

Institutional overview of group work with men perpetrators of violence against women in Brazil

Panorama institucional do trabalho grupal com homens autores de violência contra mulher no Brasil

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Abstract

The Maria da Penha Law assists male perpetrators of violence in rehabilitation centers translated, in practice, into group activities. This study offers a national overview of these actions by conducting a literature review and bibliographical and documental research. Groups were identified by searches on LILACS/VHL, MEDLINE/PUBMED, COCHRANE LIBRARY, EMBASE, the Brazilian Digital Library of Theses and Dissertations (BDTD), and the Coordination for the Improvement of Higher Education Personnel's (CAPES) journal portal, published maps and national listing of initiatives with male perpetrators of violence, and a web search. Of the 309 groups identified, 271 answered an electronically sent questionnaire from April to May 2021. Results draw an overview showing the active institutions; the way men are referred to them; the existence of networking and approximation to social movements; information about facilitating teams; goals; evaluation methodology; and the main results and difficulties highlighted by these groups. This study also confirmed gaps, such as the absence of a national public policy that welcomes and encourages local organizations; facilitators' lack of ongoing training; the absence or scarcity of financial contribution; and especially the fragile evaluation and monitoring of activities.

Keywords: Gender; Violence Against Women; Violence Perpetrators Group.

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Resumo

A Lei Maria da Penha prevê o atendimento aos homens autores de violência em centros de reabilitação traduzidos, na prática, em atividades grupais. Este artigo apresenta um panorama nacional destas ações, realizado por meio de revisão de literatura, pesquisa bibliográfica e documental. Os grupos foram identificados através de buscas nas bases LILACS/BVS, MEDLINE/PUBMED, COCHRANE LIBRARY, EMBASE, Biblioteca Digital Brasileira de Teses e Dissertações (BDTD), portal de periódicos da Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (Capes), mapeamento e listagem nacional das iniciativas com homens autores de violência já publicadas e pesquisa web. Dos 309 grupos identificados, 271 responderam o questionário enviado por meio eletrônico nos meses de abril e maio de 2021. Os resultados possibilitaram traçar um panorama que evidenciou as instituições atuantes; a forma de encaminhamento dos homens; a existência do trabalho em rede e aproximação dos movimentos sociais; informações sobre a equipe facilitadora; objetivos; metodologia de avaliação e os principais resultados e dificuldades destacados pelos grupos. Hiatos também foram confirmados como a ausência de política pública nacional que acolha e impulse as organizações locais; a falta de formação continuada da equipe de facilitação; a ausência ou pouco aporte financeiro e, principalmente; a fragilidade na avaliação e monitoramento das atividades.

Palavras-chave: Gênero; Violência Contra a Mulher; Grupo com Autor de Violência.

Introduction

Violence is a public health issue that has historically configured one of the most serious problems of the societal structure as a construct of individual and collective daily life (Johnson et al., 2007). Gender violence is specifically based on the stigma of male virility and female submission and reinforced by the patriarchal logic of power hierarchization. With this spectrum, the personal relationship between a man and a woman according to the criterion of proximity between the “victim and the aggressor” intensifies the vulnerability of women in affective-conjugal relationships (domestic, family, or intimate).

Gender violence is structured by institutions, daily practices; in short, all social relation constituents. Denying this characteristic weakens any attempt to face this situation. It is important to highlight that this form of violence affects both men and women under a dynamic containing sociocultural processes that legitimize and naturalize male superiority, establishing different forms of inequality that inscribe violence (Saffioti, 2001).

At the end of the 1960s, domestic violence began to be deemed a social and health problem after studies on family relationships, traditional roles, and places attributed to women in our society (Gomes, 2007). Minayo (2006) points out that at least 35% of women’s complaints to health services involve violence suffered in marital dynamics, a multifaceted phenomenon requiring political responses. Significant advances have been made; gaining prominence after a strong international agenda in this direction was established in the 1990s.

Since the redemocratization of Brazil, feminist activities—whose claims have assumed a commitment to changing the structure that maintains the naturalization of gender violence—have reached the government and civil society to convert their struggle into legal frameworks. This movement introduced the theme in the health agenda to implement and produce concrete responses that go beyond treating injuries and traumas to address their causes. The strength of

feminism also infiltrated documents from health international organizations, such as those of the Inter-American Conference on Society, Violence, and Health held by the Pan American Health Organization in Washington in 1994 (PAHO, 1994).

From this, reaching spaces of social participation was possible via councils and coordination in all three governmental spheres. During this path, guiding documents from different areas, such as the National Policy of Comprehensive Attention to Women's Health (Brasil, 2004), featured theoretical discussions. In the same year, Ordinance GM/MS no. 2.406 disseminated the compulsory notification of violence against women, launching a "pedagogical matrix" to form the Comprehensive Care Networks for Women and Adolescents for domestic and sexual violence in 2006, following the enactment of Law 11.340—Maria da Penha Law (LMP)—which the United Nations Development Fund for Women considered one of the three most advanced laws in the world on the subject (UN Women, 2011). Nevertheless, there remains an astonishing gap between what the LMP proposes and professional health practice.

A study with Psychosocial Care Center professionals found that some healthcare providers remain unaware of the LMP, stating that women misuse its legal protection (Pedrosa; Zanello, 2017). The idea that creating a mechanism to protect women harms men is not an understanding exclusive to the male perpetrators of violence. This study points out how much such social myths influence professional practice, evincing a serious form of gender violence invisibilization permeating the perpetration of institutional violence in the aid of women in this situation.

Despite the specific legal apparatus to cope with violence against women, the approach to men, if carried out, remains restricted to the path of broad defense, endorsing the punitive logic that reinforces women's vulnerability and often worsening episodes of violence following complaints. High rates of domestic violence persist even in the face of legislation guaranteeing the imprisonment of aggressors.

Thus, the LMP treatment toward male violence perpetrators is extremely relevant as it may create

and promote "education and rehabilitation centers for aggressors" and propose men's attendance to "recovery and re-education programs" (Brasil, 2006). Although lacking a specific proposal to organize such services for aggressors and any indication of a comprehensive look at the implementation of this approach, the regulation significantly changed the Brazilian scenario regarding care for male perpetrators of violence (MPV). The very use of the MPV nomenclature moves away from any intention of fixating men as aggressors. The field of studies and approach to men in accountability networks (such as police stations and the judiciary system) or in confronting violence against women in social assistance recognize and disseminate this term.

Precisely because it is a relational phenomenon, violence requires an intervention that includes both sides to effectively transform violent relationships (Saffioti, 2015). Thus, the group work with MPV currently configures a strategic and indispensable tool to prevent this Brazilian scenario and cope with it. The literature places groups with MPV in a broad system that actively confronts violence against women with tools from different operation fronts given the complexity of the problem. Including group service in the network also facilitates all possible referral modalities for men in care, such as the use of specialized services for alcohol or drug abuse or mental health issues, among others.

Couto and Dantas (2016) analyzed the literature on gender, masculinities, and health in *Saúde e Sociedade* issues. Their descriptive analysis focused on 49 studies. What draws our attention is that, of these, 10 focused on men and women as research subjects; 17, on women as subjects; 18, on theory, literature reviews of gender and masculinities, or third parties (social workers and healthcare providers) to address gender or masculinity themes; and only four, on men. Moreover, although the gender approach offers an explanatory dimension that reproduces and establishes power asymmetries, few studies included men in their discourses and addressed men's vulnerabilities regarding exposure to violence as victims or aggressors. A map of MPV

programs in Brazil, conducted from 2015 to 2016, was published in 2019, showing data from 26 initiatives (Beiras, 2014).

These results can update and expand the discussion in the journal with information related to 2021, on the 271 groups throughout Brazil. Such studies are relevant to legitimize, approximate, and solidify MPV groups across Brazil. Thus, this study aims to support dialogue with the aforementioned map and the World Health Organization large-scale study carried out worldwide by Rothman, Butchart, and Cerdá (Rothman et al., 2003). Thus, this study aims to describe partial data from a master's thesis that overviewed group activities with male perpetrators of violence against women throughout Brazil, specifically focusing on the institutional profile of group work and its importance for confronting the structuring gender violence in our society (Pereira, 2022).

Methods

A literature and documentary research based on health sciences descriptors was used to locate groups. Terms were manually generated to retrieve such groups on the following databases: (1) Lilacs/BVS, Medline/Pubmed (22 studies);¹ (2) Cochrane Library (3 studies);² (3) Embase (4 studies);³; (4) the Brazilian Digital Library of Theses and Dissertations (65 studies);⁴ and (5) Capes Journals (1,212 studies).⁵ The NOOS Institute (Beiras, 2014) group activity mapping and the National List of MPV Initiatives of the Courts of Justice (Beiras et al., 2021) were also searched. A web search⁶, was also conducted in 2020 to find institutional videos, documentaries, reports,

and other materials reporting group work with MPV. The searches were carried out by Federative Unit and the first 50 links of each unit were carefully read. This research was submitted and approved by the Research Ethics Committee⁷.

The different sources of information mapped repeated actions or those with vague references about the group without further indicating it would facilitate their identification, which was our first criterion for excluding the retrieved findings. The groups were contacted by a search on the web platform and by an investigation in the territories via calls to various sectors, such as social assistance, forums, municipal secretariats, police stations, and other relevant services.

The 358 groups in the literature and documentary research were reduced to 309 groups, thus excluding the articles that, although mentioning group work, prohibited contact for reasons such as: the group no longer exists; unanswered phone calls and lacking an e-mail address for contact; only e-mail as a form of communication, which, even if used, produced no response; group activity being unrecognized in the territorial investigation; and, finally, no phone number. Our fieldwork sought to confirm the existence of the groups and to map means of contact to send questionnaires, present this research, and obtain agreement for participation.

The initial structuring of the questionnaire took place during the documentary and literature research based on the map and studies above. To refine the instrument, two stages were used in April 2021. In the first stage, the material was submitted to the Center for Studies in Democratization and

1 Search Strategy: [(Masculinidade) OR (Masculinidades)] AND [(Violência contra a mulher) OR (Crimes contra a Mulher) OR (Crimes contra as Mulheres) OR (Delitos contra a Mulher) OR (Violência Doméstica e Sexual contra a Mulher) OR (Violência contra as mulheres)] AND [(Violência de Gênero) OR (Violência Baseada em Gênero)] AND (Violência doméstica) AND (Violência doméstica e sexual contra a mulher)

2 Search Strategy: #1 (Masculinity): (Word variations have been searched) 241 #2 MeSH descriptor: [Masculinity] explode all trees 24 #3 (Domestic Violence):ti,ab,kw (Word variations have been searched) 423 #4 MeSH descriptor: [Domestic Violence] explode all trees 824 #5 #1 OR #2 241 #6 #3 OR #4 1071 #7 #5 AND #6

3 Search strategy: "masculinity" AND "domestic violence" AND "gender based violence"

4 Search strategy: "violence against women" and "male perpetrator of violence"

5 Search Strategy: Male violence perpetrator against women and group with men

6 Search Strategy: Group with male violence perpetrator against women + [State for search]

7 This research was registered on Plataforma Brasil under CAA39150620.4.0000.8027 and Opinion: 4.401.298.

Sociabilities in Health (NEDSS/Fiocruz), which simulated its filling out.

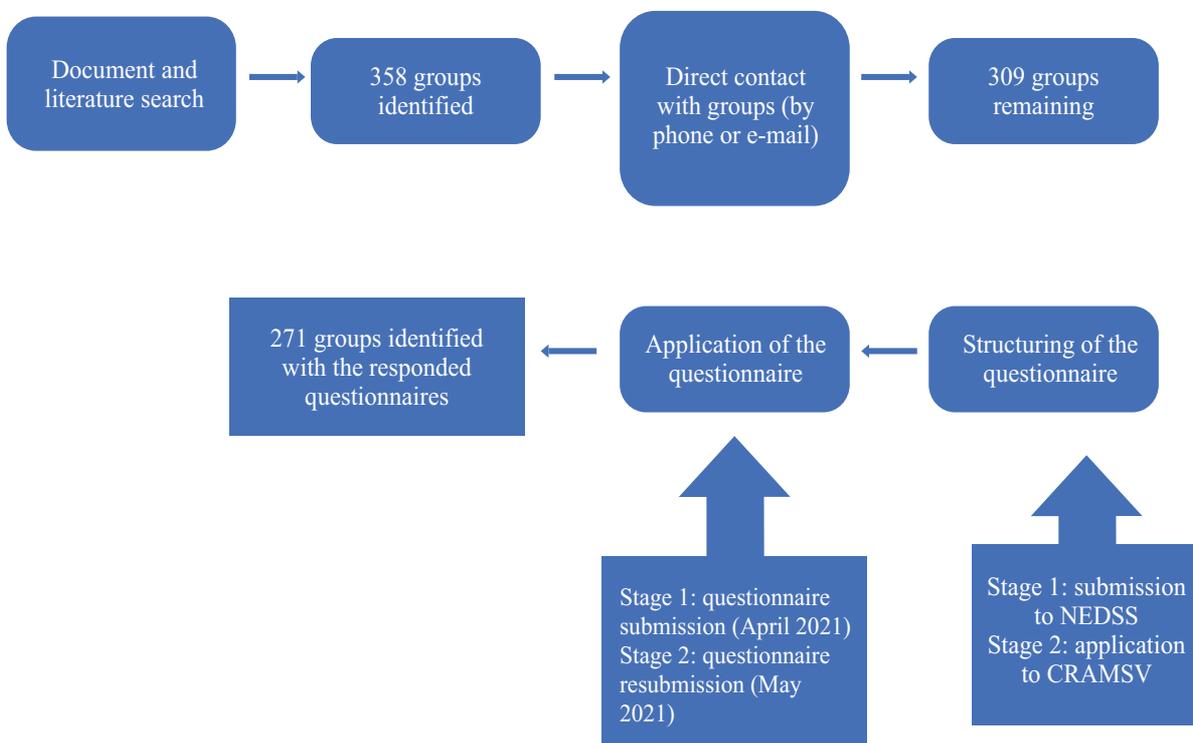
The second stage applied the questionnaire to the *Centro de Referência no Atendimento às Mulheres em Situação de Violência* (Reference Center for Aiding Women in Violence Situations - CRAMSV) in the municipality of Vitória (ES)—which has led a group with MPV since 2013—once a favorable feedback on the use of the application platform (Google Forms) was obtained and the content was organized and understood. The 35 questions were divided into five sections (identification, group recognition, group functioning, methodology, and evaluation). The instrument was made available to different actors to fill out, who were freely chosen by the responsible institutions, such as group coordinators; reference technicians; judges; promoters, among others.

The groups were contacted in two stages: (1) questionnaire submission (April 2021) and (2)

questionnaire resubmission to non-respondents (May 2021). Phone calls were used in both stages; e-mails were sent with a link to the questionnaire and a “video invitation,” a phone number was provided so questions could be asked; answers to the questionnaire were monitored; “reminder” e-mails were sent about the questionnaire deadline; and the research team was made available for explanations and advice. Via this management, the expressive number of 355 phone contacts and 212 e-mails were obtained, allowing us to locate the 271 groups that make up this panorama. These groups are linked to 69 different institutions. A questionnaire was answered by each institution, which enabled these institutions to inform this research about the activities of one or more of their groups.

The organization in Figure 1 summarizes the aforementioned path.

Figure 1 – Process of identification of the groups participating in this research



Source: Elaborated by the authors.

Results and discussion

This study regionally divided the 271 chosen groups as follows: 131 groups in the South of Brazil; 45 in its Southeast; 54, in its Northeast; 33, in its Midwest; and eight, in its North. If we take the distribution of the 358 groups in our documentary and literature research as a basis, we find an increase in group activities in five Federative Units: Bahia (from 12 to 40 groups), Rio Grande do Norte (from three to six groups), Federal District (from 14 to 16 groups), Espírito Santo (from two to 14 groups), and Paraná (from 55 to 77 groups). The greatest decrease occurred in the Brazilian Southeast (38 fewer groups), which was also the region where we experienced the greatest difficulty in obtaining feedback from the questionnaires sent by e-mail.

The implementation of groups with MPV shows the importance of the advent of Law no. 11,340 (Brasil, 2006) since only two operating institutions (with 10 groups) precede its enactment. 2019 had the largest diversity of institutions starting group activities, including civil society organizations, educational institutions, and public authorities, totaling 25 groups. Of these institutions, 94.2% began their activities after the enactment of the Maria da Penha Law, totaling 259 groups. Although the law makes no mention of group activity in its text, this methodology has offered a solution to approach men in view of its legal guidance to structure these rehabilitation centers. Although provoking a different look at MPV, neither it nor any other legal mechanism in Brazil organizes or ensures means to structure and maintain these groups. In any case, these institutions have ensured the care of about 37,407 people.

Type of institutions and inclusion of men in the activity

Of the groups, 46.8% rely on Government participation. Courts of justice stand out in this scenario, conducting 84 groups and being

important partners in another five, followed by municipal governments (65 groups) and state secretariats (37 groups). We also highlight a growing participation of the civil and military police (105 groups), possibly to resignify the activities of these corporations and their role in the network to make aggressors accountable. These police departments head institutions such as the Public Prosecutor's Office (57 groups) and the Public Defender's Office (52 groups).

Civil society organizations conduct 29.5% of the groups, with emphasis on the 22 community councils in the state of Paraná, a body regulated by the Penal Execution Law (7.210/84), which aims to ensure the active participation of the community in the enforcement of prison policies. Educational institutions run the remaining 23.6%. Data collection considered the institutions directly responsible for implementation and the necessary partnerships to ensure group functioning.

Group objectives

Of the groups, 36.8% aimed to offer a “reflective space.” This reflexive format of action constitutes a strategy to balance the notion of power among peers to horizontalize bonds. Still, 12.1% “dealt with different subjects,” but it is important to stress that subject diversity fails to necessarily ensure a reflexive proposal, such as an answer that only indicated as a goal “*to raise awareness about types of violence*” (Q⁸).

Studies such as Beiras, Bronz, and Schneider (2020) have widely addressed focus on narratives and the production of reflective paths from the perspective of power relations that legitimize certain discourses to the detriment of others in a dynamic of social negotiation. Thus, reflective work and its inherent group interaction offers possibility to rethink, resignify, make visible, and question possibly excluded versions and who benefits from this process of silencing the other.

In total, 33.6% of answers reported “focusing on the consequences to MPV” as an objective,

⁸ Henceforth, the abbreviation “Q” will refer to “questionnaire,” followed by its numbering, which identifies the question in our expanded research.

using meanings such as “re-education,” “rehabilitation,” “resocialization,” and “accountability.” This constitutes a dangerous path if it only focus on crime and accountability as it can mischaracterize reflexive processes, converting them into another punitive mechanism or one that only raises awareness about violent attitudes, losing the opportunity to configure an instrument of analysis of the societal structure that welcomes unequal power relations. We might be facing a lowering of sociocultural meanings, which will try to consider gender violence from an individualizing prism restricted to the private sphere. Group work may show such orientation, especially when professionals’ discourse only revolves around subjects’ individual characteristics with neither context nor the proper understanding that it configures a sociocultural violent practice (Lopes, Leite, 2013; Rothman et al., 2003).

Of the groups, 5.5% indicated the “*confrontation of violence by reducing the number of cases and/or recidivism*”⁹, “*Combating the high rates of domestic violence and promoting awareness in aggressors so they do not practice new acts of domestic violence*” (Q 37). Also, 4.7% comply with the legal norms, in this case, they follow the “Maria da Penha Law guidance,” which says “*Prevent and reduce intrafamily and gender violence in congruence with Law No. 11,340/06[...]*” (Q 57), followed by the three smallest groups: “therapeutic approach” (3.8%), which only marked the “humanist” theoretical line (Q 2; 1.9% for “some type of guidance” pertaining to procedural, family, social, or personal process: “*Provide psychosocial guidance to those under jurisdiction in situations of domestic violence to prevent and break the spiral of violence and guide procedural proceedings*”) (Q 69) and the “*focus on the family*” (0.5%) in both groups.

When group activities bring normative documents of their activities they offer a more comprehensive description of their objectives.

We discuss a well-defined exposition that explains and frames different topics, which may provide a safer and more guided execution, escaping generalizations and subjectivity in its exposition, as in Q 15:

To establish a group with men in judicial proceedings who are involved in the context of domestic and family violence against women to awaken a reflection on their attitudes and promote behavior change; promote reflection on the role of men and women in contemporary society; ponder on gender equality considering the experienced realities; address current and suggestive topics, such as the types and cycles of violence, men’s health, parenting, alcohol and other drugs; enable a space for shared listening by identifying and exchanging experiences; discuss the Maria da Penha Law in the context of domestic and family violence; provide alternatives for assertive behavior in the face of stressful situations.

Tolman and Edleson (1995) state that group effectiveness is linked to the stipulation of precise objectives. Ambitious goals may deter the achievement of results as they lack a set of relational, community, social, and cultural strategies to be achieved in the medium and long term.

Main difficulties

The “absence (or little) financial contribution” (15.2%) constituted the main difficulty due to the alarming picture that 72.7% of groups have no specific resources. This situation undeniably contributes to group fragility and “the absence of public policies to care for MPV” (11.6%). The “absence of normative instruments on accountability and re-education services for aggressors” (9.4%) reinforces the direct consequences of the absence of national regulation encouraging local planning to conduct such work. This forces services to resort to a strong

9 Term referring to repeated violent acts whether or not linked to the judicial process.

pilgrimage in search of guides and manuals that can guide their planning and activities, leaving each in charge of elaborating their activities and often causing activity isolation and discontinuity.

“Lack of government support” (10.9%) occupies the fourth place in the found obstacles and 8.3% point to the scarce “academic literature on group dynamics,” which highlights the importance of studies on group methodology with MPV. Moreover, this signaling shows the intention of services to approach and establish a dialogue with the scientific area to overcome a context of practices without theoretical support (Velo; Nativity, 2013). In any case, group difficulties show a regular distribution: “Little academic literature or studies in general on working with aggressors” (8.3%); “Men’s difficulty of adherence” (7.8%); “Physical structure for holding meetings” (7.3%); “Fragile facilitator availability” (7%); “Absence (or little) training for facilitators” (6.6%); “Other institutions in the network having difficulties understanding group activities” (5.8%); “High dropout rate” (4.6%); and “Lack of initiative continuity” (4.3%).

Sharing difficulties seems to configure the only factor breaking the isolation between groups. The percentage of obstacles showed similar values and all interviewed groups placed themselves in more than one category, evincing a common portrait of performance regardless of their regional location. It is necessary to remember that the Government organizes 46.8% of these groups, and 10% reported a “lack of government support” as the third biggest faced obstacle, i.e., the prominent performance of public bodies fails to translate into institutional support.

Different reasons related to the difficulty of “ensuring men’s adherence to activities” (7.8%). In total, two questionnaires took the opportunity to link this impasse to the non-obligation of linkage. It is well known that caution is required in analyzing mandatory linkage as a favorable factor for the active participation of these men to provoke reflections and the consequent alteration of violent behavior. In any case, the reported difficulties evince the discussions in academic production (Beiras, 2014; Beiras et al., 2020; Novaes; French; Beiras, 2018; Tneli; Borders;

Ried, 2017; Velo; Nativity, 2013). Our broad and representative panorama of the Brazilian context updates previous observations, such as the report on group care services for aggressors, as the Noos Institute points out that the obstacle to continuous resources and the absence of a specific national policy toward actions with MPV configure the main reasons for localized and punctual initiatives (Beiras, 2014).

This framework of discontinuous work has different approaches—some of which are questionable regarding their distancing from the deconstruction of the place of privilege of men in our society—and with very little institutional and financial support, configuring works that are even separated from the reality of care for women. The literature recommends that the wives of men in such programs receive information about the performed activity or alerts to the possible manipulation men may exert as participants in such interventions since they invariably expand their repertoire on the logic of gender violence (Velo; Nativity, 2013).

Our questionnaire also addressed the COVID-19 pandemic to evaluate the possible changes in group work activity and find whether possible interruptions directly stem from the pandemic or characterize a frequent intermittency, as per our literature review (Beiras, 2014; Velo; Nativity, 2013). In this topic, our analysis was related to the 69 institutions fostering 271 groups.

With the recommendation to avoid gatherings during the pandemic, 56.5% of institutions understandably interrupted their activities (114); 33.3% were running despite the pandemic but had already experienced one or more interruptions at another time (possibly 142); 5.8% interrupted their activities due to the pandemic, also experiencing one or more previous interruptions; and, finally, the smallest group (possibly 11), which never interrupted their activities (4.3%). Isolation and social distancing, the most effective measures to prevent the spread of the virus, redirected relationships to the domestic sphere, evoking the alarming increase in the data of violence against women who, confined with their aggressors and distant from their social circle, are exposed

to increasingly higher risks. A scenario that entails reflecting on the effects of paralyzing or demobilizing services that make up the network to confront violence against women.

Thus, we warned of the effects of a hiatus on the activities, with no guarantees of how and if these paralyzed groups would return since 60.2% of institutions paralyzed group activities (118 groups) during data collection. The dynamics of group work interruption precedes the pandemic since, if this study excluded the groups paralyzed only due to the pandemic, almost 40% of activities would still show a history of interruption in their trajectories. In any case, 37.6% of institutions have operating groups, suggesting the online diffusion of services to the public. Therefore, group viability involves elements that are unusual to the practice of services, such as the guarantee of access to the internet for all participants. The virtual format also significantly modifies factors such as group identity interaction and formation. Some reasons emerged as responsible for the interruptions in addition to the pandemic: lack or reduction of facilitator teams, facilitators' lack of training; changes in the way in which the Court of Justice refers the case; change of address; "curfew"; changes in political management; lack of physical space and insecurity to carry out activities due to "prison overcrowding."

Evaluation of projects and main results

Group work initiatives shared weaknesses, obstacles, approaches, and methodological steps despite their common isolation. The observed panorama shows the need for structuring and incorporating mechanisms that ensure the strengthening and continuity of these spaces and of instruments that can investigate the effects of group activity.

Thus, 93% of groups stated having some kind of evaluation instrument, a significant result that could suggest well-planned and organized activities. However, we found that such evaluation still largely focuses on working professionals' perception rather than on objective and structured analysis tools, thus offering insufficient or vague information.

In total, 74.5% of groups evaluate activities by monitoring the "decrease in violent act recidivism." Overall, 28.9% of groups "monitor judicial processes"; 23.1%, "women's care"; 22.7%, "individual and/or group care for men"; 22.4%, "the search in police reports;" and 2.6%, include mechanisms such as "visits by the Maria da Penha Patrol," "reports from family members," or the "perception of the break of the cycle of violence against women." In the latter case, it was impossible to understand whether the information came from the care provided to women or from MPVs.

No group showed the recommended longitudinal evaluation of their work. Some studies indicate the appropriate time for assessments, suggesting 15 months of follow-up to verify the consistency of former participants' non-violent behavior (Veloso; Nativity, 2013). Beiras, Bronz, and Schneider (2020) proposed the insertion of activity monitoring and evaluation as they are carried out. This procedure favors participants by promoting an additional reflection on the relevance of the activity and application in their own lives and that of facilitating teams, who can adopt a posture of constant improvement of their work.

In general, we find gaps in the evaluative management of group activities in Brazil, which could be achieved with continuous evaluation, external advice, updated documentation, and quality control mechanisms (Veloso; Nativity, 2013). In any case, the literature deems evaluation of group projects as fundamental and, thus considers it as the main difficulty to be overcome (Toneli; Bieras; Ried, 2017; Veloso; Nativity, 2013; Rothman et al., 2003). Self-assessment is the most widely used evaluation mechanism in Latin America despite its low reliability (Brown; Alvarado; Hernández, 2014; Rothman et al., 2003).

The way in which cases of recidivism are monitored converges with the signals of Veloso and Natividade (2013) on "valuation of risk," a mechanism to continuously systematize MPV's risk behavior toward women. This would occur precisely with the use of instruments such as those of justice and public security systems

(judicial proceedings, records of police reports, etc.), care for women living with participants and their families to be used as a source of data collection on the assisted men's recidivism of violent episodes. However, when prompted by the this numerical collection, only 20 institutions (of the 51 that reported monitoring reiteration) showed values. Thus, the existence of such data fails to necessarily imply access to them or their reliability. Fragile collection instruments, difficulty accessing information, and other factors certainly hinder services analyzing their activities. In any case, nine indicated recidivism in from 0.1% to 5% of MPV; seven, from 6% to 10%; one, from 11% to 15%; and two others indicated no recidivism so far.

In total, 26.2% bring the "reflective process" as the second most pointed result in an attempt to give men the opportunity to subvert the extremely restricted behavioral repertoire imposed on them in their socialization process, with naturally aggressive responses claimed as a translation of virility.

It is interesting to note that the echoes of the interventions go beyond the group setting and its actors. An important block of results consists of signaling changes, improvements, and structuring in the service itself, such as "changes in the way of offering care" (15.9%) and the "preparation of materials and team training" (1.7%). They also referred to the "insertion of the initiative in the service network" (1.7%) and the "acceptance of the service by society" (1.4%), with "men themselves as a multiplier" (0.5%), results that may indicate a greater probability of the group remaining in society based on the recognition of its importance in coping with violence against women.

In total, 4.1% showed the evaluative return of MPV as a source of information to monitor the obtained results and indicated aspects such as: *"The statements, especially at the end of group participation, the positive feedback in a portion that make a point of emphasizing, how significant participation in the group was"* (Q 5). Some initiatives also include the discourse of women about MPV, as Q18 points out: *"Victims' report on the change in the perpetrator's behavior when the relationship is*

maintained." Despite the difficulty ensuring men's adherence to activities, it has achieved a certain acceptability among them since 7.6% of groups recalled the "rate of participation and permanence of MPV in the group" as a positive result.

Still, the fact that no activity showed a longitudinal evaluation of their work draws our attention. This characteristic is not only recommended, but some studies also specifically indicate its appropriate time, 15 months (Veloso; Nativity, 2013). The idea is to verify the consistency of former participants' non-violent behavior, which seems to configure a valuable indicator for projects, although practice lacks structure. In general, we find gaps in the evaluative management of the group activities in Brazil, which could be remedied with continuous evaluation when possible, external guidance, updated documentation, and quality control mechanisms (Veloso; Nativity, 2013). In any case, the literature deems evaluation of group projects as fundamental and, thus considers it as the main difficulty to be overcome (Beiras et al., 2020; Veloso; Natividade, 2013; (Rothman et al., 2003). In Latin America, self-assessment is the most widely used evaluation mechanism, despite its low reliability (Lopes; Leite, 2013; Rothman et al., 2003), a fact also confirmed in our panorama that, once again, enables the quantitative knowledge of gaps in the literature (Beiras et al., 2020; Toneli; Borders; Ried, 2017; Veloso; Nativity, 2013).

Certainly, the structured evaluation of these actions will enable the consolidation, improvement, and expansion of group care projects for MPV, assuring women in violence situations and society at large the benefits from including men in these projects.

Final considerations

Groups with MPV configure strategic spaces for exchanging experiences and producing new meanings from interactions, exposing an intense system of values and a complex web of meanings woven by sexist ideologies and the elimination of the other. If the process to pacify this violent logic strategically involves uprooting the positive

character of the culture of violence that structures contemporary society, it is essential to (re)think and reinvent the current conceptions of masculinity and the symbolic relations between genders (Machado, 2004).

This indicates the relevance of group action with men. When Veloso and Natividade (2013) place MPV as social subjects used to interactional dynamics guided by inequality, we can satisfactorily place group spaces as operators toward rebuilding these forms of interaction based on the experience of each subject with projects that ensure the use of systems other than those men already know in a critical and contextualized way.

Our magnifying analytical glass consisted of understanding how group actions are currently translated into the Brazilian reality based on the institutional panorama, placing us in a scenario that ratifies previous studies (Beiras, 2014; Veloso; Natividade, 2013). This study confirmed gaps, such as the absence of a national public policy that welcomes and fosters local organizations; the need to expand spaces for dialogue between the academic field and practice; little or no financial support for work; and especially the fragile activity evaluation and monitoring, which, as Veloso and Natividade (2013) point out, is exactly what ensures project effectiveness. For this very reason, it is worth warning of the risk of conferring action dynamics that are disconnected from the violence it aims to face given the possibility of projects reproducing naturalized violence by welcoming and subsidizing male domination.

We recommend a close look at the consequences of the mass shutdown of group activities during the pandemic, especially given the little institutional support. The virtual approach to care requires analyzing its specificities related to participants' access, facilitation of means for services to specialize and guarantee online care, and especially the possible impacts of this modality on groups' identity formation. Virtual care can either further disseminate the work or hinder subjects' adherence.

In any case, groups have been structured due to the discomfort with what is put in place and the unison demand to change the framework of institutional abandonment. Despite these difficulties, it should be noted that serious interventions are being conducted and the continuity of these actions is the responsibility of engaged professionals who establish their practices based on an articulated reading of legal apparatuses and their applicability in the daily routine of services.

Concrete practice can provide qualified subsidies for the elaboration of guiding manuals for groups, but the scenario of absent or weakened contributions tends to distract professionals from this perception. Groups with MPV exist in large numbers throughout Brazil and achieve results. This "path of life" must be validated and summoned to build public policies.

The horizontalization of this construction is already possible: this service has significantly increased between the police and the institutional organization of actions by courts of justice, which previously produced isolated interventions. Psychosocial teams follow reflexive proposals with MPV, configuring a scenario that goes beyond any notion of re-education centers. It is no longer appropriate to deliver a regulation that standardizes project diversity, discarding the transformative and critical power of what has been accomplished.

The deconstruction of the strictly punitive logic has already begun, and we can claim that group work with men who perpetrate violence against women focuses on gender violence. Thus, it is essential to change the situation of groups with MPV in Brazil, removing them from their discontinuous and disaggregated vulnerability.

We must, therefore, produce strategies to consolidate and improve these activities. Institutional structures must be guaranteed so groups can displace teams as the only ones responsible for the work, placing the commitment in institutional spheres. It no longer satisfies treating groups as "something more" in the logic of confronting violence against women given the need to ensure an amplified view

of group activity that would face a strategy of mobilizing societal structures to build fairer and more equitable gender relations

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Authors' contribution

Pereira contributed to the study conception and design, data analysis and interpretation; drafting this manuscript; and approval its version for publication. Guizardi contributed to the study conception and design, data analysis and interpretation; drafting this manuscript; and approval its version for publication. Loyola contributed to data analysis and interpretation; critical review of this manuscript; and approval of its version for publication.

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