Representational contents of domestic violence against women among nursing students

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ABSTRACT
This study aimed to analyze the representational contents of domestic violence against women among nursing students. This is a qualitative research, based on the Theory of Social Representations. We collected the data from August to November/2014 by semi-structured interviews, analyzed by software. Thirty-three students participated, 16 from the initial grades and 17 from the final grades. We identified two categories: representational content acquired in the pre-university and university years. The initial grades listed high school, cases with family members and colleagues. Among the final grades, knowledge was acquired during academic weeks, research groups, practical activities, and internships. The knowledge of common sense is constant, especially between the students of initial grades and the reified, between the final series. The actions of the future professional life can base on personal experiences, reified common sense knowledge, and practical knowledge generated during graduation. It highlights the impact on training to provide assistance to women/persons in situations of violence.

Descriptors: Domestic Violence; Violence Against Women; Students, Nursing; Prática Profissional.

INTRODUCTION

Considered a public health problem, domestic violence against women (DVAW) affects women regardless of social condition, color, religion, culture or schooling. Globally, 35% of women have experienced violence at some point in their lives⁴. The Violence Map showed that Brazil is one of the first countries in the international feminicide ranking⁵. Since 2006, Law no. 11,340, known as Maria da Penha, aims at repress...
domestic and family violence against women\(^{(3)}\).

Brazil has a hotline, a free service\(^{(4)}\) originally known as Ligue 180. In 2014 alone, 52,957 reports of violence against women were reported, of which 51.68\% referred to physical violence, 31.81\% to psychological, 9.68\% to moral, 1.94\% to patrimonial, 2.86\% to sexual, 1.76\% to forced confinement and 0.26\% to trafficking\(^{(5)}\).

Faced with these significant indices, health professionals should recognize the various forms of DVAW. Often such professionals are the first contact after the aggression, and they must provide the victims with comprehensive and qualified assistance. However, professionals recognize the lack of qualification and capacity to act in situations of violence, evidencing lack of preparation\(^{(6-7)}\). In addition to gaps such as these, beliefs, myths and representations may constitute obstacles to comprehensive nursing assistance for the woman/person suffering with violence.

For that matter, universities have the social duty to train professionals capable of acting with responsibility and commitment on the national problems and health/disease situations\(^{(8)}\). Thus, the nursing graduation can provide opportunities for problematization and experiences related to the subject. Considering that the social representation of individuals or groups reconstitutes the reality with which they are confronted and to which they attribute a specific meaning\(^{(9)}\), we decided to investigate: What are the DVAW representational contents among students of the initial and final grades of a Nursing graduation course? The study aimed to analyze these contents.

### METHOD

This is a descriptive, qualitative study, a clipping of the Doctoral Thesis: "Social representations of nursing students about domestic violence against women", presented at Federal University of Rio Grande/RS. Since we believed that reified knowledge, acquired during nursing graduation, could influence the students’ representation about the DVAW by modifying it, we invited students from the three initial and three final grades to participate. We excluded those who rejected the invitation or missed classes during the collection period.

Between August and November 2014, we collected the data by applying a questionnaire regarding personal, social and academic information. Individual interviews, which we previously scheduled, were conducted. We developed a script with open questions regarding the pre-university experiences related to the theme, as well as its approach throughout the theoretical-practical disciplines.

There was a reserved room in the academic area for recording interviews, with the participants’ authorization. The average duration was half an hour. The TRS experts established that 30 interviews are the minimum quantitative number to recover representations in a group\(^{(10)}\).

The data treatment was by software Lexical Analysis by Context of a Set of Text Segments. The corpus, formed by the total of interviews, was divided into six classes according to the relationship between the reduced forms. The presented class contains 17\% of the corpus, corresponding to 138 of the total 800
Elementary Context Units (ECUs). These are formed by approximately three lines of text, varying according to the size of the corpus and the punctuation\(^{11}\). The lines were identified by the letter "D" (student) and the interview order number. Opinion No. 109/2014 approved the project.

RESULTS

Among the 33 students, 16 were from the initial grades and 17 from the final grades. As for the age group, 18 were between 17 and 23 years old and 15 were between 24 and 50 years old. The variable "grades" is not statistically associated; however, of the seven related interviews, five correspond to students of the final grades. This finding allows us to believe that reified knowledge, built along nursing graduation, predominates in representational contents.

The class has 122 major reduced forms with greater statistical association to the class (Figure 2). Among the words with higher \(\chi^2\) values stand out: *discipline* (\(\chi^2=115\)); *course* (\(\chi^2=99\)); *practical_activities* (\(\chi^2=95\)); *particip* (\(\chi^2=90\)); *event* (\(\chi^2=87\)); *appro* (\(\chi^2=86\)); *woman_discipline* (\(\chi^2=81\)); *rememb* (\(\chi^2=72\)); *high_school* (\(\chi^2=63\)); *class* (\(\chi^2=61\)); *subject* (\(\chi^2=60\)); *theme* (\(\chi^2=58\)); *epidemio_discipline* (\(\chi^2=52\)); *seminar* (\(\chi^2=47\)); *group* (\(\chi^2=33\)) *scho* (\(\chi^2=30\)); *lecture* (\(\chi^2=29\)); *week* (\(\chi^2=29\)); *college* (\(\chi^2=28\)).

The representational contents permeate the students’ contact with the DVAW theme. The reduced forms show that such contact occurred both in the pre-university period, through conversations with colleagues, activities during high school, and during the university period, through lectures, academic weeks, disciplines, research groups and practical activities. Each period was presented in a category.
Representational contents acquired in the pre-university period

The students considered the DVAW a relevant subject ($\chi^2=60$), but difficult to be approached. Recognizing that it requires greater reflections and learning for professional practice.

It is really an important issue, there is too much violence against women, many are in this situation and no one is free to assist a patient like that, we often do not know what to do because no more information has been given. (D63)

The students emphasized the dimension of the DVAW theme. In both the initial and final grades, the
media was cited as the first source of information on violence and the protective law.

Since school, in lectures, I have done studies on this during school, in the media and everywhere. (D71)

Newspaper, when it is about news. I learned a lot about Maria da Penha. Before even going to college, I knew about it. (D92)

Another contact with the subject was through cases in the colleagues' familiar environment ($khi^2=30$) and acquaintances or with the students themselves. These cases guide the knowledge of the common sense as verified, mainly, in the students' testimony of the initial grades.

The first few times I heard it was when I was still at school, cases of colleagues, in the family or my colleagues' neighbors. (D67)

In the context that I lived in the family environment[ ] most of my childhood was hard because I could not leave the house, I was afraid of not being able to save my mother. (D23)

There is emotional violence back home. My husband does not want me to study, but I'm studying. I have been blackmailed, but I'm not giving up anymore. (D24)

My colleague[ ], believed I had caused that, because the victims often blame themselves. Out of jealousy, he lost his temper and ended up committing aggression. To what extent are cultural factors involved? (D10)

During high school ($khi^2=63$), DVAW was the theme ($khi^2=58$), focused on essays, pamphlets, campaigns and commemorative dates. Violence was a subject ($khi^2=60$), addressed ($khi^2=86$) by healthcare professionals and university students. They recognized that the knowledge acquired in the pre-university period was insufficient, since they remembered ($khi^2=72$) the subject only vaguely.

School activities related to Portuguese were topics for writing. (D71)

They said it was Women's Day on March 8, there were several related topics, violence, cancer, but not much. (D63)

There was a campaign, some university students distributed leaflets with explanations. It was more about physical violence, the image of the pamphlet was a woman with a black eye. I do not remember exactly. (D126)

Representational contents acquired during the university period

The students distinguished knowledge of common sense from the reified. In this sense, they remembered to have acquired knowledge both through the media, and during college ($khi^2=28$). The students of the initial grades sought to list, even superficially, what they have learned so far in the graduation course.

All I heard about was in the media or when I went to college, not at school. (D65)

As fas as I remember it was at college[ ] not only about women, it was violence in general, elderly, children[ ], that some women do not only suffer physical, but verbal violence, which hurts more to be cursed and humiliated depending on the situation, in public. (D124)

On the other hand, the students of the final grades recognized college as the place to discuss the subject, nevertheless they affirmed to be insufficient for the future professional practice. It should be noted
that, despite the unpreparedness feeling to act in DVAW situations and the social role of college in vocational training, it is necessary for individual students and professionals to take responsibility and to commit themselves to their own capacity to face the problem.

We need a lot more preparation during college. [ ] we need more events, more disciplines that deal with this. There are so much realistic simulation in the class, one about it (would be great). Bring it to you. (D36)

We are not fully prepared to act in unexpected situations. There are things you cannot prepare for in college. Getting ready to assist a woman beaten up by her husband is not something to get ready to. It’s something that always happens, the way you talk to the person, how you’re going to approach the subject. It is a maturing process that we must take into account, and not depend on a college. (D92)

Seeking to go beyond common sense, some students remembered courses (khi²=99) and events (khi²=87) promoted during the course. However, they reported not participating by option or by schedule incompatibility of curricular activities. In these cases, the students said they were interested in participating in future events. We observed the recognition that there are spaces for the reified knowledge construction about DVAW, but they are not always used.

Some event, the academic week had a lecture, but I did not participate. I heard about it. (D78)

I heard of an event[ ] I was interested in participating but I was in the basic network. (D132)

There was an event at the beginning of the year, from the City Government or university. But I could not attend because I had class. (D65)

The reified knowledge about DVAW was constructed from seminars (khi²=47) and lectures (khi²=29) developed in the academic week (khi²=29). The importance of Research Groups (khi²=33), as well as the student initiation to be part of it, taking advantage of the opportunities to increase the reified knowledge and transmit it to clients are important.

I heard something about it, in the research group we gave a small talk in the group about pregnant and puerperal women in the maternity ward. We have dealt with violence against women. (D39)

Some disciplines (khi²=115) were listed by the students for having addressed the DVAW theme, evidencing the construction of the reified knowledge. Those in the initial grades cited the epidemiology discipline (khi²=52), which broadly discussed the theme in class (khi²=61). Those who had not taken yet a discipline that had addressed the subject showed expectations regarding the development of the course, referring mainly to the discipline of women’s health (khi²=81).

The epidemiology discipline brought as a subject for discussion, in not only women, but also the elderly. (D124)

I am looking forward they take a closer look at this subject, especially in the discipline of women and what could be done in those cases so I can be more prepared, because it will certainly happen during our professional life. (D33)

I will prepare myself, I hope to learn a lot in the discipline of woman, child, health of the worker. (D32)

On the other hand, the students in the final grades listed health of children and women disciplines (khi²=81), who approached the theme through seminars(khi²=47) or bringing special guests. Some have
stated that they vaguely remember the approach to violence theme, requiring a more specific and deep problematization.

We had a seminar about children, regarding adolescence and violence in general, violence was one of the items addressed. I do not remember having a specific approach about women. (D78)

In the discipline of woman. Two lawyers were invited and they spoke a lot about the Maria da Penha Law; how women should look for and what to do. It was only this lecture, there was no other class talking about it. (D92)

The students listed the reified knowledge built through the practical activities and internships. Those in the initial grades made hospital visits, but admitted not to remember if there was any situation related to DVAW. On the other hand, those who have been involved since the beginning of the graduation in extra class activities and projects offered by the course demonstrated greater sensitivity to the theme, although little instrumentalized for assistance.

In the practical activities, I never saw that; I made four technical visits in the hospital, if I saw it I did not know it was violence against women. They did not say that. (D126)

In a research collection, in a specific situation, a woman did not want to respond. It was very succinct and she was full of bruises. She did not let anyone get in the house and did not talk to anyone, it was on the street. Her face was bruised. We cannot judge! We offered help if she needed anything, but since she did not even want to answer the project questions, it would be very difficult to reach with more personal questions, if she needed any support, we left our phone number. (D128)

The students in the final grades referred to the extracurricular activities and the internships as opportunities of contact with DVAW situations, making possible to build the reified knowledge. In these spaces they follow the professionals during the care, observing reactions, actions and measures taken in relation to violence.

In the practical activities a woman arrived with her husband, and her face was completely deformed. [ ] He kept waiting [ ], I realized that the physicians could not hide the shock, [ ] because the provided assistance. I'm part of the trauma league. I felt pity in the worst sense for understanding that she was continuing to go through that because he took her there and then left with her. (D132)

At a woman's internship, a patient told her partner she was pregnant and he tried to throw her off the pier. [ ] We were told not to do anything at the time because she might not go through prenatal care. It was agreed with the team that when she came again, they would investigate this story better. (D54)

Primary care is the field of action, especially during the curricular internships. This space is fundamental for professional construction. The students reported following the nurse's performance, realizing the importance of bonding and trust with women. They recognized the difficulty mainly with issuing opinions and pre-judgments. Near the conclusion of the course and based on the reified knowledge, they considered some points that should have been deepened in basic disciplines.

In the basic network we assist the nurse. [ ] Patients trust the nurses, everything they said, patients agreed, said they would do it. I felt confident about the situation because it seems that it was resolved at that time. [ ] I was very sad, two
feelings, sadness and impotence, not knowing what to do, but the nurse was leading[ ] We went to the NASF (Support Centers for Family Health), to visit along with the agent to observe the situation. (D36)

When a woman arrives, the report is in the obstetrical center, where I did my internship. No one believed, but she was raped by her husband. We have no preparation, because our discipline of psychology is very superficial, it is shallow[ ]. We do not address postpartum depression, how to approach a patient victim of violence[ ]. Admission, previous history, physical examination were performed, [ ] if she intended to go back home... she was told that there is that shelter house where she can stay along with the children. No one would compel her to report or judge if she wanted to go home, I found that was the correct conduct. (D39)

Despite the failure identified in the discipline, it was possible to supply this knowledge during the curricular internship. A propitious moment for students to deepen their theoretical knowledge, solve doubts and fill in the gaps that still exist.

**DISCUSSION**

We consider that "social representations have their roots in the concepts elaborated by human groups as a product of the continuous interactions and worldviews of their members"(10). The common sense and reified knowledge permeates the construction of DVAW representation. For that matter, the representational contents evidenced the students' contact with the thematic, in the personal environment, pre-university and during the graduation.

The students in the initial and final grades recognized the importance and the difficulty of approaching DVAW, as well as the need for further reflection. Violence is a public health problem with severe consequences for women in the physical, mental and reproductive spheres(12). In addition, the students listed the written and television media as sources of information. In 2014, the television media contributed to having the Women's Assistance Center come to the knowledge of women in situations of violence, taking care of 47% of the demand for the service(5).

We emphasized that in order to produce representations, the phenomenon must have cultural and social relevance, be everywhere at all times, both in collective and individual space(13). Therefore, especially students in the initial grades reported the first contact with the phenomenon through cases occurred in personal life, with friends, colleagues and family members. Personal experiences with situations of violence can anchor the representation, influencing the professional practice of the future nurse.

A survey of Japanese college students, including health professionals, found that most of them heard about violence at dating through the media, school/university lectures, friends or family, and out-of-school/university seminars(14). In the same way, friends and family members were cited by the students as sources of information.

Reinforcing common sense knowledge, some students reported the occurrence of personal violence, such as the prohibition of studying and the consequences for the children. A survey conducted in Pakistan found that women in situations of violence revealed that their mothers were also beaten by their husbands,
thereby transmitting tolerant behavior across generations in societies where gender disparities are culturally rooted\(^{(15)}\).

Evidencing the reified knowledge of DVAW, the students recognized the approach during graduation, through seminars, lectures and academic weeks. However, some students prioritized other academic activities at the same time. It is highlighted the thematic approach in disciplines such as epidemiology, child health and women’s health. This was also identified in a survey carried out with nursing students of the last year at a university located in the State of Rio Grande do Sul\(^{(16)}\).

A study carried out with students of the Supervised Curricular Internship identified that the supervisor nurse is considered a model to be followed after graduation. Therefore, the nurse must be aware of his/her responsibility as a reference for the student. The authors emphasize that the internship is an unparalleled opportunity in the student formation, when he/she may suffer influences on their identity and their profile as future professionals\(^{(17)}\). Another research carried out with nursing students identified that the theme should not be addressed only in the discipline of women, but debated throughout the course and with a higher course load\(^{(16)}\).

The unpreparedness feeling to act in DVAW situations is a constant among the students of the final grades. In 2013, a study carried out with students from Spanish universities identified that, although they were sensitized, the participants were not prepared to act. The study also identified that the interventions proposed by university students were based more on popular knowledge than on specific training\(^{(18)}\).

Following the completion of the course and based on reified knowledge, the students evaluated the basic disciplines such as psychology, pointing out weaknesses that should have been deepened by the nursing perspective. Similarly, a 2013 survey of students in the final year of a nursing course in a university in the south of the country showed that the theme violence should be worked on from the beginning of the course, addressed continuously over the semesters, but especially in the final years, due to the closeness of the course ending\(^{(16)}\).

The students in the final grades emphasized their responsibilities and maturity to deepen their knowledge and not just wait for college. Maturity was also listed in another study with nursing students as something necessary to relate theory to practice in relation to DVAW\(^{(16)}\).

The basic and professional disciplines are seen as generators of reified knowledge, mainly in the diverse fields of the students’ action. Each student will be able to base his/her actions on the professional routine based on his/her personal experiences, on the common sense and reified knowledge, as well as the practical knowledge generated during graduation. It is believed that professional technical knowledge\(^{(19)}\), a new form of knowledge construction recently proposed in the Theory of Social Representations, as well as the representations can contribute to the students’ performance in DVAW situations.

**FINAL REMARKS**

The representational DVAW contents permeate the students’ contact with the theme. Thus,
knowledge of common sense is constant in the DVAW representation. The students in the initial grades listed media, lectures during high school, cases that occurred with them or with family members and colleagues in order to build their representations. Those of the final grades evidenced that the reified knowledge acquired throughout the course permeates their representations. Thus, they cited the academic weeks, research groups, activities and curricular internships. It is noteworthy that the disciplines of epidemiology, child's health and women's health were listed as sources of knowledge.

The study achieved its objective; however, the results constitute a first analysis of a specific group. To overcome such limitations, it is evident the need to expand it to other areas of health, in different contexts and universities. Among the possible impacts, we highlight the training of students to assist women/people in situations of violence. Therefore, we initially searched for space in the discipline of women's health to discuss the theme with the students of the nursing graduation course, in which this research was carried out. In the long term, we expected that this study might alert other higher education institutions, especially in the nursing area, as well as health services, sensitizing those responsible for inclusion in the programmatic contents, team meetings, problematizing ethical, political and legislation issues.

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