

# Traits of the aggressor: portrayed by the woman victim of domestic violence

## Traços do agressor: retratados pela mulher vítima de violência doméstica

## Rasgos del agresor: retratado por la mujer víctima de la violencia doméstica

Gabriele Soares da Silva<sup>1</sup>, Leila Batista Ribeiro<sup>2</sup>, Anna Júlia Veras de Lima<sup>3</sup>, Lauren Canabarro Barrios Salles<sup>4</sup>, Cristiane Machado do Vale de Andrade<sup>5</sup>, Camila Cintia Curcio de Oliveira<sup>6</sup>, Taynara Câmara Lopes Dantas<sup>7</sup>, Danilo César Silva Lima<sup>8</sup>

**How to cite:** Silva GS, Ribeiro LB, Lima AJV, Salles LCB, Andrade CMV, Oliveira CCC, et al. Traits of the aggressor: portrayed by the woman victim of domestic. REVISA. 2021; 10(Esp.2): 858-70. Doi: <https://doi.org/10.36239/revisa.v10.nEsp2.p858a870>

# REVISA

1. Planalto University Center of the Federal District. Brasília, Distrito Federal, Brazil. <https://orcid.org/0000-0001-9534-1403>

2. Planalto University Center of the Federal District. Brasília, Distrito Federal, Brazil. <https://orcid.org/0000-0001-6399-6966>

3. Planalto University Center of the Federal District. Brasília, Distrito Federal, Brazil. <https://orcid.org/0000-0001-8937-5930>

4. Planalto University Center of the Federal District. Brasília, Distrito Federal, Brazil. <https://orcid.org/0000-0003-4659-5958>

5. Centro Universitário Planalto do Distrito Federal. Brasília, Distrito Federal, Brazil. <https://orcid.org/0000-0003-1719-0990>

6. Planalto University Center of the Federal District. Brasília, Distrito Federal, Brazil. <https://orcid.org/0000-0001-7740-5370>

7. Planalto University Center of the Federal District. Brasília, Distrito Federal, Brazil. <https://orcid.org/0000-0002-0205-3996>

8. Faculty of the Brazil Institute of Science and Technology. Anápolis, Goiás, Brazil. <https://orcid.org/0000-0003-4655-1812>

Received: 12/07/2021  
Accepted: 19/09/2021

### RESUMO

**Objetivo:** descrever os traços do agressor retratados pela mulher vítima de violência doméstica. E como objetivos específicos elucidar o período, bem como o momento em que as agressões contra a mulher se iniciam; analisar o comportamento do agressor após a agressão. **Método:** Este estudo seguiu uma abordagem qualitativa e um método descritivo, por meio dos pressupostos de Ludke e Andre. As participantes foram abordadas por meio de convite, durante as rodas de conversa que acontecem online por meio do Instituto MATRIUSCA. Após manifestação de interesse em participar do estudo, as entrevistas foram realizadas por meio de questionário aberto no aplicativo Zoom Meetings. **Resultados:** Foram entrevistadas 10 mulheres com idade entre 18 e 42 anos, que responderam questões referentes ao perfil de seus agressores e seus hábitos sob sua perspectiva. Os resultados encontrados foram divididos em 06 categorias, que abordaram o perfil das ações dos agressores sob a perspectiva da vítima. **Conclusão:** Por meio deste estudo a enfermagem poderá conhecer um pouco mais sobre os indivíduos que praticam violência contra a mulher, podendo assim identificar precocemente famílias que estão propensas a sofrer em seu núcleo, violência contra a mulher. **Descritores:** Violência contra a mulher; Agressor; Violência doméstica.

### ABSTRACT

**Objective:** to describe the traits of the aggressor portrayed by the woman victim of domestic violence. And as specific objectives to elucidate the period, as well as the moment when aggressions against women start; analyze the aggressor's behavior after the aggression. **Method:** This study followed a qualitative approach and a descriptive method, through the assumptions of Ludke and Andre. Participants were approached by invitation, during conversation circles that take place online through the MATRIUSCA Institute. After expressing interest in participating in the study, interviews were conducted through an open questionnaire in the Zoom Meetings application. **Results:** 10 women aged between 18 and 42 years were interviewed, who answered questions regarding the profile of their aggressors and their habits from their perspective. The results found were divided into 06 categories, which addressed the profile of the aggressors' actions from the perspective of the victim. **Conclusion:** Through this study, nursing will be able to know a little more about individuals who practice violence against women, thus being able to identify early families that are likely to suffer at its core, violence against women. **Descriptors:** Violence against women; Aggressor; Domestic violence.

### RESUMEN

**Objetivo:** describir los rasgos del agresor retratados por la mujer víctima de violencia intrafamiliar. Y como objetivos específicos para dilucidar el período, así como el momento en que se inician las agresiones contra las mujeres; Analizar el comportamiento del agresor después de la agresión. **Método:** Este estudio siguió un enfoque cualitativo y un método descriptivo, a través de los supuestos de Ludke y Andre. Los participantes fueron abordados por invitación, durante los círculos de conversación que se realizan en línea a través del Instituto MATRIUSCA. Tras manifestar interés en participar en el estudio, se realizaron entrevistas a través de un cuestionario abierto en la aplicación Zoom Meetings. **Resultados:** se entrevistó a 10 mujeres de entre 18 y 42 años, quienes respondieron preguntas sobre el perfil de sus agresores y sus hábitos desde su perspectiva. Los resultados encontrados se dividieron en 06 categorías, las cuales abordaron el perfil de las acciones de los agresores desde la perspectiva de la víctima. **Conclusión:** A través de este estudio, la enfermería podrá conocer un poco más sobre las personas que practican la violencia contra la mujer, pudiendo así identificar a las primeras familias que probablemente sufrirán en su núcleo, la violencia contra la mujer. **Descriptores:** La violencia contra las mujeres; Agressor; La violencia doméstica.

## Introduction

Violence is considered any and all threats that somehow affect the integrity and the way the individual builds it. There are several types of violence against women: physical violence, sexual violence, psychological violence, property violence and moral violence. The largest cases of violence against women are partners against women, often inside their homes, we can also consider cases of rapes that are made in the public sphere. In 2019, about 266,310 women were assaulted in Brazil in the context of domestic violence. Every 2 minutes 1 woman is assaulted inside her home or by members of her family, the number is 5.2% higher than compared to 2018.<sup>1</sup>

The idea of submission that women suffer before men is one of the reasons why violence occurs. The victim of these violences for having various traumas and diseases such as: anxiety, depression, post-traumatic stress and suicide. Physical violence in which it consists of any and all acts that aims to repress women through physical force, and punches and beatings and sexual violence that is the one in which acts or attempts at sexual intercourse occur without the consent of women are the most visible and the best known when compared to other types of violence.<sup>2</sup>

According to experts men who practice violence against women do not have a flashy profile, they are usually ordinary citizens, workers, men considered good figures, who often people who live nearby do not believe that he commits such crimes and the victim himself before the aggressions happen does not identify any irregular behavior. Some behaviors such as interfering in the way of dressing of the companion, the act of controlling social networks, humiliating and cursing the companion, possessiveness and interferences in social relations, are behaviors that should draw attention to a possible profile of a transgressor.<sup>3</sup>

Currently with domestic violence impregnated in society it is difficult to recognize it in many cases, but to combat it was created Law 11.340 also known as Maria da Penha Law which is a law created to combat violence against women, this law was created by Maria da Penha Maia Fernandes in 1983 after being shot with a shotgun and almost being electrocuted while bathing. The Maria da Penha Law was approved only in 2006, and has as main consequences for the aggressor: removal from the victim's home or home, prohibition of approaching the victim and his/her family members, prohibition of the matter with the victim and his/her family, attendance of certain places and suspension of possession or possession of weapons.<sup>1</sup>

In view of the above this study proposes the following questions the following research questions: does the aggressor have traits that can be described by the woman? The assaults start from what moment? What behavior and habits does the aggressor have within the relationship? How does the aggressor behave after the episode of violence?

This study is important, because it can equip professionals not only in the nursing area, but so many others who provide care to women victims of violence. It is known that in cases of violence the victim feels vulnerable to any type of event so it is necessary that he has an integrated team to perform active listening to this patient and most importantly; it is necessary to have a humanized welcome so that bonds of trust are created between women and the professional.

Furthermore, this study may stimulate further research and thus generate a better understanding of how and when violence begins, what common habits these aggressors have and consequently assist the professional for early diagnosis when in consultation with this woman who is a victim of violence.

In this sense, the objective is to describe the traits of the aggressor portrayed by the woman victim of domestic violence. And as specific objectives were: to know the moment when aggressions against women begin; elucidate the aggressor's habits within the relationship and reveal the way the aggressor behaves after violence.

## Method

This research was based on ludke and andre4 principles using the qualitative approach and descriptive method.

As ethical principles, resolution 510/16 was used, which includes principles such as autonomy, non-maleficence, beneficence, justice and equity, aims to ensure the rights and duties that involve research participants, the community and the State.

The data collected in the research started from the authorization by the Research Ethics Committee (CEP) that according to the Standards and Regulatory Guidelines of Research Involving Human Beings – (Res. CNS 466/1, II.4), "all research involving human beings must be submitted to the appreciation of a Research Ethics Committee". The Research was initiated only after the approval issued in the opinion embodied in CEP No. 4,937,326. The research followed all the criteria of reliability, confidentiality and confidentiality and also, the interviewees had their names replaced by fictitious names randomly as a way to ensure anonymity.

The research was carried out through the wheels of conversations that took place through the MATRIUSCA Institute, located in Brasília/DF. This study was conducted through the Zoom Meetings app, because due to the COVID-19 pandemic the meetings were being done online.

After the authorization of the CEP, the participants were contacted through the Zoom Meetings application and the invitation to participate in the research. After accepting the invitation, the interviewees received the Informed Consent in two ways via Google Forms to be authorized by them.

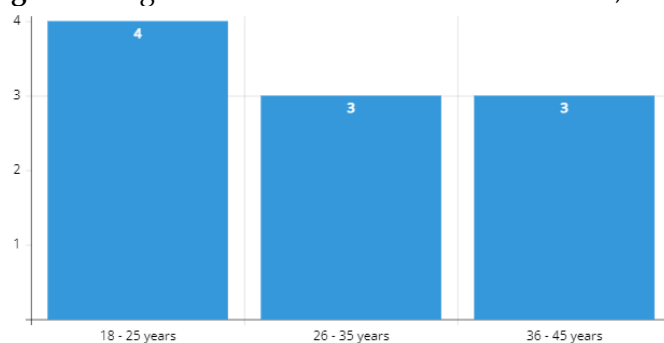
The participants of the research were women who live or experienced situations of violence at home. The study was composed of 10 (ten) women interviewed who met the following inclusion criteria: Being 18 years of age or older, having access to the Zoom Meetings app, being willing to participate in the research, feeling comfortable answering the proposed questions, enjoying full mental health, i.e., women who have full cognitive conditions and abilities, that are oriented in time and space.

The interview was made by applying a previously elaborated questionnaire, with 20 questions. The entire interview was recorded in the Zoom Meetings application and later the data obtained were transcribed confidentially.

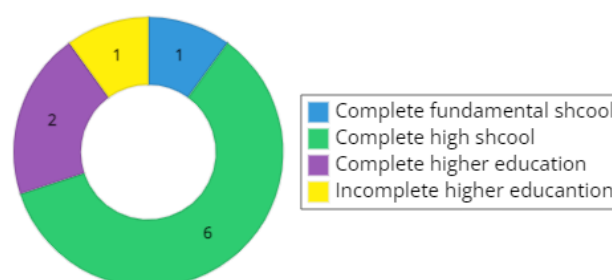
## Results and Discussion

The results for this research were obtained through interviews with 10 women who received fictitious names, randomly chosen in order to preserve anonymity. The names chosen were: pink, violet, orange, yellow, red, brown, black, white, gray, turquoise. The profile of the interviewees is presented in Figures 1, 2, 3 and 4.

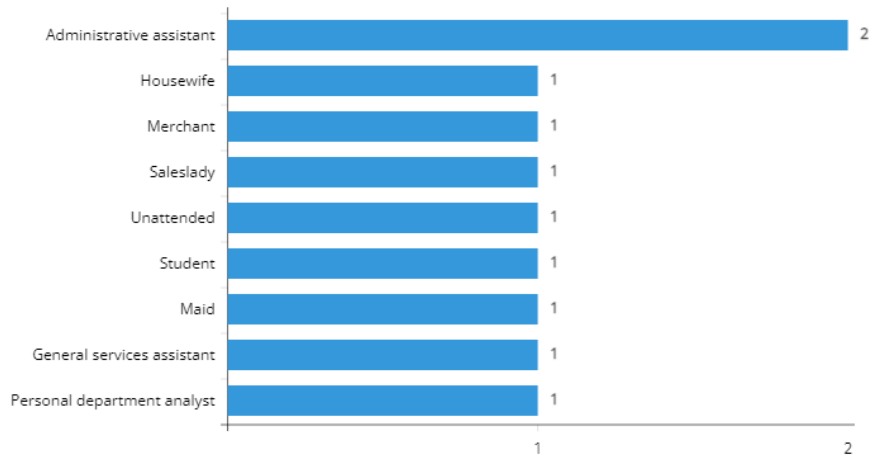
**Figure 1** - Age of the interviewees. Federal District, 2021.



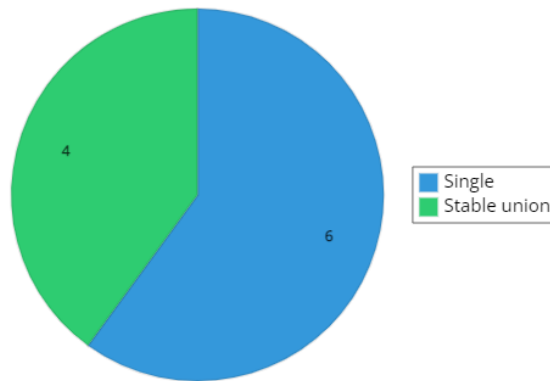
**Figure 2** - Level of education of the interviewees. Federal District, 2021.



**Figure 3 - Profession of the interviewees.**



**Figure 4 - Marital status of the interviewees.**



The predominance of participants aged 18 to 25 years, who are single, with complete high school education and who act as administrative assistants, is observed above. In which the collected data were analyzed, 06 categories were separated, which are described below.

### Change in Aggressor Behavior

In this category, the interviewees reported on the change in the behavior of the aggressor before the aggressions at some point and some reported when the change occurred or occurs.

Yes (PINK)

Yes (BROWN)

Yes (VIOLET)

Yes. When something bothered him, yes. Sometimes I didn't even understand why he's so angry (TURQUOISE)

yes, especially when he drinks. Gets out of control (ORANGE)

At the beginning of our courtship he was affectionate, respected me, but after our third child he began to assault me with offenses [...] (WHITE)

Yes (GRAY)

Yes (YELLOW)

Through the interviewees' reports, it is possible to notice that most of the aggressors have behavior changes. Before the aggressions the perpetrators usually have a change of behavior and mood, where they begin to get angry with the victims for insignificant reasons and may even have accesses of anger, with simple verbal aggressions or even greater tensions.<sup>5</sup>

Many other studies associate alcohol as one of the reasons for the change in behavior to happen, the exacerbated consumption of alcohol leads and a change of heart and consequently this change can lead to the act of violence.<sup>6</sup>

### **Alcohol and Illicit Drug Addiction**

In this category, all interviewees reported that their partners have ethylic dependence and some still mention illicit drug use, as follows:

Yes (PINK)

He drinks constantly and I don't doubt anything that he uses drugs either. (BROWN)

He drinks constantly and also uses drugs (VIOLET)

He does, but the assaults weren't because he drank and he was aggressive. I do not consider this issue that he drank and assaulted me because of the drink, but because he said That I annoyed him (TURQUOISE)

Yes (RED)

[...] It was not constant, he drank only once in a while, but in recent months is being daily, it became customary to get home drunk [...] (ORANGE)

Yes. He drinks drips and uses cocaine (WHITE)

Yes. He drinks every day when he leaves work (GREY)

Yes, he drinks alcohol and once I witnessed him using cocaine (PRETA)

Yes. Alcohol and marijuana. (YELLOW)

The reasons that lead to the practice of violence are several, from the use of drugs, anger, ignorance, demonstration of extreme power and, especially the ingestion of alcoholic beverages.<sup>7</sup> The abusive use of alcohol and other drugs, associated with other small frustrations of the daily life of married life, contribute to the appearance of violent conduct, in general the drugs and alcohol associated were an explosive cocktail. In addition, men who abuse these substances are more likely to abuse their women than those who do not consume these substances.<sup>8</sup>

## Sexual intercourse

In this category, the interviewees reported on the threats and coercion on the part of the aggressor so that sexual relations are maintained forcefully.

Yes (VIOLET)

Yes, using physical force and threatens me if I do not (RED)  
Always. Since the beginning of dating (WHITE)

Yes. When we fought he said I had to please him with sex so we could be at peace afterwards (BLACK)

The victim of sexual violence is willing to pose different risks that compromise their physical and mental health.<sup>9</sup> The consequences of sexual violence are multiple, and its physical and psychological effects can be devastating and lasting.<sup>10</sup>

According to the interviewees' reports, it can be understood that the majority suffer marital rape. Marital or marital rape is when sexual intercourse occurs against one of the partners, even within a relationship. The most common type is to force sexual intercourse through threat or violence, but it can also be forcing sex with the victim asleep, unconscious, intoxicated or under the influence of medication. In society it is difficult for the victim to realize that he is being the victim of this type of rape, as it is common for sex to be performed without mutual consent and there is often a culture that a man can enjoy the body of his spouse as he sees fit, but any relationship without consent is considered rape.<sup>11</sup>

As motivações para tal comportamento dos agressores, podem ser as naturalizadas do gênero, como honra, vingança, prestígio, heterossexismo e prerrogativa de chefia e mando.<sup>12</sup>

## Emotional blackmail

In this category, the interviewees reported on the times when they were victims of emotional blackmail and how they gave in to such an attitude.

Yes. I always get started because I live in fear indoors to say no to something he wants and he assault me stronger or even kill me (VIOLET)

Yes, they had the blackmails, but I never gave in to them at first, I always thought to myself "is the problem me?" "am I the one who's taking too much on his foot and choking him?" (TURQUOISE)

When they happen I am obliged to give in, I am obliged to do his wills because I am afraid of what he can do to me, besides hitting me (RED)

[...] yes, he said "I can't live without you" and always came up with an apology, saying he was going to change, but he always repeated everything. Nowadays he even one time or another says it will change, that that was because he smelled a lot and that will no longer happen (WHITE)

Yes. He always says that all the fights/assaults are because he had some problem at work and took it out on me and that it's not going to happen anymore, that he was stressed and need to relax and that I could have relationship with him so that he would stay calm or that I could make a different food for him to eat because I was tired of the same food as always... (GRAY)

Always giving me presents, taking me to eat in a different place, always saying that he loved me and that he was capable of anything for me. Always after a fight or aggression he bought me with gifts, flowers, words... (BLACK)

When I told him I was pregnant and I picked it up right away, he started saying he had hit me because at the time he was terrified by the news, that he was afraid of not being a good father, went out to buy a snack for both of us and I apologized because I thought I had told him very quickly and could have waited a while longer (YELLOW)

Through the interviewees' reports it is possible to notice the blackmail of their aggressors. The types of blackmail are as diverse as possible, one can cite as an example the manipulation to practice sexual intercourse, suicide threats after opposition and resistance of the victim in attending him, affective blackmail blaming the victim.<sup>9,13</sup>

The period of blackmail usually occurs as the third phase of the cycle of aggression, this phase is known as "honeymoon", in which the aggressor becomes kind to achieve reconciliation and begins a blackmail profile, claiming to victim that it will change.<sup>14</sup>

As in the case of the interviewee, many women claim that violence began after the discovery of pregnancy. The emotional blackmail of pregnancy occurs in various ways as in the study of Oliveira and Vianna in which the aggressors claim not to be the father of the child, do not want the pregnancy or try to blame the victim claiming that after birth the woman will only want the child.<sup>15</sup>

In this period, it is common for the victim to come to blame himself for not having behaved as he should, assuming the blackmailer's malaise, feeling responsible for "apparently" having violated some suffering to the blackmailer, when in fact such a situation was installed in his head, to awaken such thoughts.<sup>9,13</sup>

### **Aggressor's behavior after aggression**

In this category, the interviewees reported on the behavior of the aggressor soon after being assaulted, among them thinking that they were correct, they also went by victims, according to the following reports:

I pretended nothing had happened, treated me normally (ROSA)

When there was the assault I left home, went to a hotel with our two children and stayed there until the next day. I went to the police station, registered the bulletin and had the 1st protective measure (BROWN)

Yes, he always says that it will change and that it will not happen anymore, but every time it happens it gets worse you know (VIOLET)



Amazingly, my aggressor always played the victim, said That I left him like that because I wanted to arrest him to me because I was pregnant and expected a child of him, after hitting me made me feel like the worst person in the world and always put as the saint who never did anything bad to me. In his head the assaults were common, something the husband has to do with the woman to teach her to respect him (TURQUOISE)

Always very respectful, he curses me as "bitch" "bitch" and worse things. He is always angry, with a closed face and is a person who is not very friendly, always has a sulky face indoors (RED)

His behavior is totally different from when he's drunk. When the aggressions start he always insults me with names like: ugly, fat, dumb and when he finishes talking all this to me, he stays in the room or in the room and gives me no attention (ORANGE)

It's relative, because sometimes he hits me and I'm in my corner, quiet and he hugs me and says it's not going to happen anymore. And there are times when he hits me and still says "you deserved to catch, if you say anything will catch more" (WHITE)

After the aggressions, he says it will change and that this will not happen again, but the other day is always the same thing when it is not catching is being cursed (GREY)

Soon after the assaults I always said I was leaving his house, that I was no longer in the mood and he was always very scared by my reaction and always cried me apologizing, said that this was not going to happen anymore (BLACK)

He apologized to me and said that he was not going to repeat himself anymore, that he was stressed by the routine, with the lack of money too and that I could swear that the assaults were never going to happen again (YELLOW)

In the reports described and in the literature the aggressors try to blame the victim for the aggression, or even blackmail the victim. The victim's guilt is the result of patriarchal and macho society, which places women as a submissive figure to man. It is common in society when there have been reports of violence against a woman, to seek justifications in the behavior of women for such crime, seeking indirect guilt.<sup>16</sup>

The fear in the interviewees' speech is a feeling that the aggressor usually awakens, it is due to intimidation, threats of aggression and the control that the aggressor has over the victim. The feeling of fear can generate social isolation and remoteness of people close to.<sup>17</sup>

In addition to the victim's guilt and the fear generated, it is observed that most of the interviewees live in the so-called cycle of violence, which is composed of three phases. In the first phase there is increased tension, in which the aggressor is irritated by small attitudes, in the second phase aggression occurs, where the explosion of the aggressor leads to violent act, and the third phase that is called "honeymoon", in which the aggressor promises that such attitudes will not repeat and promises changes and the victim accepts. This cycle can

be repeated countless times until it reaches the high point, which is feminicídio.<sup>14</sup>

## Death Threat

In this category, the interviewees reported on the death threats that the aggressor made at the time of the assaults.

Yes (PINK)

Yes, that last time he called me he offended me in many ways and even said he would kill me if I continued in this relationship that I am currently in. It does not overcome (BROWN)

Yes, he always threatens me with a knife, in the last aggression came to cut my hair and press the tip of the knife on my genital organ (VIOLET)

Yes (VERMELHA)

Yes. If I'm not mistaken about two weeks ago that's when I was celebrating my birthday and I was called by my friends to celebrate at a pizzeria, I said I'd go without him because they were just going to women and he told me that when I got home, maybe it was my last birthday of life (ORANGE)

Yes (WHITE)

Yes. Even when I said I would denounce him he told me that I could not get rid of him, because he would always be with me in life or in death (PRETA)

Yes, the last heist that was when I lost my baby. (YELLOW)

Death threats are very common in the context of domestic violence, and the act performed is called feminicide, which is the final phase of the cycle of violence against women. Most of the men arrested for assaults against women are mostly husbands or partners who commit physical violence. A significant portion of these men were usually previously reported for violence and the other has no criminal records and is cited as a good citizen.<sup>18</sup>

Intimate partners are the main killers of women. It is estimated that approximately 40% of all homicides of women in the world are committed by an intimate partner.<sup>19</sup>

The main motivations for feminicide are hate, disdain and the feeling of control over women.<sup>20</sup>

In March 2015 the Feminicide Act came into force, penally qualifying the murder of women as a heinous crime, resulting from domestic and family violence or due to discrimination against the condition of a woman.<sup>20</sup>

## Final Considerations

This study met the proposed objectives trying to understand through victims' reports, traits of their aggressors exemplified in the way they act and behave on a daily life, as well as their habits in general.

Nursing plays a fundamental role in the identification of women victims of violence, since it is the category that remains for the longest side of women and possible victims. The nursing team needs training so that they can better understand about domestic violence and its obstacles. So that it can also recognize traces of the aggressor, thus being able to make the early identification of families with women who are vulnerable or who suffer domestic violence.

This study did not intend to exhaust the subject, but sought through this immersion in the collected data a greater understanding of the facts and events that the woman constantly narrates and confidential to nursing routinely within the offices.

It is necessary to think that the nursing team needs to be better sensitized and prepared so that it can intervene at the right time and even the government cannot be restricted only to the laws and ordinances it creates, but in the endorsement of the supervision and preparation of all who are somehow involved in the assistance of this victim.

Finally, this study still proposes other questions that could not contemplate, but that were evidenced and unveiled throughout the interviews. Questions such as: what are these reasons that justify raping the person who claims to love? What feeling is that that justifies being beaten, losing your child still in the womb and losing your dignity? What chronic domestic violence situation can the aggressor and victims maintain? These questions are most often the aggressor and this same woman do not know how to answer or say they know, so they are justified.

## Acknowledgment

This research did not receive funding for its realization.

## References

1. Tipos de Violência [Internet]. Internet; 2018 Fev 05 [citado 8 Mar 2021]. Disponível em: <https://www.institutomariadapenha.org.br/lei-11340/tipos-de-violencia.html>.
2. Melo MT, Teles MAA. O que é violência contra a Mulher. Primeiros Passos. Editora Brasiliense. 2002. 3-10.
3. Rodrigues MR, Teixeira P. Especialistas traçam perfil de agressores de mulheres; identifique características abusivas em 5 pontos [internet]. G1. Rio de Janeiro, 2019. [acesso 2021 dez 5].

Disponível em: <https://g1.globo.com/rj/rio-de-janeiro/noticia/2019/04/19/especialistas-tracam-perfil-de-agressores-de-mulheres-identifique-caracteristicas-abusivas-em-5-pontos.ghtml>.

4. Ludke M, Andre M. Pesquisa em educação: abordagens qualitativas. São Paulo: Editora Pedagógica e Universitária; 1986.
5. Walker L. The battered woman. New York: Harper and How; 1979.
6. Vasconcelos MS, Holanda VR, Alburquerque TT. Perfil do agressor e fatores associados à violência contra mulheres. *Cogit. Enferm.* (Online). 2016; 21(1): 1-10. Doi: <http://dx.doi.org/10.5380/ce.v21i1.41960>
7. Leôncio, KL, Baldo PL, João VM, Biffi RG. O perfil das mulheres vitimizadas e seus agressores. *Rev. enferm. UERJ*. 2008; 16 (3): 302-12.
8. Tijeras J, Rodríguez, J. & Armenta, M. Teoría y descripción de la violencia Doméstica. Programa terapéutico para Maltratadores del ámbito familiar en el Centro penitenciario de Pamplona. *An Psicol Jurídica*. 2005; 15:67-95.
9. Sadock BS, Sadock VA, Ruiz PR. *Compêndio de Psiquiatria – Ciência do Comportamento e Psiquiatria Clínica*. 11ª ed. São Paulo: Artmed; 2017
10. Ministério da Saúde. Violência Faz Mal à Saúde. Secretaria de Atenção à Saúde. 1º edição. Brasília. 2006. 298. [acesso 2021 Mar 07]. Disponível em: [https://bvsms.saude.gov.br/bvs/publicacoes/violencia\\_faz\\_mal.pdf](https://bvsms.saude.gov.br/bvs/publicacoes/violencia_faz_mal.pdf)
11. Souza, FR. Estupro marital: conjunção carnal forçada [internet]. JUS.COM.BR. [acesso 2021 dez 02]. Disponível em: <https://jus.com.br/artigos/73778/estupro-marital-conjuncao-carnal-forcada>.
12. Da Silva JRT. Masculinidade e violência: formação da identidade masculina e compreensão da violência praticada pelo homem. In: 18 REDOR. 2015.
13. Barberá EL. Violência e poder na vida cotidiana do casal. In: VITALE, M. A. F. (Org). *Laços amorosos*. São Paulo: Agora; 2004.
- 14 Instituto Maria da Penha. Ciclo da Violência [internet]. [acesso 2021 dez 03]. Disponível em: <https://www.institutomariadapenha.org.br/violencia-domestica/ciclo-da-violencia.html> . Acesso em: 3 dez. 2021
- 15 Oliveira EM, Vianna LAC. Violência conjugal na gravidez. *Rev Estud Feministas*. 1993; 1(1): 162-2
- 16 Peixoto AF, Nobre BPR. A responsabilização da mulher vítima de estupro. *Rev Transgressões*, v. 3, n. 1, p. 227-239, 2015.
- 17 Souto, CMRM, Braga VAB. Vivências da vida conjugal: posicionamento das mulheres. *Rev. Bras. Enferm.* 2009; 61(5): 670-74. Doi: <https://doi.org/10.1590/S0034-71672009000500003>
- 18 Madureira AB, et al. Perfil de homens autores de violência contra mulheres detidos em flagrante: contribuições para o enfrentamento. *Esc. Anna Nery Rev. Enferm.* 2014; 18: 600-6.

- 19 Gomes NP, Dini NMF, Araújo AJS, coelho TMF (2007). Compreendendo a violência doméstica a partir das categorias de gênero e geração. *Acta Paulista de Enfermagem*, 20 (4), 504-538.
20. Pereira MD, De Araujo FJM, Peira, MD. Feminicídio, leis de proteção às mulheres e estratégias de enfrentamento: uma revisão da literatura. *SciELO Preprint*. Doi: <https://doi.org/10.1590/SciELOPreprints.490>
21. Fonseca MFS, et al. O feminicídio como uma manifestação das relações de poder entre os gêneros. *JURIS*. 2018; 28(1): 49-66.

**Correspondent Author**

Gabriele Soares da Silva  
Planalto University Center of the Federal District  
Pau Brasil Av. Lot 2. ZIP: 71916-000-Águas Claras.  
Brasília - Federal District, Brazil.  
[soaressilvagabriele@gmail.com](mailto:soaressilvagabriele@gmail.com)