

Intimate partner violence against women in the climacteric period related to alcohol abuse

Violência por parceiro íntimo em abuso de álcool perpetrada contra mulheres no climatério

Violencia relacionada con el abuso de alcohol ejercida por las parejas de mujeres que transitan el climaterio

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Abstract: **Aim:** to identify, in the archives of a Police Service Specialized in Attending Women (*Delegacia Especializada no Atendimento à Mulher, DEAM*), occurrences of violence perpetrated by an intimate partner suffering from alcohol abuse against women in the climacteric. **Method:** descriptive qualitative research, carried out in the DEAM of a municipality in the countryside of Bahia. For the data collection, the DEAM occurrence notification system was used and content analysis was used for the data analysis. **Results:** intimate partner violence becomes frequent with abusive use of alcohol, in the form of physical, psychological and sexual violence; and during the climacteric phase the aggressions are constant. **Final considerations:** we highlight the importance of the discussion on violence against women, among professionals working in primary health care, to identify violence, provide integral care and implement strategies of violence prevention and reduction, in order to articulate with the services of the network of attention.

Descriptors: Violence against women; Climacteric; Intimate partner violence; Alcohol Abuse

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Resumo: Objetivo: identificar nos registros de ocorrência de uma Delegacia Especializada no Atendimento à Mulher (DEAM), as situações de violência perpetradas por parceiro íntimo em abuso de álcool contra mulheres no climatério. **Método:** pesquisa qualitativa descritiva, realizada na DEAM de um município do interior baiano. Para a coleta de dados, utilizou-se o sistema de notificação de ocorrências da DEAM e na análise dos dados foi empregada à análise de conteúdo. **Resultados:** a violência praticada por parceiro íntimo torna-se frequente com o uso abusivo de álcool, sob a forma de violência física, psicológica e sexual e na fase do climatério as agressões foram constantes. **Considerações finais:** ressalta-se a importância da discussão sobre violência contra as mulheres entre profissionais que atuam na atenção primária à saúde para identificar a violência, realizar atendimento integral e implementar estratégias de prevenção e redução da violência, visando à articulação com os serviços da rede de atenção. **Descritores:** Violência contra a mulher; Climatério; Violência por parceiro íntimo; Abuso de Álcool

Resumen: Objetivo: identificar, en los registros de una Dependencia policial especializada en la atención de mujeres (*Delegacia Especializada no Atendimento à Mulher*, DEAM), las situaciones de violencia relacionadas con el abuso de alcohol ejercidas por las parejas de mujeres que transitan el climaterio el climaterio. **Método:** investigación cualitativa y descriptiva, realizada en la DEAM de un municipio del interior bahiano. Para recolectar los datos se utilizó el sistema de notificación de registros de la DEAM y el análisis de los datos se basó en el análisis de contenido. **Resultados:** la violencia ejercida por las parejas ocurre frecuentemente con el abuso de alcohol, por la forma de violencia física, psicológica y sexual; en la fase del climaterio las agresiones son constantes. **Consideraciones finales:** se resalta la importancia de discutir la violencia contra las mujeres entre los profesionales que se desempeñan en la atención primaria a la salud para identificar la violencia, realizar una atención integral e implementar estrategias de prevención y reducción de la violencia, para así articular los servicios de la red de atención. **Descriptor:** Violencia contra la mujer; Climaterio; Violencia ejercida por la pareja; Abuso de alcohol

Introduction

According to the 2015 Violence Map, Murders of Women in Brazil, in 2013 the rate of femicide was 4.8 per 100,000 women, an increase of 111.1% compared to 1980. Brazil is ranked 5th in the rate of femicides in 83 countries, with rates higher than many civilized countries.¹

Violence against women happens in different cultures, being related to the gender issue, that is, the power established by men in affective relationships. From an early age women are taught to obey and satisfy their intimate partners, and this behavior determines gender roles and contributes to intimate partner violence.²⁻⁴

In addition to the control and domination of men over women, factors such as jealousy, financial issue, partner infidelity, unplanned parenting and alcohol abuse contribute to and intensify conflicts in intimate relationships.⁵

Another important factor that goes unnoticed, especially due to lack of knowledge, is the climacteric period, which comprises the transition between the reproductive and non-reproductive periods of women, involving their last menstrual cycle. This phase occurs between 35 and 65 years of age and may lead to changes in women's marital, professional and socio-cultural life.⁶

It is estimated that 32% of the women in Brazil are between 35 and 65 years old. It is noteworthy that the changes during this period, such as hormonal, aesthetic and psychological transformations, can influence female sexuality and sexual relations. In this phase there is a decrease in estrogen production by the ovaries, causing changes in the sexual response and discomfort in sexual relations, as well as a lack of interest in sex due to decreased libido.⁷

This situation is neither accepted nor understood by most partners, who are unaware of the fact or simply impose their will on their partner, in addition to the common sense saying that the female role is reproductive and is restricted to sexually satisfying her partner, repressing their sexual desire.⁷

In this context Intimate Partner Violence (IPV) emerges, understood as any type of violence in the domestic environment or in any intimate relationship, regardless of the victim, male/female aggressor and cohabitation.⁸ Therefore, it can happen in any relationship between spouses, boyfriend and girlfriend, former spouses, or partners living together, regardless of gender.⁵

The violence map indicates that assistance to women up to 59 years of age who suffer from violence outweighs assistance to men. When analyzing all age groups, it is observed that domestic violence is predominant and, as regards the main aggressor, immediate relatives, partners and former partners are the main responsible for 67.2% of the total calls.¹

IPV can happen through physical violence with physical injuries; psychological violence in the form of threats, humiliation, indifference, isolation, contempt and intimidation; equity

damage that characterizes theft, or property damage; moral damage, such as libel, defamation and slander; and sexual violence defined as unauthorized sexual practices.²⁻³

Violence is further perpetrated within a vicious cycle that can be repeated more frequently and intensely. It starts with some conflicts and arguments between the couple, followed by the physical and emotional lack of control of the perpetrator who commits violence, until the reconciliation phase, in which the perpetrator says he/she is sorry and tries to compensate the partner.⁹ These situations of violence and discussions may be potentiated due to the climacteric period, marked by the diminished sexual desire of the partner, as well as the abuse of alcohol by the partner in the relationships.^{5,7,10}

Alcohol abuse and violence against women are considered public health problems and, because of their physical, psychic, social and family consequences, are associated to and impact on family vulnerability. Alcohol is highly consumed in Brazil, mainly by the male public, and it can cause mood swings and trigger fights and arguments as it enhances aggression, jealousy and domination.^{5,9-10}

Intimate partner violence and alcohol abuse may concur throughout life and significantly influence a person's social construction; for example, individuals who grow up witnessing acts of violence or who were assaulted as a child tend to be aggressive people in their lives and are likely to abuse alcohol.^{5,9,11}

Researches show a consistent association between male and female problems related to alcohol abuse and/or alcoholism and IPV. There is scientific evidence connecting alcohol and IPV, considering that most individuals are under the influence of alcohol when engaging in violence, and violence is more likely to happen when partners drink.^{5,9,11-12}

Therefore, with regard to the climacteric period, the way in which each partner will experience this period will depend greatly on their cultural background. This period is permeated by difficulties that reflect on the couple's sex life. Therefore, poor quality of life is

also an important factor that can impair a woman's sexual fulfillment.⁷ Thus, understanding the elements that trigger violence in the context of alcohol dependence and the climacteric period is as important as understanding the relationships, behaviors and contexts that permeate these situations and contribute to such problems.⁵

This study contributes by raising the need to redefine the assistance for women in the climacteric period, through the collection of the complaints that may be associated with the experience of intimate partner violence due to alcohol abuse, in order to implement a comprehensive care, whether by prevention, identification and/or necessary interventions.

Given this context, this study raises an issue to be discussed based on the findings in the records of the Women's Police Station (DEAM): which situations of violence are experienced by women in the climacteric period perpetrated by intoxicated intimate partners?

This study aims to identify in the records of a Women's Police Station the situations of violence perpetrated by intoxicated intimate partners against women in the climacteric period. The study seeks to contribute to the design of strategies for the prevention and reduction of violence in intimate relationships.

Method

A descriptive qualitative research carried out at the DEAM of a municipality in the inland of Bahia (BA). The inclusion criteria included complaints registered by women in the climacteric period aged between 35 and 65 years old (period that permeates the climacteric phase, the reproductive and non-reproductive period of women involving their last menstrual cycle)⁶ who suffered some kind of intimate partner violence related to alcohol abuse, which totaled 10 complaints.

This is a section of the Research Project "Violence against women in the climacteric period: a study based on the DEAM's records in the city of Jequié/BA" that meets

Resolution No. 466/2012 of the National Health Council. All the ethical aspects were respected and the research was submitted to the Ethics and Research Committee of the State University of Southwest Bahia (*Comitê de Ética e Pesquisa da Universidade Estadual do Sudoeste da Bahia*, CEP/UESB) with Certificate of Presentation for Ethical Appraisal (*Certificado de Apresentação para Apreciação Ética*, CAAE) No. 49739415.7.0000.0055 and approved under opinion No. 1,460,137 of March 21st, 2016.

The approach to the field occurred after contact with the Police Commissioner responsible for the DEAM, with a request to meet with the Commissioner and the Agents that make up the team of the institution, when the researchers explained the purpose of the study and received the confirmation of the consent for data collection.

For data collection, the DEAM's notification system was used from January 2013 to January 2014, because in this period the notification system was updated and the complaints were signed by the DEAM's commissioner, this being the criterion for choosing the period. The selected complaints were transcribed to a Universal Serial Bus (USB) memory device according to a complaint analysis matrix and, subsequently, carefully and cautiously analyzed.

For data analysis, the technique of content analysis was used, a modality proposed by Bardin, which is understood as an appreciation of the communications to obtain the message contents, indicators (quantitative or not) that enable inference of knowledge regarding the conditions of receiving these messages.¹³

This process comprised three stages: the first stage consisted of pre-analysis with floating reading, choice of documents, constitution of the *corpus* constituted by 10 complaints, elaboration of the guiding question and objective, indexes and indicators, preparation of the material. In the second stage, the material was analyzed based on the rules for the *corpus*. Thus, the clipping, counting, classification, semantic field aggregation and categorization rules were

applied. In the third stage, the results were treated and interpreted by using statistical operations, synthesis and selection of results, inferences and interpretation.¹³

Two categories were obtained from the results: “Violence experienced by women in the climacteric period perpetrated by their intimate partners abusing alcohol” and “Feelings present in intimate partner violence involving alcohol abuse”.

The complaints were identified in the text by the letter O (*ocorrências* in Portuguese, occurrence), followed by a number according to the increasing order of the analyses, that is, occurrence No. 1 is (O1) and so on.

Results and discussion

The complainants live with their abusive partner for at least 10 years, and some report that the partners started to abuse alcohol and then assaulted them; other women reported having lived with their partner in this situation; however, all partners/former partners consume alcohol, and it can be noted that, during the climacteric period, aggressions became constant.

Violence experienced by women in the climacteric period perpetrated by their intoxicated intimate partners

In this category it was possible to highlight that, in most complaints, women report the increase in aggressive behavior, noticing that alcohol indeed tends to potentiate the violent relationships already present.

The victim claims that her partner [...], has been constantly threatening her, especially when using alcohol, turning into a violent person. (O1)

[...] The victim informs that his partner drinks frequently and, afterwards, makes threats and defamations. (O2)

[...] The victim alleges that she has lived with her partner for thirteen years and that when he drinks alcoholic beverages, he becomes aggressive, swears, and imposes sex. (O3)

These women say that, after their partners use alcohol, they become violent and assault them. Most cases are verbal and psychological aggression and may evolve into physical and sexual violence.

The most common form of violence identified against women is physical violence, characterized by visible damage such as bruising, injuries and cuts, manifested by punching, slapping, throwing objects, hanging attempts, hair pulling, kicking, among others.³ Some women understand as violence only the physical aggression; therefore, only when there is loss of the physical integrity women resort to hospitals, to the DEAM and formalize the complaint.⁴

Psychological violence consists of verbal aggression, rejection and indifference, humiliation, threats, deprivation of liberty, offenses, among others. It is often difficult for women to identify these situations, which may last for a long time, causing mental damage, suicidal thoughts, depression and resulting in physical violence.¹⁴

Intimate partner violence includes emotional abuse and controlling behavior by the partner during or after the breakup, which can cause mental disorders, difficulty in bonding, and increase the risk of alcohol and other drug abuse. Signs are not always apparent and these situations are even more dangerous when the health care professionals find it difficult to deal with these cases, which configures a deficiency in services.¹⁵

Sexual violence is understood as an act or attempt to obtain sex, as undesirable attacks or as comments using coercion. In general, the partner forces the woman to have sex without her consent, using force or threats, making women feel a sexual object, humiliated and in the condition of submission. In this context, it is evident that men feel superior to women due to their attempt of forced sexual intercourse, and the refusal of sexual intercourse can be understood by the partner as a possible betrayal and counter-power, which can trigger new conflicts, aggressions and sexual violence itself.¹⁶⁻¹⁷

The climacteric period is a period when women may be more vulnerable to sexual dysfunction due to low estrogen and emotional factors. Studies show that the prevalence of sexual dysfunction in women aged 40 to 65 is 67%, with 60% of the women reporting that sexual activity decreased after menopause.^{7,18}

Thus, it can be inferred that many situations of sexual violence may happen in the climacteric context, where there may be a decrease in women's sexual desire and their refusal to have sex with the intoxicated partner, which may culminate in rape.

Thus, aggression can be triggered by alcohol abuse and often occurs when the partner is intoxicated, which can often lead to verbal aggression in the form of insults, sometimes resulting in physical violence.¹⁴

[...] The victim says that the relationship has always been difficult since her ex-husband abuses alcohol, and that he has already asked her to resume the relationship, but after her denial, he is making death threats saying that if she does not stay with him, she will not stay with anyone else; she also says that this is not the first time they have broken up. (O5)

The decision to break up with the partner due to physical and emotional distress is evidenced in Occurrence No. 5, in which the partner does not accept the separation, makes threats, demands, and shows a sense of ownership towards the woman. According to the findings from another study when women are encouraged to report their partners, they are at greater risk of being threatened or beaten.¹⁹

The relationship between couples who break up but in which the man does not accept it and goes on to persecute and threaten the partner, or even force her to resume the relationship many times, can be very common due to men's control and domination over women. It is also, in most cases, one of the reasons for the aggressions, as in Occurrence No. 5. It is considered that many men may have a sense of ownership towards the woman and believe that she owes him obedience.^{9,14}

Just as the complaint above reports that the coexistence between the couple has always been difficult and that violence always occurred after the ex-husband abused alcohol, a study reveals that couples begin the relationship aware that one of the partners already used alcohol frequently and stated that difficulties in the relationship have been present since the beginning of the marriage.⁵

It can be understood that what happens in most cases is that the woman hopes that one day the partner will change, or she constantly tries to change him, when in fact, this relationship can often be dangerous and have no future; she may spend years in a problematic and aggressive relationship, resulting in stress. However, many women become dependent, or believe that they depend, on their husbands for child-rearing and support. And so, men take advantage of this condition and impose their will on their partners, making it increasingly difficult to break the cycle of violence.^{5,14}

As mentioned by women in situations of violence, individual factors, such as alcohol abuse, have been reported to trigger violence.

[...] The victim reports that she asked for money for groceries and her partner claimed he did not have any, and when she said he had no money for groceries but was drinking, he took a pair of scissors and struck the victim's left hand. (O6)

The victim alleges that her partner arrived drunk at home and had bought a beer on her account, so they began an argument, at which point he bit her forehead. (O7)

The aforementioned statements demonstrate situations in which intoxicated partners encounter complaints from their wives about debt and spending on drinking. These statements reaffirm what the studies indicate about the significant association between alcohol consumption and intimate partner violence, because when drinking alcohol the first noticeable behavior is emotional lack of inhibition and euphoria, excessive communication and self-

confidence. These changes can hinder coherent decision-making and control of actions, thus enhancing violence.²⁰

The common belief that men are the providers of the home and must monitor household expenses and that women must be submissive and not question justifies the violence, which is naturalized by both in the family environment, since this is culturally the family model. In addition, the altered behavior due to drinking along with this thinking can trigger violent acts.^{2,9}

Alcohol abuse may be associated with aggressive behavior in relationships, being the main reason behind the arguments reported. Other factors include drinking expenses, financial problems and unemployment, the amount of time a partner stays at the bar and away from home, forgetfulness, believing that he is always right, cursing and jealousy. However, most of these factors are potentiated by continued or abusive use of alcohol, which increases due to stressful/negative interpersonal episodes.^{5,12,21}

The victim claims that on weekends her partner drinks, goes to her residence and slanders her using bad language, saying that every men living nearby are her lovers. [...] swore at her, wants the victim to leave home with her ten children, and she often had to sleep at the neighbor's house, and that the perpetrator does nothing to feed her children. (O8)

[...] According to the victim, she was working and, upon returning to her house, found her partner visibly intoxicated; he began to verbally attack the victim, threatening to physically attack her; according to her, the fight started for a silly reason and she had to leave home not to be attacked [...]. (O9)

In the statements above it is possible to notice that the women's reaction to the aggressions is to feel afraid and escape. Women feel forced to leave home and spend the night out for fear of what the partner would do or to avoid this situation. However, there are still cases like Occurrence No. 8 where the partner wants the woman to leave home.

They often remain in abusive relationships for fear of the partner, fear of revenge, financial problems, economic and emotional dependency. Given this, in Occurrences No. 8 and 9 it can be subjectively inferred that these women may be subjected to this situation to maintain the relationship, either for love to their partner, fear, dependence or submission and even avoid inconvenience to the children, often with the belief that in the next day the relationship with the partner will return to normal.¹¹

A study indicates that most offenders had consumed alcohol, in addition to drugs (or not). Another study states that alcohol consumption tends to loose up people's behavior, often leading to conflicts in relationships and posing a risk of violence.^{22,14}

Therefore, although factors such as jealousy, financial problems, and alcohol abuse were associated in some cases, according to the victims, the aggressions occurred when their partners were intoxicated and for no apparent reason other than alcohol, reaffirming men's dominance in this context.

Feelings present in intimate partner violence involving alcohol abuse

The ideal marriage patterns and the search for a partner and motherhood, which are historically constructed by culture, can lead to women's suffering and loneliness in the relationship. Under the belief that they must be submissive and please their partner under any circumstances, they become passive. In this context, women staying in abusive relationships may be related to their refusal to live alone and the affection they feel for their partners. In this perspective, they are subject to social isolation, lose their individuality and start to live for the partner. However, many women feel obliged to stay with troubled and/or abusive partners in an attempt and duty to try to change them.^{4,23}

A victim attended this station reporting that she lived for about 20 years with her partner. However, she can no longer live with him, because he is

an alcoholic, does not work and physically and psychologically attacks her, curses her and even threatens her life. (O10)

The victim has lived with her partner for about 48 years and he has recently started to make constant use of alcohol and comes home threatening and physically assaulting the victim. She says she can no longer stand this situation and so she attended this police unit. (O11)

Women's reports in occurrences 10 and 11 reflect the failed relationship. After years of suffering, aggression and going through a delicate phase in which hormonal and behavioral changes are taking place in their lives, they reveal a sense of renunciation of their relationship and their partner. It is possible to understand that the non-acceptance and/or misunderstanding of the transformations resulting from the climacteric period, in addition to the constant and progressive use of alcohol by the partner, favored the emotional exhaustion of these women, encouraging them to seek help.

Regarding hormonal changes and feelings, sadness and silent suffering, as well as irritability, are frequent in women during the climacteric period, requiring attention. Symptoms, especially depression, are likely to be associated with feelings of lack of affection and guilt, difficulty in interpersonal relationships, feeling uselessness and fear of aging.²⁴

These symptoms caused by the climacteric period can be intensified due to the partner's indifferent behavior. The man often becomes suspicious of the woman, treating her with rudeness and impatience when she refuses to fulfill his desires, which may be associated with constant use of alcohol and infidelity, becoming distant and avoiding her or becoming violent and forcing the relationship.

This relationship between symptoms can be observed in another study showing a moderate rate of intimate partner sexual assault that tends to occur together with physical violence, which can lead to psychological consequences for women, such as suicidal behavior. However, sexually assaulted women were more likely to engage in further threats or in suicide

attempts.²⁵ In addition, other consequences may happen, such as increased likelihood of alcohol use by battered women, triggered by situations where the partner shows indifference towards the woman, such as decreased proximity, criticism and offenses.²¹

Thus, another factor is the feeling of ignorance and misunderstanding of men in this situation associated with use of alcohol, which is generally referred to as a way to relax and forget their problems, when in fact it can cause even more conflicts and aggression. Therefore, all these factors may negatively impact women's psychological health, especially in the climacteric period.

Final considerations

The study showed that intimate partner violence against women in the climacteric phase has a strong influence on the social and cultural aspects, and alcohol abuse tends to contribute to intensifying the aggressions. In this context, inequality between men and women is evidenced, related to non-acceptance of separation, jealousy, financial problems, disrespect to women, among others.

The climacteric phase is also one of the aggravating factors for violence, given the lack of knowledge of most partners and their misunderstanding on the topic. The fact that women stay in abusive relationships is due to the belief that they really must endure it, whether because of marriage, children, for love, financial dependence, or because they feel obligated to help out of duty or affection to their partner.

The belief of some of the women who formalize the complaints is that their partners are sick, and they lived in this situation for some time and only when things get worse do they ask for help. These are women who deal with these problems constantly and believe that these situations are due only to the abuse of alcohol and then everything will be resolved. Some of the

women states that they can no longer stand to stay in an abusive relationship and are encouraged to leave the relationship.

Thus, this study is fundamental for the health professionals, especially those who work in primary health care as nurses, psychologists, physiotherapists, among others, considering the physical, psychic, sexual and even neurological problems that these women may develop and the need to promote preventive actions and multi-professional and intersectoral care. Also noteworthy is the need for the DEAM to work side by side with the health and social care services, especially for women in the climacteric period.

A limitation of the study is the fact that few studies address the climacteric period in the context of intimate partner violence against women, and more specifically, its relation with alcohol abuse, which requires further research connecting intimate partner violence, alcohol abuse and the climacteric period.

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