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LEGAL MEDICAL ASPECTS IN SEX CRIMES: A BIBLIOGRAPHIC REVIEW

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Abstract: The various occurrences of violence, manifested in physical or psychological form, suffered throughout history by the female population can be considered as an affront to fundamental rights and human dignity, provided for in different Brazilian legal diplomas. The reality of omission on the part of many authorities and the dissemination, in many media, of a culture of omission to these practices of violence, are not receptive in the social context, which, in the face of repeated aggressive situations against the female public, has been participating in different spaces of struggle in search of the defense of their rights, understanding that this role is part of their essence, as a profession dedicated to the defense of rights. The bibliographic review on screen brought some important elements that support the debate around sexual violence with regard to medical civil liability, understanding that there is no room for omission of any organized group in society, which has as its principle the preservation of dignity human

Keywords: Female audience. Sexual violence. Human dignity.

INTRODUCTION

Sexual crime is one of the aggravating factors in public health, according to statistics, every 11 minutes a woman is a victim of sexual violence in Brazil, research shows that 90% of women are afraid of suffering some type of sexual violence, among this number young people aged between 16 and 24 represent the majority of the indicated portion.

As women are the main targets of this type of crime, it is important that nursing professionals know how to handle the situation, treating them with humanity and respect.

In view of this information, the study will seek to answer the following question: what is the medical liability for women victims of

sexual violence?

As an attempt to respond, the general objective is to understand the role of this professional with women victims of sexual violence, in order to broaden their vision, emphasizing the importance of caring for victims of this crime.

The awareness of these professionals who deal with these cases enables collective reflection, in addition to strengthening interpersonal relationships and stimulating joint action that aims to provide security to assist in the differentiated reception of victims of sexual violence.

This is a descriptive study, with a qualitative approach, carried out through bibliographical research, which aims to understand the legal medical aspects in the context of sexual crime, according to exploratory reading carried out in works in the area.

According to Marconi; Lakatos (2007), qualitative research considers a relationship with a bond between the real world and the subject, so such a relationship cannot be translated into numbers. The interpretation of phenomena and attribution of meanings are essential in qualitative research. It requires the natural environment as a direct source for data collection, with the researcher being a key part of the research. Therefore, researchers tend to analyze their data inductively, making it descriptive. The process and its meaning are the main focus of the approach. According to the authors, descriptive research aims to describe the characteristics of a given phenomenon, population or the establishment of relationships. It assumes, in general, the form of data collection.

For Gil (2006), the fundamental advantage when preparing a bibliographical research is to leave the researcher with the coverage of several phenomena, but with the disadvantage of harming the quality of the research, since there are probabilities that the secondary

sources contain mistakes, generated by the way erroneous collection and processing of data.

Literature review is meticulous and extensive analysis, analyzing and defining topics, authors, words and data sources. Thus, the review is considered the starting point for scientific research, showing the topic addressed in new and different ways (CONFORTO; AMARAL; SILVA, 2012).

The literature review was established on academic production sites, with articles and texts produced between 2005 and 2018, with rare exceptions, that contained the terms: sexual violence, reception, care and humanization.

WOMEN IN BRAZILIAN SOCIETY OVER TIME

Over the years, the woman has carried the stigma of being a subject with reduced potential compared to the male figure. This factor is crucial when addressing the issue of violence against women, since these aspects are still present in society today (NOGUEIRA, 2012).

The meaning of the word feminism is quite complex, as it is not only about the defense of women's rights, but can also be interpreted as a political movement whose main objective was to abolish the oppression imposed on women. This movement boosted several studies that sought to identify the sources of inequalities associated with sex/gender as well as the best way to combat them (NOGUEIRA, 2012).

In the conception of Collin (2012), feminism has a history of approximately two centuries and its main objective is the constitution of equal spaces between men and women, taking into consideration, the theories of equality.

VIOLENCE AGAINST WOMEN

According to the World Health Organization (WHO), studies show that about 30% of women in general are victims of violence caused by their partners, this same study also points out that 35% of women have already been victims of at least one type of aggression whether in their home environment or even in other environments, at some point in their lives (XAVIER; SILVA, 2019).

Women have always been considered inferior to men, since childhood when the girl won (broom, squeegee, stove, dolls) while the boys won (cars, professional games, ball). Women were seen only as caregivers at home, who were there exclusively to serve their parents, husband, brother and take care of their children (SAFFIOTI, 2011).

As taught by Teles; Melo (2003), the definition of gender is understood as a power relationship, as the roles of men and women are different, creating the illusion of men having the power to control women's freedom. Who has never heard "a man who is a man does not cry", "your duty is to be strong to protect the women of the house"? While women are always victimized as the weaker sex, created to take care of the home and obey their husbands' orders.

It is common to say some of these phrases to girls who are beaten by a boy: "He hit you because he likes you" "if he fights with you it's because he loves you". A totally flawed act, as these phrases put in the minds of children that violence is an act of love (SAFFIOTI, 2011).

By saying this to a child, you teach that violence is part of love. Saying that boys act like this because they are boys is not correct, after all, it is only saying that the boy is aggressive because he is a boy, or because he feels something for her and does not know how to express himself (SAFFIOTI, 2011).

According to Saffioti (2011), it can be

said that gender violence is characterized by inequality of power, based on a reflection of the sexist society. Gender is the main factor in violent episodes, as the aggressor's justification is always that he attacked her because his wife did not want to follow his orders and what he learned is that women have to follow men's orders.

It was from the 19th century, with a capitalist system, that there was the industrial revolution, when women left their homes and started to work. Even with such a revolution, women still lived in unfavorable conditions, being submissive and considered the property of the men they lived with (XAVIER; SILVA, 2019).

Gender violence was characterized as violence against women by the understanding of the feminist movement in the seventies, as women have always been the main target of domestic violence. It happens due to the inequality between men and women, the use of women as an object, and the inhuman treatment that many receive because they are women. The salary inequality for women who have the same function as men and for suffering harassment in their work environment (TELES; MELO, 2003).

While men are guaranteed all rights, when women claim what is their right, they are humiliated, mistreated, belittled, attacked because society has labeled that woman was made to serve and not to give orders (XAVIER; SILVA, 2019).

Women victims of this type of crime who do not deal with the sexual abuse they have already suffered in some period of their lives, usually become insecure people, with low self-esteem, they become people with great difficulties to trust their partners and family, they become They become people with a great need for affection and affection, in addition to often becoming people with extreme difficulty in becoming sexually involved with their future

partners. Women who have been victims of sexual violence in childhood become prone to establishing abusive relationships, as they carry these traumas from their childhood or adolescence for many years (MEDEIROS, 2011).

According to Freitas (2016, p. 278) trauma is defined as any traumatic stress whether it is a life-threatening situation or a strong emotion that the individual goes through, women victims of this crime can develop harmful traumas that some carry for their whole life, every human being has a reaction to something traumatic, certain people manage to forget such an event more easily, that is, in a short period of time, while other people can take a longer period to overcome it, there are still some cases where individuals trigger an intense depression in the face of such a traumatic event.

Sexual violence can trigger numerous negative reactions in the victims of these crimes, such as depression, post-traumatic stress disorder, social withdrawal, sexual dysfunction, difficulty in maintaining a loving relationship, these are some examples of trauma that can originate after a crime of sexual violence (FREITAS, 2016).

According to indicators, it is noted that the crime of sexual violence against women has become increasingly frequent, so the health professional must know how to position himself in a way that he does not expose his opinion. Studies indicate that women victims of sexual violence need humanized assistance in their interaction with the health professional, but these professionals, when caring for these victims, often need to deal with their anguish in the face of limitations and sensibly express themselves (REIS et al, 2010).

THE DIGNITY OF THE HUMAN PERSON AND THE LEGAL MEDICAL ASPECTS OF SEXUAL CRIMES

The dignity of the human person underwent different understandings during the evolution of humanity, in ancient Rome it was considered a condition that the individual occupied before society, as well as its recognition before others (MELLO, 2017). It can be said that the reference of dignity, at that time, was about the status that the individual had.

However, in medieval times, the dignity of the human person was related to Christian, that is, in transcendental forces (MELLO, 2017).

However, the dignity of the human person can be seen from two aspects, dignity as a moral value, of honor and dignity as a value inherent in the human being, while the first is considered casual and not inherent, the second is inherent to every human and universal being, because, currently, the two are interconnected (MELLO, 2017). It is noted that in the end, the two hypotheses become in fact only one.

Article 1 of the Constitution of the Federative Republic of Brazil of 1988, provides in its item III, the explicit principle of human dignity as a Constitutional norm.

However, the dignity of the person cannot be limited in its scope, since it is applied in all areas that are relevant to the human being and had its consecration according to historical and cultural criteria, when there was a need for a norm to protect the individual and that its applicability was not restricted but encompassed in all spheres (CAVALCANTE, 2007).

It is noticed that the dignity of the human person is inherent to every human being, in addition to being irrevocable, it ensures the realization of fundamental rights, does not allow the occurrence of excess or omission of

the state and society towards the human being, its effectiveness is greater application with regard to the violated rights of the individual when he is in a vulnerable situation, always observing the concrete case and also the needs of each person.

Where there is no respect for life, for the physical and moral integrity of the human being, where the minimum conditions for a dignified existence are not present, where there is a limitation of power and where freedom, autonomy and equality of rights are not minimally assured, there will be no implementation of the Constitutional principle of human dignity (CAVALCANTE, 2007).

It is evident, then, that the principle of the dignity of the human person makes the human being recognized with absolute priority and his fundamental rights are protected, without distinction of race, creed, etc. All are equal and have the same rights. Even if you take actions that are not acceptable by law and suffer the necessary sanctions, excesses will not occur and your dignity will always be preserved.

This way, considering the effects of the principle of the dignity of the human person, as constitutionally provided, many aspects of protection that the Law makes available began to cover new elements, in particular, what refers to women and those under eighteen years of age.

The assistance and interaction of health teams must be based on attitudes that allow patients and their families to talk about their feelings, identifying problem areas, providing information and clarifying their perceptions. They must help them in the search for solutions to problems related to treatment, providing care that favors, among others, psychological aspects, such as availability and an attitude of acceptance (AZEVEDO; SANTOS, 2011).

Most hospitals have their ethics committees, which favor spaces for discussion, stimulating

questioning, broadening the discussion, respecting the principles of bioethics, observing various views on the same topic, accepting differences, hierarchy of conflicts, seeking to define the terms and clarify the situation under discussion (KOVACS, 2008).

In addition, the technical language of science used by doctors creates a barrier that ends up preventing the patient from understanding what is happening with his own body and establishing a cooperative relationship between both (ALMEIDA, 2015).

Assistance from health teams throughout the treatment process must be based on attitudes that allow patients and their families to talk about their feelings, identifying problem areas, providing information and clarifying their perceptions. They must help them in the search for solutions to problems related to treatment, providing care that favors, among others, psychological aspects, such as availability and an attitude of acceptance (ALMEIDA, 2015).

This way, welcoming is caring, seeking and understanding the distance between the person being cared for and their caregiver. Such reflection leads to the ability to carry out nursing care for the victim of this crime of sexual violence in this scenario associated with humanized action, because of welcoming, listening, touching and silencing. Nursing care in welcoming actions represents humanization of care for the victim as an association of measures, such as the conduct and attitudes of health professionals towards the victim (OLIVEIRA; EMANUELLE; BARRETO, 2019).

Therefore, it is understood that the doctor's care in welcoming the woman victim of sexual violence requires more than technical competence, it requires individual care that goes beyond caring and treating, women victims of sexual violence are assisted in units of urgency and emergency due to

issues resulting from sexual violence, such as trauma, suicide attempts, panic attacks and anxiety attacks, some are also referred to primary care services due to traumas that are not precise, such as phobia, depression, etc. Consequently, the nursing professional must create a bond with the victim of this violence, as this way he is able to help with the various degrading feelings caused by this type of crime (OLIVEIRA; EMANUELLE; BARRETO, 2019).

FINAL CONSIDERATIONS

It is not possible to understand the issue of violence against women without observing the background of barbarism and prejudice that have been alternating in Brazil, where some groups, based on different stereotypes, build the appropriate scenario for them to distill their hatred and intolerance.

In order to offer a contribution to medical professionals and students in the area, their role in this space was discussed, seeking to describe and reflect on the main assistance and reception activities that are incumbent upon the professional when dealing with women victims of sexual violence.

This way, it is necessary to emphasize that, for the realization of the welcoming, it is important that the team feels welcomed to then welcome, and that the development of humanistic actions goes beyond the physical and technological structure, as it involves commitment, professional profile, interplay between team, frequent discussion on the subject of humanization, technology and, above all, the transformation of theories into concrete actions that cause changes in hospital routines.

Allied to this, there is the establishment of the bond created between the health professional, the patient and his family, as they see in this professional the possibility of considering aspects that are perceived beyond

what happened, because during the service they can talk about other matters that are not related only to the violence suffered, thus rescuing a little of the person, desires, etc.

As a professional, it is understood that it

is necessary to further develop the work in search of greater appreciation, showing that treating the physical body is essential, but that mind and body work together, essential items for the integration of human dynamics.

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