PROTECTION OF WOMEN IN SITUATIONS OF VIOLENCE IN THE CONTEXT OF THE COVID-19 PANDEMIC

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ABSTRACT

Objective: To discuss the challenges of ensuring protection for women in situations of violence in the context of the COVID-19 pandemic. **Method:** Theoretical and reflective paper. Based on the theoretical framework of the critical path of women in situations of violence and on the social markers of difference, associated with the Sustainable Development Goals, connections were established with the context of social distancing caused by the pandemic. **Development:** the context of the pandemic entailed a prolonged contact with partners, allowing violence against women to intensify. In addition, the restriction of socializing and social support due to social distancing, combined with the barriers of access and reception in the services, has negatively affected women's critical path. The social markers of difference should support action planning in an intersectoral network, based on the Sustainable Development Goals. **Final Considerations:** the pandemic contributed to the permanence of women in the situation of violence, which indicates the need for protection. It is essential to strengthen public policies for protection based on an intersectoral network, as well as the activation of a care network in the pandemic and post-pandemic contexts.

Keywords: Violence against women. Intimate partner violence. Women's health. Pandemics. Nursing.

INTRODUCTION

This theoretical and reflective paper aims to discuss the challenges for protecting women in situations of violence, in the context of the pandemic triggered by the transmission of the new coronavirus, discovered in China/Asia and agent of the Coronavirus Disease 2019 (COVID-19), which causes Severe Acute Respiratory Syndrome⁽¹⁾. The present reflection considered the social markers of difference⁽²⁾, which leads to the intensification of situations of violence. In addition, this paper indicated the need to recognize the factors related to the critical path to confront violence against women (VAW)⁽³⁾ and, finally, connections were established between these topics and the Sustainable

Development Goals (SDG)⁽⁴⁾.

The SDGs are part of a global agenda called the 2030 Agenda. The Agenda is intended to be a guide for humanity to face challenges of environmental sustainability, governance and peace, including guidelines on VAW, as it is a daily phenomenon in the lives of many women and represents a form of violation of human rights ⁽⁴⁾.

Violence against women is defined as any action or omission based on gender that causes death, injuries or physical, sexual, psychological, moral or patrimonial suffering. According to the World Health Organization (WHO), 30% of women worldwide have already experienced situations of physical and/or sexual domestic violence, which confirms the pandemic

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dimension of the phenomenon. The violence is perpetrated specially by their intimate partners, who are also responsible for 38% of feminicides⁽⁵⁾.

The phenomenon has reached great media visibility in recent years, especially in the first half of 2020, due to the current COVID-19 pandemic⁽⁶⁾. As the disease is highly contagious among people, social distancing has been recommended by the WHO as a strategy to reduce the virus' transmission speed, in order to allow the health care network to be organized and its response capacity to be extended⁽¹⁾.

However, the permanence of people inside the household for a long time has been considered an intensifier of VCM worldwide. Countries such as Argentina, Canada, France, Germany, the United Kingdom and the Unites States reported an exponential increase of VAW during the pandemic, as well as of the demand for emergency shelters and support networks. In the United Kingdom, Australia and France, violence complaints increased by 65%⁽⁷⁾. India recorded twice as many complaints in the first week of confinement⁽⁸⁾, and some Latin American countries such as Bolivia, Colombia, Argentina and Brazil reported an intensification in domestic violence during the pandemic⁽⁹⁾.

In Brazil, the domestic violence helpline received 9,842 calls in April 2020. When compared to the same period, there were 7,243 calls in 2019, which shows an increase of 35.9%⁽⁶⁾. Additionally, data collected by the Gender Center and the Criminal Operational Support Center of the São Paulo Public Prosecutor's Office showed an increase of about 30% in domestic violence in March 2020 in the state⁽¹⁰⁾.

In general, there was a decrease in the number of police reports in the country during the pandemic. This shows that, despite the fact that women are in a situation of increased vulnerability, they experience difficulties in formalizing complaints against the aggressors⁽¹¹⁾, which contributes to their permanence in the situation of violence. Although these records may have decreased, the feminicide numbers grew, indicating a rise in domestic and family violence. Between March and April 2020, there was a 22.2% growth in feminicides in 12 states. The state with the most critical situation is Acre.

where the increase was 300%, followed by Maranhão with 166.7%, and Mato Grosso with $150\%^{(11)}$.

The pandemic has arrived in Brazil in a context of political, economic and health crisis. The political and economic aspects are due to the advancement of the far right, with decisions towards a minimal state and considerable negative consequences in the field of public policies. Among them, there is the worsening lack of investment in the Unified Health System (SUS), as well as the dismantling of public policies for women, especially those for preventing and confronting violence, since the extinction of the Secretariat for Women's Policies in 2016. In addition, erroneous postures from the government add to the context. The government irresponsibly denies the gravity of with serious COVID-19 pandemic, repercussions on the health and safety of the population.

This context strongly affects women, who, in addition to being the majority of the Brazilian population, have lower incomes, live mostly in conditions of poverty, especially black women, and occupy most of the informal jobs⁽¹²⁾. Thus, it is necessary to reflect on the effects of this pandemic on the lives of different groups of women, which deepen existing inequalities and have devastating social and economic consequences for their lives and that of their families⁽⁹⁾.

Therefore, it is relevant to consider that women who experience situations of domestic violence accumulate factors of oppression and social stratification. Such factors may be because of their gender, social class, race and stigmatization processes due to the intersection of different social markers of difference⁽²⁾ attributed to them, which act as barriers in the search for help⁽³⁾. In view of the above, this study aims to discuss the challenges of ensuring protection for women in situations of violence in the context of the COVID-19 pandemic.

METHOD

A theoretical and reflective analysis was developed based on the theoretical framework of the critical path of women in situations of violence⁽³⁾. Intersections of the various social

markers of difference⁽²⁾ were considered, as the same event produces distinct experiences from different social and cultural contexts. Finally, these aspects were related to the SDGs⁽⁴⁾ and linked to the context of social distancing caused by the COVID-19 pandemic.

Development Social distancing and violence against women aggravated in the household

The household, an environment in which women were supposed to feel safe, is the main locus for experiencing gender-based violence. In that space, abuse and violence are perpetrated indiscriminately, and often remain invisible for occurring in the private sphere⁽¹³⁻¹⁵⁾.

In the context of social distancing, it is possible to infer that those situations intensify. Due to constant contact with partners and family members at home, the possibility of discussions, fights and violent acts increases, considering the period of emotional and economic instability of the pandemic. In addition, as women remain confined and isolated in the same environment as their aggressors, they have less chances of distancing themselves from the household or seeking help to confront the situation of violence⁽⁹⁾.

Possibly, the marks of a culture that privileges the productive work of men over the reproductive work of women are more visible in times of COVID-19. The sexual division of labor has the power to prioritize duties, spaces and desires – to men, the public sphere, with everything it adds in terms of personal and economic power; to women, the private sphere, whose activities towards caregiving and maintaining life hold the symbolism of inferiority and subordination⁽¹⁶⁾.

The reproduction and maintenance of this reality are aligned with the construction of gender, which takes place through the circulation of symbols, patterns and social practices that delimit different places and possibilities of being, thinking and doing for each subject, influencing the formation of life plans. Consequently, the expectations of women regarding their life trajectory are strongly marked by domesticity, whereas the path of men permeated by attitudes of courage, development of physical strength and public

exposure, based on the encouragement for competition to win and conquer⁽¹⁶⁾.

Therefore, it can be concluded that sharing the domestic space and activities represents, for men, the loss of authority and masculinity inscribed in their way of conceiving domestic work, insofar as it is invisible and unpaid, therefore socially undervalued. In addition to confinement and loss of freedom, men find themselves, in the pandemic, involved in a context of chores that they were not taught to dominate or admire, but with which they are suddenly requested to become involved and, perhaps, to contribute equally with their partner.

In the pandemic context, in which there is an economic and financial crisis, unemployment has caused instability and economic difficulties, which can represent a threat to the person responsible for the provision of the family, and tends to be interpreted by men as loss of power⁽¹⁷⁾. The possibility of loss of male power can hurt the image of the provider, triggering violent behaviors^(9,17). Thus, the social, emotional and economic tensions caused by the pandemic increase the risk of intimate partner violence, especially when combined with social isolation⁽¹⁸⁾.

From our perspective, this complex situation can be considered as a generator of tension and conflicts in relationships, making the household a space susceptible to VAW. Many women in those circumstances may be under constant control by their aggressor, which makes it difficult or even prevents them from taking any action in their favor during the pandemic, creating barriers to the critical path of women in seeking help.

Social distancing and the implications for the critical path of women in situations of violence

In times of social distancing, when there are restrictions on social interaction, women can remain isolated at home. Thus, the options of support from family, neighbors and friends may be restricted, intensifying the violence experienced by women and its consequences⁽¹⁸⁻¹⁹⁾. These factors are a cause for concern, as it is known that the support from close people is essential for encouraging women in situations of violence to confront it and seek help⁽²⁰⁻²¹⁾,

starting what is considered the critical path.

Defined by Sagot⁽³⁾, the critical path begins when women decide to break the situation of violence. It is understood as a set of actions taken by women who decide to make their situation public and seek support on social networks and on the services available to confront violence. The path is not linear and is related to factors ranging from the perception of women and the community about violence to the social and institutional responses to the problem⁽³⁾. These factors are closely related to each other and can either promote, hamper or delay the start of the critical path by women⁽²²⁾.

Regarding institutional responses, the health sector could be the gateway to receive such demand; however, the pandemic becomes a barrier for this to occur, as the health services are responding to the demands of COVID-19. In addition, women's search for health services may be reduced due to fear of contaminating themselves or family members. These factors become barriers for the access to health care services, preventing women from taking the critical path.

Therefore, women in situations of violence are directly affected by the additional barriers of access and reception in the services and in actions of civil society organizations, since all efforts are being directed to combat the pandemic⁽⁹⁾. These response barriers influence the critical path of women to confront violence, generating also a negative impact on the driving factors for seeking help, such as women's actions towards violence and the support of close The context of restricted social people. interaction and the intensified contact with the aggressor may be factors that prevent women from breaking the silence and revealing the situation of violence to other people, or from seeking support in formal services of security, health care, social assistance or education.

Moreover, the decisions made and actions taken by women to confront violence may be compromised by the reduced availability of services, which directly affects the results obtained and the search for help, causing difficulties for women to request assistance in different institutions. In addition, the work overload on institutions during the pandemic has caused restrictions in the functioning of health

services and other support, protection and counseling services, such as telephone helplines, shelters and legal-police assistance. This also reduces the possibilities of support for women exposed to violence⁽¹⁹⁾, which makes them remain in the violent relationship.

Such situations during the pandemic are barriers for women to have access to public policies, which negatively affects the critical path of confronting violence. We consider that, although the institutions are part of a service network, the services are disconnected, which leads to discontinuity in assistance⁽²²⁾. This indicates the need for expanding teams for preventing and responding to violence; widely disseminating information on available services; preparing health care workers to identify risk situations and, in those cases, to discuss with women about how to strengthen and expand their support networks; and informing about the operation of shelters and new vacancies. In addition, social support networks (virtual and informal) must be stimulated, as they help women feeling connected and encouraged⁽¹⁷⁾.

It is recommended to consider services from the network of assistance and confrontation of VAW as essential services to assist the vulnerable population. In addition, it is necessary to guarantee the priority of response to this problem by police and legal services⁽⁹⁾. Regarding the Brazilian context, it is important to mention the independent initiatives to confront VAW that are being developed. As an example, we cite the telephone helpline initiative for supporting and listening to women in situations of violence, from the Federal University of Santa Maria (UFSM). The initiative has been disseminated through social media, radio, the local media and the UFSM website, and it is one of the contributions of public universities to social transformations and social impact extension actions, in line with the SDGs.

Establishing connections between the SDGs, VAW prevention and the pandemic context

In the present paper, considering the critical path to confront violence, the social markers of difference and the SDGs, we understand that, for the prevention of VAW, it is necessary to ensure an inclusive and equitable quality education, addressed in SDG 4 (quality education). The goal is to promote lifelong learning opportunities for both women and men, considering the possibility of eliminating gender disparities in education and ensuring equal access to all levels of education and vocational training.

The inclusive education topic meets SDG 5 (gender equality), with regard to the empowerment of all women and girls through equal opportunities. Such SDGs are included in the context presented in this paper, and they are connected to SDG 8 (economic growth and decent work), which is another component that affects different social markers. This goal represents a great challenge during pandemic: to promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all. This issue is associated with social markers such as gender, race, ethnicity, social class, economic condition, among others addressed in SDG 10 (reducing inequality within and countries), such as social, economic and political inclusion.

It is important to consider that social markers⁽²⁾ materialize classification and oppression systems that generate different social positions, experiences and relationships. The markers are, in society, a foundation for acts of discrimination, stigmatization and stratification and build social identities, accentuating inequalities⁽²³⁾.

When we apply the implications of this context to the critical path of women in situations of violence, we establish connections with SDG 16 (peace, justice and strong institutions). With regard to this topic, it is fundamental to provide access to justice for all and build effective, accountable and inclusive institutions at all levels. In addition, it is essential to significantly reduce all forms of violence and related death rates, with a view to protecting women in situations of violence, which have been aggravated in the current pandemic context.

Therefore, the recognition of social markers of difference should support action planning in an intersectoral network, considering that this is a period of deepening social, ethnic-racial and gender inequalities. These circumstances show

the potential for the development of researches that emphasize interventions in social policies, as well as new studies.

FINAL CONSIDERATIONS

The context of intensification and aggravation of VAW, which emerges during the COVID-19 pandemic, indicates the need for protection of women, since, in crisis situations, whether economic, political, sanitary, ethical or social, women are the most affected and their rights are the most threatened. Thus, for the protection of women, the challenge is that society urgently recognizes the patriarchal basis of domestic violence and the triggers that contribute to its reproduction and trivialization in daily life.

We understand that the communication area is involved with the first steps of the critical path in order to instigate women's perception of violence, so that they can break the silence and seek help. The topic has been gaining prominence recently through online broadcasts (lives), reports in the mainstream media, remote service dissemination (online, by phone, on applications and text messages), media resources such as radios and social media, among others. In addition, dissemination campaigns have been created to facilitate women's access to police reports through drugstores and other essential services.

We also infer that it is necessary to break with isolated and superficial analyses of the phenomenon of violence, since the issue requires collective interdisciplinary actions. and Therefore, it is necessary to recognize that women's life contexts, intersected with social markers, generate different experiences to the same event, which indicates the need for public protection policies based on an articulated intersectoral network. In this respect, the feminist perspective applied to the nursing practice can direct a more attentive and careful look, refining the understanding of what affects the lives of women as users of health services in their various social roles.

With regard to the implications of this reflection for the area of Nursing and Health, we mention the potential of Primary Health Care, which can use different on-site strategies to

confront domestic violence, such as community media, radio, online pages and the Community Health Agents themselves. Furthermore, in this context, it is necessary to activate a health care network for women in situations of violence.

DESAFIOS NA PROTEÇÃO ÀS MULHERES EM SITUAÇÃO DE VIOLÊNCIA NO CONTEXTO DE PANDEMIA DA COVID-19

RESUMO

Objetivo: Discutir os desafios da garantia de proteção às mulheres em situação de violência no contexto de pandemia da COVID-19. **Método:** Ensaio teórico-reflexivo. A partir do arcabouço teórico da rota crítica das mulheres em situação de violência e dos marcadores sociais de diferença, entrelaçados com os Objetivos de Desenvolvimento Sustentável, foram tecidos nexos com o contexto do distanciamento social desencadeado pela pandemia. **Desenvolvimento:** o contexto da pandemia implicou no convívio prolongado com parceiros, possibilitando que a violência contra as mulheres se intensificasse. Além disso, a restrição do convívio e do apoio social pelo distanciamento, aliado às barreiras de acesso e acolhimento nos serviços, influenciou negativamente na rota crítica das mulheres. Os marcadores sociais de diferenças devem subsidiar o planejamento das ações em rede intersetorial, com base nos Objetivos de Desenvolvimento Sustentável. **Considerações Finais:** a pandemia contribuiu para a permanência da mulher na situação de violência, o que indica a necessidade de proteção. É imprescindível o fortalecimento de políticas públicas de proteção pautadas em rede intersetorial, bem como a ativação de uma rede de cuidado no contexto de pandemia e pós-pandemia.

Palavras-chave: Violência contra a mulher. Violência por parceiro íntimo. Saúde da mulher. Pandemias. Enfermagem.

DESAFÍOS EN LA PROTECCIÓN A LAS MUJERES EN SITUACIÓN DE VIOLENCIA EN EL CONTEXTO DE LA PANDEMIA DE COVID-19 RESUMEN

Objetivo: Discutir los desafíos de la garantía de protección a las mujeres en situación de violencia en el contexto de la pandemia de Covid-19. **Método:** ensayo teórico-reflexivo. A partir de la estructura teórica da ruta crítica de las mujeres en situación de violencia y de los marcadores sociales de diferencia, entrelazados con los Objetivos de Desarrollo Sostenible, fueron formulados nexos con el contexto del distanciamiento social desencadenado por la pandemia. **Desarrollo:** el contexto de la pandemia implicó en la convivencia prolongada con el compañero, posibilitando que la violencia contra las mujeres se intensificara. Además, la restricción de la convivencia y del apoyo social por el distanciamiento, asociado a las barreras de acceso y la acogida en los servicios, influyó negativamente en la ruta crítica de las mujeres. Los marcadores sociales de diferencias deben fomentar la planificación de las acciones en red intersectorial, con base en los Objetivos de Desarrollo Sostenible. **Consideraciones Finales:** la pandemia contribuyó para la permanencia de la mujer en la situación de violencia, indicando la necesidad de protección mediante muchos desafíos. Es imprescindible el fortalecimiento de políticas públicas de protección basadas en red intersectorial, así como la activación de una red singular de cuidado en el contexto de la pandemia y post pandemia.

Palabras clave: Violencia contra la mujer. Violencia por compañero íntimo. Salud de la mujer. Pandemias. Enfermería.

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Submitted: 12/07/2020 **Accepted:** 18/08/2020