

Intimate partner violence against women: an analysis of police investigations during the COVID-19 pandemic

Violência contra mulher causada por parceiro íntimo: análise de inquéritos policiais na pandemia da COVID-19

Violencia contra la mujer causada por pareja íntima: un análisis de investigaciones policiales durante la pandemia de COVID-19

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Abstract

Objective: analyzing police investigations of women who suffered violence caused by intimate partner during the COVID-19 pandemic. **Method:** a cross-sectional, quantitative, descriptive and retrospective research with statistical analysis of 289 police investigations. **Results:** women who suffered violence in the period analyzed were from an average age of 34 years old, were white (60.2%), single (76.8%), had elementary school education (50.2%), had children with the aggressor (56.4%) and did not depend financially on him (66.4%). Prior to registration, they indicated increased persecution (76.1%) and threats (66.8%), request for protective measures or reports of incidents (41.2%), separation or attempts (66.4%). **Conclusion:** through the analysis of the surveys it was possible to understand the variables of women who suffered violence by an intimate partner in the pandemic. These data contribute to health professionals recognize women with greater vulnerability and can propose prevention, screening, encouragement and follow-up actions.

Descriptors: Women; Violence Against Women; Intimate Partner Violence; Domestic Violence; COVID-19

Resumo

Objetivo: analisar os inquéritos policiais de mulheres que sofreram violência, causada por parceiro íntimo, durante a pandemia da COVID-19. **Método:** pesquisa transversal, quantitativa, descritiva e retrospectiva, com análise estatística de 289 inquéritos policiais. **Resultados:** as mulheres que sofreram situações de violência, no período analisado, apresentaram média de idade de 34 anos, eram brancas (60,2%), solteiras (76,8%), possuíam ensino fundamental (50,2%),

tinham filhos com o agressor (56,4%) e não dependiam financeiramente dele (66,4%). Anteriormente à realização do registro, elas sinalizaram aumento da perseguição (76,1%) e ameaças (66,8%), solicitação de medida protetiva ou boletins de ocorrência (41,2%), separação ou tentativas (66,4%). **Conclusão:** por meio da análise dos inquéritos, foi possível a compreensão sobre as variáveis de mulheres que sofreram violência por parceiro íntimo na pandemia. Esses dados contribuem para que os profissionais de saúde reconheçam as mulheres com maior vulnerabilidade e possam propor ações de prevenção, rastreamento, encorajamento e acompanhamento.

Descritores: Mulheres; Violência contra a Mulher; Violência por Parceiro Íntimo; Violência Doméstica; COVID-19

Resumen

Objetivo: analizar las investigaciones policiales de mujeres que sufrieron violencia causada por pareja íntima durante la pandemia de COVID-19. **Método:** una investigación transversal, cuantitativa, descriptiva y retrospectiva, con análisis estadístico de 289 investigaciones policiales.

Resultados: las mujeres que sufrieron situaciones de violencia en el período analizado presentaron edad media de 34 años, eran blancas (60,2%), solteras (76,8%), poseían educación primaria (50,2%), tenían hijos con el agresor (56,4%) y no dependían financieramente del mismo (66,4%). Antes de la realización del registro, indicaron aumento de persecución (76,1%) y amenazas (66,8%), solicitud de medida protectora o boletines de incidentes (41,2%), separación o intentos (66,4%). **Conclusión:** a través del análisis de las encuestas, fue posible comprender las variables de mujeres que sufrieron violencia por pareja íntima en la pandemia. Estos datos contribuyen a que los profesionales de la salud reconozcan a las mujeres con mayor vulnerabilidad y puedan proponer acciones de prevención, detección, estímulo y seguimiento.

Descriptores: Mujeres; Violencia contra la Mujer; Violencia de Pareja; Violencia Doméstica; COVID-19

Introduction

Violence against women (VAW) is a complex phenomenon that permeates generations, cultures and social classes, representing a public health issue determinant for the increase in female mortality. Although efforts are being made to reduce the alarming rates of violence against women, a change in individual and collective perspectives is still needed, as well as the creation of public policies and coordination between various sectors of society so that actions to combat violence are effective.¹

In Brazil, the prevalence of VAW has increased progressively over the years.²⁻³ In the State of Rio Grande do Sul (RS), from January to November 2021, 29,153 cases of VAW were identified, 16,024 of which were body injuries, 1,906 rapes, 90 feminicides and 233 attempts of feminicide.⁴

Systematic review points out that the COVID-19 pandemic and measures to contain COVID-19 contributed to increasing women's vulnerability and violence situations.⁵ Recommendations such as isolation at home, quarantine for suspected cases of infection and home office policies increased the risk of VAW.⁶

Social isolation generated physical, economic and mental stress among couples due to limited access to various economic and social resources. This context contributed to the occurrence of increased physical, psychological and/or sexual abuse against women. The daily interaction with the aggressor and the impossibility of making complaints, due to strict restrictions to prevent the circulation of the virus, prevented women from seeking help and thus made them even more susceptible to violence.⁶

In Brazil, in the months of March and April 2020, there was an increase of 22.2% in cases of femicide in the country. There was also a 27% increase in anonymous complaints by the Women's Call Center-Call 180.⁷ However, the registrations at the Specialized Police Stations for Women's Care decreased.⁷

At the global level, VAW also showed alarming data during the pandemic. Countries like France, Italy, Spain, Portugal, China and the United States have developed strategies to protect women. Hotel rooms have become shelters for VAW victims in Spain and France. Italy has conducted governmental and non-governmental campaigns to encourage women to report. Alcohol sales have been reduced in Greenland to provide safer homes.⁸

In India, the pandemic-caused blockages have increased VAW related complaints at the National Commission for Women. This context was associated with direct or indirect factors, such as stress caused by financial instability and social isolation;⁸⁻¹⁰ the disparity in domestic work, which generated an workload for women; and the increase in alcohol consumption and pornography.⁹ Research developed in Bangladesh has shown that cases of physical, financial, psychological and sexual abuse against women were associated with the impacts caused by the pandemic, that led to the unemployment of numerous men and the financial pressures experienced in family contexts.¹¹

In Brazil, black women were the most affected by violence in 2020, with a prevalence of 28.3% compared to 23.5% among whites. They also had high rates of sexual harassment (52.2%) compared to the others, showing the persistence of objectification of the black body,³ fruit of male chauvinism, sexism and cultural racism. This same group presented a reduction in family income, which culminated in higher rates of violence (61.8%),⁷ demonstrating that the issues of intersectionality of class and race impact on VAW situations, although they represent a gap in research on this topic.⁵ It is necessary to identify these intersections to understand why situations of violence were part of the female life trajectories during the COVID-19 pandemic.¹²

In the context of health care, nursing plays a key role, since it is responsible for receiving and reporting cases of violence. The nursing team develops direct care to the patient, which contributes to the construction of bonds and can serve as an incentive for women to seek help and feel safe to talk about and report cases of violence with these professionals.¹³

However, research conducted with nurses from the Primary Care showed weaknesses in the assistance to women in situations of violence. It was pointed out that the care network is disarticulated, and there is no approach to this issue in academic training in the health area.¹⁴ It is considered necessary to instrumentalize students and nursing professionals to actively act on early detection, in the adequate and humanized care of women in situations of violence.¹³

These aspects highlight the need for debate about VAW in academic spaces and health services, as well as studies that can contribute to the prevention and coping with this agrave.¹⁴ Under this prism, the analysis of markers such as race/color, educational level, social class, housing, types and frequencies of violence, among others, often disregarded in the studies, can contribute to the development of actions and strategies that prioritize groups with greater vulnerability, as well as allowing the development of preventive⁵ actions and assistance to women, as advocated by Law n. 11.340, known as Maria da Penha Law.

Review that mapped and summarized the available evidence on intimate partner violence during the COVID-19 pandemic, suggests conducting research that provides the sociodemographic profile of women and aggressors.¹⁵ Therefore, the objective of this study was to analyze police investigations of women who suffered violence, caused by intimate partner, during the COVID-19 pandemic.

Method

Quantitative, cross-sectional, descriptive and retrospective research conducted in the police surveys available at the Specialized Police Station for Women's Care (DEAM), located on the Western Border of RS. This municipality is located far from the major urban centers, with a population of 117,210 thousand inhabitants, according to data from the census of the Brazilian Institute of Geography and Statistics (IBGE) of 2022.¹⁶

Inclusion criteria were police inquiries about VAW, caused by intimate partner, which contained the National Form of Risk Assessment Domestic and Family Violence Against Women, with a time cut for convenience, between 4/1/2020 and 3/31/2021, from the date when the first case of COVID-19 was reported in the studied municipality. The exclusion criteria were surveys that did not present the form and/or incomplete completion of the pre-stipulated variables for analysis in this study.

Previously, a sample calculation was performed considering a population of 1000 surveys, α (bilateral, significance level) = 0.05 (5%) and 95% confidence level. Thus, the minimum sample calculated was 278 surveys. The criterion of random sampling stratified by month was used, considering the selection of 23 or 24 monthly surveys for retrospective data collection in order to contemplate the estimated sample for analysis. The researchers individually evaluated 734 completed surveys that were made available by DEAM professionals. However, it was found that 289 police investigations met the eligibility criteria.

The variables analyzed were: fact of registration; date and time; age; marital status; race; degree of education; request for urgent protective measure; financial dependence of the aggressor; desire/attempt to separate; situation of the victim; had children with the aggressor; Use of alcohol or drugs by the offender; criminal record of the offender for VAW. Variables on the types and frequencies of aggressions were also collected.

All completed surveys were available in physical format, separated into boxes by date and record number. The variables were collected by four research collaborators, who had been trained and were familiar with the object of investigation.

The collections occurred between May and September 2021, using an instrument built by the researchers. The data were digitized and organized in a Microsoft Excel spreadsheet, which was exclusively accessible to researchers. The data was double digitized and compared in order to minimize typing errors before the final analysis. The data were analyzed by descriptive statistics and presented as average, absolute number and percentage.

The research project was approved by the Ethics and Research Committee on February 23, 2021, with Certificate of Presentation of Ethical Appreciation 42566920.8.0000.5323 and number of opinion 4,551.775. The researchers obtained the waiver of the Informed Consent Form, since the collection in the surveys occurred retrospectively, considering the data from 2020 and 2021. Thus, there was no direct contact with the women and, considering the object of investigation and that even after the complaint, some women return to live with the aggressor, It was considered that seeking them to request authorization for access to police investigation could generate conflict in the relationship and a new situation of violence.

Results

Through descriptive statistical analysis of the 289 police investigations, it was possible to identify that among women who reported VAW in the period studied, 60.2% (N=174) self-declared as white, 50.2% (N=145) had completed elementary school, 76.8% (N=222) were single and had an average age of 34 11.2 years old. It was found that 56.4% (N=163) had children with the aggressor; 58.8% (N=170) had their own housing and others lived in houses given by relatives, 15.2% (N=44). The majority, 66.4% (N=192) did not depend financially on the aggressor, as shown in Table 1.

Table 1 – Characterization of women who formalized police records (N=289), municipality on the Western border of RS, 2020 a 2021

Characterization about women	N	%
Race		
White	174	60.2
Black/Brown	104	36.0
Indigenous	2	0.7
Yellow	2	0.7
Not reported in the survey	7	2.4
Education level		
Elementary Education	145	50.2
High School	121	41.9
Higher education	18	6.2
No instruction	2	0.7
Incomplete higher education	2	0.7
Semi-literate	1	0.3
Marital status		
Single	222	76.8
Married	39	13.5
Divorced	13	4.5

Not reported in the survey	12	4.2
Widow	2	0.7
Friend	1	0.3

Children

Children with the aggressor	163	56.4
They had no children	57	19.7
Children from another relationship	47	16.3
Children with the aggressor and from another relationship	21	7.3
Children with the attacker and was pregnant at the time of the complaint	1	0.3

Housing

Own	170	58.8
Rented	62	21.5
Assigned	44	15.2
Not reported in the survey	12	4.2
Street situation	1	0.3

Financial dependence on the aggressor

It doesn't depend	192	66.4
Dependent	88	30.5
Not reported in the survey	9	3.1

Persecution became more frequent in 76.1% (N=220) of the cases. In addition, the majority of women had requested urgent and emergency protective measures or had previously reported their presence against the aggressor in 41.2% (N=119) of the surveys. In 66.8% (N=193) of the reports, threats showed growth in the last 12 months and women had been trying to separate themselves from the torturer in 66.8% (N=192) of the records, according to notes from Table 2.

Table 2 – Facts prior to the police report being made, according to data from police investigations (N=289), municipality on the Western border of RS, 2020 a 2021

Events prior to the police record	N	%
Increase in persecution in the last 12 months		
Yes	220	76.1
No	58	20.1
Didn't know how to inform	11	3.8
Request for protective measure and/or registration against the previously aggressor		
No	168	58.1
Yes	119	41.2
Not reported in the survey	2	0.7
Increase in threats in the last 12 months		
Yes	193	66.8
No	65	22.5
Didn't know how to inform	31	10.7
Recently separated or attempted separation		
Yes	192	66.4
No	97	33.6

There were 17 types of crimes identified in the surveys included in the survey, with the crime of threat prevalent in 32.2% (N=93). The most sought by victims to make complaints was the night period, in 51.9% (N=150), with emphasis on the time of 8 pm to 9:59 pm that presented 26% (N=39) of the reports of occurrence, as data in Table 3.

Table 3 – Characterization of police records (N=289), municipality on the western border of RS, 2020 a 2021

Characterization of police investigations (N=289)	N	%
Registration fact*		
Threat	93	32.2
Bodily injury	70	24.2
Ways of fact	55	19
Disturbance of tranquility	41	14.2
Failure to comply with protective measures	9	3.1
Injury	6	2.1
Damage	5	1.7
Domestic violation	5	1.7
Rape	2	0.7
Attempted femicide	2	0.7
Private prison	2	0.7
Femicide	1	0.3
Kidnapping	1	0.3
Illegal possession or carrying of a firearm	1	0.3
Cell phone theft	1	0.3
Slandorous denunciation	1	0.3
Compliance with court order	1	0.3
Occurrence shift		
Night	150	51.9
Morning	50	17.3
Afternoon	87	30.1
Afternoon and night	1	0.3
Not reported in the survey	1	0.3

*There was the possibility of answering more than one alternative in the surveys, in the “registration fact”. Therefore, the “n” is larger and the percentage is above 100%

The majority of women 78.9% (N=228) reported that they were not forced to have sexual acts or intercourse against their will. Psychological violence was represented in the form of threats, mainly using a knife, in 17% (N=49) of cases, and other forms not specified by the respondents 54% (N=156). The physical violence that predominated in the lives of women was the push 56.7% (n = 164). After the episodes of violence, most women 79.9% (N=231) did not seek health care, as shown in Table 4.

Table 4 – Characterization of violence reported by women (N=289), municipality on the western border of RS, 2020 a 2021

Characterization of types of violence	N	%
Sexual violence		
No	228	78.9
Yes	49	17
Not reported in the survey	12	4.1
Psychological violence: types of threats		
It was not described on the form	156	54
Using only a knife	49	17
Using another form not specified in the form	29	10
Using two or more forms of threat	41	14.2
Using only firearms	14	4.8
Physical violence: types of aggression*		
Jerk	164	56.7
Slap	135	46.7
Hair pulling	133	46.1
Punch	122	42.2
Kick	103	35.6
Hanging/suffocation	92	31.8
Throwing objects at the woman	21	7.3
Injury with a sharp object	12	4.1
Tightening on a woman's body	9	3.1

Burns	2	0.7
Bite	2	0.7
Shock	1	0.3
Headbutt	1	0.3
Medical care		
No	231	79.9
Yes	45	15.6
Not reported in the survey	13	4.5

*There was the possibility of answering more than one alternative in the surveys, which is why the "n" is larger and the percentage is above 100%.

Issues such as substance abuse and criminal record for VAW were identified among the variables of the aggressors. About 29.4% (N=85) of the men were abusive to alcohol and 69.2% (N=200) of the aggressors had no criminal record of VAW.

Discussion

The present study showed variables such as race, education level, marital status, number of children, housing and dependence on the aggressor, in addition to other facts recorded in police investigations of women who suffered violence perpetrated by their intimate partner, during the COVID-19 pandemic. The literature points to similar data related to women's characteristics, showing that they often represent young people, mothers and with low level of education.^{3,17-18} Single or divorced/separated women also appear in higher quantity, what may be linked to the attempts to break the relationship with the aggressor and the transposition of the cycle of violence.¹⁹

In the case of the racial variable, there was a divergence between national data, which indicate prevalence in African-descendant women.^{3,17-18} It is necessary to consider that structural racism constitutes a factor that corroborates with the process of bleaching and denial of self-declaration of the black race. In Brazil, being black is often linked to inferiority, causing people to deny their racial identity for fear of rejection by society.²⁰ Faced with this, it is considered that some respondents may not recognize themselves as black and, therefore, there was the highest percentage of violence in white women.

The latest edition of the study entitled "Gender statistics: social indicators of women in Brazil" by IBGE reveals that, in the last three years, most women who suffered violence from their intimate partner or former partner were black or brown (6.3%) against 5.7% referring to white. It is also noteworthy that the highest proportion of black or brown respondents was identified in the Southern Region of Brazil (6.9%),²¹ although the data from the 2022 Demographic Census indicate that the majority of the female population in this Region is white (73.6%).¹⁶

In addition, the overvaluation of the phenotype of European white as a synonym for beauty, benevolence and superiority continues until today.²⁰ Soma-the socioeconomic vulnerability presented by the black population²⁰ and the structural and institutional racism of health and public safety services.¹⁵ During the pandemic, it was also observed that support services for women in situations of violence were not prioritized, as "essential" services.¹¹ These aspects may have implied the low demand for DEAM among black women to make a complaint against their partners.

In Brazil, black women are the most affected by violence, including lethal violence, when compared to non-black women. When considering the design by Regions of the country, it is noted that in all Regions, except for the southern Region, brown women have a higher proportion of deaths, highlighting the regional difference. The femicide rate in 2020 for white women was 2.4 and that of black women was 4.2 per 100,000 inhabitants. The higher rates of violence against black women are associated with social vulnerability, being heads of household, not having completed elementary school and being mothers of children under 15 years old.²²

Regarding housing, women who own private property remain in the cycle of violence for fear of losing their right to their homes or to secure inheritance for their children. On the other hand, those who leave their homes make this decision because of the imminence of an episode of lethal violence. This context highlights the patrimonial violence experienced by these women, in which the aggressors maintain control over the family assets.²³

In the screen survey, most women had their own homes or were in homes given by family members. From this, it is considered that the family can constitute the main support network for the transition from the cycle of violence. However, it is often

observed that the lack of housing policies directed to women who experience situations of violence, makes them seek shelter in overcrowded environments with precarious conditions and shared with other families, generating the possibility of exposure to new violence or reviving the cycle of intergenerational domestic violence.²³

Also in this context, studies indicate that financial dependence may represent a risk factor for VAW.^{2,17} In this sense, after interviewing 1,116 women, the survey showed that financial dependence was mentioned in 29% of cases as one of the reasons for not filing a complaint, since women were afraid of not being able to support their families after the removal of the aggressor.² It is necessary to contribute to their empowerment on the legally established rights, so that during separation, the sharing of assets is equitable, and also to foster the creation of public policies that assist women in the restructuring of life, after the relationship with the aggressor is broken.²³

In police inquiries, women reported not being financially dependent on the aggressor. It is considered that this finding may be linked to the expressive insertion of women in the labor market, breaking cultural paradigms of submission to men and helping them in their greater empowerment.²³ However, this does not mean that financially independent women are not victims of VAW, but may suggest that they maintain affective relationships with abusers for other reasons, for example emotional dependence, presence of children or control of the aggressor over the family finances.

Some facts can still be observed prior to the occurrence of the report. In this perspective, the Brazilian Forum of Public Security evaluated the types of assaults suffered by women in the year 2020 and 7.9% of women reported having been victims of fear or harassment in the last 12 months prior to the study,³ similar to the one mentioned in the results found in this research.

Therefore, the attempts to distance from the aggressor may constitute a considerable risk factor for the increase of aggression, because the rupture can arouse the anger of the aggressor. With this, new episodes of violence may occur, exposing women to complications and the femicide itself.^{3,20} Initially, women seek the transfer of violence alone or seek help from friends, family and religious institutions. However, most of the time they do not succeed and resort to specialized professional help.²⁴ Professionals in the area of health and public safety are the most cited as collaborating agents at the end of the cycle.²⁵

In the 289 police investigations, a total of 17 crimes were observed. The study indicates that in the first days of isolation and quarantine, the number of reports of occurrences by VAW decreased 9.4% in RS when compared to 2019. However, reports of VAW on social networks increased by 431%.¹⁰

Thus, it is known that social isolation and quarantine were measures to prevent the transmission of the virus causing COVID-19.¹⁰ However, this context allowed women to remain with their aggressors longer. During the pandemic, many partners restricted women's proximity to their support networks, increased control and surveillance over the lives of partners and limited their access to services to combat VAW, according to 17 women who experienced violence in England.⁹

Other factors may also be linked to the increase in violence during the pandemic. Among them, the lack of social activities; economic stress generated by financial instability; gender roles that culminated in an workload of domestic service and children to women; marital quarrels due to interpersonal conflicts and betrayals; the use of alcohol and other substances; the nuances of the conjugal relationship and the vulnerability of women to these situations.⁵

In 2020, when the pandemic continued, the threat crime showed a 22.5% reduction in the RS police stations, compared to 2019.³ At the national level, there was also a decrease of 11.8%. Following this trend, the crime of bodily harm also suffered a drop of 7.4% in Brazil and 9.4% in RS.⁷ It should be noted that the decrease in official records may represent the concealment of many cases, which did not reach the competent authorities.

Regarding the shift of occurrence, the literature points out that night is the most violent period for women, presenting a higher incidence of femicides and intentional violent deaths in this period.²⁶ In this study, it was found that the night shift was more recurrent for the realization of the bulletin. However, it is necessary to signal that the time of registration does not always represent the exact moment of aggression, but when the woman was able to seek help. Therefore, it is not possible to say whether there were more cases or more records in this turn.

Given these findings, it is necessary to consider that the Women's Defense Police Stations generally provide services only during the daytime and during the week. At

weekends and in the evening, the reports are made on duty at the Civil Police Station. However, the situations of vulnerability to which women are exposed are not restricted only to the daytime period.²⁷

For a long time and still today, in several Regions, police stations prevent, diminish and/ or disqualify the situations of VAW, reinforcing sexist positions and oppressors. Therefore, the DEAM was created with the aim of proposing a new model for the care of women who suffer situations of violence.²⁷ Therefore, it is inferred that there is a need to adapt the hours of operation of the DEAM, ensuring full-time care for women.

In relation to the months of the year, so far, there are no studies that investigate this variable. In the police investigations, it was observed that the largest number of complaints occurred in January 2021 and this can be justified by the context experienced during this period, in which social distancing measures were being relaxed and the population began to return to routine, thus enabling women to seek help from services.

Regarding the types of violence, in this study, physical, psychological and sexual aggressions prevailed. In this sense, it is pertinent to highlight that marital sexual violence is still a veiled issue in society. This violence occurs when the torturers sexually abuse their partners, often anchored by domination and submission rooted in abusive relationships, as well as in the patriarchal thought that women should satisfy men. Thus, the abuser's domination over his partner makes these abuses not clearly identified. However, marital rape is more recurrent than the data presented in the research.²⁸

In the present survey, 17% of women reported abuse in relationships. However, in the face of ignorance about this type of sexual violence within the affective relationship and the consequent underreporting of these cases, it is assumed that the quantity is much greater. It is important to guide women and society in general, in order to avoid and/or reduce the situations of violence routinely perpetrated by aggressors and also to encourage complaints about abusive relationships.

The women signaled, mainly, threats using knife and firearm. According to the Brazilian Forum for Public Security,³ 5.9 million women (8.5%) were threatened with slaps, shoves or kicks and 2.1 million (3.1%) with a knife or fire in 2020.

Physical violence was reported 797 times, since each woman could mark more than one option regarding her personal experience. Therefore, to provide a better analysis of the data, the aggressions were grouped into 13 types. Among these, the shoves, caps and hair pulls prevailed in the complaints.

According to a study that analyzed the victimization of women during the first year of the pandemic, 6.3% of the interviewees revealed having suffered assaults through slaps, pushes or kicks.³ Therefore, there are similarities between the research findings. In view of this, after the assault, the demand for medical care was reported by few women and this data is consistent with results found in the literature. According to the seventh edition of the survey "Domestic and family violence against women", the demand for health care was identified in only 26% of cases.²

The survey shows that after the assault, 44.9% of the interviewees did not seek official services or their support networks. According to the authors, 35% of them sought police stations or services to combat VAW.³ In response, a systematic review reaffirms that during the pandemic, episodes of violence increased in number and severity, but the demand for services to report or seek help decreased, when compared to other years.⁵ This may be related to the pandemic restrictions that caused the closure of some services, the need for limited movement of people and greater control by aggressors over women.

It is assumed that this situation is often associated with a long period of abusive relationships, which culminates in emotional dependence generated by threats. With this, the woman begins to be afraid of not being supported by the current public policies and, after seeking help is not protected, and become a fatal victim of the aggressor. In addition, also emerges the shame of "being a woman who suffered aggression". Thus, the fear of the trials may cause it to delay the demand for the service.²⁹ Variables related to the aggressor were still collected and that concerned the use of licit and illicit substances and criminal records of VAW. In this sense, the abusive use of alcohol was observed in episodes of violence recorded in the surveys. This finding is consistent with other studies that refer alcohol abuse as a trigger aspect of domestic violence² and a risk factor for the occurrence of assaults.³

Most of the aggressors had no previous criminal record related to crimes against women. Having no history reveals that acts of violence are not restricted only to men "prone" to be violent, but to all men created in the patriarchal and sexist culture, which subjugates the female gender. This statement is consistent with the reality of 70% of participants in the "From now on" reflective group, who did not have a criminal record of crimes against women before the first complaint. According to the authors, the project in question promotes meetings with the aggressors for reflection and deconstruction of macho thinking, addressing issues of confrontation to VAW.²⁸

As limitations of the study, it can be pointed out that the analysis is restricted only to completed surveys, which suggests the possibility of identifying new findings. Another limitation presented was the recent introduction of the National Form for Assessment of Risk of Domestic and Family Violence against Women during the data collection period. This situation resulted in the exclusion of some surveys, because some professionals were not yet accustomed to offer the form for completion by the respondents.

The deep understanding of these variables allows for effective prevention, screening and follow-up actions to be carried out on women in order to reduce the harm caused by violence. As a form of prevention, it is considered that the findings of this study may contribute to health professionals, especially nurses, who are closer to the population, developing direct care, recognize the women with greater vulnerability and be prepared to identify them and assist them in a comprehensive way, with health actions directed to these groups.

It is also hoped that the study can contribute to the debate on the theme in academic spaces and the insertion of the theme in the university curriculum, allowing the creation of a culture of coping with violence against women throughout nursing training. The approach to the subject in graduation can help professionals feel prepared to act in educational actions in society, offering visibility and appreciation of women through support groups and protection.

Conclusion

This study aimed to present an overview of the police inquiries available in DEAM, tracing some characteristics of women who suffered situations of violence during the COVID-19 pandemic, in a municipality on the Western border of RS. The profile found in the results is consistent with the findings evidenced by the national literature, diverging on variables related to race, financial dependence of aggressors and criminal history of VAW. The profile that predominated in the analysis of the surveys was composed by young women, self-declared white, single, with elementary school, who did not depend financially on the aggressor and had children with him.

The analysis carried out during the pandemic period shows the increase in cases of violence, and the causal factors include measures of restriction, social isolation that resulted in more time of coexistence with the aggressors, the economic instability, uncertainties about the future, consumption of alcohol and other substances, gender roles, physical and mental workload, as well as women's vulnerability in situations of global catastrophes and instabilities. Given this scenario, it is essential to adopt strategies such as the creation of a network of support services for women, integrated and well structured, so that they can seek help in different places, with professionals trained to offer adequate and assertive service.

In addition, the restructuring of public policies is necessary, with the objective of ensuring integral and effective support that protects both the physical and emotional health of women and their children. The dissemination of campaigns and information materials on VAW, as well as the promotion of reporting services, shelters for immediate assistance and actions to raise awareness of the population on the subject, are essential mechanisms for reducing alarming rates of violence.

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