

Article

Invisible domestic violence: an integrative review of literature on psychological, moral, and property violence

Violência doméstica invisível: uma revisão integrativa da literatura sobre violência psicológica, moral e patrimonial

Violencia doméstica invisible: una revisión integradora de la literatura sobre violencia psicológica, moral y patrimonial

Élika Nauanna Henrique Santos¹

Fundação Oswaldo Cruz, Brasília, DF.

 <https://orcid.org/0009-0004-4092-6112>

✉ elikanauanna@gmail.com

Maria Inez Montagner²

Universidade de Brasília, Brasília, DF.

 <https://orcid.org/0000-0003-0871-7826>

✉ inezmontagner@hotmail.com

Myrian Caldeira Sartori³

Tribunal de Justiça do Distrito Federal e dos Territórios, Brasília, DF.

 <https://orcid.org/0000-0002-0127-2409>

✉ myrian.sartori@gmail.com

Submitted on: 01/04/25

Revision on: 09/29/25

Approved on: 10/06/25

Abstract

Objective: to conduct an integrative review of the scientific literature on domestic violence in its psychological, moral, and patrimonial dimensions, with a focus on understanding the impacts of these forms of non-physical violence on victims and institutional and community responses.

Methodology: This is a qualitative integrative review conducted using the Scientific Electronic Library Online database. The search, conducted with specific filters, resulted in 141 publications. After careful analysis of the titles, abstracts, and application of pre-established inclusion and exclusion criteria, 28 articles were selected for detailed analysis. **Results:** There was a predominance of studies focused on psychological violence (96.5%), followed by property violence (28.5%) and, finally, moral violence (25%), which was often addressed implicitly in the studies. Despite the significant emphasis on psychological violence, there is a gap in the theoretical and empirical understanding of the three forms of non-physical violence, indicating the need for more integrated approaches that simultaneously consider the emotional, social, and economic aspects of domestic violence. **Conclusion:** the forms of violence analyzed, although often invisible, have profound repercussions on the mental health of victims, impacting their well-being, autonomy, and social integration. These findings reinforce the urgency of expanding the scope of academic research on

¹ Graduate in Biomedicine, Faculdade Anhanguera de Brasília, Brasília, DF, Brazil.

² PhD in Public Health, Universidade Estadual de Campinas, Campinas, SP, Brazil. Associate Professor III, Universidade de Brasília, Brasília, DF, Brazil.

³ Master's degree in Public Administration, Universidade de Brasília, Brasília, DF, Brazil. Judicial Technician, Tribunal de Justiça do Distrito Federal e dos Territórios, Brasília, DF Brazil.

non-physical violence and developing public policies and intervention practices that act in an integrated manner, ensuring effective protection and promoting gender equality.

Keywords: Domestic Violence; Violence against Women; Psychological Abuse; Property Violence; Moral Violence.

Resumo

Objetivo: realizar uma revisão integrativa da literatura científica acerca da violência doméstica nas dimensões psicológica, moral e patrimonial, com enfoque em compreender os impactos dessas formas de violência não física sobre as vítimas e as respostas institucionais e comunitárias.

Metodologia: Trata-se de uma revisão integrativa de caráter qualitativo, realizada na base de dados *Scientific Electronic Library Online*. A busca, conduzida com filtros específicos, resultou em 141 publicações. Após análise criteriosa dos títulos, resumos e aplicação dos critérios de inclusão e exclusão preestabelecidos, foram selecionados 28 artigos para análise detalhada. **Resultados:** observou-se a predominância de estudos voltados à violência psicológica (96,5%), seguida da violência patrimonial (28,5%) e, por fim, da violência moral (25%), frequentemente abordada de maneira implícita nos trabalhos. Apesar da ênfase significativa em violência psicológica, evidencia-se a lacuna no aprofundamento teórico e empírico das três formas de violência não física, indicando a necessidade de abordagens mais integradas que considerem simultaneamente os aspectos emocionais, sociais e econômicos da violência doméstica. **Conclusão:** as formas de violência analisadas, embora muitas vezes invisíveis, ocasionam repercussões profundas na saúde mental das vítimas, impactando seu bem-estar, autonomia e inserção social. Esses achados reforçam a urgência de expandir o escopo de pesquisas acadêmicas sobre violências não físicas e de desenvolver políticas públicas e práticas de intervenção que atuem de forma integrada, garantindo proteção efetiva e promoção da equidade de gênero.

Palavras-chave: Violência Doméstica; Violência contra a Mulher; Abuso Psicológico; Violência Patrimonial; Violência Moral.

Resumen

Objetivo: realizar una revisión integrativa de la literatura científica sobre la violencia doméstica en sus dimensiones psicológica, moral y patrimonial, con el propósito de comprender los impactos de estas formas de violencia no física sobre las víctimas y las respuestas institucionales y comunitarias.

Metodología: se trata de una revisión integrativa cualitativa, realizada en la base de datos *Scientific Electronic Library Online*. La búsqueda, realizada con filtros específicos, arrojó un total de 141 publicaciones. Tras un análisis cuidadoso de títulos y resúmenes y la aplicación de criterios de inclusión y exclusión preestablecidos, se seleccionaron 28 artículos para análisis detallado.

Resultados: se observó una predominancia de estudios centrados en la violencia psicológica (96,5%), seguida de la violencia patrimonial (28,5%) y, finalmente, la violencia moral (25%), abordada con frecuencia de manera implícita. A pesar del enfoque significativo en violencia psicológica, se identifica una brecha en la investigación que aborde simultáneamente las tres formas de violencia no física, evidenciando la necesidad de enfoques integrales que consideren dimensiones emocionales, sociales y económicas. **Conclusión:** estas formas de violencia, aunque a menudo invisibles, generan impactos profundos en la salud mental, bienestar, autonomía e integración social de las víctimas. Los hallazgos subrayan la urgencia de ampliar la investigación académica sobre violencia no física y de desarrollar políticas públicas e intervenciones que actúen de manera integral, garantizando protección efectiva y promoviendo la equidad de género.

Palabras clave: Violencia Doméstica; Violencia contra la Mujer; Abuso Psicológico; Violencia Patrimonial; Violencia Moral.

Introduction

According to the 2024 Brazilian Public Security Yearbook⁽¹⁾, Brazil has experienced an increase in cases of violence against women over the last few years. There were 1,238,208 police reports of various types of violence against women, including physical assault in the context of domestic violence (258,941 reports), psychological violence (38,507 reports), sexual abuse (72,454 reports), stalking (77,083 reports), threats (778,921 reports), and the crimes of homicide of women (2,463 reports) and femicide (1,467 reports), in addition to attempts at both (8,372 reports).

It is important to note that, according to the Brazilian Public Security Yearbook, the above data does not reflect all cases, since a portion of the violence is not reported, either due to the victim's lack of access to file a complaint or due to the normalization of violence against women by society⁽¹⁾. As Minayo⁽²⁾ points out, social violence, including domestic violence, should be understood as a serious public health problem, as it affects not only the physical integrity but also the mental and emotional health of victims. The author emphasizes that much of this violence remains invisible to reporting systems, comprising what is known as the "hidden crime rate."

Based on data from the Yearbook⁽¹⁾, in the context of domestic violence, there were 848,036 calls to the Military Police through 190 and 663,704 requests for emergency protective measures, representing an increase of 21.3% compared to 2022. It is noteworthy that 84.2% of femicide cases were perpetrated by intimate partners, current or former partners, and 63.3% of the crimes occurred in the victim's home.

As for crimes involving threats, psychological violence, and stalking, these occur in various contexts, with the majority taking place in the victim's home environment⁽¹⁾. Based on the data already cited, it is clear that domestic violence is an escalating phenomenon, which usually begins with minor assaults, not always physical, but which can culminate in the death of the victim^(1,3).

Given the severity and recurrence of domestic violence cases, it is essential to highlight that the Federal Constitution of 1988, in its Article 226, § 8, recognizes the State's duty to create mechanisms to curb violence in family relationships. This constitutional provision establishes the basis for public policies and specific legislation aimed at protecting victims, such as Law No. 11,340/2006, known as the Maria da Penha Law⁽⁴⁾.

The aforementioned Law No. 11,340⁽⁴⁾, published on August 7, 2006, known as the Maria da Penha Law — named in honor of Maria da Penha, a victim of attempted femicide who fought for justice — defines domestic and family violence against women as "any gender-based action or omission that causes death, injury, physical, sexual, or psychological suffering, and moral or property damage."

Violence can occur in the domestic sphere, understood as a space for coexistence with individuals who may or may not have family ties, in the family sphere, formed by individuals united by natural ties or by consideration, and in the sphere of intimate relationships, involving the current or former partner^(3,4,5,6).

According to the Maria da Penha Law⁽⁴⁾, domestic violence takes the form of physical, sexual, psychological, moral, and patrimonial violence. Physical violence is characterized by any action or conduct that uses physical force or weapons, violating the victim's bodily integrity. Examples include beating, torture, and strangulation, or any action that results in injury or harm^(4,5,6).

Sexual violence involves actions of a sexual nature that force the victim to witness, maintain, or participate in non-consensual sexual relations through intimidation, coercion, or the use of force. Examples include rape, unwanted sexual practices, and coercion to have an abortion^(4,5,6).

Psychological violence is understood as any conduct or action that causes emotional harm to the victim, including humiliation, threats, and blackmail^(4,5,6). According to Minayo⁽⁷⁾, this type of violence compromises women's mental health, causing emotional suffering, low self-esteem, depression, and even suicide risk. Because it is less visible, it tends to be neglected by both victims and health and justice services⁽⁷⁾. This type of violence has become more widely recognized today, especially after its criminalization in 2021.

While psychological violence aims to affect the victim's mental health, moral violence seeks to "tarnish" their reputation. The latter is understood as any action by the aggressor that falls under the crimes of slander (art. 138 of the Penal Code), insult (art. 140 of the Penal Code), and defamation (art. 139 of the Penal Code), which may occur through accusations of betrayal or inappropriate criticism in public^(4,5,6).

Finally, property violence is defined as the retention, appropriation, or destruction of the victim's property, which may manifest itself as theft, financial control, destruction of documents or work tools, among others^(4,5,6).

Domestic violence, especially in its psychological, moral, and patrimonial forms, represents a serious public health problem, whose implications go beyond the legal field and directly affect the physical, mental, and social health of victims⁽⁷⁾. In view of the above, this study aims to conduct an integrative review of the scientific literature on psychological, moral, and patrimonial domestic violence in order to understand the impact of such violence on victims and institutional responses.

Methodology

This is an integrative review of the literature with a qualitative approach. This methodology was chosen because of its objective to gather, analyze, and synthesize existing studies on a specific topic. In addition to offering a broad and up-to-date view of the subject under study, this approach is flexible, allowing the inclusion of studies with different methodologies, such as experimental, non-experimental, qualitative, and quantitative, which enables a critical and integrative analysis⁽⁸⁾.

The bibliographic survey for this study was conducted using the Scientific Electronic Library Online (SciELO) database. The choice of platform for research on gender violence and health, especially domestic violence, is based on its broad coverage of multidisciplinary and regional studies, as a central public health issue, highlighting impacts such as depression, gynecological diseases, and consequences in pregnancy⁽⁹⁾. In addition, it promotes debates on the intersectoral action necessary in caring for victims⁽¹⁰⁾ and discusses methodological, ethical, and structural challenges such as the fragmentation of information systems and underreporting of cases⁽¹¹⁾.

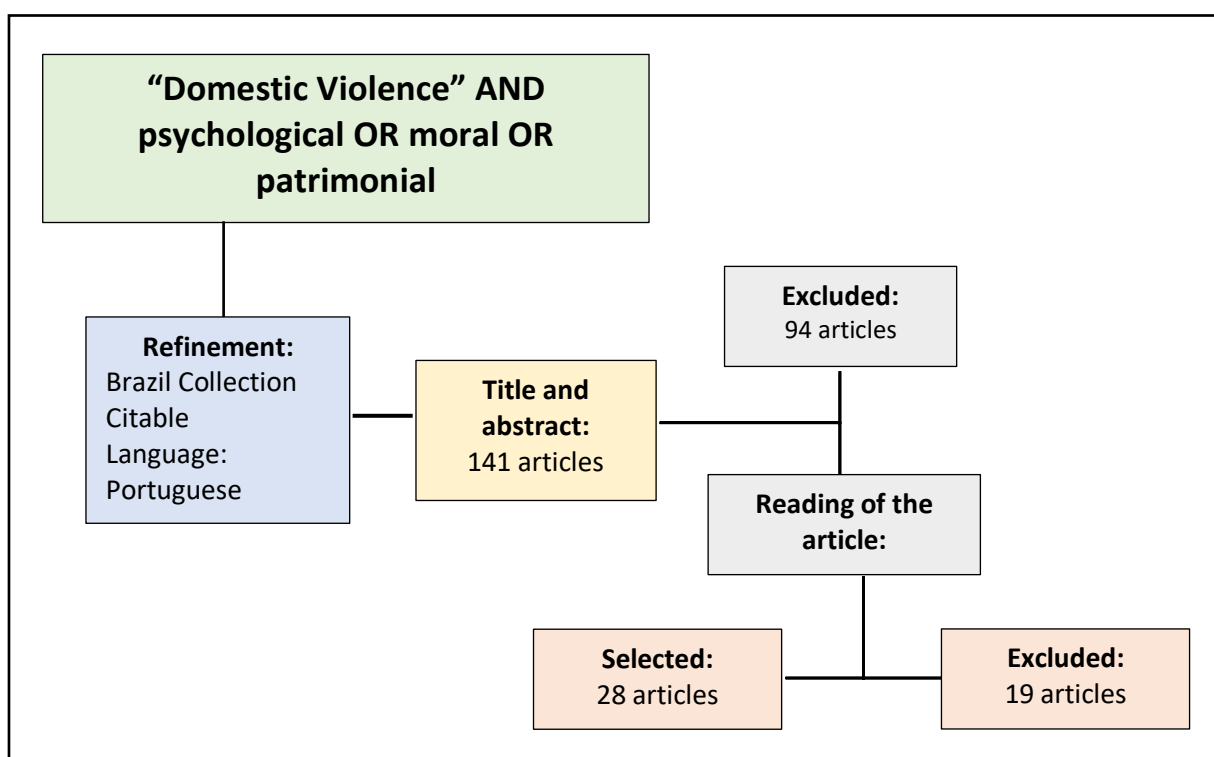
Although other databases also offer relevant studies on the topic, the limitation to SciELO is justified by its representativeness in the dissemination of Brazilian and Latin American scientific production, favoring a contextualized analysis of domestic violence. This combination of scientific rigor, sociocultural context, and thematic scope makes SciELO particularly suitable for studies that seek to understand and address violence against women from a health perspective.

The bibliographic search was conducted in three phases (Figure 1). The first phase aimed to identify studies that addressed different forms of domestic violence, with an emphasis on

psychological, moral, and patrimonial violence. To this end, the descriptor “domestic violence” *AND* “psychological” *OR* “moral” *OR* “property” was applied, and the following filters were used: Brazil collection, citable articles, written in Portuguese, and published between 2019 and 2024. The search resulted in 141 articles.

The second phase consisted of reading the titles and abstracts of the articles. With the help of the Rayyan application, the titles and abstracts were analyzed, and the articles that corresponded to the theme and objectives of the study were sent to the “included” folder, while those that did not meet the criteria were sent to the “exclude” folder. This process resulted in the selection of 47 articles for the third phase, which involved reading the texts in full. After reading them, 19 articles were excluded because they used the term “violence” in a broad sense, without specifying what type of violence they were referring to.

Figure 1. Flowchart of the article survey process



Source: Own elaboration, Brasília, 2024.

For this study, articles were selected that addressed domestic violence in the psychological, moral, and financial spheres perpetrated by intimate partners. We excluded 113 articles that dealt only with physical and/or sexual violence, as well as those that mentioned psychological, moral, and property violence only in the context of the legal definition established by the Maria da Penha Law, thus ensuring that the research focused on the types of violence that are the focus of this study.

Results and discussion

A total of 28 articles were analyzed, as detailed in Table 1.

Table 1. Articles selected from the SciELO database to compose the integrative literature review

Nº.	Article title	Objective	Author(s)	Year
1	Domestic violence against women: experiences of primary health care professionals ⁽¹²⁾ .	To analyze how Primary Health Care professionals experience domestic violence against women.	Rodrigues PS, Araújo LF, Vernesque JRS, Souza AP, Alarcon MFS, Higa EFR, et al.	2024
2	The meaning of care for women victims of domestic violence in the context of primary health care ⁽¹³⁾ .	To understand the meaning of care for women victims of domestic violence from the perspective of primary health care professionals.	Machineski GG.	2023
3	The information behavior of women victims of domestic violence: analysis of social barriers to accessing information from Chatman's perspective ⁽¹⁴⁾ .	Describe the circumstances that encouraged women victims of domestic violence to seek information.	Silva NFN, Presser NH, Lima IF.	2023
4	Domestic violence among public school teachers during the COVID-19 pandemic ⁽¹⁵⁾ .	Analyze the factors associated with the increase in domestic violence among teachers in the initial period of the pandemic.	Bicalho ACS, Santos AJC, Silva GOM, Costa LS, Oliveira NG; Nascimento TS, et al.	2023
5	Social thought structure of community health workers on domestic violence against women ⁽¹⁶⁾ .	Describe the representational structure of community health workers on domestic violence against women.	Machado JC, Santos CS, Gomes AMT, Boery RNSO, Rodrigues VP, Vilena ABA.	2023
6	The COVID-19 pandemic and the increase in domestic violence in vulnerable areas: a community-based response ⁽¹⁷⁾ .	Discuss the increase in domestic violence in Vila dos Pescadores during this period and the ways in which the community has coped.	Souza JB, Castro-Silva CR.	2022
7	COVID-19 as a gender market issue: is it a call for action against vulnerability? ⁽¹⁸⁾	Understand how relationships between market practices can generate discussions on social issues, such as the vulnerability of women to domestic violence.	Luna CP, Silva RO, Barros DF.	2022
8	Life(s) Maria(s): the story of a woman and the (re)portrayals of violence in narratives told ⁽¹⁹⁾ .	Understanding how relationships between market practices can generate discussions on social issues, such as the vulnerability of women to domestic violence.	Custódio MA, Tavares KNLB.	2022
9	Women remaining in violent relationships: unveiling everyday married life ⁽²⁰⁾ .	Unveiling women's permanence in violent marital daily life.	Gomes NP, Carneiro JB, Almeida LCG, Costa DSG, Campos LM, Vlirgens IR, et al.	2022
10	"EMPODEREENF" development of an app for the continuing education of	Building a prototype mobile application on psychological violence against women to	Magalhães BC, Silva MMO, Silva CF.	2022

	nurses on psychological violence against women ⁽²¹⁾ .	facilitate continuing education for nurses.		
11	Domestic violence in the context of social isolation due to the COVID-19 pandemic ⁽²²⁾ .	Discuss the increase in domestic violence against women in the context of social isolation due to the COVID-19 pandemic.	Souza L de J, Farias R de CP.	2022
12	Violence committed by intimate partners: observational study with women treated in the Unified Health System ⁽²³⁾ .	To determine the prevalence and types of violence suffered by women and identify gender attitudes related to the situation.	Formiga K, Zaia V, Vertamatti M, Barbosa CP.	2021
13	Power devices used by nurses to fight domestic violence against women ⁽²⁴⁾ .	Identify the power devices used by nurses to combat domestic violence against women from the perspective of the exercise of parrhesia.	Amarijo CL, Silva CD, Acosta DF, Cruz VD, Barlem JGT, Barlem ELD.	2021
14	Housing, assets, and survival: explicit and silenced dilemmas in contexts of domestic violence against women ⁽²⁵⁾ .	To examine the housing trajectories of women before, during, and after abusive relationships and in apparently non-violent situations in Recife.	Ludemir R, Souza F.	2021
15	Association between violence and women's socioeconomic and reproductive characteristics ⁽²⁶⁾ .	Verify the association between intimate partner violence throughout life and women's socioeconomic and reproductive characteristics.	Leite FMC, Venturin B, Amorim MHC, Bubach S, Gigante DP.	2021
16	Social distancing in times of COVID-19: an analysis of its repercussions on domestic violence ⁽²⁷⁾ .	Analyze the repercussions of social distancing in times of COVID-19 on domestic violence.	Marcolino E de C, Santos RC dos, Clementino F de S, Leal CQAM, Soares MC da S, Miranda FAN de, et al.	2021
17	Domestic violence and racism against black women ⁽²⁸⁾ .	Verify, through interviews, whether there were signs of the introjection of the ideal of whiteness in their subjectivities and assess in which contexts racism and domestic violence appeared in their lives.	Carrijo C, Martins AP.	2020
18	Domestic violence against women - with the speaks, they, the men who perpetrate violence ⁽²⁹⁾ .	To analyze the allegations made by men who perpetrate domestic violence, against their partners (or ex-partners), for committing their acts.	Einhardt A, Sampaio SS.	2020
19	Depression as a mediator of the relationship between intimate partner violence and sexual difficulties after childbirth: a structural analysis ⁽³⁰⁾ .	To evaluate the association between intimate partner violence (IPV) prior to childbirth and sexual difficulties in the postpartum period.	Sussmann LGPR, Faisal-Cury A, Pearson R.	2020
20	Intimate partner violence during pregnancy: prevalence and associated factors ⁽³¹⁾ .	Identify the prevalence of violence during pregnancy and verify the association with the socioeconomic, behavioral, and	Silva RP, Leite FMC.	2020

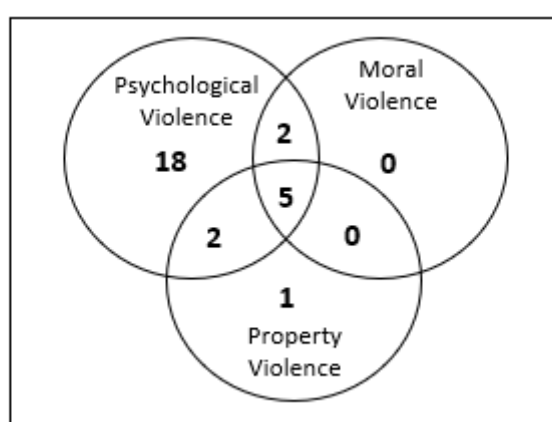
		clinical characteristics of pregnant women.		
21	Analysis of reports of intimate partner violence against women, Brazil, 2011-2017 ⁽³²⁾ .	Analyze reports of intimate partner violence (IPV) against women.	Macarenhas MDM, Tomaz GR, Meneses GMS, Rodrigues MTP, Pereira VOM, Corassa RB.	2020
22	Profile of intimate partners in domestic violence: an expression of the Brazilian social issue ⁽³³⁾ .	Research characteristics of intimate partners who commit domestic violence against women.	Gedrat DC, Silveira EF, Neto HA.	2020
23	Violence against women: programmatic vulnerability in times of SARS-COV-2/COVID-19 in São Paulo ⁽³⁴⁾ .	Discusses the challenges of assisting women victims of violence (VCM) at the beginning of the SARS-CoV-2/COVID-19 pandemic	Campos B, Tchalekian B, Paiva V.	2020
24	Characterization, recidivism, and perception of men who commit violence against women in reflective groups ⁽³⁵⁾ .	To characterize male perpetrators of violence against women (MPVW) who participated in Reflective Groups (RG) at the Specialized Center for Assistance to Male Perpetrators of Domestic and Family Violence (NEAH) in Belém, Pará, with an emphasis on recidivism and MPVW perceptions of RGs.	Vasconcelos CSS, Cavalcante LIC.	2019
25	What we know about interventions with perpetrators of domestic and family violence ⁽³⁶⁾ .	To analyze national academic production on the subject based on specialized literature and national reports.	Nothaft RJ, Beiras A	2019
26	Care for frequent family aggressors: integrative review of the literature ⁽³⁷⁾ .	Identify the main scientific literature on the care provided to frequent family aggressors and present the most relevant successful experiences.	Ferreira MNX, Hino P, Taminato M, Fernandes H.	2019
27	Violence against women and its association with the profile of the intimate partner: a study of primary care users ⁽³⁸⁾ .	To verify the association between a history of violence against women and the sociodemographic and behavioral characteristics of their intimate partners.	Leite FMC, Luis MA, Amorim MHC, Maciel ELN, Gigante DP.	2019
28	Women-mothers in situations of domestic and family violence in the context of institutional care for their children: the paradox of comprehensive protection ⁽³⁹⁾ .	To understand the reality experienced by these black women-mothers in situations of vulnerability and/or domestic violence who had their children placed in institutional care as a protective measure, reflecting on the challenges of guaranteeing their rights and addressing these socially and historically constructed inequalities.	Cleto M, Covolan N, & Signorelli MC.	2019

Source: Own elaboration, 2025.

After analysis, the selected articles were categorized into three thematic groups: psychological violence, moral violence, and property violence. In total, 27 articles addressed psychological violence, seven addressed moral violence, and eight addressed patrimonial violence, with some articles covering more than one category^(12,13,17,18,27,28,29,33,34). This classification allowed for a more detailed analysis of the various manifestations of domestic violence, highlighting the complexity and interactions between these forms of aggression.

During the analysis of the articles, intersections between different types of violence present in the same text were identified (Figure 2). These overlaps reveal the multidimensional and often interconnected nature of aggression in the domestic context, highlighting how different forms of violence tend to coexist and reinforce each other⁽³⁾.

Figure 2. Number of articles and the types of violence they address



Source: Own elaboration, Brasília, 2024.

Regarding the methodology used, 25 articles used structured or semi-structured interviews for data collection. Of these, five addressed the perspective of health professionals on caring for women victims of domestic violence, 14 explored the point of view of women victims, and six explored the perspective of abusive partners. These data provide a deeper understanding of the different perspectives on domestic violence.

Of the three articles that did not use structured or semi-structured interviews as their methodology, one analyzed data from reports registered through the "Disque 100" and "Ligue 180" hotlines⁽²²⁾. Another article employed a lexicographical approach and textual content analysis of national news published in four online newspapers⁽²⁷⁾. The third focused on evaluating initiatives to combat domestic violence implemented during the COVID-19 pandemic⁽¹⁸⁾.

Among the 28 articles, 108 authors were identified, of whom 20 were men and 88 were women. The authors who published most on the topic were Franciéle Marabotti Costa Leite, with three articles, followed by Maria Helena Costa Amorim and Denise Petrucci Gigante, who contributed to two articles each, in collaboration with Franciéle Marabotti Costa Leite.

In terms of journals, *Revista Brasileira de Epidemiologia* published the most on the topic, with three articles. Next, with two articles each, are *Revista de Saúde Coletiva*, *Texto e Contexto da Enfermagem*, and *Revista de Estudos Feministas*. The other journals published only one article on the topic.

In terms of publication years, 2020 was the year with the highest number of articles, totaling seven. Of these, three articles focused on psychological violence^(30,31,32) two related psychological and moral violence^(33,34) one related psychological and patrimonial violence⁽²⁹⁾, and one related the three types of violence⁽²⁸⁾. The year 2024, in turn, had the lowest production, with only one article published relating the three types of violence and the perspective of health professionals⁽¹²⁾.

In 2019, five articles were published, all of which addressed psychological violence^(35,36,37,38,39). In 2021, five articles were also published, one focusing on property violence⁽²⁵⁾ and three on psychological violence^(23,24,26) and one article relating the three types of violence in the context of the pandemic⁽²⁷⁾.

The following year, 2022, the number of publications increased to six, with four articles on psychological violence, one of which presents mechanisms to assist health professionals in identifying violence⁽²¹⁾, one analyzing data from the “dial 100” hotline in the context of the pandemic⁽²²⁾ and two related to the victims’ perspective^(19,20). The other two articles relate the three types of violence in the context of the pandemic from the victims' perspective^(17,18).

In 2023, four articles were published, three of which addressed psychological violence, one focusing on the perception of health professionals⁽¹⁶⁾, one dealing with victims during the pandemic⁽¹⁵⁾, and one on the perception of victims⁽¹⁴⁾. The other article relates psychological and property violence to the perception of health professionals⁽¹³⁾.

Table 2. Relationship: year of publication, quantity, types of violence, and perception/context based on information from the articles

Year	Number of articles/year	Types of violence			Number of articles/theme	Perception and context
		PSI	MOR	PAT		
2019	5	X			3	Perception of the aggressor
					2	Perception of the victim.
2020	7	X			3	Victim's perception.
		X	X		1	Perception of the victim in the context of a pandemic.
					1	Perception of the aggressor.
		X		X	1	Perception of the aggressor.
		X	X	X	1	Perception of the victim with racial bias.
2021	5	X			1	Healthcare professionals' perspective on tackling domestic violence.
					2	Victim's perception.
				X	1	Victim's perception.
		X	X	X	1	In the context of the pandemic.
2022	6	X			1	Creation of mechanisms to assist healthcare professionals in identifying violence.
					1	Analyzing data from the "dial 100" hotline in the context of the pandemic.
					2	The victim's perspective.
		X	X	X	2	Victim perception in the context

						of the pandemic.
2023	4	X			1	Healthcare professional perception.
					1	Perception of the victim in the context of the pandemic.
					1	Perception of the victim.
		X		X	1	Health professionals' perception.
2024	1	X	X	X	1	Perception of health professionals.

Source: Own elaboration, Brasília, 2024.

Generally, forms of violence have a profound psychological impact on victims. In this context, psychological violence is considered the starting point for other forms of violence, such as physical and sexual violence, which will be addressed in this study. In most cases, violence is seen as a scalable phenomenon, in which psychological violence precedes more serious manifestations, generating a continuous cycle of suffering and damage to the victim's mental and physical health^(1,3,32). As this is the predominant type of violence in the articles selected for this research, we will begin this section with psychological violence, followed by moral violence and, finally, property violence.

Psychological Violence

In addition to individual and contextual characteristics that increase vulnerability to psychological violence, studies indicate that structural, cultural, and institutional factors play a central role in its perpetuation. Gender inequality, combined with social norms that naturalize male control and devalue women's subjective experiences, creates subtle but effective barriers to the recognition and reporting of this type of abuse^(14,17,22,28). Intersectionality emerges as an amplifying factor, highlighting that black women, those in situations of socioeconomic vulnerability, or those responsible for children face additional obstacles in accessing formal mechanisms of protection or community support^(14,23,26,31,35). These conditions highlight the need for integrated public policies that go beyond the mere repression of violence, including the promotion of mental health, economic autonomy, housing security, and coordination between health, social assistance, education, and the justice system.

In the field of prevention and intervention, the literature highlights innovative strategies specifically aimed at psychological violence, which can be systematized and expanded. Community initiatives, such as support groups and discussion circles, have proven effective in strengthening women's empowerment, building solidarity networks, and reducing the social isolation of victims. At the same time, educational programs aimed at perpetrators of violence have the potential to modify abusive behaviors, contributing to a reduction in recidivism^(35,36).

The incorporation of digital technologies, exemplified by the use of reporting and monitoring applications, represents an advance in the accessibility of protection mechanisms, while enabling the collection of epidemiological data essential for the formulation of evidence-based public policies^(18,21). These findings reinforce that addressing psychological violence requires intersectoral,

continuous approaches that are sensitive to social inequalities, promoting not only the immediate protection of victims, but also the transformation of cultural norms that naturalize abuse and make it difficult to stop.

In the case of pregnant women, studies indicate that psychological violence perpetrated by their partners tends to intensify, while physical and sexual aggression decreases^(30,31). This change in the pattern of violence suggests a behavioral adaptation of the aggressor to the gestational period, maintaining control through less visible and more difficult to detect strategies. Such evidence reinforces the need to recognize psychological violence as a sophisticated and persistent form of abuse.

Another important aspect highlighted in the literature is the normalization of violence within the family, experienced since childhood. In these cases, violence is so present in their daily lives that women often blame themselves for the violence they suffer, making it difficult to identify it as something to be confronted. This difficulty is even more pronounced in contexts where the aggressor is the father of their children, intensifying the emotional bonds and moral dilemmas involved. As a result, many remain in abusive relationships, which can evolve into more serious forms of violence, such as physical and sexual assault and, in extreme situations, femicide^(1,19,25,28,29,31,32,33,35). This intergenerational cycle of violence reveals not only the repetition of patterns, but also the absence of public policies aimed at emotional education, strengthening healthy family bonds, and building support networks that enable women to break the cycle of abuse.

With regard to the profile of the aggressor, the literature points to the use of alcohol and other drugs, excessive jealousy, and controlling behavior as recurring characteristics. It is also noteworthy that aggressors, like victims, experienced or witnessed situations of domestic violence during childhood, which contributes to the reproduction of abusive patterns in interpersonal relationships. Psychological violence intensifies when the aggressor feels that he is losing control of the situation and blames his partner for his feeling of lack of control^(17,23,26,29,32,33,35,38). This violence manifests itself mainly through the victim's disqualification, threats, and persecution^(13,19,20,36,39). The recurrence of these behaviors points to the need for preventive strategies involving mental health and the education of children and adolescents, aiming to interrupt the reproduction of violence as a form of interpersonal relationship.

It should be noted that although the predominant profile is that of women in vulnerable situations, there are also women with higher incomes and education levels who suffer the stigma of reporting abuse due to shame and fear of exposure. Thus, violence is not associated with ethnicity and social class^(14,19,24,30). This data reinforces that domestic violence is a cross-cutting phenomenon that affects different social groups, and that the barriers to reporting vary according to the context, requiring public policies that are sensitive to the specificities of each reality.

Psychological violence causes both physical and mental consequences, which impact the health of victims. Many women develop psychological disorders such as depression and anxiety and, in more severe cases, may experience suicidal ideation or even attempt suicide^(20,30,31,32). Primary Health Care (PHC) units should be the gateway for receiving these women, but this is not yet the reality. Cases that reach PHC are usually referred by the victim or through Community Health Agents, as they are the professionals who are present in the territory, facilitating possible contact with victims^(12,13,16,21,24). The difficulty in identifying cases reveals gaps in the training of professionals and in intersectoral coordination, compromising the effectiveness of care.

There is still a difficulty for PHC professionals in identifying cases of psychological violence and, consequently, an inability to know which mechanisms should be used to protect these women. In addition, the articles^(12,13,16,21,24,32) show that more effective intersectoral integration is necessary to ensure that assistance to these women is provided in a way that guarantees their safety in all aspects. The absence of clear protocols and well-defined flows between health, social assistance, and public safety services compromises the institutional response to violence, requiring investments in training, infrastructure, and coordination between sectors.

During the COVID-19 pandemic, there was an increase in incidents of domestic violence. Social isolation meant that many women spent more time with their abusers, which intensified situations of abuse^(15,17,18,22,27,34). According to Souza and Farias⁽²²⁾ between 2019 and 2020, most of the reports made through the “Disque 100” and “Ligue 180” services were made by white women, and the main aggressors were their spouses, with psychological violence being the most prevalent in this group.

In contrast, there was an increase in cases of homicides and femicides involving black women, which may explain the lower number of reports in this group. In non-pandemic periods, black women (56%) are the ones who most frequently file such reports^(22,28). This contrast reveals racial inequalities in the way violence is experienced and reported, indicating that black women face additional barriers, such as institutional racism and social invisibility, which hinder their access to protection and justice.

Still in the context of the pandemic, in an attempt to address this reality of increased reports of domestic violence, several initiatives to support victims were launched, including awareness campaigns and shelter actions. One of the actions was the inclusion of a "shortcut" for reporting in the shopping app, an initiative promoted by a large retail chain, which aimed to offer a way to discreetly assist women at risk in reporting⁽¹⁸⁾.

Another very relevant campaign was the "Red Signal Against Domestic Violence" Campaign, in which women in situations of violence drew an "X" on the palm of their hand and showed it in commercial establishments as a cry for help. This campaign later became the Red Signal Program, which was established by Law No. 14,188/2021. This law expanded protection for women by criminalizing psychological violence through Article 147-B of the Penal Code⁽⁴⁰⁾. Although these initiatives represent important advances, it is necessary to evaluate their effectiveness and continuity, ensuring that they are not just emergency responses, but part of a permanent and structured public policy.

Moral Violence

Moral violence, although often addressed implicitly in the literature, is a central dimension of psychological abuse, exerting profound effects on the self-esteem, mental health, and social integration of victims^(12,17,18,22,27,28,33,34,37). It manifests itself through name-calling, unfounded accusations of betrayal, public humiliation, defamation, and other crimes against honor, constituting deliberate strategies of control and domination that reinforce unequal power relations^(22,28,33,37). Studies indicate^(17,22,28,33) that moral violence is especially prevalent in contexts of close coexistence, such as marital and family relationships, and tends to intensify in situations of social, economic, or racial vulnerability, highlighting the importance of intersectional analysis to understand the complexity of this type of abuse.

The absence of specific protocols for identifying moral violence in health services, social assistance, and legal systems compromises the protection of victims, as it is often incorporated in a residual manner into programs focused on psychological violence, which limits effective interventions. Furthermore, the legal and conceptual invisibility of this form of violence makes it difficult to report, favors impunity, and perpetuates the normalization of abusive behavior, creating a silent cycle of oppression. Thus, it is urgent that future research deepen the characterization of moral violence, define clear indicators for its recognition, and integrate its analysis into public policies, prevention programs, and intersectoral protection strategies, ensuring structured responses that consider the complexity of the phenomenon and promote justice and social equity for victims^(12,17,18,22,27,28,33,34,37).

Property Violence

The texts mention patrimonial violence as one of the least common types of violence⁽³²⁾. Some of these cases result in the woman's financial dependence on her partner, constituting a form of domination and control^(12,27,28). This dependence undermines the woman's hope, causing her to remain in the violent relationship. This type of abuse also involves the destruction of personal belongings (clothes, civil documents, telephones, and valuables) with the aim of making it difficult for victims to report other acts of violence they have suffered⁽²⁵⁾.

The study by Ludermir and Souza⁽²⁵⁾ addresses how gender inequalities and economic dependence increase women's vulnerability, especially when it comes to housing. Lack of knowledge about property rights, such as misconceptions about who "owns" a house or property, and the absence of documentation proving ownership or contribution to the couple's assets increase these women's vulnerability in situations of separation. Many of them face the withholding of common property or the concealment of assets by their partners.

In the health field, as with psychological violence, property violence is often difficult to identify, especially by health professionals in PHC. However, when recognized, this violence can be treated in a way that empowers women and helps them break the cycle of abuse. Initiatives such as craft workshops, promoted within the context of PHC, aim to offer women a form of financial emancipation, enabling them to generate income and achieve greater autonomy⁽¹²⁾.

Intersectionality, coping strategies, and implications for the right to health

Non-physical domestic violence, encompassing psychological, moral, and patrimonial dimensions, constitutes a complex manifestation of control and oppression, whose consequences extend beyond the immediate, affecting the mental health, autonomy, and social integration of victims^(12,14,17,22,25,28,32,33,37).

Psychological violence, often exacerbated in contexts of socioeconomic vulnerability and marked by humiliation, threats, and persecution, is intensified by the normalization of abusive behavior and the stigma that falls on women^(19,23,26,31,35).

Moral violence, which has been little investigated in isolation, reinforces these dynamics by eroding victims' self-esteem through name-calling, accusations of betrayal, and crimes against honor, perpetuating patterns of submission and rendering the abuse invisible^(12,17,18,22,27,28,33,34,37).

At the same time, patrimonial violence manifests itself through the withholding of resources, destruction of property, and limitation of financial autonomy, consolidating women's economic dependence and making it difficult to report or break the cycle of abuse^(12,25,27,28,32).

The intersectionality of gender, race, social class, and motherhood amplifies the effects of these forms of violence, highlighting that black women, those living in poverty, or those responsible for children face additional barriers to accessing protection mechanisms and breaking abusive relationships.

An integrated approach to combating these forms of violence requires intersectoral coordination, innovation, and public policies that are sensitive to structural inequalities. The literature indicates that community initiatives, such as support groups and discussion circles, strengthen female empowerment and the construction of solidarity networks, while educational programs aimed at perpetrators of violence have the potential to reduce recidivism^(35,36). The use of digital technologies, including reporting and monitoring applications, expands access to protection mechanisms and contributes to the collection of epidemiological data that inform evidence-based policies^(18,21). Income generation and training initiatives promoted in primary health care units demonstrate how financial autonomy can act as a tool for preventing property violence, while promoting psychological and social empowerment. Thus, effectively addressing non-physical violence requires integrated strategies that combine prevention, protection, and cultural y transformation, aiming not only at the immediate safety of victims but also at deconstructing social norms that legitimize abuse and perpetuate structural inequalities.

Non-physical violence against women—psychological, moral, and patrimonial—is an insidious manifestation of control and domination that silently but profoundly destructively inscribes itself on women's bodies and lives. Recognizing these forms of violence is essential for the construction of effective public policies that are sensitive to the specificities of each woman. In this context, health law emerges as a fundamental field for the realization of the right to health, especially for those in vulnerable situations. Delduque⁽⁴¹⁾ emphasizes that health must be understood as a fundamental human right, the realization of which depends on coordination between the various sectors of society and the state, requiring health policies that consider the social, cultural, and economic dimensions that influence women's health, especially those in situations of violence⁽⁴¹⁾.

Final considerations

The fight against non-physical violence against women is not limited to confronting isolated acts of aggression, but requires an integrated approach involving health, education, social assistance, and public safety. It is necessary for health professionals, especially in primary care units, to be trained to identify and welcome women in situations of violence, offering psychosocial support and guidance on their rights.

In addition, it is imperative that public policies be structured in such a way as to guarantee economic autonomy, housing security, and access to quality health services, promoting the emancipation of women and breaking the cycle of violence. Thus, health law is not only a legal field, but a strategic tool for promoting the comprehensive health of women, recognizing and addressing the multiple dimensions of violence that affect their lives.

Conflict of interest

The authors declare that there is no conflict of interest.

Authors' contributions

Santos ENH contributed to the conception/design of the article, analysis and interpretation of data, writing of the article, critical review of its content, and approval of the final version. Montagner MI contributed to the analysis and interpretation of data, critical review of its content, and approval of the final version of the article. Sartori MC contributed to the analysis and interpretation of data, critical review of its content, and approval of the final version of the article.

Editorial team

Scientific editor: Alves SMC

Assistant editors: Cunha JRA, Lemos ANLE

Associate editors: Lamy M, Ramos E

Executive editor: Teles G

Editorial assistants: Mendes DSGJ, Rocha DSS, Rodrigues MESN

Proofreader: Barcelos M

Translator: Câmara DEC

References

1. Fórum Brasileiro de Segurança Pública. Anuário Brasileiro de Segurança Pública 2024. São Paulo: Fórum Brasileiro de Segurança Pública; 2024 [cited Feb. 2, 2025]. Available from: <https://publicacoes.forumseguranca.org.br/items/f62c4196-561d-452d-a2a8-9d33d1163af0>
2. Minayo MCS. A violência social sob a perspectiva da saúde pública. Cad Saúde Pública. 1994 [cited Feb. 2, 2025]; 10(supl. 1):7-18. Available from: <https://doi.org/10.1590/S0102-311X1994000500002>
3. Lourenço LM, Baptista MN. Manual EVIPI: Escala de violência entre parceiros íntimos. 1a. São Paulo: Editora Högrefe; 2017. 64p.
4. Brasil. Lei nº 11.340, de 7 de agosto de 2006. Cria mecanismos para coibir a violência doméstica e familiar contra a mulher [Internet]. Brasília: Presidência da República, 2006 [cited Feb. 2, 2025]. Available from: https://www.planalto.gov.br/ccivil_03/_Ato2004-2006/2006/Lei/L11340.htm
5. Rio de Janeiro. Cartilha sobre a Lei Maria da Penha. Rio de Janeiro: Poder Judiciário do Estado do Rio de Janeiro; Jul. 2019 [Internet]. Available from: <https://www.tjrj.jus.br/documents/10136/6808048/cartilha-maria-penha-julho-2019.pdf/22213c87-43ec-d04c-424d-606bd6883be6?version=1.0>
6. Distrito Federal. Tipos de violência. Observatório da mulher [Internet]. [Cited Feb. 2, 2025]. Available from: <https://www.observatoriodamulher.df.gov.br/tipos-de-violencia-2/>
7. Minayo MCS. Violência e saúde. Rio de Janeiro: Editora Fiocruz; 2006. Available from: <https://doi.org/10.7476/9788575413807>
8. Mendes KDS, Silveira RCCP, Galvão CM. Revisão integrativa: método de pesquisa para a incorporação de evidências na saúde e na enfermagem. Texto Contexto Enferm [Internet]. Dez. 2008 [cited Feb. 2, 2025]; 17(4):758-64. Available from: <https://doi.org/10.1590/S0104-07072008000400018>
9. Schraiber LB, d'Oliveira AFLP. Violência contra mulheres: interfaces com a Saúde. Interface (Botucatu) [Internet]. Ago. 1999 [cited feb. 2, 2025]; 3(5):13-26. Available from: <https://doi.org/10.1590/S1414-32831999000200003>
10. De Alcantara PPT, Carneiro FF, Pessoa VM, Pinto AGA, Machado MFAS. Cuidado integral às mulheres vítimas de violência. Ciênc saúde coletiva [Internet]. 2024 [cited feb. 2, 2025]; 29(9):453-458. Available from: <https://doi.org/10.1590/S0080-62342009000200027>
11. Okabe I, da Fonseca RMGS. Violência contra a mulher: contribuições e limitações do sistema de informação. Rev esc enferm USP [Internet]. Jun. 2009 [cited feb. 2, 2025]; 43(2):453-8. Available from: <https://doi.org/10.1590/S0080-62342009000200027>
12. Rodrigues PS, Araujo LF, Vernasque JRS, de Souza AP, Alarcon MFS, Higa EFR, et al. Violência doméstica contra as mulheres: vivências dos profissionais da Atenção Primária a Saúde. Texto Contexto – Enferm [Internet]. 2024 [cited feb. 2, 2025]; 33:1-13. Available from: <https://doi.org/10.1590/1980-265X-TCE-2023-0403pt>
13. Machineski GG. O significado da atenção à mulher vítima de Violência Doméstica no contexto da Atenção Primária à Saúde. Saúde em Debate [Internet]. 2023 [cited feb. 2, 2025]; 47(139):931-940. Available from: <https://doi.org/10.1590/0103-1104202313915>
14. Da Silva NFN, Presser NH, de Lima IF. O comportamento em informação de mulheres vítimas de violência doméstica: análise das barreiras sociais de acesso à informação na perspectiva de Chatman. Em Quest [Internet]. 2023 [cited feb. 2, 2025]; 29:1-29. Available from: <https://doi.org/10.1590/1808-5245.29.125152>
15. Bicalho ACS, Santos AJC, Silva GOM, da Costa LS, de Oliveira NG, Nascimento TS, et al. Violência doméstica em professores da rede pública estadual durante a pandemia da COVID-19. J Bras Psiquiatr

[Internet]. 2023 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/0047-2085000000402>

16. Machado JC, Santos CS, Gomes AMT, Boery RNSO, Rodrigues VP, Vilela ABA. Estrutura de pensamento social de agentes comunitárias de saúde sobre violência doméstica contra a mulher. *Ciênc Saúde Coletiva* [Internet]. 2023 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1413-81232023286.14592022>

17. De Souza JB, de Castro-Silva C. Pandemia da covid-19 e o aumento da violência doméstica em território vulnerável: uma resposta de base comunitária. *Saúde Soc* [Internet]. 2022 [cited feb. 2, 2025]; 31(4):1-11. Available from: <https://doi.org/10.1590/S0104-1290202220227pt>

18. Luna CP, Silva ROD, Barros DF. COVID-19 as a gender market issue: is it a call for action against vulnerability? *Cadernos EBAPEBR* [Internet]. 2022 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1679-395120210051x>

19. Custódio MA, Tavares KNLB. Vida(s) Maria(s): a história de uma mulher e os (re)tratos da violência em narrativas contadas. *Psicol USP* [Internet]. 2022 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/0103-6564e200129>

20. Gomes NP, Carneiro JB, de Almeida LCG, da Costa DSG, Campos LM, Virgens IR, et al. Permanência de mulheres em relacionamentos violentos: desvelando o cotidiano conjugal. *Cogitare Enferm* [Internet]. 2022 [cited feb. 2, 2025]; 27:1-10. Available from: <https://doi.org/10.5380/ce.v27i0.78904>

21. Magalhães BC, Silva MMO, Silva CF, Alcântara PPT, Oliveira CAN, Araújo MM, et al. “EMPODEREENF”: construction of an application for nurses’ continuing education on psychological violence against women. *Rer. Bras. Enferm* [Internet]. 2022 [cited feb. 2, 2025]; 75(5):1-9. Available from: <https://doi.org/10.1590/0034-7167-2020-0391pt>

22. Souza LJ, Farias RCP. Violência doméstica no contexto de isolamento social pela pandemia de covid-19. *Serv. Soc Soc* [Internet]. 2022 [cited feb. 2, 2025]; (144):213-32. Available from: <https://doi.org/10.1590/0101-6628.288>

23. Formiga K, Zaia V, Vertamatti M, Barbosa CP. Violência cometida pelo parceiro íntimo: estudo observacional com mulheres atendidas no Sistema Único de Saúde. *Einstein São Paulo* [Internet]. 2021 [cited feb. 2, 2025]; 19:1-7. Available from: https://doi.org/10.31744/einstein_journal/2021AO6584

24. Amarijo CL, Silva CD, Acosta DF, Cruz VD, Barlem JGT, Barlem ELD. Dispositivos de poder utilizados por enfermeiros para o enfrentamento da violência doméstica contra a mulher. *Texto Contexto – Enferm* [Internet]. 2021 [cited feb. 2, 2025]; 30:1-12.

Available from: <https://doi.org/10.1590/1980-265X-TCE-2019-0389>

25. Ludermit R, de Souza F. Moradia, patrimônio e sobrevivência: dilemas explícitos e silenciados em contextos de violência doméstica contra a mulher. *Rev Bras Estud Urbanos E Reg* [Internet]. 2022 [cited feb. 2, 2025]; 23:1-25. Available from: <https://doi.org/10.22296/2317-1529.rbeur.202126>

26. Leite FMC, Venturin B, Amorim MHC, Bubach S, Gigante DP. Associação entre a violência e as características socioeconômicas e reprodutivas da mulher. *Cad Saúde Coletiva* [Internet]. 2021 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1414-462X202129020387>

27. Marcolino EC, dos Santos RC, Clementino FS, Leal CQAM, Soares MCS, de Miranda FAN, et al. O distanciamento social em tempos de Covid-19: uma análise de seus rebatimentos em torno da violência doméstica. *Interface - Comun Saúde Educ* [Internet]. 2021 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/Interface.200363>

28. Carrijo C, Martins PA. A violência doméstica e racismo contra mulheres negras. *Rev Estud Fem* [Internet]. 2020 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1806-9584-2020v28n260721>

29. Einhardt A, Sampaio SS. Violência doméstica contra a mulher - com a fala, eles, os homens autores da violência. *Serviço Soc Soc* [Internet]. 2020 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/0101-6628.217>

30. Sussmann LGPR, Faisal-Cury A, Pearson R. Depressão como mediadora da relação entre violência por parceiro íntimo e dificuldades sexuais após o parto: uma análise estrutural. *Rev Bras Epidemiol* [Internet]. 2020 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1980-549720200048>

31. Silva RP, Leite FMC. Violências por parceiro íntimo na gestação: prevalências e fatores associados. *Rev Saúde Pública* [Internet]. 2020 [cited feb. 2, 2025]. Available from: <https://doi.org/10.11606/s1518-8787.2020054002103>

32. Mascarenhas MDM, Tomaz GR, de Meneses GMS, Rodrigues MTP, Pereira VOM, Corassa RB. Análise das notificações de violência por parceiro íntimo contra mulheres, Brasil, 2011-2017. *Rev Bras Epidemiol* [Internet]. 2020 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1980-549720200007.supl.1>

33. Gedrat DC, da Silveira EF, de Almeida Neto H. Perfil dos parceiros íntimos de violência doméstica: uma expressão da questão social brasileira. *Serviço Soc Soc* [Internet]. 2020 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/0101-6628.216>

34. Campos B, Tchalekian B, Paiva V. Violência contra a mulher: vulnerabilidade programática em tempos de

SARS-COV-2/ COVID-19 em São Paulo. *Psicol Soc* [Internet]. 2020 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1807-0310/2020v32240336>

35. Vasconcelos CSS, Cavalcante LIC. Caracterização, reincidência e percepção de homens autores de violência contra a mulher sobre grupos reflexivos. *Psicol. Soc* [Internet]. 2019 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1807-0310/2019v31179960>

36. Nothaft RJ, Beiras A. O que sabemos sobre intervenções com autores de violência doméstica e familiar? *Rer. Estud. Fem* [Internet]. 2019 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1806-9584-2019v27n356070>

37. Ferreira MNX, Hino P, Taminato M, Fernandes H. O cuidado do agressor familiar frequente: revisão integrativa da literatura *Acta Paulista de Enferm* [Internet]. 2019 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1982-0194201900046>

38. Leite FMC, Luis MA, Amorim MHC, Maciel ELN, Gigante DP. Violência contra a mulher e sua associação

com o perfil do parceiro íntimo: estudo com usuárias da atenção primária. *Rev. Bras. de Epidem* [Internet]. 2019 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/1980-5497201900056>

39. Cleto M, Covolan N, Signorelli MC. Mulheres-mães em situação de violência doméstica e familiar no contexto do acolhimento institucional de seus(as) filhos(as): o paradoxo da proteção integral. *Saúde e Soc* [Internet]. 2019 [cited feb. 2, 2025]. Available from: <https://doi.org/10.1590/S0104-12902019170922>

40. Souza M. Crime de violência psicológica contra a mulher (Lei 14.188/2021) é incluído no Código Penal. *JusBrasil* [Internet]. 2021 [cited feb. 2, 2025]. Available from: <https://www.jusbrasil.com.br/artigos/crime-de-violencia-psicologica-contra-a-mulher-lei-14188-2021-e-incluido-no-codigo-penal/1259877638>

41. Alves SMC, Lemos AL, Delduque MC. *Direito Sanitário: coletânea em homenagem à Profa. Dra. Maria Célia Delduque*. Brasília: Matrioska Editora; 2020.

How to cite

Santos ENH, Montagner MI, Sartori MC. Invisible domestic violence: an integrative review of literature on psychological, moral, and property violence. *Cadernos Ibero-Americanos de Direito Sanitário*. 2025 oct./dec.;14(4):79-96 <https://doi.org/10.17566/ciads.v14i4.1320>

Copyright

(c) 2025 Élika Nauanna Henrique Santos, Maria Inez Montagner, Myrian Caldeira Sartori.

