Gender violence in lesbian relationships.

ABSTRACT
Objective: understand the concept of gender violence in lesbian relationships and in their work context. Method: exploratory, descriptive study, with qualitative approach, involving a universe of six women participants of the Lesbian, Gay, Bisexual and Transsexual Movement (LGBT) in the city of João Pessoa/PB, Brazil. The data was produced by semi structured interviews. The speeches were coded and processed by the discourse analysis technique. Results: gender violence permeates all relationships, entrenched in the daily lives of those women who often do not understand the concept of such violence, making it difficult to cope. Conclusion: lesbians remain invisible, and homosexuality is conceptualized as a barrier to be broken, for it is still a theme that runs through many prejudices and this fact needs to be widely discussed in order to reduce discrimination. Descriptors: Violence Against Women; Gender Identity; Public Health.

RESUMO
Objetivo: compreender o conceito da violência de gênero nas relações lésbicas e em seu contexto laboral. Método: estudo exploratório, descritivo, com abordagem qualitativa, envolvendo um universo de seis mulheres participantes do Movimento de Lésbicas, Gays, Bissexuais e Travestis (LGBT) municipal de João Pessoa/PB, Brasil. Os dados foram produzidos por meio de um roteiro de entrevista semiestruturado. Os discursos foram codificados e tratados mediante a Técnica de análise do discurso. Resultados: a violência de gênero permeia todas as relações, introjetada no cotidiano dessas mulheres que, muitas vezes, não compreendem o conceito dessa violência, dificultando o seu enfrentamento. Conclusão: as lésbicas ainda permanecem na invisibilidade, e a homossexualidade é conceituada como uma barreira a ser quebrada, ainda é uma temática que atravessa inúmeros preconceitos e este fato precisa ser amplamente discutido no intuito de diminuir as discriminações. Descriptores: Violência Contra Mulher; Identidade de Gênero; Saúde Pública.

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INTRODUCTION

Violence, in general, affects the lives of the population for it is a social and historical phenomenon, with different forms and contents in different cultures and societies, influencing on ethical judgments of each one of them. In this perspective, this phenomenon appears in different ways: physical, psychological, economic, sexual violence, violence at work, among others. Due to its complexity, violence is often invisible and the mechanisms to make it visible are still insufficient. However, services can contribute to the receptiveness of the victims in a multidisciplinary, intersectoral approach, emphasizing on the empowerment of people victims of any kind of violence.¹

It is important to highlight gender violence, considered a public health problem for it affects women’s health. It is very important to analyze the designed historical context that lasts until the current days. The unequal power system comes from the early days where the woman is always subject to a male body and biological differences place her as a fragile being, likely to be dominated, being treated as a product. In this perspective, gender violence is a phenomenon that happens and is underpinned by those historical precepts.²

Gender violence against women has been occurring daily and causing consequences on women’s health, affecting them. This type of violence occurs regardless of race, color, social class, or religion. Gender violence has no more disguise these days, and is getting more visibility thanks to public policies and feminist movements that denounce those practices, thus leaving them more understandable to society.

Gender violence against lesbian women often aims at any woman who dares to criticize or take a different position than the machismo society expects. Its worst faces are threats, slanders and insults, daily found in comments on the Internet, targeted at lesbians. Domestic violence in Brazil, especially among lesbians, is poorly documented and there is no database that gives visibility to the phenomenon in the mentioned segment.

It is noteworthy the difficulty of carrying out a survey of those data, primarily because there are no reliable data on the number of homosexual population, and the belief that this type of violence only happens among heterosexual couples, when the man is always the aggressor.³

Just as heterosexual women tend to deny the existence of aggression, lesbians also act this way. They rarely seek help for being afraid of revealing their sexuality and situation. In this way, they avoid looking for police, psychological, legal or medical help for fear of prejudice and discrimination. Despite the seriousness of the problem, prejudice makes homosexual victims have no access to support programs they need to get out of those relationships. Without adequate information campaigns and positive images of homosexual relationships, in addition to the silence of society to discuss the theme, many victims do not recognize their relationships as aggressive and do not seek proper help.

Homophobia has a multifaceted character, which covers much more than violence typified by the criminal code. It is not just the irrational rejection or hatred against homosexuals, but also an arbitrary event that qualifies the other as contrary, lower or abnormal. Because of their difference, the other is driven out of his/her humanity, dignity and personality. The human rights violations related to sexual orientation and gender identity, which ultimately victimize the LGBT population, constitute a pattern that involves different kinds of abuse and discrimination, often compounded by other forms of violence, hatred and exclusion, based on aspects such as age, religion, race/color, disability and socioeconomic status. This superposition of victimizations exacerbates the vulnerability of social groups, whose discrimination gets stronger with racism, sexism, poverty or creed, added to stigmatized sexual orientation and/or gender identity.⁴

In Brazil, violence against women is a major public health problem, affecting a quarter of the population. As for the state of Paraíba, data on causes of deaths of women in childbearing age (10-49 years) revealed the following numbers, including suicides, homicides and undetermined intentional injuries: in 1999 - 34 cases in 944 deaths; 2000 - 47 cases in 984 deaths; in 2001 - 52 cases in 1,049 deaths; and in 2002 - 56 cases in 1,081 deaths. The notification data of domestic violence against women, in the state of Paraíba and in the city of João Pessoa, are not organized in a database. Between 2002 and 2005, there were records of 2,836 incidents of domestic violence against women, at the specialized police service to women.¹

One assumes that women do not know they suffer from gender violence, considering gender inequality suffered throughout history. In the case of lesbian women, the
The phenomenon is getting worse given the invisibility allied to lesbophobia. Thus, the study aims to broaden the debate on the subject and proposes a discussion on the design of women about the violence suffered.

**OBJECTIVE**

- Understand the gender violence in lesbian relationships.

**METHOD**

The study is part of a PhD research, entitled "Domestic Violence against Women and Quality of Life", linked to the Postgraduate Program in Health and Decision Models, of the Federal University of Paraíba.

Exploratory, descriptive study, with qualitative approach involving a universe of six women participants of the Lesbian, Gay, Bisexual and Transsexual Movement (LGBT) in the city of João Pessoa/PB.

The data production occurred in October 2015, through a semi-structured interview guide. The inclusion criteria were being a lesbian, being over 18 years, having a partner, accepting to participate in the study. The first stage consisted of transcribing the interviews, while, at the second moment, the themes and/or figures in the speeches of the interviewees on the prepared questions were identified. The interviews were identified by the letter "L" followed by numbers from 1 to 6 (L1, L2, L3 [...] L6), corresponding to the number of women interviewed, in order to maintain the confidentiality and anonymity of participants.

The material produced by the interviews were coded and treated by a technique in which one understands that the text is an organized whole of sense, and in a certain universe of meaning. The meaning of the text is given by both its internal structure, which are the grammar rules, as the historical context of the moment in which it was produced. Analyzing the discourse relates to understanding and assimilating the best possible way the experiences those human beings produce, realizing their values, that is, the meaning they attach to their reality at that time.

This study was conducted according to ethical principles in research and the respective Resolution No. 466/12 of the National Health Council. The research project was approved by the Research Ethics Committee (CAAE: 20418813.0.0000.5183). In the process of analysis and discussion, one sought to relate the empirical material produced to the relevant literature.

**RESULTS**

The interviewed women were 20 years to 23 years, with incomplete higher education, in their majority. Five of the six women reported having experienced violence. The analysis of the statements allowed the elaboration of the following subcategories:

- Understanding of gender violence by lesbian women.
- Understanding of gender violence by lesbigender men.
- The introjected prejudice in gender relations.

Violence is naturalized and, often, women do not consider the phenomenon as grievance. However, there is a breakthrough in the understanding and conceptualization of gender violence, previously not perceived by most women. The following statements relate how lesbians conceptualize gender violence:

- It's about a prejudice for being man or woman, but for me there is only so with women. L [3]
- I believe that gender violence is all violence that women suffer because they are women, I do not believe that men suffer such violence. Men are not killed for being men, do not suffer rapes, this happens only to women. L [5]
- It is when you suffer any discrimination, physical or psychological violence related to your gender, who you are, that is, if I am woman I suffer violence and oppression in society in different ways. L [6]

Despite advances in discussions about gender violence, women still lack knowledge to understand and conceptualize the phenomenon, as shown by the following statements:

- I do not know, I think it is all kinds of violence that lesbian can suffer, I do not know, I think that’s it. L [1]
- I understand that’s all kind of violence suffered in any way, you know, I’m guessing. To be honest, I’ve never heard of gender violence. L [2]

The statements above show the lack of knowledge of women about gender violence.

The statement below portrays the stigma that comes from many years, within society and its day to day, in which the interviewee sees the existence of gender violence as natural:

- Look, I could write a book (laughs). There [...] it is all that we go through for being a woman, basically, it is the clearest answer I can give you. L [4]
The introjected prejudice in gender relations

Corroborating this, the testimonials below depict what most bothered them when they attend health services:

The health services are not so good when directed to the LGBT public, especially for lesbians. They have no direct reference when talking about lesbian sex, we are very undeserved, there is no incentive to sex protection between two women, they do not invest in it, no government campaigns that focus on it, health lesbian woman is quite precarious. L [6]

They are not good, generally. Generally, people are not prepared to deal with lesbians. I went to a psychologist and she was already asking me for BOYFRIENDS (laughs), so it's complicated. L[4]

In this view, despite the advances regarding violence against women, the problem still has no proper treatment, due to the setback of some people. As mentioned by one of the interviewees:

I've had problems in the psychologist and gynecologist, and it is difficult because we have to come out when attended, because people never assume that we can be a lesbian, so sometimes it's a bit of shame. L [6]

As portrayed in the interviews above, there is neglect and lack of information for health professionals when in front of lesbian women in their consultations rooms.

The following statements portray the violence suffered by some of those interviewees, for the simple fact of being lesbian:

I've suffered an attempted corrective rape practiced by my cousin, he told me horrible things like "you never liked man because never experienced one" so he wanted to force me thinking I'd like it. L [4]

[...] Another event was from my stepfather who came to beat me, and tell me that I did not know how good a man was, saying I was naughty for being a lesbian. [...] L [4]

I have suffered psychological violence to find that the fault is always mine, things when I am the victim, think they are my fault. L [5]

[...] I have suffered violence in my first relationship with my ex. I have suffered rape, not the common ones, but with objects. L [6]

DISCUSSION

Gender violence remains throughout history, by many civilizations, and this inequality has, as its extreme form of manifestation, violence against women. Therefore, it constitutes a social phenomenon, thus influencing the way of life, illness and death of women who are victims of such violence.  

There is not a reliable database that can give visibility to gender violence against lesbians. There are no official demographic data about the homosexual population, which makes any information necessarily incomplete or with failures of any aspect. Gender violence is a major grievance widely discussed by feminist movements, whose claims and struggles for gender equality have been taking the national scene.

For the understanding of gender violence, it is of utmost importance to analyze the historical designed context that lasts until the current days. That unequal power system comes from the early days where the woman is always subject to a male body. Social differences place her as a fragile being, likely to be dominated, being treated as a product, and, in this light, the gender violence is a phenomenon that happens and is underpinned by those historical precepts.  

Gender violence is an aggravating factor that has grown in Latin America, becoming a State problem through reports of its victims and families, who come from women's organizations claiming for the rights of human beings, along with the great number of scientific research, which stand against the invisibility by the governments, because of their sexist prejudices and the press. Moreover, in view of feminist studies on gender violence, they consider gender violence as a pillar, in particular, of patriarchy, correlated with the man's dominating position.  

Regarding gender violence, the approaches demonstrate and summarize the great inequality between men and women that perpetuate from their own homes to the public environment, through those values historically constructed, in which man's power dominates at the expense of women's rights. Thus, many cultures still treat women with the norms and beliefs that perpetuate violence against women.  

The violence that has taken place over women brought immeasurable consequences for them both in the physical as in the psychological aspect, making clear the consequences of years of inequality between men and women, as well as affecting the great potential of women in the affective, social and economic areas.

When it comes to the spread of violence regardless of social class, age, race and color, it makes us see that only bad people who
commit violence, inhuman, and of bad character, and this is far from being a truth today, for the vision of what is right and what is wrong, coming from gender roles imposed by society, contributes to a greater number of people with prejudices, making violence against those women trivialized, not only in their personal relationship, but also in society.10

This discussion encourages more discussions to provide information for women, effective public policies, advertising campaigns with a gender approach and talking to them about the emancipation of gender. It takes a greater attention by the governments in this regard, and may one not leave it unpunished, because those women deserve attention, information and respect.

With respect to the Law Nº 11,340/2006, Maria da Penha Law, has caused in recent years greater visibility with regard to violence against women. Many countries have already declared the illegality of violence against women, one of their biggest gains was the breaking of the silence and the awakening of society on issues that were so common, such as fights in public or private environments, which decreased and began to be seen as a crime, thus becoming a problem related to public health.

Gender has been the term used to address, theoretically, the issue of sexual and roles difference directed to women and men in society. Talking about gender indicates the status of women, not imposed by nature, biology, and gender, but everything that encompasses social relations.9

In health area, it is extremely important that health professionals have sensitivity and be able to notice the signs of violence, with a humanized look at cases such as the suffered violence, whether verbal, psychological or physical, not seeing only as an injury. It is necessary to conduct health actions, alerting the public about cases of violence. Addressing those issues involves all health sectors, and requires the involvement of all professionals, in order to solve, in the most effective possible way, and to prevent new cases.9

In this view, despite the advances with regard to violence against women, the problem still has no proper treatment, due to the setback of some people, who still live with old prejudices and social stereotypes, thus remaining into disregard the effects of such violence on health.9

It is not enough to support the need to meet the health demands of different sexual orientations other than heterosexual character. There must be access to health services, with quality and unprejudiced, for lesbians and bisexual women. It is also necessary to deconstruct the subordination of women in various society groups, as well as in view of the exclusion of lesbian and bisexual women, fighting the institutional invisibility that affect and leave them vulnerable.11

The discussion on gender violence is becoming increasingly visible, but it still does not make women feel secure with regard to violence. The media has been showing and dialoguing on the issue; however, it is not enough for them to feel safe to report who the aggressor is.

Among the most common features to conceptualize gender violence, are: the use of physical force (biological dimension), submission and oppression (psychological and sociological dimension). In this perspective, gender violence as the application of a physical force and/or psychological constraint imposed to someone against his/her interests, wishes and desires can cause damage to the physical and mental health for the violation of human dignity in its integrity.12

The Institute of Applied Economic Research13, in Brazil, during the period 2001-2011, estimated there were more than 50,000 deaths of women because of their sexual orientation, equivalent to approximately 5,000 deaths per year. Given this, most of those deaths were caused by domestic and family violence against women, since approximately one third of them had the home as place of occurrence.

It is important to consolidate the annual publication of homophobia data in Brazil, creating a scoreboard of indicators related to respect for LGBT population by State, in addition to criminalizing homophobia in the same way racism was criminalized.4

Violence against women affects their biopsychosocial integrity and it is extremely important to train and sensitize health professionals, so that they know how to treat and proceed, with a more sensitive eye, the various situations, seeking to help more effectively the victims.14

Given this, it is necessary to work on the expansion of arraignments about homophobia violence, with advertising campaigns in all Brazilian states, creating new data stream channels on homophobic violence among states with those structures with the federal government, and create more visibility in those that already exist, in order to consolidate information on gender identity and sexual orientation in other means of

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arraignments. It is also important to ensure the discrimination of crimes with homophobia indications in police reports, and to consolidate and make those data available annually by the Public Security Departments.

In this context, it is important to mention that gender violence is still a social regression, because its high levels still mark the society, thus distancing from a better future for women, especially lesbians.

**FINAL THOUGHTS**

The women were afraid to talk about the abuse and violence they suffer, but few of them are aware of this fact, and fear just deprive them of reporting and manifesting for a change.

Every day, women suffer with violence, inequalities and the non-awareness of the still archaic society, and the aggressor ends up getting away, creating more fear, insecurity and anger on their part. Women victims of violence do not have adequate support from health professionals, who often only observe the apparent wound and not the subjectivity of victimized women.

Lesbians remain in invisibility, and homosexuality is conceptualized as a barrier to be broken, since it is a theme that runs through many prejudices and discrimination. One emphasizes the need for more scientific papers that address the issue of gender violence with those women, who want nothing more than to be accepted and respected for who they are, and especially for their sexual orientation. Therefore, it is important to break the taboos, to debate on the subject, for the country is democratic and free, and everyone deserve respect for who they are.

**REFERENCES**


