



MALE CONDUCT FOR MARITAL RAPE REVEALED BY WOMEN

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ABSTRACT

Objective: To unveil the conduct used by spouses for marital rape from the women's report. **Method:** This is a qualitative research, conducted with 16 women assisted by the Operation *Ronda Maria da Penha*, in Salvador, Bahia, Brazil. For data collection, the individual interview was used, guided by a semi-structured form. **Results:** From the speeches, the following categories emerged: Immobilization; Terrorization; Demand from marital obligation. The study revealed that these strategies were present in the daily life of marital rape experienced by the interviewees. This research slowed the understanding of the forced sexual act as an element related to the imposition of male physical force, by emotional and/or psychological appeal, and for being married. **Conclusion:** Therefore, it is urgent to offer subsidies for the preparation of health professionals, especially nurses, in order to provide elements for better identification of these women, beyond creating spaces for women and men to reflect if they fully live their sexuality.

Keywords: Sexual Violence. Rape. Violence Against Women. Intimate Partner Violence. Nursing.

INTRODUCTION

The Maria da Penha Law (n. 11.340/2006) creates mechanisms to curb domestic and family violence against women, a phenomenon that constitutes itself as a violation of human rights expressed in psychological, moral, physical, patrimonial and sexual forms⁽¹⁾, reality experienced by women around the world.

National and international studies point to the lower occurrence of sexual violence in conjugality. Research in Ethiopia with 4,714 women revealed as the most prevalent violence emotional violence (57.8%), followed by physical (32.2%) and finally sexual (7.6%)⁽²⁾. Similarly, a study of 409 women who experienced intimate partner abuse in northern Uganda portrayed emotional violence in 64.8%, physical violence in 61.1% and sexual violence in 28.1%, which was also in a smaller proportion⁽³⁾. In Brazil, an opinion survey of

3,000 women about the types of violence suffered by known women revealed that sexual violence represented 22%, behind physical (79%), psychological (58%), moral (48%) and patrimonial (25%)⁽⁴⁾.

However, although the physical and psychological violence, where threats are inserted, occupies the first rankings of records, these do not necessarily correspond to the most frequent forms of violence. This can be explained by the fact that, in the social imaginary, these expressions represent a greater risk to the woman's life, usually configuring themselves as an event apex to the denunciation.

Sexual violence in conjugality includes several behaviors, some not commonly associated with criminal action, such as reproductive control, and others such as marital rape, which includes unwanted caresses and forced oral sex. The veiled character may be linked to the woman's fear of sharing issues of

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the intimate forum and also of submitting to another violence, since reports of sexual violence alone are not an indispensable condition for this crime to be proven, being the woman subjected to interrogation, often understood as embarrassing and culpable⁽⁵⁻⁶⁾. Thus, for fear of being discredited, when experiencing sexual violence, in the privacy of the couple, the woman decides to silence themselves, contributing to the masking of the problem.

There is also the difficulty of perceiving the criminal character of marital rape, which is anchored in the social view of the woman's body as an object of possession of the spouse. Even with the advances regarding the discussion about the situations of sexual violence perpetrated by the intimate partner, the paradigm of impulsive male sexuality still prevails, which supports the culture that women always want sex, even if they deny it⁽⁷⁾; and the female duty to fulfill the marital contract, which runs through the carnal conjunction. Although repealed since the 1980 update, many men still believe they have such a sexual right over their wives, demanding them to obtain sex even against their will⁽⁸⁾.

Considering the actions directed to the prevention and coping of marital rape, this study adopts the following research question: What are the conducts used by the spouse for marital rape from the report of women? And it proposes to unveil the conduct used by spouses for marital rape from the report of women.

METHOD

This is a qualitative research linked to the project entitled "Coping with Conjugal Violence in the UHS: Social Technology Involving Women, Men and Primary Care Professionals", under the funding of the Bahia State Research Support Foundation (FAPESB), in cooperation with the Research Program for UHS: Shared Health Management (PPSUS). This research was approved by the Human Research Ethics Committee, under opinion n. 2.639.244.

The study was conducted from October to December 2019, under the Operation *Ronda Maria da Penha* (ORMP) of the Military Police of the State of Bahia, located in Salvador, Bahia, Brazil. This service aims to ensure the protection

of women who, at risk of death due to domestic and/or family violence, had the Emergency Protective Measure issued in their favor. The selection of participants complied with the following inclusion criteria: women with a history of conjugal violence assisted by the ORMP.

The women were appointed by the social workers who make up the psychosocial service of the ORMP. The strategy for identification and approximation with the possible participants came from the creation of the Reflective Group with Women (GRM), an educational action proposed by members of the Laboratory of Violence, Health and Life (Vid@). This has been working for more than fifteen years developing research and extension focused on issues of violence against women.

The five meetings took place weekly in the auditorium of the Special Police Station for Women's Care (DEAM), space provided by the members of the psychosocial service of the ORMP. The GRM had the active participation of 16 women, where the following themes were addressed: embracement and introduction to the GRM; threshold between love and violence; types of violence; reasons for permanence in the relationship; strategies to break the abusive relationship; encouraging self-care; self-knowledge of the body, sexual practices and pleasure in relationships. Listed from the immersion of researchers in this service, which enabled the identification of women's demands in informal exchanges and dialogue established with professionals. It is noteworthy that the thematic discussions emerged from what women shared in their reports, which is a motivating fact for them to feel interested in the GRM.

In the last meeting of approach, the objectives of the research were presented, and the women were informed about the ethical aspects, being then invited to collaborate with the study. The 16 women agreed, signing the Informed Consent Form (ICF), following the prior definition of the exclusion criteria: psychoemotional state contraindicated by the psychologist of the psychosocial service and absence in the interview after three attempts to contact.

The individual interviews lasted an average of 45 minutes, occurred at previously scheduled

times and in a private and safe space, provided by ORMP professionals within the scope of the operation itself. For data collection, a semi-structured form was used, containing closed questions about sociodemographic data and open with the following guiding question: What did your spouse do in the sexual act that displeased/bothered you?

The speeches were recorded and stored in the digital voice recorder and Smartphones, later transcribed in full in the text editor Microsoft Office Word 2010 to facilitate the organization of information. In order to ensure the anonymity of the participants, these were identified by the letter W followed by sequenced numbers (W1, W2, W3...) in allusion to "Woman", linked to an Arabic numeral corresponding to the order of each interview.

The information was then processed according to the content analysis defined by Bardin ⁽⁹⁾, with the following steps: pre-analysis, phase in which the "floating" reading was established, first contact with the raw material; the second step, which consisted in the exploitation of the material, when the coding units were delineated and grouped, which, from the exploitation of the raw material and organization of the units by frequency and intensity, allowed the categories to emerge; and the third step, which refers to the process of analysis and interpretation of the content, being the results submitted to the inference and interpretation of the authors, from the perspective of Philosopher Ângela Davis⁽¹⁰⁾, to make them significant and valid.

RESULTS

The study included 16 women, aged between 24 and 51 years, who lived in neighborhoods on the outskirts of the city of Salvador, Bahia, Brazil. As for schooling, 13 have completed high school, and, of these, three have higher education. They had, on average, two children with their spouse, all self-declared black (nine brown and seven black) and reported believing in God, and 14 had specific religion (evangelical, catholic, spiritist).

From the reports, the study reveals that, in the context of conjugality, women experience a daily life of marital rape, permeated by physical

and psychological coercion. On the basis of women's orality, the conduct used by the spouses for the consummation of this abuse has been organized into the following categories:

Immobilization

The narratives indicate that many women experienced a daily violence through immobilization. This form of physical coercion causes trauma, either because of the mechanical restraint itself or as a result of confrontation in an attempt to prevent such a restriction, as the statements indicate:

He grabbed me by force and I couldn't get out because he was holding me tight. In the fight, I ended up hurt. [...] once, after we separated, he got into my house, hid and, at dawn, came upon me (W11).

[...]he wanted to have sex and sometimes I would lock my legs and he would really force me, put his leg between mine, which left me with bruises. One of the times when he grabbed me, he hurt me, I felt a lot of discomfort (W6).

He used to tie me up, hold my mouth and rape me. [...] he forced me to have sex with him all night and I couldn't shed a tear (W9).

Terrorization

In the field of psychological coercion, terrorization, through verbal threats and the use of white and/or fire weapons, was revealed as a conduct used by men for marital rape. This behavior can be illustrated by the following lines:

When I didn't give in, he would turn off the lights so the house would be dark and I wouldn't see him. [...] I would panic and end up giving in to avoid a worse situation (W7).

When I didn't feel like having sex, he would start to raise his voice and take the knife to me [...] so I gave in to avoid problems (W8).

He said he wasn't going to take me by force, but he threatened to kill me to have sex and put a gun to my head and I had to have sex all night with him [...] he even ripped open the bedroom door to avoid me from hiding (W10).

Demand for the practice of sexual act

From the reports, the male behavior of

demanding the sexual act of the partner was unveiled, regardless of desire and consent. Expressed also as psychological coercion, this category shows that female tolerance occurs due to a mismatch between the identification of what will be sexual violence and the belief that they must satisfy their spouse sexually.

He said that, while I was inside the house, I had to have sexual intercourse, even if I didn't want to, because I was his wife (W14).

[...] he demanded sex from me and when I didn't accept he said I had lovers, called me a slut, but in reality he was the one who had many women on the street (W16).

He used emotional blackmail for me to give in and have sex with him. He said he was going to look for other women on the street. [...] he also said that I was having sex and pleasure with another man so that I could have sex with him (W7).

DISCUSSION

The study reveals that the women interviewed, all black, experienced a daily of marital rape, being physical force one of the means used by the spouses for this purpose. The reports reveal violent behavior of the spouses to restrain women, restricting the possibilities of escape. A similar situation was found in a study developed by the National Gender Violence Survey in Lisbon, based on 396 cases of sexual violence in conjugality, which showed overlapping of physical strength during incapacitating women to defend themselves against marital rape⁽¹¹⁾. The behaviors used by the aggressor for forced sex are related to the use of threats or body strength⁽¹²⁾.

The narratives point to other refinements of barbarity to the woman, for example, the spouse seals her mouth or ties her up. Research with 11 women in Iran reveals that the spouse puts the woman in prison so that she does not dodge sexual intercourse and uses a pillow to muffle her screams⁽¹³⁾. Concerned about these situations, the Good Practices Guide for health professionals in Lisbon warns that sexual relations where "cruel" means are used, such as arresting and tying, may indicate that women perform them against their will⁽¹⁴⁾.

The restraint of the woman tends to hurt not only the body, but especially the soul. Thus, it is also relevant to look at the wounds that shake the emotional, expressed in the discontent and suffering of women, unable even to cry. Although the study does not allow stating the reason for not letting the cry flow, some conjectures can be made: 1) since crying is a primitive form of communication, understood as a request for help, the man silences the woman to prevent others from hearing her, sensitizing and wanting to help her, thus interrupting the abuse; 2) crying can be associated with embarrassment, both for those who cry and for those who watch, so that the attitude of the spouse can happen in the sense of avoiding that, when seeing the cry, feels touched and give up the continuity of the action⁽¹⁵⁾.

In addition to the condition of feminine subservience, naturalized and socioculturally sustained and that puts the woman in this subposition to accept the attitudes of the spouse, even if vexatious and sick, talking about the muffled cry for black women has even more intense meanings. Although this dilemma is experienced by women, regardless of social class, race, generation, region, it focuses differently on the black population, by the intersection with other social markers. This population has greater vulnerability, since, besides being a woman, it was historically deprived of rights and today is still a victim of social, economic and cultural inequalities, which are important producers of violence against women⁽¹⁶⁾.

The scenario evidenced from the discourses of women, protagonists of the scenes of marital rape, reinforces perverse actions that violate the dignity of a specific public, which converges with the intersection involving overlapping vulnerabilities associated with social markers of gender, race and class, since the 16 women self-declared black and living in the peripheries. We are talking about a society where racism is normalized, and subjugated subjects are included in second, including conjugal relations, where many live the culture of non-love, non-place and non-choice⁽¹⁷⁾.

The study also points out another means used by spouses to ensure sexual intercourse: terrorization. This form of feminine fear,

expressed in the study by raising the tone of voice, darkness of the environment, destruction of the bedroom door and death threats, intimidates women to the granting of the sexual act. With this, the spouse creates a climate of dread, generating insecurity in the woman and leaving her destabilized, favorable scenario for sexual abuse, corroborating the national and international literature^(7,13,18).

Terrorization, present in cases of marital rape, also occurs in situations of rape perpetrated by strangers, as reported in a study with 740 women in which most suffered rape of third parties, under verbal threats, use of white and/or fire weapons⁽¹⁹⁾. This shows that this refinement of cruelty is not softened by being abused with someone with whom one has an affective bond.

Bringing to light a deeper understanding of the power of man over woman, Bordieu^(20:17) explains that sexual intercourse itself, whether abusive or not, runs through the “principle of fundamental division between the active male and the passive female”. Thus, he believes that, in the field of social perception about sexual relations, there is an erotic desire of man, who holds the possession; and of woman, who desires subordination. This element calls our attention to the possibility of not perceiving the problem.

In this context, unlike immobilization and terror, which are revealed as means clearly used in a purposeful and perverse way to achieve the sexual act, the demand of marital obligation, also portrayed in our study, not necessarily presents the intentional character, and may be associated with the sociocultural dimension that permeates the conjugal debt. This conception is related to the patriarchal culture that naturalizes the idea that the woman has marital obligations of a sexual nature towards her husband, and should always be at his disposal, regardless of her will⁽²¹⁾. By virtue of this belief, socially shared and legitimized, men, as well as women, believe that it is a female duty to satisfy their spouses sexually, setting up an event naturalized by both.

Immersed in this reality, the study also suggests that women submit to sexual abuse believing that they will avoid the infidelity of their partner. Despite studies that corroborate about the interface between deprivation of sexual intercourse by women and male infidelity, it is important to point out that, even

with active sexual life with their partners, many men live extramarital relationships, encouraged by other reasons, as the search for something new, freedom and adventure⁽²²⁾. We cannot disregard that, in the field of masculinity, infidelity has been linked to the male behavior, who is encouraged from an early age to be virile and to exacerbate his sexuality. This view empowers men to exercise their virility inconsequentially and cruelly against women⁽²³⁾.

The statements also show that the female refusal, faced with advances of the spouse for marital rape, is understood by him as a sign of infidelity. Although there is not always reciprocity in sexual desire, this is not accepted by men, and in order to break with mistrust and stop verbal aggression, the woman gives in to the sexual act. Research conducted in the United States of America (USA) with 159 couples in situations of marital violence also pointed to jealousy on the part of spouses as a significant predictor for increased sexual coercion⁽²¹⁾. A national study developed with 12 women warns that, although the denial of having sexual relations with the partner is a counter power, such act further vulnerabilizes rape episodes⁽²⁴⁾.

Therefore, the findings explain that, regardless of intentionality, the sexist and disrespectful conduct of the spouses reveal male practice of domination, posture no longer expected in contemporaneity, but still very present. Given this context, and considering the obstacles to the revelation of sexual daily life, judged as intimate, strategies are needed to break taboos and bring to the scene the intimacy of the couple. There should be spaces for women, with a special look at black women, to recognize that living sexuality can be together, or alone, provided there is satisfaction, which corroborates a research conducted with nine couples that states that men and women satisfied with their marital relationships are also with their sexual relationships⁽²⁵⁾.

Another research with 60 women, which aimed to know the social representations about sexual relations, warns that, despite so many advances, there are still wives who perceive sexual intercourse as an obligation of marriage and that the act occurs for the satisfaction of man, not worrying about their own pleasure. However, it shows signs that, although slowly,

this reality is changing, since female pleasure has been punctuated as essential, which has been sought through love, affection, intimacy, companionship and pleasure⁽²⁶⁾.

To face this problem, the occurrence of marital rape needs to be a guideline in the care of women, and health professionals end up being responsible for sensitive listening, attentive to understand the lines of discourses of women, the silences, since everything can be a signal that the conjugal daily life is full of conflicts. In this context, the professionals who work in the FHS, especially the nurse, by the appropriation in the conduction of health education actions to improve the quality of life of the community⁽²⁷⁾, can develop group strategies that address elements of sex education focused on female empowerment to fully live their sexuality, which inserts the priority concern with their own pleasure.

Research in the United States of America, which used a sex education resource through media with young schoolchildren, showed positive results regarding greater self-efficacy and intentions to use contraceptives, positive attitudes and intentions to communicate about sexual health; decreased acceptance of affair violence and strict gender roles; and increased knowledge about sexual health⁽²⁸⁾. Along the same lines, studies conducted in South Korea, Nigeria, Spain and Asturias also indicate the

importance of implementing programs to prevent sexual violence⁽²⁸⁻²⁹⁾.

FINAL THOUGHTS

The study showed that marital rape, carried out by the spouse, is not restricted to the use of physical force, emerging also through psychological pressure, when the man, to ensure the maintenance of sex without consent, creates an environment of terror or demands sex.

It offers subsidies for the elaboration of strategic action plans involving health and nursing professionals, aiming to direct their praxis, regarding the investigation of sexual violence, including conjugality. In this sense, the study may favor that women can look at their relationships and see if they are permeated by acts of violence and marital rape.

Preventive actions can privilege spaces for women and men, or even couples, to reflect on the importance of the couple's sexuality and expected conditions for marital relationships anchored in respect and mutual care. Given this context, there is an urgent need to encourage education to prevent violence by encouraging the active posture of women in the field of sexuality, in order to promote female empowerment.

CONDUTAS MASCULINAS PARA O ESTUPRO MARITAL REVELADAS POR MULHERES

RESUMO

Objetivo: desvelar as condutas utilizadas pelos cônjuges para o estupro marital a partir do relato das mulheres. **Método:** Trata-se de uma pesquisa qualitativa, realizada com 16 mulheres atendidas pela Operação Ronda Maria da Penha, em Salvador, Bahia, Brasil. Para a coleta de dados, utilizou-se a entrevista individual, guiada por um formulário semiestruturado. **Resultados:** A partir das falas, emergiram as seguintes categorias: Imobilização; Aterrorização; Cobrança pela obrigação marital. O estudo revelou que essas estratégias estiveram presentes no cotidiano de estupro marital vivenciado pelas entrevistadas. A partir da presente pesquisa, é possível compreender o ato sexual forçado enquanto elemento relacionado à imposição da força física masculina, pelo apelo emocional e/ou psicológico, quanto por estarem casadas. **Conclusão:** Portanto, urge que sejam oferecidos subsídios para o preparo dos profissionais de saúde, em especial das enfermeiras, com o intuito de fornecer elementos para melhor identificação dessas mulheres, além da criação de espaços para que mulheres e homens possam refletir se vivem plenamente sua sexualidade.

Palavras-chave: Violência Sexual. Estupro. Violência Contra a Mulher. Violência por Parceiro Íntimo. Enfermagem.

CONDUCTAS MASCULINAS PARA LA VIOLACIÓN MARITAL EVIDENCIADAS POR MUJERES

RESUMEN

Objetivo: señalar las conductas utilizadas por los cónyuges para la violación marital a partir del relato de las mujeres. **Método:** se trata de una investigación cualitativa, realizada con 16 mujeres atendidas por la Operación *Ronda Maria da Penha*, en Salvador, Bahía, Brasil. Para la recolección de datos, se utilizó entrevista individual, guiada por un formulario semiestructurado. **Resultados:** a partir de los relatos, surgieron las siguientes categorías: Inmovilización; Aterrorización; Cobro por la obligación marital. El estudio reveló que estas estrategias estuvieron presentes en el cotidiano de violación marital vivido por las entrevistadas. A partir de la presente investigación, es posible comprender el acto sexual forzado como elemento relacionado a la imposición de la fuerza física masculina, por el apelo emocional y/o psicológico, así como por estar casadas. **Conclusión:** es necesario, por tanto, que se ofrezcan herramientas para la preparación de los profesionales de la salud, en particular de las enfermeras, con el objetivo de proporcionar elementos para una mejor identificación de estas mujeres, además de la creación de espacios para que mujeres y hombres puedan reflexionar si viven plenamente su sexualidad.

Palabras clave: Violencia Sexual. Violación. Violencia Contra la Mujer. Violencia por Pareja Íntima. Enfermería.

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