Consequences of gender violence on the health of undergraduate students: a case study on abusive intimate relationships

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Abstract: This article deals with violence against women by intimate partners, limited to participants attending undergraduate courses at universities in ABCD Paulista and who have experienced this type of violation. Violence against women, demarcated by gender asymmetries, is a public health issue as it is an explicit violation of human rights. Given the seriousness of the issue, this study aimed to analyze how violence against women is expressed in the lives of undergraduate students and its consequences in their lives. The qualitative method used four case studies with semi-structured interviews. Thematic Analysis treated the collected data, emerging two themes with groups of main meanings: types of violence and consequences on the lives of undergraduate women. From these analyses, physical, psychological, and sexual violence often co-occurred with health consequences, especially mental, accentuating problems such as depression and panic, disqualification of self-image, and abrupt change in weight. It was concluded that: a) even undergraduate students with access to information and criticism about unsatisfactory intimate relationships, experience intimate violence affecting their lives; b) although the issue of violence against women has gained notoriety, one must reflect and act to guarantee them basic rights, in any social space.

➤ **Keywords:** Violence against women. Gender violence. Abusive intimate relationship. Physical and psychological violence. College women.

Introduction

This article aims to analyze the phenomenon of violence against women as manifested through intimate relationships. The participants were women who, at some point in their lives, experienced this type of rights violation and are currently university students. The study sought to identify the psychological and health-related consequences of this phenomenon on these women.

Violence against women is considered a significant public health issue, affecting approximately one-third of women worldwide. It is a persistent, complex, and multifaceted phenomenon, primarily sustained by sociocultural factors, wherein women are placed in a situation of deprivation of the right to a dignified life due to their gender (Frugoli, 2019; Silva, 2017; Ataide, 2015; Straus; Gozjolko, 2014; Flake *et al.*, 2013).[1] These manifestations serve to establish an asymmetrical power dynamic between men and women, based on female subjugation and the maintenance of male dominance.

Given the importance of this issue and its contextual implications, discussions and reflections on machismo, patriarchy, power, and human rights are essential in the pursuit of more equitable gender relations. Although this investigation involves participants who are university women and have achieved a higher education level, it predominantly focuses on white women who have access to higher education. It is important to consider that this delineation pertains to the category of white women, as other women, such as black and indigenous women, are not represented in this study. In the data collection locations, privileged universities in the ABCD Paulista region, there was no representation of non-white women, highlighting another form of rights violation against the diverse women in our population and another expression of gender inequality, particularly concerning women who intersect with other classes, race-ethnicity, locality, and other intersections. Nonetheless, the aforementioned point does not diminish the severity and urgency of any rights violation situation, necessitating debates and interventions.

The Pan American Health Organization and the World Health Organization (WHO, 2017) indicate that approximately 35% of women have been victims of physical and/or sexual violence, predominantly perpetrated by intimate partners. Waiselfisz (2015) reports that, in Brazil, among the reported instances of violence, physical violence has the highest incidence, accounting for 48.7% of recorded cases,

with a heightened prevalence among young and adult women, reaching about 60% of official records. Silva (2017) underscores the severity of this phenomenon, noting that there may be a significant degree of underreporting due to the affective and intimate bonds between women and the perpetrators of violence.

In analyses of studies involving university women, Ataide (2015) focused on violence among young couples during dating. The qualitative research results indicated that young university women experienced psychological, sexual, and physical violence from their partners, leading to significant distress.

Igareda and Bodelón (2014), in their analysis of violence against Spanish university women, found that sexual violence, particularly rape, is the most recognized form of violence in this context. They emphasized that to assist victims, physical evidence of the violence must be perceived. Turchik and Hassija (2014) identified, in their study on sexual violence against women, that health-risk aggression often involved the abusive use of drugs and/or problematic behaviors by the perpetrators. Tsui and Santamaria (2015) observed that attending college could increase the risk of intimate partner violence when the partner seeks to limit the woman's college experience, feeling threatened by the potential power she may achieve.

Flake *et al*. (2013), in their study on intimate partner violence among students from two universities in São Paulo, using a self-administered questionnaire with 362 students, found a higher prevalence of violence and risk to women, indicating the need for gender violence reduction programs. Straus and Gozjolko (2014), in their research on "intimate terrorism" and gender differences in dating partner injury among male and female university students, noted a higher frequency of risks and harm to women, necessitating targeted intervention programs. Realphe *et al*. (2015), in their study on the "subtleties" of gender discrimination and violence among undergraduate and graduate students at a medical school in Bogotá, Colombia, found a higher likelihood of violence against women, suggesting the need for prevention programs.

Tanizaka *et al*. (2020) explored the contributions of gender epistemology to understanding violence against women, and Maito *et al*. (2019) developed guidelines to guide institutional actions against gender violence, particularly among university women. Both studies emphasized the importance of preventive measures, as many women who experienced violence were university students.

Experiencing violence significantly impacts women's health, leading to psychological impairments, intense feelings of fear, anxiety, low self-esteem, and

symptoms associated with depressive disorders, post-traumatic stress, suicidal ideation, and attempts, as highlighted by Frugoli *et al*. (2019). Their studies on violence against female graduates revealed impacts on women's lives, ranging from social isolation to family disruptions. Miranda, Paula, and Bordin (2010) noted that conjugal violence against women has immediate effects on health, work, and family. Their probabilistic sample of 784 women aged 16 to 49 years, with a child under 18 years old and a resident husband/partner, showed that family impacts, especially on children, significantly increased the likelihood of minors experiencing emotional and behavioral issues, anxiety, depression, low self-esteem, disobedience, nightmares, somatic complaints, and poor academic performance.

Erica Mendonça and Lucimar Souza (2010), in their research on domestic violence against women as a public health issue, presented the fundamental consequences of domestic violence on health and identified strategies and actions by health professionals in assisting women victims of violence. They indicated that, before becoming a health issue, it is a social issue. Frugoli *et al*. (2019) add that addressing this problem, due to its multifactorial causes and interferences, requires assistance from various fields and areas of expertise, such as the effectiveness of support networks and specialized intersectoral services.

Thus, in this article, the issues of gender-based violence, specifically violence against women where the participants are university students, were examined to determine whether the situations of violence marked by gender asymmetries, affecting women at a higher level of formal education, resonate with the data in the literature or present novel elements due to the participants' privileged access to informational, cultural, and academic resources.

Method

The method was qualitative, utilizing a case study approach through semi-structured interviews with four participants, identified as M1, M2, M3, and M4, aged between 18 and 50 years, university students from the metropolitan region of São Paulo. This research was approved by the Ethics Committee under protocol number 396070318.9.0000.5508.

Data were analyzed using Thematic Analysis (TA) as described by Virginia Braun and Victoria Clarke (2016), to identify and report patterns of occurrences and

meanings, referred to as themes. TA is a process that begins when the researcher starts searching for patterns of meaning in the data and research questions of interest. The TA process, based on Braun and Clarke's (2016) guidelines, occurred in six phases:

- Phase 1: Familiarization with the data - Through active and repeated reading, the researcher engaged with the data to understand the breadth of what was studied, seeking meanings and patterns. Four interviews with university women who experienced violence throughout their lives were analyzed. The selected interviews provided a complex range of information about their experiences of violence.
- Phase 2: Generating initial codes - Codes were produced to identify characteristics of the data, such as semantic, explicit, or latent content, linked to the research objectives.
- Phase 3: Searching for themes - The analysis was reoriented, reorganizing the themes comprehensively. This phase concluded with the structuring of a list of potential themes, subthemes, and coded data extracts related to them. The coding of relevant excerpts was organized based on the identification of the types of violence experienced by the participants and the consequences for their lives. Table 1 presents the respective segments.

Table 1. Coding of Relevant Excerpts

Code	Meaning	
VF		Physical
VP		Psychological
VM	Type of Violence	Moral
VP'		Patrimonial
VS		Sexual
CF		Physical
CP		Psychological
CS	Consequences (for the woman and children, if any)	Social
CF'		Financial
CP'		Patrimonial
CA		Perpetrator of Violence
OU	Others	

Source: Prepared by the authors, based on the data collection instrument, 2019.

- Phase 4, reviewing themes, the identified themes were refined, and this phase was divided into two stages: Level 1 involved analyzing all extracts grouped under each proposed theme to verify if there was a coherent pattern, and Level 2, upon completion of Level 1, considered the validity of the themes in relation to the entire dataset, evaluating if the theme related to the overall work and its objective, necessitating a re-reading if required.
- Phase 5, defining and naming themes, each emerging theme was explored in depth, and it was determined which aspect of the data each theme captured.
- Phase 6, writing the report, the final analysis of all presented phases was initiated, highlighting the categories and results achieved.

Results and Discussion

Understanding the Female University Students and Their Daily Lives

Participant M1 is 37 years old, taught in early childhood education for 20 years, and is currently pursuing a university degree in the health field. Her academic journey included completing a teaching course and later starting a degree in the health sector. After graduating, she began a lato-sensu postgraduate course and, upon completion, got married at 26 while pregnant. During that period, she expressed a desire to work in her field as a freelancer but feared not having a fixed salary and the uncertainty of leaving her stable job, so she continued working at the school. After her daughter was born, she quit this job. She reported that during the early stages of motherhood, she experienced a marital separation, but the couple reconciled shortly after. They intended to have two children, which happened after their reconciliation. During her second pregnancy, her husband's behavior changed, and she was unsure if he did not accept the child or if the timing was inappropriate for having a baby, which tormented her. This situation caused conflicts for M1, who noticed changes in her husband's behavior since the birth of their first daughter. In M1's opinion, her husband seemed to compete for her attention with their daughter, mimicking the child's behaviors, such as falling ill whenever the daughter did. M1 stated that she experienced various situations of violence during her intimate marital relationship.

Participant M2 is 18 years old and is at the beginning of a university course in the health field. She reported that besides studying, she worked as an instructor for a professional course at a computer school. Regarding her family life, she mentioned living with her mother, aunt, and grandmother. She stated that she had experienced

several situations of violence in an intimate affective relationship with a young man with whom she had sporadic contact.

Participant M3 is 50 years old and is currently married. Before her current marriage, she was in an abusive intimate relationship where her boyfriend prevented her from going to various places, including work. During that period, she was also forbidden from having friends and going out without her partner's permission. Despite being professionally recognized and holding a good position with a decent salary, her unemployed boyfriend would undermine her competencies and abilities. M3 stated that ending this relationship was very difficult and was only possible when she was transferred to another city for professional reasons.

Participant M4 is 25 years old, from São Paulo, single, without children, and continues to work as an event administrator. She started working in a buffet at 16, then worked in a shopping center store. At 20, she began her studies in a higher education course but realized it was not what she wanted, deciding to pursue her dream of studying abroad. She went to a European country and worked as a nanny. Upon returning to Brazil, she reconnected with a friend who recommended her for a job as a promoter at an event agency. After a year, she reported having clarity about what she wanted to study in college, but due to financial problems, she waited for an economic opportunity to resume her studies. Upon returning to Brazil, she met a young man at work who invited her to work together at religious events. The boyfriend was a singer of a particular Christian musical style, and M4 fell in love with this successful and religious man. After a few months of the relationship, M4 began to experience situations of violence in her intimate affective relationship. These situations started with humiliations, followed by physical and sexual violence, leading to loss of salary and property.

Violence in Abusive Intimate Relationships and Its Consequences on the Health of Female University Students

The categories derived from Thematic Analysis (TA) allowed the creation of four tables related to the consequences of violence in intimate affective relationships on the lives of participants M1, M2, M3, and M4. Among the participants, two were married, and the perpetrators of abuse were their husbands (M1 and M2), while the other two (M3 and M4) experienced violence from men who were either boyfriends or occasional partners.

Table 2 presents excerpts from the participants' accounts where physical violence was identified, in accordance with the Maria da Penha Law, No. 11.340/2006. This type of violence is characterized by any conduct that harms the integrity or physical health of women. When it comes to physical violence, due to the visible marks on the body, these situations are more easily perceived by women compared to other types of violence. This implies that whether or not the bodies bear visible marks, under any form of violence, all women experience damage in their lives (Straus & Gozjolko, 2014).

In the following tables, verbs in bold have been highlighted, showcasing various types of violent situations perpetrated against women.

Table 2 illustrates actions that fall under the category of physical violence, a type of violation that is materially identifiable. While the physical consequences for these participants were revealed through the man's physical force, leaving visible marks on the body, there were other resonant marks associated with these violent scenarios.

Table 2. Segments on Physical Violence

Participant	Segment
M1	... I didn't know if he would come home and **attack me** and my daughter.
M1	... he **pushed me**, and I fell into the wardrobe.
M1	... he **threw me** onto the bed and **strangled me**.
M1	... he **punched me** in the arm...
M4	... once he **pushed me**, but it was just once...
M2	... he tried to **pull** my arm...

Source: Prepared by the authors, based on the data collection instrument, 2019.

The experience of violence produces various impacts beyond visible marks. In M2's account, we can observe this effect. The participant reported that the situations of violence she experienced resulted in bruises and wounds on her body, weight changes, physical exhaustion, anemia, sleep disturbances, and gastrointestinal system alterations. Her accounts indicated that during the times of violence, she did not even realize she was getting sick, but looking back, she knew her health was deteriorating. M2 said: "So I would eat and vomit [forcibly], eat and vomit, go out with him, come home and vomit." This statement highlights that M2 was not

in good physical and mental health, leading to eating disorders. The participant revealed that what she experienced in the intimate relationship impacted her perception of her own body.

The consequences of violence go beyond the manifest, producing new byproducts that range from the fear of a new violent situation occurring. At this point, it is emphasized not only the damage to women's health and lives but also the risks to their very lives. According to Kerle Lucena *et al.* (2016) and Frugoli and Giovana Furquim (2019), women often do not recognize that they are in a cycle of violence because they are in an environment of various mobilized affections; sometimes the partner is loving and regrets violent actions, other times he has outbursts of aggression. Thus, the cycle of violence occurs in a context of situations that start more mildly, passing through physical forms of violations, and potentially leading to femicide.

Due to their condition as women in a society that devalues this gender, women demarcate a social, political, and cultural place of submission or constant conflicts, individually or collectively, often considered of lesser value compared to men. In another aspect, they may have difficulties in discerning when they are being cared for or violated in their basic citizenship rights. Gender-based violence against women can begin with the deprivation of their freedom, through false care and prevention of emancipation, affecting self-esteem, subjectivity, and perception in intimate relationships and life. At this point, Lélia Gonzalez (1984) strengthens the current debate on questioning the universality of the category of woman and gender relations, as if we were talking about only one way or form of being a woman, since many women are not considered in gender discussions, as if there were indeed a universal category of woman. In this work, we again point out that we are dealing with white women who managed to participate in higher education and formal education, and what applies in these considerations does not apply to all other women.

According to Ataide (2015), gender-based violence can cause physical, sexual, and/or psychological suffering to women, highlighting historically unequal power relations. It is worth noting that we are dealing with participants in this investigation who are white women. When considering other women in this context, we can assert that this condition of suffering becomes more intense when it does not involve privileged women. For Gonzalez (1984), the patriarchal capitalist system in no way contemplates Black women, Indigenous women, those who are vulnerable, and those on the margins, as it takes these women for their denied humanity and as animalized

bodies. If authors Realphe *et al.* (2015) point out that these violences for university women, in our case white women, are characterized as a present problem and far from being an isolated or subtle fact, configuring similarly to the violences socially suffered by any women, we confirm that for Black, Indigenous, and marginalized women, the situations of violence that encompass and involve gender, age, locality, space, class, race, ethnicities, and other elements become much more difficult to overcome and eradicate.

Returning to the discussion that the violation of rights marks not only the physical body but also other parts of women's lives, in Table 3 we present situations of violence that are permeated by psychological and moral issues.

Table 3. Segments on Psychological Violence and Moral Violence

Participant	Segment
M1	... he said: **I hope you lose this child** and hung up the phone.
M1	Then he said: **You'll see** when we get upstairs, **I'm going to destroy you**.
M1	No, I didn't do that, it wasn't like that, oh **you heard too much**, I wasn't with someone else...
M1	... everything was **nonsense**, everything is my **exaggeration**.
M1	As he always said, **you're crazy**, until I started thinking... am I understanding too much?
M1	... many of the things he says to me, **I end up doubting the things I see and hear**, so I end up losing a bit of my personality, not a bit, a lot, I would say am I crazy?
M1	Then I started: **people, I'm wrong, he's right.**
M1	Then he started cursing me, **cursing me saying you're a slut, your family is worthless** and started talking out of nowhere.
M2	Wow, **you've gained too much weight, look at you, look at your belly.**
M2	**You didn't do your nails right, you didn't clean properly**, these nails are too short, your hair is dry.
M2	You have to dress formally, I didn't like this outfit, change it.
M2	If I cheated on you, **it's your fault**, if I cheated on you, it's because **you didn't do something right**, it's because you fell short.
M2	You will never leave me, you love me and **you can't live without me...**

Participant	Segment
M3	And he always **made me believe that I was hurting him**, you know... he made this move to **blame me.**
M3	He started talking about how slow the boys were because **we are very easy, there are many easy women** in the course.
M3	**He sent disgusting audio** to some students, to me he sent that **he wanted to kiss me.**
M4	He started with the betrayals, **then he blamed me**. And so, it was very subtle... **I don't like your friend, don't hang out with your friend anymore**, then **I don't like you wearing earrings, don't wear earrings anymore**, then I like your hair like this, and then it increased, I didn't notice.
M4	He made **people in my family seem like my enemies. I had to stop talking to my mother.**
M4	When I was 8 months pregnant, he started all over again. The betrayals. **You're going crazy... oh, I cheat because it's your fault.**
M4	He said **I wasn't pretty enough** for him. **He was with me because he felt sorry for me**, that I couldn't find someone better than him, **that no one would put up with me**.

Source: Prepared by the authors, based on the data collection instrument, 2019.

In Table 3, excerpts from the interviews are presented with aspects related to violence with physical, psychological, and moral marks. Psychological violence is defined, according to the Maria da Penha Law, as any conduct that causes emotional damage and diminishes women's self-esteem, as well as acts aimed at degrading their actions, decisions, behaviors, or beliefs. Moral violence, on the other hand, is understood as any conduct that constitutes slander, defamation, or insult.

The psychological and emotional impacts retroact on psychological health, intensifying suffering. In the context of the participants, psychological violence is evidenced as a means of establishing emotional damage and diminishing self-esteem, hindering the full development of women, the control of their actions, behaviors, beliefs, and decisions. As consequences of the experiences of violence, other harmful effects present themselves in the medium and long term, as indicated by the participants, such as pronounced difficulty in relating to and trusting a new potential intimate partner. When experiencing new intimate relationship proposals, the participants reported avoidance, fear, distrust, discomfort, paralysis, and/or apathy in seeking new healthy relationships.

In the same Table 3, we can identify feelings of fear, loneliness, and anguish, pointing, according to Frugoli *et al.* (2019), to the impairment of women's mental health in various spheres of life. Among the psychological consequences, there is the emergence of the condition imposed by the male gender, in a power relationship established in the productions of a culture of domination that reveals the supremacy of men over women (Straus; Gozjolko, 2014; Tsui; Santamaria, 2015; Realphe *et al*., 2015; Hernández, 2015).

Frugoli and Furquim (2019) observe that women rarely seek help in the face of violence, especially psychological violence, tending to accept and justify the attitudes of the aggressors, postponing the exposure of their suffering until physical violence occurs. These circumstances reveal that it is essential for women to have knowledge about themselves, the way of being of the other, and the sociopolitical-cultural productions active in asymmetric gender relations. From there, common-sense ideas can be questioned, discussed, reflected upon, and clarified, such as the notions that men are violent because they are sick or under the influence of drugs; only women with lower education or poor women suffer violence; that women are to blame for the violence; that they do not report it because they are cowards, like to be beaten, and humiliated.

It is a work that requires the awareness of the entire society. It is necessary to demystify prejudices that involve the various types of violence, clarifying what they are and their consequences. Much is heard about physical and sexual violence, but little about psychological violence, which can be between the lines, such as jokes and aggressive words spoken by the partner. Frugoli and Furquim (2019) emphasize that the dissemination of information, discussions, reflections, and reporting of this phenomenon are possibilities to bring to light this serious problem of violence against women, especially in its most subtle form, which is psychological violence, even if difficult to identify or invisible, according to Frugoli *et al*. (2019).

In Table 4, excerpts characterize sexual violence according to the Maria da Penha Law as any type of conduct that leads women to witness, maintain, or participate in unwanted sexual relations, which occur through intimidation, threat, coercion, or the use of physical force.

Table 4. Segments on Sexual Violence

Participant	Segment
M1	I told him to stop bathing with the children. And one day [daughter] said: **mom, a little thing came out of daddy's pee-pee.**
M1	My daughter was coming home with a **diaper rash.**
M1	Mom, the ... [the perpetrator's partner] **taught me how to kiss like a boyfriend** and pull my mouth.
M2	I asked to use a condom... And **I didn't see if he had put it on or not, he ejaculated inside and didn't tell me.**
M2	Yeah, there was an ex of my mom's. He was the boyfriend I liked the least. I was playing [game], he **started running his hand through my hair, running his hand down my arm, put his hand on my leg.**
M2	I got on the bus and the driver said: **wow, you are a very beautiful girl.** Then **he called me hot.**
M3	That **camera...** go pro that doesn't have a screen or anything. He had one of those. And it **was always on his dresser pointed at the bed...** And then one of the times I refused to have sex with him because I wasn't in the mood, he said: **let's watch then and pointed to the camera** and then I got very nervous... My God. He already... He already recorded, recorded.
M3	I found several **photos of friends, I found intimate photos of myself. I was changing clothes and he was taking screenshots.**

Source: Prepared by the authors, based on the data collection instrument, 2019.

It is important to reiterate that sexual violence does not necessarily involve physical force; the act is also characterized as violence when emotional blackmail is used to initiate or maintain sexual relations. Circumstances of non-consensual sexual activity constitute sexual abuse, encompassing various types of sexual assaults such as grooming, sexual exploitation, sexual harassment, and rape. Law No. 12.015/2009 focuses on so-called "crimes against sexual dignity," which, although described in the Brazilian Penal Code, result in fewer procedural complaints due to many people not recognizing the violence or fearing to report it.

Participant M3 experienced situations related to violence and sexual abuse. The sexual relationship was coerced through the threat of exposing her intimate privacy on the internet or other publication means. This was emotional blackmail to make

M3 comply with the perpetrator's sexual demands, even though she did not wish to engage with him at that moment.

Current data on sexual violence against women indicate that 7.5 million have already suffered violence. Most sexual assaults against women were perpetrated by partners, boyfriends, spouses, or ex-partners, and sexual violence occurred in 61.6% of cases at the victims' own residences. According to the Ministry of Health, most rape victims are children and adolescents, around 70% of reported cases, with the most frequent perpetrators being family members or close acquaintances (Frugoli *et al.*, 2019; Waiselsfisz, 2015).

Straus and Gozjolko (2014) point out that in the cycle of violence, coercive control by both partners is similar in dating relationships, tending to be detrimental to women, who experience a higher number of violent situations. It is also important to consider that harassment also affects children.

In this investigation, it was identified in the report of a participant who is a mother that the perpetrator used a position of authority, being the child's father, which facilitated the violation of rights and impunity. In Table 4, participant M1 reports about her ex-husband and father of her daughter. This man bathed with the young daughter, and there were also occasions when the father's partner joined them. One day, the daughter told her mother that "[...] a little thing came out of daddy's pee-pee." For the mother, this partly explained why the girl "came home with a severe diaper rash" in her genital area after visiting her father's house.

Statistical data on violence against women indicate that the home is the highest-risk environment, whether for adults or children. The home is not the safest place for women, nor do fathers and family members refrain from sexually assaulting or harassing children (Waiselfisz, 2015; Silva, 2017; Alves, 2020). Using words and actions that disrespect, assault, or violate women, objectifying them, is abusive and violent behavior. This can range from words to sexual actions, as narrated by participant M2, who stated that her partner ejaculated without informing her, leading her to discover that he had not used a condom, thus exposing her to sexually transmitted diseases and the risk of unwanted pregnancy.

In these situations of violence, especially in the domestic sphere, women's human integrity is violated, and their health is compromised. The negative consequences involving physical, psychological, and sexual issues highlight unsatisfactory and distressing experiences that disrupt their lives and those around them.

These women experience negative feelings, as the impacts on their bodies put them in doubt about their ability to resolve conflicts about themselves and those around them (Frugoli *et al.*, 2019; Carel, 2016).

Alongside the referenced consequences and the lack of confidence that occurs at various levels, there are financial and patrimonial consequences. In our studies, we identified that it was the women who suffered financial or patrimonial losses, with their partners taking their belongings, such as car keys, or failing to make child support or surgical payments for their own children, justifying their actions by claiming economic incapacity or relegating these obligations solely to the women.

However, even though the women in the study are university students and are aware of the structures and mechanisms for protecting women and the laws that support and guarantee their well-being, they demonstrate difficulties and conflicts in resolving issues of rights violations arising from intimate relationships. This implies that these women are part of a collective context of violence against women that transcends gender asymmetry issues. Without a support network and specific and effective interventions on the issue, these women find it difficult to escape violent situations, even belonging to a privileged segment of the population.

This point reflects the urgent need for society as a whole to enforce laws that protect women's rights and to strive tirelessly to reduce and ultimately eliminate this type of violence.

Nonetheless, we recognize that women in vulnerable situations face more difficulties and suffer more risks and damages from these types of violence or are more exposed to femicide. Therefore, we emphasize the need for effective action on this complex phenomenon and its ramifications. It is necessary for the care and support of victims to be comprehensive, involving multidisciplinary and interdisciplinary work, including social assistance, and physical and psychological health care for these women. This issue presents a weakness, as Silva (2017) points out, because despite violence being a global phenomenon, the training of professionals to work with violence issues is limited, leading to failures and gaps in handling cases of violence against women.

Final considerations

This article highlights that there are consequences in the lives of women who suffer violence from their partners and ex-partners. Violence leads to the weakening of all spheres of life for those who experience it, compromising and making life

experiences painful. It is essential to strengthen the various impacted spheres and to build new life possibilities for these women. These actions, in themselves, reverberate in the construction of health.

Health pertains to the integral dimensions of life. Regarding the understanding of action, an effective and intersectoral care approach must be sought for victims of gender-based violence to address the various demands arising from the violence experienced.

Building health goes beyond the biomedical scope. It involves having professionals adequately trained to deal with this type of situation. Health is not only created in medical centers. When specialized centers receive a report and properly support these victims, they are addressing this socio-cultural and psychological wound, conveying through care that these women are not alone and can rely on support networks that will fight with and for their lives. It is an important moment to encourage them to report the violence they have suffered and to break the silence to which they have been subjected. However, when services do not reach women representing various classes, groups, ages, races, ethnicities, etc., professionals must be attentive to how violence marked by capitalism and patriarchy delineates its intensities across the diverse differences among women. Especially if the women are from vulnerable groups, the possibility of having fewer and lesser resources for overcoming and exiting violent situations will be even more severe.

Multidisciplinary work is fundamental, requiring the joint and organized action of various agents focused on strengthening and increasing the likelihood of women achieving autonomy, a basic aspect for breaking the cycle of violence, as well as building new relationships of trust with healthy bonds.

Although perpetrators of violence do not experience consequences for their actions against women and their children, it is reiterated the need to discuss with society what violence against women is, its forms of presentation and consequences, from the perspective of those who suffer it and those who perpetrate it, showing ways to exit this situation and the importance of reporting and addressing the phenomenon. It is also important to discuss how the various forms of violence should be addressed by the structures responsible for supporting those who have suffered it.

Female subjectivity attributes care to violence, expressed in the partner's possessiveness. Usually, these issues are amplified, leading to psychological aggression, blackmail, threats, control of schedules, where they go, with whom

they go, and why they go. The right to come and go is subtracted in an attempt to distance them from friends and family, making them vulnerable and stripping them of their support network. Not infrequently, from psychological aggression, perpetrators of violence move on to physical aggression.

It is necessary to report! And society has this role,[2] as well as encouraging women victims of violence to report the perpetrator. The population must culturally address this serious public health problem, as it affects numerous women, including university students and especially those from vulnerable groups, making it a problem for the entire society and not just those who are victims of abusive relationships.[3]

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Notes

[1] Rosa FRUGOLI, 2019; Rosa SILVA, 2017; Marlene ATAIDE, 2015; STRAUS; Kristi GOZJOLKO, 2014; Tânia FLAKE *et al.*, 2013. In accordance with the feminist policy of visibility of female authorship, this study records the first name followed by the surname the first time an author is cited in the text

[2] Dial the appropriate local hotline for abuse reports and 911 for emergencies.

[3] R. Frugoli: conception and design; data analysis and interpretation; drafting of the article, critical revision of the intellectual content; final approval of the version to be published. A. da F. Araujo: data analysis and interpretation; drafting of the article, critical revision of the intellectual content. Y. P. de Oliveira: conception and design; data analysis and interpretation; drafting of the article. O. Riboldi Júnior: drafting of the article. The authors are responsible for all aspects of the work in ensuring the accuracy and integrity of any part of the work.

Resumo

Consequências da violência de gênero na saúde de universitárias: um estudo de caso sobre relacionamentos íntimos abusivos

Este artigo trata da violência contra as mulheres por parceiros íntimos, delimitado a participantes cursando graduação em universidades do ABCD Paulista e que em algum momento de suas vidas passaram por este tipo de violação. A violência contra as mulheres, demarcada pelas assimetrias de gênero, é questão de saúde pública, sendo violação explícita dos direitos humanos. Diante dessa gravidade, este estudo objetivou analisar como a violência contra as mulheres se expressa na vida de universitárias e suas consequências em suas vidas. O método foi qualitativo, utilizando quatro estudos de caso com entrevistas semiestruturadas. Os dados coletados foram tratados pela Análise Temática, surgindo dois temas com grupos de significados principais: tipos de violência e consequências sobre a vida das mulheres universitárias. Destas análises, violência física, psicológica e sexual frequentemente ocorreram simultaneamente com consequências à saúde, sobretudo, mental, acentuando problemas como depressão e pânico, desqualificação da autoimagem, alteração abrupta de peso. Concluiu-se que: a) mesmo universitárias com acesso a informações e críticas sobre relações íntimas afetivas insatisfatórias, vivenciam violência na intimidade, afetando suas vidas; b) embora a problemática da violência às mulheres tenha ganhado notoriedade, é preciso refletir e agir para garantir-lhes direitos básicos em qualquer espaço social.

➤ **Palavras-chave:** Violência contra as mulheres. Violência de gênero. Relacionamento íntimo abusivo. Violência física e psicológica. Mulheres universitárias.