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Violence Against Women in Rural Greece

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Violence Against Women in Rural Greece

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Η βία κατά των γυναικών στις αγροτικές περιοχές της Ελλάδας

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ABSTRACT

Violence against women is a global human rights violation. Despite this, there is a lack of culturally sensitive country specific empirical research on violence against women. Much of the existing research focuses on the experiences of women living in urban and metropolitan areas. Little is known about the experiences of women living in rural areas. The current study uses feminist qualitative methodology to examine the unique experiences of intimate partner violence survivors in rural Greece who sought services from a regional Community Centre. Interviews with 12 rural Greek women were conducted, transcribed, and thematically coded to reveal commonalities in the participants' narratives. Our analysis revealed themes related to the impact of rurality on help-seeking behaviors, knowledge of and access to social services, and how rural patriarchal culture impacts victims' willingness to seek help. The results of this study shed light on the understudied experiences of rural Greek women who have experienced domestic abuse. Our findings can be used to further expand global rural criminological theory and develop procedures to remove the barriers that rural survivors face when seeking social services.

KEY WORDS: Rural criminology; violence against women; domestic violence; help-seeking behavior; patriarchal culture.

ΠΕΡΙΛΗΨΗ

Η βία κατά των γυναικών παγκοσμίως αποτελεί μια παραβίαση των ανθρωπίνων δικαιωμάτων. Παρά το γεγονός αυτό, υπάρχει μια έλλειψη εμπειρικών δεδομένων των πολιτισμικών τους διαφορών ως προς την εκδήλωση του φαινομένου ανά χώρα. Η περισσότερη ερευνητική υπάρχουσα βιβλιογραφία εστιάζεται στις εμπειρίες των γυναικών των αστικών και μητροπολιτικών περιοχών. Λίγα είναι γνωστά σχετικά με τις εμπειρίες των γυναικών που ζουν στις αγροτικές περιοχές. Η παρούσα μελέτη χρησιμοποιεί την φεμινιστική ποιοτική μεθοδολογία για να εξετάσει τις μοναδικές εμπειρίες συντροφικής βίας των γυναικών τέτοιων περιοχών της Ελλάδας, οι οποίες αναζητήσαν τις υπηρεσίες ενός κοινοτικού κέντρου βοήθειας. Διεξάχθηκαν δώδεκα συνεντεύξεις με γυναίκες αγροτικής περιοχής, και τα δεδομένα κωδικοποιήθηκαν και αναλύθηκαν με την θεματική μέθοδο ανάλυσης προκειμένου να αποκαλυφθούν οι κοινοί τόποι στις αφηγήσεις των συμμετεχουσών. Τα αποτελέσματα της έρευνας μπορούν να χρησιμοποιηθούν στην επέκταση της ενημέρωσης της παγκόσμιας εγκληματολογικής θεωρίας σε αγροτικά περιβάλλοντα και στην ανάπτυξη διαδικασιών κατάργησης των εμποδίων που αντιμετωπίζουν οι γυναίκες της υπαίθρου στην προσπάθειά τους να αναζητήσουν βοήθεια από τις κοινωνικές υπηρεσίες.

ΛΕΞΕΙΣ ΚΛΕΙΔΙΑ: Αγροτική εγκληματολογία, βία κατά των γυναικών, ενδοοικογενειακή βία, συμπεριφορά αναζήτησης βοήθειας, πατριαρχική κουλτούρα.

1. Introduction

Violence against women is a global human rights violation which undermines the physical and mental health of victims, and their social and economic well-being (WHO, 2017). It is a multi-dimensional phenomenon, reinforced by masculine ideology of familial patriarchy and domination of women in domestic and social settings rendering them a polyvictimised population (DeKeseredy, 2019). Domestic violence (DV) against women by their spouse or partner is the most common form of gender-based violence and it is a well-known internationally recognized social problem. A World Health Organization report (2013) estimates that 35% of women worldwide have experienced either physical and/or sexual intimate partner violence or nonpartner sexual violence (UNCRI, 2014:7). The frequency of DV against women across the world has been well documented. The European Institute for Gender Equality (2015) estimates that 25% of women in Greece have experienced violence. The cost of intimate partner violence against women in Greece could amount to EUR 2.4 billion per year. Despite the pervasiveness of violence against women, the experiences of victims and the access they have to social services vary greatly by the region in which they live.

The experiences of DV victims living in urban areas differ from victims residing in rural communities. The Convention on the Elimination of All Forms of Discrimination Against Women, the only international human rights treaty, recognizes that rural women in both developing and developed countries “grapple with poverty, economic and political exclusion, lack of access to services and social protection and the concomitant increases in domestic and care work, and rural development policies that overlook the priorities and rights of women” (The UN General Assembly Report, 2017:3). According to the UN General Assembly Report (2017), women in rural areas may be at increased risk of violence compared to urban women because of structural causes such as greater multidimensional poverty, legal and customary discrimination, lack of access to resources, and negative social norms of gender stereotypes (The UN General Assembly Report, 2017:9). Qualitative studies of DV in rural areas have revealed that both the structure and culture of rural environments may engender and conceal a particular type of violence against women (DeKeseredy, 2019).

The seriousness of domestic violence is often exacerbated in rural areas due to social isolation and reduced access to support and healthcare services for victims. As noted by the Convention on the Elimination of All Forms of Discrimination Against Women, the unique conditions of living in rural areas result in less access to DV-related services. Rural women face barriers to accessing services because of geographic distance and isolation. In addition to facing barriers to accessing services, rural women are nearly twice as likely to be turned away from services because of the insufficient number of programs and inadequate staffing of communitybased health programs in their region (Peek-Asa et al., 2011, p.1743).

The experiences of DV victims living in urban and metropolitan areas around the world is well researched. However, less is known about the experience of DV victims residing in rural communities. Culturally sensitive country specific research on rural DV is needed to identify the unique experiences of victims living in rural areas. Findings from such studies can inform policy and programs to prevent DV and treat those who have been victimized. The purpose of this study is to document the experiences of rural women in Greece who have experienced DV. Specifically, we seek to explain the unique cultural and geographic challenges rural Greek women face when accessing DV support services in a region where inhabitants of sixteen independent communities seek the support of just one regional Community Centre.

2. DV in Rural Greece

Greece is a European country with a strict patriarchal structured based on sociocultural norms and gender inequality that define the expected behavior of women and men in both the family and larger society. The last national survey on gender-based violence in Greece found that Greek women experienced high rates of various forms of domestic violence. For example, 3.6% of survey participants experienced physical violence by their partners, 56% experienced psychological and/or verbal violence, and 3.5% experienced at least one event of sexual abuse in their lives (Artinopoulou, 2006). Data from the UN Global Database on Violence Against Women, show that 19% of Greek women experience physical and/or sexual intimate partner violence at some point in their lifetime, and 6% of women experienced this type of violence in the last 12 months.

Contemporary Greek life, especially in urban areas, reflects a society breaking patriarchal norms and making a slow shift towards egalitarianism like other modern European countries. However, in rural Greece, the patriarchal structures are still deeply entrenched, intense and obvious - men dominate and control women, and the masculine way of thinking and acting overvalues the feminine in all aspects of life. Accordingly, DV victims in small rural areas may face additional difficulties in seeking help and support, reporting the crime, overcoming the fear and shame they feel for what is happening to them, and in facing practical problems such as transportation to service providers. Results from the national survey on gender-based violence in Greece (Artinopoulou, 2006), show that 3% of women living in agricultural areas have been victims of physical violence by an intimate partner. Findings from this survey need to be considered with abundant caution given the age of the survey (conducted in 2003), and the changing economic, political and social dynamics. Nevertheless, these results show the problem of DV occurring beyond urban boundaries and in rural communities.

The social stigma of being a DV victim is a barrier for the official reporting of DV incidents, especially when it comes isolated rural communities. According to the General Secretariat for Gender Equality, only 11.6% of victims living in rural, mountainous or isolated areas of the country report incidents of violence and seek help after abuse (Glyniadaki, Kyriazi, & Mourtzaki, 2018, p. 26). These statistics show the effects of informal pressure that victims may receive from their social environment, through prevailing perceptions of violence, family, and gender roles within it. The reality for many rural women is that living in small rural communities limits their access to social supports and presents narrow life choices that further constrains their freedom and presents few safe pathways to gain support for themselves and their children.

3. Theoretical Framework of DV in Rural Areas

Much of the theoretical work that explains violence against women in rural areas draws heavily from various strands of feminism and prioritizes the gendered nature of DV in the context of the patriarchy (DeKeseredy, 2019, p. 315). This feminist perspective argues that the main reason violence against women has remained prevalent across the world, is the major imbalance of power and control that exists among men and women within societies that are strongly influenced by a patriarchal worldview (Grigaitė, Karalius & Jankauskaitė, 2019, p. 305). Though much debate exists around the definition of patriarchy, it can be conveniently defined as “a gender structure in which men dominate women, and what is considered masculine is more highly valued than what is considered feminine” (Renzetti, 2013, p. 8).

The feminist perspective argues that coercive control is established through acts of suppression and prohibition that makes women dependent on their male partners mentally, emotionally and/or physically, restraining them from full participation in society (Grigaitė, Karalius & Jankauskaitė, 2019). One of the most developed theoretical perspective on rural violence against women is DeKeseredy and colleagues' (2007) rural masculinity crisis/male peer support model of separation/divorce sexual assault. This multi-level theory explains separation/divorce sexual assault victimization through the lens of the rural patriarchy and male peer support (DeKeseredy, 1988; DeKeseredy et al., 2007). While multiple theoretical explanations exist, it is essential for theorists to view violence against women in rural areas through the lens of rural patriarchy.

4. Addressing DV in Greece

The legal framework on domestic violence in Greece addresses DV as a serious crime (Law 3500/2006) and protects the victims' rights during the criminal proceedings (Law 4478/2017) (for an in-depth review of progression of law and policy addressing DV in Greece see Petropoulos, Fotou, Ranjan, Chatzifotou, & Dimadi, 2016; Ranjan 2020; Ranjan & Artinopoulou, 2021). Since 2010, the General Secretariat for Family Policy and Gender Equality (GSFPG) has served as the principal entity for preventing and combating violence against women. The GSFPG uses a network of structures to accomplish this goal, including: the national SOS 15900 24-hour helpline; and 42 Counselling Centers - 14 of which are located at the capitals of the regional units, while the remaining 27 operate under municipalities within regional units. The Counselling Centers offer a range of services to victims of gender-based violence such as: (i) updates and information on gender equality, combating violence, and multiple discriminations against women; (ii) social, psychological, legal, and employment support (using a gendered lens); (iii) referral or accompaniment services – when necessary – to shelters, police and prosecution authorities, courts, social services, hospitals, and health and mental health centers; and (iv) legal aid in cooperation with bar associations.

Despite international and country-wide efforts to prevent domestic violence, empirical data nationwide has not been collected in a systematic or regular manner. Original large-scale research is significantly underdeveloped (Ranjan & Artinopoulou, 2021). In Greece, data on domestic violence come from the police, the judiciary sector and the reports of the Observatory of General Secretary on Gender Equality and Family Planning (GSFPG) (see Petropoulos, Fotou, Ranjan, Chatzifotou, & Dimadi, 2016; Ranjan 2020). Since 2019, the GSFPG has started maintaining and publishing records of disaggregated data. However, these numbers do not include the dark figure of domestic violence, which is notoriously under-reported.

Although research on rural criminology has been conducted internationally for decades, scholars and policymakers in Greece have not developed any project on the issue of rurality and domestic violence at the time of this study. The current study is the first empirical research on a rural setting in the northern part of Greece. This study aims to extend the theoretical discussion on violence against women in rural areas and develop understandings of how perpetrators can capitalize on the vulnerabilities that rurality imposes on women. Further, this study intends to shed light on the unique issues that pertain to domestic violence in rural areas and how these issues impact victims' ability to seek and receive social services. Specifically, we employ feminist qualitative methodology to explore the barriers to help seeking and help-seeking pathways of twelve domestic violence survivors who sought help from the Social Service Department at the Community Centre of a small rural area in northern Greece.

5. Methodology

Most of the research on violence against rural women is informed mainly by feminist ways of knowing, and relies primarily on qualitative methods like rich, in-depth interviews which emphasize women's real and individual experience (Davis, Taylor & Furniss, 2001; DeKeseredy, 2019). Using this approach, the lack of interest in "objectivity" and an emphasis on intersubjectivity means that the researcher is embedded in a supportive, caring relationship with the participants (Davis, Taylor & Furniss, 2001, p. 337). This methodology provides a space for the voices of women who are victims of domestic violence to be heard (Lapiere, 2010). Additionally, recent research has shown that there has been a rapidly declining response rate to mail surveys, especially among rural populations (Stedman, Connelly, Heberlein, Decker, & Allred, 2019). This further justifies the use and importance of feminist qualitative methods in research on rural women's experiences.

Rurality in Greece reflects both the agricultural production and the population criteria. The administrative chart of Greece divides the country in regions and municipalities. Each municipality consists of villages and other smaller communities. There are 13 regions and 332 municipalities. Based on the last census results from 2011, 76.6% of the Greek population lives in urban and suburban regions of Greece and 24.3% live in rural areas. For the purposes of this study, rurality was defined according to the Greek Board of Agriculture 2017, as a community with up to 2,000 inhabitants (www.odigostoupoliti.eu).

The current study limited participation to women who have experienced domestic violence (physical, sexual and psychological) and have sought help from the Community Center. The Community Center offers services to victims of violence, such as legal counseling, psychological support and the creation of a strategic plan to leave the violent environment. A convenience sample was drawn from women clients seeking services from the Community Centre. A social worker employed by the Centre debriefed potential participants about the study and gave clients the researchers' contact information. Clients interested in participating in the current study then contacted researchers and arranged an interview. No incentives (material or preferential services) were offered for their participation in the research. This process resulted in 12 interviews with women who sought services from the Community Centre.

The twelve participants lived in rural area in northern Greece and had experienced domestic violence by their husband or intimate partner. The women's age ranged from 35 to 55 years old, with an average age of 45. All of the participants were local and identified their ethnicity as Greek. Additionally, all participants were married and had an average of two children. Of the 12 participants, 7 were engaged in agricultural work and animal husbandry and the remaining 5 were unemployed.

Interview Procedure & Data Analysis

In-depth semi-structured interviews were used to collect data for this current study. Building on prior research on domestic violence and rurality (see Davis, Taylor, & Furniss, 2001; Ragusa, 2013), the interview protocol was constructed to capture the experiences of DV victims living in rural Greece. Interview questions focused on types of abuse experienced and the tactics used by the perpetrator, barriers to help and support, the type and amount of support received at the Community Centre, cultural and social factors contributing to abuse, and the effects of violence on motherhood. Two pilot interviews were conducted prior to interviewing study participants to help identify early weaknesses and areas in need of improvement in the thematic areas of the interview protocol. The pilot interviews did not reveal any areas in need of revision and the interview protocol was finalized.

Interviews with participants (n=12) were conducted from November 2020 to January 2021. Prior to completing interviews, participants signed an informed consent form that provided information about the study, their voluntary participation, and verification of confidentiality and anonymity. Interviews were conducted at a time convenient to the participant and the average duration was approximately one hour. Interviews were transcribed verbatim prior to data analysis. Following transcription, interviews were thematically analyzed to reveal several core themes throughout the interviews. Thematic analysis was used for analyzing the interview data. Thematic analysis allows for locating, analyzing and reporting various themes that arise through the data, as well as selecting the key points of interviews, understanding the text as they relate to the research questions by focusing on the key issues, and finding common ground among the participants' voices (Braun & Clarke, 2006). Researchers used the stated research questions as a guide in searching for relevant excerpts and cleaning and coding data. Initial codes were generated by repeatedly reading the data and assigning codes to identify characteristics of that data that pertained to the research questions and related to the most basic parts of the phenomena being studied. After coding the data, researchers sorted through the various codes to identify themes within the interview narratives. Themes are defined as more abstract conceptual constructions that result from the integration of the variety of codes and subcodes. Finally, researchers defined and named the core themes revealed through the data analysis (Braun & Clarke, 2006).

6. Findings & Discussion

This section describes the common themes derived from a thematic analysis on how rurality impacted and interplayed with women's experiences of domestic violence and their pathways to help-seeking. Seven predominant themes emerged from our analysis and are presented below. Throughout our discussion, we included several participants' quotes that highlight each category and provide strong examples of the theme discussed.

1. Lack of transportation

Lack of public transportation is a unique risk factor for rural woman experiencing DV because rural areas are isolated (DeKeseredy, 2019; Youngson, 2020). Rural inhabitants without access to public transportation often must drive long distances to access daily goods and healthcare. Therefore, they may be constrained by limitations to access the family vehicle for social or medical services (Youngson, 2020). In this research, the lack of transportation across the rural area was a barrier identified by women seeking to access the Community Centre. For example, one participant stated, "One day my friend who had a car gave me a lift because there are not frequent bus routes and so it was difficult to go alone..." (Int.1). Several other participants identified transportation as a barrier to services and described how limited access to affordable public transportation presented challenges in reaching the Community Centre. As one participant described, "... public transit sucks in this area and you have to wait for the bus in order to go to the community center..." (Int.9). Another participant identified the costs of public transportation as a challenge by saying, "I did not have money to take the bus to go to the Community Centre ... it is far from the village... I had to tell someone to take me there..." (Int.7). Likewise, another participant (Int. 3) reported that her husband did not give her money to travel by bus and thus could not access the community center. As another woman described, "I could not go often, I do not have my own car, the car belongs to my husband and he does not give it to me...I had nowhere to leave the

children...the bus passes through the village only once a week..." (Int.5). These findings are consistent with past research, for example a study by Pit and colleagues (2019) found that women could not get money from their husbands so they could not use public transport.

2. Women's limited knowledge of available services in rural areas

Limited knowledge of available services in rural areas also creates barriers to accessing the Community Centre (Youngson, 2020). The majority of women in this study had limited contact and information regarding the Community Centre and the services they provide. As one woman described, "I did not know that there was a community center where I could go and talk about this problem..." (Int.12). Another participant echoed this sentiment and stated, "I did not contact for a long time because I did not know it existed in the area..." (Int.4). Other participants explained how they first became aware of the community center. In explaining how she was referred to the Centre, one woman stated, "I called the women's helpline at 15900, and they referred me to the Community Center I did not know it existed... then I went to the community center twice..." (Int.10). Another participant described how long she kept the abuse to herself before talking to a friend. As she described, "For 1 year I did not talk to anyone, when I discussed it with a friend of mine she told me about the community center, I did not know it existed..." (Int.11). The quotes presented in this section highlight the relationship between geographic isolation and a lack of awareness of DV support services in rural areas. This may reflect the gaps in referral systems for the victims of DV and the lack of institutional collaboration and networking in DV prevention policies at the community level. Our findings demonstrate a need for wider DV service awareness campaigns in the general population.

3. Community Center Services

Our findings suggest that obtaining services from the Community Centre had a positive impact on victims. Despite an initial lack of knowledge of the services available, all of the women in this study spoke positively about the services they eventually received from the Community Centre. Of particular importance was the support received from Community Centre professionals, such as a psychologist, lawyer and social worker. These professionals helped women with psychosocial and legal counseling. Specifically, some women reported that they developed a safety planning with the specialist. As one woman described, "... in the first place, psychological support was important because they helped me see things a little more cool and not so emotionally ..." (Int. 5). Other participants recalled the usefulness of legal support. One woman stated, "It is definitely and legally supportive, because I did not really know what my moves should be in order to be able to be (legally) protected in the future, and this advice was very legal" (Int. 12).

4. Reluctance to seek services based on fear, shame and lack of anonymity

Feelings of shame, fear and lack of anonymity can further limit the already small network of support in rural locations for women subjected to domestic violence, constricting their space for action and narrowing their help-seeking pathways. Several participants commented on the reasons why they stayed in an abusive relationship.

Lack of anonymity

In a rural area anonymity, privacy, and confidentiality when disclosing violence or accessing support (from friends, support workers, police, court workers or medical professionals) is tenuous at best (Farhall, Harris & Woodlock, 2020; Ragusa, 2013). This, combined with cultural norms being incom-

patible with help-seeking, and even shaming of help-seeking behaviors, further increases the likelihood of a DV victim remaining silent. Several participants reported, As one participant described, "I did not want to get involved that the fact that private issues easily become public knowledge in the rural area prevented them from seeking help. in this process, I was supposedly trying to understand him...I was afraid of what people would say.... our friends, our relatives, here in the village you know nothing stays a secret and that makes it difficult for me to ask for help ..." (Int.9)

Shame and blame

Shame is often a consequence of the lack of privacy in rural areas (Bosch & Bergen, 2006; Ragusa, 2013; Farhall, Harris, & Woodlock, 2020). In this study, participants encountered challenges and complications when seeking help for the abuse because of shame and blame, which was further exacerbated by living in a small community. This is illustrated by one participant's statement, "I feel ashamed for being identified as a battered woman. Everyone will think I have done something wrong to annoy my husband they would blame me...this prevented me from seeking help... (Int.7). Another participant expressed, "Everybody talks here, and if he finds out they are talking about us he will blame me, because you don't talk about things that make him look bad" (Int.9).

Other participants developed a sense of shame, and as a result lead them to hide both her physical and psychological traumas and become socially excluded and withdrawn emotionally. As one participant explained, "I was ashamed, I wanted to hide everything I was going through, I did not want to leave the house so that they would not see the bruises I had...I was trying not to show my feelings, I was trying to look happy while I felt bad and isolated... only my parents knew it and the children who saw them every day...I felt guilty because my parents blamed me..." (Int. 6). Another woman explained the shame associated with the victimization she experienced and her concern surrounding her friends and family's response. As she explained, "I had to suffer, hurt and endure for the sake of marital duties, I had to endure it, I had lost my dignity, what would my parents and friends say... here everything becomes known..." (Int.11). Another participant described how the shame she felt inhibited her from seeking help. She described, "I have been thinking about it for a long time to seek help...because I feel ashamed and I was judged negatively in the village... that I was to blame" (Int.5).

5. Cultural-social factors facilitating abuse in a rural area

Many participants in this study stressed how cultural values driven by their parental families made them maintain marital relationships by all costs, even if the perpetrator was abusive, or else they risk being shunned from their community. As one participant described, "My parents did not want me to get divorced and they told me to stay with my husband for the children's sake ... my parents and my husband told me that I should be at home with my children and be a good mother and good housewife." (Int.2). Many rural women stay in abusive situations for years or a lifetime because they have come to accept the abuse as normal, are witnesses and victims of intergenerational violence, and/or have been convinced by their abuser that the abuse was their fault (Forsdick-Martz & Sarauer, 2000). This adherence to patriarchal norms and expectations is well illustrated by the following participant quote: "I did not want to talk about what I was going through, I thought it was something normal... that was how I grew up here in the village ... the woman must be patient and not react when she does not agree with the husband..." (Int.1). Another participant described a similar understanding to the strict gender roles she was expected to adhere to and how these expectations impacted her willingness to seek help. She explained, "My husband thought that he should only provide food and shelter to the children and that I

should be responsible for the children's upbringing... I believed him and I did not understand the seriousness...that's why I did not seek help for so long..." (Int.9).

Rural culture often carries the expectation of not disclosing "private matters" in public settings outside of the family or community (Valandra et al., 2016). This was another common influence that participants believed limited abuse disclosure and influenced some survivors to stay in abusive relationships. As one participant explained, "People think it is a private matter and nobody wants to interfere. Some of the elderly men of the village say that husband and wife should sort their personal problems out by themselves." (Int.7). Another described, "My parents and friends tell me to be patient so as not to ruin my marriage and this is normal that men sometimes raise their hand and shout... they tell me the couple should stay together for the children's sake and they don't help me..." (Int.3)

Consistent with prior research (e.g., Youngson 2020), women in this study did not receive help from their families to leave the abusive relationship and were discouraged from being assertive allowing for long term abuse. As one participant explained, "I begged my parents to help me, they always judged me negatively, they put the blame at me and told me that if I divorce him I should think about the consequences and that I cannot rely on them... in the village the people have this mentality..." (Int.4). Another participant reported, "The family affairs should remain within the four walls of the house...the woman keeps the family together", the man has to work...(Int.11). Many participants referred their family environment impacting the amount of abuse they could tolerate. For example, one participant explained how her abusive upbringing impacted her perceived expectations as a mother and wife, "I have had a difficult childhood, I grew up in a violent family environment, with a father deciding everything and a mother who was always afraid, so I thought I had to endure for the children's sake, for the family to be united ... I did not think I could ask for help at some point..." (Int.6).

6. Effects of domestic violence on motherhood

Domestic violence affects many women's experience of motherhood. DV can have profound and far-reaching effects on women, their feelings and behavior towards their children, as well as their sense of identity as mothers and as women (Lapierre, 2010). One participant described how the abuse she experienced impacted her ability to care for her children. She explained, "I was not in the mood to do chores at home, to cook, to take care of the children...I felt like a failure as a mother that I could not protect my children" (Int.5).

Additionally, abused women can feel overwhelmed and focus on just surviving while enduring these difficult conditions (Jaffe & Croocks, 2005). One participant described this survivor mentality and how it impacted her role as a mother when she stated, "I could not play my mothering role, I had other priorities, I was trying to survive, I was locked in a room when he started attacking me..." (Int.1). Another woman described how the abuse left her psychologically unable to care for her children. She explained, "I had nerves when he spoke badly to me and I broke out on the kids...I did not give the children the care they needed because I did not have the courage..." (Int.12).

Research suggests that some mothers have the power to care for and try to protect their children from their partner's violence (Sullivan, et al., 2000; Jaffe & Croocks, 2005) demonstrating resilience and determination (Lapierre, 2010). This resilience is best demonstrated through the following participant quote: "I was strong for my children, I was trying to protect them..." (Int.8). Many participants in this study described positive aspects of their relationship with their children. As one woman explained, "I had no problems with my children, I always tried to be

there for them, I always took care of them, I always talked to them..." (Int.10). Another participant explained the strength she gained through her children. As she described, "I was engaging with children constructively. I had the strength, we did things together, we went along to supermarkets, for walks..." (Int.1).

Women in rural areas often fear being painted as "bad mothers" or being judged as unfit mothers by their community if they sought help or left their abusers (Farshall, Harris & Woodlock, 2020). As one participant explained, "I did not want to be described as a bad mother from the village ... I was trying to take care of the children, I couldn't leave my family..." (Int. 11). Another woman also described this fear and expressed concern about being isolated from her community, when she stated, "I was afraid that my relatives and friends here in the village would accuse me of not being a good mother and they would isolate me if they had learned that I sought help..." (Int.12). Another participant explained, "I felt bad, that I do not deserve, that I am not a good mother, a good housewife if they learned in the village that I sought help...I was afraid to leave them".

7. Isolation, control of movement and surveillance

Abusive partners often reinforce their coercive control through physical and geographical isolation, such as deliberately moving to a remote area to live, and through social isolation, such as separating the woman from her friends and family, therefore isolating her from the wider community (Farshall, Harris & Woodlock, 2020, p.187). Abusive isolation and control of movement was described in many participants' accounts. As one woman explained, "My husband chose to stay in the village in his paternal home, we are far from the city and so I cannot meet my friends... he tells me we came here in the village to raise the children not to go out, while he is missing all day...I have no help from anyone in this isolated place..." (Int.12). Another participant explained, "We live in a secluded place and I cannot go out, our neighbors are elderly, he does not give me money, I am cramped and alone at home with the children" (Int.8). Physical isolation can be the perpetrator's most effective tactic, as it can result in the victim-survivor being "literally captive" (National Rural Crime Network, 2019, p. 8). Isolation and control over women's movements by the perpetrator leave women feeling that there is no option for long-term solutions (e.g., support from the Community Center) as it seems inaccessible. Rather, many women feel that they must endure their abuse and focus on simply surviving the day. As one woman described, "I was trying to survive, I was locked in a room when he started attacking me...I kept crying, I thought of calling the police but I was scared..." (Int.1).

Closely linked to the tactic of isolation, perpetrators' monitoring and control of victimsurvivors' use of technology was presented as a form of surveillance of victim-survivors' actions and movements. Multiple studies detail how perpetrators focus on limiting and controlling women's use of technology (Bosch & Bergen, 2006; National Rural Crime Network, 2019). Further, recent research shows that women have less access to digital technologies, especially those who live in rural areas (OECD, 2018). Women in this study mentioned perpetrators putting bed bugs in their sleeping sheets, recording calls with family and friends, and keeping track of their phone bills. As one participant explained, "[he was] constantly checking and keeping track of their phone bills and he keeps telling me I will control you and watch you whatever you do" (Int.5). Another participant described, "He was watching me and I understood, he admitted it in his anger, he had ordered the calls to be recorded...the phone was in his name so he had the right to do so" (Int. 3). The findings from this study show that addressing the gender digital divide is crucial to ensuring women's livelihood, improving women's access to support services, and to changing attitudes (OECD, 2018).

6. Conclusion

As demonstrated by the results of this study, qualitative research with survivors from rural areas is required to provide an in-depth understanding of the barriers to and complexities of speaking out against abuse, and to give voice to the experiences and perspectives of women living in rural communities. Our analyses identified several unique barriers rural women experience when seeking and receiving services. Based on these findings, we provide recommendations (summarized in Table 1) to help reduce these barriers such as offering a hotline service to connect victims to transportation, establishing mobile services and providing offices at rural markets, and educating school children about healthy relationships.

Professionals working in rural communities can use consciousness raising in work with women who have experienced intimate partner violence (Pitt et al., 2019). When women understand their experience is not a result of their individual failing, but part of a wider system of patriarchy they are freed from the shame and blame so often associated with abuse. Social workers working in rural communities need to be aware of the way in which traditional ideas of masculinity and male privilege are used in intimate partner violence. In this sense, they need to work towards the elimination of the societal pressures on men and boys to perform masculinity. Rural social workers also have a responsibility to challenge traditional gender norms which contribute to, and support, intimate partner violence (Pitt et al, 2019). As recommended in Table 1, service providers should consider strategies such as educating rural leaders on the regional services available and their power to make community change.

In addition to implementing some of these recommendations, there is a clear need for more small-scale studies of domestic violence in under-researched countries and communities (such as rural Greece). As described by DeKeseredy (2019), large-scale, international surveys, such as the WHO multi-country study, generally estimate prevalence rates lower than those found in smaller studies. This suggests a need for more culturally sensitive research that addresses factors such as language barriers, fear, distrust of authorities, patriarchy, and norms around secrecy, that may contribute to underreporting abuse in rural communities.

A more critical and theoretically led approach to the study of rural domestic violence needs to be located within a detailed understanding of the social and cultural construction of rurality. It has been suggested that more conservative ideas about gender and about the importance of maintaining a strong sense of community, in particular, have shaped the experience of domestic violence and, critically, its invisibility within rural families and households (Little, 2017). It is crucial that "traditional" culture on gender stereotypes and the powerful patriarchal relations within some rural communities and their knowledge of domestic violence is understood both by the recipients of services and the social welfare professionals in professional settings. Consequently, welfare service provision and implementation need to consider the configurations of society at the local level and to fully comprehend the specific needs of survivors and the appropriate responses in those rural spaces.

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