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Review article

Violence against women during pregnancy: sistemized revision [☆]



Maria Misrelma Moura Bessa ^{a,b,*}, Jefferson Drezett ^{a,b}, Modesto Rolim ^c,
Luiz Carlos de Abreu ^a

^a Laboratório de Delineamento de Estudos e Escrita Científica, Faculdade de Medicina do ABC (FMABC), Santo André, SP, Brazil

^b Núcleo de Programas Especiais, Hospital Pérola Byington, São Paulo, SP, Brazil

^c Universidade Federal do Cariri (UFCA), Juazeiro do Norte, CE, Brazil

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ABSTRACT

Violence against women is widely recognized as a serious public health problem. The pregnancy is a risk factor for increasing the violence, especially when it is related to socio-economic conditions. The objective of this work is to ascertain the relation between violence against women during pregnancy in developed countries and in developing countries. It was performed a systematized review. It was proceeded a search of the literature through online databases MEDLINE and SciELO in December 2013, only with articles published between January 1, 2003 and November 30, 2013. The following descriptors were used for searching on the database “domestic violence” (Medical Subject Headings [MeSH]); “violence against women” (Health Sciences Descriptors [DeCS]); and “pregnancy” (Keyword). The Search strategies resulted in 71 studies. After analysis of the titles and abstracts of articles found for eligibility based on inclusion criteria, 43 articles were deleted and 28 articles were included in the final sample. The study revealed the predominance of researches developed about violence against women during pregnancy in developing countries, strengthening the strong socio-economic character related to victims and aggressors.

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Violência contra a mulher durante a gravidez: revisão sistematizada

RESUMO

A violência contra a mulher é amplamente reconhecida como grave problema de saúde pública a gestação se configura em um incremento ao risco de violência, especialmente quando relacionada a condições sócio- econômicas. O objetivo desse trabalho é verificar a relação entre a violência contra a mulher na gestação em países desenvolvidos e países em

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[☆] Research conducted at Faculdade de Medicina do ABC, Laboratório de Delineamento de Estudos e Escrita Científica, Santo André, SP, Brazil.

* Corresponding author.

E-mail: mel.lang@hotmail.com (M.M.M. Bessa).

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com desenvolvimento. Foi realizada uma revisão sistemática qualitativa. Procedeu-se busca na literatura através de bases de dados on line MEDLINE e SicELO em dezembro de 2013, limitando-se a artigos publicados entre 1 de janeiro de 2003 e 30 de novembro de 2013. Utilizaram-se os seguintes descritores para a busca na base “domestic violence” (descriptor Medical Subject Headings [MeSH]); “violence against women” (descriptor em Ciências da Saúde [DeCS]); e “gravidez” (palavra-chave). As estratégias de buscas resultaram em 71 estudos. Após análise dos títulos e dos resumos dos artigos encontrados para elegibilidade com base nos critérios de inclusão, 43 artigos foram excluídos e 28 artigos foram incluídos na amostra final. O estudo revelou a predominância de pesquisas desenvolvidas acerca da violência contra a mulher na gestação em países em desenvolvimento, fortalecendo o forte caráter sócio-econômico relacionado às vítimas e aos agressores.

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Introduction

Violence against women is widely recognized as a serious public health problem. In its various forms, it can be considered as every act of violence by reason of gender, able to generate physical, sexual, psychological damage and suffering, included, in this context, threat of such acts, coercion, and arbitrary deprivation of freedom, which may occur in instance of public or private life.¹

Such injury can be considered multifactorial, once that is associated with the cultural and historical issues, especially with regard to gender issues, by understanding that these denote power relations between the sexes. We can understand, therefore, that genre is a set of relationships, attributes, roles, beliefs and attitudes that define what means to be a man or a woman.² In that context, the violence against women exposes the vulnerability in domestic relations, perpetrating a financial or emotional dependency context, frequent and historically evidenced in the society.

The concept of domestic violence refers to all forms of violence committed in the family environment. However, it may also reflect the violence against women perpetrated by their intimate partner. In most cases, it is not recognized as violence, it is considered a cultural phenomenon, as a form of disciplinary action against wives and daughters.³ Studies conducted in developed and developing countries show that the prevalence of domestic violence against women varies from 10 to 70%.⁴

Multicenter study on domestic violence, coordinated by the World Health Organization (WHO), found that the prevalence of violence perpetrated by intimate partner at some point in life varies between 15% in Japan and 71% in Ethiopia, with prevalence of physical or sexual violence in the last year between 4% and 54%, respectively.⁵

Violence against women may occur at any stage of their lives, including pregnancy. The Pan-American Health Organization (PAHO) defines violence during pregnancy as violence or threat of physical, sexual or psychological (emotional) violence against pregnant women.⁶ In the literature review it was observed prevalence from 0.9% to 20.1%.⁷ Schraiber and D'Oliveira,⁸ highlight studies that consider pregnancy as an

increment to the risk of violence against women, being able to change the pattern as to the frequency and severity during this period, or even be initiated at this stage of a woman's life.

The implications of this event have an impact not only in the life of the woman, but also in the life of the fetus and the future child, among them bleeding and termination of pregnancy.⁹ With regard to the health of the child, it had been evidenced increased risk of perinatal death, born with low birth weight and prematurity.¹⁰

Some women's life situations have been described as domestic violence related factors: low socioeconomic status, low level of social support, being of African descent and young.¹¹ Highlighted the magnitude of the subject as a World damage, It is necessary to consider the Association of social determinants in the revelation incidence and prevalence indexes, the fact is ratified in the extension numbers when compared between developing countries and developed countries and the effects triggered by that phenomenon in the gravid-puerperal cycle.

The most sensitive look that showed the gender violence as a public health problem permeated the policies of confrontation in various sectors of attention to vulnerable groups, especially the woman in the health, social and security fields. It is noticed empirically that from 2003 the identification, notification, and combating mechanisms of this damage, has been intensified as a result of extensive discussions in the various policy areas. In Brazil, the creation in 2006 of the Maria da Penha law represented an important role in combating domestic violence against women; however, its effectiveness finds the social barriers that keep women as hostages of intimate partners, following the example of other developing countries.

Based on these data, it is from 2003 that the data relates the violence against women specifically in gestational period were more clearly delineated and exposed on research, seeking to identify related factors, the indexes of incidence and prevalence as well as the confronting ways of that problem. Thus, the objective is to verify the relation between violence against women during pregnancy in developed countries and developing countries.

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