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## PARENTAL VIOLENCE, TRAUMA, AND ITS IMPACT ON THE CONSTRUCTION OF ADULT IDENTITY

*VIOLÊNCIA PARENTAL, TRAUMA E O IMPACTO NA  
CONSTRUÇÃO DA IDENTIDADE ADULTA*

*VIOLENCIA PARENTAL, TRAUMA Y EL IMPACTO EN LA  
CONSTRUCCIÓN DE LA IDENTIDAD ADULTA*

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**ABSTRACT:** The family, while being the central locus for the transmission of customs and values, is paradoxically the main setting where practices of violence against children manifest. This research, utilizing a qualitative approach, aimed to investigate the impact of parental violence experienced in childhood and its direct influence on the process of identity construction among adult survivors. The study employed a multiple case study strategy, with data collected through semi-structured interviews and analyzed via content categorization, which culminated in the definition of six modalities of parental violence. The results reveal that trauma, in its effects, does not “disinvest” the individual who lived it, but manifests with a clear impact on identity construction. It is concluded that trauma can be administered, reprocessed, and re-signified (or not), indicating that the permanence of its signs coexists with the individual’s capacity to construct new purposes and meanings.

**KEYWORDS:** Parental Violence. Child Violence. Trauma. Identity.

**RESUMO:** A família, enquanto locus central de transmissão de costumes e valores, é paradoxalmente o principal cenário onde se manifestam as práticas de violência contra crianças. Esta pesquisa, de abordagem qualitativa, objetivou investigar o impacto da violência parental vivenciada na infância e sua influência direta no processo de construção identitária de adultos sobreviventes. O estudo utilizou a estratégia de casos múltiplos, com dados coletados por meio de entrevistas semiestruturadas e analisados por categorização de conteúdo que culminou na definição de seis modalidades de violência parental. Os resultados revelam que o trauma, em seus efeitos, não desinveste o indivíduo que o viveu, mas se manifesta com impacto claro na construção da identidade. Conclui-se que o trauma pode ser administrado, reprocessado e resignificado, indicando que a permanência dos seus sinais coexiste com a capacidade de o indivíduo construir novos propósitos e significados.

**PALAVRAS-CHAVE:** Violência Parental. Violência Infantil. Trauma. Identidade.

**RESUMEN:** La familia, como locus central de transmisión de costumbres y valores, es paradójicamente el principal escenario donde se manifiestan las prácticas de violencia contra la infancia. Esta investigación, de abordaje cualitativo, tuvo como objetivo indagar el impacto de la violencia parental experimentada en la niñez y su influencia directa en el proceso de construcción identitaria de adultos sobrevivientes. El estudio empleó la estrategia de casos múltiples, con datos recolectados por medio de entrevistas semiestructuradas y analizados mediante la categorización de contenido, lo que culminó en la definición de seis modalidades de violencia parental. Los resultados revelan que el trauma, en sus efectos, no desinvierte al individuo que lo ha vivido, sino que se manifiesta con un impacto claro en la construcción de la identidad. Se concluye que el trauma puede ser administrado, reprocesado y resignificado, indicando que la permanencia de sus señales coexiste con la capacidad del individuo de construir nuevos propósitos y significados.

**PALABRAS CLAVE:** Violencia Parental. Violencia Infantil. Trauma. Identidad.

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## INTRODUCTION

The focus of this research originates in clinical experience, grounded in the presence, in our practices, of adult children in distress who bear marks on their bodies, psyche, and behaviors resulting from violent family relationships in their various forms.

In our clinical work, we attend men and women who present insecure attachment styles—avoidant, anxious, and disorganized—constructed in early relationships with parents and/or caregivers<sup>1</sup> (Bowlby, 2023; Haack et al., 2023; Santos & Camargo, 2024). This dynamic sometimes generates violence within families, projecting insecurities and uncertainties onto children—and even role reversals—resulting in parentified children (Bowen, 1991). These are emotional imprints that become embedded in the brains and inner lives of these individuals. Added to this is the demand for care from individuals who were sexually and physically abused by their parents and/or caregivers.

Studies on intrafamilial violence indicate that the characteristics of family violence and conflict affect the individual's differentiation<sup>2</sup> process in adulthood, and that parental violence during childhood can produce trauma at this stage of life (Ferreira, 2022; Brodski, 2021; Lewis et al., 2019; Van der Kolk, 2020; Levine & Frank, 2022; Maté & Maté, 2023).

Another issue that concerns us, both as therapists and researchers, is how trauma manifests in the adult life of individuals who were victims of parental violence. We ask: are there specific traumas, such as anxiety in social relationships, aggressiveness in affective and social interactions, avoidance, or hypervigilance? Or are these singular responses, shaped by personal history, context, and the identity narratives each individual constructed to survive? In clinical practice, we observe that some individuals develop rigid and automatic defense mechanisms, while others display heightened environmental sensitivity, as if living in a constant state of alert. Some internalize violence, becoming excessively self-critical, while others externalize it by reproducing dysfunctional relational patterns.

Although these responses differ in form, they share a common denominator: parental trauma reorganizes how individuals perceive themselves, others, and the world, affecting their capacity to trust, bond, and access an internal sense of safety (Van der Kolk, 2020; Levine & Frank, 2022; Maté & Maté, 2023). Thus, this is not a single "type of trauma," but a field of experiences that unfolds according to personal history, the developmental stage at which the violence occurred, the quality of subsequent relationships, and the subjective resources available for meaning-making.

1 Children who take the place of their parents; becoming mature before their time.

2 The concept of Self Differentiation, introduced by Murray Bowen in the context of Family Systems Theory (Systemic Psychology), is fundamental to understanding emotional health and relationship dynamics. Self differentiation defines an individual's ability to maintain a distinct and autonomous sense of self (their own identity) while being emotionally connected to others, especially within the family.

In our clinical practice, we observe adults who present anxiety crises, panic attacks, depression, affective and personality disorders—often as initial diagnoses made by psychiatrists—relational difficulties, night terrors, insomnia, repetition of violence in their nuclear families, and various comorbidities as marks of prolonged traumatic stress. These observations are consistent with the work of key scholars such as Levine and Frederick (2022), Maté and Maté (2023), and Van der Kolk (2020), particularly regarding developmental trauma in childhood resulting from parental violence.

The questions outlined above constitute the core of this study, which adopts a qualitative research approach in which individuals attribute meaning to their histories, whether as participants or researchers (Denzin & Lincoln, 2006). Data were collected through semi-structured interviews. For data analysis, Yin's Case Study method was employed (Yin, 2016). In this context, data decomposition refers to the structured organization of qualitative material, allowing the researcher to move from raw data to categorization, which forms the basis for drawing conclusions in multiple case studies. This process generated the subsequent categorization that resulted in the definition and organization of the types of violence experienced by the participants.

The construction of meaning is grounded in the theoretical framework of the new paradigm of thought, which recognizes the complexity, instability, and intersubjectivity of life (Vasconcellos, 2018). It is also supported by postmodern approaches such as constructivism (Spink, 2010) and social constructionism (Rasera & Japur, 2005), which consider human beings within their relationships, context, culture, and life trajectories.

The central objective of this research was to investigate the impact of complex developmental trauma in two adults, established during childhood as a result of exposure to parental violence. Specifically, the study sought to identify and analyze which aspects of parental violence were experienced during childhood, how these experiences are currently perceived, and how they have influenced participants' understanding of these events in adulthood.

## **TRAUMA**

As noted by Kering (2023) and Knight and Miller (2024), trauma is associated with various forms of violence, abuse, and neglect that affect childhood development—the central focus of this research. In his comprehensive work on trauma, Van der Kolk (2020) explains that a child who experiences violence within the family environment is likely to encounter difficulties in establishing stable, trust-based relationships in adulthood. Research adopting an integrated and multidisciplinary view of the human being demonstrates that trauma causes real physiological changes that affect brain reorganization systems, increasing stress hormone

activity and altering mechanisms that distinguish significant from insignificant information. Traumatized individuals become hypervigilant, experience high levels of anxiety, cope with daily routines under stress, and often repeat problematic situations without learning from experience, alongside a loss of intimacy with themselves (Van der Kolk, 2020; Levine & Frank, 2022; Maté & Maté, 2023).

Post-Traumatic Stress Disorder (PTSD) typically manifests as a result of repeated and severe traumatic events. In studies on the impact of trauma on mental health, these experiences are associated with multifactorial aspects, including type, proximity, and frequency of trauma, as well as individual and social factors.

A specific feature of trauma is complex trauma, which refers to the accumulation of traumatic events experienced throughout an individual's life, particularly interpersonal violence (Serpeloni et al., 2023). Research has consistently shown that exposure to multiple types of traumatic events increases the likelihood of developing PTSD, a phenomenon described as the cumulative effect of trauma or the “building block” effect (Serpeloni et al., 2023).

Individuals with PTSD experience recurrent and intrusive memories, persistent nightmares, and flashbacks of distressing or threatening scenes; they show difficulty concentrating and engage in avoidance behaviors related to people, places, or situations associated with the trauma. They report feelings of anger, guilt, and shame and rarely allow themselves to experience positive or relaxed moments, as they remain in a constant state of vigilance. This leads to high stress in daily, occupational, and relational tasks, due to intense emotions affecting the limbic system and amygdalae (Van der Kolk, 2020).

The left hemisphere of the brain is responsible for organizing experiences, while the right hemisphere stores memories. Under normal conditions, both hemispheres function together in relative harmony. In traumatized individuals, however, left-hemisphere functioning is compromised, manifesting as a “short circuit” caused by the traumatic event—that is, the emotional brain overrides the rational brain (Van der Kolk, 2020; Serpeloni et al., 2023).

Individuals who suffer trauma remain stuck and paralyzed in their overall development. After trauma, they experience the world with a nervous system fundamentally different from that of non-traumatized individuals. The energy of survivors of recurrent traumatic events becomes focused on suppressing internal chaos at the expense of spontaneity in daily life (Van der Kolk, 2020; Levine & Frederick, 2022; Maté & Maté, 2023). Individuals marked by trauma carry enduring imprints within their inner lives.

## **THE CHILD'S MIND AND DEVELOPMENTAL CHILDHOOD TRAUMA**

Throughout the twentieth century, numerous scholars of human behavior dedicated themselves to observing, analyzing, debating, and producing knowledge about child development. Although each worked from distinct perspectives, theoretical approaches, and pedagogical frameworks, they converged—at least to some degree—on the conclusion that the child is shaped by their environment and by their earliest experiences, attributing central importance to parents and caregivers present during the first years of life.

Classical authors such as Vygotsky (1896–1934), Piaget (1896–1980), Freud (1856–1939), and Bowlby (1907–1990) addressed, from different theoretical standpoints, the importance of early interactions between children and their caregivers. Despite their distinct assumptions, they converge on the understanding that the quality of these early relationships influences subjective constitution and emotional development across the lifespan (Bowlby, 2023).

Developmental Trauma (DT), as defined by Knight and Miller (2024) and Kerig (2023), refers to exposure to chronic and repetitive traumatic experiences occurring during critical periods of childhood and adolescence. This form of trauma is predominantly interpersonal and manifests within the primary caregiving system—the family—where the child depends on the perpetrator, which compromises the development of emotional self-regulation. DT extends beyond the symptoms of Post-Traumatic Stress Disorder (PTSD), as it produces widespread deficits in neurobiological development and in the construction of identity and the self. Knight and Miller (2024) emphasize that chronic exposure to dysfunctional relationships requires an expansion of the diagnostic model toward Complex Trauma (C-PTSD), prioritizing interventions focused on regulation and the reconstruction of trust-based relationships.

In a comprehensive study with children conducted by Van der Kolk (2020) and his team at the Trauma Center's child clinic (CSMM), findings showed that children exposed to violence responded to the world and to relationships through lenses saturated with trauma, threat, comorbidities, and diagnoses—particularly mood, conduct, and personality disorders. Van der Kolk (2020), who interacted with Bowlby during his visits to Harvard, recounts that Bowlby concluded in his thesis that conduct disorders in some children were responses to lived experiences such as neglect, violence, and separation, which led him to develop attachment theory (Bowlby, 2023).

Bowlby (2023) asserts that the capacity for self-regulation is directly related to harmony in early experiences with parents and caregivers; therefore, children exposed to violence in its various forms will experience difficulties in self-regulation in adulthood.

Maté and Maté (2023) present a concept of trauma that aligns closely with our clinical experience alongside clients who carry deep internal wounds:

trauma is an internal wound, a lasting rupture or split in the ego due to difficult or painful events ... trauma is primarily what happens inside the person as a result of difficult or painful experiences; it is not the events themselves. "Trauma is not what happens to you, but what happens inside you". (Maté & Maté, 2023, p. 27)

A longitudinal study on the epidemiology of trauma and PTSD in England indicates that lifetime prevalence of PTSD is particularly evident among young people who experienced direct interpersonal assaults or threats—especially those subjected to sexual violence (Lewis et al., 2019). These findings point to individuals who are internally marked, whose dignity, personal boundaries, and individual characteristics were violated.

### *Identity, Trauma, and the Crisis of the Self in Contemporary Society*

The issue of identity has been central to human studies, from classical authors concerned with moral development and attachment—such as Freud (1923), Erikson (1976), and Bowlby (2023)—to contemporary thinkers like Hall (2019), Goffman (2014), and Foucault (2010), who conceptualize identity as flexible and mutable. According to Erikson (1976), identity formation is a psychosocial process co-constructed with the environment, sustaining essential traits throughout the individual's life. Identity is built through shared meanings (Spink, 2010; Rasera & Japur, 2005), not as a finished internal system, but as a process intrinsically dependent on culture and society (Erikson, 1976).

However, this construction is disrupted by the disorganizing effects of violence. Exposure to violent situations—such as those described in the cycle of violence (Walker, 1979)—can lead to the loss of a secure base, resulting in identification with the aggressor and impairments in self-protection capacities. This dynamic facilitates transgenerational patterns of violence repetition within affective relationships (Verbal Information, 2021<sup>3</sup>).

### *The Rigid Impact of Trauma on a Flexible Identity*

Trauma—especially complex trauma, characterized by adversities experienced during multiple stages of childhood development and typically associated with violent relationships—produces an impact that contrasts sharply with the fluid nature of postmodern identity. Research demonstrates significant effects on identity construction, manifested through dissociation, mental impairments, and emotional and personality disorders (Van der Kolk, 2020).

In survivors' narratives, losses and vulnerabilities resulting from adverse experiences generate disturbances in identity and compromise self-image, contributing to the formation of

3 Oral information: Prof. Dr. Rosa Maria Stefanini de Macedo - master's degree qualification from PUC-SP, on November 10, 2021.

a “post-trauma” identity. Traumatic experiences and their symptoms (PTSD) shape identities, life trajectories, relationships, and self-perception, displacing certainty about the self (Li & Liang, 2023; Hyland et al., 2023).

### *Identity Crisis in Postmodernity*

This crisis is intensified when intersecting with the sociological context. Formerly consolidated identities—based on class, gender, and ethnicity—have declined due to structural changes at the end of the twentieth century, fragmenting the unified modern subject. Identity is thus understood as decentered, displaced, and/or fragmented (Hall, 2019). Hall (2019) anticipates the loss of a stable “sense of self,” culminating in the identity crisis of the contemporary individual.

Considering that individuals embody multiple identities across different contexts and that diverse “selves” coexist within the same person (Hall, 2019; Schwartz, 2023), a critical challenge emerges: violence, in its many forms, prevents individuals from connecting with the “here and now,” trapping them in traumatic experiences. This entrapment contrasts with the fluidity of the world and undermines the possibility of becoming a free, spontaneous, empowered subject capable of constructing a re-signified life narrative.

## **METHOD**

This study is grounded in systems thinking, which understands life as a fabric of multiple influences in constant motion. According to Vasconcellos (2018), human phenomena can only be understood within this complex web, where instability, interdependence, and intersubjectivity are not deviations, but the very nature of reality. Nothing exists in isolation: every action reverberates within the system, and each subject is constituted through relationships, time, and shared history. Thus, understanding trauma—and its marks—requires attention to these lived networks and to the ways they shape meanings, bonds, and possibilities for change.

This perspective is articulated with postmodern approaches such as narrative therapy (White, 2012), which seeks to re-signify problem-saturated stories, as well as constructivist (Arendt, 2003) and constructionist (Gergen, 1985) frameworks, according to which reality is constructed through communication, culture, history, and each subject’s capacity for agency over their own biography.

This research was designed as a qualitative study, understood as an approach in which meanings are constructed and sense is attributed to results, considering the involvement of both researcher and participant (Guerra et al., 2024). Qualitative inquiry, in this context,

explicitly acknowledges the implication of both the researcher and the researched (Denzin & Lincoln, 2006). As highlighted by Yin (2016), qualitative research fundamentally seeks to understand the meanings of individuals' stories within their contextual settings. This research modality invests—through multiple analytical lenses—in expanding the understanding of culturally situated phenomena and in engaging with the challenges of cultural praxis, which describe and represent both individuals and cultures, while also fostering pathways for social change (Kublikowski, 2021).

### *Participants*

The interviews were conducted with two participants: a woman, Tatiana (pseudonym), aged 58, heterosexual, cisgender, married, childless, pedagogue, psychology student, Gestalt therapist, holding two postgraduate degrees in human development, born in the city of São Paulo, and belonging to the urban population classified as socioeconomic class C according to the Brazilian Institute of Geography and Statistics (IBGE); and a man, José (pseudonym), aged 74, heterosexual, cisgender, widowed, father of four children, engineer and administrator, retired, born in the interior of the state of São Paulo, in the central plateau region of São Paulo, and belonging to the urban population classified as socioeconomic class B.

The inclusion criterion was having experienced parental violence and meeting at least one criterion of intrafamilial violence.

### *Instruments*

Semi-structured interviews were employed, which Kvale and Brinkmann (2009) consider an intersubjective tool—two individuals engaging in dialogue on shared themes—aimed at obtaining information about the interviewee's lived world, with a focus on the phenomenon under investigation. This instrument enables a non-directive dialogue that does not require standardized questions; however, it is guided by a framework of previously defined thematic axes.

### *Procedure*

To achieve the research objectives, a Multiple Case Study design was adopted. According to Yin (2014), this approach produces more robust analyses by allowing comparisons across different life trajectories. Semi-structured interviews structured the empirical field, providing the researcher with a reflective space regarding their own assumptions and methodological choices—an aspect emphasized by Kublikowski (2018), who situates the Case

Study as a strategy aligned with clinical practice and the subjective complexity of human phenomena. As noted by D'Altonnes (2004), its strength lies in the ability to integrate materials from multiple sources, composing layered readings of singular life histories that require multi-level analysis.

The interviews were conducted online, at which time the Informed Consent Form (ICF) was read aloud, formally accepted, recorded, and subsequently transcribed.

Data analysis consisted of identifying categories and aligning lived experience with theoretical corroboration. According to Stake (2006), case analysis involves attributing meaning to both initial impressions and final understandings through two possible pathways: data coding—which guided the construction of categories—or direct interpretation. It is the researcher's role to determine which strategy best aligns with their way of apprehending the phenomenon. The final narrative that emerges—always singular—is shaped by the investigator's perspective, who articulates themes, constructs categories and meanings, and connects the case under study to broader human experiences.

Coding, understood by Kublikowski (2018) as a process of data transformation in which information is condensed, organized, and grouped until patterns reveal analytical categories, represents a movement from description to understanding, from the concrete to the abstract. The analytical trajectory followed the five phases proposed by Yin (2016): (1) compiling data and forming an organized database; (2) decomposing data by fragmenting information for detailed analysis; (3) recomposing data by rearranging and integrating elements into new configurations; (4) interpreting data through the construction of meanings, analytical articulations, and categories; and (5) concluding by synthesizing findings and producing an integrated understanding of the cases.

### *Ethical Considerations*

In accordance with Resolution 466/2012, complemented by Resolution 510/2016 of the Brazilian National Health Council, the confidentiality of participants' identities was ensured. This research is duly registered under ethics approval number 7.932.952 and CAE number 78308223.4.0000.5482.

This study is classified as low risk and offers potential benefits to participants through reflection, insights, and expanded self-awareness regarding their personal histories related to the research topic. Its findings may also benefit populations experiencing similar difficulties, as well as health professionals and related fields seeking to expand their knowledge on the subject.

Support, guidance, and emotional containment were provided, given that the researcher has clinical experience in managing PTSD and intrafamilial violence, along with referrals for therapy and/or professional assistance in cases of discomfort.

## ANALYSIS AND DISCUSSION

Analysis of the transcribed content of the two interviews led to the identification of six categories of parental violence, including symptoms of Post-Traumatic Stress Disorder (PTSD) and impacts on identity construction and self-image. The first category concerns sexual violence perpetrated by Tatiana's father.

We concur with Sanches et al. (2019) regarding the distinction between the terms abuse and sexual violence. The authors argue that the concept of abuse implies, to some extent, that certain acts might be permissible, as if there were criteria for consent—an assumption incompatible with the brutality of sexual violence at any stage of life, especially during childhood. Sexual violence constitutes a social problem with profound impacts on life, physical health, and psychological well-being, violating intimacy and sexuality and thus constituting an adverse experience and a form of complex trauma.

Clinical experience and empirical research demonstrate that individuals subjected to sexual violence may develop mental disorders, substance abuse, compromised self-image, multiple comorbidities, and PTSD (Chaves & Prado, 2024; Van der Kolk, 2020). Every child who is a victim of sexual violence occupies an asymmetrical and disadvantaged position in relation to the adult, who exercises power ranging from physical stature and strength to the symbolic and psychological position of importance and belonging in the child's relational world (Cunha, 2021).

In Tatiana's case, she reports an initial relationship of love and admiration toward her father. As Foucault (1987) emphasizes, violence of all kinds arises from power relations; specifically, an adult in relation to a child occupies a position of authority and relevance, given the nature of the life development cycle.

In Brazil, intrafamilial child sexual violence has increased at an alarming rate. Between 2021 and 2024, data from the Brazilian Public Security Yearbooks reveal a troubling escalation in rape cases. In 2021, there were 66,020 reported cases, increasing to 74,930 in 2022—an approximate rise of 13.5% (Brazilian Public Security Forum [FBSP], 2023, 2024). This upward trend continued in 2023, reaching 83,988 cases—an increase of 12.1% compared to the previous year (United Nations Children's Fund [UNICEF], 2023). The most recent increase, confirmed by the 19th Yearbook, indicates 87,545 cases in 2024—a 4.2% rise compared to 2023 (FBSP, 2025). According to the latest data, children constitute the majority of victims (87.7%),

predominantly female. The research highlights that Black girls represent 55.6% of victims. Children under the age of 14, classified as victims of “rape of a vulnerable person,” account for 76.8% of cases, with most crimes (59.5%) committed by family members and occurring within the home (69.1%). Perpetrators are predominantly men in caregiving roles, intensifying the rupture of trust and safety. This distressing Brazilian reality is reflected in Tatiana’s life history, dating back several decades.

Tatiana’s account:

But then my father always wanted to favor me, always calling me over to cuddle. That’s when the abuse happened. And it’s also a phase that I think children enjoy, right? And I liked it. But I didn’t know I was being abused. Until one day I was talking to my sisters ... and I thought it was just me. He tried it with all his daughters ... so my father always called me to stay with him in bed, I went, I liked it. Many times he came on me, not inside me, but on my butt, right? And I felt that wet stuff, but also, what was that? When my ... he noticed some movement from my mother, he would quickly put me out and bye, bye. (Testimony given to the author, 2025)

As the second category, we identified paternal physical violence. In Tatiana’s history of violence, we observed a process of parental and intrafamilial aggression in terms of physical violence. This violence was perpetrated by the father as a routine and as a rule in the way he educated and corrected his children. We therefore question whether physical violence, when used habitually as a corrective practice, may lead to the normalization of violence among family members.

According to studies by Araújo et al. (2023), there is a clear association between violent educational practices and increased risk of mental disorders. These studies demonstrate that hostility and punishment as child-rearing strategies generate emotional instability and psychological distress in those subjected to them. Conversely, children raised through positive educational practices exhibit fewer impairments to mental health.

Tatiana’s account: “My father used to beat us violently with a belt, and we were all left bruised ... he beat us very violently. All five of us were beaten at the same time. So everyone waited for their turn to be beaten. I was the fifth” (Testimony given to the author, 2025).

José’s account:

Well, I was the one who did things wrong ... He was a school principal in a small town. Well, you got beaten because you did something wrong? That’s how it was handled. You really couldn’t do anything wrong. I mean, it’s not that you were beaten every day, but when you did

something really bad, you know? Because what was normal—which today they don't think is normal—for us was normal, okay? (Testimony given to the author, 2025)

José on when he hit one of his sons: “Yeah? I hit him with my hand, right? That last one there, one day he got drunk, really drunk, and I had to drop what I was doing in another city to come here (he assaulted his son)” (Testimony given to the author, 2025).

In José's life history, we can further highlight the normalization of violence, alongside its use as a means of education and correction of behaviors deemed unacceptable by the family. We observe a violent educational practice learned transgenerationally, consistent with the findings of Santos and Moré (2011), and applied in a normative and standardized manner in this father's life, who himself was also a child subjected to aggression as a form of education.

Currently, Brazilian legislation includes a supplement to the Statute of the Child and the Adolescent (ECA): Law No. 13,010 of June 26, 2014 (Brazil, 2014), known as the “Spanking Law,” which establishes that:

Art. 18-A. Children and adolescents have the right to be educated and cared for without the use of physical punishment or cruel or degrading treatment as forms of correction, discipline, education, or under any other pretext, by parents, members of the extended family, guardians, public agents responsible for implementing socio-educational measures, or any person responsible for caring for, treating, educating, or protecting them. (Brazil, 2014)

We know that, under current legislation, both Tatiana's parents and José's parents would be subject to the penalties set forth in the aforementioned law:

Art. 18-B. Parents, members of the extended family, guardians, public agents responsible for implementing socio-educational measures, or any person responsible for caring for, treating, educating, or protecting children and adolescents who use physical punishment or cruel or degrading treatment as forms of correction, discipline, education, or under any other pretext shall be subject, without prejudice to other applicable sanctions, to the following measures, applied according to the severity of the case:

I – referral to an official or community-based family protection program;

II – referral to psychological or psychiatric treatment;

III – referral to guidance courses or programs;

IV – obligation to refer the child to specialized treatment;

V – warning. (Brazil, 2014)

Normalization and denial of the consequences of violence constitute the third category. José normalizes education through violence and denies its possible effects on his own life and on the lives of his children. Within the family—our first experience with the external world—we encounter our initial social laboratory, where we absorb patterns, culture, beliefs, and habits that prepare us for life in society (Erikson, 1976; Carter & McGoldrick, 1995). This family microsystem serves as the foundation for interaction with the macrosystem, extending beyond the domestic environment to broader social coexistence, and socially representing safety and protection—though not in the cases examined in this study (Cardoso et al., 2020).

Could this early experience, as a developmental marker of who we become, lead individuals to normalize everything that occurs within the family system, including aggression, neglect, lack of affection, and abuse—whether psychological, physical, or sexual? Could the social belief rooted in Western Christianity, which promotes parental sacralization through the model of the sacred family, contribute to the notion that anything is permissible within the family sphere?

Santos (2011) emphasizes that, throughout the child-rearing process, parents relive—through a more experienced perspective, or at least potentially so—their own past experiences as children and their difficulties in that role. This process could offer parents an opportunity to reframe their concepts and values regarding education.

We therefore ask: could the denial of violence be a psychic strategy of self-protection and self-preservation?

José's account:

Being beaten? You just stayed quiet, right? No, it didn't affect my life at all. For me, it was normal. No, I didn't have any trauma, and I don't have any to this day; for me, this subject has nothing to do with that ... yeah, if I did something wrong, I got beaten ... for me, everything was fine. Yeah, it was fair. I think my siblings didn't either, because they're all educated, working ... he would grab you by the hand and give you some good belt lashes. (Testimony given to the author, 2025)

In the fourth category, we identified parental education through violence. Family educational practices are grounded in cultural and transgenerational values. These family moral values are internalized and often reproduced as repetitions of patterns not cognitively reprocessed—or, in some cases, as constructive outcomes of an analysis of the emotional history experienced by those who were once children and later became parents—thus enabling what Santos and Moré (2011) define as the transgenerational transmission of violence.

In Tatiana's accounts, we can identify that her mother entrusted the children to the husband for education and correction, which he carried out through weekly domestic violence.

In José's case, as the son of an educational leader—a school principal—who employed violent methods to educate his children, we observe the belief that aggression is a means of correcting and adjusting children's behavior, clearly illustrating the transgenerational nature of violence (Santos & Moré, 2011). José extended this violence-based educational practice to his four male children. His accounts indicate that the son who was beaten the least felt unrecognized by his parents. Below are excerpts from the interviews with both participants.

Tatiana's account about her mother:

And when my father arrived, she handed us over to him as if he were going to be that loving human being. No. My father beat us violently with a belt, and we were all left bruised, after she witnessed that scene. My mother always exposed us. Later she would come and tend to us, right? Take care of the wounds, and she kept saying, "See? You should have done this. You didn't do that". (Testimony given to the author, 2025)

José's account:

And everyone was afraid; nobody did anything wrong. Well, you got beaten because you did something wrong. That's how it was treated. Dialogue with the youngest son: 'You're traumatized because you weren't beaten, because I didn't pay attention to you.' He said: 'You don't care about me; you don't beat me like you beat my brothers. (Testimony given to the author, 2025)

Post-Traumatic Stress Disorder (PTSD) Resulting from Childhood Developmental Trauma constitutes the fifth category. We concur with the studies and authors that underpin this research regarding the effects imprinted on both the physical body and the psyche of each of our participants, who were raised within the framework of a violent form of education that violates the dignity of human individuality (Araújo et al., 2023).

Both in our studies and research and in clinical practice through attentive listening and observation, we can identify how individuals who experienced different forms of violence present physical and psychological symptoms, such as low self-esteem, lack of self-confidence, unawareness of their own capacities and potentials, disbelief and hopelessness in relationships, as well as difficulties related to a sense of belonging and self-agency. These factors directly affect the construction of a healthy identity and a positive self-image (Li & Liang, 2023; Hyland et al., 2023).

In Tatiana's accounts, we observe her struggles with insomnia, thoughts she herself considers negative, impulsivity, mood fluctuations, difficulties in her sexual relationship with her partner, as well as the suffering experienced when revisiting her life history.

In José's case, there is denial regarding violence as harmful to individual development—although, toward the end of his account, he acknowledges his sudden outbursts within the marital relationship, his remorse concerning his family demands and interactions, and, finally, admits the connection between his father's violence and what he describes as his own "harsh way of being."

Decades of studies conducted by Van der Kolk (2020) challenge the position of the American Psychiatric Association (APA, 2014) regarding the "lack of knowledge about the pathophysiology of trauma." This author, along with other researchers such as Maté and Maté (2023) and Levine and Frederick (2022), argues that trauma alters what Van der Kolk (2020) refers to as the emotional brain, where the limbic and reptilian systems are located.

During traumatic experiences, the brain secretes high levels of cortisol. This process functions—by analogy—as a kind of tattoo on the emotional brain, which overrides the rational brain. As a result, the individual remains in a constant state of anxiety and alertness when exposed to triggering situations or adverse contexts, potentially displaying three different types of responses: fight, flight, or freeze. This process activates the vagus nerve (Porges, 2023), which becomes a pathway for emotional processing—the biology of trauma—and generally does not assist the traumatized individual in processing life through a more rational route with fewer impulsive and distressing emotions.

If we consider the categorization of PTSD symptoms according to the APA (2014), we find the following clusters: intrusion, avoidance, negative alterations in cognition and mood, and changes in arousal and reactivity. Frequent nightmares and unwanted memories that reproduce the triggering event are common. Some individuals relive the traumatic experience as vivid recollections, reacting as if the event were occurring again.

Tatiana's account:

Some insomnia. Bad thoughts. Today, totally ... totally (regarding mood changes). Even though I know I can cope and that I'm not alone. I'm very aware of that within myself, yes. But it's not possible to sustain it all the time. So it leans more toward impulsive actions, but not so impulsive as to lead to physical confrontation; I just won't let things slide. So I've taken more than one impulsive action, more initiative than avoidance. I used to avoid a lot because that poem ... that poem by a Brazilian author whose name I've forgotten guided me for a long time: 'stay quiet, don't say anything. Move on, you've already lost so much.'

There was a moment when my flame turned into a matchstick. And I think that was when I became very, very sad about my story. No, I no longer have sexual relations with another person. But I have a sexual relationship with myself. No one else touches me—not that I forbid C.

from touching me ... we no longer sleep together either, which for me is also very violent, you see? I remain within violence, right? And I soothe myself, I caress myself, don't I? That's my relationship with myself. But a little memory always comes back. Today, I'm aware that I didn't lose my sexuality despite so many aggressions (Testimony given to the author, 2025).

José's account:

Things I did wrong that today, when I think about them, I shouldn't have done. I could have acted differently, right? And I say to myself, well, it's already done. I was very upset that my wife passed away from cancer in 2021 ... I feel very resentful because she wanted me to change some things. I couldn't change. She became resentful—very resentful—of my way of being, but then, what do you call it? Explosions, right? I got angry and all that. Not to hit— I never laid a hand on L.—but I was macho, tough, tough, right? Everything was harsh. Make a small mistake and I'd throw a tantrum, you know? ... She complained about my harsher behavior. These things happened—my explosive behavior. I don't see myself as having any trauma; for me, things were fine. The only thing I regret is that I could have visited my mother more when I didn't. About my parents' violence: yes, for sure. It may have shaped me—made me more irritable, tougher, I don't know—but in the beginning it wasn't like that.

Parental Violence and Its Impact on Identity is the sixth and final category. The relationship between parental violence and its impact on the identity of abused children constitutes one of the central questions of this study. To what extent can a childhood marked by aggression, neglect, and abuse in its various forms—along with lack of affection and the non-recognition of a child's individuality and freedom from early childhood—affect the development and/or recognition (in José's case) of identity in adulthood? (Hyland et al., 2023; Levine & Frederick, 2022; Li & Liang, 2023; Maté & Maté, 2023; Van der Kolk, 2020).

In Tatiana's case, we observe her developmental journey through therapeutic processes involving ayahuasca as a resource for self-analysis. On one hand, she recognizes how much she carries an image of herself as someone who is violent in communication and behavior; on the other, she finds within herself a space of self-love and care. Tatiana presents episodes of resilience and strength, leadership positions in her professional career, and a constant pursuit of independence as a way to free herself from the judgment imposed by family violence. Her adult experiences of overcoming adversity and engaging with memory have shaped who she has become in a more flexible manner.

Identity in postmodernity has become fluid, mutable, flexible, decentered, and fragmented, as described by Hall (2019). In this regard, greater fluidity and transformation can be

observed in Tatiana than in José. Here, we see Tatiana rethinking her previously violent way of being in the world, whereas José maintains a self-image of a “harsh,” explosive, and demanding individual—characteristics presented in a fixed manner, with limited room for reflection or transformation.

Morin (2012, p. 82) discusses our polymorphic identity: “each individual is one, singular, irreducible. Yet, at the same time, double, plural, countless, and diverse. Thus, we encounter the problem of multiple unity.” It is therefore relevant to consider Tatiana as a subject who embodies the characteristics of being both one and multiple, marked by fluidity, flexibility, and the type of identity discussed in this study from a postmodern perspective (Hall, 2019; Goffman, 2014). In her accounts, she identifies a role she considers violent during a certain phase of her biographical cycle and, in contrast, currently presents a self-image of a loving and caring person in her professional role as a therapist—someone available for action, with energy and courage to move forward, and in an evident pursuit of overcoming her traumas, which are inscribed in memory, body, and mind.

Tatiana’s account:

I think that after twenty-one or twenty-two, until around thirty or thirty-five, I was a very harsh person with others, you know? And harsh—very harsh—with myself. It was anxiety, I think it was an immense desire to have independence and say, ‘I’m out of here’ ... I wanted to leave home to stop being assaulted. But I didn’t stop assaulting others. Right? I stayed in that cycle for many years—of having been assaulted and of assaulting, of speaking harshly to people, of not being a person who could negotiate; it had to be my way. So, I was a dictator. I was a bulldozer. I always had this oppositional presence mixed with a bit of authority. When I arrived, it was ‘Tatiana has arrived,’ because, on top of everything, I scared people. Back then, I didn’t have that awareness of, ‘Wow, who am I? What a violent being I am.’

I attribute that strength to independence. I couldn’t depend on anyone. My word was productivity. So, I was always very proactive, very much so. Today, I’m a person with active, empathetic listening. I’m very loving, very caring. I’m very polite. I’m someone who gets things done. Today, I know how to say no—and I say no very calmly—and I work all the time with nonviolent communication. Marshall is in my mind (referring to nonviolent communication). I’m still a violent person. I’m very sorry about that. We’re not made of iron; we’re human beings, especially human beings marked by so much pain, so much lack, so much violence. But today, I’m a very different person from who I was many years ago. And a survivor for the good! In the name of love—because if I’m not here now in the name of love, then I am in the name of love.

I'm very grateful for my anger. I had anger; it was my driver of movement. I'm a very strategic person. I was very black-and-white, yes. Very rigid, very harsh with myself and with others. Later, I softened with others, but I remained harsh with myself—unflexible with myself. (Testimony given to the author, 2025)

José's account:

Yes, I was always a difficult father, right? Angry, coming from that system ... because she wanted me to change some things. I couldn't change. She (my late wife) became resentful—very resentful—of my way of being more, what do you call it, explosive. Regarding my parents' violence: yes, for sure. It may have shaped me, for example, making me angrier, tougher, I don't know—but in the beginning, it wasn't like that. (Testimony given to the author, 2025)

## FINAL CONSIDERATIONS

As researchers, we understand that we follow a calling—one that urges us to look not only inward, within our clinical practices, but also outward, through research. In doing so, we carried out the methodological pathway and, through it, fulfilled our mission in this study by confirming that parental violence during childhood and adolescence impacts identity construction, generates trauma, and has clear implications for adult life.

Regarding physical violence, we observed and established that both physical aggression and sexual violence leave profound marks on the biography of affected individuals, accumulating in their histories as memories and recollections, and shaping how violence influences their ways of being, thinking, and acting in adulthood.

This research revealed two clearly contrasting polarities among the participants. On one hand, Tatiana demonstrates understanding, meaning-making, and management of her history, which she has worked—and continues to work—to reframe in a resilient manner, albeit with marks that we consider traumatic in our analyses. We argue that trauma does not “displace” the individual marked by it; rather, it can be managed and reprocessed so that the resonances of encounters with traumatic repetitions become tools for resilience, enabling the ongoing construction of purpose and meaning in life—despite the immanent persistence of its signs. Each individual manages trauma according to their own coping resources.

On the other hand, we find José, marked by internalized patterns of violence that operate in his worldview, his educational practices, his communication style, and his self-image. In José's case, we observe the denial of parental violence received and transgenerationally reproduced, with little questioning or reflection about what it meant to be an

individual subjected to violence—although, in brief moments, he acknowledges that his episodes of “loss of temper” in relationships may stem from his experience of being beaten by his father.

These voices corroborate our clinical experiences and align with the findings of researchers dedicated to understanding childhood developmental trauma, which culminates in post-traumatic stress disorder across the course of these biographies.

In light of these results, we conclude that parental aggressiveness profoundly impacts individuals’ lives, leaving persistent marks permeated by the scars of intrafamilial violence. We recognize that a long path still lies ahead, as both science and clinical practice are in need of deeper understanding to develop multiple ways of caring for individuals whose lives have been so deeply wounded by intrafamilial violence.

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