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## Public policies, nursing role and health programs against gender violence. Comparative study Spain - Brazil

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### Abstract

Introduction: Gender violence is a serious public health problem and human rights, both in the Brazilian and Spanish society, so that public policies of these countries have the responsibility to eradicate this problem. Objective: To compare policies on gender violence between Spain and Brazil as well as their influence on nursing care to the abused women. Results: public policies that both countries have made since the 70s until today, under the influence of the International Conferences of the United Nations, notably from Beijing are exposed. Among the policies developed in these countries currently stands in Spain Organic Law 1/2004 and Brazil Maria da Penha Law. Public policies are translated in both countries in specific programs on women's health, who have also evolved since the 70s, from contemplating women exclusively in their gravid-puerperal cycle glimpsing in their overall health throughout the life cycle. These programs provide care to women in situations of gender violence through action protocols that emphasize the importance of identifying the problem in primary care, multidisciplinary actions among health professionals and coordination of the various institutions of protection of women to violence. Conclusions: As a consequence of global conferences and conventions on women and human rights, there have been policies in Spain and Brazil focused on gender equality and prevention of violence against women that have resulted in significant advances for the whole society, but they have not yet reached their goals. Women Health Programs start considering women as a subject of citizenship and rights. This evolution occurs in Spain after the influence of international conventions and conferences. However, Brazil is pioneering programs to include comprehensive women's health and reproductive health concepts, even before gaining importance internationally. These programs include violence against women as a field of action from the performance of health professionals in general and nursing in particular, establishing different protocols.

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## 1. Introduction

Violence against women is defined as “Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or in private life” (ONU, 1994). This scourge runs in fact the Spanish and Brazilian society by creating a serious problem of human rights and public health, due to the high number of victims and the extent of the physical and emotional scars that afflict the female population. In fact, the violence that occurs against women by virtue of being occurs in 22% of Spanish women and led in 2013 a rate of 2.63 deaths of women (Ministerio de Sanidad Servicios Sociales e Igualdad, 2014). The picture of gender violence also hit Brazilian society, with an estimated battered women percentage of 23% and a mortality rate of gender violence from 4.8 in 2013 (Waiselfisz, 2015).

It is for this reason that gender violence has earned a prominent position among the everyday concerns in recent decades, generating government policies. Such social policies express, on the one hand, recognition of social rights of citizenship, and secondly, social protection as state responsibility.

In the case of health policies in a democratic state of law, they must be universal and benefits should be distributed based on the principle of equity. Health policies translate into programs, which assumes nursing care of women as essential to the profession when it is systematic and planned. This nursing care is characterized by interpersonal relations of nurses and citizens, which from a dialectical perspective denotes a political action to the extent that evidence on the one hand, the subject, represented by the caregiver-state and on the other the object attention, represented by caring and civil society. Throughout history nursing has found different challenges, building a practical and scientific knowledge that strengthens the profession. Currently, our profession is facing gender violence as a serious public health challenge

## 2. Objective

Compare public policies on gender violence between Spain and Brazil as well as their influence in the care of the nurse to the battered women.

## 3. Methodology

It is a Qualitative study which uses a comparative descriptive method with a dialectical approach.

The choice of this methodology was performed because a study comprising two scenarios with unique and common features requires a data processing that follow the comparative method, which supports including historical, political-administrative and cultural variables. In this case the method emphasizes the analysis of public policies aimed at women, as well as insertion of nursing in these policies in the context of the Spanish National Health and Only Brazilian National Health System, which are not and cannot be isolated or independent facts, but part of a complex whole, where each interacts with the other and are mutually dependent, they must be analysed in the light of the dialectic.

### 3.1. Methodological procedure

In the comparative method data from different scenarios are ordered, presented and analysed in four stages:

1. Description: a comparative description of the phenomenon of study is conducted.
2. Interpretation: the data undergo thorough an examination in terms of theoretical framework of public policy and health care, establishing benchmarks.
3. Juxtaposition: the data of both scenarios are compared with the subject of study.
4. And finally the results of both scenarios are compared with each other.

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