



VIOLENCE AGAINST WOMEN: INTEGRATIVE REVIEW

VIOLÊNCIA CONTRA A MULHER: REVISÃO INTEGRATIVA

LA VIOLENCIA CONTRA LA MUJER: REVISIÓN INTEGRAL

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ABSTRACT

Objective: to characterize the scientific production of the period of 2001 to 2011, about violence against women and identify the main types. **Method:** an integrative review of literature, with a quantitative approach, carried out by means of descriptors << violence, women, gender, nursing >>, which resulted in 31 studies. The question was drafted search << Which existing scientific production about violence against women in the context of social assistance, during the period from 2001 to 2011? >>. **Results:** most studies referred to more than one type of aggression, giving emphasis to sexual (50%), psychological (41,65%) and physical (33,33%) and 75% of articles of qualitative approach, 16,6% quantitative and 8,33% mixed. **Conclusion:** emphasizes the importance of conducting studies that value the characterization of the victims of violence, of the types and the context in which this occurs, as it will enable better focusing and targeting of assistance against the shortcomings outlined. **Descriptors:** Violence; Woman; Genre; Nursing.

RESUMO

Objetivo: caracterizar a produção científica do período de 2001 a 2011, acerca da violência contra a mulher e identificar os principais tipos. **Método:** revisão integrativa de literatura, com abordagem quantitativa, realizada por meio dos descritores << violência, mulher, gênero, enfermagem >>, o que resultou em 31 estudos. Foi elaborada a questão de pesquisa << Qual a produção científica existente acerca da violência contra a mulher no contexto sócio assistencial, no período de 2001 a 2011? >>. **Resultados:** a maioria dos estudos referiu a mais de um tipo de agressão, dando ênfase à sexual (50%), à psicológica (41,65%) e à física (33,33%); sendo que 75% dos artigos de abordagem qualitativa, 16,6% quantitativa e 8,33% mista. **Conclusão:** enfatiza-se a importância de realizar estudos que valorizem a caracterização das vítimas de violência, dos tipos e do contexto em que essa ocorre, uma vez que irá permitir melhor focalização e direcionamento da assistência, frente às carências delineadas. **Descritores:** Violência; Mulher; Gênero; Enfermagem.

RESUMEN

Objetivo: caracterizar la producción científica del período de 2001 a 2011, sobre la violencia contra las mujeres e identificar los principales tipos. **Método:** una revisión integral de la literatura, con un enfoque cuantitativo, lleva a cabo mediante descriptores << violencia, mujeres, género, enfermería >>, que resultó en 31 estudios. La cuestión fue redactada buscar << que existente producción científica sobre la violencia contra la mujer en el contexto de la asistencia social, durante el período comprendido entre 2001 y 2011? >>. **Resultados:** la mayoría de estudios referidos a más de un tipo de agresión, dando énfasis a la sexual (50%), psicológico (41,65%) y física (33,33%) y el 75% de los artículos de enfoque cualitativo, 16,6 % cuantitativa y 8,33% mixta. **Conclusión:** destaca la importancia de realizar estudios valor la caracterización de las víctimas de la violencia, de los tipos y el contexto en que esto ocurre, ya que permitirá mejor enfoque y orientación de asistencia contra las deficiencias descritas. **Descriptores:** Violencia; Mujer; Género; Enfermería.

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INTRODUCTION

In the history of mankind has derived its violence against women themselves in different ways, according to the culture, since women were prepared to act in a relationship of subordination and obedience to his companions, what tax papers to foreign female and male.¹

Violence against women can be recognized with a radical experience full denial of the human with the violation of women's rights, which is evidenced in reports and experiences of victims.² In this context, the consequences of the same, since the demonstrations are not restricted to injuries and trauma, but that are related to any individual's health-disease process, which features significant costs and greater demand for health systems.³

The invisibility on the impact on the health of women resulting from violence can be resulting from the interrelation of three factors: the first woman to present only vague and recurring complaints; the second is associated with the predominance of the professional biologist model that meets and, the third involves the stereotypes for women due to gender identity. Awareness of these factors can improve service and expand the fields of activity by decreasing the effects of violence.⁴

In the last decades of the 20TH century, the feminist movement aimed to educate women and society about the genre and also required strategies targeted victims for the range of assistance aimed at the care for traumas and the recognition of women's rights in their status as citizens.³

Is valid to point out that the actions of aggression then inserted in a context of personal, cultural, political and social order. In this speech, emphasized the need to recognize violence against women as a health problem. Thus, requires professionals to battered women, are able to carry out a coordinated management, effective communication between different areas and development of humanized and strategies of prevention, to achieve an integral attention to the woman.⁵

Violence against women is understood as a problem of public health, however, there is a lack of health services in relation to investments that are interconnected to the victimized women and identification of actions that characterize instrumented professionals and backed up. The approach of this violence requires responsibility, commitment and relationship between health

services, which requires the implementation of same for assistance based on reference and reference.⁶⁻⁷

In the discourse on gender inequality, violence against women is considered an asymmetry of a domination and force that involves the power. The aggression that is based on the genus is configured as a social phenomenon, which interferes in the lives of women, such as the way of living, sicken and die.⁴

Gender violence is a phenomenon arising in different situations and differences in relation to the subjectivity of the individuals who portray the act. In the context of the violence the life story and the specific aspects of each individual offer an own dynamics.^{8,9}

Gender violence is based on relations of ownership and are linked to a patriarchal power, which is mainly involved by exposure and human power and therefore an expression of women's subordination. So, based on this concept, violence against women can be defined as a nonspecific action occurring in public or private setting, which causes damage or suffering physical, sexual, psychological, moral or cultural heritage.¹⁰

To consider that violence against women is more and more visible, it is relevant to identify the different scientific approaches concerning the aggression in this genre. The nurse, a professional assistance, which acts directly to victims, must have knowledge of various types of violence and identify the characteristics that constitute aggression, for a proper and humane care.

OBJECTIVES

- To characterize the scientific production of the period of 2001 to 2011, about violence against women.
- To identify the main types of violence against women.

METHOD

This study comprises integrative literature review, considered relevant scientific tool to ensure a health care once that synthesizes the studies and direct strategies with emphasis on knowledge in a rigorous process approach, allowing the reduction of possible biases⁽¹¹⁾.

In-context approach that involves the problem of research, was drafted the guiding question: what is the existing scientific production about violence against women in the context of social assistance, during the period from 2001 to 2011? The strategy for the identification and selection of the population

was conducted through surveying studies indexed in the databases available in the Virtual Health Library-VHL: Lilacs, Ibecs, Medline, Cochrane Library, and Scielo. The bibliographic survey conducted by internet-based descriptors used in health sciences descriptors (DeCS): violence, women, gender, and nursing. This step resulted in a survey of 31 studies, of which passed through a pre-selection by reading titles and summaries in order to select research to respond to guiding issue.

For the refinement of the studies found, were used the following inclusion criteria: articles published in the period from 2001 to 2011 and in Portuguese, Spanish and English. Exclusion criteria were: theses, articles not available in Brazilian databases and articles other than guiding question answered. In this way, a final sample for analysis, it was composed of 12 articles, of which eight are

indexed at Lilacs and four in Medline.

For the analysis of the articles we used the variables type of study, the author, year, place of development of the study, the authors' profession and the type of violence.

When that match the ethical aspects of research, the preservation of authorship and the referencing of research used for the preparation of this article. Still, for its scientific profile, integrative review dispenses with the submission of the study to a Research Ethics Committee.

RESULTS AND DISCUSSION

When using the strategy described, were found 12 articles and analysis methodology, it was noted that nine (75%) have a qualitative approach, two (16,6%) quantitative (8,33) mixed, according to figure 1.

Id	Title	Author (s)	Year	Country	Profession
E1	Situations of violence in the lives of girl gang members.	Hunt, G; Joe-Laidler, K ⁽¹²⁾	2001	United States of America	Researchers for Scientific Analysis, Alameda, California, USA; Department of Sociology, University of Hong Kong, Hong Kong, SAR of China)
E2	Sexual violence against women: a challenge for education and research in Brazil.	Squinca, F; Diniz, D; Braga, K ⁽¹³⁾	2004	Brazil	Researchers (Bioethics Institute gender human rights-UnB)
E3	Gynecological nursing consultation and reducing gender violence.	Araujo, LM; Progianti, JM; Vargens, OMC ⁽¹⁴⁾	2004	Brazil	Nurses
E4	Living on the streets in Canada: a feminist Narrative study of girls and young women.	Reid, S; Berman, H; Forchuk, C ⁽¹⁵⁾	2005	Canada	Researchers (School of Nursing, University of Western Ontario and Lawson Health Research Institute, London, Ontario, Canada)
E5	The implications of a new event in a family of a gravid female multigesta	Ximenes, LB; Varela, ZMV ⁽¹⁶⁾	2006	Brazil	Nurses
E6	Enfrentamento da violência doméstica contra a mulher a partir da Interdisciplinaridade Intersetorialidade	Gomes, NP; Diniz NMF; Filho CCS; Santos JNB. ⁽¹⁷⁾	2009	Brazil	Nurses
E7	Construyendo um lenguaje incomun em mujeres víctimas de violencia conjugal	Guzman, YER; Tyrrell, MAR ⁽¹⁸⁾	2008	Brazil	Nurses
E8	Violência doméstica contra a mulher na visão do agente comunitário de saúde	FONSECA, RMGS et al. ⁽¹⁹⁾	2009	Brazil	Nurses
E9	Women: an endangered species?	Kennedy, MS; Roush, K ⁽²⁰⁾	2009	United States of America	Researches
E10	Violencia de pareja y salud de las mujeres que consultan a las comisarías de familia	CANAVAL, GE et al. ⁽²¹⁾	2009	Colombia	Nurses
E11	O cuidado de enfermagem a vítimas de violência doméstica.	Ferraz, MIR ⁽¹⁷⁾	2009	Brazil	Nurses
E12	Pathway to social justice: research on human rights and gender-based violence in a Rwandan refugee CAMP	Pavlish, C; Ho, A ⁽²²⁾	2009	United States of America	Nurses

There is a growing number of publications from 2006, represented by nine articles (75%), seven Brazilians, which may be associated with the approval of the law 11.340/2006 known as the Maria da Penha Law. This law aims to guarantee the rights of women in society, and aim at the planning and implementation of actions that may offer care to victims and reduce the rates of violence.¹

In the analysis, as the evidence levels, 10 (83%) of studies present evidence level four and two (16.6%) are six-level, however, can be observed in these studies proposals for confronting the problem under the multidisciplinary approach in support of women victims.

In analyzing the first authors there was a predominance of females at 11 (90.90%) articles, of which nine (75%) were written by nurses, profession considered feminine as shown in Figure 1. It turns out that research related to gender issues have been written by women, reflecting the weight that the prestige hierarchy between the sexes has to organize scientific objects, which hinders the participation of male authors to.²³

After the analysis of the articles identified that as to the type of violence most refers to more than one type of aggression by giving emphasis to six sexual (50%); the five psychological (41.65%) and four (33.33%) to physics as shown in Figure 1.

Sexual violence is an act hostile, aggressive and violent, used by abusers as a way to humiliate, terrify and dominate women, which makes them victims of male power and control. This is a serious human rights violation that causes damage, often irreversible mental and physical health of women, in addition to its high social costs lead to therapy.²⁴

Upon the results obtained, noted that women are more vulnerable to various types of violence. This may be related to changes in the lifestyle of the woman, which went on to play roles in society which is confronted with the differences recognized by men as natural and unquestioned. Thus, the gender differences are fundamental elements for the understanding of the phenomenon of violence against women.⁹

In Brazil, in research conducted with 2502 women, between the ages of 15 years or more, it was found that 43% of the population of the study reported having been victims of violence by a man. Of these one third reported having suffered physical violence, sexual violence and 27% 13% psychological traumas.²⁵

In this context, the physical violence practiced by the companion or by any member of the family is the main setting of the violence against women 25 what does not match with the bibliographical survey of the present study, in whom sexual violence was the most discussed in the work.

It stands out for articles that violence is defined as a product of conflict, which arises in the sexual-affective relationship, or not may be lasting and occur between men and women or between persons of the same sex.

The inequalities arising out of a relationship, whether they are of value or power, generate conflict situations and is independent of family dynamics, however, conflicts are linked to cultural and social assignments corresponding to male and female⁽⁷⁾. On these inequalities arising out of a relationship, it is noticed that women who are victims of sexual abuse are at high levels, being forced to have intercourse against her will, which strengthen the scientific findings. Enhanced data in the study shows that on average 41% of the victims have suffered sexual abuse, followed by physical attacks that on average corresponded to 33.2%.²⁶

Discuss the problem of sexual violence against women becomes scientific relevance, since sexual abuse is physical and psychosocial damages plus and their victims become exposed to sexually transmitted diseases.²⁷

The Brazil, since 1990, has been promoting actions to empower professionals to identify, support and give the due submission to women victims of violence⁽²⁸⁾. However, it turns out that the effective actions for women victims of violence are discreetly.

The strategies of prevention and confrontation of the phenomenon are indispensable to the health service. To this end, it is considered a non-interactional process should be seen as an individual building, but as a relational plot in which all parties involved to affect and there is a need for specific knowledge and practices that promote the therapeutic process to victims.^{9,29}

To the health professional, specifically in the area of nursing which assists victims of violence, pay attention not only to physical injuries, which are instantly identified, however, search for training with regard to the implementation and use of instruments that aim to solve with effectiveness the phenomenon and the traumas caused by the aggression suffered.¹

One can see that for the nurse, the difficulty is not the violence, but deal with it,

since it involves bio psychosocial aspects. It becomes important to undertake a planning strategies by this professional, in order to achieve the reduction of violence against women. This requires the implementation of public policies, namely addressing the victims of different types of violence, private hosting site and humanized design and drafting support projects.^{1,28}

As regards the follow-up after the violence, the literature States that between 10% to 31% continue with medical care. Infers that this rate is small due to the quality of services, with trained professionals, whether or not private areas, protocols and guidelines enlightening about the consequences of sexual violence, in addition to the fear of being exposed and reprisals.²⁴

CONCLUSION

In the analysis of the studies, it was observed that the violence most commonly discussed in the publications, are represented by sexual violence, psychological violence and physical violence. In this speech, mentioning that gender violence has been configured as a triggering factor of assaults on women, and the same is infiltrated on the different aspects that make up society and influencing the actions carried out by males against females.

Faced with the situation of aggression, it is important to consider the need to achieve a service that understands the woman as a holistic being, which imposes the characterization of health services as institutions with a multidisciplinary attention, in order to achieve a balance between the aspects of the life of the woman who suffered interference from violence.

The theme of the proposed approach for the professional nurse must be considered as an integral part, from his academic training to the profession, to be this active in direct and full assistance to women victims of violence. Therefore, it is important to develop curricular improvements aimed practices of these professionals so they can develop better planning of assistance.

In addressing this issue, noted the importance of conducting studies that value the characterization of the subjects who are victims of violence, of violence and of the context in which this occurs, as it will allow a better focusing and targeting of assistance against the shortcomings outlined. Still, the need for further investigation about the assaults, a time that will allow an expansion of knowledge and promote a better

coordination of assistance practices with public health policies directed to this population.

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