students, 31 refused to answer the questionnaire, 30 were not authorized by their parents, 105 changed schools, 17 were not present on the days the questionnaire was applied, one was expelled from the school and 12 did not answer it because they dropped out of school. Thus, the final sample had 1,170 students, with power to detect prevalence ratios higher than or equal to 1.5 for exposures with a frequency higher than or equal to 10%.

A total of three self-applied instruments and one group registry form for management purposes were employed to collect data. The sex, age, and self-reported ethnicity variables of each student assessed were obtained from the group form (per class/school).

Questionnaires were distributed to researched individuals by the data collection team, previously qualified to clarify questions, verify the completion of instruments and count the number of questionnaires distributed/received. Data collection team members were taking a Master's degree program in Public Health and had a scientific initiation scholarship for the area of Nursing and Nutrition.

The first questionnaire used questions from the World Health Organization's Global School-based Student Health Survey (GSSHS),[b] which aims to investigate student health. The outcome (feelings of discrimination in the last 30 days) was obtained from this questionnaire, using the following question: "In the last 30 days, in

[a] Aggleton P, Parker R, Maluwa M. Stigma discrimination and HIV/AIDS in Latin America and the Caribbean. Washington: Inter-American Development Bank;2003 [cited 2006 Oct 06]. Available from: http://idbdocs.iadb.org/wsdocs/getdocument.aspx?docnum=354523

[b] Centers for Disease Control and Prevention. The Questionnaire Global School-based Student Health Survey (GSHS)). Atlanta; 2005. [cited 2006 Mar 15]. Available from: http://www.cdc.gov/GSHS/results/index.htm

what situations did you feel discriminated or mistreated?". This question was formulated exactly as it is in the WHO questionnaire. However, differently from it, the question did not refer exclusively to discrimination in the school environment, as this could have occurred in the family, community or any other location.

In addition to the outcome, the following factors under study were obtained: school absenteeism in the last 30 days (yes or no); good relationships with peers (yes or no); use of alcohol, tobacco, and other drugs in life (yes or no); parents' empathy in the last 30 days (yes or no); number of friends (≤1 and ≥2); feelings of loneliness and sadness, sleep difficulty, and suicidal ideation in the last 12 months (yes or no); fear of going to school (yes or no); involvement in fights in the last 30 days (yes or no) and having been seriously insulted in the last 12 months, categorized as "not insulted", "accidental insult", "self-inflicted insult", and "intentional insult from others".

The second instrument was the Body Shape Questionnaire (BSQ), translated to Portuguese by Cordás & Castilhos[8] and used to assess concern about one's body image. This concern – originally divided into "not concerned", "rarely concerned", "moderately concerned", and "always concerned" – was classified into three categories, once the last two were grouped together due to the small number of respondents.

The third questionnaire was especially designed for surveys, providing data on students' socioeconomic status, based on what is proposed by the *Associação Brasileira de Empresas de Pesquisa* (*ABEP – Brazilian Association of Survey Companies*).[a]

Cox regression, modified for cross-sectional studies, was employed, and time was considered to be a constant, once the observation of individuals occurred at the same time.[4] Thus, it was possible to estimate the effect of factors under study on feelings of discrimination, as well as to know the prevalence ratios, 95% confidence intervals and significance levels associated with each of the these factors. Multivariate analysis was performed, based on the conceptual model (Figure), in which variables were introduced in four stages, respecting the proposed hierarchy. Participation of variables in the stage following its introduction into the model was determined by its significance level (≤0.10).

Prevalence ratios, confidence intervals and significance levels, shown in the multivariate analysis, referred to values found in the stage when the variable was introduced into the model, with adjustment of variables from higher hierarchies and from the same stage. Only the variables that showed a significance level below 0.05 in the stage in which they had been originally introduced remained in the final model.

This study was approved by the *Comitê de Ética da Universidade Luterana do Brasil* (Brazilian Lutheran University Ethics Committee – protocol 2004-37H5).

RESULTS

Among the 1,170 students analyzed, 52.5% were females; 52.6% reported they were white, and 21.9% belonged to category B of the socioeconomic status classification, 58.8% to category C and 19.3% to categories D+E. Only 2.9% of adolescents went to schools in the rural areas. As regards age group, 79.0% were aged between 12 and 14 years and 21.0% between 15 and 18 years, without significant differences in terms of feelings of discrimination between the two groups.

Prevalence of feelings of discrimination among adolescents in the last 30 days was 21.0%.

In the first state of multivariate regression (Table 1), of all the three variables that entered the model, only sex was significantly associated, showing that girls reported 93% more feelings of discrimination than boys. In terms of ethnicity, despite higher prevalence of discrimination among non-white students, there was no significant association.

In the second stage, of all the seven new variables introduced, only school absenteeism and use of tobacco in life were significantly associated with the outcome. Among adolescents who were absent one or more times in the last 30 days, feelings of discrimination were 55% higher. In the multivariate analysis, use of alcoholic beverages in life, which had showed significant statistical association in the univariate analysis, lost its significance. Complementary analyses indicated that this occurred when this variable was controlled by the use of tobacco in life. Among adolescents who had experimented with tobacco, feelings of discrimination were 54% more frequent than among those who had never smoked (Table 1).

In the third stage of analysis, in addition to the variables previously selected, other five variables, which had remained in the model due to the significance level found, were introduced. In the univariate analyses, the effect of these on the outcome was greater, losing part of their magnitude when controlled among themselves and by the higher hierarchy variables (Table 1).

As regards body image, 42% more feelings of discrimination were observed among students concerned about their image. In terms of feelings of loneliness, adolescents who felt lonely reported 2.5 times more feelings of discrimination than those who did not feel lonely. Likewise, those with sleep difficulty (41%), those feeling sad (29%) and those with suicidal ideation

[a] Associação Brasileira de Empresas de Pesquisa. Dados com base no Levantamento Sócio Econômico - 2000 – IBOPE. São Paulo; 2003 [cited 2006 Mar 07]. Available from: http://www.abep.org/codigosguias/ABEP_CCEB.pdf

Table 1. Results from univariate and multivariate Cox regression for feelings of discrimination among public school students. Gravataí, Southern Brazil, 2005.

Variable		Feeling Discrimination		Univariate analysis			Multivariate analysis		
	N	n	%	PR	95% CI	p	PR	95% CI	p
Stage 1									
Sex									
Male	556	79	14,2	1	-	-	1	-	-
Female	614	167	27,19	1,91	1,50;2,43	0	1,93	1,52;2,46	0
Ethnicity									
White	615	119	19,34	1	-	-	1	-	-
Non-white	555	127	22,88	1,18	0,94;1,47	0,139	1,21	0,97;1,51	0,09
Socioeconomic status									
B	256	56	21,87	1	-	-	1	-	-
C	688	142	20,63	0,94	0,71;1,24	0,678	0,92	0,70;1,20	0,531
D+E	226	48	21,23	0,97	0,68;1,36	0,866	0,9	0,64;1,26	0,546
Stage 2									
School absenteeism									
No	934	172	18,41	1	-	-	1	-	-
Yes	236	74	31,35	1,7	1,34;2,14	0	1,55	1,22;1,97	0
Good relationship with schoolmates									
Yes	801	173	21,59	1	-	-	1	-	-
No	369	73	19,78	0,91	0,71;1,16	0,481	0,97	0,76;1,25	0,834
Use of alcoholic beverages in life									
No	460	79	17,17	1	-	-	1	-	-
Yes	710	167	23,52	1,36	1,07;1,74	0,01	1,18	0,91;1,52	0,211
Use of tobacco in life									
No	975	180	18,46	1	-	-	1	-	-
Yes	195	66	33,84	1,83	1,44;2,32	0	1,54	1,19;1,98	0,001
Use of other drugs in life									
No	1143	239	20,9	1	-	-	1	-	-
Yes	27	7	25,92	1,23	0,64;2,36	0,515	0,79	0,42;1,47	0,45
Parents' empathy									
Yes	788	158	20,05	1	-	-	1	-	-
No	382	88	23,03	1,14	0,91;1,44	0,238	1,04	0,82;1,33	0,716
Number of friends									
≥ 2	1114	233	20,91	1	-	-	1	-	-
≤ 1	56	13	23,21	1,1	0,67;1,81	0,677	1,21	0,77;1,89	0,407
Stage 3									
Concern about body image									
No	890	147	16,51	1	-	-	1	-	-
Rarely	169	54	31,95	1,93	1,48;2,52	0	1,21	0,92;1,60	0,173
Yes (moderate + frequent)	106	45	42,45	2,57	1,96;3,35	0	1,42	1,07;1,89	0,015
Feeling of loneliness									
No	571	50	8,75	1	-	-	1	-	-
Yes	598	196	32,77	3,74	2,80;4,99	0	2,5	1,81;3,46	0
Sleep difficulty									
No	710	92	12,95	1	-	-	1	-	-
Yes	460	154	33,47	2,58	2,05;3.25	0	1,41	1,09;1,83	0,01

To be continued

Table 1 continuation

Variable		Feeling Discrimination		Univariate analysis			Multivariate analysis		
	N	n	%	PR	95% CI	p	PR	95% CI	p
Feeling of sadness									
No	930	155	16,66	1	-	-	1	-	-
Yes	240	91	37,91	2,27	1,83;2,82	0	1,29	1,03;1,62	0,027
Suicidal ideation									
No	1043	186	17,83	1	-	-	1	-	-
Yes	127	60	47,24	2,64	2,11;3,31	0	1,45	1,14;1,86	0,003
Etapa 4									
Fear of going to school									
No	1056	219	20,73	1	-	-	1	-	-
Yes	114	27	23,68	1,14	0,80;1,62	0,457	0,65	0,47;0,90	0,009
Involvement in fights									
No	947	185	19,53	1.00	-	-	1	-	-
Yes	223	61	27,35	1,4	1,09;1,79	0,008	1,09	0,84;1,41	0,443
Insults suffered									
No	634	93	14,67	1	-	-	1	-	-
Accidental insults	405	104	25,68	1,75	1,36;2,25	0	1,56	1,23;1,97	0
Self-inflicted insults	18	6	33,33	2,27	1,51;4,49	0,018	1,59	0,97;2,60	0,066
Intentional insults by others	113	43	38,05	2,59	1,92;3,51	0	2,04	1,51;2,76	0

(45%) also felt more discriminated than their reference pairs. Finally, in the last stage of regression (Table 1), the remaining variables were included. Fear of going to school, which had not been associated with the outcome in the univariate analysis, became associated, showing that adolescents who were afraid to go to school reported 35% less discrimination. Those who had suffered some type of accidental injury or intentional injury caused by others reported 56% and 100% more feelings of discrimination, respectively. Table 2, the final model, shows all the variables that had a significance level below 0.05.

DISCUSSION

The innovative aspect of this study was that it investigated feelings of discrimination and factors associated, in a representative sample of adolescents who were enrolled in municipal schools.

As a consequence, the results cannot be extrapolated to adolescents who are enrolled in private schools and those who do not go to school.

The fact that some students refused to answer the questionnaire could be related to risky behavior, such as drug use or dealing, and involvement in gangs, resulting in non-respondent bias. However, refusals by both students and those responsible for them represented only 4.5% of the total sample selected and were equally distributed between sexes and the city's administrative areas. Thus, conclusions from this study were not damaged and it is believed that its findings can be extrapolated to students from municipal schools in the city of Gravataí and also from the city of Porto Alegre's metropolitan area.

Exposure to discrimination has been measured in different ways, and to compare studies is a difficult task, due to the great diversity of techniques employed in studies that have been published.

The WHO, in partnership with the United Nations Children's Fund (UNICEF), the United Nations Educational, Scientific and Cultural Organization (UNESCO), and the Joint United Nations Programme on HIV/AIDS (UNAIDS), and with the Centers for Disease Control and Prevention's (CDC) technical support, designed the GSSHS[a] in an attempt to minimize this problem. This instrument provides data on students' health and routine, including feelings of discrimination. However, differently from this study, the instrument used by the GSSHS focuses exclusively on discrimination among schoolmates in the school environment (bullying).

[a] Centers for Disease Control and Prevention. The Questionnaire - Global School-based Student Health Survey (GSHS). Atlanta; 2005. [cited 2006 Mar 15]. Available from: http://www.cdc.gov/GSHS/results/index.htm

Table 2. Results from the multivariate Cox regression's final model for feelings of discrimination among students from public schools. Gravataí, Southern Brazil, 2005.

Variable	PR	95% CI	p
Sex			
Male	1.00	-	-
Female	1.93	1.52;2.46	0.000
School absenteeism			
No	1.00	-	-
Yes	1.55	1.22;1.97	0.000
Use of tobacco in life			
No	1.00	-	-
Yes	1.53	1.18;1.98	0.001
Concern about body image			
No	1.00	-	-
Rarely	1.21	0.92;1.60	0.173
Yes (moderate + frequent)	1.42	1.07;1.89	0.015
Feeling of loneliness			
No	1.00	-	-
Yes	2.50	1.81;3.46	0.000
Sleep difficulty			
No	1.00	-	-
Yes	1.41	1.09;1.83	0.010
Feeling of sadness			
No	1.00	-	-
Yes	1.29	1.03;1.62	0.027
Suicidal ideation			
No	1.00	-	-
Yes	1.45	1.14;1.86	0.003
Fear of going to school			
No	1.00	-	-
Yes	0.64	0.47;0.90	0.007
Insults suffered			
No	1.00	-	-
Accidental insults	1.56	1.23;1.97	0.000
Self-inflicted insults	1.59	0.97;2.60	0.066
Intentional insults by others	2.04	1.51;2.76	0. 000

By definition, bullying comprises all aggressive attitudes, intentional and repeated, that occur without evident motivation, adopted by one or more students against others, causing pain and anguish, performed in an unequal relationship of power, and which can be observed in any location where people with the same conditions spend time together. The concept of discrimination is broader in meaning and bullying is one of its manifestations.

In a study performed in Chinese students, in 2003, with the WHO instrument, the prevalence among equals was 31.9% and, in the Philippines, 36.6%. In 2004, studies performed in Guiana and Jordan showed that 40.1% and 45.1%, respectively, felt discriminated. In the United Arab Emirates, in 2005, and in Morocco, in 2006, results indicated 20.9% and 44.7% of this outcome, respectively.[a] In the present study, the prevalence was 21%, similar to that found in the United Arab Emirates and in Portugal (21%).[6]

Considering that discrimination, as viewed by this study, includes bullying, the prevalence found was below that of the majority of studies referred. This may be due to the sample being more homogeneous than others, once only students from public schools were analyzed and their socioeconomic conditions were similar. Another possibility would be the students' denial of this experience. A study conducted by UNESCO in Brazil,[b] in 2001, indicated that denial is probably associated with the adolescents' difficulty in talking about their feelings.

Among adolescents in Gravataí, there was an association between feelings of discrimination and sex, with higher prevalence among female students. This finding differs from other studies that found an increased frequency among male students.[6] Verbal discrimination or more subtle types,[1] such as body-related discrimination, are more frequent, comparable to the findings in this study. This may lead to greater prevalence of feelings of discrimination among girls.

In terms of ethnicity, 1.4% of students in Gravataí reported feelings of discrimination related to this variable. There was no association between the outcome and ethnicity, probably due to this low number.

According to data from the *Instituto Brasileiro de Geografia e Estatística* (*IBGE* – Brazilian Institute of Geography and Statistics) 53.7% of the population reported they were white, 6.2% black, 38.5% mixed, and 1.6% from other ethnic groups, in Brazil, in 2002. In the city of Gravataí, 87.9% reported they were white, 6.5% black, 4.6% mixed, and 0.9% from other ethnic groups.[c] However, this proportion was not the same in the municipal schools, where 47.3% of adolescents mentioned they were either black or mixed. This greater homogeneity may have contributed for the

[a] Centers for Disease Control and Prevention. The Questionnaire - Global School-based Student Health Survey (GSHS). Atlanta; 2005. [cited 2006 Mar 15]. Available from: http://www.cdc.gov/GSHS/results/index.htm
[b] Abramovay M, Ruas MG. Violência nas escolas. Brasília: UNESCO, 2004. [cited 2006 Dec 15]. Available from: http://www.brasilia.unesco.org/publicacoes/livros/violenciaescolas
[c] Instituto Brasileiro de Geografia e Estatística. Anuário Estatístico do Brasil; Rio de Janeiro; 2000 [cited 2007 Oct 07]. Available from: http://www.sidra.ibge.gov.br/bda/tabela/listabl.asp?z=cd&o=7&i=P&c=2093

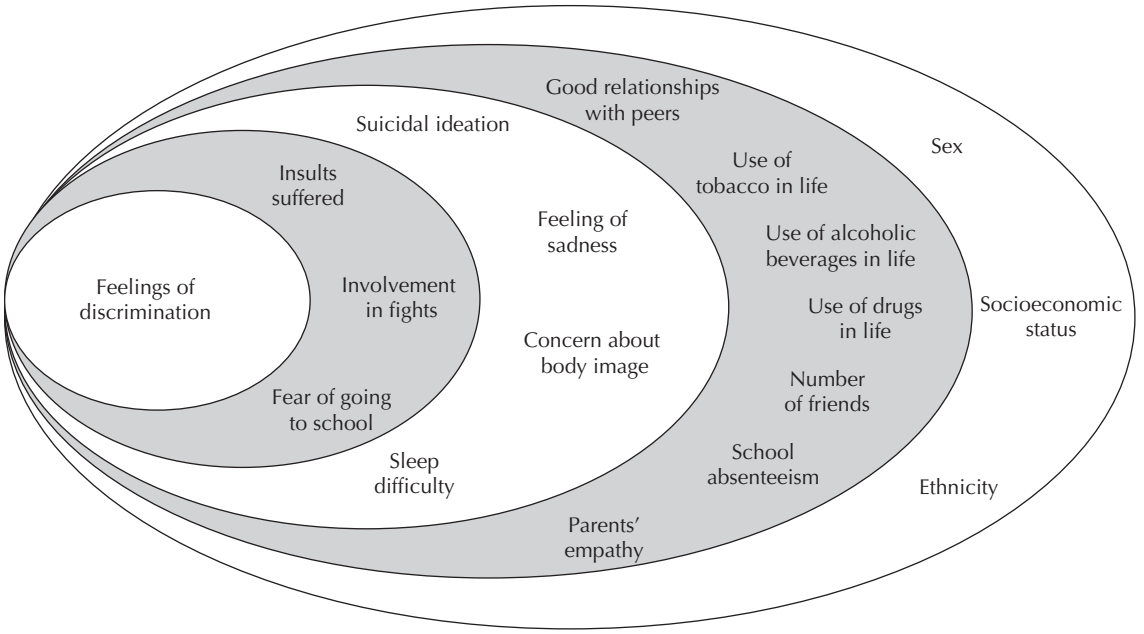

Figure. Hierarchical model of the process of determination of discrimination. Gravataí, Southern Brazil, 2005.

low prevalence of feelings of discrimination towards ethnicity and also for the lack of association between these two variables. Compared to other studies, this prevalence was only above that found in the city of Beijing, in China (0.6%). According to the UNESCO,[2] in a study performed with 44,812 adolescents from municipal and state schools in the city of Porto Alegre, 4.9% of them stated they had been discriminated due to their ethnicity. In Brazil, 4.7% reported they had been discriminated and, among non-white students, this percentage was even higher (13%).

A study performed by Fazzi in two public schools of the city of Belo Horizonte showed that children aged between seven and nine years think based on the notion of ethnic groups. This notion, though incipient, already causes discriminatory behavior and attitudes, and indicates an association between ethnicity and moral attributes.[12]

Socioeconomic status was not associated with the outcome either. Once again, greater homogeneity may have contributed to this result. Social groups were quite similar, once no students belonged to the highest category in the *ABEP*'s classification, with little difference between those in category B, used as the base category, and the remaining ones.

As regards adolescents who miss school feeling more discriminated, feelings of discrimination may be one of the reasons for such absenteeism.[15] However, due to the study outline, it is not possible to identify what situation influences the other, once adolescents who feel discriminated may also be absent from school as a way to escape situations where they would feel discriminated.

The use of alcoholic beverages, which had showed significant statistical association in the bivariate analysis, lost its significance in the multivariate analysis when the "use of tobacco in life" variable was included. However, those who experimented with tobacco reported more feelings of discrimination. Experimenting with and using tobacco may occur as a way to reduce the anxiety caused by experiencing unpleasant feelings, such as discriminatory ones. On the other hand, adolescents who feel discriminated may seek their peers' acceptance through cigarettes.[21]

The 14-to-16-year age group is the period when adolescents use illicit drugs more frequently, revealing the occurrence of problems that may influence their future life.[9] Even though many studies have found high prevalence of illicit drug abuse in Brazil,[a] this was not the case in the city of Gravataí. This may have contributed for an association between use of other drugs in life and feelings of discrimination not to be found.

Body image perception is known to be subject to society's values, culture and representations.[20] For the adolescent, the body has an even greater importance, it

[a] Galduróz JCF, Noto AR, Fonseca AM, Carlini EA. V levantamento nacional sobre o consumo de drogas psicotrópicas entre estudantes do ensino fundamental e médio da rede pública de ensino nas 27 capitais brasileiras - 2004. São Paulo: Centro Brasileiro de Informações Sobre Drogas Psicotrópicas; 2005. [cited 2006 Jan 10]. Available from: http://200.144.91.102/cebridweb/download.aspx?cd=85

is the means through which they manifest their identity. Even though this type of discrimination is more frequent among girls, adolescents who felt discriminated were those concerned about their body image. In addition, this effect was found to remain significant, even when controlled by sex.

In this study, the choice was to investigate frequent situations in the adolescent's life, such as feelings of sadness and loneliness, difficulty to sleep and even suicidal ideation. Due to the design adopted, it is not clear whether depressed adolescents feel discriminated, magnifying depressive symptoms, or if the feeling of rejection, resulting from discrimination, is what leads to depression. However, the association found between these symptoms and the feeling of discrimination is relevant, once depression is a public health problem, quite frequent during adolescence.[22] It is also little identified and treated at this stage,[19] which may lead to harmful consequences, including suicide.[5] Adolescents who are afraid to go to school reported less feeling of discrimination than their peers, when the opposite would be expected. This may be associated with the fact that they witness feelings of discrimination or other types of violence, involving schoolmates, teachers or other employees.[17] Insecurity in or around the school can cause students to be afraid. However, these students are not victims of discrimination yet, and even feeling afraid, they go to school. Differently, discriminated adolescents are those who miss school, as shown by the study findings. Fear of going to school, as reported, leads one to think this is where discrimination occurs.

Adolescents victimized by insults, i.e. those who had hurt themselves by accident or had been hurt by others, also felt more discriminated, differently from those who reported having hurt themselves intentionally. The small number of adolescents with self-inflicted insults may have prevented the identification of association with the outcome.

The present study identified some of the characteristics commonly found among adolescents who have suffered discrimination, such as school absenteeism; concern about body image; feelings of loneliness and sadness; sleep difficulty; suicidal ideation; and the occurrence of insults. However, due to the design used, it cannot be affirmed whether these situations are causes or consequences of discrimination. Nonetheless, they are themselves quite alarming, and these adolescents deserve special attention from both teachers and health professionals, in the location where these are identified.

In this context, the school is a privileged location to prevent discrimination and other types of violence, aiming to reducer harm and sequelae that may be experienced throughout life. To achieve this, the State needs to propose healthy public policies, capable of stimulating critical reflection on the quality of routine school relationships, involving the school administration, employees, teachers, students and the community as a whole.

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