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RESEARCH ARTICLE

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## EPIDEMIOLOGICAL PROFILE OF VIOLENCE IN A HEALTH REGION OF THE STATE OF PERNAMBUCO

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### ABSTRACT

This study aims to describe the epidemiological profile of cases of violence reported in the IV Health Management of the state of Pernambuco. This is a qualitative and quantitative cross-sectional study of secondary data collected in the Notifiable Diseases Information System between 2015 and 2019. After data collection, they were tabulated using Excel® Software 2010. The variables studied in this study were age group, types of violence, race and gender and excluding schooling. In the IV Health Management of the state of Pernambuco, Caruaru was the municipality most affected by violence, followed by the city of Santa Cruz do Capibaribe, in relation to color/race, the brown the most raped, the age group 15 to 29 years the most assaulted along with the female sex and the means of aggression used by the offenders was the physical force that comprises the punches, slaps, jerks, among others. It is perceived the lack of more effective actions through existing public policies, still the strengthening of continuing education, the stricter platform aimed at reducing and/or eradicating these barbarities, since it causes as a consequence several negative aspects in the physical, social and psychological sphere.

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## INTRODUCTION

Violence victimizes an average of one million people annually in the world, being men most affected in relation to women, affecting individuals considered economically productive (Romeo *et al.*, 2020). Brazil is one of the countries with high rates of violence, registering in 2019, 30.5 homicides per 100,000 inhabitants, after Venezuela, with 56.8, which places Brazil in second place in the list of the most violent countries in South America, standing out negatively worldwide (Brasília, 2019). According to Davila-Cervantes and Pardo-Montano (2019), violence is successful from several factors, and may be the result of impunity, economic, cultural, historical, political and social conditions. In 1996, the World Health Organization (WHO) considered violence a serious global public health problem based on the figures that indicate a considerable increase in the incidence of deliberate injuries affecting various age groups and genders. Violence causes damage to the health of the population, causing high rates of morbidity and mortality and

generating high costs for the sector, resulting from the treatment and rehabilitation of affected patients (WHO, 1996; Oliveira *et al.*, 2020). WHO conceptualizes violence as the use of physical force, authority, with the intention of threats or actions, against oneself and/or another person, an individual or certain community, which has as an immediate result or may result in death, temporary or permanent injury, with the elucidation of psychological damage, injured or private growth (WHO, 1996; Silva and Assisi, 2018). Violence is divided into categories to better specify them, achieving political, economic or social objectives, and is divided into intrafamily interpersonal violence, extra-domestic interpersonal violence and self-inflicted violence (Barbar, 2018). According to Maffisson *et al* (2020), violence is subdivided in relation to its nature, is classified as psychological, patrimonial, physical and sexual violence, among others, and has its concepts globally accepted by the WHO, bringing an important direction for identifying and characterizing the acts of violence generated in certain situations. The Ministry of Health (MH) created Ordinance n. 104 of January 25, 2011, with updated version

to Ordinance n. 204 of February 17, 2016 where it says that all violence began to make up the National List of Diseases and Diseases of Compulsory Notification, that is, suspected or confirmed cases of violence are up to all health professionals to be those of public entities, or private, mandatory and compulsory notification (Brazil, 2016; Teofilo *et al.*, 2019). Therefore, in the same way that public health has managed to prevent and reduce, worldwide, the problems arising from pregnancy, occupational accidents, infectious pathologies and diseases arising from contaminated food and water, it is also possible to avoid violence and reduce the consequences generated by pregnancy, because violence generates deaths, injuries, psychological and spiritual impact, in addition to harming the quality of life of society (Njaine *et al.*, 2020). Therefore, it is important for public health statistical data on this theme, since it is through this type of analysis that knowledge is obtained about the impacts caused in the lives of people with emphasis on dimension, particularities and sequelae, at the local, national or international level (Rates *et al.*, 2015). Thus, this study had as a guide question: What is the epidemiological profile of violence in the IV health management of the state of Pernambuco in the period from 2015 to 2019? In view of what was exposed, this research aimed to analyze the epidemiological characteristics of cases of violence reported in the IV Regional Health Management of the state of Pernambuco in the period from 2015 to 2019.

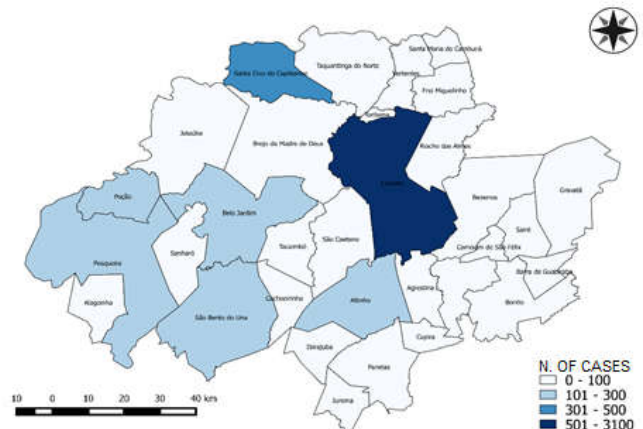
## MATERIALS AND METHODS

The present study has a cross-sectional character, with a qualitative and quantitative approach, from which, the notifications of cases of violence from the IV Health Management of the state of Pernambuco were collected, from the records of the notification forms of the Notifiable Diseases Information System (SINAN) between 2015 and 2019, physical, sexual, domestic and/or other interpersonal and self-inflicted violence, provided on the website of the Department of Informatics of the Unified Health System (DATASUS). The respective collection was performed online with access in the months between June and August 2021. It is important to note that data collection took place until 2019, because the system has not yet updated the most recent years. The eventualities of violence are extracted through the health services, which send the notifications to the Epidemiological Surveillance of the Municipal Health Secretariats (SMS) and to the Ministry of Health (MS), these agencies are also responsible for feeding and disseminating these data. The MS provides information to DATASUS, a program that centralizes all epidemiological data, morbidities, mortality and health (Araújo *et al.*, 2019). After data collection, the Excel® 2010 Software was used to perform the calculations, whose purpose was to obtain more precision of the results, as well as for tabulation and construction of tables and graphs, the same Software was used that aimed to facilitate understanding and give more clarity of outcomes. The cases of violence were organized by year of notification, municipalities belonging to IV Health Management of Pernambuco, analyzing the following variables: age group, types of violence, race and sex and excluding schooling. The number of inhabitants was extracted from the Brazilian Institute of Statistical Geography (IBGE, 2021). According to Ramos *et al.* (2016) the study of epidemiology is important to identify the most common problems that affect society, enabling the creation of public policies to solve existing problems, notorious through the analysis of the numbers explained by health indicators. Because it is a research with secondary data of public access, governmental and does not directly involve human beings, which makes it impossible to identify individuals it was not necessary to be submitted to the Ethics Committee, because the current research was based on Resolution 510 of 2016 in order to ensure ethical care in the use of statistical data.

## RESULTS

The time series of cases of violence reported in SINAN from the IV health management in the state of Pernambuco from 2015 to 2019

reveals the notification of 5,010 cases of violence, among these, classifies the municipality of Caruaru with the highest frequency of reported cases, recording 3,072 (61.3%) of the total events, followed by the city of Santa Cruz do Capibaribe with 386 facts, equivalent to (8%), however, the lowest proportions of notifications were the cities of Cupira and Frei Miguelinho, both with only 1 case, with a ratio of (0.01%) (Figure 1).



Source: MS/SVS/CGIAE – Notifiable Diseases Information System – SINAN.

**Figure 1. Number of cases of violence by municipality – Pernambuco – 2015/2019**

When stratification of the number of occurrences regarding the categories of violence in Table 1, physical is highlighted as the most common, totaling 3,609 and self-inflicted with 1,338 cases in the studied period representing (51.2%) and (19.0%), respectively, the one with the lowest impact was trafficking in human beings with 2 (0.02%) cases only. It is important to highlight the total number of cases of types of violence (7,039) that suffers a discrepancy with the total number of reported cases (5,010), because in some cases, it was recognized the combination of various categories of violence, such as physical violence associated with violence by torture (Table 1).

**Table 1. Types of violence – Pernambuco – 2015/2019**

Types of Violence	Reported Cases	%
Physical	3,609	51.2
Psychological/Moral	956	13.5
negligence/abandonment	117	1.6
Sexual	748	11.0
Trafficking in Human Beings	2	0.02
Child labor	9	0.12
Torture	174	2.34
equity	86	1.22
self-provoked	1,338	19.0
Total	7,039	

Source: MH/SVS/CGIAE – Notifiable Diseases Information System – SINAN

Regarding color/race, brown was the most affected when compared to the other categories with 3,528 (70.4%), accompanied by whites with 1,046 (20.8%), while yellow and indigenous women corresponded to 44 (0.8%) and 63 (1.2%), respectively, the least affected by violence (Table 2).

**Table 2. Violence by race/color – Pernambuco – 2015/2019**

Violence by race/color	Reported Cases	%
Ignored	95	1.89
White	1,046	20.8
Black	234	4.67
Yellow	44	0.87
Brown	3,528	70.41
Indigenous	63	1.25
Total	5,010	

Source: MH/SVS/CGIAE – Notifiable Diseases Information System – SINAN.

Regarding the means used to practice aggression, we have physical force/beatings as the most frequent 2,097 (41.8%), followed by an white arm/needle-sharp puncture object 569 (11.3%), while the burn was the disease of nature that obtained the lowest outcomes with 33 (0.6%). Regarding the distribution according to gender, there is a predominance in females with 3,860 (77%), while in the male audience 1,150 (23%) (Table 3). Table 3 corresponds to victims by age group and a higher proportion of notifications of the ages from 20 to 29 years 1,290 (26.0%), followed by 15 to 19 years 1,014 (20.0%), individuals under 1 year of age had the lowest rates with 82 (1.63%).

**Table 3. Violence by Sex and Age Group – Pernambuco – 2015/2019**

Violence by Sex	Reported Cases	%
Male	1,150	23
Female	3,860	77
Total	5,010	
Violence by Age Group		
Ignored	5	0.09
<1 year	82	1.63
1-4 years	130	2.5
5-9 years	115	2.2
10-14 years	492	10.0
15-19 years	1,014	20.0
20-29 years	1,290	26.0
30-39 years	891	18.0
40-49 years	521	10.48
50-59 years	206	4.1
60 or more	264	5.0
Total	5,010	

Source: MH/SVS/CGIAE – Notifiable Diseases Information System – SINAN

## DISCUSSION

Over time, violence in Brazil has ceased to be just a public health problem and has become issues of human rights and citizenship, given the proportion of facts and negative consequences generated by illicit acts, the need to expand and seek research on a multidimensional approach that meets the needs of society proved more necessary, for example, scientific studies with issues that promote a more holistic and systematized look, however, what is found in the studies are partial aspects and insufficient approach (Meleiro, 2020). In this aspect, it was observed in this study that females are the most affected by violence, which disagrees with the research by Nepomuceno *et al.* (2021), where they observed the profile of victims in the state of Bahia between 2010 and 2019 through secondary data and realized that (86.32%) of the victims were men and blacks, Santos and Gonçalves (2019), in a survey conducted in the interior of Bahia between 2009 and 2014, also observed a predominance of cases in women (72.97%) which legitimizes the veracity of this work. These figures show how much the female sex is routinely affected by these injuries, according to Lira (2019), this happens due to the historical factor where the woman was submissive in the face of the domineering instinct of man, enhanced by the conditions of inequality, putting the male gender in a position of power over the feminine. Regarding the type of violence, physics was the most common in this analysis, results that coincide with those of the research conducted by Barufaldi *et al.* (2017) who observed through secondary data which type of violence was more routine and perceived that (78.4%) of the cases stood out in physics, therefore, Madeiro *et al.* (2019) in a study conducted in the state of Piauí from 2009 to 2016, they observed that (62.3%) of the reported cases pointed to physics as the most common. According to Arruda *et al.* (2021) in a study conducted in the state of Pernambuco from 2013 to 2017, considered that the category of self-inflicted aggression has exponentially increased the number of cases especially among adolescents, which corroborates the present study, which brings this type of disease as the second most common. In relation to color/race that suffered the most damage in this data calculation was the brown, these results are similar to those of Piovezan *et al.* (2018), in which in their analyses they identified the most compromised brown color corresponding to a total of (40.7%) of the cases registered in the city

of Barbacena-MG in the period from 2013 to 2016. It is assumed that brown color/race is more conducive to racial inequality, high unemployment rates, precarious housing and low schooling when compared to whites, and are in these socioeconomic conditions where the number of violence is more pronounced, in 2017, (75.5%) of homicides, the cruelest and most extraordinary face of violent injuries were in black or brown individuals (Marques *et al.*, 2020). Although it is not a specific element of this study, it is important to highlight that the slave past is an important point to understand these numbers, since, Brazil was the last country in Latin America to end slavery and consequently racism and racial inequality were consolidated in history, placing these individuals in the worst survival positions, which facilitates understanding the way of life of the following years of this ethnic class (Soares *et al.*, 2020; Madeira and Gomes, 2018; Mascarenhas *et al.*, 2019). Concerning the age group, the most prevalent in this study was 15 to 29 years, which confirms with Théry's research (2018), who observed between 2005 and 2015 that in Brazil about 318,000 victims were this same age, which corroborates with Cavalcante *et al.*, (2020) who analyzed the profile of those assaulted in the state of Paraíba more precisely in the city of Campina Grande, where the individuals aged 20 to 29 years were the most affected by violence. Therefore, the recognition of this negative prevalence against the young people of Brazil, provides us to assist the commitment of managers who create public policies, responsible for public security, health professionals, national and international scientists and political representatives on the urgent need to extinguish these injuries, because violence generates alarming outcomes, such as illnesses, temporary and/or permanent sequelae (Souto *et al.*, 2017). Although there is a predominance in this age group, violence is universally affecting all genders, races, social conditions and all stages of biological development. It is a global problem, existing in the daily life of all families, of various doctrines and beliefs, of which these consequences result from the conviviality of the opposing classes of citizenship in the same society (Martins *et al.*, 2017). According to Malta *et al.* (2021), the high rates of violence are due to great social inequality, lack of adequate and efficient public policies for young people, unemployment, clashes in border regions that have income from agricultural production, fights over territories and inappropriate social security policies.

## CONCLUSION

Violence is more pronounced in the municipality of Caruaru-PE, city that composes the IV Health Management of the state of Pernambuco, regarding sex, the female was the most affected in the period studied that was from the year 2015 to 2019, in relation to color /race the brown was the one that suffered the most violent aggressions, in the observation of the data, it was noticed that the most violent age group was 15 to 29 years and the most frequent type of violence was physical. It is clear the need for more effective actions through existing public policies, strengthening of continuing education, the stricter unit aimed at reducing and/or eradicating these atrocities, since it entails several negative aspects in the physical, social and psychological spheres. This problem is not configured as something abstract, we perceive to be realized in people's lives and presents itself in a specific way according to each federative unit and municipality, for this reason, it is clear the accuracy of local and operational analyses, as well as interconnected coping plans aimed at promoting the collective a fundamental value that is life, there is no death and the healthy relationship between citizens.

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