

**113 - VIOLENCE AGAINST WOMEN IN THE SERTÃO OF PARAÍBA: A DOCUMENTARY RESEARCH**<sup>1</sup>LUIZ WILLIAM BARRETO WANDERLEY<sup>2</sup>LEILA ALCINA CORREIA VAZ BUSTORFF<sup>3</sup>KENNYA DA SILVA FORMIGA<sup>4</sup>VERBENA SANTOS ARAÚJO<sup>5</sup>CLÁUDIA MARIA RAMOS DE MEDEIROS SOUTO<sup>1</sup>Enfermeiro, Mestrando em Enfermagem - UFPB; João Pessoa – PB, Brasil.<sup>2</sup>Fisioterapeuta, mestranda em Enfermagem - UFPB; João Pessoa – PB, Brasil.<sup>3</sup>Enfermeira<sup>4</sup>Enfermeira mestranda em Enfermagem – UFPB – João Pessoa – PB – Brasil.<sup>5</sup>Enfermeira, Doutora em Enfermagem, docente do programa de pós-graduação em Enfermagem – UFPB<sup>1</sup>e-mail: luizwilliamenf@yahoo.com.br<sup>2</sup>E-mail: leila\_bustorff@yahoo.com.br<sup>3</sup>E-mail: kenyasilva@hotmail.com<sup>4</sup>E-mail: verbena.bio.enf@hotmail.com;<sup>5</sup>E-mail: claudivon@hotmail.com;**INTRODUCTION:**

Violence is a reality nowadays and has become a problem of public health. According to Pino (2007), no matter its proportions, it'll always cause physic, as much as psychological, sequels. Violence has turned into a major concern in Brazil and in many other countries. For Dutra (2005), Brazil presents high rates of urban, domestic and family violence as well as violence against women. It results from the disrespect, one of the main factors that precede violence. The violence may be economic, social, marital, in the family and among people.

According to Patrícia Galvão Institute (2005), the Organization of the United Nations (ONU) defines violence against women as any act or gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, what has been considered as a violation of human rights. For Silva (2006), violence results from the inequalities built throughout the history between men and women, in which the latter is most of the time subjugated by the first, occupying a secondary role, being treated as an object and, as a consequence, becoming more vulnerable to physic, psychological and sexual violence.

In Mendes' (2005) perspective, in order to formulate, implement, execute and evaluate the actions in health public policies it's necessary to know the problem's magnitude, which is very difficult, due to the lack of records and to methodological differences. This paper aims to investigate the situation of violence against women in Cajazeiras city – PB, evaluating the most prevalent types of this phenomenon, identifying the relationship between aggressor and victim, the most frequent places and the main aggressors of women from the sertão (semi-arid region) of Paraíba, in order to produce information and subsidies to help local public policies face the problem and help professionals deal with women victims of violence.

**METHODOLOGY:**

Study of documentary, exploratory, retrospective and descriptive nature with a quantitative approach. According to Medeiros (2003) the documentary research is characterized by the collect of documents that hadn't based any research yet, being found in public archives, museums, registry offices, etc. For Richardson (1999), the quantitative approach involves the systematic collection of numeric information, which is very carefully analyzed through the use of measurable attributes of human experience. The exploratory research provides greater familiarity with the phenomenon or problem, allowing to explicit the research's questions, constructing hypothesis that aim at the formulation of a more accurate research project. This research is normally composed by: bibliographic researches and interviews of experts in the research field, document or artifacts analysis, case study, among others (INAFUCO, 2007).

This study was developed with the files of the Police Office Specialized in Women Assistance, in Cajazeiras city – PB. The chosen population consisted of all police reports (BO) filed at the Women Delegacy. The sample, however, included only 60 BOs selected at random according to the criteria of accessibility.

For the collection of data, a script was adopted. Structured according to the objectives of this study, it was used in order to analyze the police reports. These BOs document analysis took into consideration the women's socio-demographic profile, the main forms of aggression and the relationship victim – aggressor. Collected data were quantitatively analyzed and put in graphics and tables. The results were confronted with the pertinent literature. For the BOs analysis and during the whole research, an ethical posture was adopted in accordance with the resolution 196/96.

**ANALYSIS AND DISCUSSION OF RESULTS**

After the collection, data were analyzed and verified for the characterization of women who have suffered violence. We found the following items relevant: women's age groups between 15 and 20, from 20 to 40 and over 40 years old; marital status; origin and, at last, occupation.

In the table 1, concerning the percentage distribution of the women in age groups, it's estimated that, among the 80 police reports analyzed, 8 women were under 20 years old (13%), 33 belonged to the age group between 20 and 40 years (55%) and 19 were over 40 (32%). Data reveal that most victims are women aged between 20 and 40 years old, what features a young population, in childbearing and productive age.

Therefore, data suggest that violence may happen at any age group. In addition to this, according to Andrade and Galvão (2004), violence can also be manifested in many ways and in different areas of the society, regardless of social status, age, race or ethnicity and country's culture or economic development.

Concerning the marital status of the women enrolled in the BOs, we can affirm that, in Cajazeiras city, most women who suffer violence are married (60%), although Silva (2003) shows that marital status doesn't imply a greater or lesser risk of suffering violence. In second place, come the singles (22%), followed by the widows (10%), partners (cohabitant, companion) (5%) and divorced (3%).

The third question reveals that most women come from the urban area (85%) and only 15% are from rural areas. These data are reinforced by the literature, in which we find that countryside women are more likely to suffer violence. Studies by OMS show that 29% of the victims are in the cities and in the countryside this estimate rises to 37% (Ronanelli, 2007).

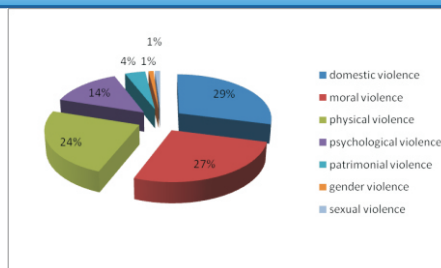
Table 1 - Participants' socio-demographic variables

CHARACTERISTICS	f	%
<b>Age group</b>		
15 - 20	08	13
20 - 40	33	55
> 40	21	25
<b>TOTAL</b>	<b>60</b>	<b>100</b>
<b>Marital status</b>		
Married	36	60
Single	13	22
Divorced	02	03
Cohabitant	03	05
Widow	06	10
Total	60	100
<b>Origin</b>		
Urban	51	85
Rural	09	15
Total	60	100

The following question portrays the violence experienced by women from Cajazeiras. Domestic violence is the most obvious, with a percentage of 29%. But besides that, there are other forms of violence: moral (27%), physic (24%), psychological (14%), patrimonial (4%), as well as sexual and gender-based (1% for each one).

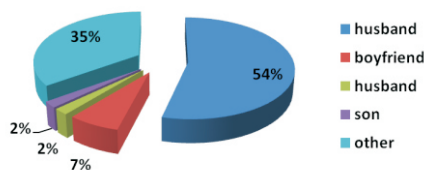
Madruga (2006) shows that Brazil is one of the world champions in violence against women. According to Silva, Coelho, Caponi (2003) the domestic violence is divided into physic, moral, psychological and sexual violence. It's one of the main forms of violence, figuring as one of the violations of human rights, the most practiced and the less recognized in the world (Minas Gerais' Faminist Institutions, 1998).

Graphic 1: distribution of women according to the violence suffered



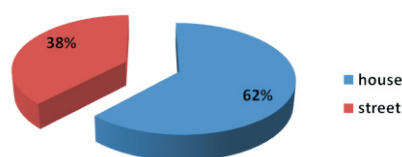
Another question reveals that women's aggressors are generally their husbands or ex-husbands (54%), other people (35%), boyfriends and ex-boyfriends (7%) and children and parents (2% for each). These data confirm those from Patrícia Galvão Institute (2005), which show that, in Brazil, each 15 seconds a woman is aggressed by her partner and 70% of murdered women are victims of their own husbands.

Graphic 2: distribution of violence related to the main perpetrator



When it comes to the place where violence occurs, data demonstrate that the family environment, considered to be an environment of welfare, protection and comfort, becomes a dangerous place for most women who live in Cajazeiras, since 62% of them are aggressed in their own houses. According to Guerra (2004), for a woman, the risk of suffering violence in her house is nine times bigger than suffering any other violent attack on the streets or at the workplace.

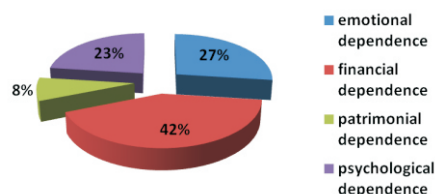
Graphic 3 - distribution of violence in relationship to the place occurred



Regarding the dependence relationship between victim-aggressor, we observed that, with 42%, the financial dependence is the main form men use to submit their women to them. That corroborates Saffiot's (1999) ideia, according to which

the threat of impoverishment makes most women put up with insults, humiliation and other forms of violence. Emotional subordination comes after with 27%, followed by psychological violence (23%) and patrimonial violence. All of them difficult women's access to work, to their property and documents, consequently offending against their autonomy.

Graphic 4 – distribution of violence in relationship to the dependence victim-offender



#### FINAL CONSIDERATIONS:

This study shows that violence against women is a noteworthy and worrying problem of public health that increases by the hour, making the family environment, which is considered to be a place of protection, become a dangerous place for many women. In this way, it's urgent to invest in scientific researches and discussions regarding this theme, since it's the government's and the civil society's role to delineate strategies in order to eliminate this problem. The Health Sector, on its turn, must treat the victims and not turn its back on them, minimizing their pain and preventing other health problems. That makes it necessary to pay attention to efficient public policies, as well as an appropriate and specific care from health professionals towards this portion of the population.

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#### VIOLENCE AGAINST WOMEN IN THE SERTÃO OF PARAÍBA: A DOCUMENTARY RESEARCH

##### ABSTRACT

Brazil stands out from other countries when it comes to violence against women because of the consequences to the women's health and the difficulty in monitoring the cases, due to their private character. This study aims to draw a profile of women who suffer violence, taking into consideration their socio-demographic profile, the main forms of aggression and the relationship victim-offender. This is a research of documentary, exploratory, retrospective and descriptive character, with a quantitative approach. It was developed in the files of the Police Office Specialized in Women Assistance. The sample consisted of 60 police reports (BO) and, for the collect of data, a script guided the BOs examination. Data were quantitatively analyzed and put into graphics and tables, according to the pertinent literature. After data analysis, we found that the percentage distribution of women victims of violence corresponds to the age group between 20 and 40 years old. Regarding their marital status, most of these women are married. The form of violence that appears the most is the domestic violence, with a percentage of 29%. The main aggressors are the victims' husbands or ex-husbands (54%) and the place in which the cases happen most is the house (62%). This study, therefore, reveals that the violence against women is a noteworthy and worrying problem of public health that

increases by the hour, making the family environment become a dangerous place for many women, causing mental and physical problems, what makes it necessary to pay attention to efficient public policies, as well as an appropriate and specific care from health professionals towards this portion of the population.

**PALAVRAS- CHAVE:** Gender. Public Policies. Violence against women.

### **LA VIOLENCE CONTRE LES FEMMES DU SERTÃO DE PARAÍBA : UNE RECHERCHE DOCUMENTAIRE.**

#### **RÉSUMÉ**

Le Brésil se distingue des autres pays quant aux violences faites contre les femmes en ce qui concerne les conséquences à la santé de celles-ci et la difficulté de contrôler les agressions récurrentes, vue le caractère particulier de ce problème. Cette étude a pour but de dresser un profil des femmes en situation de violence, compte tenu de leur profil socio-démographique, les types d'agressions les plus importantes et la relation victime-agresseur. Cette étude a une nature documentaire, exploratoire, rétrospective et descriptive avec un approche quantitative. Elle fut développée à partir des des archives du Bureau de Police Spécialisée en Secours de la Femme. L'échantillon fut composé de 60 rapports de police (BO) et on utilisa, pour la collecte de données, un guide pour l'analyse des BOs. Les données recueillies furent analysées quantitativement et mises dans des graphiques et tableaux, d'après la littérature spécialisée. Suite à l'analyse des données, on constata que la répartition en pourcentage des femmes en situation de violence correspond au groupe d'âge entre 20 et 40 ans. En ce qui concerne l'actuel état matrimonial des femmes inscrites dans les BOs, la plupart de celles qui subissent des violences sont mariées. Quant au type de violence vécue par elles, on distingue la violence domestique, révélant un pourcentage de 29%. Dans une autre question, on découvrit que l'auteur principal de ces actes de violence sont les maris et ex-maris, avec 54%, et, à propos du lieu où ils se passent, selon les données de la recherche, 62% de ces femmes sont victimes de violence à la maison. Cette étude révèle que la violence contre les femmes est un notable et inquiétant problème de santé publique qui se répand chaque jour, rendant le foyer familiale un endroit dangereux pour de nombreuses femmes, conduisant à des problèmes pour leur intégrité physique et mentale. Ces découvertes rendent incontestable le besoin de faire attention aux politiques publiques efficaces de même que développer un soin approprié et spécifique des professionnels de santé envers cette partie de la population.

**MOTS-CLÉS :** Genre. Politiques Publiques.

### **LA VIOLENCE CONTRE LES FEMMES.**

#### **RESÚMEN**

Brasil tiene un lugar importante en cuanto a la violencia contra la mujer, tanto por las consecuencias en relación a la salud, como por la dificultad en fiscalizarla, por su carácter peculiar. Este estudio tuvo por objetivo trazar un perfil de las mujeres en situación de violencia tomando en consideración el perfil socio-demográfico de la mujer, los principales tipos de agresiones y la relación víctima-agresor. Este estudio es de naturaleza documental y exploratoria, retrospectivo y descriptivo con abordaje cuantitativo, y se desarrolló en los archivos de la Comisaría Especializada en Atendimento a la Mujer. La muestra estuvo formada por 60 Denuncias (BO), se utilizó para el levantamiento de los datos una guía para análisis de las Denuncias. Los datos levantados se analizaron cuantitativamente y fueron presentados en gráficos y cuadros confrontados con la literatura relevante. Después del análisis de los datos se comprobó que la distribución porcentual de las mujeres en situación de violencia se única en la faja de 20 a 40 años de edad; en cuanto al estado civil de las mujeres registrado en las Denuncias, la mayoría de las que sufren violencia son casadas; en cuanto al tipo de violencia vivida por algunas mujeres de Cajazeiras (Paraíba), se destaca la violencia doméstica, presentando un porcentaje de 29%. En otro cuestionamiento se revela que el principal agresor de la mujer son el esposo y los ex-esposos, con 54%, y en cuanto a la distribución de la violencia en relación con el lugar en que ocurrió, los datos de la investigación revelan que 62% de las mujeres son agredidas en el hogar. El presente estudio revela que la violencia contra la mujer es un notorio y preocupante problema de salud pública que se expande cada día más, tornando el ambiente familiar un lugar peligroso para muchas mujeres, acarreando problemas para su salud física y mental, lo que hace necesario prestar atención hacia políticas públicas eficaces así como una atención apropiada y específica de los profesionales de salud para esta parcela de la población.

**PALABRAS CLAVE:** Género; Políticas Públicas; Violencia contra la mujer.

### **A VIOLÊNCIA CONTRA AS MULHERES NO SERTÃO PARAIBANO: UMA INVESTIGAÇÃO DOCUMENTAL.**

#### **RESUMO**

O Brasil destaca-se quanto à violência contra a mulher, pelas consequências à saúde, bem como sua dificuldade em fiscalizar pelo seu caráter particular. Este estudo teve o objetivo de traçar um perfil das mulheres em situação de violência levando em consideração o perfil sócio-demográfico da mulher, os principais tipos de agressões e a relação vítima – agressor. Este estudo é de natureza documental exploratório, retrospectivo e descritivo com abordagem quantitativa, foi desenvolvido nos arquivos da Delegacia Especializada de Atendimento à Mulher. A amostra foi composta por 60 Boletins de Ocorrência (BO), utilizou-se para coleta de dados um roteiro para análise dos BO's. Os dados coletados foram analisados quantitativamente e apresentados em gráficos e tabelas confrontados com a literatura pertinente. Após a análise dos dados verificou-se que a distribuição percentual das mulheres em situação de violência é na faixa etária entre 20 e 40 anos de idade, no que diz respeito ao atual estado civil das mulheres registrados nos BOs, a maioria das mulheres que sofrem violência são casadas, quanto ao tipo de violência vivida por algumas mulheres cajazeirenses, destaca-se a violência doméstica, apresentando um percentual de 29%, em outro questionamento revela-se que o principal agressor da mulher é o esposo e os ex-esposos, com 54% e quanto à distribuição da violência em relação ao local ocorrido dados da pesquisa revelam que 62% das mulheres são agredidas no lar. O presente estudo revela que a violência contra a mulher é um notório e preocupante problema de saúde pública que se expande a cada dia tornado ao ambiente familiar em um lugar perigoso para muitas mulheres, acarretando em problemas pra sua saúde física e mental, o que torna necessário voltar a atenção para políticas públicas eficazes bem como um atendimento apropriado e específico dos profissionais de saúde para esta parcela da população.

**PALAVRAS- CHAVE:** Gênero. Políticas Públicas. Violência contra a mulher.

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