DOI: 10.1590/1413-81232017229.22732015

Femicides: a study in Brazilian state capital cities and large municipalities

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Abstract *This study analyses the relationship between femicides and indicators of socio-economic condition, demography, access to communications, and health situation, in Brazilian state capitals and large-population municipalities. It is an ecological study using the standardized mean coefficient of female mortality due to aggression as a marker for femicide in the years 2007–09 and 2011–13. The Pearson Correlation test was used for the statistical analysis between the outcome and 17 independent variables, and those that were statistically significant ($p < 0.05$) were introduced into a multivariate linear regression model, using backward elimination. In the first three-year period the average rate of femicide was 4.5 deaths per 100,000 women, and in the second period it was 4.9/100,000. Poverty ($\beta = –0.330$; $p = 0.006$), Pentecostalism ($\beta = 0.237$; $p = 0.002$) and male mortality by aggression ($\beta = 0.841$; $p = 0.000$) were associated with femicides. The negative association between poverty and feminine deaths indicates a paradoxical relationship, in that women who die in the richer regions are mostly poor. A relationship was also found between gender violence, fundamentalist religious beliefs, and urban violence.*

Key words *Homicides, Women, Gender, Violence against women*

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Introduction

Gender violence, a frequently-occurring social fact, takes place in a *continuum* in which the most severe consequence is the woman's death. The concept of femicide was identified as murder of women due to their being women, a crime defined by Diana Russel[1] as a type of sexual terrorism, a social mechanism for keeping women under control, in a public masculine manifestation of power[2].

In the absorption of Russel's original concept, there were countries that adopted the term 'feminicide' and others that opted for the term femicide. In Brazil the term '*feminicídio*' is used, and it was recently given a definition in legislation, accompanying the legislation of other countries of Central and South America such as Costa Rica, Chile, Guatemala and El Salvador[3].

Gender culture and hierarchies in patriarchal society, as well as structural violence, are determining factors of femicide[4]. The frequency of femicide is greater when there are social inequalities, armed conflicts, migration, gender discriminations and exercise of hegemonic and aggressive masculinity[5-7].

Femicides may be categorized as intimate, when the perpetrator is a man known to the woman; non-intimate, with or without sexual violence; by connection, in which one or more women are killed in the defense of others, and executions of women perpetrated by gangs, mafia groups, drug dealers or members of the police[8-11].

Women have a higher risk of being murdered by their partners than men do. In the United States 42% of murders of women were committed by an intimate partner in 2012, compared to 5% of husbands killed by their wives[8]. Repeated and growing conjugal violence, and also threats of death after conflicted separation, are risk factors for women[9-11].

Studies show that between 60% and 70% of murders of women are femicides and the victims are young, poor, members of ethnic minorities, migrants or sex workers – that is to say, those affected are predominantly vulnerable women[10,11].

Worldwide, femicides are tending to grow[8,12]. Central America is one of the locations with the highest level of occurrence[6,11]; in the United States femicide is one of the primary causes of death in women, and the highest in Afro-American women[13]. In Brazil, in the last 30 years, murders of women have increased significantly: the rate has risen from 2.3/100,000 to 4.6/100,000 women[12].

Femicides occur more frequently in urban conglomerations and cities or regions with higher population density[5]. This study is an analysis of the relationship between femicides and a series of indicators in Brazilian cities with large populations.

Method

This is an ecological study that analyses the relationship between female mortality due to attack and variables indicating socio-economic and demographic status, access to communications and health, in capital cities of Brazil's states, and in Brazilian municipalities with a population of more than 400,000 – a group of 58 cities. Secondary data from the Health Ministry (DATASUS), the Brazilian Geography and Statistics Institute (IBGE/SIDRA/PNAD) and the Economic and Statistical Foundation (FEE) were used. The data are for the years 2007–2009 and 2011–2013. The rates of female mortality due to aggression were standardized, using the standard population supplied by the World Health Organization for the period 2000–2025. The standardization makes it possible to carry out comparisons between regions with different demographic and age patterns, as is the case for the Brazilian state capitals and municipalities selected.

This study is part of a survey financed by the CNPq entitled "Femicides, and Other Murders Relating to Gender in Rio Grande do Sul", in which three ecological studies were made with different territorial cross-sections. In the first, the distribution of feminine deaths by aggression was analyzed by states of the Brazilian Federation[14]; in the second, deaths were distributed in the micro-regions of the State of Rio Grande do Sul[15]. This present study investigates the variables associated with feminine deaths by aggression in the most urbanized and densely populated regions of the country.

In Brazil, femicide is not specified in the death certificate, making it impossible to identify this crime through the secondary data obtained from the mortality system. Thus, the total of feminine deaths by aggression obtained in the SIM/DATASUS was used as an 'approximate marker' for femicide. The possible overestimation of deaths is compensated by sub-notifications of life events, due to the failings in the coverage of the information system.

Feminine homicides correspond to the range X85 to Y09 in the External Causes chapter of

the 10th edition of the ICD-10. The explanatory variables comprised 17 indicators, most of them expressed in percentages, considered in their totality or differentiated by gender and grouped in four thematic blocks:

- *Economic:* Gini Index; Human Development Index; average monthly income; poverty; women as head of family.
- *Demographic:* Woman's marital status; illiteracy; people not born in the municipality; race/color; religion.
- *Access*: Home has internet; homes with fixed or mobile phone.
- *Health*: AIDS mortality rate; cervical and breast cancer mortality rate; male rate of mortality by aggression; proportion of deaths from undefined causes; doctors per 1,000 population.

The statistical analysis was made using the SPSS program, version 18.0, using as outcome the standard mean coefficient of female mortality by aggression for the two three- year periods. The statistical association between the indicators was verified using the Pearson Correlation test, and the variables with statistical significance ($p < 0.05$) in the bivariate analysis entered into the multiple linear regression model, using backward elimination. Having in mind that the variables that remained in the final regression model were the same for the two three-year periods, the more recent statistical analysis of the outcome (2011-2013) will be presented.

The survey was conducted within the standards required by the Helsinki Declaration, and the project was approved by the Ethics Committee of the School of Public Health of Rio Grande do Sul.

Results

There were 4,368 female deaths by aggression in the years 2007-2009 and 4,834 in the years 2011–2013, in the 58 municipalities of this study, representing an increase of 10% between the two three-year periods. These locations comprised 1% of Brazilian municipalities, 33% of the feminine population and 39% of female deaths by aggression.

The average coefficient of female mortality by aggression in the first three-year period was 4.5 deaths/100,000 women, and in the second period was 4.9/100,000 women. In 58% of the municipalities there was an increase in the rates between the two periods. The lowest rate found was 0.7/100,000 in the municipality of São José do Rio Preto, São Paulo State, and the highest was 16.3/100,000 in the municipality of Serra, Espírito Santo State, both in 2007–2009.

The coefficient was higher than five deaths per 100,000 women in 20 cities in the first three-year period, and in 25 in the second: 10 of these were capital cities of Brazilian states: Rio Branco, Porto Velho and Boa Vista in the north of the country; Maceió, Salvador and João Pessoa, in the Northeast; Cuiabá in the Center-West; Belo Horizonte and Vitória in the Southeast; and Curitiba in the South. The State of Espírito Santo had the municipalities with the highest national rates: Vila Velha and Serra, although they showed a reduction from the first period to the second (Table 1).

Table 2 gives the averages of the two three-year periods for the social-democratic characteristics of the victims and the location of frequency of the crime. There was a predominance of black women (whose risk of dying was twice that of white women), single women (70.3%), young women (72.0% aged 10-39) and women with low level of schooling, although in 6.3% of the crimes women had more than 12 years of schooling. 22% of the deaths took place at home.

Table 3 describes the independent variables of the study listed in four blocks: socio-economic, demographic, access to communications, and health. The means, standard deviations, maximum and minimum values, and the source of the data were presented for the two periods of the study.

Table 4 presents the results of the Pearson correlation test between coefficient of female mortality by aggression and the independent variables in the three-year period 2009–2011. There was a negative association between female mortality by aggression with women who were separated, and proportion of poor women. A positive association was found between female mortality and negro population, people of Pentecostal religion and masculine mortality by aggression.

Table 5 shows the results of the multivariate analysis between femicides, and the variables that were included in the final regression model: poor, black, separated women, Pentecostal religion, and male mortality by aggression. After the adjustment of the regression model, three variables remain significant; there was negative correlation with poverty ($p = 0.006$), and positive correlation with Pentecostal religion ($p = 0.002$) and male mortality by aggression ($p < 0.000$).

Table 1. Standardized coefficients of female mortality due to aggression in Brazilian state capitals and municipalities with population over 400,000, 2007-2010 and 2011-2013.

Municipality	Coefficient of aggression against women		Municipality	Coefficient of aggression against women	
	2007-2009	2011-2013		2007-2009	2011-2013
Acre			**Pernambuco**		
Rio Branco	6.7	5.7	Recife	8.1	4.6
Alagoas			Jaboatão dos Guararapes	6.5	5.5
Maceió	7.0	8.9	**Piauí**		
Amapá			Teresina	2.9	3.1
Macapá	4.2	4.2	**Rio de Janeiro**		
Amazonas			Rio de Janeiro	3.6	3.2
Manaus	3.6	6.1	Campo do Goytacazes	5.9	5.8
Bahia			São Gonçalo	3.9	3.6
Salvador	5.1	7.6	Duque de Caxias	4.1	4.6
Feira de Santana	2.8	4.1	Nova Iguaçu	4.5	4.8
Ceará			Belford Roxo	5.1	2.6
Fortaleza	3.2	6.8	Niterói	6.3	4.4
Distrito Federal			São João de Meriti	2.7	3.0
Brasília	4.4	5.0	**Rio Grande do Norte**		
Espirito Santo			Natal	3.4	4.8
Vitória	7.3	7.1	**Rio Grande do Sul**		
Vila Velha	10.8	10.3	Porto Alegre	5.5	4.8
Serra	16.4	14.2	Caxias do Sul	3.2	4.1
Goiás			**Rondônia**		
Goiânia	4.6	7.0	Porto Velho	5.8	8.1
Ap. de Goiânia	5.8	9.7	**Roraima**		
Maranhão			Boa Vista	7.7	6.1
São Luís	2.5	4.4	**Santa Catarina**		
Mato Grosso			Florianópolis	2.4	2.9
Cuiabá	6.3	5.8	Joinville	2.2	2.3
M. Grosso Sul			**Sergipe**		
Campo Grande	3.2	4.1	Aracaju	1.8	4.4
Minas Gerais			**São Paulo**		
Belo Horizonte	5.7	6.1	São Paulo	2.7	2.2
Betim	7.0	8.4	São José do Rio Preto	0.7	2.4
Uberlândia	2.9	5.0	Guarulhos	3.3	3.2
Contagem	5.1	6.0	Mauá	4.1	3.9
Juiz de Fora	2.3	2.7	Santos	2.2	1.8
Paraná			Campinas	1.9	3.0
Curitiba	6.2	5.1	São Bernardo do Campo	2.1	1.2
Londrina	2.6	3.9	Osasco	3.9	2.2
Paraíba			Santo André	1.7	1.4
João Pessoa	5.6	9.2	São José dos Campos	2.4	1.5
Pará			Sorocaba	2.5	2.7
Belém	3.7	6.6	Ribeirão Preto	2.4	1.8
Ananindeua	5.3	6.5	**Tocantins**		
			Palmas	3.5	6.1

Discussion

This study showed an increase in femicides in Brazilian state capital cities and major cities in the period analyzed, principally among young, poor, black and single women and those with a low level of schooling. Further, a relationship was found with poverty, evangelical religion, and

Ciência & Saúde Coletiva, 22(9):2963-2970, 2017

Table 2. Average frequencies, percentages and coefficients of female mortality from aggression. Brazilian state capital cities and municipalities with population over 400,000 – 2007-2009 and 2011-2013.

Variables	Cases	%	Coefficient/100,000
Age group (years)*			
1-9	112	2.5	0.7
10-19	768	17.3	4.9
20-29	1413	31.9	7.6
30-39	1010	22.8	6.2
40-49	571	12.9	4.1
50+	506	11.4	2.4
Number of years' schooling**			
None	60	1.4	-
1-3	72	10.9	-
4-7	1348	31.1	-
8-11	973	22.5	-
12+	273	6.3	-
Race/color***			
White	1509	35.1	3.0
Black	2598	60.4	5.3
Other	16	0.4	-
Marital status****			
Single	3036	70.2	-
Married	587	13.6	-
Other	360	8.4	-
Location of the event*****			
Health establishment	1429	32.9	-
Home	969	22.3	-
Public street	1420	32.6	-
Other	504	11.6	-

*45 ig; **1.202 ig; ***174 ig; **** 342 ig; *****26 ig.

male homicide. The association between femicide, areas with high prevalence of evangelical religion, and male violence has been discussed in the past in other surveys[14-16]. The inverse relation with poverty is a paradoxical finding, in that various surveys on femicides indicate that poor women are more affected[11,13].

This contradiction can be explained by the fact that in more conservative communities, such as in small towns in the interior of Brazil, the rules of gender are more rigid and women remain submissive, strictly complying with the roles designated to them by the culture. This condition causes them to put up with situations of violence for longer periods of time, to avoid conflicts and reduce the risk of dying, in contrast to the large cosmopolitan cities, where the traditional standards of gender are more flexible[17].

In a patriarchal society, femicide tends to be a punitive and disciplinary act, practiced against the victim who has become vulnerable as a result of having carried out an attack against male honor, or because they do not have protection, or, further, due to behaving in a way considered to be morally inappropriate. Thus, assassinations of women take place against a women who has left her place, that is to say, her subordinated position in a status-based system. The movement of the woman to a position not destined for her in the hierarchy of the traditional model challenges the position of the man in this structure and the moral codes stipulate that she should be punished or even killed[18].

In today's world, in various countries of the Americas and many regions of Brazil, in areas of extreme inequality, armed conflict, land-grabbing, frontier regions, shanty towns and circumstances where the law is that of a second state, femicides have come to be practiced as a form of exemplary punishment, demonstration of power or a message to women to behave themselves and to other men to show who is in the command[11,14,15,19].

Women who acquire sexual and economic autonomy test the traditional patterns of gender and there is a greater risk of femicides, because

Table 3. Explanatory variables – mean, deviation and maximum and minimum values, 2003-2010.

Variables	Source, year	Mean	SD	Minimum to maximum
Economic				
Gini Index	IBGE, 2003	0.4	0.04	(0.4 - 0.5)
Poor (%)	SIDRA, 2010	20.8	9.8	(6.2 - 40.6)
Poor black (%)	SIDRA, 2010	27.0	11.1	(13.0 - 77.1)
Poor white (%)	SIDRA, 2010	15.1	7.7	(5.1 - 32.8)
Woman is head of family (%)	SIDRA, 2010	25.0	2.6	(20.5 - 33.6)
HDI	PNUD, 2000	0.8	0.05	(0.55 - 0.89)
Demographic				
Black population (%)	IBGE, 2010	50.7	18.5	(13.8 - 79.5)
People not born in municipality (%)	IBGE, 2010	40.5	11.3	(10.5 - 75.0)
Married women (%)	SIDRA, 2010	28.7	4.9	(15.7 - 37.2)
Single women (%)	SIDRA, 2010	45.7	5.7	(35.9 - 59.1)
Separated women (%)	SIDRA, 2010	1.8	0.6	(0.8 - 3.0)
Catholic (%)	IBGE, 2010	56.1	9.9	(32.8 - 79.2)
Pentecostal (%)	IBGE, 2010	15.7	5.3	(5.5 - 27.1)
No religion (%)	IBGE, 2010	10.2	4.6	(2.8 - 22.7)
Communication				
Homes with internet (%)	IBGE, 2010	40.9	12.1	(21.0 - 65.0)
Homes with mobile or fixed-line (%)	IBGE, 2010	94.8	2.8	(82.2 - 98.2)
Health				
Undefined causes of male deaths (%)	DATASUS, 2010	5.2	8.4	(0.2 - 61.1)
Undefined causes of female deaths (%)	DATASUS, 2010	4.4	4.1	(0.0 - 15.3)
Cervical cancer mortality	DATASUS, 2009	6.1	2.7	(1.6 - 17.3)
Breast cancer mortality	DATASUS, 2009	16.6	8.9	(1.1 - 57.9)
AIDS mortality (men)	DATASUS, 2010	12.2	6.8	(2.5 - 47.1)
AIDS mortality (women)	DATASUS, 2010	5.7	3.5	(1.7 - 23.4)
Doctors/1,000 population	DATASUS, 2010	1.7	0.2	(0.4 - 3.2)
Male mortality by aggression	DATASUS, 2009	31.7	17.4	(6.8 - 86.2)

they place themselves against, or rupture, situations of subordination. Thus, the change in the traditional roles of gender in countries, regions or cities where there is not economic and gender equity increases the risk of victimization or death[10,19].

Violence operates as a mechanism of control and subordination, and the ideology of gender, which is present in the discourses of the social institutions, naturalizes and cements this system. Thus, there is a patent contradiction between increased gender violence in richer locations, major centers, centers of industrialization and development – where groups of women make use of the more egalitarian and autonomous situations – and the situation in which the number of poor women, in a situation of vulnerability and social inequality, the principal victims of femicides, increases[20].

The analysis of religious inclinations indicated, both in this study and in the previous one[14], that there are more feminine deaths in territories with a high presence of people practicing evangelical Pentecostal religion. The Pentecostals share an identity of traditional values, in which the women are controlled by the men of the religious community. This vigilance maintains the gender order and, if they do not obey the rule, they will be punished, with the consent of the group[21]. Among evangelicals there is a patriarchal division of the genders, which reinforces women's position of subordination to masculine authority in all instances: home, work and church. The regulation of conduct provided by the evangelical religion aligned to the patriarchal gender order is usually permissive on aggressions, and complacent with the perpetrators of crimes, a fact which stimulates the emergence and continuation of acts of violence[17,22].

The phenomenon known as backlash[20] emerged in western society in periods of greater conservatism and influence of religious fun-

damentalism, and is a discourse of attack on women's equality. This movement, which is considered to be a retrograde anti-feminism, acts through recrudescence of the conservative rhetoric that proposes keeping women in the domestic environment and social control of sexual and reproductive behavior. The objective is to maintain the hierarchies of gender, which are necessary to make the system of subordination and exploration of women, as made more acute in capitalism.

Table 4. Correlation between female mortality for aggression and explanatory variables, Brazilian state capitals and municipalities with population over 400,000, 2011-2013.

Variables	r	p
Gini Index	0.179	0.215
HDI	-0.128	0.219
Poor	-0.216	0.087
Poor white	0.207	0.419
Poor black	0.251	0.419
People not born in the municipality	0.110	0.260
Married women	-0.271	0.215
Single women	0.313	0.000
Separated women	-0.425	0.001
Black population	0.528	0.000
Women heads of family	-0.247	0.135
Catholic religion	-0.121	0.128
Pentecostal religion	0.446	0.000
No religion	0.136	0.219
Homes with internet	0.214	0.153
Homes with mobile or fixed line phone	-0.285	0.322
Male mortality undefined cause	0.126	0.455
Female mortality undefined cause	-0.214	0.125
Cervical cancer mortality coefficient	0.065	0.630
Breast cancer mortality coefficient	-0.087	0.514
AIDS mortality coefficient, women	-0.018	0.893
AIDS mortality coefficient, men	0.011	0.934
Doctors/1,000 population	-0.094	0.484
Coefficient of male mortality by aggression	0.825	0.000

The relationship between femicide and male death by aggression, which showed the highest correlation, was found in the studies made in this survey and indicated that where there are more murders of women there are also more murders of men[14,15]. The neoliberal economic model in the peripheral countries has sharpened both economic and gender inequalities. This model resulted in increased exploration of women, principally the young, poor and black, exposing them to increasingly severe acts of violence. The new gender division of work placed a large proportion of women in the informal market, on routes of migration, and in sex exploration and illegal work. They have more people under their responsibility, less mobility and need to accept the worst work, the lowest salaries and the most dangerous conditions. The increase in the structural violence of the patriarchal system produces some of the new scenarios of femicides[11,23].

This study has limitations in its ecological design, which uses secondary information from information systems that may be partial or biased, although the sample space chosen is the state capitals and municipalities with population of more than 400,000, where the quality of information is more accurate. This is because, unlike the large-scale municipalities, in small towns there is a greater possibility of low capture of information on deaths, through the civil registry,

Table 5. Multivariate linear regression model, entry variables and final model, Brazilian state capital cities and municipalities with population over 400,000, 2011-2013.

Variables	Standardized beta	β (CI95%)	p
Entry model			
Poor	-0.325	-0.083 (-0.179;-0.013)	0.090
Separated women	-0.004	-0.017 (-1.559;1.53)	0.983
Black population	-0.007	-0.002 (-0.060;0.057)	0.959
Male mortality by aggression	0.840	0.121 (0.097; 0.145)	0.000
Pentecostal religion	0.235	0.111 (0.014;0.208)	0.026
Final model			
Poor	-0.330	-0.084 (-0.143;-0.025)	0.006
Male morality by aggression	0.841	0.121 (0.098;0.145)	0.000
Pentecostal religion	0.237	0.111 (0.042; 0.181)	0.002

via notaries' offices. The sub-recording of life events is greater in these areas, among other reasons due to non-recognition of the importance of the document[24].

This investigation, which is part of a larger survey, evidenced the structural problems of understanding murders of women in large urban centers. It found: an inverse relationship between gender violence and poverty – indicating higher rates of death due to gender in richer regions, although the victims are mainly poor and unprivileged women; and higher rates in unequal territories where there is an accentuated presence of evangelical religion, poverty and structural violence.

Collaborations

The authors SN Meneghel, BAR Rosa, RF Ceccon, VN Hirakata, IM Danielevicz contributed with the conception, scoping, data analysis and interpretation; article write-up and critical revision, and approval of the final version for publication.

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Article submitted 12/11/2015
Approved 14/01/2016
Final version submitted 16/01/2016