FOREWORD BY
WALTER S. DEKESEREDY

Gender-based Violence and Rurality in the 21ˢᵗ Century

Interdisciplinary Approaches

EDITED BY
**ZIWEI QI, APRIL N. TERRY
AND TAMARA J. LYNN**

GENDER–BASED VIOLENCE AND RURALITY IN THE 21ST CENTURY

Research in Rural Crime series

Series editors: **Alistair Harkness**, University of New England in New South Wales, Australia and **Matt Bowden**, Technological University Dublin, Ireland

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With a foreword by
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Contents

Series Preface

Matt Bowden and Alistair Harkness

Contemporary criminology grew out of mass transformations in society during the 20th century – a period that witnessed the formation and consolidation of cities through migration, and the restructuring of 'the urban' following the emergence of the information age. Considerable debate, research and scholarly theory has been formed primarily within the urban domain in this regard: witness, for example, the influence of the Chicago School and its influence on the rise of urban ecology-based approaches to crime prevention.

Rural areas themselves are currently being transformed by the new patterns of global flows as societies undergo transitions within. Nevertheless, myths about peaceful, crime-free areas beyond the cityscape persist, when in fact rural crime is multifaceted – raising new policy predicaments about policing and security governance. With approximately 45 per cent of the global population living in rural areas, a focus on rural crime in these diverse communities is critical. The series provides a space for new research and writing on a wide range of rural crime topics, rural transgressions, security and justice.

The *Research in Rural Crime* series has emerged to fill an important gap; to provide an outlet for mid-length monographs which focus on rural crime and responses to rural crime – providing an opportunity for original, cutting-edge monograph-length research in the criminological subfield of rural criminology. Truly international in nature, it welcomes and produces titles that are jurisdictional specific or related to themes that transcend political and juridical boundaries, and presents outlooks on contemporary theory, research and pressing public policy issues.

In essence, this series provides a formalised space for voices hitherto overlooked or without a venue for longer length exploration of rural crime, policing, security and other issues. It allows for the consolidation of intellectual thoughtfulness in monograph form, either from sole or joint-authored volumes, or from groups of colleagues in edited collections.

Importantly, too, it provides an opportunity for the combination of academic scholarship and empirical research with contemporary application.

Contributors to this series provide cutting-edge interdisciplinary and comparative rural criminological perspectives. Titles will be theoretically and conceptually driven, empirical or adopting mixed-methods approaches, and topics will focus on regional, rural and remote parts of the globe that are often overlooked in criminological works.

Editors' foreword to *Gender-based Violence and Rurality in the 21st Century*

There has been tremendous growth and intellectual development in rural criminology, and *Gender-based Violence and Rurality in the 21st Century* is significant in studies of gender-based violence in rural settings. In this book, Ziwei Qi, April N. Terry and Tamara J. Lynn have brought together an ensemble of academics, 'pracademics' and practitioners to interrogate both conceptually and empirically the driving forces behind violence in rural places with a particular spotlight on the United States.

Crucially, chapters in this edited collection tackle the 'so what' aspect of contemporary criminology. The contributors contemplate – based on the deployment of a range of investigative and exploratory methodologies – strategies to confront the complexities of violence in rural settings of the United States, whether through policy development, resource deployment or attitudinal change.

Gender-based violence is by no means restricted to a single place or at a single time. Sadly, it traverses geographic and demographic boundaries the world over. However, shining a light on the occurrence and responses to such offending in one context provides us with invaluable insights that will echo in so many other contexts.

We are confident that academic, student and practitioner readers alike, wherever they are on the rural/urban continuum around the world, will glean much from the unique perspectives offered in this volume.

List of Figures and Tables

Figures

Tables

List of Abbreviations

ACE	adverse childhood experience
ACS	American Community Survey
CBPR	community-based participatory research
CCR	Coordinated Community Response
DCF	Department for Children and Families
DPH	Department of Public Health
FBI	Federal Bureau of Investigation
GBV	gender–based violence
HRC	Human Rights Campaign
INA	Immigration and Nationality Act
IPH	intimate partner homicide
IPV	intimate partner violence
KBI	Kansas Bureau of Investigation
KCSDV	Kansas Coalition Against Sexual and Domestic Violence
KDOC	Kansas Department of Corrections
LGBTQIA+	lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual/ally plus
LPR	lawful permanent resident
LSSC	Lewis Social Service Centre
MSA	Metropolitan Statistical Areas
NIBRS	National Incident-Based Reporting System
OUD	opioid use disorder
PTSD	posttraumatic stress disorder
RCC	rape crisis centre
RUCC	Rural Urban Continuum Codes
SANE	Sexual Assault Nurse Examiner
SUD	substance use disorder
TDV	teen dating violence
TGNC	transgender and gender nonconforming
UCR	Uniform Crime Reporting
USCIS	United States Citizenship and Immigration Services
VAW	violence against women

VAWA	Violence Against Women Act
VSDVAA	Virginia Sexual and Domestic Violence Action Alliance
WHO	World Health Organization

Glossary

Abuser	A person who repeatedly treats others with cruelty and/or violence.
Austerity politics	A form of neoliberal governance that passes policies directed at reducing budget deficits of government-funded organisations, including spending cuts, increased taxation, or both. These policies often negatively impact the most vulnerable groups of society.
Community-based action research (CBAR)	A form of research that involves stakeholders through the research process, from establishing a research question, developing a research project and collecting data, to analysing and disseminating the results.
Continuous	Variables that are measured as real numbers, measured on an infinite scale.
Coordinated Community Response (CCR)	Teams that include representation from the criminal justice system, victim advocacy services, mental health, substance use treatment and other sections to engage partner agencies in developing a common understanding of intimate partner violence to coordinate a multidisciplinary community response.
Deadnaming	The act of referring to a transgender or non-binary person by a name they used prior to transitioning, such as their birth name.
Department for Children and Families (DCF)	A child welfare agency that also provides other types of social welfare services.
Discrete	Variables that are measured in non-overlapping categories.
Ethnography	A qualitative research method where the researcher(s) immerses him or herself into an

	organisation or community to record and analyse customs of people and cultures.
Experimental vignette methodology (EVM)	A research method that presents written and/or video scenarios to participants to measure quantitative and/or qualitative responses.
Extension agents	Part of a statewide network (for all US states) of educators sharing unbiased, research-based information and expertise on issues important to locations across the United States to address global food systems, water, health, developing tomorrow's leaders and community vitality.
Gender-based violence	Forms of violence, such as physical, sexual, financial, emotional or psychological, perpetrated against individuals because of their biological sex, gender identity or sexuality.
Indigenous	Something that is native to, or originates in, a particular place.
Intersection/ intersectional/ intersectionality	A framework that identifies aspects of an individual's identity including race, gender, sexual orientation and socioeconomic status to analyse experiences of oppression and discrimination that lead to his or her marginalisation.
Intimate partner	Anyone with whom one has repeated sexual, romantic or dating contacts.
Intimate partner homicide	Homicides in which the perpetrator kills their current or former intimate partner.
Jim Crow laws	Local and state statutes legalising segregation in the United States. These laws began in 1865, following ratification of the 13th Amendment to the Constitution.
Juvenile correctional facility	A medium- and maximum-security facility for male and female juveniles who are court-ordered based on the seriousness of their offence(s).
Juvenile Justice Community Advisory Boards	A formal group that consists of 12 or more members who represent law enforcement, prosecution, judiciary, education, corrections, ethnic minorities, social services and the general public. These groups develop a local comprehensive plan to address the concerns that are impacting the youth within the community.
Latinx	A term used to describe people who are of or relate to Latin American origin or descent. It is a

	gender-neutral or non-binary alternative to Latino or Latina.
Lawful permanent residency	A more stable status that allows immigrants to permanently reside in the United States and can be obtained through family members, employment or humanitarian avenues. Lawful permanent residents enjoy many rights and privileges including full constitutional due process rights.
Listening tours	A form of collaborative anthropological research that provides a way for people to learn about specific communities.
Mandatory arrest	This refers to any state law or police department policy that requires police officers to make an arrest when responding to a domestic violence/disturbance call when there is probable cause to believe any violence has occurred. Some local laws may require police officers to arrest both parties when unable to determine which party is the primary aggressor.
Misgendering	Intentionally or unintentionally referring to a person, relating to a person or using language to describe a person that doesn't align with their affirmed gender identity.
Naturalisation	An application process available to lawful permanent residents who have resided in the United States for five years and can demonstrate they are and have been a person of good moral character and support the principles of the US Constitution.
Nonimmigrant status	A temporary status usually tied to a specific purpose such as student, seasonal worker, highly skilled worker or visitor.
Operationalisation	How students measure a construct.
Protection order	An order issued by a court that protects a person (the alleged victim) by requiring another person (alleged perpetrator) to do or not do certain things. In domestic violence situations, the court often decides the specific content of the protection order based on the alleged perpetrator's risks and safety level of the alleged victim(s) and children.
Rape crisis centres (RCCs)	Organisations that exist solely in support of survivors of sexual violence. RCCs are a much-needed resource for all survivors but especially

	those who cannot afford mental health services or do not find mainstream services to be supportive or welcoming.
Rural	The exact definition of rural varies widely between groups, but generally indicates areas with comparatively lower population density.
Study circles	A group of individuals who meet regularly over a period of weeks or months to address a critical public issue in a democratic, collaborative way to combine dialogue, deliberation and problem–solving.
Survivor	This typically refers to someone who has been the victim of a crime and is now in the recovery process.
Title IX	Title IX of the Education Amendments of 1972 (Title IX) provides: '[n]o person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance'.
U nonimmigrant status (U visa)	Status for immigrant victims of certain enumerated crimes that have been, are currently being or will be helpful to the detection, investigation or prosecution of a crime.
Undocumented immigrant	An individual who either came to the United States without a visa or overstayed the time permitted on a valid visa.
Victim	Typically refers to someone who has recently been harmed, injured or killed as a result of a crime.

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Foreword

Walter S. DeKeseredy

In 1988, my close friend and colleague Martin D. Schwartz and I published a review essay in the journal *Social Justice* (15[3–4]) noting that only a few areas moved as far and fast as the violence against women movement. Back then, advances in the social scientific study of this harm were much faster than the vaunted leaps in some of the physical sciences. Fast-forwarding to this current era, I repeat this observation. Indeed, it is now a major challenge to keep up with the empirical and theoretical work on one of the world's most compelling social problems. That the field's leading periodical, *Violence Against Women: An International and Interdisciplinary Journal*, is published 16 times a year is an important statement on the amount of time, money and effort devoted around the world to enhancing a social scientific understanding of the myriad of ways in which women are targeted by intimate partners and strangers in face-to-face and digital contexts.

Still, until 2006, the urban-centric bias that plagued the study of most other types of social problems, including crimes of all sorts, was the overriding way of knowing found throughout the extant interdisciplinary literature on woman abuse. There was episodic concern with rural women's experiences with sexual assault, beatings, stalking and the like, but such victimisations were not of major interest until recently to social scientists, practitioners, politicians and the general public. Consider that it was only 20 years ago that an exhaustive bibliography on the occurrence of violence against women in nonmetropolitan places could be written on an index card.

I never thought there would be a scholarly anthology resembling this one when I launched my own sociological work on male-to-female separation/divorce sexual assault in rural southeast Ohio at the start of this millennium. Moreover, given heteronormativity's hegemonic firm grasp on the social sciences, I then also assumed that gender-based violence against lesbian, gay, bisexual, transgender and queer people in rural and remote areas would permanently receive selective inattention. Ziwei Qi, April N. Terry and Tamara J. Lynn proved me and others wrong, and they should be commended for helping to queer the study of gender-based violence in the heartland.

This path-breaking collection of readings reinforces my empirically informed claim that intimate violence in rural communities no longer stays at the margins of social scientific inquiry. Yet, the editors and contributors are fully aware that the study of gender-based brutality in these areas is an ongoing and ever-changing project. Not to worry, though, because this compilation and other collaborative efforts made by an international coalition of feminist scholars are clear indicators of continuous research. As well, the global perspective called for in Chapter 14 is found in the current literature and will become even stronger soon.

Turning again to Chapter 14, the editors, and rightfully so, state that '[u]rban-centric theories have their limitations in understanding rural crime and criminality'. They are, by no means, the first to make this observation, but their anthology is one of a rapidly growing body of scholarly works that compels rural criminologists to stretch their theoretical imaginations to examine the influence of patriarchy and gender. This volume makes explicit that it is impossible to develop a rich social scientific understanding of gender-based violence without meaningfully addressing the role of these two concepts.

I and fellow critical criminologist (and close friend) Elliott Currie repeatedly declare that one of the first steps towards solving the problems like those identified in this book is to create solidarity among various factions of the left. This book exemplifies theoretical solidarity in the sense that each unique chapter uses some variant of feminist thought as a framework for understanding gender-based violence. The next step, however, is to create strong political cohesion among a diverse range of feminists around the world so that we can produce useful answers to the question 'What is to be done about gender-based violence in rural communities?' As Australian feminist political economist Jacqui True reminds us in her 2012 book *The Political Economy of Violence Against Women*, the main, and probably only, point of our research should be to end this key source of much pain and suffering.

Understanding Rurality and Gender-based Violence

Ziwei Qi, April N. Terry and Tamara J. Lynn

Despite a globally increasing urban population (it is projected that 68 per cent of the world population will reside in urban areas by 2050), the world's total rural population has grown steadily since 1950 with differing levels of urbanisation by country (United Nations, 2018). Take the United States (US) as an example – while most of the US population resides within urban areas, most places are classified as rural (U.S. Census Bureau, 2020). An estimated 19.3 per cent of the US population resides in rural communities, comprising 97 per cent of the total land area (Ratcliffe et al, 2016); yet most criminological literature has focused on densely populated areas, assuming rural places are simply miniature versions of urban culture. Most seminal criminological theories paved their way in the field by utilising urban samples (Donnermeyer et al, 2013) – many times, targeting the most extreme depictions of urbanisation (such as overcrowding, social inequality and racial oppression) (see Davis, 2007; Cobbina et al, 2008). This book challenges the belief that findings from urban studies can be applied to rural places as there is a disregard for space, place and time.

Gender-based violence (GBV) is a form of violence that includes physical, sexual, verbal, emotional and psychological abuse, as well as threats, coercion, and economic and educational deprivation. This violence is directed at persons based on their biological sex or gender identity and can occur in both public and private aspects of one's life (Ott, 2021). GBV is the most pervasive, yet least recognised, international human rights violation that impacts every element of victims' lives (Johnson, 2010). This edited book recognises GBV as an umbrella term that encompasses the many types of direct and indirect abuses related to one's biological sex or gender identity. We also note that within this broader term, other conceptualisations of violence may be more appropriate and

descriptive. For example, intimate partner violence (IPV) is specific to those who have, or are currently, engaged in an intimate relationship. Chapters may reference terms further by highlighting spousal abuse or domestic violence. Violence against women may be used to specifically discuss violence endured by girls and women whereas GBV captures all persons victimised based on sex or gender. We want to honour the importance of using GBV to broadly speak about the many forms of GBV while allowing each contributing author to more narrowly define and describe a form of GBV. The Glossary provides definitions of terms referenced throughout this book.

In the current text, readers may notice both victim and survivor terminology throughout the chapters. Victim typically refers to someone who has recently been harmed, injured or killed as a result of a crime, such as sexual assault or domestic violence. It is also commonly used in the context of crime or criminal investigation, legal statutes or compensation in the criminal legal system. Survivor is typically used to refer to someone who has, or is, engaged in the recovery process. Survivor may also refer to the short-term and long-term impact of victimisation. In most circumstances, 'victim' is used as a legal definition, whereas 'survivor' emphasises the empowerment and resilience of victims.

GBV impacts people regardless of socioeconomic background, race, religion, sexuality and so forth, but research has documented girls and women are at greater risk than boys and men. Yet, boys and men, as well as sexual and gender minorities, also experience GBV (Ott, 2021). GBV knows no boundaries as victimisation occurs in urban, suburban, and rural and remote areas across the United States and around the world, although victims' experiences of violence differ geographically. Only recently has GBV research considered the unique characteristics of rural communities and victimisation, including support systems and responses to victims.

The term rural has been conceptualised differently, ranging from small villages and unincorporated townships to less densely populated locations (Weisheit and Donnermeyer, 2000). Basic perceptions of rural communities assume positive interactions between residents and a 'love thy neighbour as thyself' mindset. In these rural communities, acquaintanceships are dense and some community members (such as status worthy) live in a 'close-knit' atmosphere (Terry, 2020); yet, research has shown that rural communities operate differently than their urban neighbours with distinct and generally traditional values, norms and social cohesion. People, meanings, practices, and spaces and structures influence social and cultural ideals (Liepens, 2000) while operating under an 'everyone knows everyone's business' ideology (Edwards et al, 2015). Matters related to one's personal life, such as GBV, are often ignored, as neighbours live by an unspoken rule of staying out of others' personal business. Some tend to live by the idea that GBV does not happen in rural communities. Victims of GBV often hesitate to come forward for help

because everyone knows the perpetrator who may be well-respected in the community. If a victim does come forward for help, community members, including professionals, may resort to victim-blaming. Perpetrators of violence in rural and remote communities often take advantage of the idea that everyone knows everyone, creating an atmosphere where victims are under the continuous surveillance of the community (Little, 2017). Consequently, victims of GBV in rural and remote communities are likely to experience the violence for longer periods of time with increasing levels of violence compared to victims from urban communities (Strand and Storey, 2019).

Victims in rural and isolated areas often face unique and complex obstacles when leaving their abusers. For many victims of GBV, income insecurity and a lack of employment opportunities are the immediate and primary concerns when exiting their abusive relationships. Economic independence is often the primary goal and necessary for victims to be free from violence. Due to a lack of work eligibility, emotional readiness, compromised physical and mental health, or caretaking responsibilities, securing employment that provides sustainable wages can be a significant challenge. Without financial independence, escaping abuse is perilous and leaves many victims unable to disengage from abusive households, and so they are forced to return to their abusers. Therefore, it is crucial to provide adequate access to a full spectrum of resources and services for victims. Public services may not provide sufficient resources for victims (Peled and Krigel, 2016), and in rural areas, services are even more restricted (Edwards, 2015).

GBV has profound effects on victims in rural areas due to culturally constructed gender roles, the density of acquaintanceship, the stigma of abuse and poverty, a lack of access to housing and services, and other challenges. It is important to explore theories of violence in rural communities and provide policy recommendations to service providers. The current text is a new addition to understanding GBV in rural America. Issues surrounding GBV in rural communities have not been well studied due to a lack of accessible data and seminal mainstream criminological research has focused on densely populated areas. As an example, feminist criminology has helped advance the academic understanding of GBV, providing a critical framework for understanding patriarchy and gender-specific issues. Other concerns, such as the geopolitics and lack of services and legal support that tend to reinforce violence, victimisation and girls' delinquencies, are emerging issues in the field of rural justice. Researchers and practitioners are eager to understand the causes and provide effective policies to address the recurring problems.

Contributions of this book

Due to the ongoing transmission of values and beliefs that support GBV and lack of rural-specific literature, this book is timely and warranted and will

be among a limited number of texts on the topic. This text provides readers with operational definitions of rurality, costs of victimisation, unique GBV issues (such as perceptions of GBV, and prevention work with youth) in rural places, and implications for access to rural justice, including insights from rape crisis centres, non-profit organisations and barriers for LGBTQIA+ (Lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual/ally plus) communities. Chapter findings also provide global perspectives, highlighting how such issues and policies can be identified, analysed and addressed around the world.

In this edited book, contributors expand upon GBV mitigation in rural spaces by implementing interdisciplinary approaches to tackle unique issues of GBV. The text spans many academic disciplines, ranks and professional affiliations, to include student authors (undergraduate and graduate), both tenured and non-tenured professors, as well as community-based practitioners. Each chapter is organised as a research article emphasising both empirical research and theoretical conceptualisation of rurality and crime. The idea of combining a series of original research projects, focusing on theories, methods and policymaking, makes the book adaptable to the needs of a variety of readers. For example, in the current text, researchers utilised the United States Census data and the National Incident-Based Reporting System (NIBRS) to map the prevalence and incidence of IPV between rural and urban settings. Focus groups, in-depth interviews, mixed methodologies and participatory-based research are also a few examples of varying methodologies. Although the contributors primarily focus on GBV in rural America, the methodologies can be applied in all social scientific research on GBV, including urban areas and global issues. Readers should pay attention to the various datasets used in the current text, from the NIBRS produced by the Federal Bureau of Investigation and the National Crime Victimisation Survey produced by the Bureau of Justice Statistics in the United States. Databases also include more localised surveys and qualitative instruments used to shed light on the issues associated with GBV in rural communities.

An additional value of the edited book is its breadth of focus based on the sample demographic of age, as well as intended audiences. For instance, Terry et al discuss issues specific to youth in rural places. Jana's Campaign, a GBV prevention-based agency, focuses on the knowledge/perception of GBV from the viewpoint of middle- and high-school students. Bainter et al extend the perception of GBV into the college population. As a result, academic institutions and agencies working with all age groups will benefit from the current publication.

In addition to the breadth of the age groups, the edited book also includes research that emphasises crime data, critical issues that impact rural communities differently than urban, political influences, immigration

policy and implications – including resources for access to rural justice and media portrayals of the LGBTQIA+ community in rural America. We hope readers will find the text to be an excellent resource for topics on gender and crime, social justice, best practices in criminal justice, and interdisciplinary approaches to fighting GBV around the globe.

This is the first text, to our knowledge, that seeks an audience eager to read about both academic studies and practitioner-centred issues including social and legal implications for survivors and victim-services workers. In addition to empirically driven literature, this text includes theoretically guided and methodologically rigorous research, including specific policy analysis, that features pioneering practices in victim-services. The text is an ideal reader beyond classroom settings, suitable for all readers interested in GBV, rurality and best practices in victim-services.

Key themes of the book: rural realities and combating gender-based violence in the United States

In the current book, readers are exposed to various topics about GBV specific to rural places and the experiences and practices shaped and influenced by rurality. We demonstrate that rurality matters and it is imperative to conduct research on GBV from cultural, historical and socio-spatial perspectives. The nature of the book is descriptive, explanatory and educational. Individual chapters include evidence-based research from academic scholars and victim-centred groups working in prevention, intervention and advocacy. The current text comprises three parts focusing on the relationship between rurality and the many forms of GBV, critical issues of GBV in rural areas, and practices and solutions to end GBV in rural areas.

We highlight the book's major contributions, including concepts, methodological approaches and practical policy implications, for working with survivors of GBV. Each chapter demonstrates qualitative and/or quantitative analysis for a myriad of GBV-centric topics. The diversity of approaches allowed the chapters to apply mainstream concepts into the purview of rurally focused studies while also introducing phenomena unique to rural areas. The book intentionally focuses on not only research conducted by academics, but also showcases the rich field of work being facilitated by rural agencies working towards preventing, educating and responding to GBV.

Part I provides information on a range of efforts undertaken by previous scholars to measure 'ruralness' and the subsequent and unique (and often damaging) challenges that rural places can impose upon survivors of GBV. Criminological studies, among other disciplines, find significance in place, time and culture. Most scholars engaged in feminist work call for awareness of gender as an interconnected and necessary variable in all studies, in all

places and without exception. This book has intentionally met this demand. Specifically, Chapter 2 draws the reader's attention to the clear evidence that exists confirming high GBV prevalence in rural communities. In Chapter 2, the author expands the definition of rural beyond the usage commonly applied in other studies, and provides a comprehensive overview on the operationalisations of rurality used in criminological GBV policymaking and research.

The research on GBV in rural places demands greater attention to work towards the eradication of intimate partner abuse. To this end, Chapter 2 discusses commonly used measures of rurality while presenting a case study on intimate partner homicide to illustrate the utility of rural-based measures.

Chapter 3 explores the concept of gender blindness as a means for further understanding the active avoidance of gender as a topic of consideration when dealing with justice-involved girls. The authors of this chapter break down gender blindness as an ideology that discounts the effects of gender on lived experiences of system-involved girls that amplify further harm. Gender blindness frames the issue of GBV on a continuum, including covert cases that may not be acknowledged. Readers can explore practitioner-oriented suggestions that put gender-responsive and data-driven decisions at the forefront of the conversation when working with justice-involved girls.

To further explore information on GBV within youth populations Chapter 4 frames teen dating violence as a public health issue – a form of violence that results in adverse health outcomes in young adulthood. Through the work of Jana's Campaign, a national prevention education organisation with the mission of reducing gender and relationship violence, this chapter sheds light on prevention education services provided to middle- and high-school students. Chapter 4 describes the 'Raise Your Hand' activity facilitated with youth throughout Kansas, Nebraska and Colorado, with comparative findings between rurally located youth and their urban counterparts. Findings of this chapter provide further prevention education efforts for youth in schools and within their communities.

To this point, the contributions of Part I have included a focus on several ignored populations – at-risk girls and youth residing in rural places. The final chapter in Part I, Chapter 5, targets a sample of undergraduate students residing in a rural, Midwestern state. Under Title IX of the Education Amendments of 1972, institutions of higher education are required to respond to various forms of GBV. This guidance does not ensure students recognise GBV, which results in underreporting and subsequent long-term negative consequences for those involved. Assessing perceptions of interpersonal violence can provide guidance on programming initiatives. The chapter contributes to the broader conversation on effective programmes within institutions of higher education by expanding educational resources to proactively reduce GBV.

Part II identifies critical issues unique to victims of GBV in rural communities. Victims report significant barriers in accessing support and leaving their abuser due to issues related to isolation, victim–blaming, gender stereotypes and limited social support. In addition, victims often struggle to manoeuvre the geopolitics that reinforce victimisation. Consequently, incidents of GBV in rural areas often occur over a longer period and escalate into greater levels of violence than what occurs in urban areas. A broad range of policy changes are necessary to support victims of GBV ranging from education to crime prevention and improving less proactive efforts related to system responses. Chapters in this part utilise qualitative and quantitative methods to understand unique personal experiences of victims, differences in victimisation across rural and urban communities, ways rural communities respond to victims of sexual violence, and variances in media reporting of transgender victims of hate crimes. Each chapter ends with a discussion of the implications of these issues for victims, families and rural communities around the world. Information learned from these studies demonstrates a clear divide between rural and urban locales which is deserving of attention from scholars and policymakers.

Part II begins with an ethnographic study, situated in a rural community in the western United States, to understand barriers experienced by victims of GBV. Chapter 6 engages the reader in the lives of three victims who share their personal stories through photographs. The narratives that accompany their photos tell of isolation, lack of social support, limited resources and cultural influences that reinforce their victimisation. These issues are intensified for women of colour and different ethnicities. Chapter 6 ends with recommendations for structural and community-level social changes to improve the lives of victims of GBV in rural areas.

Chapter 7 presents findings from one of the first national-level studies to determine whether actual differences in victimisation occur in rural and urban areas. The study uses aggregate crime and United States Census Bureau data to compare incident level information about cases of GBV reported to law enforcement. The results reported in Chapter 7 indicate that victimisation in rural communities tends to include greater levels of violence and more often includes use of a firearm when compared to GBV in urban communities. Despite these differences, victims in rural areas are less likely to cooperate with criminal justice agencies to prosecute the perpetrator of violence. This hesitation of victims to hold their abuser accountable hints at the broader social, cultural and political nature of patriarchy in rural communities.

The two previously mentioned chapters have characterised GBV in rural communities, including personal experiences of victims, and the significance of victimisation. The remaining chapters in Part II address responses by social institutions – media and religion – towards victims of GBV. Through

a content analysis, Chapter 8 compares reports of violence occurring in rural and urban communities against transgender people. Themes arising from media reports include deadnaming, misgendering, victim-blaming and transphobic language. Media outlets from both urban and rural communities, however, often rely on information from official records or family members of the victims. Rural media are more likely to use reports compiled by the *Associated Press*. Consequently, the findings of Chapter 8 are not entirely conclusive of differences in reporting from rural and urban media outlets, supporting a narrative that lacks sensitivity towards victims of GBV.

Preceding chapters would indicate rural communities are not exempt from similar rates of GBV as their urban counterparts, including sexual violence. Metropolitan communities are different from their rural neighbours in some regards, including community accepted norms, values and cultural belief systems that tend to support firm patriarchal views. Rural citizens are generally proud of the religiosity that permeates all institutions and creates an entrenched insider network of other, usually Christian, patrons. Chapter 9 explores how rural communities respond to sexual violence, especially for young women living at the margins – generally belonging to families lacking a strong church presence. Findings from this chapter suggest many at-risk girls and women are ignored, or further pushed to the margins, when they disclose sexual violence. When communities do respond, there tends to be an overreliance on faith-based entities to provide treatment and intervention for survivors. Rural communities rely heavily upon their religious leaders to address all community strife, including sexualised violence, even when professional clinical services may exist. Chapter 9 ends with suggestions on how to effectively respond to disclosures of sexual violence even within communities that lean heavily upon their religious institutions. Ensuring affordable, safe and sufficient access to services for GBV victims in rural areas is crucial to their pathways of recovery and empowerment.

Part III focuses on access to rural justice and its related policies for service providers, local stakeholders and community members. The contributions of Part III include an introduction of the costs of GBV, the prevalence and needs of GBV victims in rural areas, the intersection of abuse, trauma and addiction, challenges of providing services during a global pandemic, and the impact of GBV in marginalised groups, such as immigrant women. These chapters primarily address the prevalence, incidence, costs and service needs of GBV victimisation in rural states across the United States. Despite the variations of geographical landscapes and sociocultural contexts, similarities include, but are not limited to, the lack of local resources and urgent service needs that address emotional and financial hardships. Specifically, the research includes discussions on the unique needs of GBV victims in rural areas when considering the intersectionality of rurality, socioeconomic inequality, substance use and a lack of local resources.

Chapter 10 provides an overview of GBV victimisation, using rural Kansas as a case study, focusing on the tangible and intangible costs associated with health, productivity, fear of crime and long-term trauma. The chapter explores the economic abuse in relationship violence by working with service providers (such as advocates and social workers). Studies show abusers tend to take away all individual autonomy from the victim. This includes, but is not limited to, making critical decisions, isolating both the social and financial networks of the victim, and requiring the victim to serve their material purposes by exchanging sexual favours. The chapter aims to recommend viable methods to service providers when assisting victims facing emotional and financial crises. Policy recommendations include prioritising research, including community outreach, and interdisciplinary collaboration to address state-wide challenges in access to service. Financial independence is crucial to the transitional recovery from abuse by victims. Victim-responsive approaches, such as trauma-informed practices, should be widely implemented in rural law enforcement and domestic violence-related laws.

Chapter 11 introduces the readers to the intersectional understanding of IPV, opioid use and barriers to care in rural Vermont. The authors conducted in-depth interviews with victims who experienced GBV and opioid addiction in rural Vermont and professionals working with these victims. The authors identify barriers to services that are common to other rural areas discussed in the literature. Geographical isolation and transportation barriers prohibit victims from seeking services. The lack of integrated and accessible services that address the trauma of abuse and substance use is evident in rural Vermont. Stigmas of abuse and addiction that are deeply entrenched in the rural communities also create additional barriers for victims seeking help. Barriers were exacerbated during the COVID-19 pandemic, which added additional strains for both the service providers and victims. The chapter concludes that integrated, accessible and affordable services that address abuse, trauma and addiction are crucial to rural Vermont communities. More so, the interviews establish that service providers should also prioritise their clients' safety, privacy and dignity, especially when victims experience shaming and minimisations from their families and communities.

Chapter 12 provides an in-depth look at rape crisis centres (RCCs) in the rural Midwest. The authors focus on the effects of austerity governance policies, or deep cuts to social programmes, that fall disproportionately on rural RCCs. These policies operate in such a way that leads to increased barriers for survivors accessing services in rural areas and further harm for survivors and the people who serve them. The study indicates rural RCCs experience a more significant impact by the financial crisis and staff shortages compared to non-rural RCCs. These issues exemplify how austerity governance policies fall disproportionately on services relied upon

by women and marginalised groups and reinscribe harm, thereby constituting another form of gendered violence.

Chapter 13 discusses the legal struggles immigrant victims face in the United States. Immigrant victims (who have not officially obtained US citizenship) are subject to unique social, legal and economic abuse compared to victims with US citizenship. In addition to the everyday barriers and challenges GBV victims face in rural areas, immigrant victims also commonly experience language barriers and fear of deportation. The threat of deportation is a powerful deterrent for immigrants to report their abusers, especially when children are involved. Often, abusers use immigration status to threaten deportation and warn that the abused and their children could be deported if victims decide to report. GBV exists in all social and economic classes and financial hardship can affect all women's experiences of violence. Some marriages and relationships involve uneven social and economic resources that make foreign-born women especially vulnerable in their intimate relationships. The researchers addressed the importance of exploring and implementing humanitarian-based immigration relief for GBV victims and proposed improvements to remedy the inequities non-citizens experience in rural areas. Practitioners and policymakers should also address effective strategies to enhance victim safety and intervention programmes to prevent the cycle of violence.

How to use the book: scholars

When navigating the current book, scholars can rely on several contributions that will help them begin, continue or advance their own scholarly agenda. Scholars not currently engaged in rural research can gain introductory knowledge regarding the vast array of rural territory in the United States as well as critically analyse multiple matrices used to define and/or label locations as rural. This information will challenge scholars to reconsider their urban-based research, to explore the unique aspects of rural locations, extending beyond the work of GBV.

In addition to providing definitions for terms such as rurality, scholars are exposed to new and expanded concepts and phenomenology. Scholars can expect to connect with and rediscover a variety of theoretical approaches throughout each chapter. Specifically, all chapters include varying degrees of discussion on feminist criminology – a theoretical foundation used to advance the understanding of GBV and, more broadly, patriarchy. Chapters also include a plethora of methodological approaches. Scholars can refer to individual chapters to explore research more deeply utilising qualitative, quantitative and mixed methods. Such breadth of methodologies is helpful not only for rural-based scholars, but also other social scientists. Scholars are encouraged to navigate book chapters using a cross-disciplinary perspective – one that seeks to critically extend into different academic fields. As such,

social scientists can use book chapters to see how they can apply their research beyond academia and academic journals and conferences, and into practitioner-centred work.

How to use the book: practitioners

Victims of GBV in rural communities encounter many barriers in formally reporting and then accessing services. Barriers result from a combination of limited or inaccessible services and a culture that reinforces victimisation. While these barriers and cultural elements may or may not be the fault of practitioners, recognising and understanding the dynamics of various forms of GBV in rural communities is an important step in bringing about change.

Practitioners represent a broad range of professionals, including those from the criminal justice system (such as law enforcement, probation and parole and courts), city council members, clergy, educators and GBV service providers. Regardless of profession, all practitioners can use this book to increase awareness of GBV, including types of abuse, and strategically implement community coordinated efforts to address the victims' needs. Practitioners can seek partnerships with scholars to facilitate research in their communities to determine rates and costs of GBV to then lead change in prevention and intervention work. With increased knowledge, policy changes and training can become priorities. In addition, communities can apply for grants to increase GBV programming as well as reduce barriers to seeking services.

How to use the book: international readers

One shortcoming of Western methodology is a lack of culturally specific approaches to inquiring about human behaviours and social interactions. This may also reflect on the popularity of quantitative research that is over-reliant upon aggregate data and random controlled trial experimental design. In some circumstances, quantitative methods may not be the most suitable to understand the core of human interactions – experiences and stories should be told that cannot be quantified. Instead, scholars in this text promote diverse and inclusive approaches to incorporate a variety of ways of knowing that are often specific to the sociocultural context of the people in the study; hence, decolonising the ways of thinking and inquiry and establishing cultural integrity in social scientific research.

In the current text, many authors utilised mixed methodologies that are culturally specific, place-centred and trauma-informed (for example, participatory action research and storytelling). These methodologies are primarily adapted from the indigenous tradition on how to understand the lived experiences of individuals, groups and society – a framework aligned

with feminist methodology. Feminist criminology and methodology are key themes of the current book. This theoretical framework encourages researchers to reimagine the ways of exploring the prevalence, incidences, experiences and policy recommendations that are place-centred.

International readers may benefit from the book by examining, utilising and adapting these research methodologies and data collection techniques. Because the research included in the current text takes place in the United States, the authors acknowledge the limitations and address how researchers outside the United States may benefit. Chapters including community-level partnerships and localised phenomena may enlighten readers and researchers and promote collaboration with their community partners and constituents. At the core of the current text, we promote an interdisciplinary approach to understanding the most challenging and dynamic social interactions – crime and deviance, through a culturally specific lens for rural US locations.

References

Cobbina, J., Miller, J. and Brunson, R. (2008) 'Gender, neighborhood danger and risk avoidance strategies among urban African American youth', *Criminology*, 46(3): 501–538.

Davis, C.P. (2007) 'At-risk girls and delinquency: Career pathways', *Crime & Delinquency*, 53(3): 408–435.

Donnermeyer, J., Scott, J. and Barclay, E. (2013) 'How rural criminology informs critical thinking in criminology', *International Journal for Crime, Justice and Social Democracy*, 2(3): 69–91. doi: 10.5204/ijcjsd.v2i3.122

Edwards, K.M. (2015) 'Intimate partner violence and the rural–urban–suburban divide: Myth or reality? A critical review of the literature', *Trauma, Violence, & Abuse*, 16(3): 359–373. doi: 10.1177/1524838014557289.

Edwards, K.M., Rodenhizer-Stämpfli, K.A. and Eckstein, R.P. (2015) 'Bystander action in situations of dating and sexual aggression: A mixed methodological study of high school youth', *Journal of Youth and Adolescence*, 44(12): 2321–2336. doi:10.1007/s10964-015-0307-z

Johnson, M.P. (2010) *A Typology of Domestic Violence: Intimate Terrorism, Violent Resistance, and Situational Couple Violence*, Lebanon, New Hampshire: University Press of New England.

Liepens, R. (2000) 'New energies for an old idea: Reworking approaches to "community" in contemporary rural studies', *Journal of Rural Studies*, 16(1): 23–35.

Little, J. (2017) 'Understanding domestic violence in rural spaces: A research agenda', *Progress in Human Geography*, 41(4): 472–488.

Ott, M. (2021) 'What does that mean? Gender-based violence' [online] Available from: https://tinyurl.com/2dytxkfr [Accessed 17 February 2021].

Peled, E. and Krigel, K. (2016) 'The path to economic independence among survivors of intimate partner violence: A critical review of the literature and courses for action', *Aggression and Violent Behavior*, 31: 127–135. doi:10.1016/j.avb.2016.08.005

Ratcliffe, M., Burd, C., Holder, K. and Fields, A. (2016) 'Defining rural at the United States Census Bureau. U. S. Census Bureau' [online] Available from: https://www.census.gov/content/dam/Census/library/publications/2016/acs/acsgeo-1.pdf [Accessed 24 March 2022].

Strand, S.J.M. and Storey, J.E. (2019) 'Intimate partner violence in urban, rural, and remote areas: An investigation of offense severity and risk factors', *Violence Against Women*, 25(2): 188–207.

Terry, A.N. (2020) 'The architecture of rural life: The dangers of dense collective efficacy for at-risk girls', *Rural Sociology*, 85(3): 780–805.

United Nations (2018) '68% of the world population projected to live in urban areas by 2050, says UN' [online] Available from: https://www.un.org/development/desa/en/news/population/2018-revision-of-world-urbanization-prospects.html [Accessed 20 October 2022].

U.S. Census Bureau (2020) 'Rural America' [online] Available from: https://gis-portal.data.census.gov/arcgis/apps/MapSeries/index.html?appid=7a41374f6b03456e9d138cb014711e01 [Accessed 20 October 2022].

Weisheit, R.A. and Donnermeyer, J.F. (2000) 'Change and continuity in crime in rural America', *Criminal Justice*, 1: 309–357.

PART I

Rurality and Gender–based Violence

What is 'Rural', Anyway?

Millan Alexander AbiNader

Introduction

Studies have consistently shown that gender-based violence (GBV) manifests in unique, and often more severe, patterns in rural United States communities. Intimate partner violence (IPV) in rural communities has been shown to be more frequent, severe and lethal than in urban communities (Bloom et al, 2014; Edwards, 2015; Reckdenwald et al, 2018; DuBois et al, 2019). Gallup-Black (2005), comparing trends in homicide rates from 1980 to 1999, found that family and intimate partner homicide (IPH) rates increased in rural counties, while IPH decreased in semi-urban and urban communities and familial and non-domestic homicides decreased in all community types. In the IPV context, rural survivors report higher levels of sexual abuse compared to physical abuse than urban survivors (Edwards, 2015).

Studies suggest that rural communities experience higher rates of general sexual violence than urban communities; the most recent federal data reports a rate of 41.1 rape victims per 100,000 inhabitants in nonmetropolitan counties compared to 34.2 in metropolitan counties (Federal Bureau of Investigation, 2019). There is a dearth of research on commercial sexual exploitation in rural areas (Aguirre et al, 2017). One study of practitioners who worked with at-risk youth and/or in the criminal justice system in the southern United States found that almost half of all practitioners had worked with a child who had experienced sexual exploitation or trafficking (Cole and Sprang, 2015). Robinson and Ryder (2014) studied teen relational violence in ruralities from both a psychodynamic, sociological and critical perspective. Utilising focus groups in Cape Cod, Massachusetts – a region characterised by rural and small-town economies – they found youth perceptions of violence being everywhere (for example, home, school and social media). Relational

violence was a 'normal' part of their lives, demonstrating that rural youth relational violence is a public health issue (Robinson and Ryder, 2014).

There is clear evidence of a high GBV prevalence in rural communities, and more research is needed to examine rural patterns of GBV and to test rural–specific GBV prevention interventions. However, before examining these dynamics, scholars and practitioners must determine what rurality is and how to operationalise it. This chapter will discuss commonly used measures of rurality, present a case example to illustrate the utility of continuous measures of rurality, and conclude with a discussion of future directions. The discussion will focus on the US context, recognising that definitions and operationalisations of rurality may differ by sociolinguistic and cultural context (Gkartzios et al, 2020).

What is rural?

Although the definition of rural is central to examining rural GBV, how it should be operationalised continues to be debated among scholars. When place is considered in criminological studies, it is often treated as discrete categories: rural, suburban or urban (Weisheit and Donnermeyer, 2000; Hart et al, 2005; DeKeseredy et al, 2007). Rural areas are frequently defined as unidimensional areas that experience low crime rates and high community cohesion, which some scholars call 'the myth of rural homogeneity' (Donnermeyer and DeKeseredy, 2014: 7). Scholars argue that the treatment of place as homogenous is particularly problematic in rural spaces where the stereotype of 'rural tranquillity' has translated to a lack of attention to rural crime (particularly GBV) in scholarship, community-based intervention development and policy interventions (Donnermeyer and DeKeseredy, 2014). When place categories are treated discretely, it can obscure intragroup differences which may account for a variety of characteristics that likely contribute to violence perpetration and effective prevention and intervention (Weisheit and Donnermeyer, 2000; Donnermeyer and DeKeseredy, 2014). Further, studies often fail to operationalise their definitions of rural, suburban and urban, limiting comparisons between studies and contributing to the high variability in definitions of rurality in the literature (Hart et al, 2005; Nelson et al, 2021).

Common operationalisations of rurality in the United States

Operationalisations of rurality used in criminological GBV policymaking and research tend to be discrete, categorical measurements organised at the county level. The two most common measures, Metropolitan Statistical Areas (MSA) and the Rural Urban Continuum Codes (RUCC) are defined by population

Table 2.1: Operationalisation of Metropolitan Statistical Areas and Rural Urban Continuum Codes

Measurement	County type/code	Operationalisation
MSA[1]	Metropolitan	At least one city of 50,000+ residents, at least 25% of outlying communities commute into the city
	Micropolitan	At least one city of 10,000–49,999 residents, at least 25% of outlying communities commute into the city
	Nonmetropolitan	Counties that do not meet the above two operationalisations
RUCC[2]	1	A metropolitan county with at least 1 million residents in its metropolitan area
	2	A metropolitan county with 250,000–999,999 residents in its metropolitan area
	3	A metropolitan county with less than 250,000 residents in its metropolitan area
	4	A nonmetropolitan county[3] with at least one city of 20,000 residents of and the county is adjacent to a metropolitan area
	5	A nonmetropolitan county with at least one city of 20,000 residents of and the county is not adjacent to a metropolitan area
	6	A nonmetropolitan county with at least one city of 2,500–19,999 residents of and the county is adjacent to a metropolitan area
	7	A nonmetropolitan county with at least one city of 2,500–19,999 residents of and the county is not adjacent to a metropolitan area
	8	A nonmetropolitan county that is either completely rural or with no town greater than 2,500 residents and the county is adjacent to a metropolitan area
	9	A nonmetropolitan county that is either completely rural or with no town greater than 2,500 residents and the county is not adjacent to a metropolitan area

Notes: [1] (Office of Management and Budget, 2010; Wilson et al, 2012; United States Census Bureau, 2020). [2] (United States Department of Agriculture, 2020). [3] For the RUCC schema, codes 4–7 may include micropolitan counties.

thresholds and levels of commuting to urban centres (Wilson et al, 2012; United States Department of Agriculture, 2020; Nelson et al, 2021). The operationalisations of these terms are defined in Table 2.1. MSAs were first used in the mid–20th century, and are measured at three levels: metropolitan,

micropolitan and nonmetropolitan. Typically, studies using MSA as an operationalisation for place use a dichotomous variable: MSA and non–MSA. At the time of writing, the MSA definition is under review for the 2030 Census by the Office of Management and Budget to increase the urban centre's population threshold to 100,000 residents (Office of Management and Budget, 2010). The RUCC categories build on the MSAs, defining not only urban environments, but also non–urban ones. There are nine RUCC categories ranging from 1, highly urban, to 9, highly rural (United States Department of Agriculture, 2020). Rural counties are typically defined as RUCC 7, 8 and 9 (United States Department of Agriculture, 2020). Both MSA and RUCC definitions and categorisations are reviewed for updates every ten years and are publicly available from the United States Census Bureau and the United States Department of Agriculture.

Discrete definitions of place obscure intragroup differences that may account for a variety of characteristics that likely contribute to GBV perpetration and effective prevention and intervention. Operationalising rurality as meeting a particular threshold can result in labelling areas as urban that might otherwise be considered rural (DuBois et al, 2019). For example, most areas with the highest yields of agriculture products in the United States are considered to be in MSAs (and they are categorised as metropolitan or micropolitan areas) even though most people would consider farmland to be inherently rural (DuBois et al, 2019). Critics of discrete operationalisations also note that the original purpose of these codes was to be able to make comparisons between cities rather than measure differences between urban and non–urban spaces, and to use them to do so may be inappropriate (Bloom et al, 2014; DuBois et al, 2019).

Continuous measures of rurality are also widely publicly available. The most frequently used are measures of population density, such as that used by the United States Census Bureau at the town- and census-tract levels. One can use the average population density of a given area or the percentage of the population living in low–density areas (United States Census Bureau, 2010). Percentage of the population that commutes to an MSA, used to determine categories in MSA and RUCC, can also be used as a continuous variable. Scholars may also consider Census data that describe the industries in which a community is involved, counting industries such as farming, fishing or logging as rural work; or other factors related to employment, such as the percentage of self–employment (Nelson et al, 2021).

Remote sensing, which uses satellites to map and categorise the earth's surface, permits scholars to measure percentage land use (such as forest, pavement, farmland), which can then be transformed into a continuous variable. Remote sensing data is constantly emerging and is available for public use from state governments and the United States Geological Survey. Continuous measures of rurality have been used less frequently in GBV

research, despite being equally as accessible as the continuous measures. When continuous measures are used, studies often create composite scales of several continuous variables using techniques like factor analysis (Beynon et al, 2016; Zhao et al, 2019; Nelson et al, 2021). Rural scholars recommend using a combination of factors to define rurality such as population density, land use, commuting rates and/or population thresholds to best account for the heterogeneity among rural spaces (Ratcliffe et al, 2016; DuBois et al, 2019; Nelson et al, 2021). It is important to note that these quantitative measures may differ from cultural conceptions of rural, small towns and urban centres. Few studies to date have attempted to quantify more qualitative understandings of rural, such as one's experience of the natural environment, and more work is needed to determine how to measure these more subjective understandings of place.

Intimate partner homicide in Massachusetts: finding the rural in an urban state

Using the discrete definitions of rural, no part of Massachusetts is categorised as rural by the federal government. The state is made up of MSAs and highly connected adjacent counties. Despite this categorisation, several localities in Massachusetts may be considered rural at a more local and nuanced level of measurement. Western Massachusetts may seem particularly rural; consisting of the farmland, forests and small towns that make up the enormously popular Berkshires. Areas of Cape Cod and central Massachusetts similarly contain networks of small towns and agricultural or open land. Massachusetts therefore presents an opportunity to see if continuous measurements of rurality allow one to detect differences in place while predicting a GBV phenomenon, here, IPH rate.

This study

In order to examine how rurality and other community factors affect IPH rates, this study utilised homicide data from the Massachusetts Department of Public Health (DPH) in combination with United States Census data. The Massachusetts DPH dataset was compiled using state death certificates of 219 IPH and familial homicide victims from 2005 to 2014 (Sabri, 2018). The DPH dataset was used to tabulate the number of IPH in each of the 351 towns in Massachusetts in each year between 2005 and 2014 (total IPH n= 151). The victim–offender relationship was determined by DPH personnel through newspaper articles and records kept by the state coalition to end IPV and included over 70 relationship types (Jane Doe, Inc.; Dang, 2017). Using the relationship types, IPH was defined as: victims killed by a current or former intimate partner; victims killed by more casual intimate partners

(on again off again partner); or victims killed by someone hired or coerced by a current or former intimate partner. Victims with other victim–offender relationships (such as brother) were dropped. As IPH is a rare event, the ten years of IPH data were pooled to increase variation in the data and increase the likelihood of model convergence (Gillespie and Reckdenwald, 2017). The IPH rate was calculated by offsetting the total count of IPH over the ten years by the sum of the annual population of residents at risk (15 years old and older) between 2005 and 2014 (Osgood, 2000; Bridges et al, 2008; Gillespie and Reckdenwald, 2017).

United States Census data were used to describe the towns' characteristics (Table 2.2). As the American Community Survey (ACS) estimates were not collected until 2009, data for the towns between 2005 and 2009 used 2000 Census estimates, and the 2010 to 2014 estimates used the annual ACS estimates. Two continuous variables were used to measure rurality: percentage of the town's population considered rural, and the percentage of the town's labour force engaged in rural work as a proxy measure for land use. Recent remote sensing land-use data was not available at the time of this study. Variables related to poverty and gender equality, commonly used to predict IPH rates, were included as controls. The poverty-related measures, unemployment and the percentage of households receiving public assistance, were consistently operationalised across the study time. The gender equality measures, the ratio of female to male educational achievement and employment, varied slightly in their operationalisation (see Table 2.2). However, because the gender equality characteristics were operationalised as the relative ratios of women to men in the same year (comparing the same age groups in the same year), it is likely that these ratios can be examined across years with little error, although it was a limitation in the data. The average of each town-level characteristic was taken across the study period to create a single cross-sectional estimate for each characteristic to mirror the ten-year IPH rate estimate. These averages were then merged to the IPH dataset by town.

Analysis plan

The data were analysed in SAS 9.4 to estimate IPH rate. Poisson regression was used to handle the skewed distribution of the data due to the high number of zeros and the heterogeneity in the error due to varying population sizes (Osgood, 2000). A –2log likelihood comparison test indicated that a Poisson model estimated the IPH rate better than a negative binomial model ($\chi^2(1)=$ 0, p<0.05), which can similarly be used to model low-base rate outcomes (Osgood, 2000). In the Poisson model, the count of the outcome (number of IPH) was offset by the natural log of the risk population (residents older than 15) for each town to estimate IPH rate (Osgood, 2000).

Table 2.2: Operationalisation of town-level parameters

Social construct	Parameter	Operationalisation	Source
Rural	Percentage rural population	Percentage of people living in areas with less than 500 people per square mile	2000 and 2010 United States Census
	Percentage rural work	Percentage of people working in agriculture, forestry, fishing, hunting or mining	2000 US Census and 2010–2014 ACS five-year estimates[1]
Poverty	Unemployment rate	Percentage of people over 16 that were unemployed	2000 US Census and 2010–2014 ACS five-year estimates
	Percentage of households receiving public assistance	Percentage of households with public assistance income	2000 US Census and 2010–2014 ACS five-year estimates
Gender equality	Education ratio	Percentage of women with a post-secondary education compared to men. Census: 18 and older ACS: 25 and older	2000 US Census and 2010–2014 ACS five-year estimates
	Employment ratio	The percentage of women employed compared to men. Census: 16 and older ACS: ages 25 to 64	2000 US Census and 2010–2014 ACS five-year estimates

Findings

Descriptive statistics of the town characteristics for the state are displayed in Table 2.3. The mean IPH rate for the state is 0.23 IPH per one million persons among residents older than 15. Of towns that experienced IPH, the counts ranged from one IPH (66 towns) to 16 IPH (Boston). Most towns did not experience IPH during the study period (74.93 per cent).

A Poisson model was used to regress the town-level factors on IPH rate (Table 2.4). Two characteristics reached statistical significance: percentage rural population and the percentage of households receiving public assistance. A 1 per cent increase in rurality translated to a 1.38 per cent increase in the IPH rate (IRR=1.01, p=0.02) and a 1 per cent increase in the percentage of households receiving public assistance translated to a 21.81 per cent increase in IPH rate (IRR=1.22, p=0.01). Rural work, unemployment rate, education ratio and employment ratio were not significantly related to IPH rate.

Table 2.3: Descriptive statistics

Parameter	% (n)/µ (sd) n=351
IPH rate	0.23 (0.65)
IPH presence/absence	
Towns with no IPH (%)	74.93 (263)
Towns with ≥1 IPH (%)	25.07 (88)
Rural population (%)	35.70 (38.73)
Rural work (%)	1.03 (1.36)
Unemployment rate	4.92 (1.62)
Households receiving public assistance	1.83 (1.32)
Education ratio	1.03 (0.23)
Employment ratio	0.97 (.06)

Table 2.4: Poisson regression model statistics

Parameter	Incident rate ratio (IRR)	95% confidence interval (CI)	p-value
Rural population (%)	1.01	1.00, 1.03	0.02
Rural work (%)	0.71	0.45, 1.13	0.15
Unemployment rate	0.99	0.83, 1.19	0.89
Households receiving public assistance (%)	1.22	1.05, 1.41	0.01
Education ratio	0.61	0.06, 5.83	0.66
Employment ratio	3.94	0.02, 808.73	0.61

Discussion of case study findings

As this case study demonstrates, even in states considered to be urban and semi-urban based on categorical definitions, rurality matters and how one defines rurality is of vital importance. One of the continuous measures used here, percentage of the town's population living in low-density areas, was shown to be positively and significantly associated with IPH rate. This suggests that measuring rurality in more diverse and continuous methods than those typically used may be important for predicting crimes like homicide, as has been supported elsewhere (Ratcliffe et al, 2016; DuBois et al, 2019). A 10 per cent increase in the percentage of a town's rural population was associated with a 13.70 percentage increase in the IPH rate. Although a small effect size, this finding is supported by research that has demonstrated that

rural IPV is more severe, frequent and lethal than urban IPV (Gallup-Black, 2005; Jennings and Piquero, 2008; Edwards, 2015). Scholars have offered various explanations for this trend, including: limited access to services; normalisation of IPV in rural culture; increased access to firearms; and community cohesion limiting access to support due to cultural and practical concerns about privacy (Peek-Asa et al, 2011; Banyard, 2013; Rennison et al, 2013; Sandberg, 2013; Donnermeyer and DeKeseredy, 2014; Edwards and Neal, 2015). The percentage of the population receiving public assistance also had a strong relationship with IPH rate; a relationship that has been established in the literature and discussed at length elsewhere (see Dugan et al, 2003; Gillespie and Reckdenwald, 2017; AbiNader, 2020).

While offering an important contribution to the discussion of rural operationalisation, this study is not without limitations. To model IPH rates, it was necessary to pool data across ten years (Gillespie and Reckdenwald, 2017). The averaging of community characteristics across time may have introduced bias into the model. The differences in how the gender equality variables were measured between the Census and the ACS is a limitation. The operationalisation of relative gender status rather than the rate of one gender's achievement may have minimised this issue; however, consistent measurement would be preferred. The averaging of community characteristics across time may have additionally obscured secular trends or significant community events (such as the 2008 recession). Until other statistical methods are developed that can better model phenomena with low base rates, the limitations related to pooling data will persist when modelling IPH. Future studies could model IPH rate at a higher level, such as at county level, to attempt to raise the base rate by pooling town/city data, or could study more than one state in order to increase the number of observations.

Future directions for operationalising rurality

As the case study illustrates, not only does rurality matter, but also how one operationalises rurality is of vital importance. The impact of rurality on IPH in an 'urban' state is critical to note, as the categorical definitions of rurality limit these communities' access to policies and programmes – notably grant opportunities – that could improve survivor wellbeing and perpetrator accountability. A primary recommendation for future researchers is to clearly state their operationalisation of rurality and to acknowledge the limitations of their definitions in their discussion. For example, while rural work can be used as a proxy measure for land use, remote sensing land-use data could add more detail to the measure – particularly for communities in which the lack of access to transportation and good roads may be a barrier to seeking services (Peek-Asa et al, 2011).

Future studies should measure rurality using multiple, continuous variables rather than a single discrete variable to allow for a more accurate differentiation between rural and urban spaces, to reduce overestimation of urban spaces, and to offer nuanced measurements attuned to heterogeneity of place (DuBois et al, 2019; Nelson et al, 2021). Rural measures used to model crime rates should be implemented using data from states with a variety of rural and urban communities to test the utility of such measures. Future studies should consider additional potential measures that could reflect factors believed to affect rural IPV perpetration, such as variations in employment (Donnermeyer and DeKeseredy, 2014). In Donnermeyer and DeKeseredy's (2014) work on rural IPV, they posit that in rural communities, changes to male economic opportunities (such as decreased family farming leading to underemployment) and community support of traditional gender norms (men as breadwinners and women as homemakers) contribute to increased IPV rates (DeKeseredy et al, 2007; Donnermeyer and DeKeseredy, 2014). Community poverty might be better modelled as changes in a community's economic opportunity, particularly given the changing landscape of the rural economy in recent years (Donnermeyer and DeKeseredy, 2014; Morin, 2016; Porter, 2018); data that could be sourced from newspaper articles or labour data. To measure the support of traditional gender norms, scholars could include attitudes towards GBV scales and gender norm scales in surveys. Research additionally shows that rural areas have higher levels of underemployment than urban areas, which may better model variation in rural income poverty (Hart et al, 2005). Empirical comparative work examining the predictive strength of discrete and continuous measures of rurality should be undertaken.

When considering GBV incidence, causation and intervention, scholars must attend to place. Decades of research in rural communities support the use of nuanced, continuous operationalisations of place (see DuBois et al, 2019; Nelson et al, 2021); however, in the United States, policy decisions and allocations of resources are based on the categorical definitions of place. Scholars must account for this discord when making policy and practice recommendations. Rural researchers can also advocate for changes in federal definitions of rural places to better reflect the heterogeneity of communities and implement interventions that meet local needs. At a minimum, GBV scholars must consider place in their research by clearly describing how rurality was operationalised and by reporting place's effect on GBV.

References

AbiNader, M.A. (2020) 'Correlates of intimate partner homicide in the rural United States: Findings from a national sample of rural counties, 2009–2016', *Homicide Studies*, 24(4): 353–376.

Aguirre, R., Harris, K., Hilgenberg, M. R., Soper, M. and Bowers, P. H. (2017) 'Sex trafficking and rural communities: A review of the literature', *Contemporary Rural Social Work Journal*, 9(1): 13.

Banyard, V.L. (2013) 'Go big or go home: Reaching for a more integrated view of violence prevention', *Psychology of Violence*, 3(2): 115–120.

Beynon, M.J., Crawley, A. and Munday, M. (2016) 'Measuring and understanding the differences between urban and rural areas', *Environment and Planning B: Planning and Design*, 43(6): 1136–1154.

Bloom, T.L., Glass, N.E., Case, J., Wright, C., Nolte, K. and Parsons, L. (2014) 'Feasibility of an online safety planning intervention for rural and urban pregnant abused women', *Nursing Research*, 63(4): 243–251.

Bridges, S.F., Tatum, K.M. and Kunselman, J.C. (2008) 'Domestic violence statutes and rates of intimate partner and family homicide: A research note', *Criminal Justice Policy Review*, 19(1): 117–130.

Cole, J. and Sprang, G. (2015) "Sex trafficking of minors in metropolitan, micropolitan, and rural communities', *Child Abuse & Neglect*, 40: 113–123.

Dang, Q. (2017) *Conversation with Jane Doe, Inc.*, 10 February.

DeKeseredy, W., Donnermeyer, J.F., Schwartz, M.D. and Tunnel, K.D. (2007) 'Thinking critically about rural gender relations: Toward a rural masculinity crisis/male peer support model of separation/divorce sexual assault', *Critical Criminology*, 15(4): 295–311.

Donnermeyer, J.F. and DeKeseredy, W.S. (2014) *Rural Criminology: New Directions in Critical Criminology*, New York: Routledge.

DuBois, K.O., Rennison, C.M. and DeKeseredy, W.S. (2019) 'Intimate partner violence in small towns, dispersed rural areas, and other locations: Estimates using a reconception of settlement type', *Rural Sociology*, 84(4): 826–852.

Dugan, L., Nagin, D.S. and Rosenfeld, R. (2003) 'Exposure reduction or retaliation? The effects of domestic violence resources on intimate-partner homicide', *Law & Society Review*, 37(1): 169–198.

Edwards, K.M. (2015) 'Intimate partner violence and the rural–urban–suburban divide: Myth or reality? A critical review of the literature', *Trauma, Violence, and Abuse*, 16(3): 359–373.

Edwards, K.M. and Neal, A.M. (2015) 'Intimate partner violence among sexual minority populations: A critical review of the literature and agenda for future research', *Psychology of Violence*, 5(2): 112–121.

Federal Bureau of Investigation (2019) *Table 16: Rate: Number of Crimes per 100,000 Inhabitants* [table] [online] Available from: https://ucr.fbi.gov/ crime-in-the-u.s/2019/ crime-in-the-United States-2019/topic-pages/ tables/table-16 [Accessed 20 July 2021].

Gallup-Black, A. (2005) 'Twenty years of rural and urban trends in family and intimate partner homicide: Does place matter?', *Homicide Studies*, 9(2): 149–173.

Gillespie, L.K. and Reckdenwald, A. (2017) 'Gender equality, place, and female-victim intimate partner homicide: A county-level analysis in North Carolina', *Feminist Criminology*, 12(2): 171–191.

Gkartzios, M., Toishi, N. and Woods, M. (2020) 'The language of rural: Reflections towards an inclusive rural social science', *Journal of Rural Studies*, 78: 325–332.

Hart, L.G., Larson, E.H. and Lishner, D.M. (2005) 'Rural definitions for health policy and research', *American Journal of Public Health*, 95(7): 1149–1155.

Jennings, W.G. and Piquero, A.R. (2008) 'Trajectories of non-intimate partner and intimate partner homicides, 1980–1999: The importance of rurality', *Journal of Criminal Justice*, 36(5): 435–443.

Morin, R. (2016) 'Behind Trump's win in rural white America' [online] Available from: https://www.pewresearch.org/fact-tank/2016/11/17/behind-trumps-win-in-rural-white-america-women-joined-men-in-backing-him/ [Accessed 5 April 2019].

Nelson, K.S., Nguyen, T.D., Brownstein, N.A., Garcia, D., Walker, H.C., Watson, J.T. et al (2021) 'Definitions, measures, and uses of rurality: A systematic review of the empirical and quantitative literature', *Journal of Rural Studies*, 82: 351–365.

Office of Management and Budget (2010) 'Office of Management and Budget 2010 standards for delineating metropolitan and micropolitan statistical areas', *Federal Register*, 75(123): 37246–37252 [online] Available from: www.whitehouse.gov/omb/fedreg/ [Accessed 26 July 2021].

Osgood, D.W. (2000) 'Poisson-based regression analysis of aggregate crime rates', *Journal of Quantitative Criminology*, 16(1): 21–43.

Peek-Asa, C., Wallis, A., Harland, K., Bever, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749. doi: 10.1089/jwh.2011.2891

Porter, E. (2018) 'The hard truths of trying to "save" the rural economy', *The New York Times*, 14 December.

Ratcliffe, M., Burd, C., Holder, K. and Fields, A. (2016) *Defining Rural at the United States Census Bureau: American Community Survey and Geography Brief*, Washington, DC: United States Census Bureau.

Reckdenwald, A., Yohros, A. and Szalewski, A. (2018) 'Health care professionals, rurality, and intimate femicide', *Homicide Studies*, 22(2): 161–187.

Rennison, C.M., Dragiewicz, M. and DeKeseredy, W.S. (2013) 'Context matters: Violence against women and reporting to police in rural, suburban and urban areas', *American Journal of Criminal Justice*, 38(1): 141–159.

Robinson, R.A. and Ryder, J.A. (2014) '"Constant violence from everywhere": Psychodynamics of power and abuse amongst rural and small-town youth', *Critical Criminology*, 22(4): 545–560.

Sabri, B. (2018) *Massachusetts Department of Public Health Domestic Violence Homicide Dataset* [dataset]. Boston: Massachusetts Department of Health.

Sandberg, L. (2013) 'Backward, dumb, and violent hillbillies? Rural geographies and intersectional studies on intimate partner violence', *Affilia – Journal of Women and Social Work*, 28(4): 350–365.

United States Census Bureau (2010) *Urban and Rural: P2* [dataset], Washington, DC: United States Census Bureau.

United States Census Bureau (2020) *Metropolitan and Micropolitan: About* [online] Available from: https://www.census.gov/programs-surveys/metro-micro/about.html [Accessed 26 July 2021].

United States Department of Agriculture (2020) *Rural Urban Continuum Codes: Documentation*, Washington, DC: United States Department of Agriculture.

Weisheit, R.A. and Donnermeyer, J.F. (2000) 'Change and continuity in crime in rural America', *Criminal Justice*, 1: 309–357.

Wilson, S.G., Plane, D. A., Mackun, P. J., Fischetti, T. R. and Goworowska, J. (2012) *Patterns of Metropolitan and Micropolitan Population Change: 2000 to 2010* [report # C2010SR-01], Washington, DC: US Department of Commerce.

Zhao, J., Ameratunga, S., Lee, A., Browne, M. and Exeter, D. J. (2019) 'Developing a new index of rurality for exploring variations in health outcomes in Auckland and Northland', *Social Indicators Research*, 144(2): 955–980.

Gender Blindness for At-risk Girls in Rural Communities

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Introduction

As a research team tasked with developing local initiatives for juvenile justice practices, our entry into rural research sites was built on listening tours and semi-structured gatherings involving more than 100 community stakeholders. At every point, we were surprised to see almost no reference to gender or the unique experiences of system-involved girls. (Sue, personal narrative, 15 March 2020)

The noteworthy long silences about gender encountered during fieldwork in rural communities stand in sharp contrast to the ubiquity of gender-based inequities around the globe. Gender-based violence (GBV) is a deeply entrenched issue of gender inequality and discrimination (Council of Europe, 2011), including emotional and psychological harm (Ott, 2017), deprivation of liberty (United Nations General Assembly, 1993) and human rights violations (European Institute for Gender Equality, 2020). According to a study conducted by the World Health Organization (WHO), one in three women who have been in a relationship have experienced physical and/or sexual violence by an intimate partner or sexual violence from a non-partner at some point in their lives (WHO, 2021).

The paucity of attention to GBV for at-risk girls and subsequent involvement within the juvenile justice system is even more stark. First, age matters. While intimate partner violence is the most prevalent form of violence against women, younger women remain at highest risk (WHO, 2021). Leading studies (such as WHO, 2021) document the damaging

consequences of violence on women's health, including risks for injuries, depression, anxiety disorders, sexually transmitted infections and other health problems. Little attention is directed towards 'hidden harms' for at-risk girls, and especially those in rural areas, and the existing few have focused exclusively on urban locations, ignoring the unique sociopolitical differences of rural communities. The current study directs attention towards this continued oversight, demanding intentional efforts towards gender-responsive needs, including indirect forms of GBV, for at-risk girls everywhere, including rural areas.

These authors conducted a two-year research project on juvenile justice issues in isolated areas of western Kansas within the United States. As background, in 2016, the state of Kansas passed a comprehensive juvenile justice reform bill, Senate Bill 367 (SB 367) (Kansas Legislative Session, 2017). The overhaul was in response to increased incarceration of youths coupled with declining juvenile crime rates. One result was improper placements based on incongruent risk levels. As part of SB 367 reform, US$22 million was set aside to expand community services. Despite well-intended initiatives towards reducing system involvement, SB 367 failed to incorporate a gender-responsive approach, and consideration of girls in rural communities was absent.

This chapter focuses on two dynamics related to gender blindness that affect at-risk girls: (1) a juvenile justice system that systematically veils gender inequities, generalises experiences to White middle-class norms (Gamal, 2018) and discounts barriers unique to remote geographies; coupled with (2) community-level rejection of gender as a significant sociopolitical force in girls' outcomes. We draw attention to how such neglect abandons the unique needs of girls, especially those in rural regions.

Literature review

Feminist scholars have long struggled to correct the denial of gender as central to social organisation. Globally, power remains at the centre of gender relations (Messerschmidt, 2019) including control of women's bodies and sexuality (King, 2004). Although several international scholars view GBV on a continuum, most studies continue to focus on overt physical and sexual violence, often ignoring covert cases (Walby et al, 2014) of gender inequities. Scholars continue to find that '[t]he literature is clear that girls in the justice system have experienced abuse, violence, adversity, and deprivation across many of the domains in their lives – family, peers, intimate partners, and community' (Sherman and Balck, 2015: 3). Girls are often 'othered' and portrayed as deserving abuse and violence (Miller, 2008), and overwhelmingly, justice-involved girls demonstrate a profile of childhood abuse.

System-level studies

Research demonstrates that gender is systematically ignored across most institutions (Terry, 2018), including the juvenile justice system (Terry and Williams, 2019); yet few have documented ways in which systems actively deny and even subject girls to direct and indirect GBV (Edwards et al, 2015). 'With regards to gender, feminist scholarship has likewise demonstrated that formalised measures are frequently characterised by different legal, political, and technical shortcomings, resulting in numerous gendered blind-spots' (Schulz, 2020: 13). Girls are embedded within the gendered norms of their respective communities, which often minimise or ignore sexualised behaviour from boys and men while disregarding harms to girls (Terry, 2018). Young women come to understand their hidden harms do not matter.

One area of feminist criminology has provided focus on girls' abuse and the juvenile justice system with literature on gendered pathways and the abuse-to-prison pipeline (Saar et al, 2015). Such attention allows for consideration of (some) girls' experiences but also de-emphasises differences between girls and boys (Martin and Phillips, 2017). In turn, girls' higher rate of victimisation and treatment needs (Wyse, 2011) is not apparent and is coupled with over-policing of girls (Sherman and Balck, 2015).

While arrest trends for all youth have been on the decline since the 1990s, girls' system-involvement, often veiled, is different from boys' delinquency. Girls are overrepresented not only in status offences but also in simple assaults, disorderly conduct and liquor violations (Puzzanchera and Ehrmann, 2018). Further, girls are often criminalised for maladaptive responses to endured forms of abuse (Saar et al, 2015). At all levels, the juvenile justice system has yet to implement policies and practices addressing gender biases.

Further, most mainstream criminological research has ignored gendered cultural influences although feminist criminology has added a wealth of information on gendered experiences. At the community level, local hegemonic masculinity and broader gender norms may allow, and, at times, encourage GBV against young women. For example, studies document that schools, an institution where youth spend most of their time, often resist intervening in cases of sexual harassment (Hand and Sanchez, 2000), dismissing it as 'natural' expressions of boys' behaviour. Yet, traumatised girls end up deeper in the system with worsened symptoms (Hennessey et al, 2004) and are often penalised for their survival strategies (Hattery and Smith, 2012) which are often seen as outside 'appropriate' feminine behaviour (Sherman and Balck, 2015).

Gender blindness and ruralness

Gender blindness has been particularly problematic in rural communities (Terry and Williams, 2019). Though research in non-urban areas is relatively

scarce, rural studies have consistently documented that gender relations tend towards traditional ideas and practices (Donnermeyer and DeKeseredy, 2008), privileging a rural 'brand' of hypermasculinity while relegating women's role to secondary status (DeKeseredy, 2015). Yet, distinct characteristics of deviance and the impact of gender have long been ignored or downplayed (Williams, 2001). Rural communities often exhibit less tolerance for so-called 'bad girls' (Williams and Craig-Moreland, 2005) and take on unique abuse-to-prison pathways (Terry and Williams, 2019). Further, rural communities, faced with scarce resources and structural disadvantage, are less prepared to treat girls' unique needs (Williams et al, 2020).

Non-urban communities, known for close-knit ties, tend to cling to insider status and resist external influence. Studies find that such dense relationships do not generate positive connections for all rural citizens, and 'troubled' girls are often deemed outsiders (Terry, 2020; Terry and Williams, 2019). Further, close community relationships generate concerns about privacy, confidentiality and stigma associated with certain populations and services (Leston et al, 2012). Rural officers are more likely to know individuals involved (Weisheit et al, 1994; Donnermeyer and DeKeseredy, 2014), increasing scrutiny for girls' misbehaviour, yet offer less in education, mental health treatment and life-skills training (Sherman and Balck, 2015). For girls, these added barriers equate to fewer options for gender-responsive needs.

Current study

We employ the concept of gender *blindness* to characterise avoidance of gender as a concept when dealing with justice-involved girls. Gender blindness, like colour blindness, functions as an ideology that discounts effects of gender on an individual's lived experiences, amplifying further harm. Combined with a form of *indirect* GBV, this study focuses on a systemic gender blindness of nonmetropolitan communities, one that renders many at-risk girls without services or support and propels them into a system that hides their vulnerabilities.

Observations come from a grant-funded juvenile justice initiative referred to as Our Town Our Kids, a two-year project focusing on collaboration with non-urban communities. The goal was to develop a comprehensive, scalable set of tools to improve outcomes for area youth through system improvement or interventions. The initiative included 23 nonmetropolitan counties in western Kansas, a predominantly rural state located in the US heartland.

Background: juvenile justice reform in the heartland

In this case study, gender blindness became apparent in several ways. In July of 2014, the Kansas Department of Corrections (KDOC) participated

in a new initiative, the Reducing Recidivism and Improving Other Key Outcomes for Youth (KDOC, 2015). The Kansas juvenile justice system had relied heavily upon out-of-home placements, spending in excess of US$16 million annually on such services. Despite a state-level policy calling for gender and trauma-responsive programmes for adult offenders, little mention of gender appeared in references to the juvenile system and rural–specific needs were non-existent.

Findings of the initiative's cost study revealed 80 per cent of youth in out-of-home placements were assessed at low or moderate risk, implying they were inappropriately placed based on the Risk-Need-Responsivity model (Andrews et al, 1990). Further, KDOC found that 54 per cent of youth discharged from group homes were back in residential placements within six months. Forty-two per cent sent to the juvenile correctional facility were reincarcerated again within three years of release. Despite these dismal marks, more than two-thirds of the state budget for juvenile justice was spent on secure placements, and less than 1 per cent was committed to evidence-based programming options.

As a response, the Kansas legislature passed SB 367, restricting the use of out-of-home placement and shifting resources towards graduated sanctions and evidence-based alternatives. A 2020 audit found that most responses centred around probation and detention limits, citing a report by the Department of Children and Families documenting a 'need for short term placements, more mental health services, and more family support' (Kansas Legislative Division of Post Audit, 2020: 9). Subsequently, two competing concerns emerged: (1) officials claimed some districts were still removing low-risk juveniles from the home while (2) certain non-urban districts reported failure to provide evidence-based services, as mandated by the reform bill. Gender responsive issues were not addressed.

In our research, we found almost no attention to rural concerns or gender across *all* SB 367 initiatives. For example, within a 65-page KDOC report detailing the 2015 cost study, 'gender' is observed in only two places, describing available group home beds. In 2018, the Kansas Juvenile Justice Oversight Committee said, 'SB 367 aimed to provide services to youth that matched their needs' (Kansas Juvenile Justice Oversight Committee, 2018), with 'the ability of all regions of the state to provide the appropriate services' (Kansas Juvenile Justice Oversight Committee, 2018). Again, the silence of gender was glaring.

Methodology

The current study involved field research within a 23-county region, spanning diverse populations of community professionals and justice-involved families. Participants were recruited by purposive and snowballing efforts,

drawing from groups such as Juvenile Justice Community Advisory Boards (n=6), school systems (n=22), mental health (n=4), faith communities (n=5), governmental departments (n=13), business and general service providers (n=10), law enforcement (n=7), community citizens (n=13) and extension agents (n=7). In addition, juvenile-justice involved youths and their caregivers were recruited (n=22), bringing total participants to 103. Data collection was accomplished through a variety of modalities with an emphasis on qualitative methodology.

Listening tour

Listening tours are a form of collaborative anthropological research that provides a way for people to learn about a specific community. The listening tour consisted of a three-day series of meetings and interviews with local stakeholders and public officials. Meetings were structured around predetermined questions, informal conversations and observation at community events; follow-up interviews included county officials, service providers, family members and at-risk youth. Approximately 35 individuals participated for a total of 40 hours; the process encouraged relationship building, which then moved to the 'study circles' phase.

Study circles

A study circle is a group of individuals who meet regularly over a period of weeks or months to address a critical public issue in a democratic, collaborative way to combine dialogue, deliberation and problem-solving. Study circles are gatherings used to build knowledge, community strength, information sharing, strategic planning and collaborative decision-making. This collaborative design provided a series of four study circles held in five locations throughout the 23 counties. In sum, 20 study circle gatherings, including more than 100 participants, convened for 80 hours.

Findings

Relying on interviews and field notes, our research provides insider knowledge of rural communities in a conservative state in the US Midwest. We noted three themes through continuous review and coding of qualitative data. First, gender as a concept was invisible, one almost never considered by stakeholders. Second, distinct needs and experiences of system-involved girls appeared, at best, an afterthought. Third, within stories and anecdotes, girls and their 'problems' were characterised as 'anotherness', that is, they were often considered as deviant, whereas boys' experiences were normalised.

Invisibility of gender

In our two-year study with 23 counties, the overall attitude was that 'this [gender bias] does not apply to my area' or 'that [gender distinctions] does not happen here'. Typically, any mention of gender was met with confusion or dismissed as irrelevant. For example, in one study-circle session, the discussant asked groups to address an issue of 'Special Populations' around race, class and gender; only one of the five study-circle areas chose to include gender issues in any form.

After review of interview transcripts, we noted no gender descriptive language when participants discussed youth in the system. Participants would say 'kids' or 'youth', grouping everyone together. At times, boys and the male experience would emerge as default. In one instance, a highly regarded juvenile services stakeholder was asked about training the probation officers regarding a developmental approach. She responded:

> 'Oh, I tell them the brain doesn't fully develop for boys at least until 25 or so. You know, we are dealing with males 15–16 years old. So, some of the things that they're doing they'll actually grow out of. They're more likely to grow out of it if we can address the risk now, but the deeper we let them get into that whole risky behaviour, drinking and drugs especially, the more likely we are to have addicts on our hands when we could have addressed that early on and avoided the long-term implications.' (Juvenile Justice Administrator, listening tour interview, 7 January 2019)

Note the inference that boys may be expected to 'act out', but there is no mention of girls and their developmental challenges.

Disappearing girls

As researchers and gender scholars, we were initially surprised that girls' unique needs and experiences in the juvenile system were absent or presented only after a prompt. In one discussion about bullying, a system-involved girl was present as a group participant. As she conveyed her experience with bullying at school – including anxiety, depression and suicidal thoughts – the group sat in silence. It became apparent their earlier 'generic' discussion had centred on the assumption of boys as bullies and boys as targets. The girl continued, explaining how she had reported multiple incidents to the school administration; her complaints went unresolved.

Within another session (about 22 stakeholders), a discussion centred on crimes committed by youth, including data reporting prevalence and types of delinquent offences by sex, gender differences for assault arrest rates emerged. One court-level official added that "girls are scrappy" now and more violent

than ever. One researcher addressed the comments, explaining that both local and national data do not support the statement that girls are becoming more violent, and that engrained community norms about 'inappropriate' feminine behaviour may influence girls' entry into the system. Several participants vigorously shook their heads in disbelief. When instances of gender biases were presented, the general sentiment was voiced by one participant: "I know that didn't happen here. We handle all youth the same and fairly."

In general, the five study-circle locations avoided drawing attention to gender inequities in the data. While race/ethnicity was often an acceptable and common topic, gender was not. To an even greater extent, sexual orientation/identity was, for the most part, taboo. For example, the acronym of 'LGBTQIA+' (lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual and ally plus) and the growing acceptance of 'non-standard' personal pronouns became the brunt of jokes among some participants.

Anotherness

Nevertheless, with prompts by researchers/discussants, occasional stories and anecdotes emerged and are presented here; these rural girls' 'problems' can be characterised as 'anotherness'. In other words, they were often considered as exceptions or 'bad girls', whereas the 'boys will be boys' mindset was normalised.

Many social science scholars (see Barnhill, 2010; Ericsson and Kostera, 2020) are familiar with the term 'otherness'; outgroups are portrayed as a homogeneous group (despite internal diversity), intrinsically different from the (preferred) in-group, and seen as less worthy of dignity and respect. One problem with the term otherness – in addition to fundamental divisiveness – is that it assumes passivity and invisibility. In the case of girls in rural areas, the assumption is that they are present and acknowledged, but less relevant. As a social group, (some) girls are recognised as 'worthy' but become absorbed into the larger group of juveniles who may have gone astray; their distinctiveness as girl-juveniles, including the social complexity of their 'at-riskness', is ignored. Bad boys are 'normalised' – as in the example of 'they'll grow out of it', cited earlier – while the reality of 'bad girls' is another case altogether (Barnhill, 2010).

On occasion, time-worn gender stereotypes of the 'bad girl' emerged, such as the following exchange with a juvenile probation officer:

Interviewer:	Is there a particularly difficult case that stands out for you?
Probation officer:	I've had this girl for a few years. She's a very trying girl, I will tell you. I had her in [another county] at one point, and then we found her here, and I'm like, "How'd you get here?" Well, she just

> flagged down a random person, and I'm like,
> "You rode with an unknown male for hours?"
> I was very concerned because she was a very
> promiscuous girl.
> So, I was like, "Did you … did he in any form you
> know … ask for anything in exchange?" I wasn't
> gonna come right out and say, "Did he ask for any
> sexual favours?" because I've noticed that every
> time you say that the first thing they say is, "I'm
> not a prostitute!"

As the interview continued, the probation officer closed with: "She is the first one that I think about because a lot of people tend to immediately go to, 'Well, she kind of throws herself around'."

In the 'disappearing girl' section, girls' developmental experiences seemed to be invisible or unacknowledged, while the exchange just described, however well-intended, suggests victim-blaming – something we did not see in references to boys in the system. In another instance, the interviewer explicitly asked about gender differences in trauma and abuse. Another probation officer replied:

> 'I don't think trauma has a gender specific [component]. I would say
> just as equal now in different types of trauma. With my case load, some
> sexual abuse is [present] for females. I don't have many males that have
> been sexually abused. But trauma overall, no. I would say it's just as
> equal for our guys as it is girls. It's just whatever is traumatic for them.'
> (Probation officer, interview, 12 June 2019)

Another illustration demonstrates a contrast between 'girls' issues' and 'boys' issues', even among highly experienced professionals. Melissa (pseudonym) is a devoted veteran of juvenile justice, well-trained and committed to the kids she serves. In recalling two cases described as 'extreme' issues, note how she describes them:

> 'We had this girl who kept coming in and out of juvenile detention.
> She was one of the angriest young ladies I ever met. She would attempt
> suicide, so we constantly had [treatment provider] in trying to help
> us with her. She was so very very angry. One day I'm trying to calm
> her down and finally I said, "Who hurt you?" and she started bawling
> and she had been so physically and sexually abused. So, having come
> from that social work background and having created a group for kids
> who have been sexually abused, we were able to work through some
> of the abuse with her. She actually helped form a group of girls who

met on a regular basis. We had a motto that, "Although we're victims of abuse, we are also survivors, and our goal is to thrive in spite of the fact that we are victims who have been abused".' (Melissa, describing the girl [Joanna, pseudonym] and her issues)

'Then, we had another boy who came into our virtual academy, and he had very, very low skills. He couldn't read, he had very low math skills, and he had a lot of behaviours, because he was trying to hide those things. By working with our staff, going to our social skills classes, he actually was able to get that out to us that he couldn't read, and so we started working with him. He actually got to go back to school a few months early because we had him up to his age bracket and the school had good reports for him. They actually let him come back early to class, so that was a huge hooray for our staff.' (Melissa, describing the boy [Michael, pseudonym] and his issues)

Both cases are representative of systemic problems when dealing with kids who have been abused, traumatised and misunderstood. Melissa is knowledgeable and experienced; she deals with each in a caring way. Each story has a mostly satisfactory outcome; they each recovered relatively well. Still, note that each was characterised differently. Joanna was labelled as "one of the angriest young ladies I ever met", while Michael's responsibility was discharged by "low math skills", which he was "trying to hide". The girl's situation was designated as an internal/personality trait, while the boy's was identified as external/behavioural.

In summary, our research demonstrates disregard for gender-related experiences of rural girls. At the macro-level, structural factors established a 'no-look' practice by omitting references to gender-based factors. Policies, practices, programmes and outcomes disregarded systematic gender biases and even ignored sex categories in most instances. Second, at the meso/ organisational level, it was more difficult for local agencies and organisations to fully ignore girls and their experiences; real people are dealt with daily. Instead, active denial of gender inequities was common, and girls' issues often were lost, overlooked or, worse, portrayed as victim-blaming. Third, at the individual level, girls themselves felt the brunt of neglect, failing to find a caring adult who could manage the guidance, understanding or protection they needed.

One caveat is relevant. Even among those 'closest to the fire', participants in rural communities were often immersed within the generalised and immediate problem of few resources combined with time/distance challenges in isolated areas. As one example, a district administrator covers 10,000 square miles; another reported one mental health professional who covers 22 counties. Working families may be asked to drive six hours

for in-patient care. In other instances, these rural communities were offered only remote therapy – often in the face of unreliable internet access, outdated equipment and little chance of privacy. One stakeholder shared: "One of the biggest hurdles is access to Functional Family Therapy that the state contracts. There is *one* functional family therapist for 37 [rural] counties. This is an evidence-based programme where they're supposed to meet with the family one night a week, minimum. The math does not make sense." Time and again, we heard from parents, educators and justice workers who simply felt overwhelmed, with no place to turn – which illuminates a system that is woefully inadequate to care for rural girls and their needs.

Discussion and conclusion

The current study, as part of a larger project, is by design partial, but one that likely extends beyond the 23-county site, crossing state lines and perhaps international borders. Current findings identified three common themes as part of rural social life. One obvious theme was the identification that gender is an invisible concept – we further conceptualise this lack of awareness as gender blindness. Gender blindness may explain the lack of gender-based resources for system-involved girls – an issue noted by many participants. Lastly, and in line with previous rural and gender-specific literature, girls' behaviours that do not align with mainstream traditional gender norms are labelled as deviant, and this is especially true for girls in remote locations that may harbour more rigid gendered expectations. Our findings are interpreted within a limited pool of academic literature, but we suspect the problems are globally widespread. We encourage scholars everywhere to consider place and space – not just densely populated locations, but also frontier communities. Additionally, our research does not include an intersectional focus; we encourage others to think of gender blindness within the global realm of oppression.

At the state level, SB 367 was likely formed with good intentions, but reform efforts ignored unique needs of at-risk girls, setting the stage for gender-blind efforts which are amplified in rural locations already lacking in quality and accessible services. Our data identify mechanisms that contribute to indirect GBV, including school and community norms, police/legal interventions, court-related processes and social media practices, resulting in several recommendations. First, both state and local systems should collect comprehensive data, including that specific to girls and remote geographic locations. Data that combines all girls from all spaces provides an aerial view understanding of issues – an approach that ignores social, political and cultural differences based on territory. Second, state-wide support and training should be provided to engage in gender-responsive data-driven decisions. This training should be offered to all locations and across the land

as the tendency is to offer training to the most densely populated locations only. Third, legislative bodies should demand equal access and quality of service to every child, regardless of cost, location or circumstance. Providers located in rural areas must be included in the decision-making of services to develop and offer programming that best accommodates the needs of their youth. Girls in remote locations will require a unique approach to service availability that is likely different than their urban counterparts. Lastly, as oversight bodies continue to monitor policy impact, communication must encompass rural communities, as well as system-involved girls and their families, who are often left out of the conversation.

Gender blindness is entrenched in rural life but often lost among other challenges that plague non-urban areas. Gender was not at the heart of any juvenile justice conversations within our research sites, nor a stated deliverable outlined by oversight bodies. Additionally, location was also absent from suggested topics as the needs of all youth are compiled into one cumulative list – demonstrating a clear disregard for girls and especially young women located in rural communities. Yet, as feminist scholars, we know gender *is* a central organising principle of relationships and sociopolitical institutions, thus making its omission critical. As rural scholars, we know place matters as ideologies are different, services are limited and institutional responses vary. We encourage scholars everywhere to push gender forward and demand conversations about girls' lives.

References

Andrews, D.A., Bonta, J. and Hoge, R.D. (1990) 'Classification for effective rehabilitation', *Criminal Justice and Behavior*, 17(1): 19–52.

Barnhill, D. (2010) 'Otherness and anotherness', University of Washington [online] Available from: https://www.uwosh.edu/facstaff/barnhill/490-docs/thinking/other [Accessed 9 August 2021].

Council of Europe (2011) *Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence* [online] Available from: https://www.coe.int/fr/web/conventions/full-list/-/conventions/rms/090000168008482e [Accessed 9 August 2021].

DeKeseredy, W.S. (2015) 'New directions in feminist understandings of rural crime', *Journal of Rural Studies*, 39: 180–187.

Donnermeyer, J.F. and DeKeseredy, W. (2008) 'Toward a rural critical criminology', *Southern Rural Criminology*, 23(2): 4–28.

Donnermeyer, J.F. and DeKeseredy, W. (2014) *Rural Criminology*, New York: Routledge.

Edwards, K.M., Rodenhizer-Stämpfli, K.A. and Eckstein, R.P. (2015) 'Bystander action in situations of dating and sexual aggression: A mixed methodological study of high school youth', *Journal of Youth and Adolescence*, 44(12): 2321–2336.

Ericsson, D. and Kostera, M. (2020) 'Alterethnography: Reading and writing otherness in organizations', *Gender, Work & Organization*, 27(6): 1402–1417.

European Institute for Gender Equality (2020) 'What is gender-based violence?' [online] Available from: https://eige.europa.eu/gender-based-violence/what-is-gender-based-violence [Accessed 9 August 2021].

Gamal, F. (2018) 'Good girls: Gender-specific interventions in juvenile court', *Columbia Journal of Gender and Law*, 35(2): 228–263.

Hand, J.Z. and Sanchez, L. (2000) 'Badgering and bantering? Gender differences in experience of, and reactions to, sexual harassment among U.S. high school students', *Gender & Society*, 14(6): 718–746.

Hattery, A. and Smith, E. (2012) *Social Dynamics of Family Violence: The Social Dynamics of Intimate Partner Violence*, Boulder: Westview Press.

Hennessey, M., Ford, J.D., Mahoney, K., Ko, S.J. and Siegfried, C.B. (2004) *Trauma Among Girls in the Juvenile Justice System*, Los Angeles: National Child Traumatic Stress Network.

Kansas Juvenile Justice Oversight Committee (2018) *2018 Kansas Juvenile Justice Oversight Committee Annual Report* [online] Available from: https://www.doc.ks.gov/juvenile-services/committee/jjoc-annual-reports/2018/view [Accessed 24 October 2022].

Kansas Legislative Division of Post Audit (2020) 'Juvenile justice reforms: Evaluating the effects of Senate Bill 367' [online] Available from: https://www.kslpa.org/wp-content/uploads/2020/01/B01.02-Final-Report-PDF_A.pdf [Accessed 9 August 2021].

Kansas Legislative Session. (2017) 'SB 367' [online] Available from: http://www.kslegislature.org/li_2016/b2015_16/measures/documents/summary_sb_367_2016.pdf [Accessed 9 August 2021].

KDOC (Kansas Department of Corrections) (2015) 'Cost study of youth residential centers for juvenile offenders: Pursuant to Senate Substitute for House Bill 2588' [online] Available from: https://www.doc.ks.gov/publications/juvenile/yrc [Accessed 9 August 2021].

King, A. (2004) 'The prisoner of gender: Foucault and the disciplining of the female body', *Journal of International Women's Studies*, 5(2): 29–39.

Leston, J.D., Jessen, C.M. and Simons, B.C. (2012) 'Alaska Native and rural youth views of sexual health: A focus group project on sexually transmitted diseases, HIV/AIDS, and unplanned pregnancy', *American Indian and Alaska Native Mental Health Research: The Journal of the National Center*, 19(1): 1–14.

Martin, A.E. and Phillips, K.W. (2017) 'What "blindness" to gender differences helps women see and do: Implications for confidence, agency, and action in male-dominated environments', *Organizational Behavior and Human Decision Processes*, 142: 28–44.

Messerschmidt, J. W. (2019) 'The salience of "hegemonic masculinity"', *Men and Masculinities*, 22(1): 85–91.

Miller, J. (2008) *Getting Played: African American Girls, Urban Inequality, and Gendered Violence*, New York: New York University Press.

Ott, M. (2017) 'What does that mean? Gender-based violence', *Women for Women International* [online] Available from: https://www.womenforwo men.org/blogs/series-what-does-mean-gender-based-violence [Accessed 9 August 2021].

Puzzanchera, C. and Ehrmann, S. (2018) 'Spotlight on girls in the juvenile justice system', *OJJDP Statistical Briefing Book*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention.

Saar, S.M., Epstein, R., Rosenthal, L. and Vafa, Y. (2015) 'The sexual abuse to prison pipeline: The girls' story', *Georgetown Law Center on Poverty and Inequality*, Washington, DC. Available from: https://genderjusticeandoppo rtunity.georgetown.edu/trauma-and-mental-health-for-girls/sexual-abuse-to-prison-pipeline/ [Accessed 8 November 2022].

Schulz, P. (2020) 'Towards inclusive gender in transitional justice: Gaps, blind-spots and opportunities', *Journal of Intervention and Statebuilding*, 14(5): 691–710.

Sherman, F. and Balck, A. (2015) 'Gender injustice: System-level juvenile justice reforms for girls', *National Crittenton Foundation*, Portland. Available from: https://lira.bc.edu/work/ns/176a015b-8870-4d4f-bac0-9becf3d21 e33 [Accessed 8 November 2022].

Terry, A.N. (2018) 'Dirt roads to justice and heartland girls: Coercive sexual environments in non-metropolitan communities', doctoral dissertation, Kansas State University. Available from: https://krex.k-state.edu/dspace/ bitstream/handle/2097/39110/AprilTerry2018.pdf?sequence=3&isAllo wed=y [Accessed 8 November 2022].

Terry, A.N. (2020) 'The architecture of rural life: The dangers of dense collective efficacy for at-risk girls', *Rural Sociology*, 85(3): 780–805.

Terry, A.N. and Williams, L.S. (2019) 'On the outside looking in: Rural girls, trauma, and involvement in the criminal justice system', *Journal of Aggression, Maltreatment & Trauma*, 30(3): 368–388.

United Nations General Assembly (1993) *Declaration on the Elimination of Violence Against Women* [online] Available from: http://www.un.org/ documents/ga/res/48/a48r104.htm [Accessed 9 August 2021].

Walby, S., Towers, J. and Francis, B. (2014) 'Mainstreaming domestic and gender-based violence into sociology and the criminology of violence', *The Sociological Review*, 62(2): 187–214.

Weisheit, R.A., Wells, L.E. and Falcone, D.N. (1994) 'Community policing in small town and rural America', *Crime & Delinquency*, 40(4): 549–567.

WHO (World Health Organization) (2021) 'Devastatingly pervasive: 1 in 3 women globally experience violence', 9 March [online] Available from: https://www.who.int/news/item/09-03-2021-devastatingly-pervasive-1-in-3-women-globally-experience-violence [Accessed 9 August 2021].

Williams, L.S. (2001) 'City kids and country cousins: Rural and urban youth, deviance, and labor market ties', in R. T. Michael (ed.), *Social Awakenings: Adolescents' Behavior as Adulthood Approaches*, New York: Russell Sage Foundation. pp. 379–413.

Williams, L.S. and Craig-Moreland, D. (2005) 'Bad girls and rural pathways: Construction of girls' deviance and local social control', presentation, American Society of Criminology, Toronto, Canada.

Williams, L.S., Terry, A.N., Kremer, K. and Edwards, M. (2020) 'The conundrum of country: Rural juvenile justice and mental health', presentation, American Society of Criminology.

Wyse, J.J. (2011) 'Gendered rehabilitation: Targeting treatment or reproducing inequality?' [online] Available from: https://deepblue.lib.umich.edu/bitstream/handle/2027.42/89772/jwyse_1.pdf?sequence=1 [Accessed 9 August 2021].

'Raise Your Hand If …': Teen Dating Violence Prevention in Rural Secondary Schools

Kaiti Blackburn, Christie Brungardt, Jennifer Farrington and Rachel Moravek

Introduction

Similar to Dubey (2021), Jana's Campaign believes gender and relationship violence is a serious, preventable public health issue. This chapter focuses specifically on gender and relationship violence in adolescents, commonly called teen dating violence (TDV). In 2008, Mulford and Giordano wrote that TDV had only recently been recognised as a significant public health problem. Today, the Centers for Disease Control and Prevention identify TDV as a public health problem that most commonly occurs in the form of physical, psychological or sexual abuse (CDC, 2021). Violence in relationships has been, and continues to be, a weapon utilised to enforce power and control. The tactics utilised to establish and maintain power and control over one's partner typically do not vary depending on age.

TDV is an adverse childhood experience (ACE) that affects millions of young people in the United States. ACEs are potentially traumatic events that occur during childhood (0–17 years). Some studies indicate exposure to ACEs, such as witnessing violence at home between parents or witnessing neighbourhood violence, can be associated with an increased risk of teens personally engaging in dating violence (Vagi et al, 2013). This characterisation of ACE exposure across both family and community violence in middle-school-aged youth is particularly important given that adolescents spend large amounts of time both within and outside of the family context (Davis et al, 2019). These experiences can have an impact on future violence victimisation and perpetration, and lifelong negative health

and limited opportunity. Moreover, ACEs and their associated harms are preventable (CDC, 2021).

While it is widely understood that the issue of gender and relationship violence on college campuses has become a national crisis, less is known about a similar crisis in secondary schools. It is imperative to help schools, communities and states understand the importance of providing prevention education to secondary school students. To understand this significance, one must first understand the negative impact that TDV has on young people, both in the short and long-term. From ACEs to a general lack of acceptance for how individuals identify, students are facing many challenges that will negatively impact their health and success in the future if violence prevention and intervention measures are not in place.

Gender and relationship violence is a leading contributor to injuries, chronic health issues and high-risk health behaviours (such as alcoholism, eating disorders, depression and anxiety, and suicidal ideation) (Santaularia et al, 2014). These outcomes create a significant strain on the healthcare system. Growing evidence shows the long-term impact of the emotional and mental trauma of these incidents carries the additional likelihood of disease and illness. Nearly one in four women and nearly one in ten men in the United States report severe physical violence from an intimate partner (Smith et al, 2015). For teens, one in ten report purposeful physical violence, and one in three report physical, sexual, emotional, or verbal abuse from a dating partner (LoveIsRespect.org, 2015).

Among women, studies have shown an association between having a history of physical and/or sexual dating violence victimisation and poor health during adolescence – including depression, anxiety and stress symptoms, suicidal ideation or attempts, smoking, alcohol and drug use, eating disorders, and lessened quality of life (Bonomi et al, 2013). Men who report histories of physical and/or sexual dating violence during adolescence are at increased risk of disordered eating, anxiety, stress symptoms and depression, suicidal ideation and/or attempts, smoking, alcohol and drug use, and diminished emotional wellbeing. Both physical and emotional types of dating violence increase anxiety and depression in both girls and boys (Bonomi et al, 2013).

Rurality and relationship violence

In rural and urban settings, lack of access to services increases vulnerability to relationship violence. In rural communities, services are more spread out and are not well advertised or accessible. Agencies are required to cover more counties per programme, have fewer on-site shelter services, and fewer total shelter beds available (Peek-Asa et al, 2011). Often, the lack of access to transportation is an obstacle that increases isolation for victims. In rural communities, victims of these types of violence may face challenges

accessing support services and care, including limited transportation options, geographic isolation and limited phone service (Temple, 2018). To compound this situation, in smaller, close-knit communities, anonymity is often not possible, which increases risk and negative public perception for victims seeking services (Temple, 2018). In 2015, the New Mexico Department of Health provided a sexual violence prevention plan, addressing intimate partner violence as challenging in small communities due to the lack of anonymity. The abuser may easily share the same network of friends, social service personnel and law enforcement (Lewis, 2003). In communities of all sizes, service organisations face funding and staffing challenges. This lack of resources to provide intervention services often leaves prevention education as a component that is difficult to accomplish. The importance of providing prevention education surrounding gender and relationship violence is imperative to the health of preteens, teens and young adults. Working together, a better world in which every child can thrive can be built (CDC, 2021).

Throughout the Midwest United States, Jana's Campaign has implemented the Survey of Audience Icebreakers or 'Raise Your Hand' activity in multiple secondary schools. The aim is to better understand the specific unhealthy behaviours young people are experiencing in rural communities. Student participants are asked to raise their hands when identifying common unhealthy relationship behaviours they or those in their lives have experienced. The data is utilised to guide and further highlight the issues Jana's Campaign delivers during its violence prevention education programmes. The goal of these programmes is to stop relationship violence before it starts. When prevention programmes can target the most common behaviours reported, the better the outcome.

Jana's Campaign programme

Jana's Campaign is a national prevention education organisation with the single mission of reducing gender and relationship violence. The organisation was founded in response to the murder of Jana Lynne Mackey in 2008 – an act of domestic violence by an ex-boyfriend. Jana Mackey was a social justice and women's activist who worked to reduce domestic and sexual violence. Jana's Campaign provides educational programmes designed to prevent all forms of domestic and dating violence, sexual violence, and stalking. Working through secondary schools, colleges and universities, and community–based organisations, Jana's Campaign delivers specialised prevention strategies and evidence-based curricula designed to prevent violence, build healthy relationships and create new social norms. As of this writing, Jana's Campaign's secondary education work has taken place primarily in Kansas, Nebraska and Colorado. Though the Prevention Educators have worked in

some urban school districts, most of their programming has taken place in rural counties. Thus far, they have worked in 81 rural counties in Kansas (77 per cent of all rural counties in Kansas), 49 rural counties in Nebraska (53 per cent of all rural counties in Nebraska) and 15 rural counties in Colorado (23 per cent of all rural counties in Colorado) (ERS, n.d.). Utilisation of data from the Economic Research Service branch of the United States Department of Agriculture is used to differentiate and identify rural versus urban geographic areas.

There are other organisations that work in the domestic and sexual violence field, but these organisations primarily provide direct victim services, rather than prevention programming. Jana's Campaign uses a model of prevention education through school partnerships, making its approach unique. Jana's Campaign believes prevention is key and efforts must address all levels of the social–ecological model. Its efforts include primary, secondary and tertiary prevention approaches. This calls for comprehensive behavioural and attitudinal changes at the individual, relationship, community and social levels. Jana's Campaign utilises evidence-based prevention strategies and practices that illustrate the greatest impact on prevention of TDV. Its educational programmes are designed to raise awareness, reduce risk factors while supporting protective measures, engage bystanders, promote healthy and respectful relationships, and encourage the development of new social norms.

Jana's Campaign believes that gender and relationship violence is preventable. Because the Prevention Educators are aware that gender and relationship violence is prevalent in every community, it is critical to provide prevention programming at an age when young people are beginning to enter their first relationships – specifically, in middle and high school. Increasingly, the organisation is now receiving requests for this programming at the elementary level.

By educating students on the issues of gender and relationship violence, the groundwork for creating real social and cultural change is laid. All educational activities are driven around two primary domains. First, in the direct educational programming with students, the goal is to instil the knowledge, skills and values necessary to prevent violence. Second, through indirect educational programming, Jana's Campaign works with secondary school personnel to help build capacity to do this work. By educating the people students are most likely to approach, and those who may spot warning signs – administrators, teachers, counsellors and staff – a safer educational experience for secondary students can be created. This allows for an ongoing dialogue to reduce the stigma of reporting TDV.

Jana's Campaign's direct work with students is made possible by partnering with and through allies. Specifically, Jana's Campaign builds strong and collaborative partnerships with schools, as well as national co-curricular

organisations at the local level (including Family, Career and Community Leaders of America, Kansas Association for Youth, Family and Consumer Science Educators, Distributive Education Clubs of America, Health Occupations Students of America and others). These collaborations can better leverage resources and build on the strengths of those they work with to enhance organisational capacity that encourages sustainability.

Jana's Campaign uses a combination of different programmes, curricula and activities to provide prevention education in secondary schools. Starting in 2014, one activity that has proven to be beneficial is an activity created by the Virginia Sexual and Domestic Violence Action Alliance (VSDVAA). This activity is from Unit 2: Addressing Teen Dating Violence of *Building Healthy Relationships Across Virginia: A Facilitator's Guide to Teen Dating Violence Prevention*. VSDVAA assumes anyone using the activities from its 'toolbox' has already received some level of training on working with teens, basic facilitation skills, how to handle disclosure of victimisation and basic primary prevention concepts. All these criteria are met by every Education and Prevention Specialist working at Jana's Campaign, prior to the facilitation of this activity.

The VSDVAA introduced the topic of teen dating/sexual violence by surveying participants' knowledge of the issue in the lives of people they know. It raises awareness about abusive behaviours common to teen dating relationships (Community Solutions to Sexual and Domestic Violence: Virginia, 2004). This activity has been effective in helping teens understand what unhealthy behaviours describe TDV. This understanding helps them understand what TDV 'looks like'. Though the VSDVAA titled this activity 'Survey of Audience Icebreakers', the Jana's Campaign staff nicknamed the activity 'Raise Your Hand'.

Current research

To begin the activity, participants are asked to put their heads down and close their eyes so that they cannot watch others, which encourages confidentiality. Participants are then asked to respond to the statements in the activity based on whether someone they know – or know of – has experienced the described behaviour. Some of these unhealthy behaviour examples include: too serious, too fast; isolation; controls clothing; extreme jealousy and possessiveness; threatens suicide, physical abuse, and so forth. The facilitator reads each statement and then records the number of hands raised for each item. For example, with 'too serious, too fast', the facilitator says, "Raise your hand if you know someone who in the first week or two they were dating, their partner said, 'I love you, I can't live without, you're the best thing that ever happened to me'; basically it gets too serious, too fast." A similar 'raise your hand' statement is read corresponding to each

unhealthy behaviour. The facilitator records the number of raised hands for each statement. Each hand raised is utilised as the unit of analysis. The number of hands raised for each statement read provides a better understanding of unhealthy behaviours in teen relationships. When all statements are read and results recorded, the facilitator asks the participants to look at the results, pointing out which questions/answers are highest and lowest. This invariably creates a rich discussion among most of the participants as they talk about, and visualise, a phenomenon they have never been able to name before. Students share they had never known that many of the unhealthy behaviours in their own or their peers' relationships could be called TDV.

In recent years, it has become well known that digital devices and cell phones were easily accessible to adolescents, which led to technology increasingly being used as a tool to perpetrate acts of unhealthy or abusive behaviours. This addition of technology has only compounded these issues. Sexting, the sharing of sexually explicit or nude images via cell phones, has increasingly become a concern for some students, parents and school administrators. A 2018 study found the prevalence of sending a 'sext' among 11–17-year-olds was around 14.8 per cent and receiving a 'sext' was 27.4 per cent (Madigan et al, 2018). To further understand the occurrences of sexting in middle and high schools, Jana's Campaign added a statement to the activity asking, "Raise your hand if you know someone who has sent, received or asked for an inappropriate picture."

Jana's Campaign Prevention Educators have found this activity works best with a small number of students, around 15 to 75 students per facilitation, to accurately record the number of participants' hands raised. The data collected and analysed represents 7,466 students from 103 middle and high schools in Kansas, Nebraska and Colorado as of this writing.

Teen dating violence and education: rural and urban disparities

While most of Jana's Campaign programming is provided to rural counties and schools, it has also provided programmes in urban areas. The findings from over eight years show minute disparities regarding geographic area. For example, the largest variance in hands raised was 7 per cent when the statement referenced an extremely argumentative partner. The lowest variance, 0.5 per cent, in hands raised occurred with the statement regarding extreme jealousy. It is valuable to note this lack of difference from Jana's Campaign's experience with secondary schools – it is the common perception that the issues of gender-based violence or TDV are more prevalent in urban communities. The findings show otherwise, as illustrated in Table 4.1.

The data reported in Table 4.1 illustrates the comparable patterns found in behaviours of those in rural locations, including unpredictability, mood

Table 4.1: Rural versus urban comparison of teen dating violence behaviour prevalence

Behaviour	Rural = 1.00 Urban = 2.00	N	Mean	Std. deviation	Std. error mean
Too serious, too fast	1.00	123	0.6135	0.15063	0.01358
	2.00	124	0.5831	0.17539	0.01575
Isolation	1.00	123	0.4039	0.17669	0.01593
	2.00	124	0.4230	0.14600	0.01311
Unpredictable	1.00	123	0.4287	0.17921	0.01616
	2.00	124	0.3633	0.21332	0.01916
Extreme jealousy	1.00	123	0.3877	0.16687	0.01505
	2.00	124	0.3823	0.15800	0.01419
Inappropriate pictures	1.00	84	0.3928	0.31322	0.03418
	2.00	107	0.3808	0.26718	0.02583
Controls clothing	1.00	123	0.4162	0.28839	0.02600
	2.00	124	0.4235	0.29440	0.02644
Threatens suicide	1.00	123	0.3450	0.14605	0.01317
	2.00	124	0.3389	0.14898	0.01338
Threatens them	1.00	123	0.1622	0.11336	0.01022
	2.00	124	0.1731	0.13776	0.01237
Physical abuse	1.00	123	0.1153	0.09259	0.00835
	2.00	124	0.1434	0.12817	0.01151
Extremely argumentative	1.00	123	0.4235	0.18604	0.01677
	2.00	124	0.3590	0.21899	0.01967
Problem for teens	1.00	123	0.9272	0.08269	0.00746
	2.00	124	0.8679	0.14495	0.01302

swings and being argumentative. These behaviours can often be difficult to identify as abusive or violent actions, as they are subtle. Many who experience these 'red flags', and those who witness these behaviours, are frequently unaware of the severe implications that can follow. It is important to note these behaviours are found to be more frequent in rural areas, whereas behaviours such as isolation from family and friends, making threats, and physical abuse are less often disclosed by participants as shown in Table 4.1. It is intriguing to find the behaviour of isolation less common among participants in rural communities. It is an assumption that technology has aided in this finding. With access to cell phones and digital devices, family, friends, peers and others can be available for constant connectivity.

Figure 4.1: Rural/urban differences in the frequency of suicide threats
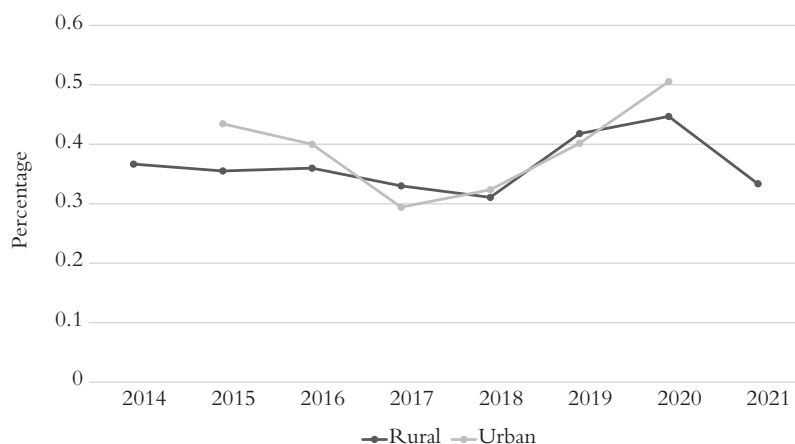
In addition, it might be surprising to know, in both rural and urban locations, that threats of suicide are commonly identified as a behaviour occurring in teen relationships. The results indicated that 35 per cent of rural participants and 34 per cent of urban participants admitted to experiencing or knowing someone who has experienced a suicide threat if their partner is to end the relationship, as illustrated in Figure 4.1. There appears to be a strong correlation between TDV and threats of suicide; yet, there is little to no existing literature to support this finding.

There is a great deal of existing literature on suicidal ideation due to victimisation. Data from a 2019 study by Baiden et al showed about 17 per cent of adolescent students experienced suicidal ideation, 13.7 per cent made a suicide plan and 7.6 per cent attempted suicide during the study. In addition, among those who were dating, 9.9 per cent experienced physical TDV. Adolescent students who experienced physical TDV were 1.92 times more likely to have experienced suicidal ideation, 1.67 times more likely to have made a suicide plan and 2.42 times more likely to have attempted suicide when compared with their counterparts who were dating but experienced no physical TDV. Further investigative studies are needed to better understand the connection between suicide threats as a manipulative/control tool and TDV.

These findings provide key information to use for educational opportunities, not only for students, but also families, community members and leaders. This data could assist in debunking the perception that these issues of gender-based violence only occur in urban areas or cities. Beyond educational purposes, these findings could assist in policy creation, not only for secondary schools, but also for state– and country–wide legislation

to require education on healthy and unhealthy relationships. Required education has the potential to increase the understanding of gender-based violence and also reduce the number of violent incidents.

Discussion

It is informative that 92.7 per cent of rural participants and 86.7 per cent of urban participants believe TDV is a modern teen problem. Students identify TDV as a problem and often ask for information on both intervention and prevention strategies. It has proven difficult to find an updated statistic on parents' perspective on the issue of TDV. In 2004, the Family Violence Prevention Fund and Advocates for Youth reported 81 per cent of parents surveyed believed TDV is not an issue or admitted that they did not know if it was an issue (Family Violence Prevention Fund and Advocates for Youth, 2004). Herein lies the vast importance of providing prevention education on gender and relationship violence in schools and communities. There is a major disconnect between students' identification that TDV is a problem and their parents' lack of awareness.

Throughout the implementation of the activity, the authors found slight disparities in the data; yet, they believe there is still importance in conducting this activity. Specifically, the activity provides a means to analyse the differences or lack of differences in TDV behaviours for those who reside in rural and urban areas. The findings from this activity, and other research to date, show a reality of adolescents across rural and urban areas facing unique challenges. Jana's Campaign is aware that there can be serious and severe consequences to experiencing violence in relationships, including depression, anxiety and stress symptoms, suicidal ideation and/or attempts, smoking, alcohol and drug use, disordered eating, and a lessened quality of life, all of which can continue into adulthood. To prevent these consequences or 'side effects', root causes must be targeted.

While addressing the important findings, readers must consider limitations in the current research. The most obvious limitation is participants' fear of disclosure due to stigma. It may never be known how many students, despite their peers being unable to see, were too afraid to raise their hands during the activity to avoid any type of social policing. Others may wish to avoid any potential discipline or legal repercussions due to teachers, counsellors or other school personnel being present in the room during the activity. This is important to consider when evaluating the data.

Another limitation may be fear of being exposed or being 'outed' for identifying as lesbian, gay, bisexual, transgender or queer (LGBTQ). Many teens are not 'out' to their family and community; therefore, revealing their sexual identity to their peers may result in reluctance to participate

in the activity. In addition, a 2016 study completed by the National Judicial Education Program Legal Momentum stated that LGBTQ youth may have trouble recognising they are victims of relationship violence due to relationship violence being commonly defined within a heterosexual context.

When conducting this activity, the assumption is that if students raise their hands to identify unhealthy behaviours, they are doing so to identify these behaviours in their friends or peers' relationships. However, students could be raising their hands because they have witnessed or experienced these violent behaviours at home. Another limitation includes the inability to assess how many relationships have/are unhealthy, by simply tallying the number of hands raised. Students raising their hands could all be identifying their knowledge of one, single relationship, or multiple behaviours and relationships, in which unhealthy behaviours are occurring.

It might be easy to sit back and be content with the stereotypical notions of rural and urban areas (such as dominant religious and political belief systems); however, every community is rooted in its own unique cultural norms and values. These qualities may have a significant impact on why participants do or do not raise their hands during the activity. While it is out of this project's scope to assess the contributing cultural factors, it is an area for further research.

In conclusion, a comprehensive approach is necessary to prevent the violence before it starts. Parents and school administrators are not solely responsible for creating change. Policymakers play a significant role in preventing TDV. In 2018, at least 23 states had laws that allow, urge or require school boards to develop or include curricula on TDV (NCSL, 2018). Further research by academics and practitioners is necessary to better understand the root causes of violence and its effects as well as to develop prevention education curricula that illustrate the largest impact and positive outcomes.

References

Baiden, P., Mengo, C. and Small, E. (2019) 'History of physical teen dating violence and its association with suicidal behaviors among adolescent high school students: Results from the 2015 Youth Risk Behavior Survey', *Journal of Interpersonal Violence*, 36(17–18): NP9526–NP9547.

Bonomi, A.E., Anderson, M.L., Nemeth, J., Rivara, F.P. and Buettner, C. (2013) 'History of dating violence and the association with late adolescent health', *BMC Public Health*, 13(1): 2–3.

CDC (Centers for Disease Control and Prevention) (2021) 'Preventing teen dating violence', *Centers for Disease Control and Prevention*, 5 March [online] Available from: https://www.cdc.gov/ [Accessed 16 July 2021].

Community Solutions to Sexual and Domestic Violence: Virginia (2004) 'Unit 2: Addressing teen dating violence', *Building Healthy Relationships Across Virginia*, 27 October [online] Available from: https://www.communitysolutionsva.org/index.php/resources/item/building-healthy-relationships-across-virginia [Accessed 5 May 2013].

Davis, J.P., Ports, K.A., Basile, K.C., Espelage, D.L. and David-Ferdon, C.F. (2019) 'Correction to: Understanding the buffering effects of factors on the relationship between adverse childhood experiences and teen dating violence perpetration', *Journal of Youth and Adolescence*, 48(12): 14–15.

Dubey, E. (2021) 'Our public health approach', *Jana's Campaign* [online] Available from: https://www.janascampaign.org/about-us.html [Accessed 16 July 2021].

ERS (Economic Research Service) (n.d.) 'USDA ERS: rural definitions', *US Department of Agriculture*, [online] Available from: https://www.ers.usda.gov/data-products/rural-definitions/rural-definitions/#Data%20sources%20from%20the%20U.S.%20Census%20Bureau [Accessed 19 July 2021].

Family Violence Prevention Fund and Advocates for Youth (2004) 'Women's health', *Michigan Medicine – University of Michigan Health* [online] Available from: http://www.med.umich.edu/whp/newsletters/summer04/p03-dating.html [Accessed 16 July 2021].

Lewis, S.H. (2003) 'Unspoken crimes: Sexual assault in rural America', *National Sexual Violence Resource Center* (NSVRC), 3–16. Available from: https://www.nsvrc.org/sites/default/files/Publications_NSVRC_Booklets_Unspoken-Crimes-Sexual-Assault-in-Rural-America%20.pdf [Accessed 24 October 2022].

loveisrespect.org (2015) 'Dating Abuse Statistics' [online] Available from: http://www.loveisrespect.org/wp-content/uploads/2015/02/Dating_Abuse_Statistics.pdf [Accessed 8 November 2022].

Madigan, S., Ly, A., Rash, C.L., Van Ouytsel, J. and Temple, J.R. (2018) 'Prevalence of multiple forms of sexting behavior among youth', *JAMA Pediatrics*, 172(4): 327–335.

Mulford, C. and Giordano, P.C. (2008) 'Teen dating violence: A closer look at adolescent romantic relationships', *National Institute of Justice*, 26 October [online] Available from: https://nij.ojp.gov/topics/articles/teen-dating-violence-closer-look-adolescent-romantic-relationships [Accessed 16 July 2021].

National Judicial Education Program (2016) 'LGBTQ issues in teen dating violence', *Legal Momentum*, 5 April [online] Available from: http://www.legalmomentum.org/njep-resources-teen-dating-violence [Accessed 9 September 2021].

NCSL (National Conference of State Legislatures) (2018) 'Teen dating violence', *National Conference of State Legislatures*, 11 October [online] Available from: https://www.ncsl.org/research/health/teen-dating-violence.aspx [Accessed 16 July 2021].

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749.

Santaularia, J., Johnson, M., Hart, L., Haskett, L., Welsh, E. and Faseru, B. (2014) 'Relationships between sexual violence and chronic disease: a cross-sectional study', *BMC Public Health*, 14(1): 1–7.

Smith, S.G., Zhang, X., Basile, K.C., Merrick, M.T., Wang, J., Kresnow, M. and Chen, J. (2018) *The National Intimate Partner and Sexual Violence Survey (NISVS): 2015 Data Brief – Updated Release*, Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Temple, K.M. (2018) 'The ruralness of domestic and intimate partner violence: Prevalence, provider knowledge gaps, and healthcare costs', *The Rural Monitor*, 17 October [online] Available from: https://www.ruralhealthinfo.org/rural-monitor/rural-domestic-violence/ [Accessed 16 July 2021].

Vagi, K.J., Rothman, E.F., Latzman, N.E., Tharp, A.T., Hall, D.M. and Breiding, M.J. (2013) 'Beyond correlates: A review of risk and protective factors for adolescent dating violence perpetration', *Journal of Youth and Adolescence*, 42(4): 633–649.

College Students' Perceptions of Interpersonal Violence

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Introduction

Interpersonal violence is a common issue around the globe. Per a study conducted by the World Health Organization (WHO, 2021) from 2000 to 2018 – focusing on women and girls, from 161 countries, aged 15 years and older – one in three women have experienced violence at least once during their lifetime, and approximately 25 per cent of women in the United States have experienced violence. Estimates of interpersonal violence victimisation in rural areas are similar to estimates in urban spaces, while some studies suggest higher rates of victimisation within rural communities (Breiding et al, 2009) due to the emphasis on informal social controls (Carrington, 2007) specific to rural culture (Rennison et al, 2013).

Approximately 5.3 million females and 3.2 million males report experiencing physical abuse each year (Park and Kim, 2019). Reportedly, 20–30 per cent of college students fall victim to varying forms of violence (Ameral et al, 2020) for reasons related to socialisation, relationship conflict, substance use, limited problem-solving skills, among others (Cranney, 2015; Giordano et al, 2020). These statistics likely go underreported for several reasons, including a limited understanding of what constitutes violence by college students (Elmquist et al, 2016), and in rural locations, less willingness to help survivors as an attempt to 'mind one's own business' (Donnermeyer, 2015). This chapter seeks to understand college students' perceptions of interpersonal violence through use of video vignettes portraying various forms of interpersonal violence. Furthermore, the chapter aims to find whether educational programmes influence these perceptions. This information is important for supporting higher learning institutions in responding to and

reducing Title IX issues on college campuses, which 'protects students from sexual harassment in educational programs or activities' (Title IX of the Education Amendments of 1972, 20 U.S.C. §1681).

Defining and understanding perceptions of interpersonal violence

The World Health Organization defines interpersonal violence as 'any behaviour within an intimate relationship that causes physical, psychological, or sexual harm' (WHO, 2012: 1). Physical violence includes more recognisable acts of violence such as beating, hitting, kicking and slapping (WHO, 2012). Psychological harm, often referred to as emotional abuse, is described as attitudes, behaviours and verbal aggression that controls, dominates, humiliates, intimidates or threatens a partner (Jennings et al, 2017). Sexual violence includes 'forced sexual intercourse and other forms of sexual coercion' (WHO, 2012: 1). Some propose a broader definition of partner violence that emphasises behaviour 'that may hurt the other partner, without the other partner's explicit [informed and free-willed] consent' (Winston, 2016: 97). While both women and men experience victimisation by partners or ex-partners, men are most frequently perpetrators than victims. Men residing in rural places often rely on other men to maintain the patriarchal status quo by preventing formal reporting of instances of interpersonal violence (DeKeseredy and Schwartz, 2009).

College students frequently experience interpersonal violence, arguably at a rate higher than the general population. The transition to college creates a separation from one's social supports as freshmen experience their first real opportunity to make decisions independent from parental guidance (Forke et al, 2008). Freshmen women are more vulnerable to violence due to activities that frequently accompany freedom from parental oversight, such as excessive alcohol consumption and limited knowledge of how to avoid situations posing an increased risk for sexual assault (Cranney, 2015). Additionally, most assaults are perpetrated by individuals known to the victim, with stranger assaults even less common in rural locations (Annan, 2006) including students at rurally located colleges and universities (Gray et al, 1988). Some college students report experiencing sexual arousal and exploring their sexuality as a motive for engaging in interpersonal violence (Elmquist et al, 2016).

Common factors increasing the risk of dating violence among college students also include exposure to violence in one's home of origin, gender, and poor emotional or mental health (Kaukinen, 2014). The college environment also brings together a number of cultural norms, some of which may play a direct role in the likelihood and/or type of interpersonal violence manifestation (WHO, 2009). While these cultures and social groups are broad

and varied, many share common traits influencing interpersonal violence behaviour; these include ignoring or legitimising interpersonal violence, maltreatment or domineering by one gender over the other, prevalent alcohol and/or drug abuse, and unhealthy stereotypes regarding gender and sex, often involving toxic concepts of masculinity (WHO, 2009: 4–5). In addition, women in rural areas tend to experience violence more frequently and more severely than women in urban areas, with less access to resources (Peek-Asa et al, 2011). Despite the increased risk of victimisation, college students may not identify all forms of interpersonal violence as abuse.

Research conducted by Elmquist et al (2016) measured motivations of college-aged students to engage in physical dating violence. The research team recruited students enrolled in undergraduate university psychology courses, who were at least 18 years of age and in a dating relationship for at least one month. The research team used the Revised Conflict Tactics Scales, developed by Straus et al (1996), to assess whether participants had, within the past year, perpetrated violence including injury, negotiation, physical aggression and sexual coercion. Findings indicated undergraduates recognise engagement in behaviours that align with physical and sexual violence but often dismiss actions indicative of psychological abuse. Based on this research, if perpetrators of violence are unaware of their engagement in psychological abuse, victims may also be unlikely to recognise this abuse.

The role of Title IX in preventing interpersonal violence

Title IX of the Education Amendments of 1972 (Title IX), codified as 20 U.S.C. 1681, provides: '[n]o person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance'. Most relevant to the issue of interpersonal violence, the Title IX mandate prohibiting discrimination on the basis of sex requires schools to prevent and remedy sexual harassment and sexual violence such as rape, sexual assault, sexual battery and sexual coercion (US Department of Education, 2020; 2021). Title IX applies to educational and extracurricular activities at all public schools and universities, plus virtually all private schools (US Department of Education, 2020). Thus, compliance with Title IX is of heightened concern for academic institutions.

To comply with the Act's mandate, which is necessary to receive Department of Education funds, institutions must act prospectively and retrospectively to ensure the absence of all forms of sex-based discrimination. Prospectively, institutions must establish procedures for addressing and disciplining sex-based discrimination, including interpersonal violence, as it arises and must have individuals in place to ensure institutional compliance with Title IX (US

Department of Education, 2020; 2021). Retrospectively, when institutions become aware of sex-based discrimination, interpersonal violence included, immediate action to eliminate the discrimination, prevent recurrence and remedy lasting effects is required (US Department of Education, 2020; 2021). A greater understanding of how students attending educational institutions perceive sex-based discrimination in the forms of sexual harassment and sexual violence benefits prospective and retrospective action alike. By better understanding why certain forms of interpersonal violence are, or are not, recognised as such by the student population, educational entities may engage in more informed, preventative measures. Similarly, greater knowledge on student perceptions of interpersonal violence allows entities to be more tactful and effective when responding to Title IX issues.

Role of educational programmes for increasing understanding of interpersonal violence

An increasing body of literature has considered the importance of educational programming to inform high school and college-aged students about interpersonal violence. Bystander intervention programmes are gaining momentum to both inform and teach students on ways to intervene in situations of rape and sexual assault (Alegría-Flores et al, 2017). These programmes have proven effective at decreasing rape myths and informing or teaching about rape and sexual assault (Powers and Leili, 2018). As feminist theories contend, stereotypes of gender roles in rural places results in heightened support of rape myths (Belknap, 2020) and more recent research has confirmed traditional gender role acceptance to be a strong predictor of rape myth acceptance (King and Roberts, 2011). Social norms–based programming as a teaching method has been effective at challenging and changing underlying causes of violent and non-violent interpersonal violence behaviour identified by prior researchers (see Forke et al, 2008; Kaukinen, 2014; Cranney, 2015; Elmquist et al, 2016). This programming is especially relevant to the study at hand. Many cultural and societal causes of interpersonal violence targeted by prior social norms based educational programmes are prevalent on rural US college campuses, for example: alcohol abuse, excessive control and/or tolerance of interpersonal violence among romantic relationships, sex and gender based stereotyping, and harmful concepts of masculinity (WHO, 2009: 6–7).

Research, however, indicates that the use of educational programmes may not be as effective as would be desired. Levine et al (2020) argue that bystander intervention lacks effectiveness during emergencies; for example, when rape is occurring or about to occur. Similarly, there is a lack of significant evidence that these programmes increase awareness about other forms of interpersonal violence, such as coercion and control, isolation, and verbal abuse. Specific to

rural college students, some studies have found that acceptance of traditional gender norms influences support of rape myths, yet programming may be ineffective due to these ingrained attitudes (King and Roberts, 2011). Forke et al (2008) argue students who experience interpersonal violence during college are more likely to experience emotional and physical violence than sexual violence. Consequently, educating students about forms of interpersonal violence beyond sexual assault and rape is important to prevent victimisation. Further, while social norm–based programming shows promise in educating on and counteracting these other forms of interpersonal violence, implementation has been limited, leading to difficulty extrapolating strongly therefrom (WHO, 2009: 7). The present research is beneficial in providing further data as to the effectiveness of educational programmes as a teaching method – indicating whether undergraduate students' perceptions of differing forms of interpersonal violence are different for those who have attended an educational programme versus those who have not. These findings have important implications for academic institutions if educational programmes do, in fact, reduce Title IX issues.

Evaluating perceptions of interpersonal violence via vignette methodology

Experimental vignette methodology (EVM) is a research method that presents realistic scenarios, written and/or video, to participants (Aguinis and Bradley, 2014) to measure quantitative and/or qualitative responses. Vignette methodology is commonly used by a variety of professions and fields of study, including communication (Vanden Abeele and Postma-Nilsenova, 2018), management (Jacobsen and Jensen, 2017), medicine (Bhise et al, 2018) and the social sciences (Sleed et al, 2002; O'Dell et al, 2012; Hughey et al, 2017; Olsen et al, 2020).

Sylaska and Walters (2014) suggest most of the research assessing perceptions of interpersonal violence involves vignettes on married or cohabiting adult couples, with few considering relationships between young adults. Further, this research often considers the victim's responsibility for acts of violence. Thus, Sylaska and Walters (2014) sought to study participants' responses to victims of interpersonal violence in the context of dating relationships. Students attending a university participated in this study as part of course requirements. Participants were randomly assigned one of four written vignettes and a questionnaire to measure perceptions of interpersonal violence. Results demonstrated little to no difference in perceptions of interpersonal violence between male and female participants. However, male participants were more likely to blame the victim than female participants. The study also evaluated whether and how participants would respond to victims, including 'likelihood to ignore the situation, encourage the victim

to seek help, and talk to another person about the [interpersonal violence] situation' (Sylaska and Walters, 2014: 140). Participant gender, victim gender and perceptions of responsibility were all significant in predicting whether a participant would ignore the situation. Participant gender and severity of the situation were significant in predicting whether the participant would encourage the victim to get help. Participant gender was the only significant predictor in whether participants would talk to another person about the situation.

Sleed et al (2002) used written and video vignettes to evaluate undergraduates' perceptions of date rape. A convenience sample of 82 participants (58 females, 24 males) were divided into six groups; half of the participants viewed variations of video vignettes and half read written vignettes, with common scenarios about leading someone on, involvement of alcohol and owing someone sex (Sleed et al, 2002: 23). Participants responded to two questions about the scenario. First, did the vignette demonstrate rape? Second, who was to blame for the incident? Demographic questions were asked about 'age, race, gender, and whether the respondent had been raped … or knew anybody who had been raped' (Sleed et al, 2002: 24). If respondents answered yes to either question about rape, they were also asked if they knew their assailant. Findings indicated no gender differences in responses to definitions of rape and placing blame. When comparing responses between the two groups, respondents to the written vignettes were most likely to blame the victim and less likely to define a situation as rape. Sleed et al (2002) argue that the findings demonstrate that stimuli generated by video vignettes affect responses to date rape; though they acknowledge the small sample size may limit the generalisability of the results.

Griffith et al (2010) also used written vignettes to determine whether undergraduates gained knowledge or experienced changed attitudes about date rape after reading vignettes. Students enrolled in four sections of a forensic psychology class were separated into experimental and control groups. The experimental group read vignettes about rape cases, then decided individually and through group discussion whether the vignette depicted rape, and the rationale for their conclusion. The control group was required to develop scenarios depicting rape without reading vignettes. Following both groups' activities, a moderator facilitated discussion on how state statutes define rape. Griffith et al (2010) found the groups in which vignettes were employed demonstrated increased knowledge and more favourable outlooks towards rape victims than the control groups.

Prior studies indicate video vignette research is not entirely effective for recognising gender-based violence when the interpersonal violence under analysis is of a broader, less obvious nature (such as non-rape or sexual assault interpersonal violence). However, studies incorporating EVM do

demonstrate promise for: increasing knowledge; positively changing attitudes on topics pertaining to sexual assault and rape victims; and gaining a greater understanding on student perceptions of, and responses to, interpersonal violence. Thus, the present study utilised a series of video vignettes to measure undergraduate students' perceptions of interpersonal violence.

Current study

The current study was designed and conducted through an Undergraduate Research Experience grant. Three undergraduate students majoring in criminal justice developed this project under supervision of a tenure-track assistant professor. The students completed Collaborative Institutional Training Initiative (CITI)-training and submitted the project for review by the Institutional Review Board. This process included multiple revisions before the project was ready for implementation. The research team developed two research questions for this project:

1. Do undergraduate students from a rural university identify interpersonal forms of dating violence, such as coercion, control, emotional, isolation or verbal behaviours, as abuse?
2. Does participation in educational programmes influence perceptions of interpersonal violence?

The research team compiled a single video, approximately ten minutes in length, using 13 vignettes depicting scenes from television, movies and commercials, representing various forms of interpersonal violence. Each vignette portrayed sexual harassment, physical violence and/or psychological violence, including behaviours such as name-calling, being possessive, controlling, demanding, threatening, isolating or criticising the victim. All vignettes portrayed heterosexual relationships, with the male partner initiating interpersonal violence in 12 (92 per cent) scenes and the female partner initiating violence in one (8 per cent).

Participants

The research team compiled a random selection of 15 face-to-face classes from courses offered at a liberal-arts teaching institution, located in a rural community in the central United States. The selection pool for these classes included lecture-based, upper-division undergraduate (junior and senior level) courses. These parameters were most likely to generate a participant sample of traditional undergraduate students, aged 18–25. Twelve instructors agreed to allow researchers access to classes during the first 20–30 minutes of class time.

Data collection

The research team provided a brief overview of the project to students attending the selected courses. Participants received the anonymous paper survey with instructions to refrain from participating if they had completed the survey in a different class. A member of the research team read the consent statement at the beginning of the survey aloud, stating students were not required to participate, could leave questions unanswered or return a blank survey. Students could leave the room if uncomfortable with the scope of the research. Several students asked for a definition of interpersonal violence. Members of the research team stated a definition would be provided after surveys were collected. This approach ensured students responded to the survey according to their current understanding of interpersonal violence.

The survey included demographic questions about age, gender, sexual orientation, race and ethnicity, academic major or field of study, and history of victimisation for the respondent or someone known by the respondent. The final question asked whether students had exposure to dating or sexual violence education. If so, students were asked for the sponsoring organisation, if known, and where the education occurred (college, high school, church, community programme, and so on). After completing the demographics section, students were shown the video vignettes. While watching the series of 13 video vignettes, students identified whether they believed *each* of the scenes depicted interpersonal violence using a five-point Likert scale ranging from: 1 = strongly disagree the scene demonstrates interpersonal violence; 2 = disagree; 3 = unsure; 4 = agree; and 5 = strongly agree the scene demonstrates interpersonal violence.

After surveys were collected, participants were provided a handout that defined interpersonal violence, included a description of how each of the 13 vignettes demonstrated interpersonal violence, and ended with contact information for the primary investigator and community resources specialising in counselling and victimisation. Research team members went through the handout, emphasised the importance of understanding signs of interpersonal violence within the context of a situation, allowed time for questions from participants, and finished with information on how and where to report if anyone was a victim.

Results

The research team collected surveys from 249 participants. One survey, which included only responses to demographic questions but not the vignettes, was excluded from the sample. The average age of participants was 20.63, with 99.6 per cent within the age range of 19–25. One participant reported being 26 years of age, and that survey was excluded as an outlier beyond the

targeted age group, leaving a sample size of n=247. Participants included 115 males, 131 females and one transgender individual. Race/ethnicity was primarily Caucasian (91.09 per cent) followed by Hispanic (4.86 per cent), Black (2.43 per cent) and Asian (1.62 per cent), which is representative of the traditional on-campus student population at that particular university. Since all participants were on-campus students, the sample consisted of all rurally located individuals.

Sexual orientation was primarily heterosexual (99.19 per cent, n=245), which may not be representative. The number of students who identify as something other than heterosexual is likely greater than indicated from the survey responses. Victimisation of students identifying as something other than heterosexual is often more prevalent in rural areas (Palmer et al, 2012), leading those who identify as 'other' to keep that information private. Lesbian, gay and bisexual students are more likely to experience challenges in their transition to college than heterosexual students while those at rural campuses commonly experience additional challenges (Stroup et al, 2014), providing further explanation of why students may hesitate to report sexual orientation.

Respondents reported enrolment in 18 academic majors, representing programmes from accounting; business administration and management; education including art, early education, elementary, music and secondary education programmes; health and human performance, such as athletic training; nursing; the sciences, including behavioural sciences, such as psychology and social work; hard sciences, such as biology, chemistry and physics; and social sciences, such as criminal justice, history and sociology. The number of participants from each academic major varied considerably due to: (1) the number of classes surveyed from each major; and (2) attendance for each class varying from 7–30 students. For these reasons, the research team did not analyse differences in perceptions of violence across majors.

The final questions captured reported victimisation, including: (1) 'Have you ever been a victim of interpersonal violence?' (32, all female respondents); (2) 'Do you know anyone who has been a victim of interpersonal violence?' (100, including 18 males, 81 females and one transgender respondent); and (3) 'Have you ever attended a session on dating or sexual violence?' (130, including 54 males and 76 females). The survey included additional questions if participants responded yes to attending a session. Specifically, the research team wanted to know what entity sponsored the session and where participants attended.

The research team identified five types of interpersonal violence depicted in the 13 vignettes, including control, isolation, sexual, physical and verbal. The research team refrained from using emotional abuse as a category of violence. Godfrey et al (2021: 4) note 'numerous definitions of emotional and psychological abuse … and the terms are used interchangeably'.

Table 5.1: Undergraduate perceptions of interpersonal violence as reported from survey responses (n/%)

Type of interpersonal violence	Strongly disagree	Disagree	Neutral /unsure	Agree	Strongly agree
Verbal	0%	44/17.81%	111/45.34%	83/34.01%	7/2.83%
Control	0%	44/17.81%	145/59.11%	55/22.67%	1/0.40%
Isolation	0%	23/9.31%	146/59.92%	48/19.43%	28/11.34%
Sexual	0%	12/4.86%	153/62.35%	79/32.39%	1/0.40%
Physical	0%	2/0.81%	17/6.88%	180/73.68%	46/18.62%

Similarly, team members discussed that all forms of interpersonal violence include an element of emotional abuse and therefore decided to focus on less generic behaviours. Table 5.1 indicates most participants disagreed or were unsure whether verbal (63.15 per cent, n=155), controlling (76.92 per cent, n=189) and isolating (69.23 per cent, n=169) behaviours were forms of interpersonal violence.

The number of participants recognising sexual behaviours as interpersonal violence was troubling, as less than two-thirds (62.35 per cent, n=153) were unsure whether the vignettes depicted abuse while only one-third (32.79 per cent, n=80) agreed or strongly agreed. Unsurprisingly, most participants (92.3 per cent, n=226) agreed or strongly agreed that behaviours of a physical nature were interpersonal violence.

These results are problematic for rural students and Title IX officials at rural institutions. Verbal abuse and efforts to control and isolate partners are forms of interpersonal violence (Jennings et al, 2017) and likely the beginning of what may escalate into more severe behaviours. These behaviours perpetuate an abusive culture often minimised and/or accepted in rural areas, reinforcing a patriarchal status quo (DeKeseredy and Schwartz, 2009). If students assume verbal, controlling and isolating behaviours are normal, they are not likely to report to Title IX officials, perpetuating violence.

In addition to measuring undergraduate perceptions of interpersonal violence from students residing in rural communities, the research team was interested in knowing whether educational programmes influence perceptions. We analysed this by identifying whether differences were noted between students who reported attending an educational session about interpersonal violence versus those who did not. Table 5.2 compares perceptions of interpersonal violence for students who attended (n=130) an educational session versus those who did not (n=115) to determine whether there were apparent differences between the groups.

Table 5.2: Influence of attending session on perceptions of interpersonal violence (n/%)

	Strongly disagree or disagree	Unsure	Agree or strongly agree
Verbal			
Attended	11/8.46%	54/41.54%	65/50.00%
Did not attend	32/28.20%	57/49.56%	26/22.24%
Control			
Attended	12/9.23%	75/57.69%	43/33.08%
Did not attend	31/27.35%	70/60.68%	14/11.97%
Isolation			
Attended	6/4.62%	77/59.23%	47/36.15%
Did not attend	17/14.53%	70/60.68%	28/24.79%
Sexual			
Attended	1/0.77%	74/56.92%	55/42.31%
Did not attend	11/9.40%	79/68.38%	25/21.74%
Physical			
Attended	0/0.0%	7/5.38%	123/94.62%
Did not attend	2/1.71%	10/8.55%	103/89.74%

Distinct differences were noted for perceptions of verbal interpersonal violence for students attending an educational session (50 per cent, n=124) compared to those who did not (22.24 per cent, n=55). Similarly, attending an educational session seemed to influence perceptions of interpersonal violence for control (33.08 per cent, n=82) and sexual abuse (42.31 per cent, n=105) compared to 11.97 per cent (n=30) and 22.22 per cent (n=55), respectively, for those who did not. Differences for isolation and physical interpersonal violence, while different, were not as distinct.

The research team conducted an analysis of variance (ANOVA) to identify the actual significance of differences between those who attended an educational session compared to those who did not, as reported in Table 5.3. The model was significant at the $p<0.05$ level and differences were statistically significant for verbal and control forms of interpersonal violence but not isolation, sexual or physical interpersonal violence.

Of the 130 respondents who reported attending an educational session, 92 (71 per cent) indicated the session was facilitated by Jana's Campaign, which is an educational organisation that seeks to reduce gender-based violence. Respondents were divided in terms of where they reportedly attended the session, including during a freshman seminar at the rural university (70 per

Table 5.3: ANOVA for attending session

	F	p Value
Model	**3.38★**	**0.0000**
Verbal	3.55★	0.0152
Control	4.96★	0.0023
Isolation	1.77	0.1541
Sexual	1.15	0.3282
Physical	0.03	0.9924

Note: ★ Significant at $p<0.05$.

cent, n=64) or at their high school (30 per cent, n=28). These results are promising for changing the culture that perpetuates violence in rural areas.

The research team conducted an ANOVA to measure variances in perceptions of interpersonal violence based on the gender of the participant and whether the participant was, or knows, a victim. Results were significant when comparing differences between male and female respondents for control (F, 4.34 at $p<0.0053$) and sexual abuse (6.13 at $p<0.0005$). Results were neither significant when comparing differences for whether the participant was a victim nor if they know a victim.

Discussion

As hypothesised, when defining interpersonal violence, it is common for undergraduate students to directly associate this term with physical abuse. As research suggests, interpersonal violence is a much broader issue and can include not only physical abuse, but sexual and psychological abuse as well. Results confirm that many undergraduates do not identify behaviours such as efforts to isolate a partner, patterns of control and verbal abuse as interpersonal violence. The results support the literature in that control and verbal abuse are often overlooked, dismissed or viewed as less serious forms of abuse (Elmquist et al, 2016); however, students attending an educational session were notably more likely to recognise such behaviours as interpersonal violence. Many students at the participating university identify their hometown as within the state – neighbouring rural communities. It can be speculated that many of the participating students held traditional views about gender roles due to their rural upbringing, and as previous literature has demonstrated, rural culture silences interpersonal violence. The intentional avoidance of rural interpersonal violence issues may have contributed to the current participants' lack of ability to recognise behaviours associated with interpersonal violence.

Elmquist et al (2016) argue that sexual abuse is easily recognised as interpersonal violence by college students. However, most participants in this study were uncertain about sexually motivated interpersonal violence, although there were differences in perception between those who attended an educational session and those who did not. As previous research demonstrates, rural college students endorse attitudes more supportive of rape myths and male-dominating behaviour than their urban counterparts when studying rapes (King and Roberts, 2011). A confounding factor that may have influenced these results is that vignettes about sexual violence did not portray acts of rape. Instead, the vignettes incorporating elements of sexual abuse portrayed a male coercing a female to have sex through: (1) vulgar actions by the male to make his friends believe he had sex with the female; (2) the male changing date plans because his parents were out of town, in an effort to have sex with the female at his house; and (3) the male threatening to make fun of the female to his friends if she did not agree to have sex with him. These results are concerning if the confounding factor did influence responses. An unfortunate consequence of tolerating sexual coercion is that behaviours may escalate to sexual assault or rape. What is encouraging, however, is that students attending an educational session were more likely to view sexual harassment as interpersonal violence, which is arguably more common than rape in college dating relationships. This has important implications for administrators in, prospectively, implementing wide-scale educational programmes that invariably would reduce Title IX issues and, retrospectively, engaging in more effective, informed response. The literature, such as noted by Forke et al (2008), suggests that perceptions of interpersonal violence vary by gender. The findings in this study support those of Forke et al (2008) for perceptions of control and sexual interpersonal violence. However, no statistical significance was noted for isolation, physical or verbal forms of interpersonal violence when comparing responses by gender of participant.

Kaukinen (2014) emphasised the importance of protective factors to buffer the risks prevalent in intimate relationships among college students. A subject of much importance to this research is educating individuals about interpersonal violence. Arguably, educational programmes that promote an increased awareness of signs of interpersonal violence would act as a protective factor. As our findings suggest, education is an important component for ensuring undergraduates are aware of the signs of interpersonal violence, and especially for students harbouring traditional rural beliefs regarding gender norms as they transfer these viewpoints to their newly located college and university experiences. Students attending an educational session about relationship violence were more likely to recognise all types of interpersonal violence than students who did not attend a session. To decrease cases of interpersonal violence, further understanding of what works will need

to be determined. The implications of these findings are important for reducing Title IX issues on college campuses in rural communities across the United States.

References

Aguinis, H. and Bradley, K.J. (2014) 'Best practice recommendations for designing and implementing experimental vignette methodology studies', *Organizational Research Methods*, 17(4): 351–371.

Alegría-Flores, K., Raker, K., Pleasants, R.K., Weaver, M.A. and Weinberger, M. (2017) 'Preventing interpersonal violence on college campuses: The effect of one act training on bystander intervention', *Journal of Interpersonal Violence*, 32(7): 1103–1126.

Ameral, V., Reed, K.M.P. and Hines, D.A. (2020) 'An analysis of help-seeking patterns among college students victims of sexual assault, dating violence, and stalking', *Journal of Interpersonal Violence*, 35(23–24): 5311–5335.

Annan, S.L. (2006) 'Sexual violence in rural areas: A review of the literature', *Family and Community Health*: 29(3): 164–168.

Belknap, J. (2020) *The Invisible Women: Gender, Crime, and Justice*, Los Angeles: SAGE.

Bhise, V., Meyer, A.N., Menon, S., Singhal, G., Street, R.L., Giardina, T.D. et al (2018) 'Patient perspectives on how physicians communicate diagnostic uncertainty: An experimental vignette study', *International Journal for Quality in Health Care*, 30(1): 2–8.

Breiding, M.J., Ziembroski, J.S. and Black, M.C. (2009) 'Prevalence of rural intimate partner violence in 16 US states, 2005', *The Journal of Rural Health*, 25(3): 240–246.

Carrington, K. (2007) 'Crime in rural and regional areas', in *Crime in Rural Australia*, Australia: Federation Press. 27–43.

Cranney, S. (2015) 'The relationship between sexual victimization and year in school in US colleges: Investigating the parameters of the "red zone"', *Journal of Interpersonal Violence*, 30(17): 3133–3145.

DeKeseredy, W. and Schwartz, M.D. (2009) *Dangerous Exits: Escaping Abusive Relationships in Rural America*, New Brunswick: Rutgers University Press.

Donnermeyer, J.F. (2015) 'The social organisation of the rural and crime in the United States: Conceptual considerations', *Journal of Rural Studies*, 39: 160–170.

Elmquist, J., Wolford-Clevenger, C., Zapor, H., Febres, J., Shorey, R.C., Hamel, J. et al (2016) 'A gender comparison of motivations for physical dating violence among college students', *Journal of Interpersonal Violence*, 31(1): 186–203.

Forke, C.M., Myers, R.K., Catallozzi, M. and Schwarz, D.F. (2008) 'Relationship violence among female and male college undergraduate students', *Archives of Pediatrics & Adolescent Medicine*, 162(7): 634–641.

Giordano, P.C., Copp, J.E., Manning, W.D. and Longmore, M.A. (2020) 'When worlds collide: Linking involvement with friends and intimate partner violence in young adulthood', *Social Forces*, 98(3): 1196–1222.

Godfrey, D.A., Kehoe, C.M., Bennett, V.E., Bastardas-Albero, A. and Babcock, J.C. (2021) 'Validating measures of emotional abuse with behavioral observations during interpersonal conflict', *Journal of Social and Personal Relationships*, 38(1): 3–18.

Gray, M.D., Lesser, D., Rebach, H. and Hooks, B. (1988) 'Sexual aggression and victimization: A local perspective', *Response to the Victimization of Women & Children*, 11(3): 9–13.

Griffith, J.D., Hart, C.L. and Brickel, M. (2010) 'Using vignettes to change knowledge and attitudes about rape', *College Student Journal*, 44(2): 515–527.

Hughey, M.W., Rees, J., Goss, D.R., Rosino, M.L. and Lesser, E. (2017) 'Making everyday microaggressions: An exploratory experimental vignette study on the presence and power of racial microaggressions', *Sociological Inquiry*, 87(2): 303–336.

Jacobsen, C.B. and Jensen, L.E. (2017) 'Why not "just for the money"? An experimental vignette study of the cognitive price effects and crowding effects of performance-related pay', *Public Performance & Management Review*, 40(3): 551–580.

Jennings, W.G., Okeem, C., Piquero, A.R., Sellers, C.S., Theobald, D. and Farrington, D.P. (2017) 'Dating and intimate partner violence among young persons ages 15–30: Evidence from a systematic review', *Aggression and Violent Behavior*, 33: 107–125, https://doi.org/10.1016/j.avb.2017.01.007

Kaukinen, C. (2014) 'Dating violence among college students: The risk and protective factors', *Trauma, Violence, & Abuse*, 15(4): 283–296.

King, L.L. and Roberts, J.J. (2011) 'Traditional gender role and rape myth acceptance: From the countryside to the big city', *Women & Criminal Justice*, 21(1): 1–20.

Levine, M., Philpot, R. and Kovalenko, A.G. (2020) 'Rethinking the bystander effect in violence reduction training programs', *Social Issues and Policy Review*, 14(1): 273–296.

O'Dell, L., Crafter, S., de Abreu, G. and Cline, T. (2012) 'The problem of interpretation in vignette methodology in research with young people', *Qualitative Research*, 12(6): 702–714.

Olsen, O.K., Heesch, P.V., Søreide, C. and Hystad, S.W. (2020) 'Trust after just 45 seconds? An experimental vignette study of how leader behavior and emotional states influence immediate trust in strangers', *Frontiers in Psychology*, 10, DOI: 10.3389/fpsyg.2019.02921.

Palmer, N., Kosciw, J. and Bartkiewicz, M. (2012) 'Strengths and silences: The experiences of lesbian, gay, bisexual and transgender students in rural and small town schools' [online] Available from: https://www.glsen.org/sites/default/files/2019-11/Strengths_and_ Silences_2012.pdf [Accessed 2 September 2021].

Park, S. and Kim, S.H. (2019) 'Who are the victims and who are the perpetrators in dating violence? Sharing the role of victim and perpetrator', *Trauma, Violence, & Abuse*, 20(5): 732–741.

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1759.

Powers, R.A. and Leili, J. (2018) 'Bar training for active bystanders: Evaluation of a community-based bystander intervention program', *Violence Against Women*, 24(13): 1614–1634.

Rennison, C.M., DeKeseredy, W.S. and Dragiewicz, M. (2013) 'Intimate relationship status variations in violence against women: Urban, suburban, and rural differences', *Violence Against Women*, 19(11): 1312–1330.

Sleed, M., Durrheim, K., Kriel, A., Solomon, V. and Baxter, V. (2002) 'The effectiveness of the vignette methodology: A comparison of written and video vignettes in eliciting responses about date rape', *South African Journal of Psychology*, 32(2): 21–28.

Straus, M.A., Hamby, S.L., Boney-McCoy, S. and Sugarman, D.B. (1996) 'The Revised Conflict Tactics Scales (CT@2): Development and preliminary psychometric data', *Journal of Family Issues*, 17(3): 283–316.

Stroup, J., Glass, J. and Cohn, T.J. (2014) 'The adjustment to US rural college campuses for bisexual students in comparison to gay and lesbian students: An exploratory study', *Journal of Bisexuality*, 14(1): 94–109.

Sylaska, K.M. and Walters, A.S. (2014) 'Testing the extent of the gender trap: College students' perceptions of and reactions to intimate partner violence', *Sex Roles*, 70: 134–145, DOI: 10.1007/s11199-014-0344-1.

US Department of Education (2020) 'Sex–based harassment', US Department of Education [online] Available from: https://www2.ed.gov/about/offices/list/ocr/frontpage/ pro-students/ issues/sex–issue01.html [Accessed 12 May 2021].

US Department of Education (2021) 'Sex discrimination', US Department of Education [online] Available from: https://www2.ed.gov/about/offices/list/ocr/ frontpage/faq/sex.html [Accessed 12 May 2021].

Vanden Abeele, M.M. and Postma-Nilsenova, M. (2018) 'More than just gaze: An experimental vignette study examining how phone-gazing and newspaper-gazing and phubbing-while-speaking and phubbing-while-listening compare in their effect on affiliation', *Communication Research Reports*, 35(4): 303–313.

WHO (World Health Organization) (2009) 'Changing cultural and social norms that support violence', World Health Organization [online] Available from: https://apps.who.int/iris/handle/ 10665/44147 [Accessed 24 May 2021].

WHO (2012) 'Understanding and addressing violence against women: Intimate partner violence', World Health Organization [online] Available from: https://apps.who.int/iris/bitstream/handle/10665/77432/WHO_RHR_12.36 _eng.pdf?sequence=1 [Accessed 11 June 2021].

WHO (2021) 'Violence against women', Fact Sheet, World Health Organization [online] Available from: https://www.who.int/news-room/fact-sheets/detail/ violence-against-women [Accessed 19 May 2021].

Winston, Z. (2016) 'A new definition of partner violence', *Aggression and Violent Behavior*, 28: 95–102.

PART II

Beyond the Rural/Urban Divide: Critical Issues in Gender-based Violence

'Trying to Avoid Coyotes': The Nexus of Rurality, Violence and Inequality

Amy M. Magnus

Introduction

Despite the popularised idyll of rural life, domestic violence transcends community contexts and geographies. The Department of Justice's Office on Violence Against Women defines domestic violence as:

> [V]iolence committed by a current or former spouse or intimate partner of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitation with the victim as a spouse or intimate partner, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction. (U.S. Department of Justice – Office on Violence Against Women, 2021)

Estimates suggest 25 per cent of all women will endure domestic and/or intimate partner violence at some point in their lives, with approximately three women killed by their husbands or boyfriends each day in the United States (CDC, 2020; Futures Without Violence, 2021). Domestic violence impacts people of all races, cultures, gender identities, sexual orientations and relationship types. Yet, scholarship routinely focuses on metropolitan women's experiences of domestic violence even though rural women and women of marginalised identities are disproportionately impacted.

This chapter expounds the intersection of rurality, domestic violence and social inequality. Specifically, this chapter delineates what is known about domestic violence in rural locales and the ways it disproportionately impacts

those most vulnerable. To humanise rural domestic violence scholarship, the chapter leverages my own community-based, action-oriented ethnographic research to highlight several survivors' lived experiences of domestic violence in their rural western United States community. Importantly, survivors' lived experiences raise awareness about the unique, intersectional dimensions of rural domestic violence. From this, the chapter offers suggestions for ways to better address rural domestic and gendered violence, offering a path forward for future scholarship and social action.

The interface of rurality and domestic violence

Rurality is a critical dimension of the social world. Rural community contexts have been under study for decades, with rural poverty and economics, housing and food insecurity, transportation, racial justice and Indigenous rights being some of the most central areas of study. Rural crime, criminal justice and social justice are also blossoming areas of international scholarship, with domestic violence no exception (Rennison et al, 2013; Carrington et al, 2014). Criminologists, sociologists and sociolegal scholars are increasingly taking interest in the rural landscape by demonstrating the unique hardships and inequities rural regions face, coupled with compelling ways resource mobilisation and social change take place in these locales (see Donnermeyer and DeKeseredy, 2008; Pruitt et al, 2018; Magnus and Advincula, 2021). Gagné's (1992; 1996) research in the Appalachian region of the United States was some of the first to expose rural women's lived experiences of domestic and gendered violence in rural regions. Thereafter, international research on this important social problem began to surface and shape scholarly and local conversations about rural domestic violence and responses to such violence (see Wendt, 2009; Chatterji et al, 2020). Recently, rural life has been thrust to the forefront of social and political conversations, with many of these discussions centring on inequity and hardship that is unique from metropolitan locales.

There is great disparity between the lived experiences of rural and metropolitan domestic violence (Peek-Asa et al, 2011; Zorn et al, 2017). Importantly, rates of domestic violence are more pronounced in rural communities; yet resource accessibility is especially limited. This is magnified in light of the COVID-19 global pandemic in which survivors have spent much more time in close proximity with abusers and had access to even fewer community resources and social supports than prior to the pandemic (Hansen and Lory, 2020). Even before the pandemic, however, rural survivors faced extreme isolation, higher incidence of recurrent and severe intimate partner violence compared to metropolitan survivors, and limited access to reliable transportation and community resources like emergency shelters and domestic violence advocacy (Peek-Asa et al, 2011).

Carrington et al (2014) find that hypermasculinity, ascription to gendered stereotypes and sexism, and cultural forces normalising rural domestic and gendered violence are highly characteristic of rural regions. Magnus and Donohue (2021) corroborate this finding, demonstrating that rural police do not take domestic violence seriously due to close relationships with abusers and shared flippancy about this kind of violence. Remote communities face even more dire hardship and experiences with intimate partner and family violence (Zorn et al, 2017). In particular, Indigenous people living in remote regions are especially vulnerable to these forms of violence and gaps in support. Given this knowledge, it is essential to consider the community contexts that shape rural domestic violence and the political dynamics that complicate navigation and help-seeking (Ragusa, 2012).

Rural community contexts present dire complications for people navigating domestic violence in rural regions. Small towns often yield intimate, close-knit dynamics, yet this reality can magnify and inflame one's lived experience of domestic violence (DeKeseredy and Schwartz, 2009). For example, rural abusers, especially those who are men, rely heavily on their friendships and social capital in the community to excuse their abuse and maintain control over their partner. This is especially true in terms of their relationships with police who may respond to domestic violence calls for service (Benson, 2009). Banyard et al (2019) find that while survivors' social networks can be a pivotal resource in their separation from an abusive relationship, rurality complicates this reality. Magnus and Donohue (2021) build upon this finding by demonstrating that rural domestic violence survivors must 'lay low aggressively' in smaller communities in order to avoid interaction with their abuser and the abuser's social network, stalking from the abuser, and persistent verbal, emotional and physical violence. To do so, they routinely cut off social ties, stay in one safe place for prolonged periods, and avoid accessing basic necessities and resources within their community. This is an especially concerning reality for rural survivors, such that rurality, in itself, exacerbates the lived experiences of domestic violence.

Lived experiences of rural domestic violence

Scholarship must give voice to the lived experiences of rural domestic violence. Using community-based action research, I spent one year in a rural western United States town called Lewis[1] from March 2018 to March 2019. I served as a volunteer at the Lewis Social Service Centre (LSSC), a non-profit organisation that centralises social services for domestic violence survivors, people experiencing poverty, housing and food insecurity, and

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[1]   To protect confidentiality, all names used for communities, organisations and research participants are pseudonyms.

other vulnerabilities. The town is 70 miles west of the nearest metropolitan city, with vast desert and mountainous terrain dividing the two communities. The town is predominantly White but, like many rural regions in the United States, is increasingly diversifying with greater numbers of Indigenous, Black, Latinx (a term used to describe people who are of or relate to Latin American origin or descent, it is a gender-neutral or non-binary alternative to Latino or Latina) and Asian communities moving to the town throughout the last decade.

Data include 47 semi-structured interviews with LSSC clients and key community stakeholders, field notes and arts-based visual ethnography. As part of the interview process, client interviewees captured photos using a disposable camera to document their lived experiences of vulnerability in a rural region, which is a frequently used form of community-based/participatory research (Greene et al, 2018; Golden, 2020). Presenting participants' photos in this way provides a sense of the interviewee's artistic lens as well as how the photos contribute to the content of the interview. Survivors centre most of their photos and interviews around the complexities of navigating domestic violence in Lewis. In the following, I highlight Carly, Gabriela, and Josephine's documentation of the impact of small-town politics, logistical challenges of both staying in and leaving abusive circumstances, and the complexities of garnering social support in rural environments.

Carly

Carly is a White woman who has lived in predominantly White rural communities; she has been in and out of abusive relationships throughout her life. She came to LSSC in 2018 seeking domestic violence advocacy services and support to obtain a temporary protection order against her ex-husband. She describes the unique ways rurality influences coercion and control, arguing that 'traditional values' and the 'good ole' boys' network' insidiously shapes the culture around gender, marriage and violence against women, in particular. To express her lived experience with domestic violence, Carly uses Figure 6.1, which depicts the abusive names and comments she endured.

> 'I always got stuck with these guys who treated me like crap. This [points to Figure 6.1] shows everything that I've gone through with all of those [abusive] relationships I've been in, whether they were physical, verbal, whatever. These were the names I was getting called. I felt stuck, like I was never going to be with anyone [who loved me] … [my ex-husband] was telling me I was fat, I was dumb. … [I] had other exes that were telling me I was worthless, I would never find

Figure 6.1: The abusive names and comments Carly endured
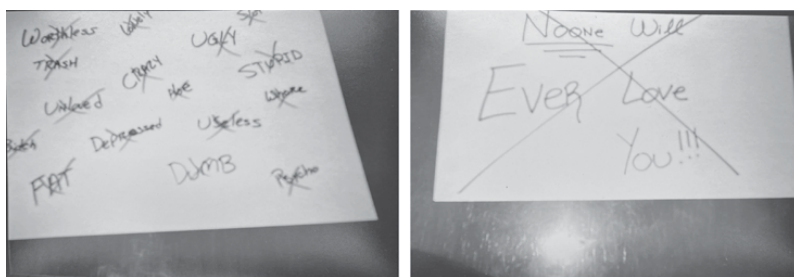
Note: The image on the left shows the abusive language targeted towards Carly. The image on the right shows the abuser's effort to shame Carly into believing she is unloveable

> anyone, I was trash, I was a slut, I would stay lonely forever, I was crazy, I was psycho, things like that. … I crossed out [the words in Figure 6.1] because I learned my worth getting away from that relationship.' (Carly, interview, 13 February 2019)

Carly argues that navigating domestic violence in a rural community presents unique challenges. She notes the isolation survivors face is magnified for several key reasons. Survivors have access to few resources in rural communities. Even with access to LSSC's domestic violence advocacy programme in Lewis, she also asserts that intimate social networks in rural communities, local law enforcement's flippant attitude towards responding to domestic violence, and the 'good ole' boys' network' fosters a culture that allows abusers to continue their behaviour. This reality maintains a frustrating culture of secrecy and complacency around domestic, sexual and other forms of gendered violence in rural communities:

> 'I felt like I [couldn't] reach out to anyone about it … there was no one that I feel like I could talk to about it … his mom worked at the prison with my dad, so it was like a big issue, and then his dad was in the oil fields like on the higher ups, so everyone knew his family, so I kind of felt if I turned to anyone or had him arrested, it was gonna come back on me negatively – he said a lot of bad things about me so a lot of people talked, but at that point, I just didn't even care. I deleted all social media. I didn't want to hear from anyone. It was definitely hard because I had friends and I felt like I couldn't go out with them or talk to them or do anything.' (Carly, interview, 13 February 2019)

Deciding to leave an abusive relationship is often tumultuous but, in a rural community, it can be especially dangerous and/or require extensive planning

Figure 6.2: Carly: Victim's mobile phone represents the struggle to make the call to request help to escape her abuser

(DeKeseredy and Schwartz, 2009). Carly uses Figure 6.2, a photo of her cell phone, to further describe her lived experiences of rural domestic violence and the moment she realised she wanted to leave. Figure 6.2 is multi-symbolic for Carly. First, the photo helps her express the social isolation she experienced as a result of her ex-husband's control. For example, she recalls being 'pulled away' from her family. Second, the picture of her cell phone symbolises her strength required to, in her words, 'make the call' to leave the relationship despite her fears about the way the community would perceive her. She describes the moments leading up to her decision to make the call to leave the relationship:

> 'He tried to tell me we couldn't go hang out with my family anymore and, even though he's my brother's best friend, he tried to pull me away from my family … he would take my phone, he wanted me just to stay at home under his control … and so, one time I asked him to go to my brother's because it was my niece's birthday, and he was like, "We're not going." So I packed all my shit and left that day like I found my strength and was like, "Okay I need to do this …". I made the call.' (Carly, interview, 13 February 2019)

Carly is one of many domestic violence survivors in Lewis who faced social isolation, verbal and physical violence, and patriarchal dynamics that shaped

her lived experiences of domestic violence. While many domestic violence survivors share similar experiences, Carly underscores the unique influence of rurality in these dire situations. Gabriela, another survivor in Lewis, expands upon this core theme to demonstrate the ways rurality exacerbates one's lived experiences of domestic violence.

Gabriela

Gabriela is a Mexican–American woman who grew up in the rural northwestern United States, landing in Lewis as a teenager. When we met, she was separated from her abusive husband who regularly physically and verbally abused her, talked down to her and their two children, and damaged her vehicle to maintain control over her whereabouts. She and her children were living with her parents in Lewis for safety, but still feared her husband's motives and believed he was capable of extreme violence because of her decision to leave. Having lived in Lewis for approximately 15 years, she describes the town's intimate social dynamic that shaped her husband's abusive tactics. Even further, she asserts that Lewis's vast geography presents concerning barriers to her help-seeking and escape strategies:

> 'It's hard because everybody knows everybody here. I had nowhere to run to. Every time we get into a fight, I try to leave and take a walk and try to give us some space and he'd follow me and try to stop me. There's no sidewalks here, there's nothing – nowhere really for me to go here except walk in the street down the road somewhere … we lived on the south side of town so there's nowhere really for me to go … it's basically just walking through the desert somewhere, trying to avoid coyotes … the closest thing to my place would be a gas station, and that's it, so I can't just sit there, that'd be considered loitering since I didn't have money and I don't have a reason to be there.' (Gabriela, interview, 5 February 2019)

Gabriela taps into the ways expansive geography and underdeveloped infrastructure contribute to her lived experiences of rural domestic violence. Additionally, she unearths the contentious relationship between needing access to public space for safety and capitalistic barriers to seeking such relief. Especially in rural communities where public spaces are far away or non-existent, Gabriela asserts that both geographic and political forces shape vulnerability beyond domestic violence. People who are unhoused, impoverished and/or lack transportation, for example, must also navigate the sparse resources in Lewis. Gabriela uses Figure 6.3 to illustrate the harmful ways vulnerability, rurality and domestic violence intersect.

Figure 6.3: Gabriela: Victim's car represents efforts by abuser to isolate victim

'[T]here's no bus system and we didn't have a vehicle … he ruined both of my cars. This is the car that my husband damaged [points to Figure 6.3]. He would take out the fuses out of the car so I couldn't drive … he did that lots of times. Even when he went to work, he would take out the fuses so I couldn't leave the home. Like, what if I have to go to the doctor that morning and I have the kids with me? He didn't care. He was controlling.' (Gabriela, interview 5 February 2019)

Gabriela had been living with her parents for approximately seven months at the time of our interview. Yet, she still feared her husband's abuse, even with her parents' support and being able to move into their home. Despite these lingering feelings of anxiety and fear, Gabriela elucidates the importance of having a place to escape to during the height of the violence. In alignment with DeKeseredy and Schwartz's (2009) findings, escaping abusive relationships in rural communities presents unique challenges because of the intimate nature of small communities, limited access to safe housing options, and increased likelihood of continued and/or escalated abuse. Gabriela describes this aspect of her own lived experience using Figure 6.4.

'[My kids and I] like to take rocks and do little pictures [or] make little words out of it … it's really all you can do in the yard because there's nothing but dirt and rocks … there's really nothing much for them to do. [In Figure 6.4], we were making a heart [to symbolise how] my

Figure 6.4: Gabriela: Heart made from stones represents safety for the victim and her children

parents' house was such a better situation. … I feel more safe there, my kids are safe there. I can leave my kids with my parents and know that they're safe … I don't trust [my husband].' (Gabriela, interview, 5 February 2019)

Like Gabriela, Josephine also describes her lived experience of rural domestic violence in reference to protecting herself and also protecting and empowering her two daughters. Yet, as a Latina, Josephine also channels the cultural, familial and religious pressures to stay in the abusive relationship, despite its physical and emotional impact on her and her children.

Josephine

Josephine is of dual heritage and is a Christian woman who identifies as Latina. Growing up in the southwestern United States, she notes that she has lived in both rural and metropolitan areas, magnifying her lived experience of domestic violence in Lewis where she has little social support and an abuser with political power in the community. Like Carly and Gabriela, Josephine experienced physical, verbal and emotional abuse throughout her time in Lewis. She, too, navigated social isolation and stigmatisation, housing and financial insecurity, fear of escalated violence, and gendered stereotyping upon her escape. She argues that her family's culture and her Christian upbringing shaped her willingness to tolerate

her husband's abuse, recalling her family's reaction to her separation from her abusive husband:

> '[I]t was hard for me to leave my husband because I was so prideful [because of our family's culture and being a Christian] … when I first left him, my mom told me, "Go back to your husband, what's wrong with you?" … because we had our house paid for by the church. It was easier, but it wasn't necessarily right, you know?' (Josephine, interview, 25 January 2019)

Josephine did end up leaving the relationship, but experienced extreme fear upon doing so. Josephine did not have a social support network in Lewis, yet her husband had many strong connections in the community. He would circulate rumours about her being addicted to drugs, her capabilities as a mother, and would try to influence where she was hired in the community.

Upon leaving, Josephine came to LSSC with her two daughters to seek safety. Soon thereafter, Josephine moved into Lewis's LSSC-run, three-bedroom house that operated as the only women's domestic violence shelter to serve Lewis and the surrounding rural region. At the time of our interview, Josephine had lived in the shelter for approximately four months and was in the process of applying for a Section 8 housing voucher to obtain her own housing. Using Figure 6.5, she recalls the key reasons she decided to leave – centring her choices on the empowerment of her daughters and rebuilding her own self-worth following the domestic violence.

> 'When we first got [to the shelter], I had met an older woman and she started calling me and my kids "the three musketeers." [My daughters and I] put our hands in and [we say] "teamwork!" It's what I do to encourage my [oldest] daughter especially … that started at the beginning of us getting [into the shelter]. … When you leave [domestic violence] with your children, they don't know how to process that either. A lot of the time they, and you, worry about money, how you're gonna make it … my [oldest daughter] would worry like that … but you can't. … I think that's how we've managed to get through. Simple little stuff like that [points to Figure 6.5] – encouraging us to work together. … It's hard to do it and it's a lot to take on but imagine what that child thinks of you. … Like, for [leaving an abusive situation] … that's power.' (Josephine, interview, 25 January 2019)

Josephine's lived experiences demonstrate the fraught, intersectional politics of rural domestic violence. Her culture, religious upbringing and her

Figure 6.5: Josephine: Photo represents empowerment for the victim and her children for successfully leaving their abuser

husband's social capital in town shaped her lived experience of domestic violence as well as what it was like to leave the relationship. However, scholarship on rural domestic violence typically does not elevate experiences like Josephine's. This is a key lacuna in rural domestic violence research, such that people – particularly women – of different races, nationalities, cultures, documentation statuses, and so forth, face unique dimensions of domestic violence and distinct barriers to help-seeking and resource accessibility. Although this chapter conveys the stories of only three people, their stories are not uncommon. The research on which this chapter is based corroborates previous scholarly findings, indicating that vulnerable groups experience many of the same challenges as Carly, Gabriela and Josephine. However, these experiences often remain in the shadows of rural domestic and gendered violence scholarship, social policy and community-level responses.

The shadows of rural domestic and gendered violence scholarship

The lived experiences of people with marginalised identities routinely exist within the shadows of domestic violence scholarship, social policy and community-level responses to domestic and gendered violence.

Scholarship notoriously centres predominantly White, heteronormative, ableist depictions of domestic and gendered violence. Yet, recent rural studies and social justice efforts demonstrate that Indigenous people, Black and Brown communities, immigrant communities, people with disabilities, and the lesbian, gay, bisexual, transgender and queer community routinely suffer from heightened domestic and gendered violence and stigmatisation compared to more commonly studied White women in heteronormative relationships (Ragavan et al, 2018). For example, Indigenous women are significantly more likely to be killed by an intimate partner than more commonly studied White women, with some estimates indicating they are eight times more likely than White women to be killed by an intimate partner (Zorn et al, 2017; Gauthier et al, 2021). In 2017, the United States Centers for Disease Control and Prevention found that nearly 48 per cent of surveyed American Indian and Alaska Native women had experienced intimate partner violence in their lifetime. Because of community remoteness, Indigenous women are significantly less likely than metropolitan or micropolitan women to seek help or have adequate access to advocacy and emergency services.

Few (2005) finds that Black and White women experience domestic violence, help-seeking and resource provision differently because of intersectional experiences of racism, sexism and rurality. For example, rural police are more likely to inform White women about domestic violence resources than Black women. Black women are also less likely to report domestic violence and sexual assault, seek out resources or utilise shelter services long-term if they do not trust formal authorities (Tillman et al, 2010). This is a finding corroborated by Valandra et al (2019: 1) in which rural Black women experiencing domestic violence have a 'heightened awareness of race, gender, and class differences'. Immigrant communities also face a heightened awareness of their identity in rural regions because of their documentation status and fears and/or direct threats of deportation from community members and law enforcement (Messing et al, 2015; Gómez Cervantes and Menjívar, 2020).

Because of intersecting facets of one's race, gender, sexual orientation, abilities and citizenship status, for example, the lived experiences, help-seeking choices and resources available to these particularly vulnerable groups remain largely invisible in political and scholarly conversations (Crenshaw, 1991). This reality is intimately tied to histories of trauma, discrimination and violence within geographic pockets of high and persistent rural poverty throughout the United States (Tickamyer et al, 2017). Most notably, the rural southern Black Belt, the United States/ Mexico border regions, Appalachia, American Indian reservations and the Southern Highlands experience the highest rates of chronic, generational poverty, resource deprivation and structural inequality in the rural United

States. Focusing on vulnerable communities in conversations about rural violence sheds light on the ways these communities face and respond to unique obstacles, despite the lack of structural support to navigate their vulnerability.

Considerations for promoting structural social change

Producing structural and community-level social change for rural domestic violence survivors must be a top priority. Infrastructural resources, such as public transportation, consistent and accessible social services, community outreach campaigns, grassroots organisers and initiatives, and adequate housing, deserve greater government and community-level investment. Additionally, rural communities should consider the benefits and logistics of establishing a de-identified, undisclosed domestic violence shelter, mobile domestic violence services that can reach remote regions, and a 24/7 domestic violence hotline. These resources can ameliorate the dire threats survivors face and help institutionalise community support for domestic violence resources. These are critical considerations for local and higher-level governments, as well as social service providers.

Future research on rural domestic violence must continue to centre people with marginalised identities. Although this body of work is indeed growing internationally, scholars must continue to forge new paths for understanding the intersectional lived experiences for people at the margins of society – especially those at social margins *and* geographic margins. To do so, rural scholars must work closely with communities to determine their most essential needs and use their research to help local people pursue desired social change. Using community-based, participatory, action-oriented research approaches, for example, can enable rural communities to build collaborations and trust with researchers in the pursuit of shared goals. Additionally, more direct examination of the relationship between rurality and religion, law enforcement and the 'good ole' boys' network' is needed in order to better grapple with the lived realities of rural domestic violence. These are important considerations for researchers, community leaders and organisers who hope to create positive social change for those most vulnerable in rural regions.

References

Banyard, V., Edwards, K.M., Moschella, E.A. and Seavey, K.M. (2019) '"Everybody's really close-knit": Disconnections between helping victims of intimate partner violence and more meneral helping in rural communities', *Violence Against Women*, 25(3): 337–358.

Benson, S. (2009) 'Failure to arrest: A pilot study of police response to domestic violence in rural Illinois', *American University Journal of Gender, Social Policy and the Law*, 17(3): 685–703.

Carrington, K., Donnermeyer, J.F. and DeKeseredy, W.S. (2014) 'Intersectionality, rural criminology, and re-imaging the boundaries of critical criminology', *Critical Criminology*, 22: 463–477.

CDC (Centers for Disease Control and Prevention) (2020) 'Fast facts: Preventing intimate partner violence', [online] Available from: https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html [Accessed 5 May 2021].

Chatterji, S., Stern, E., Dunkle, K. and Heise, L. (2020) 'Community activism as a strategy to reduce intimate partner violence (IPV) in rural Rwanda: Results of a community randomised trial', *Journal of Global Health*, 10(1): 1–17.

Crenshaw, K. (1991) 'Mapping the margins: Intersectionality, identity politics, and violence against women of color', *Stanford Law Review*, 43(6): 1241–1299.

DeKeseredy, W. and Schwartz, M. (2009) *Dangerous Exits*: *Escaping Abusive Relationships in Rural America*, New Brunswick: Rutgers University Press.

Donnermeyer, J.F. and DeKeseredy, W. (2008) 'Toward a rural critical criminology', *Journal of Rural Social Sciences*, 23(2): 4–28.

Few, A.L. (2005) 'The voices of black and white rural battered women in domestic violence shelters', *Family Relations*, 54(4): 488–500.

Futures Without Violence (2021) 'Get the facts', [online] Available from: http://www.futureswithoutviolence.org/resources-events/get-the-facts/ [Accessed 7 June 2021].

Gagné, P.L. (1992) 'Appalachian women: Violence and social control', *Journal of Contemporary Ethnography*, 20(4): 387–415.

Gagné, P.L. (1996) 'Identity, strategy, and feminist politics: Clemency for battered women who kill', *Social Problems*, 43(1): 77–93.

Gauthier, R.G., Francisco, S.C., Khan, B. and Dombrowski, K. (2021) 'Social integration and domestic violence support in an Indigenous community: Women's recommendations of formal versus informal sources of support', *Journal of Interpersonal Violence*, 36(7–8): 3117–3141.

Golden, T. (2020) 'Reframing photovoice: Building on the method to develop more equitable and responsive research practices', *Qualitative Health Research*, 30(6): 960–972.

Gómez Cervantes, A.G. and Menjívar, C. (2020) 'Legal violence, health, and access to care: Latina immigrants in rural and urban Kansas', *Journal of Health and Social Behavior*, 61(3): 307–323.

Greene, S., Burke, K. and McKenna, M. (2018) 'A review of research connecting digital storytelling, photovoice, and civic engagement', *Review of Educational Research*, 88(6): 844–878.

Hansen, J.A. and Lory, G.L. (2020) 'Rural victimization and policing during the COVID-19 pandemic', *American Journal of Criminal Justice*, 45(4): 731–742.

Magnus, A.M. and Advincula, P. (2021) 'Those who go without: An ethnographic analysis of the lived experiences of rural mental health and healthcare infrastructure', *Journal of Rural Studies*, 83: 37–49.

Magnus, A.M. and Donohue, F.A. (2021) 'Reimagining access to justice through the eyes of rural domestic violence survivors', *Theoretical Criminology*, 26(3): 434–455, doi: https://doi.org/10.1177/1362480621 1035103

Messing, J.T., Becerra, D., Ward-Lasher, A. and Androff, D.K. (2015) 'Latinas' perceptions of law enforcement: Fear of deportation, crime reporting, and trust in the system', *Affilia: Feminist Inquiry in Social Work*, 30(3): 328–340.

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749.

Pruitt, L.R., Kool, A.L., Sudeall, L., Statz, M., Conway, D.M. and Haksgaard, H. (2018) 'Legal deserts: A multi-state perspective on rural access to justice', *Harvard Law & Policy Review*, 13: 15–156.

Ragavan, M.I., Thomas, K.A., Fulambarker, A., Zaricor, J., Goodman, L.A. and Bair-Merritt, M.H. (2018) 'Exploring the needs and lived experiences of racial and ethnic minority domestic violence survivors through community-based participatory research: A systematic review', *Trauma, Violence, & Abuse*, 21(5): 946–963.

Ragusa, A.T. (2012) 'Rural Australian women's legal help seeking for intimate partner violence: Women intimate partner violence victim survivors' perceptions of criminal justice support services', *Journal of Interpersonal Violence*, 28(4): 685–717.

Rennison, C.M., DeKeseredy, W.S. and Dragiewicz, M. (2013) 'Intimate relationship status variations in violence against women: Urban, suburban, and rural differences', *Violence Against Women*, 19(11): 1312–1330.

Tickamyer, A.R., Sherman, J. and Warlick, J.L. (eds) (2017) *Rural Poverty in the United States*, New York: Columbia University Press.

Tillman, S., Bryant-Davis, T., Smith, K. and Marks, A. (2010) 'Shattering silence: Exploring barriers to disclosure for African American sexual assault survivors', *Trauma, Violence, & Abuse*, 11(2): 59–70.

U.S. Department of Justice – Office on Violence Against Women (2021) [online] Available from: https://www.justice.gov/ovw [Accessed 11 July 2021].

Valandra, Murphy-Erby, Y., Higgins, B.M. and Brown, L.M. (2019) 'African American perspectives and experiences of domestic violence in a rural community', *Journal of Interpersonal Violence*, 34(16): 3319–3343.

Wendt, S. (2009) 'Constructions of local culture and impacts on domestic violence in an Australian rural community', *Journal of Rural Studies*, 25(2): 175–184.

Zorn, K., Wuerch, M., Faller, N. and Hampton, M. (2017) 'Perspectives on regional differences and intimate partner violence in Canada: A qualitative examination', *Journal of Family Violence*, 32(6): 633–644.

Comparing Characteristics of Rural and Urban Intimate Partner Violence Against Women

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Introduction

Intimate partner violence (IPV) is a critical problem in the United States. Resource availability and cultural differences often exacerbate this problem for victims in rural communities. Despite this, very little research has focused exclusively on understanding the characteristics of IPV in rural communities; much scholarly research on this topic focuses on IPV occurring in urban environments. Some argue that the dearth of studies on rural IPV can be explained, in part, by social scientists, specifically criminologists, considering rural crime less important or serious than urban crime (Weisheit and Donnermeyer, 2000). At the same time, nearly all studies of IPV indicate violence against women occurs across all geographical locations, socioeconomic statuses and demographics (Breiding et al, 2015). Some research suggests women in rural areas experience higher rates of IPV and greater frequency of severe physical abuse than do their urban counterparts (Peek-Asa et al, 2011). Many of these differences can be explained by lack of access to resources, unwillingness of local law enforcement to intervene, and cultural and social norms in rural communities (Breiding et al, 2015). Even though a few studies have observed differences in IPV prevalence, frequency and severity by rurality, important gaps in knowledge exist regarding differences and similarities between rural and urban IPV (Lanier and Maume, 2009; Peek-Asa et al, 2011). To better understand these gaps, this chapter examines differences in incident characteristics of IPV against women in rural and urban locales.

This chapter uses incident–level crime victimisation data from the National Incident–Based Reporting System (NIBRS) and county–level data from the US Census Bureau's 2018 American Community Survey. Although not yet nationally representative due to lack of formal reporting requirements by law enforcement agencies, NIBRS is an ideal dataset to use because of its breakdown of crime incident data into distinct subcategories, which allows greater reporting specificity, and its more nuanced offence definitions compared to the previously used Summary Reporting System (SRS) (NIBRS, 2016). NIBRS helps law enforcement and researchers efficiently develop a clearer picture and deeper understanding of the patterns and characteristics of violence against women. NIBRS is especially useful for researchers interested in studying rural domestic violence as law enforcement agencies can be linked to Census population demographic information. Much of the existing literature has analysed domestic violence, and more specifically, IPV, at the state level, which does not account for the importance of context and specific geographies (Truman and Morgan, 2014). This chapter utilises NIBRS data from 2016 (the most current data publicly available) to examine IPV incident characteristics between rural and urban counties. These characteristics include the type of offence (murder, sexual assault, aggravated assault, simple assault and intimidation); injury type; the presence of a firearm; whether an arrest was made; whether prosecution declined to prosecute the case; and whether the victim refused to cooperate with authorities. These analyses will contribute to a better understanding of often overlooked dynamics of rural IPV. This is one of the first studies to examine rural IPV on a broader national scale utilising crime incident–based data. Understanding the differences in rural and urban IPV against women has significant implications for local and state policy, including the provision of treatment services and law enforcement response.

Variations in types and levels of intimate partner violence

The Centers for Disease Control and Prevention define IPV as 'physical, sexual, and psychological harm inflicted by a current or former partner' (CDC, 2013). The most common type of offence in IPV arrests is physical violence. In addition, minor and major injuries are reported in nearly half of cases that come to the attention of police. A recent study (Durfee and Fetzer, 2016) utilised 2010 NIBRS data and found that of the 220,506 incidents of IPV, approximately 83.5 per cent were physical assaults (9.9 per cent for aggravated assault and 37.4 per cent for simple assault), followed by intimidation (15.3 per cent) and sexual assault (1.1 per cent). The authors also found that 50 per cent of cases in their sample did not involve an injury, about 48 per cent of cases involved a minor injury, and 2 per cent involved a major injury. As an important caveat, some studies pointed out that injuries

resulting from sexual assaults may go undetected by police (McFarlane et al, 2005), which could have implications for the underrepresentation of injuries resulting from sexual assaults (see also Durfee and Fetzer, 2016). These data, of course, only capture physical injuries and not psychological trauma resulting from assaults. To date, no study has disaggregated offence type or presence of injury across the urban versus rural context in their samples of IPV.[1]

Some research has identified important differences in the type, frequency and severity of IPV across county type. Specifically, rural counties have been shown to have higher rates of sexual assault while victims in urban counties are more likely to suffer from physical abuse and sexual assault (Grossman et al, 2005; Rennison et al, 2012). In addition, victims in rural locales report a higher frequency of and more severe IPV incidents compared to victims in urban areas (Logan et al, 2003; 2005; 2007; Shannon et al, 2006; Peek-Asa et al, 2011; Edwards, 2015). With one exception (Madkour et al, 2010), studies have found rural counties have higher rates of intimate partner homicide (IPH) compared to urban locales (Kentucky Attorney General's Task Force on Domestic Violence Crime, 1993; Gallup-Black, 2005; Beyer et al, 2013; Gillespie and Reckdenwald, 2017; Reckdenwald et al, 2018). While one study of male veterans found those experiencing posttraumatic stress disorder (PTSD) were more likely to experience and perpetrate IPV resulting in injury compared with those without PTSD (Teten et al, 2009; Angkaw et al, 2013), this research did not disaggregate IPV by type of locale. None of these studies used a nationally representative sample of IPV cases.

The current landscape of rural intimate partner violence research

Prior research suggests that rates of IPV were similar regardless of the level of rurality, although rates of more serious forms of IPV, including IPH, were higher in rural settings than in urban and suburban settings (Edwards, 2015). Urban areas are widely considered to be prone to greater incidence of violence than rural areas because of their overall crime rates (Ward et al, 2018), but only three of eight studies that focused on differences in IPV by rurality, using nationally representative samples, found that rates of IPV were higher in urban settings than in rural settings (see Truman and Morgan, 2014). The same victimisation surveys used in those studies showed the incidence of IPV in rural settings was similar to or lower than IPV incidences in urban settings; however, these studies were limited, since 'rural' included

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[1] A more recent study using NIBRS data (see Goodson and Bouffard, 2020) combined aggravated assault, simple assault and intimidation into a general assault outcome measure, which did not allow the authors to assess differences in those specific variables across urban and rural locales.

both isolated rural areas and nonmetropolitan areas (DuBois, 2020). A recent study discovered that women from small towns (the more urbanised portions of nonmetropolitan areas) were at greater risk of IPV than women residing in dispersed rural areas and urban areas (DuBois et al, 2019; DuBois, 2020). An additional study found women in urban and large rural towns reported lower prevalence of IPV, while women in isolated rural areas and small rural towns reported a higher prevalence (Peek-Asa et al, 2011). The same study reported the frequency and severity of IPV increased with rurality; thus, women living in isolated rural areas reported higher frequency and severity of IPV than urban women (Peek-Asa et al, 2011).

Although studies have found women in urban areas experience IPV at much higher rates than rural women, the latter are at greater risk of experiencing violent victimisation and more chronic and severe forms of IPV than are their urban and suburban counterparts (Bachman and Carmody, 1994; DuBois et al, 2019; Albright et al, 2020). Residing in rural settings has been shown to increase the risk of victimisation for women from racially, socially or socioeconomically marginalised backgrounds. For example, multiracial women residing in rural locations experienced more assaults than multiracial women in urban locations (Dragiewicz and DeKeseredy, 2012; Breiding et al, 2015). A separate study found rural White women reported greater rates of victimisation and involvement in violent relationships compared to White women and African American women from urban areas (Logan et al, 2007). One study utilised NIBRS data to identify IPV victim and offender characteristics in Massachusetts and found that out of 9,711 IPV incident reports, almost all (99 per cent) of the perpetrators were male and most victims and offenders were White (Thompson et al, 1999).

Most IPV studies that incorporated community contexts in their analyses have prioritised urban settings, which could contribute to the practice of generalising findings from urban IPV studies to apply to rural areas (Edwards, 2015; Goodson and Bouffard, 2020). More research is needed to determine the differences in the characteristics of IPV by rurality to help inform policy, resource allocation and proactive response by law enforcement (Brieding et al, 2014).

Current study

The purpose of this chapter is to build on the existing literature with a national-level analysis that examines differences in IPV characteristics across mostly rural and mostly urban counties in the United States. There have been a dearth of studies utilising NIBRS data to study IPV, in general, and rural IPV, specifically, despite the dataset being a rich source of information for researchers interested in studying rural IPV. The few existing studies had generally a state-level focus, which ignores the importance of localised

context. In addition, none of the national–level analyses have evaluated differences in risk and predictive factors, types, severity and frequency of IPV by rurality. Examining these factors on a local and national scale can help inform our understanding of the unique characteristics of rural IPV and the important associated policy implications.

Data

The data for this chapter comes from two sources: NIBRS and the US Census. The NIBRS data will provide information on all reported IPV crime incidents among participating law enforcement agencies. Data from the Census will provide information about county–level rurality.

National Incident-Based Reporting System

Collected and maintained by the Federal Bureau of Investigation (FBI) and implemented in 1991 as a supplement to the Uniform Crime Reporting Program's aggregate SRS, the NIBRS data collection system compiles data on all crimes reported by participating state, local and federal law enforcement agencies (Akiyama and Nolan, 1999; Dunn and Zelenock, 1999; Addington, 2019). Currently, 43 states are NIBRS-certified, and about two-thirds of the more than 18,000 law enforcement agencies in the United States are contributing detailed data inputs as required by NIBRS. All federal and at least 45 tribal agencies are receiving training and technical assistance to also become NIBRS certified. NIBRS is now referred to as the 'new normal', as the FBI has shifted away from SRS to using NIBRS, which began on 1 January 2021 (Addington, 2019). NIBRS provides data-rich opportunities for practitioners and researchers and serves as one of the most detailed resources available for studying the characteristics associated with IPV on a broad national scale. Because NIBRS collects detailed information on each criminal incident and each offence that occurs within an incident, the data also provide crucial details about incidents of IPV.

Victim–level data on interpersonal violence are available from NIBRS. First, to define 'intimate partner', we examined only those cases where the victim/offender relationship was classified as a spouse, ex-spouse, common law spouse, boyfriend/girlfriend or same-sex relationship. IPV is operationalised as offences that include murder, sexual assault, aggravated assault, simple assault or intimidation. We examined characteristics of other incidents for differences between rural and urban jurisdictions, including whether a firearm was present during a victimisation and whether the victim sustained any injuries. We also examined clearance-related outcomes for IPV victimisations, including whether law enforcement made an arrest and whether the case was 'cleared exceptionally'. Exceptional clearance types of

interest to the current study include whether prosecution declined or the victim refused to cooperate.

Census

The Census Bureau utilises a definition based on population density and other measures of development when identifying urban and rural territories. These definitions of urban/rural are updated each decennial census and are available for every county in the US from the American Community Survey (ACS) five-year estimates. We utilised data from the ACS 2016 estimates that provided information on the per cent of land use classified as rural for each county in the United States. We dichotomised this variable into *mostly rural* and *mostly urban*. Mostly rural counties included those designated more than 50 per cent rural. Mostly urban counties were classified as less than or equal to 50 per cent rural. About 44 per cent of agencies were in mostly rural counties and 56 per cent of agencies were in mostly urban counties.

This study

All analyses were performed in Stata 16. We utilised a series of Chi square tests with adjusted residuals to compare differences in the key variables of interest stratified by mostly rural counties or mostly urban counties.

Results

There were 330,052 female victimisations involving IPV in 2016. Approximately 71 per cent of these were classified as simple assaults. About 14 per cent were identified as aggravated assault, and less than 2 per cent included sexual assault. Murder accounted for less than 1 per cent of victimisations and about 13 per cent included intimidation. Slightly more than 2 per cent of victimisations included the presence of a firearm, though it should be noted that a firearm may not have been fired, such as if the victim was pistol-whipped. More than half (54 per cent) of IPV victimisations led to the arrest of the offender. For those cases that were cleared exceptionally, 52 per cent had victims who refused to cooperate and 48 per cent were due to the prosecution declining to pursue the case though the exact reasons for declining to prosecute are unknown in the data. About 40 per cent of IPV victimisations did not result in an injury while 56 per cent indicated a minor injury. Slightly less than 4 per cent involved a serious injury.

The majority of victimisations occurred in mostly urban counties, while 15 per cent occurred in mostly rural counties. To assess whether there were differences in offence types and other incident characteristics between urban

and rural counties, we utilised a series of Chi square tests. The results are presented in Table 7.1.

All offence types were statistically significant. When comparing the observed and expected frequencies for the most serious forms of IPV,

Table 7.1: Chi square results with adjusted residuals comparing rural and urban intimate partner violence characteristics

Locale	Mostly rural				Mostly urban	
	Observed f	Expected f	Residual		Observed f	Expected f
Offence type						
Murder	80	56	3.71	★	292	316
Sexual assault	766	716	2.29	★	3,988	4,037
Aggravated assault	5,738	5,410	3.09	★	30,185	30,512
Simple assault	26,900	27,710	–8.46	★	157,084	156,000
Intimidation	5,397	5,807	–6.94	★	30,442	30,033
Total	**32,291**				**221,582**	
Firearm presence						
Present	1,147	966	6.41	★	5,299	5,480
Not present	39,489	39,670			225,336	225,000
Total	**40,636**				**230,635**	
Arrest						
Arrested	22,965	21,483	15.97	★	120,447	122,000
Not arrested	17,671	19,153			110,188	109,000
Total	**40,636**				**230,635**	
Exceptional clearance						
Prosecution declined	1,260	1,437	–6.99	★	8,386	8,209
Victim refused cooperation	1,749	1,572			8,806	8,983
Total	**3,009**				**17,192**	
Injury type						
None	13,481	13,618	–1.64		78,780	78,643
Minor	19,567	19,467	1.18		112,318	112,000
Severe	1,427	1,390	1.09		7,992	8,029
Total	**34,475**				**199,090**	

Note: ★$p<0.01$.

including murder, sexual assault and aggravated assault, the observed frequencies were greater than expected for these offences in mostly rural counties compared to the observed or expected frequencies in mostly urban counties. The observed frequencies for simple assault and intimidation were higher than expected in mostly urban counties compared to mostly rural counties. This national-level finding – that more serious forms of physical violence are more likely to occur in rural jurisdictions – is supported by prior, more localised research on rural domestic violence (see, for example, DuBois et al, 2019). It is possible that the likelihood of reporting incidents of IPV could, in part, explain this finding. For example, women in rural areas may be less likely to report 'less serious' forms of violence such as simple assault or intimidation as they may not want to face the stigma that victims of IPV may encounter in a rural community where people are likely to know one another. Similarly, a female survivor may be concerned that reporting 'less serious' forms of IPV may lead to stigma and social ostracism of her intimate partner. In addition, female victims in rural communities may be less likely to report due to an increased likelihood of the victim and/or offender being well acquainted with local law enforcement officers.

Next, we examined whether there were any differences related to the presence of a firearm in mostly rural and mostly urban counties. The findings indicate that the observed frequency of the presence of a firearm during an IPV victimisation is significantly higher in rural communities than the expected frequency when compared to mostly urban jurisdictions. As mentioned previously, the presence of a firearm does not necessarily indicate that it was discharged, though it could have been used to injure the victim in another way. NIBRS does not contain information on gunshot wounds. The finding that the presence of firearms is greater in rural counties than in urban counties is supported by prior research that indicates the availability of guns is much higher in rural communities than in urban areas. In fact, a Pew Research Centre poll found that almost half of adults surveyed who lived in rural communities indicated they owned a gun compared to about 28 per cent of adults who lived in the suburbs and less than 20 per cent who lived in urban areas (Igielnik, 2017). Individuals who grew up in rural areas were more likely to be exposed to guns at an earlier age than those who grew up in urban jurisdictions. There also seems to be a much stronger culture around gun ownership in rural areas, reinforced by male socialisation surrounding hunting (Hall–Sanchez, 2018). One potential explanation for our finding that the observed frequency of a firearm during an IPV victimisation is significantly higher than the expected frequency is the greater availability of guns in rural areas. Another is that the presence of a firearm is related to the seriousness of the offence. As mentioned, women in rural areas may be less likely to report less serious forms of violence and more likely to report serious IPV incidents, which may be more likely to involve a firearm.

Next, we examined whether there were any significant differences in clearance types between mostly rural and mostly urban counties. For clearances through arrests, findings indicate that arrests in mostly rural counties occurred significantly more frequently than expected compared to mostly urban counties. This finding was contrary to our hypothesis, given some prior research that showed arrest tends to be viewed less favourably for incidents of IPV in rural areas compared to urban areas (Carlson and Worden, 2002). Again, this may be a function of the types of IPV that are reported in rural areas. Law enforcement officers will have less discretion in arresting a perpetrator when the offence is serious (such as incidents involving aggravated assaults).

We also examined rural/urban differences in IPV victimisations that were cleared exceptionally.[2] For victimisations that were cleared exceptionally, we found a greater frequency of victims in rural areas than expected who refused to cooperate with law enforcement when compared to mostly urban counties. A victim refusing to cooperate may indicate a desire to shield her intimate partner from arrest or that she anticipates the stigma, social ostracism or rejection that may be associated with IPV victims (Overstreet and Quinn, 2013). This stigma can be the result of societal beliefs, especially in rural areas, that delegitimise people who are the victims of abuse, especially if IPV is viewed as simply a 'marital problem' (Naughton et al, 2015).

Finally, we examined whether there were any significant differences in the severity of victim injuries between mostly rural and mostly urban counties. Although a greater proportion of both minor and severe injuries occurred in mostly rural jurisdictions than in mostly urban counties, the differences were not statistically significant. This finding is somewhat surprising, given that more serious forms of IPV occurred at greater frequency in mostly rural counties. These forms of violence may be associated with injurious behaviour, especially aggravated assault. However, sexual violence often does not result in outward injuries, as many women may feel that fighting back or resisting could result in other serious injuries (Bourke, 2012).

Discussion and implications

Interpersonal violence is a critical problem in the United States. Resource availability and cultural differences often exacerbate this problem for victims in rural communities. These differences include limited access to support services, geographical isolation, transportation barriers, the stigma of abuse, lack of availability of shelters and poverty (Overstreet and Quinn, 2013).

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[2] Exceptional clearances include the death of an offender, prosecution declined, offender in custody in another jurisdiction, and victim refused to cooperate.

The purpose of this chapter was to examine urban and rural differences in incidents of IPV involving female victims, who are the most common victims, according to law enforcement data (more than 75 per cent of victims in NIBRS are female). This book is one of the first to examine differences in rural/urban IPV on a broad national scale. NIBRS incident data can offer unique insights into the experiences of victims of IPV in various community contexts. We found significant differences in the experience of IPV across mostly rural and mostly urban counties. In mostly rural communities, IPV tended to be associated with greater levels of violence in the form of more serious assaults, including murder, rape and aggravated assaults. In addition, firearms were more likely to be present in mostly rural counties. Finally, arrests and victims refusing to cooperate occurred in rural jurisdictions.

Based on these findings, IPV in rural communities tends to be more violent, deadlier and leads to victims being less likely to cooperate with authorities. Access to support services are crucial in the recovery process. Building partnerships between community-based services, healthcare organisations and domestic violence advocacy groups can help build a comprehensive response for abuse victims. This can help identify ways to increase their personal safety and assess particular risk factors. In addition, the COVID-19 pandemic has led to the widespread adoption of virtual services given mandatory social distancing requirements. Virtual services can help increase access to services that have traditionally been cut off due to resource deprivation and geographic isolation. In addition, given the widespread availability of and access to firearms in rural jurisdictions, public safety officials need to ensure anyone with domestic violence-related pending charges or convictions should not have access to firearms.

Although our study provides important insight into violence against women in rural communities, it is not without limitations. First, NIBRS data are not yet nationally representative, which limits generalisability. Agencies that do report tend to be in smaller jurisdictions. Second, in examining arrest outcomes we were not able to consider the presence of children or prior acts of IPV since there is no way to track this in NIBRS. Future research could examine rural and urban differences in the characteristics of IPV in same-sex relationships compared to opposite-sex relationships.

References

Addington, L.A. (2019) 'NIBRS as the new normal: What fully incident-based crime data mean for researchers', in M. Krohn, N. Hendrix, G. Penly Hall and A. Lizotte (eds) *Handbook on Crime and Deviance*, New York: Springer, pp 21–33.

Akiyama, Y. and Nolan, J. (1999) 'Methods for understanding and analyzing NIBRS data', *Journal of Quantitative Criminology*, 15(2): 225–238. http://dx.doi.org/10.1023/a:1007531023247

Albright, D.L., McDaniel, J., Godfrey, K., Carlson, C., Fletcher, K.L. and Thomas, K.H. (2020) 'Intimate partner violence among service members and veterans: Differences by sex and rurality', *Traumatology*. https://doi.org/10.1037/trm0000236

Angkaw, A.C., Ross, B.S., Pittman, J.O.E., Kelada, A.Y., Valenderina, M.A.M. and Baker, D.G. (2013) 'Post-traumatic stress disorder, depression, and aggression in OEF/OIF veterans', *Military Medicine*, 178(10): 1044–1050. DOI: 10.7205/MILMED-D-13-00061

Bachman, R. and Carmody, D.C. (1994) 'Fighting fire with fire: The effects of victim resistance in intimate versus stranger perpetrated assaults against females', *Journal of Family Violence*, 9: 317–331. https://doi.org/10.1007/BF01531942

Beyer, K.M., Layde, P.M., Hamberger, L.K. and Laud, P.W. (2013) 'Characteristics of the residential neighborhood environment differentiate intimate partner femicide in urban versus rural settings', *The Journal of Rural Health*, 29(3): 281–293.

Bourke J. (2012) 'Sexual violence, bodily pain, and trauma: A history', *Theory, Culture & Society*, 29(3): 25–31. https://doi.org/10.1177/0263276412439406

Breiding, M.J., Chen, J. and Black, M.C. (2014) *Intimate Partner Violence in the United States − 2010*, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention [online] Available from: https://www.cdc.gov/violenceprevention/pdf/ cdc_nisvs_ipv_report_2013_v17_single_a.pdf [Accessed 4 April 2021].

Breiding, M.J., Basile, K.C., Smith, S.G., Black, M.C. and Mahendra, R.R. (2015) *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*, Version 2.0, National Center for Injury Prevention Control, Centers for Disease Control and Prevention [online] Available from: https://www.cdc.gov/violenceprevention/pdf/ ipv/intimatepartnerviolence.pdf [Accessed 9 September 2021].

Carlson, B.E. and Worden, A.P. (2002) *Public Opinion About Domestic Violence*, unpublished manuscript, Albany, University of Albany.

CDC (Centers for Disease Control and Prevention) (2013) *Intimate Partner Violence: Definitions* [online] Available from: www.cdc.gov/violenceprevention/intimatepartnerviolence/ definitions.htm [Accessed 4 April 2021].

Dragiewicz, M. and DeKeseredy, W.S. (2012) 'Claims about women's use of non-fatal force in intimate relationships: A contextual review of Canadian research', *Violence Against Women*, 18(9): 1008–1026. https://doi.org/10.1177/1077801212460754

DuBois, K.O. (2020) 'Rural isolation, small towns, and the risk of intimate partner violence', *Journal of Interpersonal Violence*:37(5–6): 1–23. https://doi.org/10.1177/0886260520943721

DuBois, K.O., Rennison, C.M. and DeKeseredy, W.S. (2019) 'Intimate partner violence in small towns, dispersed rural areas, and other locations: Estimates using a reconception of settlement type', *Rural Sociology*, 84(4): 826–852. https://doi.org/10.1111/ruso.12264

Dunn, C.S. and Zelenock, T.J. (1999) 'NIBRS data available for secondary analysis', *Journal of Quantitative Criminology*, 15(2): 239–248. http://dx.doi.org/10.1023/a:1007583007317

Durfee, A. and Fetzer, M.D. (2016) 'Offense type and the arrest decision in cases of intimate partner violence', *Crime & Delinquency*, 62(7): 954–977.

Edwards, K.M. (2015) 'Intimate partner violence and the rural–urban–suburban divide: Myth or reality? A critical review of the literature', *Trauma, Violence, & Abuse*, 16(3): 359–373.

Gallup-Black, A. (2005) 'Twenty years of rural and urban trends in family and intimate partner homicide: Does place matter?', *Homicide Studies*, 9(2): 149–173.

Gillespie, L.K. and Reckdenwald, A. (2017) 'Gender equality, place, and female-victim intimate partner homicide: A county-level analysis in North Carolina', *Feminist Criminology*, 12(2): 171–191. DOI: 10.1177/1557085115620479

Goodson, A. and Bouffard, L.A. (2017) 'The rural/urban divide: Examining different types of assault through a social disorganization lens', *Journal of Interpersonal Violence*, 35(17–18): 3530–3553. DOI: 10.1177/0886260517711179

Grossman, S.F., Hinkley, S., Kawalski, A. and Mangrave, C. (2005) 'Rural versus urban victims of violence: The interplay of race and region', *Journal of Family Violence*, 20: 71–81. https://doi.org/10.1007/s10896-005-3170-y

Hall-Sanchez, A.K. (2018) 'Male hunting subcultures and violence against women', in W.S. DeKeseredy, C.M. Rennison and A.K. Hall-Sanchez (eds) *The Routledge International Handbook on Violence Studies*, London: Routledge, pp 329–338. https://doi.org/10.4324/9781315270265-31

Igielnik, R. (2017) 'Rural and urban gun owners have different experiences, views on gun policy' [online], Available from: https://policycommons.net/artifacts/617793/rural-and-urban-gun-owners-have-different-experiences-views-on-gun-policy/1598659/ [2 April 2021].

Kentucky Attorney General's Task Force on Domestic Violence Crime (1993) *Domestic Violence Fatalities: A Statistical Report*, October, Frankfort, KY: State Printing Office.

Lanier, C. and Maume, M.O. (2009) 'Intimate partner violence and social isolation across the rural/urban divide', *Violence Against Women*, 15(11): 1311–1330.

Logan, T.K., Walker, R., Cole, J., Ratliff, S. and Leukefeld, C. (2003) 'Qualitative differences among rural and urban intimate violence victimization experiences and consequences: A pilot study', *Journal of Family Violence*, 18: 49–66. https://doi.org/10.1023/A:1022837114205

Logan, T.K., Shannon, L. and Walker, R. (2005) 'Protective orders in rural and urban areas: A multiple perspective study', *Violence Against Women*, 11: 876–911. https://doi.org/10.1177/1077801205276985

Logan, T.K., Cole, J., Shannon, L. and Walker, R. (2007) 'Relationship characteristics and protective orders among a diverse sample of women', *Journal of Family Violence*, 22: 237–246. https://doi.org/10.1007/s10896-007-9077-z

Madkour, A.S., Martin, S.L., Halpern, C.T. and Schoenbach, V.J. (2010) 'Area disadvantage and intimate partner homicide: An ecological analysis of North Carolina counties, 2004–2006', *Violence and Victims*, 25(3): 363–377.

McFarlane, J., Malecha, A., Watson, K., Gist, J., Batten, E., Hall, I. et al (2005) 'Intimate partner sexual assault against women: Frequency, health consequences, and treatment outcomes', *Obstetrics & Gynecology*, 105(1): 99–108.

Naughton, C.M., O'Donnel, A.T., Greenwood, R.M. and Muldoon, O.T. (2015) '"Ordinary decent domestic violence": A discursive analysis of family law judges' interviews', *Discourse & Society*, 26(3): 349–365. doi: 10.1177/0957926514564738.

NIBRS (National Incident-Based Reporting System) (2016) *Benefits of NIBRS Participation* [online] Available from: https://ucr.fbi.gov/nibrs/2016/resource-pages/ benefits-of-nibrs-participation-2016_final.pdf [Accessed 19 March 2021].

Overstreet, N.M. and Quinn, D. (2013) 'The intimate partner violence stigmatization model and barriers to help seeking', *Basic and Applied Social Psychology*, 35(1): 109–22.

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749.

Reckdenwald, A., Szalewski, A. and Yohros, A. (2018) 'Place, injury patterns, and female-victim intimate partner homicide', *Violence Against Women*, 25(6): 654–676. DOI: 10.1177/1077801218797467

Rennison, C.M., DeKeseredy, W.S. and Dragiewicz, M. (2012) 'Urban, suburban, and rural variations in separation/divorce rape/sexual assault: Results from the national crime victimization survey', *Feminist Criminology*, 7(4). DOI: 10.1177/1557085111435660

Shannon, L., Logan, T.K., Cole, J. and Medley, K. (2006) 'Help-seeking and coping strategies for intimate partner violence in rural and urban women', *Violence and Victims*, 21(2): 167–181.

Teten, A.L., Sherman, M.D. and Han, X. (2009) 'Violence between therapy-seeking veterans and their partners: Prevalence and characteristics of nonviolent, mutually violent, and one-sided violent couples', *Journal of Interpersonal Violence*, 24(1): 111–127.

Thompson, M., Saltzman, L. and Bibel, D. (1999) 'Applying NIBRS data to the study of intimate partner violence: Massachusetts as a case study', *Journal of Quantitative Criminology*, 15: 163–180.

Truman, J.L. and Morgan, R.E. (2014) *Nonfatal Domestic Violence, 2003–2012* [online] Available from: https://bjs.ojp.gov/content/pub/pdf/ndv0312.pdf [Accessed 11 March 2021].

Ward, K., Kirchner, E. and Thompson, A.J. (2018) 'Social disorganization and rural/urban crime rates: A county level comparison of contributing factors', *International Journal of Rural Criminology*, 4(1): 43–65. https://doi.org/10.18061/1811/86153

Weisheit, R.A. and Donnermeyer, J.F. (2000) 'Change and continuity in crime in rural America', *Criminal Justice*, 1(1): 309–357 [online] Available from: https://nij.ojp.gov/library/publications/change-and-continuity-crime-rural-america [Accessed 17 May 2021].

Urban and Rural Media Reporting on Violence Against Transgender People

Lisa M. Olson, Marc Settembrino, Sam Allen and Megan Howard

Introduction

In the summer of 2020, six Black transgender women were murdered during a nine-day period in the United States (Devin-Norelle, 2020). Two of these women, Shakiie Peters and Draya McCarty, were Louisiana residents. Though the two murders occurred in very different demographic areas, with Shakiie being killed in a town of under 5,000 and Draya in the state capitol, local media coverage of both deaths was criticised by the victims' friends, families and transgender advocates, for misgendering and deadnaming the victims. The similar treatment of victims despite widely different localities and reporting markets raises questions regarding the ways that different media outlets present transgender victims of violence.

Although approximately 7.1 per cent or 20 million Americans identify themselves as lesbian, gay, bisexual and transgender (LGBT; Jones, 2022) and roughly two million Americans are transgender (Flores et al, 2016), there is a dearth of government data on this segment of the population. For example, the United States Census does not collect gender data beyond the presumed binary of biological sex (Stotzer, 2017). The lack of available data contributes to the invisibility of the trans community and minimises the economic, emotional and physical violence that transgender people experience. Similarly, the Federal Bureau of Investigation's (FBI) Uniform Crime Reporting (UCR), widely recognised as the country's most complete official crime dataset, records gender in the binary. For example, murder victims' sex is reported as Male, Female or Unknown (FBI, 2020a). However, the UCR does include transgender and non-binary people in their hate

crime statistics. In 2019, law enforcement agencies reported fewer than 200 incidents that targeted an individual's gender identity (FBI, 2020b). Advocates argue this is likely a vast undercount of the actual number of incidents, as victimisation data suggests that fewer than half of hate crime incidents are reported to the police (OVC, 2018). Additionally, though hate crimes statistics may reflect a person was murdered due to their gender identity, the victim's gender is not reflected in the UCR, which poses challenges for those seeking to understand the prevalence and magnitude of homicidal violence perpetrated against the transgender community. Therefore, information regarding murder victims cannot be gleaned from official data but must be pieced together from publicly available sources, which poses challenges when the media is misreporting the gender identity of murder victims or remains largely silent regarding an incident. Finally, our research is guided by an intersectional and trans-inclusive perspective and challenges the biological and socially deterministic views of gender identity which are upheld by the cis-hetero-patriarchal structures in the criminal punishment system as well as mainstream and 'gender critical' criminological research (Valcore et al, 2021). As we demonstrate, cis-normative ideology about sex/gender leads to misgendering and deadnaming of transgender murder victims.

Literature review

Murder rates of transgender and gender nonconforming victims (TGNC) has risen steadily over the past several years, with 2020 being the deadliest year to date since these data have been tracked (Avery, 2020). The Human Rights Campaign (HRC) identified 44 murders of TGNC persons in the United States in 2020 (Sonoma, 2021). The previous peak occurred in 2013, the year that the HRC first began tallying these statistics, when there were 37 victims (Roberts, 2020).

For many, the media is a primary source of knowledge and information about transgender people. However, mainstream media coverage is often limited and rife with stereotypes (Billard, 2016). Thus, the media may be a source of misinformation that contributes to anti-transgender attitudes and discrimination. News media coverage of anti-trans violence is often problematic, wherein victims are misgendered (when pronouns or other words are used to describe the victim in ways which do not align with the victim's identified gender) or deadnamed (when a victim is referred to by a birth name which is no longer used), or coverage overly focuses on the victim's transgender status or concentrates on how the crime affected the victim's loved ones, rather than centring on the violence at hand (Wood et al, 2019).

Most TGNC homicide victims are misgendered by law enforcement and/or the media (HRC, 2021). Approximately 57 per cent of victims in 2020

and 74–78 per cent of all victims between 2013 and 2020 were misgendered in initial reports. Such errors can persist even when law enforcement and media are informed of the victim's gender identity. For example, one news outlet reported 'Man dressed as woman found murdered' even after being informed that the victim identified as a woman (Allen, 2017). Reports that misgender or deadname TGNC victims are rarely corrected or updated, even when other details regarding the incident are updated (Riley, 2020).

The media often blames official law enforcement records as the cause of the misidentification of TGNC victims of violence while law enforcement typically cites legal records such as identity documents as the source of their information (Riley, 2020), creating a pattern of blame that does little to help or respect victims and their loved ones. Additionally, failing to properly identify a TGNC victim of violence can hinder an investigation by wasting critical time immediately following the murder (Greenfield, 2018).

Murders of TGNC victims can pose an issue for investigators who rely only on legal forms of identification to identify the victim as only about 11 per cent of the 27,000 respondents in the 2015 United States Transgender Survey reported having all their identifying documents reflective of their preferred name and gender. Most respondents (68 per cent) did not have *any* such identifying documents (James et al, 2016). Thus, in most cases, legal documentation does not accurately portray the way the victim saw themselves and relying on this documentation when conducting the investigation will result in asking questions about a victim with whom interviewees may not be familiar.

Transgender population in rural America

Between 3 per cent and 5 per cent of the rural population identifies as lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual and ally plus (LGBTQIA+) (Newport, 2018; Movement Advancement Project, 2019). In 2019, the United States Census estimated between 2.9 million and 3.8 million LGBTQIA+ people, or 15–20 per cent of the total LGBTQIA+ population, living in rural areas in the United States (Movement Advancement Project, 2019).

Transgender people experience many of the same daily challenges other rural residents face, including geographical isolation, fewer healthcare providers, declining populations, limited employment opportunities, gender stereotypes and discrimination (Safer et al, 2016). However, transgender people in rural areas are uniquely affected by the structural disadvantages and other negative aspects of rural life, amplifying the impacts of their experiences of rejection and acceptance in their communities. The social and political landscape of rural areas makes transgender people more vulnerable to discrimination (Bockting et al, 2020). In rural communities, the general public opinions

and attitudes towards transgender people are generally less supportive (Koken et al, 2009). Nondiscriminatory and trans-inclusive policies in rural places are less likely to be in place (Stroumsa, 2014). According to an annual report produced by the Movement Advancement Project in 2019, the nature of rural life, such as close-knit communities, may present unique challenges for transgender people. For example, transgender people may be more visible in their communities, especially when they are open about their sexual identities in their workplaces. The increased visibility may also have a ripple effect when it touches many other areas of life. Suppose a person is excluded from their faith community for being gay. In that case, they may have a difficult time at work or finding a job because their church members may also be their coworkers or potential employers. Other challenges include but are not limited to fewer healthcare alternatives, employers and housing options. Fewer social support structures exist for transgender people due to geographical isolation. More importantly, the legal system in rural communities also presents many challenges for transgender people. For example, transgender people of colour and/or transgender people experience significant bias and discrimination in the legal system (Casey et al, 2019). In rural areas where fewer legal providers are familiar with working with transgender clients, such as legal clinics or LGBT community centres, transgender people may be even more vulnerable to legal discrimination (Bass and Nagy, 2021).

The media and transgender and gender nonconforming victims of fatal violence

Media sources often do not show sensitivity or respect for TGNC victims of homicidal violence. While errors may result from the way that law enforcement documents an offence, it is clear there are other issues at play that contribute to the continued maltreatment of victims.

Wood et al (2019) identified common themes in media coverage of transgender victims of fatal violence, some of which are examined in this chapter. First, coverage tends to focus on the level of brutality used in the act itself. These media reports often focus on the gory details of the offence, often describing injuries in graphic detail. Although they focus on the brutality of the offences, media reports also fail to recognise anti-trans violence as examples of gender-based violence. Such reporting not only glazes over the serious problem of violence against the transgender community but also denies the victim their identity (Allen, 2015).

Second, coverage trivialises the murders. This occurs through media focus on the victim's actions rather than on the perpetrators of violence against the victim. Reports may focus on the victim's body parts or may assume that the victim was engaged in sex work at the time of the murder (Allen,

2015). In some cases, perpetrators are portrayed as victims due to their victim's gender identity (Barker-Plummer, 2012).

Third, victims are typically misgendered. While coverage does sometimes include the victim's TGNC status, it often will also deadname the victim and use incorrect pronouns. This may include quotes from family members who also misgender their deceased loved one. Allen (2015) notes that print media will often place quotation marks around a TGNC victim's chosen name while also deadnaming the victim. In some cases, as found in an analysis of the media coverage of the 2016 Pulse Nightclub shooting in Orlando, Florida, the victims' lesbian, gay, bisexual, transgender, queer (LGBTQ) status was all but ignored with reports instead focusing on the venue, an LGBTQ nightclub which was hosting a 'Latin Night', and emphasising the victims' ethnicity and/or race over their sexuality and ignoring intersectionality of these identities (Meyer, 2020).

This study

This chapter examines news coverage about transgender people murdered in Louisiana. We present a content analysis of the media coverage from newspapers, television and radio stations, and online publications serving rural and urban markets. Our purpose is to understand how urban/rural context influences reporting on violent crime against transgender people. We explore how community context influences the quantity and quality of reporting on murders of transgender people. Quantitatively, we assess the number of news stories about transgender homicides reported in urban and rural media. Qualitatively, we examine differences in how stories are reported in urban and rural communities. Specifically, our study explores whether community context affects whether a publication misgenders, deadnames or otherwise stigmatises transgender murder victims.

Sampling strategy

Police reports often misgender and deadname transgender people. Thus, there is no comprehensive and reliable list of transgender homicide victims. Therefore, we compiled our sample of victims by referencing lists compiled by organisations including Louisiana Trans Advocates, Gay & Lesbian Alliance Against Defamation (GLAAD), and the HRC's Fatal Violence Reports 2015–2020. Additionally, we conducted Google searches using the terms 'transgender', 'murder' and 'Louisiana' to identify individuals who may not have been included in the available lists. According to our research, at least 17 transgender people were murdered in Louisiana between 1 January 2010 and 31 December 2020.

Sample characteristics

Table 8.1 provides the list of victims included in this study as well as their demographic information. Nearly all of the transgender victims in this study are young Black woman. The authors recognised the limitations on the rural data compared to urban data during the entire span of research, which will be addressed in the discussion regarding the limitation of the study.

The information in the table demonstrates the intersectional vulnerability of this population. The HRC, in its 2020 report, notes the disproportionate targeting of young trans women of colour and also cites Louisiana as one of the states with the highest incidence of trans homicides, behind only Florida and Texas. Although the majority of homicides took place in urban locations, our analysis focuses on differences in media reporting in urban and rural publications (discussed further in the following section). It is well established that urban areas have larger LGBTQ populations, and because of

Table 8.1: Transgender victims of homicidal violence in Louisiana, 2010–2020

Year	Name	Gender	Race	Age	City of death	Rural/ urban	Number of articles
2013	Shaun Hartley	W	Black	31	Baton Rouge	Urban	4
2013	Milan Boudreaux	W	Black	26	Metairie	Urban	12
2014	Brenisha Hall	W	Black	25	New Orleans	Urban	7
2015	Penny Proud	W	Black	21	New Orleans	Urban	2
2016	Demarkis Stansberry	M	Black	30	Baton Rouge	Urban	1
2017	Jaylow McGlory	W	Black	29	Alexandria	Rural	7
2017	Jaquarrius Holland	W	Black	18	Monroe	Rural	1
2017	Ciara McElveen	W	Black	26	New Orleans	Urban	7
2017	Chyna Gibson	W	Black	31	New Orleans	Urban	12
2018	Vontasha Bell	W	Black	18	Shreveport	Urban	3
2018	Amia Tyrae Berryman	W	Black	28	Baton Rouge	Urban	3
2020	Queasha D. Hardy	W	Black	22	Baton Rouge	Urban	5
2020	Draya McCarty	W	Black	28	Baton Rouge	Urban	2
2020	Shakiie Peters	W	Black	32	Amite City	Rural	10
2020	Kee Sam	W	Black	24	Lafayette	Urban	4
2020	Brooklyn Deshauna	W	Black	20	Shreveport	Urban	5

this, most research on LGBTQ people focuses on populations in cities and typically overlooks the experiences of LGBTQ people in rural communities and the southern United States (Stone, 2018). Thus, trans-inclusive research is imperative in rural criminology.

Data collection and analysis

After identifying the names of transgender murder victims in Louisiana, we began searching for news articles related to these cases using Google and individual publication websites and archives. Our search yielded 84 articles. Of the 84 news reports about homicides of transgender people in Louisiana, 78.8 per cent were about homicides that took place in urban areas. For the purposes of this study, an urban area is any place with a population greater than 50,000, which is the threshold used by the Office of Management and Budget for defining an urbanised area. Urban places include New Orleans, Baton Rouge, Metairie, Shreveport and Lafayette. Twenty-one per cent of articles were about homicides that took place in rural communities including Alexandria, Amite and Monroe.

Additionally, 84.7 per cent of news reports were from organisations in urban markets with New Orleans (41.2 per cent) and Baton Rouge (21 per cent) publishing the majority of news reports. While urban markets are overrepresented in the sample, it is important to remember there are more news organisations in urban markets, which influences the total number of articles published on a particular case.

Analytical strategy

We established a coding sheet that allowed for both fixed and open coding of news reports. Fixed coding sought to identify instances wherein a publication deadnamed, misgendered or blamed the victim, used transphobic language, and/or centred the accused rather than the victim or advocated for a panic defence.

For coding purposes, deadnaming referred to identifying a transgender person by the name they were assigned at birth or another former name. For example, we coded articles that reported an individual's birth name or legal name as having deadnamed the victim. Misgendering refers to identifying a transgender person as the wrong gender. For example, referring to a transgender woman as a 'male'. In such instances, we coded these articles as having misgendered the victim. We coded instances where articles suggested that that victim was partially or wholly at fault for their death as victim-blaming. We also coded for situations when articles used transphobic language such as referring to a transgender person as 'crossdressers', 'transvestites' or 'a man who lived as a woman'.

113

Initially, we were interested to see if articles tended to provide more information about the alleged perpetrator rather than the victim or suggested the perpetrator's actions were a reaction to learning about the victims' gender identity or sexual orientation. However, we did not identify any articles centred on the accused or advocating a panic defence.

Articles were initially coded and intercoder reliability tests were conducted. Where coding inconsistencies were identified, articles were reviewed a third time to resolve any discrepancies.

The coding form included a section for coders' comments and observations. We analysed these comments to identify additional themes and patterns that were not included in the fixed coding worksheet. Through this analysis, we found that several articles referenced the victim's history of sex work.

Findings

Deadnaming

Thirty-five (41.6 per cent) news reports deadnamed the victim. We found that 41.8 per cent of articles about homicides occurring in urban communities deadnamed the victim. Similarly, 41.1 per cent of articles about cases from rural communities deadnamed the victim. However, we did find significant differences in deadnaming based on the location of the publication. Specifically, 37.5 per cent of articles from urban publications deadnamed the victim compared to 66.7 per cent of reports from rural communities which deadnamed the victim.

In urban markets, much of the deadnaming is the result of media reliance on law enforcement and court documents for reporting. For example: 'Lafayette Police say the victim in this incident, [Redacted] Sam, 24, of Lafayette has died from his injuries. They are investigating it as a homicide' (*KLFY*, 2020). However, even when media outlets have the appropriate information about an individual's name and gender identity, they often continued to deadname victims. For example:

> Police identified the victim as 24-year-old [Redacted] Sam of Lafayette, a person assigned male at birth. However, KATC has learned from the Human Rights Campaign that she identified as female, and used the name Kee Sam. (*KATC*, 2020)

> Authorities first linked Miller to the case because he was found in possession of Milan Boudreaux's car, a silver Pontiac GT that detectives realised was missing on the day the couple's bodies were discovered. Milan Boudreaux was a transgender woman who had been designated male at birth and named [Redacted]. During the trial, prosecutors and

defense attorneys sometimes referred to her as 'Williams' or '[Redacted] Williams'. (*NOLA.com*, 2020)

The St. Helena Parish Sheriff's Office said a body was found and is being investigated as a homicide. The sheriff's office identified the victim as [Redacted], 32. Although transgender advocates said Saturday, Peters was transgender and went by Shaki. Peters' body was found around 2 p.m. Wednesday on Opal Bennett Road near Amite. (*WBRZ*, 2020a)

In rural markets, the use of police and other 'official' sources also contributed to deadnaming transgender people. For example:

Lynette Muse and Christopher Causey are each indicted on one count of the second-degree murder of Peters, whose body was found July 1 on the side of Opal Bennett Road. The victim, identified by authorities as [Redacted] Peters, had been last seen on June 29 with Muse, 35, and Causey, 38, both of Denham Springs. (*Hammond Daily Star*, 2020)

However, in a few instances, it appears that rural newspapers' reliance on the *Associated Press* and other publications in the state resulted in deadnaming victims:

According to an account of the trial in The Times-Picayune/The New Orleans Advocate, authorities suspect Miller met [Williams], a transgender woman born [Redacted] [Williams], online, where she sometimes advertised prostitution services. (*The Daily Comet*, 2020)

McGlory was a transgender woman, according to residents gathered at the shooting scene. Her name also is on several lists of transgender homicide victim lists on the internet. McGlory's obituary lists the name as [Redacted] McGlory, however. (*The Town Talk*, 2019)

As stated, it appears that the use of official sources is the main factor contributing to deadnaming transgender murder victims in our study. However, even when publications have the appropriate name and gender identity, they continued to deadname victims.

Misgendering

Fourteen news reports misgendered victims. Of those misgendering victims, two (15 per cent) were about homicides in urban communities. In rural communities, three (23.5 per cent) of articles misgendered the victim. This

pattern remains with publication locations: 25 per cent of articles from rural publications misgendered the victim, compared to 15.3 per cent of articles from urban publications.

All the news reports from rural publications that engaged in misgendering were about Jaylow McGlory. In some instances, the articles reported direct quotes from third parties which misgendered Jaylow: '[Detective] Butler testified … that Harris had "shot his boyfriend." [However] McGlory was a transgender woman, according to residents gathered at the shooting scene. Her name also is on several lists of transgender homicide victim lists on the internet' (*The Town Talk*, 2019). Interestingly, although they chose to publish a quote that deliberately misgendered Jaylow, the article also clarifies that she was a transgender woman. However, other publications appear to misgender Jaylow without using direct quotes: 'Harris told the court that he knew McGlory, who was transgender, for about six months and had lived with him and had a sexual relationship with him for that period of time' (*KALB*, 2019).

The pattern of misgendering transwomen through direct quotes also appeared in urban publications. Such as when Brenisha Hall's mother testified in court:

> Lessie Hall had her first opportunity Wednesday (April 4) to face the woman who injected what she called 'poison' into her daughter. 'You're not a person at all to me,' she said, speaking directly to Armani Davenport from the witness stand of Criminal District Judge Paul Bonin's courtroom. 'You took my son.' Both Hall and Davenport are transgender women. Hall, when speaking in court, referred to Brenisha by [her preferred name] and by her birth name.
>
> In the months before her daughter's death, Hall said Brenisha couldn't walk, feed herself or brush her teeth. 'I'm scared if he [Davenport] goes free, he's just going to kill again,' Hall said. Davenport's attorney … told Hall her client was 'sincerely sorry.' Hall disagreed with Ray's sentiment, saying, 'He might have fooled you with that because he's paying you to be his lawyer'. (*NOLA.com*, 2018)

In this example, a transgender person's mother uses the word 'son' and he/him/his pronouns to refer to the defendant, who is a transgender woman. However, the publication uses appropriate language, such as 'daughter' and she/her/hers pronouns to refer to both Brenisha and Armani. This reminds us of the complex relationships that transgender people have with their families who may remember them and refer to them using language that is inconsistent with their own identity. Ultimately, family members often deadname and misgender transgender people which contributes to confusion in reporting.

Victim-blaming

We did not find any clear examples suggesting a victim was partially or wholly at fault for their death. However, one article presented Brenisha Hall as a cautionary tale against receiving black-market silicone injections:

> On July 3 of this year, Nola.com reported that Armani Davenport of Baton Rouge was scheduled to stand trial later that month on negligent homicide charges. 'The charges stemmed from a 2013 incident where Davenport injected silicone into the buttocks and hips of 25-year-old Brenisha Hall at a house on Salcedo Street. Hall would later experience difficulty breathing, lapse into a coma, and die on January 1, 2014. In a press release, the FDA stated that it is unaware of the true extent of the problem because unlicensed practitioners do not report injuries incurred from illegal activity and patients may not realise why they've become ill. … 'Francis said it's important for anyone who has received silicone injections to tell doctors about it if they experience any health problems.' 'Some have shortness of breath but don't mention the injection either out of embarrassment or a belief that the silicone couldn't be causing their current issues.' (*The Louisiana Weekly*, 2017)

Additionally, many articles about Desmond Harris's trial for murdering Jaylow McGlory referenced Harris's claims of self-defence, wherein he argued that McGlory had threatened to sexually assault him. Ultimately, jurors accepted this defence and found Harris not guilty.

As noted, 12 news reports included references to a victim's history of sex work. Such articles also typically deadnamed and misgendered the victim. For example:

> Jeremy Daniel Brown, 31, was convicted in the killing of [Redacted] Hartley by a 12-person East Baton Rouge Parish jury that deliberated about 90 minutes. Hartley, 31, was a New Orleans native and Baton Rouge resident who prostituted himself in the Plank Road area of north Baton Rouge dressed as a woman. (*The Advocate*, 2016)

While these examples do not overtly blame Shaun Hartley for their death, the reference to prostitution is stigmatising, especially when considering that this report also uses transphobic language.

Transphobic language

Six articles included overtly transphobic language. Four reports were from urban publications, and two were from rural publications. With such a

small set of examples, it is nearly impossible to identify clear patterns in *how* transphobic language shows up. Most often, it appears that publications are using outdated and offensive terminology to refer to transgender people. For example, consider the following: 'According to the Baton Rouge Police Department, the shooting happened shortly after 1 a.m. at the Shades Motel on Airline Highway. There, police found 28-year-old [Redacted] dead from a gunshot. In the arrest records, police say [Redacted] was a "transvestite" working as a prostitute out of the motel room' (*WBRZ*, 2018). This article uses the term *transvestite* which is a transphobic slur. Interestingly, *WBRZ* chose to place the term in quotes, which may imply that they are aware that this term is inappropriate and likely appeared in an official report. At other times, the use of transphobic language was subtler and rely on the stereotype that transgender people are masquerading as the opposite gender:

> Residents across the capital city are expressing grief over the loss of a beloved hairstylist who was found shot to death Monday, off South Choctaw Drive. According to The Advocate, 24-year-old Queasha Hardy was killed Monday afternoon in the 1700 block of North Harco Drive. Though Hardy's social media accounts suggested she lived as a woman, police initially identified her as [Redacted] Hardy, saying Hardy's next of kin requested she be identified as male. (*WBRZ*, 2020b)

> Police responded to a call on August 4th, 2017 to a report of a woman being shot who was still inside a home on Monroe Street. S.W.A.T. also responded to the scene and once inside the home they determined that the victim, who was said to be a woman, was actually a man. (*KLAX*, 2019)

As with previous examples of deadnaming and misgendering, it appears that relying on official sources such as the police or court records, or on the victim's family member, can result in inaccurate and ultimately transphobic reporting.

Conclusion

In this chapter, we presented a content analysis of news reports about transgender people murdered in Louisiana. Overall, we found most articles included in this study did not deadname, misgender or otherwise stigmatise victims. However, deadnaming and misgendering occurred in about 47 per cent of the reports analysed in this study. We found that misgendering and/or deadnaming is more likely to occur when articles are reporting on official sources such as police reports or court records. Additionally, family

members also contribute to confusion in media reports about an individual's name and gender identity.

Based on our small sample size, it is difficult to make strong conclusions about the role of community context in reporting. For example, fewer urban publications deadnamed or misgendered the victim compared to rural publications. However, we found that some articles from rural publications that deadnamed or misgendered a victim were articles written by the *Associated Press*. Thus, it may be that publications that rely on wire services are more likely to engage in this stigmatising behaviour due to a lack of resources, which may be a particular issue for more rural publications. However, we argue that such articles can and should be edited to avoid othering transgender people.

Arune (2006) provides several suggestions for media outlets to increase their sensitivity in reporting matters of concern to the trans community. The *Associated Press Stylebook* suggests that preferred pronouns should be used. When the *Stylebook* does not cover a particular situation, Arune suggests that journalists contact the Transgender Law and Policy Institute for guidance. Arune also discourages the use of quotation marks when reporting on a transgender person. Seely (2021) points out the role that journalists can play in correcting the misgendering of victims by law enforcement, which can also educate media consumers. Seely also encourages journalists to build relationships with LGBTQ advocates.

However, as many articles that deadnamed or misgendered victims also described the victim as being transgender, it's not a lack of information that contributes to the deadnaming and misgendering. Rather, publications are knowingly publishing information that stigmatises transgender people and contributes to the public's misunderstanding of transgender issues. This is especially true in instances where news reports also include references to an individual's history of sex work and/or include transphobic language. Ultimately, additional research is needed to understand the extent to which news media stigmatises transgender people, whether community context influences stigmatisation, and the consequences of such stigmatisation. Future research should focus more on the rural-focused news outlets, especially when they appear to be more at fault with deadnaming, misgendering and othering transgender victims.

References

The Advocate (2016) 'Jurors convict Baton Rouge man in 2013 killing on Wenonah Street', *The Advocate*, 20 March [online] Available from: https://www.theadvocate.com/baton_rouge/news/article_e70c1d99-514f-5286-b1de-986e9b3950cb.html [Accessed 15 March 2021].

Allen, S. (2015) 'We're failing trans women of color', *Daily Beast* [online] Available from: https://www.thedailybeast.com/were-failing-trans-women-of-color [Accessed 11 March 2021].

Allen, S. (2017) 'Why are there so many trans murders?', *Daily Beast* [online] Available from: https://www.thedailybeast.com/why-have-there-been-so-many-trans-murders-this-year [Accessed 16 April 2021].

Arune, W. (2006) 'Transgender images in the media', in L. Castaneda and S. Campbell (eds) *News and Sexuality: Media Portraits of Diversity*, Washington DC: Lexington Books, pp 111–133.

Avery, D. (2020) 'Killings of transgender Americans reach all-time high, rights group says', *NBC News* [online] Available from: https://www.nbcnews.com/feature/nbc-out/ killings-transgender-americans-reach-all-time-high-rights-group-says-n1242417 [Accessed 24 February 2021].

Barker-Plummer, B. (2012) 'Fixing Gwen', *Feminist Media Studies*, 13(4): 710–724.

Bass, B. and Nagy H. (2021) 'Cultural competence in the care of LGBTQ patients' [online] Available from: https://www.ncbi.nlm.nih.gov/books/NBK563176/ [Accessed 2 March 2021].

Billard, T.J. (2016) 'Writing in the margins: Mainstream news media representations of transgenderism', *International Journal of Communication*, 10: 4193–4218.

Bockting, W., Barucco, R., LeBlanc, A., Singh, A., Mellman, W., Dolezal, C. et al (2020) 'Sociopolitical change and transgender people's perceptions of vulnerability and resilience', *Sexuality Research & Social Policy: Journal of NSRC: SR & SP*, 17(1): 162–174. https://doi.org/10.1007/s13178-019-00381-5

Casey, L., Reisner, S., Findling, M., Blendon, R., Benson, J., Sayde, J. et al (2019) 'Discrimination in the United States: Experiences of lesbian, gay, bisexual, transgender, and queer Americans', *Health Services Research*, 54(S2): 1454–1466.

The Daily Comet (2020) 'Man faces life sentences in 2013 double murder', February 8 [online] Available from: https://www.dailycomet.com/story/special/2020/02/08/man-faces-life-sentences-in-2013-double-murder/41951413/ [Accessed 14 March 21] .

Devin-Norelle, X. (2020) 'Six Black trans women were found dead in nine days', *Them* [online] Available from: https://www.them.us/story/six-black-trans-women-were-found-d [Accessed 21 May 2021].

FBI (Federal Bureau of Investigation) (2020a) 'Crime in the United States' [online] Available from: https://ucr.fbi.gov/crime-in-the-u.s/2019/crime-in-the-u.s.-2019/topic-pages/tables/expanded-homicide-data-table-1.xls [Accessed 7 March 2022].

FBI (2020b) 'Hate crime statistics' [online] Available from: https://ucr.fbi.gov/hate-crime/2019/topic-pages/tables/table-1.xls [Accessed 7 March 2022].

Flores, A.R., Herman, J.L., Gates, G.J. and Brown, T.N.T. (2016) 'How many adults identify as transgender in the United States?', Williams Institute [online] Available from: https://williamsinstitute.law.ucla.edu/wp-content/uploads/Trans-Adults-US-Aug-2016.pdf [Accessed 28 March 2022].

Greenfield, S.H. (2018) 'Deadnaming the dead', *Simple Justice*, 15 August [blog] [online] Available from: https://blog.simplejustice.us/2018/08/15/deadnaming-the-dead/ [Accessed 23 February 2022].

Hammond Daily Star (2020) '3 indicted in murder cases', *Hammond Daily Star*, 30 November [online] Available from: https://www.hammondstar.com/news/3-indicted-in-murder-cases/article_a9fe1b0c-32b6-5b56-a437-b094b79660ec.html [Accessed 11 March 21].

HRC (Human Rights Campaign) (2021) 'An epidemic of violence: Fatal violence against transgender and gender non-conforming people in the United States in 2020' [online] Available from: https://hrc-prod-requests.s3-us-west-2.amazonaws.com/FatalViolence-2020Report-Final.pdf?mtime=20201119101455&focal=none [Accessed 27 March 2022].

James, S.E., Herman, J.L., Rankin, S., Keisling, M., Mottet, L. and Anafi, M. (2016) *The Report of the 2015 U.S. Transgender Survey*, Washington, DC: National Center for Transgender Equality [online] Available from: https://transequality.org/sites/default/files/docs/usts/ USTS-Full-Report-Dec17.pdf [Accessed 11 January 2022].

Jones, J. (2022) 'LGBT identification in U.S. ticks up to 7.1%', *Gallup* [online] Available from: https://news.gallup.com/poll/389792/lgbt-identification-ticks-up.aspx [Accessed 21 April 2022].

KALB (2019) 'Jury declares Desmond Harris not guilty', *KALB*, 12 September [online] Available from: https://www.kalb.com/content/news/Desmond-Harris-takes-the-stand-said-victim-tried-to-rape-him-day-of-shooting-560149641.html [Accessed 10 March 21].

KATC (2020) 'Suspect in custody in connection with Wednesday fatal shooting on Evangeline Thruway', *KATC*, 12 August [online] Available from: https://www.katc.com/news/lafayette-parish/victim-of-wednesday-shooting-on-evangeline-thruway-has-died [Accessed 15 March 2021].

KLAX (2019) 'Jury selection to begin for 2017 Monroe Street murder', *KLAX*, 9 September [online] Available from: https://www.kalb.com/content/news/Jury-selection-to-begin-on-Tuesday-in-murder-trial-for-Desmond-Harris-559844681.html [Accessed 11 March 2021].

KLFY (2020) 'Lafayette police are investigating a murder at Evangeline Thruway Hotel', *KLFY*, 14 August [online] Available from: https://www.klfy.com/local/lafayette-parish/lafayette-police-respond-to-person-shot-on-ne-evangeline-thruway-frontage-road/ [Accessed 10 March 2021].

Koken, J.A., Bimbi, D.S. and Parsons, J.T. (2009) 'Experiences of familial acceptance-rejection among transwomen of color', *Journal of Family Psychology*, 23(6): 853–860. https://doi.org/10.1037/a0017198

The Louisiana Weekly (2017) 'FDA warns against potentially fatal silicone injections', *The Louisiana Weekly*, 27 November [online] Available from: https://www.fda.gov/news-events/press-announcements/fda-warns-about-illegal-use-injectable-silicone-body-contouring-and-associated-health-risks [Accessed 10 March 2021].

Meyer, D. (2020) 'An intersectional analysis of LGBTQ online media coverage of the Pulse nightclub shooting victims', *Journal of Homosexuality*, 67(10): 1343–1366.

Movement Advancement Project (2019) 'Where we call home: LGBT people in rural America' [online] Available from https://www.lgbtmap.org/file/lgbt-rural-report.pdf [Accessed 17 February 2022].

Newport, F. (2018) 'In U.S., estimate of LGBT population rises to 4.5%', *Gallup* [online] Available from: https://news.gallup.com/poll/234863/estimate-lgbt-population-rises.aspx [Accessed 22 July 2022].

NOLA.com (2018) '"You're not a person at all to me": Victim's mom speaks at sentencing for silicone injection death', *NOLA.com*, 4 April [online] Available from: https://www.nola.com/news/crime_police/article_fdaccb32-c832-531a-8efe-593b5946dc6a.html [Accessed 15 March 2021].

NOLA.com (2020) 'Jury finds Baton Rouge man guilty in "gruesome" Metairie double murder', *NOLA.com*, 5 February [online] Available from: https://www.nola.com/news/crime_police/article_0c129d4e-486c-11ea-b11c-b3f833e72ba4.html#:~:text=Jury%20finds%20Baton%20Rouge%20man%20guilty%20in%20'gruesome'%20Metairie%20double%20murder,-Facebook&text=Facebook-,Melvin%20Miller%20is%20charged%20with%20two%20counts%20of%20second%2Ddegree,Milan%20Boudreaux%20and%20Akeem%20Boudreaux [Accessed 14 March 2021].

OVC (Office for Victims of Crime) (2018) 'Hate crime' [online] Available from: https://ovc.ojp.gov/sites/g/files/xyckuh226/files/ncvrw2018/info_flyers/fact_sheets/2018NCVRW_HateCrime_508_QC.pdf [Accessed 13 February 2022].

Riley, J. (2020) 'News outlets misgendered almost 2 out of every 3 transgender murder victims in 2020', *Metro Weekly*, 20 November [online] Available from: https://www.metroweekly.com/2020/11 news-outlets-misgendered-almost-2-out-of-every-3-transgender-murder-victims-in-2020/ [Accessed 27 January 2022].

Roberts, M. (2020) 'Marking the deadliest year on record, HRC releases report on violence against transgender and gender non-conforming people', *Human Rights Campaign*, 19 November [online] Available from: https://www.hrc.org/press-releases/ marking-the-deadliest-year-on-record-hrc-releases-report-on-violence-against-transgender-and-gender-non-conforming-people [Accessed 23 November 2021].

Safer, J.D., Coleman, E., Feldman, J., Garofalo, R., Hembree, W., Radix, A. et al (2016) 'Barriers to healthcare for transgender individuals', *Current Opinion in Endocrinology, Diabetes, and Obesity*, 23(2): 168–171. https://doi.org/10.1097/MED.0000000000000227

Seely, N. (2021) 'Reporting on transgender victims of homicide: Practices of misgendering, sourcing and transparency', *Newspaper Research Journal*, 42(1): 74–94.

Sonoma, S. (2021) '44 trans people killed in 2020, marking worst year on record for transphobic violence', *Them*, 20 January [online] Available from: https://www.them.us/story/44-trans-people-killed-2020-worst-year-for-transphobic-violence [Accessed 9 January 2022].

Stone, A.L. (2018) 'The geography of research on LGBTQ life: Why sociologists should study the South, rural queers, and ordinary cities', *Sociology Compass*, 12(11): e12638.

Stotzer, R.L. (2017) 'Data sources hinder our understanding of transgender murders', *American Journal of Public Health*, 107(9): 1362–1363.

Stroumsa, D. (2014) 'The state of transgender health care: Policy, law, and medical frameworks', *American Journal of Public Health*, 104(3): e31–e38. https://doi.org/10.2105/AJPH.2013.301789

The Town Talk (2019) 'Attorney: Trace of cellphone after Alexandria homicide was unconstitutional', *The Town Talk*, 5 September [online] Available from: https://www.thetowntalk.com/story/news/2019/09/05/attorney-trace-cellphone-after-alexandria-homicide-unconstitutional/2224095001/ [Accessed 14 March 2021].

Valcore, J., Fradella, H.F., Guadalupe-Diaz, X., Ball, M.J., Dwyer, A., DeJong, C. et al (2021) 'Building an intersectional and trans-inclusive criminology: Responding to the emergence of "gender critical" perspectives in feminist criminology', *Critical Criminology*, 29(4): 687–706.

WBRZ (2018) 'Man accused of murdering transgender prostitute at Baton Rouge motel', *WBRZ*, 30 March [online] Available from: https://www.wbrz.com/news/man-accused-of-murdering-prostitute-at-baton-rouge-motel/ [Accessed 11 March 2021].

WBRZ (2020a) 'Advocates seek details on transgender deaths', *WBRZ*, 3 July [online] Available from: https://www.wbrz.com/news/advocates-seek-details-on-transgender-deaths/ [Accessed 10 March 2021].

WBRZ (2020b) 'Police request information from the public regarding the fatal shooting of Baton Rouge hairstylist', *WBRZ*, 29 July [online] Available from: https://www.wbrz.com/news/authorities-investigating-reported-deadly-shooting-off-s-choctaw-drive/ [Accessed 15 March 2021].

Wood, F., Carillo, A. and Monk-Turner, E. (2019) 'Visibly unknown: Media depiction of murdered transgender women of color', *Race and Justice* [online] Available from: https://journals.sagepub.com/doi/pdf/10.1177/2153368719886343 [Accessed 12 September 2021].

Religious Responses for Rural Sexual Assault Survivors

April N. Terry

Introduction

Research documents positive aspects of rural living, including honesty, individualism and a high premium on religiosity (Willits et al, 1990). While these characteristics may be appealing, rural culture is romanticised (Tickamyer and Duncan, 1990) as some ignore the greater rates of poverty (Anderson Moore, 2006), similar rates of violence (Breiding et al, 2015), concerns about confidentiality and professionalism (Donnermeyer and DeKeseredy, 2014; Terry, 2018), and lack of accessible and quality resources (Peek-Asa et al, 2011). Gender-based violence (GBV) in rural places may be normalised due to patriarchal forces ascribing to hypermasculinity, sexism and traditional gendered stereotypes (Carrington and Death, 2014). In 'close-knit' communities, even where services are available, citizens tend to 'work out interpersonal agreements' (Freudenburg, 1986: 31) on their own as reputations are at stake. Many times, for girls and their families lacking a strong family name, their needs are ignored, and they are further pushed to the margins (Terry and Williams, 2019; Terry, 2020). This rural culture, coupled with fewer services, greater travel times and an inclusive 'in-group' environment, prevent professional treatment from being secured (Terry and Williams, 2019). Instead, individuals in need of services in rural places may turn to their religious institutions or receive no help at all.

Background

Girls and women in rural areas are held to rigid gender norms according to appropriate feminine behaviour (Terry and Williams, 2019) and as prescribed by patriarchal standards. When girls deviate from this script,

the patriarchal system seeks to 'correct' or 'protect' them (Sherman and Balck, 2015). According to Williams and Craig-Moreland (2005), gender norms in rural communities may be more traditional than in urban areas, but also more mixed. For example, girls may be able to participate in traditional 'male' activities (such as driving a tractor) but they also remain in a culture that is bound by the 'heavy hand of patriarchy' (Williams and Craig-Moreland, 2005: 2). When referring to delinquent behaviours, the justice system tends to view the behaviour of girls and young women differently when compared to boys and men. Masculinity studies allow for the mentality of 'boys will be boys' while these same behaviours are penalised when observed in girls. Specifically, young women's behaviour is more quickly labelled as bad or deviant, and in opposition to prescribed gender norms (Sherman and Balck, 2015). Yet, many 'bad' and 'deviant' girls are responding to their chaotic environments – exhibiting overt gender transgressions as a means of coping.

As the literature demonstrates, at-risk girls tend to engage in self-harming behaviours, sexual deviance, drugs and/or alcohol use, or status offences (such as running away) due to a lack of community resources (Sherman and Balck, 2015); they tend to experience multiple systems of abuse, drawing attention to institutional failures. Many scholars conclude that institutions such as education, child welfare, public health and mental health have failed to meet the needs of girls and instead criminalise their misbehaviour (Popkin et al, 2015); typically, these girls are blamed for circumstances beyond their control (Sherman and Balck, 2015). While it is well-documented that services in less densely populated areas are limited, when GBV does occur, rural citizens may resort to religious personnel to address victimisation (Potter, 2007).

Sexual assault

Every year, more than 430,000 sexually motivated victimisations occur in the United States (RAINN, 2020) while the World Health Organization (2021) finds that one third of women worldwide have been victimised either physically or sexually in their lifetime. Most survivors of sexual assault are under 30 years of age with those aged 18 to 34 having the highest risk of victimisation (Papalia et al, 2017). Girls under the age of 12 make up 15 per cent of all sexual assaults and rapes, while nearly one-half (Saar et al, 2015) to three-quarters (Pina et al, 2009) of all female rape survivors report their victimisation prior to the age of 18. Approximately 80 per cent of sexual assaults involve parties who know each other (Loannou et al, 2017) – in small communities, the odds that both parties know one another, as well as having a pre-existing relationship with law enforcement and other community actors, is quite high, and problematic.

Sexual assault remains the most underreported violent crime in the United States (Rennison, 2002), while fewer than 10 per cent of women globally will seek the police following sexual violence (United Nations Women, 2021). Within rural communities, survivors may not report due to viewing the assault as a private matter and not wanting to get the perpetrator into legal trouble as it is likely someone the survivor knew (Taylor and Gassner, 2010). Rural women survivors may find it difficult to report sexual violence as they believe they have no outlets to report their assaults confidentially (Terry, 2018) with fewer than 40 per cent of women, internationally, seeking informal help – most look to family and friends (United Nations Women, 2021). Due to an entrenched 'good ole' boys' network' informal social controls may prevent a survivor from formal reporting (Terry, 2018). If survivors seek assistance from neighbours, for example, to maintain the patriarchal status quo, citizens may not act on behalf of the common good and, instead, rely on other male friends to keep the violence quiet (DeKeseredy and Schwartz, 2009). With limited availability or accessibility to local interventions, girls may engage in self-harming behaviour as well as other forms of maladaptive coping (Popkin et al, 2010), again, creating a road that lacks formal services to address the abuse, and in rural communities, an overreliance on religious–based interventions.

Religion

According to the Pew Research Center, Christianity is the dominant religion in the United States (Pew Research Center, 2016) and many of these individuals seek help within their faith communities when dealing with life events (Bornsheuer et al, 2012). Globally, 84 per cent of people identify as religious (Population Reference Bureau, 2017). In one qualitative study, Bornsheuer et al (2012) found the church to be the first place most church members would turn to when needing mental health guidance. According to Fowler (2012), pastoral counsellors are clinical mental health professionals who integrate spiritual beliefs and practices into a therapeutic process. Religious leaders may use pastoral counselling as a bridge to professional counselling for survivors (Houston–Kolnik et al, 2019).

Research has shown that engagement in religion can help survivors of sexual violence cope with their trauma (Bornsheuer et al, 2012). VanderWaal et al (2012) surveyed Christian clergy and found they made referrals for various problems such as substance use, domestic violence and mental health. Importantly, they found this necessary as 50 per cent of clergy saw members monthly for problems that were beyond their area of expertise (VanderWaal et al, 2012). Yet, religious leaders may not be equipped to provide resources for survivors, and many have reported their main goal

of religious intervention as nearly always reconciliation (Knickmeyer et al, 2004). Faith leaders have considerable influence upon their congregation, and 'this ability could be used to promote beliefs and behaviours that condone sexual violence and stigmatise survivors' (Le Roux and Valencia, 2019: 2).

Within rural communities, young women are more vulnerable to the tenets of Christian-based religion, including ideals surrounding heterosexual relations, childbearing and obeying men (Potter, 2007). Patriarchal belief systems within the church have forced women to emphasise religious coping mechanisms while some research has found religious leaders tend to provide advice that may support male batterers (Horne and Levitt, 2004). For example, service providers reported to Gezinski et al (2019) that survivors fear a breach of confidentiality following GBV, including telling the perpetrators the location of the survivors. In another instance, one participant knew of a bishop violating a protective order to deliver a message from the perpetrator to the survivor and/or times when a bishop has written a letter in support of a perpetrator during the sentencing phase (Gezinski et al, 2019). In one study of 40 African American women exiting abusive relationships, results found that eight of seven women who sought counsel from their Christian religious leaders reported substandard support during a heightened time of need. For example, some women were told to remain in the relationship and 'work things out' in a greater attempt to be a 'good wife'. Not only did some women report their pastor's recommendations as unhelpful, but also as damaging (Potter, 2007).

Church leaders may be indifferent to young women's struggles while reinforcing harmful myths and misinformation due to being uneducated on the subject as well as unconscious support of patriarchal views. Many times, these ideals are perpetuated cases of patriarchal beliefs and practices (Thomson, 2015). Gezinski et al (2019) reported that religious leaders often prioritise regular prayer and church attendance as resolutions to intimate partner violence. Additionally, Gezinski et al (2019) found that survivors' physical and emotional safety were rarely, if ever, discussed. These studies, and others, point to the gross lack of safety planning and trauma–informed practice. Yet, interviewed service providers are aware that many survivors are more likely to approach religious leaders than they are to seek law enforcement (Gezinski et al, 2019). Unfortunately, Gezinski et al's (2019) service provider participants also noted that religious leaders are 'in denial' about the prevalence of abuse perpetuated within congregations. These findings were later replicated by Le Roux and Valencia's (2019) work interviewing church leaders – they reported not working with survivors of sexual violence as they believed none of their members had experienced sexual violence. So, while a significant amount of clergy has been open to utilising outside professional services, some do not suggest these referrals

and opt for addressing sexual violence survivors' needs on their own. While the research demonstrates many negative experiences by survivors seeking faith-based support, the role of religion and spirituality should remain subjects of conversation as some individuals do rely on their faith when coping (Potter, 2007).

The review of faith leaders and their responses to GBV has supported the idea that such professionals are the gatekeepers of local resources – individuals able to influence their community's beliefs and behaviours (Le Roux and Valencia, 2019). Yet, the research is also clear that in many cases, faith leaders may be misinformed or undereducated, while aligning their practices with damaging cultural beliefs, including solidified support of patriarchy, further harming survivors (Thomson, 2015). To further gauge the role of religious services and providers in rural communities, the current study utilised interview data from incarcerated girls and women as well as community stakeholders. This chapter seeks to understand how rural communities respond to sexual violence when reported by at-risk young women as well as gain a better understanding of what services are offered to these survivors. Therefore, the study explored the following working questions:

1. How do rural communities respond to the reporting of at-risk young women's sexual victimisation?
2. What services do community stakeholders refer to when aware of at-risk young women's sexual victimisation?

Background: one rural Midwestern state

One rural Midwestern state within the United States was selected for the current study. The state is known for its heavily supported conservative values with 45 per cent of registered voters identifying as Republican. While the state consists of mostly White residents (86.3 per cent) (United States Census Bureau, 2019), the typical people holding conservative values are White (91 per cent), married (61 per cent) men (57 per cent) who believe in God (84 per cent) and revere religion as 'very important' (64 per cent). This same cohort believes the government is too powerful (83 per cent), that governmental aid does more harm than good (71 per cent), that abortion is illegal in all/most cases (70 per cent), and believe homosexuality should be discouraged (53 per cent) (Pew Research Center, 2016). According to a 2014 Pew Religious Landscape Survey, 76 per cent of the state reported their faith as Christian. The state prides itself on its composition of small towns, ranking 15th in surface area but 35th in population (United States Census Bureau, 2017). The state oversees eight adult facilities (seven men's and one women's) and one juvenile correctional facility (both boys and girls).

This study

Ten counties within the state were selected to provide a range of population density and location. Seven were identified as either frontier or rural while three were semi-urban or urban (for comparative purposes). The state average was 35.6 (densely settled rural) persons per square mile, of which 36 were considered frontier, 34 were rural, 19 were densely settled rural, ten were semi-urban, and six were urban (The University of Kansas, 2016). The categorisations based on persons per square mile was compared with the United States Department of Agriculture's Economic Research Service's Rural–Urban continuum codes (Economic Research Service, 2013a). Metro to nonmetro classification ranges from 1–9 (1=most metro; 9=most nonmetro). With 105 total counties, 18 per cent were metro and 82 per cent were nonmetro (Economic Research Service, 2013b). A third and final source used in the consideration of county selection was based on the Health Resources and Services Administration's Federal Designated Medically Underserved Areas and Populations information.

Incarcerated girls and women

This chapter includes semi-structured interviews with 20 incarcerated girls and young women from frontier and rural communities. All interviews took place at the state's only juvenile correctional facility and women's facility. Interviews lasted between 45 minutes and two hours. Interviews included all incarcerated juvenile girls in the state (n=12). Purposive selection was utilised in recruiting young women from the state's only women's facility. The sampling included only those 30 years of age or younger (to optimise recall of childhood years) and offence location (frontier or rural) (n=8). Eighty per cent of the population identified as White, consistent with the state population. In total, 16 of 20 interviewed girls and women came from nonmetro counties while four came from metro counties.

Rural community stakeholders

While a feminist criminology perspective emphasised the importance of hearing from girls and women themselves, input from community actors was also solicited. To begin interviewing of this group, email solicitation was sent from the Director of Juvenile Services with the state's Department of Corrections as well as the Court Services Specialist with the Office of Judicial Administration. Additionally, an email was sent to all local Extension Agents (university employees who develop and deliver educational programmes within their communities) working within the ten selected counties. A snowballing strategy was then used to recruit remaining participants. After

completing 50 community interviews, including a variety of community professionals, saturation was reached.

Interview information

The interviews were centred on recognising rural culture, sexual assault and subsequent negative outcomes for at-risk girls. The guide focused on one's awareness of issues within their community. For example, to inquire about sexualised culture and community response, participants were asked, 'If a girl in your school were to tell someone she was sexually assaulted, how would people react? Who would try to help her? What would they suggest?' A sample question asked of community stakeholders included, 'When girls find themselves in need of help or advice, what sorts of activities and services are available in your community?' The nature of questioning allowed for incarcerated young women to discuss their histories of sexual assault while allowing all interviewees to discuss their perceptions regarding services, community response and overall needs for at-risk girls and women.

Results

Incarcerated girls and women

Incarcerated girls and women shared very different accounts than community stakeholders when discussing where they would turn for assistance following a sexual assault. Of the 16 young women from rural areas, 60 per cent said they either had no idea where to seek help or that they would not seek help, even with awareness of where to locate services. Carson (17 years, four months to serve) had an automatic response to the question asking where girls would first turn for help following a sexual assault, "I'd deal with it on my own." An additional 20 per cent identified schools as their first point of contact. Lastly, 20 per cent identified mothers as the person they would most likely talk to about their abuse. Most young women said they did not know who to contact for help and that many times "girls like me" are ignored, met with resistance, or somehow criminalised for their responses to abuse:

> 'Unless someone notifies the school about her, no one will do anything about it. That's a big thing now, mandatory reporters have to report that.' (Nora, 16 years, 36 months to serve)

> 'I know where to point adults who need help, but as far as kids or teens, no, not at all. It's seriously out of a movie where you have to be very careful what adult you tell and what help you need.' (Mary, 23 years, 23 months to serve)

'After I was sexually abused, I would self-harm by cutting my arms. I then took my sweatshirt off [at school]. The counsellor would notice, and she would be like, 'Why are you doing this?' Then they would call my parents to let them know. My dad would usually whip me for it.' (Christine, 15 years, 15 months to serve)

Many of these at-risk girls come from families of low socioeconomic status, depleted community connections and families unsure how to and/or unable to help. This composition adds an additional barrier when attempting to access services, including from their local churches. Regarding seeking out religious figures, across the 16 rural interviews, *no* participants mentioned the role of religion or religious figures when seeking assistance. This finding is stark in comparison to the perceptions held by community stakeholders.

Rural community stakeholders

Rural communities experience heightened community stigma regarding mental health and other health-related services, rendering faith-based help an appealing, confidential, non-judgemental option. As one Extension Agent noted, citizens are worried about public knowledge of mental health services: "Some feel the stigma or like the judgement of, 'Oh, I don't want to be associated with having mental health issues'." One juvenile judge added: "A lot of people are gonna know [about help-seeking]. Particularly for families who have financial means, they aren't going to go because of privacy. They don't want people to know." Other professionals know many sexual assaults are swept under the political rug, at times, due to family reputation, as two separate probation officers noted:

'Investigations here are underreported because there's a shame aspect to it. There's a guilt aspect to it. It's an embarrassing situation, so it's tough.' (Probation Officer, interview, 12 February 2018)

'When reporting and investigating, there are a couple of dynamics that play into that. You know, these upper-White-middle-class families do not want to bring that kind of attention down on their family, they're ashamed of it.' (Probation Officer, interview, 17 February 2018)

Family reputation influences all aspects and decision-points regarding sexual assaults. When girls are 'allowed' to ask for help, most professionals were aware of their unheard requests. In rural communities, services are greatly lacking. Of the 50 professionals, *all* rural stakeholders noted the gross lack

of options for sexually victimised girls. This message was not debatable for one juvenile-justice involved judge:

> 'Oh, God. If you ask anybody that works in this county, they'll tell you we have no treatment. We just don't have services for kids in this state, period. We do not have sufficient mental services, we don't have sufficient services for kids in school … we just don't have sufficient services.' (Juvenile Justice Judge, interview, 30 January, 2018)

When individuals do seek professional help, many do not know of services. Appropriate treatment may also be absent, difficult to access or lacking in quality. The following was a comment given by a court services officer regarding quality of the one rural mental health provider: "Mental health care is very limited here. We have one agency. I do not make referrals to them unless it's of urgency, and then I'm still hoping they bump them over somewhere else." While some rural towns did have access to mental health satellite offices, specialised treatment such as substance use, or gender-responsive programming, required an out-of-town referral – for most at-risk girls, their families could not afford the costs even if they wanted to. With satellite offices, one judge noted, "We have absolutely nothing here … we have one community mental health centre, but it's understaffed, overworked, and under qualified." One court services officer noted that these girls are "farmed out, because there is nothing here that we can offer them". In other cases, a combination of victim-blaming and gender stereotypes supported by patriarchal ideology, coupled with family name, influence how a case is perceived and handled, as noted by this court services officer:

> 'There tends to be a lot of trying to figure out who the victim is, questioning a girl who was raped. Is that really what happened or was she leading him on? That girl comes from a nice family so that scuzzy boy she was dating had to be at fault. They [police] want to figure out the details because it's not a statistic for them, it's their neighbour, or a person they go to church with, so the details must match up.' (Court Services Officer, interview, 17 January 2018)

Another probation officer reflected on the unfair biases that exist for certain sexual assault survivors in rural communities: "Prime example is, there's a boy over there [in an adjacent county], and his father is the CEO [chief executive officer] of a large manufacturing place. The CEO's kid was accused of a sexual assault at a party, but nothing happened because of who the girl was."

As one school principal noted, youth and parents rarely know where to turn for help: "I think most people are going to turn to their church, a minister, because there are so few community-level resources." A juvenile

judge seconded this sentiment, stating: "Other than the school system, churches. There is no other outlet besides church groups, no other adults they can talk to, if their family is not doing the job right. I'm not aware of anything else." Specific to religion, a belief in one's faith, and *active* participation in the church, is a must in maintaining a positive community reputation. As one youth services worker stated, "If you get engaged in the church, and if the kids get engaged, I feel like it's [rural community] pretty open arms." While this worker was aware of the significance the church played in one's rural belonging, she was unaware of how damaging this could be, especially for at-risk girls not welcomed into religious institutions. To further support the overreliance and overabundance of churches, the following describes comments by different professionals:

> 'There are a lot of churches [laughs]. I would say too many churches. Churches per capita, I don't even want to tell you those statistics.' (Extension Agent, interview, 12 March 2018)

> 'This town is a church-oriented place. Most of the community is religious.' (County Attorney, interview, 19 March 2018)

> 'Our community has a really vibrant church that does a lot for kids. They offer quite a bit for a small town.' (School personnel, interview, 19 March 2018)

> 'The churches seem to be fairly good at having an activity programme for kids and teens. Unless you're talking church, there aren't activities.' (Law enforcement officer, interview, 21 March 2018)

The last comment provided by a rural law enforcement officer resonated with other professionals – if youth are actively engaged in church-related activities, services are offered. Yet, when girls from less established families are seeking assistance, rural communities suddenly have no means for support.

Much like the incarcerated girls and women, community professionals recognised the lack of insight into community assistance programmes. One extension agent added that when youth do not seek help from the school system or their parents, "Pastors fill that void a lot. And that's about it [with no other services]", while a county attorney said, "When parents seek services or seek help for their kids, when formally recognised services are unknown, they go through their churches instead." While community workers recognise the lack of services, they mistakenly believed most youth, including those victimised by sexual assault, were seeking their churches for support. One school member shared that, "We have great teachers, coaches,

and great churches. We have been very intentional to try and make true to our churches coming alongside the kids outside of church as well." This same individual was insightful regarding who the church-friendly help-seekers included:

'The church is predominately middle-class. Not exclusively, but predominantly middle-class. I think your middle-class folks who are in church do turn to their ministers. I think people in poverty may have tremendous faith, but for various reasons, are not in the churches. So, I think they turn to someone they trust, someone they feel can help them.' (School member, interview, 2 February 2018)

Common ground: at-risk girls and professionals align

As described throughout the findings, incarcerated girls and women hold very different views on who and where to seek services following a sexual assault. Young women are more likely to seek family, friends or their school system, while community professionals believe this same population will seek their faith-based organisations. While the perceptions of community workers did not align with the responses from the incarcerated women, the two samples agreed on one approach to addressing treatment needs specific to rural communities – creating safe spaces for at-risk girls and families. The following includes examples noted by the young women:

'I would like to see a place created where I'm in a safe environment. A place where I could feel like I belonged.' (Carrie, 15 years, 18 months to serve)

'We need a place where girls can come and hang out, a safe place. A place where they can be around other girls doing legal things.' (Jamie, 16 years, 36 months to serve)

'I would like to improve the lives of young girls in my community. We need a place for young girls to hang out, where they feel safe. I would be a big advocate for them. A big sister kind of group.' (Nikki, 16 years, 36 months to serve)

'We should create a weekly group in the form of a youth centre, but for girls to come together and in a circle, sort of like a check-in space, so that everyone can feel safe and involved.' (Emerson, 26 years, 11 months to serve)

Additionally, community stakeholders agreed:

'Girls need someone or some place to turn when their family isn't doing an adequate job. Girls don't have anyone or anywhere they can go. So, they go to their peers, which is probably the worst place to go.' (Juvenile Justice, interview, 1 March 2018)

'If I had money, I would get places where girls could go for free, where they'd be in a safe environment, and not have to worry about anyone messing with them. This would be a safe place.' (School principal, interview, 14 February 2018)

'I would like to direct girls to a teen girl's centre. You know, if she's struggling she can go here to be safe. It's not mental health, just more a safe teen centre for girls.' (County Attorney, interview, 27 February 2018)

'I believe we need different kinds of services, not just mental health. If a girl walks into a mental health provider, they care that others know this. A general centre would allow a girl to get help for their troubles without everyone knowing you even have a problem.' (Extension agent, interview, 3 March 2018)

Many rural–specific dynamics exist that prevent at–risk girls from seeking help and being granted the 'privilege' associated with receiving community-based resources. As findings suggest, family reputation greatly impacts how a rural community responds to sexual assault. When cases are formally processed, concerns about ethical behaviour arise; when services are sought, fear of confidentiality surfaces. While the belief from community stakeholders is that at–risk girls are seeking support from their ministers, the findings do not bear this out.

Discussion and limitations

While much research remains absent in understanding unique aspects of rural violence, previous findings suggest rurality and patriarchal views negatively impede upon responses to sexual assault and rape across the globe. The current study aimed to better understand the role of religious services and providers in rural communities, by utilising interview data from incarcerated girls and women as well as community stakeholders. Specifically, the study sought to understand how rural communities respond to the reporting of at–risk young women's sexual victimisation including service availability and perceptions about help-seeking options.

Findings were consistent with previous literature – community responses vary based on reputations, with greater hurdles and less options for at–risk

girls with depleted family reputations. These young women rarely know of available resources and struggle to receive assistance. While community workers believe sexual assault survivors are seeking help from their faith-based organisations, at-risk survivors disagree. The disconnect between community workers' perceptions of appropriate help-seeking behaviours with that of at-risk girls' responses creates an engaging opportunity.

While the findings are interesting given the differing perceptions, these findings are not without limitations. First, the current findings were uncovered as part of a larger project looking at coercive sexual environments in rural communities. As such, intentional questions regarding the role of religion were not part of the interview guide but, rather, were unsolicited from participants. Second, while findings suggest at-risk incarcerated girls and women from rural communities do not seek faith-based support, it is possible that other rural citizens do in fact contact religious institutions for help, especially as this desire varies on an international scale. Future studies could consider a more generalised sample of rural participants to assess for perceptions of help-seeking options.

Implications

Since faith leaders are considered the gatekeepers of local communities, their influence is considerable and should be extended to *all* rural citizens, within the United States and beyond, including those without strong family ties to the church. Faith leaders have earned their rural community's trust and respect, and as such, they have the power to change local dynamics. Yet, first, such professionals should be educated on GBV as Gezinksi et al (2019) noted that religious leaders lack both the education and training to adequately support survivors. Their influence is powerful but can also result in the perpetuation and condoning of beliefs and practices that facilitate GBV (Le Roux et al, 2016). Across the globe, GBV education should address both the short- and long-term impacts of violence while equipping religious leaders with confidence in connecting survivors to legal, health and social services. Collaborative efforts could even consider a train-the-trainer model, where faith leaders can then take their training to their local faith-based organisations, as this model has worked for others (see Gezinski et al, 2019). With religious practices existing worldwide, and awareness that gender-based violence is a global issue, these implications are applicable on an international scale.

Second, once faith leaders possess the knowledge and confidence to respond to GBV, they can then educate their congregation. Faith-based leaders' roles in addressing GBV has not gone unrecognised. Groups such as the United States Agency for International Development and the Baptist World Alliance have called for more engagement on GBV. Research has

found the public blames victims for being abused while also not seeing GBV as a social issue in their localities (Eastman and Bunch, 2007). Working alongside organisations such as the National Alliance for Mental Health can help to reduce stigma and promote survivor support (Banyard et al, 2019), while religious bodies, such as the African Council of Religious Leaders, can assist by generating public awareness campaigns regarding GBV and rural communities.

Third, faith leaders should also work with other community professionals to increase collaborative efforts. Once awareness and appropriate knowledge of GBV is gained by religious leaders, they can then better communicate with mental health providers while also being more knowledgeable about available services. As Jackson (2015) found, professional counsellors value collaboration with the church. Partnerships can mobilise larger and influential community sectors in seeking to prevent GBV and impact overall cultural norms, beliefs and values, especially those supportive of a patriarchal viewpoint, which underlie GBV (Le Roux et al, 2016). This work is possible – it just requires local, regional, national and international movement.

Conclusion

Rural locations are known for their safe and close-knit interpersonal relations. Research has documented that GBV in rural areas is just as prevalent as in urban areas, but responses to said violence may vary. Specifically, reputations influence both formal and informal reporting mechanisms in rural places as well as availability and support for help-seeking behaviours. Interviews suggest community workers believe religious interventions are available and sought out by survivors of sexual assault, including at-risk young women whose family names and influence deter many from acknowledging the abuse and/or providing treatment. Yet, implications suggest faith-based organisations hold a great deal of power and influence, making education and awareness of this group crucial. Formalised training for religious leaders can influence generalised culture surrounding GBV while also leading to collaborative efforts with other professionals. Research suggests positive changes for rural communities willing to engage in dialogue surrounding GBV for faith-based organisations, including leaders and their congregation, with community professionals, with the needs of *all* rural citizens considered.

References
Anderson Moore, K. (2006) 'Defining the term "at-risk"', *Research to Results: Child Trend*, October, pub. no. 2006–12. Washington, DC: The Atlantic Philanthropies.

Banyard, V.L., Edwards, K.M., Moschella, E.A. and Seavey, K.M. (2019) '"Everybody's really close-knit": Disconnections between helping victims of intimate partner violence and more general helping in rural communities', *Violence Against Women*, 25(3): 337–358.

Bornsheuer, J.N., Henriksen Jr, R.C. and Irby, B.J. (2012) 'Psychological care provided by the church: Perceptions of Christian church members', *Counseling and Values*, 57(2): 199–213.

Breiding, M., Basile, K.C., Smith, S.G., Black, M.C. and Mahendra, R.R. (2015) *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements*. Version 2.0. Atlanta, Georgia: Centers for Disease Control and Prevention.

Carrington, K. and Death, J. (2014) 'Feminist criminologies' contribution to understandings of sex, gender, and crime', in R. Gartner and B. McCarthy (eds) *The Oxford Handbook of Gender, Sex, and Crime*, Oxford: Oxford University Press, pp 99–117.

DeKeseredy, W. and Schwartz, M.D. (2009) *Dangerous Exits: Escaping Abusive Relationships in Rural America*, New Brunswick: Rutgers University Press.

Donnermeyer, J.F. and DeKeseredy, W. (2014) *Rural Criminology*, New York: Routledge.

Eastman, B.J. and Bunch, S.G. (2007) 'Providing services to survivors of domestic violence: A comparison of rural and urban service provider perceptions', *Journal of Interpersonal Violence*, 22(4): 465–473.

Economic Research Service (2013a) *Rural America at a Glance*, Washington, DC: United States Department of Agriculture.

Economic Research Service (2013b) *Rural-urban Continuum Codes*, Washington, DC: United States Department of Agriculture.

Fowler, G. (2012) 'The ministry of care in twenty-first-century protestant congregations', *Pastoral Psychology*, 61(2): 197–210.

Freudenburg, W.R. (1986) 'The density of acquaintanceship: An overlooked variable in community research?', *American Journal of Sociology*, 92(1): 27–63.

Gezinski, L.B., Gonzalez-Pons, K.M. and Rogers, M.M. (2019) '"Praying does not stop his fist from hitting my face": Religion and intimate partner violence from the perspective of survivors and service providers', *Journal of Family Issues*, 33: 1–21. 0192513X19830140.

Horne, S.G. and Levitt, H.M. (2004) 'Shelter from the raging wind: Religious needs of victims of intimate partner violence and faith leaders' responses', *Journal of Religion & Abuse*, 5(2): 83–97.

Houston-Kolnik, J.D., Todd, N.R. and Greeson, M.R. (2019) 'Overcoming the "Holy Hush": A qualitative examination of protestant Christian leaders' responses to intimate partner violence', *American Journal of Community Psychology*, 63(1–2): 135–152.

Jackson, B. (2015) *What Makes Churches Grow? Vision and Practice in Effective Mission*, London: Church House Publishing.

Knickmeyer, N., Levitt, H.M., Horne, S.G. and Bayer, G. (2004) 'Responding to mixed messages and double binds: Religious oriented coping strategies of Christian battered women', *Journal of Religion & Abuse*, 5(2): 29–53.

Le Roux, E. and Valencia, L.C. (2019) '"There's no-one you can trust to talk to here": Churches and internally displaced survivors of sexual violence in Medellín, Colombia', *HTS: Theological Studies*, 75(4): 1–10.

Le Roux, E., Kramm, N., Scott, N., Sandilands, M., Loots, L., Olivier, J. et al (2016) 'Getting dirty: Working with faith leaders to prevent and respond to gender-based violence', *The Review of Faith & International Affairs*, 14(3): 22–35.

Loannou, M., Hammond, L. and Machin, L. (2017) 'Male-on-male sexual assault: Victim, offender and offence characteristics', *Journal of Investigative Psychology & Offender Profiling*, 14(2): 189–209.

Papalia, N.L., Luebbers, S., Ogloff, J.R., Cutajar, M., Mullen, P.E. and Mann, E. (2017) 'Further victimization of child sexual abuse victims: A latent class typology of re-victimization trajectories', *Child Abuse & Neglect*, 66: 112–129.

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749.

Pew Research Center (2016) 'How the faithful voted: A preliminary 2016 analysis', 9 November [online] Available from: https://www.pewresearch.org/fact-tank/2016/11/09/ how-the-faithful-voted-a-preliminary-2016-analysis/ [Accessed 4 January 2022].

Pina, A., Gannon, T.A. and Saunders, B. (2009) 'An overview of the literature on sexual harassment: Perpetrator, theory, and treatment issues', *Aggression and Violent Behavior*, 14(2): 126–138.

Popkin, S.J., Leventhal, T. and Weismann, G. (2010) 'Girls in the 'hood: How safety affects the life chances of low-income girls', *Urban Affairs Review*, 45(6): 715–744.

Popkin, S.J., Bogle, M., Zweig, J.M., Saxena, P.D., Breslav, L. and Michie, M. (2015) *Let Girls be Girls: How Coercive Sexual Environments Affect Girls Who Live in Disadvantaged Communities and What We Can Do About It*, Washington, DC: Urban Institute: Elevate the Debate.

Population Reference Bureau (2021) 'Faith-based organizations have a large role to play in addressing gender-based violence' [online] Available from: https://www.prb.org/articles/faith-based-organizations-have-a-large-role-to-play-in-addressing-gender-based-violence/ [Accessed 15 December 2021].

Potter, H. (2007) 'Battered black women's use of religious services and spirituality for assistance in leaving abusive relationships', *Violence Against Women*, 13(3): 262–284.

RAINN (2020) *Victims of Sexual Violence: Statistics* [online] Available from: https://www.rainn.org/statistics/victims-sexual-violence [Accessed 14 December 2021].

Rennison, C.A. (2002) *Rape and Sexual Assault: Reporting to Police and Medical Attention, 1992–2000* [NCJ 194530], Washington, DC: United States Department of Justice, Office of Justice Programs, Bureau of Justice Statistics.

Saar, S.M., Epstein, R., Rosenthal, L. and Vafa, Y. (2015) *The Sexual Abuse to Prison Pipeline: The Girls' Story*, Washington, DC: Georgetown Law Center on Poverty and Inequality.

Sherman, F. and Balck, A. (2015) *Gender Injustice: System-level Juvenile Justice Reforms for Girls*, Portland: National Crittenton Foundation.

Taylor, C. and Gassner, L. (2010) 'Stemming the flow: Challenges for policing adult sexual assault with regard to attrition rates and under-reporting of sexual offences', *Police Practice and Research*, 11(3): 240–255.

Terry, A.N. (2018) 'Dirt roads to justice and heartland girls: Coercive sexual environments in non-metropolitan communities', doctoral dissertation, Kansas State University. Available from: https://krex.k-state.edu/dspace/bitstream/handle/2097/39110/AprilTerry2018.pdf?sequence=3&isAllowed=y [Accessed 8 November 2022].

Terry, A.N. (2020) 'The architecture of rural life: The dangers of dense collective efficacy for at-risk girls', *Rural Sociology*, 85(3): 780–805.

Terry, A.N. and Williams, L.S. (2019) 'On the outside looking in: Rural girls, trauma, and involvement in the criminal justice system', *Journal of Aggression, Maltreatment & Trauma*, 30(3): 368–388.

Thomson, N.D. (2015) 'Priming social affiliation promotes morality – regardless of religion', *Personality and Individual Differences*, 75: 195–200.

Tickamyer, A.R. and Duncan, C.M. (1990) 'Poverty and opportunity structure in rural America', *Annual Review of Sociology*, 16(1): 67–86.

United Nations Women (2021) 'Facts and figures: Ending violence against women', [online] Available from: https://www.unwomen.org/en/what-we-do/ ending-violence-against-women/facts-and-figures [Accessed 15 December 2021].

United States Census Bureau (2017) 'Population' [online] Available from: https://www.census.gov/topics/population.html [Accessed 11 December 2021].

United States Census Bureau (2019) 'Quick facts' [online] Available from: https://www.census.gov/quickfacts/fact/table/US/PST045219? [Accessed 12 December 2021].

The University of Kansas (2016) *Population Density Classifications in Kansas by County, 2016*, Lawrence, Kansas: Institute for Policy & Social Research.

VanderWaal, C.J., Hernandez, E.I. and Sandman, A.R. (2012) 'The gatekeepers: Involvement of Christian clergy in referrals and collaboration with Christian social workers and other helping professionals', *Social Work and Christianity*, 39(1): 27–51.

WHO (World Health Organization) (2021) 'Devastatingly pervasive: 1 in 3 women globally experience violence' [online] Available from: https://www.who.int/news/item/09-03-2021-devastatingly-pervasive-1-in-3-women-globally-experience-violence [Accessed 9 August 2021].

Williams, L.S. and Craig-Moreland, D. (2005) 'Bad girls and rural pathways: Construction of girls' deviance and local social control', presentation, American Society of Criminology, Toronto, Canada.

Willits, F.K., Bealer, R.C. and Timbers, V.L. (1990) 'Popular images of "rurality": Data from a Pennsylvania survey', *Rural Sociology*, 55(4): 559–578.

PART III

Access to Rural Justice: Economic Consequences and Policy Implications

The Needs of Intimate Partner Violence Victims in Rural America

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Introduction

Understanding intimate partner violence (IPV) among victims in rural areas is challenging as underreporting is more pronounced and barriers to service make victims more difficult to reach. These barriers may include, but are not limited to, culturally constructed gender roles, stigmas associated with abuse, poverty, fear of retaliation, a lack of access to housing and employment services, and lack of family support (DuBois et al, 2019).

Given the prevalence and harms of IPV, communities must respond amply and appropriately with a culturally sensitive and trauma–informed approach to meet victims' needs. Community-based organisations and domestic violence service practitioners provide key services to victims such as housing, medical and legal support. These services, however, are not as readily available to victims who reside in rural or isolated areas. Given the difficulties rural IPV victims commonly encounter, the need to better measure and understand the magnitude and manners of harms becomes more urgent.

The findings presented here provide critical knowledge to the field regarding harms, challenges, access to justice and effective approaches to addressing IPV in rural communities. The authors first explore prevalence, barriers and the economic and emotional costs of IPV. Qualitative and quantitative data revealing both the short–term and long–term costs of family violence, limited access to rural justice, and effective policies to reduce IPV are needed.

The authors aim to extend the literature on the costs of IPV victimisation and service needs in rural communities and provide practical policy recommendations to service providers. While the specific examples presented here are derived from rural Kansas, these areas share many of

the same characteristics as rural areas nationally and internationally and therefore offer a guide to improving the availability of services and reducing harm to disparate victims experiencing similar challenges. Even though place and crime vary in many ways (such as local sociocultural, economic and political climate) and they are deemed to be unique (Donnermeyer, 2007), we provide a vivid picture to help readers understand the rural reality and variability, as well as similarities when it comes to access to justice elsewhere. We also provide some topical and methodological discussions on how to conduct research in such areas, as well as guide future studies and policy recommendations to reduce barriers to accessing justice in the United States and internationally.

Prevalence of intimate partner violence in rural areas

IPV is a significant public health crisis that often results in physical, emotional and financial abuse or death (Kernic et al, 2000; Banyard et al, 2019). Literature indicates that women are much more likely than men to suffer physical and psychological injuries from IPV (Rennison and Welchans, 2000). Abuse in relationships can occur between a current or former partner or spouse or cohabitating and same-sex partners (Dudgeon and Evanson, 2014).

Past research on IPV has primarily focused on urban settings (DeKeseredy et al, 2016) and has not, until recently, examined the prevalence of IPV in rural areas. As such, most IPV literature offers little insight when applied to rural areas, especially considering rural communities' socioeconomic and cultural context and the effect on violence and abuse. In this chapter, 'rural' is defined as an area that does not contain a delineated urbanised area with a population of at least 50,000 (CDC, 2010) or a Census Bureau definition of an urban cluster with at least 10,000 population (HRSA, 2021). The definition of rural should be idiosyncratic, with special attention to sociocultural, economic and localised variabilities (Hart et al, 2005). However, such discussion is beyond the scope of the current chapter.

Women in rural America report a higher prevalence of IPV than women in urban areas (22.5 per cent versus 17.9 per cent) (Peek-Asa et al, 2011). It is estimated that 20–28 per cent of women and 19 per cent of pregnant women in rural areas were victims of IPV, with 50 per cent of these women experiencing some violence in their households throughout their lifetime (Clifford, 2003). Furthermore, rural women reported significantly higher incidences of physical abuse (Peel-Asa et al, 2011) and greater psychological trauma than their urban counterparts (Roush and Kurth, 2016).

The overarching contribution of the current chapter is to provide a review of the challenges victims face to access justice services in rural communities. Some of the challenges relate to a national and global trend indicating scarcity of the local resources and the deeply felt impacts of the global pandemic.

Some of the challenges may be specific, such as local laws and policies, and the infrastructure shortage on employment and education for rural residents.

Barriers to access services in rural areas

Victim services include emergency shelter, counselling or therapy, advocacy, transitional housing and referral for other needed services (Peek-Asa et al, 2011). In addition, these resources provide safety for the survivor during a difficult transition, especially when children are involved. Many of these agencies in rural areas struggle with not having sufficient resources or being short-staffed (Peek-Asa et al, 2011). Geographical location is a significant factor in limiting access to service providers, which also results in victims in rural areas being underrepresented in IPV literature.

Another problem related to rurality is the limited number of agencies per square mile. For example, in northwest Kansas, one victim shelter oversees 18 counties, covering more than 17,000 square miles. Due to geographic isolation, victims may travel long distances to receive services (Dudgeon and Evanson, 2014). Transportation is often a significant barrier in seeking necessary services when victims have no access to vehicles (Annan, 2011); many are forced to consider the support of close friends and family, who often are (or know) their abusers, and consequently, confidentiality becomes a concern for IPV victims (Bender, 2016). Members of a rural community are often well-acquainted and tend to know more about each other than those in urban areas (Annan, 2011) and anonymity is difficult, if not impossible to maintain. As a result, victims will stay at home with their abusers, are often isolated, and have restricted contact with their families and friends, which is more likely to contribute to the abusive experience (Banyard et al, 2019).

Barriers to access service in rural America also include hostile and ineffective policies towards victims. Policies such as mandatory arrest and the issuing of protection orders create hesitation in victims needing to come forward to report and cooperate with the formal legal system. The problem with the traditional legal approach is that the arrest, investigation, court process and plea bargaining behind closed doors often fail to address the needs of victims and community members (van Wormer, 2019). Victims' lack of confidence in the criminal legal system results in lower rates of reporting. Some states have mandated warrantless arrest for perpetrators of domestic violence. Even differing by state, the law requires officers to 'make an arrest if (s)he finds probable cause to believe that an offense has been committed, a preferred arrest law instructs the responding officer that arrest is the preferred response' (Hirschel et al, 2007: 256). In other words, mandatory arrest policies require an arrest if there is probable cause to believe an assault occurred during a domestic violence incident. However, the discretion to arrest still rests with the responding officer (Benson, 2009).

In a rural setting, officers' biases and stereotypes based on what makes a 'good victim' often contribute to victim arrests. Patriarchal ideology has been prevalent in rural areas where male dominance and control are normalised and accepted. Such doctrine is detrimental to the wellbeing of women in rural areas since abuse and violence perpetrated by male figures can be observed every day in rural life (Websdale, 1998; DeKeseredy, 2021). Victims who do not conform to traditional female gender roles are more at-risk for arrest, especially in rural areas where such biases are firmly held (Rajan and McCloskey, 2007). A survey of rural county sheriffs in the United States revealed a connection between sheriffs' attitudes and beliefs in several harmful myths (involving women and violence against women) and what policies were set in place to handle such violence (Farris and Holman, 2015). Dismissive attitudes towards women and beliefs in sexual assault and rape myths resulted in fewer mandatory arrest policies or deputies trained to address rape and sexual assault, especially in rural jurisdictions. Those who rejected stereotypical beliefs of women were also more inclined to enforce stricter policies (O'Neal and Hayes, 2020). Those who believed such myths were less likely to have mandatory arrest policies. Another study revealed that officers with negative views of women and victims of domestic abuse were more likely to arrest both the abuser and victim (Lambert et al, 2007). It is important to note that gender stereotypes may be more rigid in some places than in others around the globe. Therefore, examining the degree of gender disparities in social norms and the process of socialisation and perceptions towards gender roles within a given society may render insights into the formal system responses towards IPV.

Mandatory arrests may also occur more frequently when abusers manipulate the criminal justice system, especially when responding officers lack domestic violence-specific training. For example, the abuser may claim to be the victim of domestic violence or gaslight (a form of manipulation in an abusive relationship, such as victim-blaming) the victim for overreacting in certain circumstances. Studies show arrests for women during domestic violence situations have risen by 25–35 per cent since 2000. The estimate that these women are actual primary batterers is between 1 and 7 per cent, at most (Rajan and McCloskey, 2007). An analysis of the 2010 National Crime Victimisation Survey found decreases in the reporting rate for domestic abuse with increases to mandatory arrest policies mainly due to the victims' fear of being misidentified as the abuser (Novisky and Peralta, 2015).

With regards to protection orders, rural victims had higher perceived barriers against being granted one and having it enforced compared to victims in urban areas (Logan et al, 2005). Victims were also prone to have less knowledge as to what options were available. Mandatory arrests and problems in issuing protection orders may involve significant costs to the criminal justice system when arresting both parties while also reinforcing

greater risks for reoffending. The policies led to added barriers for victims reporting to, and seeking help from, the legal system. In addition, the punitive nature of such procedures may jeopardise the safety of victims and their children and upend the life of victims, both socially and economically. Finally, the decrease in reporting may disguise the actual prevalence of IPV and other health and physical costs associated with victimisation for both survivors and communities.

Victims face many challenges when leaving an abusive relationship. One obstacle is the lack of financial stability (DuMonthier and Dusenbury, 2016). Economic abuse is one of the most common, yet least recognised, tactics abusers perpetuate in IPV (Postmus et al, 2012). Typical forms of economic abuse may include preventing victims from acquiring or using resources or exploiting victims' resources. Studies indicate more than half of victims experienced financial hardship due to spouses withholding financial income or loss of employment (Stylianou, 2018). Financial hardship has also been found to increase the risks and severity of IPV, especially in low-income and middle-income countries. Women who experience extreme poverty, who are younger, less educated and live in rural areas are much more vulnerable to IPV exposure in most countries (Coll et al, 2020). Due to a lack of employment, emotional readiness, access to education, physical and mental health, alongside caretaking responsibilities and a possible criminal background, being economically independent can be a significant challenge for survivors.

Another emerging but critical barrier to access rural justice is the impact of the global COVID-19 pandemic since the end of 2019. Research regarding IPV during disasters, such as COVID-19, has been very limited (Buttell et al, 2021). Available literature concluded that IPV does increase in the aftermath of disasters (Madigan et al, 2021; Slakoff et al, 2020). However, limited research has focused on the short-term and long-term impact of the pandemic on victims of IPV. Some recent research indicates that domestic violence increased immensely during the pandemic and calls made to service providers also spiked (Slakoff et al, 2020). For those already experiencing IPV, the stress only worsened during the pandemic, causing more violence in the home. While individuals were forced to stay at home, many also lost their jobs, leading to increased financial insecurity (Madigan et al, 2021). The stress of the pandemic and increased economic insecurity led to additional disagreements and violence. Many service provider agencies were unable to operate at full capacity due to the responsibility to reduce the spread of COVID-19 (Slakoff et al, 2020), leaving IPV victims without support.

As a result of these complications, many agencies encountered additional challenges in reaching out and providing services to the victims. Service providers turned to telehealth services to conquer these challenges, including videoconferencing, phone or text (Madigan et al, 2021), and online and

149

virtual chat (Slakoff et al, 2020). Not only did this allow services to be provided from a safe distance, it also gave the individual full access to the treatments and services that were needed. In addition, telehealth resolved the transportation concern, as individuals could access these services from their homes rather than needing to find transportation to and from the service agencies (Madigan et al, 2021). This new approach also reduced the waitlist for individuals seeking assistance as well as reducing costs of accessing services. Due to individuals being able to access services from home, they no longer needed to worry about travel costs or the cost of missing an appointment (Madigan et al, 2021). While the spread of telehealth seems innovative and feasible, one of the main concerns is ensuring safety for the victims. According to Slakoff et al (2020), abusers usually monitor the communication made by the victim, limiting their access to friends and family, depriving them of basic needs, and concealing vital information regarding the pandemic or health precautions.

Direct and indirect costs of intimate partner violence

Estimating the direct and indirect costs of IPV to victims, families and society is essential to understanding victims' needs and how best to allocate resources and programmes. Direct costs usually include any expenditure and lost opportunity associated with crime. For example, the most prevalent consequences of IPV are the economic impact of medical spending, loss or lack of employment opportunities, and housing costs. Direct costs also include legal (both criminal justice and civil legal systems), health (physical and mental), social services (such as child and victim services), housing, and employment instability (Walby, 2009). Often, these tangible costs may directly relate to indirect costs, such as long-term trauma, which are much more complex to measure.

There is well-established literature on domestic violence and its long-term impact on survivors' career and economic development (Crowell and Burgess, 1996). According to the National Centre for Injury Prevention and Control (2003), the direct costs of IPV exceeded an estimated US$5.8 billion per year, which is equivalent to US$9.3 billion in 2017 (McLean and Bocinski, 2017). This amount included almost US$4.1 billion in medical care and mental health care and almost US$1.8 billion in the indirect costs such as lost productivity and value of lifetime earnings. The largest component of IPV costs is healthcare, accounting for almost US$4.1 billion – more than two-thirds of the total costs. Due to the difficulty in accessing services and the consequent underreporting, many believe the costs of IPV are underestimated. These figures fail to delineate between rural and urban areas, which cause additional difficulties in determining localised needs and limit effective resource allocation.

Indirect costs involve, but are not limited to, the trauma and losses experienced by victims and their families beyond property loss and service expenditures (Cohen et al, 1994). Indirect victimisation costs may also include fear of crime, fear of retaliation, long-term physical and emotional harm, and harm to secondary victims. Indirect costs are often associated with pain and suffering, quality of life, loss of affection, other long-term traumas experienced by the victim or those closely related to the victim, such as children and other family members (Lugo and Przybylski, 2019). The indirect costs, such as emotional trauma, have not been calculated in dollar amounts consistently nationwide.

Patterns of IPV are complex and hard to predict. In addition, ongoing relationships between partners often shape victims' decision-making and behaviour, resulting in difficulty recognising their abusive relationships (NIJ, 2009). IPV victims experience more physical health problems and have a higher occurrence of depression, suicidal thoughts and chemical dependency than persons (primarily women) who have not experienced abuse (Kessler et al, 1994; Golding, 1996). They also use/need healthcare services more often (Miller et al, 1993). While most of the literature focuses on IPV in urban and suburban areas, little research has examined the prevalence and costs of IPV in rural areas (Peek-Asa et al, 2011).

The prevalence of intimate partner violence in rural Kansas

In this chapter, the researchers report findings from a pilot study measuring the costs of victimisation from service providers' perspectives in Kansas and the associated barriers and challenges that victims face when trying to access needed services. Both quantitative and qualitative data demonstrate the unique experiences of IPV in a predominantly rural area. The state of Kansas is centrally located in the United States, which is known for its vast plains and is commonly referred to as the Heartland of America. According to the United States Census, in 2020, approximately 26 per cent of the population in Kansas resides in rural areas, as defined above (United States Census Bureau, 2020). The goal for this case study was to understand how service providers in Kansas recognise those circumstances that may mitigate or contribute to a higher risk of IPV, how they estimate IPV costs – including direct and indirect costs – and associated challenges to estimating these costs.

The prevalence of IPV is ascertained from the Kansas Bureau of Investigation (KBI) and the Kansas Coalition Against Sexual and Domestic Violence (KCSDV). Underreported incidences, dismissals and victimisation without seeking services are not included in these reports. According to the KBI (2018), in 2018, there were a total of 24,066 incidents related to domestic violence and stalking reported to law enforcement in the state of

Kansas. This number reflects a 6 per cent increase from 2017 and is equal to 8.2 per 1,000 persons. The incidents occurred mostly within homes (84.6 per cent). According to the KCSDV (2020), 39,604 crisis hotline calls and 69,641 victims were served in 2020. Among all the victims served, 25,981 victims received face-to-face, non-shelter services, and 4,056 victims received shelter services.

This study

To better understand the scope, barriers and costs of IPV in Kansas, the researchers conducted a state-wide online survey. The survey was adopted and revised from Lugo and Przybylski's (2019) research on the financial costs of crime victimisation sponsored by the United States Department of Justice and Justice Research and Statistics Association. The survey questions requested information about services offered, used terminology understood by staff, and had consistent questions that allowed for a wide applicability to what service providers have seen in their programmes. Specifically, the survey measured the following: characteristics of the organisations; harms associated with IPV including direct and indirect impacts; human and emotional costs associated with different levels of IPV victimisation; and ways to calculate the overall costs that align with unique experiences of rural IPV victims.

Costs of IPV were estimated using victims' stated experiences and total cost of services they had or should have received. While the survey questions included the areas mentioned, it also asked open-ended questions in which respondents could clarify the prevalence and costs of services not covered in the study and provide opinions on various ways of measuring the costs. Human and emotional costs were measured through questions relating to services that may mitigate and reduce victimisation costs. There were 34 questions in total, including dichotomous, Likert-scale, and open-ended questions.

Sample

The researchers contacted the Executive Director of the KCSDV, a non-profit organisation overseeing victim advocacy agencies in Kansas, and coordinator of the Kansas Governor's Office to share the survey with prospective respondents who provide direct services to IPV victims. Overall, there were 26 independent non-profit organisations in the state of Kansas providing services, including victim advocacy, counselling, crisis intervention and/or emergency shelter, to IPV victims. There were also approximately 39 existing Kansas Sexual Assault Nurse Examiner (SANE) programmes throughout the state. Approximately 385 surveys were sent to potential correspondents, including all executive directors of the advocacy programmes (30), tribal,

interpreter, advocates contacts (307), SANE nurse programmes (39) and legal advocates (45). Data were collected during four months throughout 2020, and 86 (22 per cent) valid responses were collected by the end of the data collection period.

Data analysis – descriptive statistics: types of organisations

The data indicates most respondents identified as frontline staff (see Table 10.1) working for non-profit organisations, including victim advocacy agencies, shelters or other community-based victim services. The survey results, reported in Table 10.1, include a breakdown of organisation type, years of experience and current position of the respondents, as well as size of the organisation, the service area and organisational affiliation. Twenty-three per cent of respondents identified as the manager or supervisor and 68 per cent stated their service area was rural. For the purposes of this survey, rural is a subjective measurement primarily based on the respondents' assessment.

Understanding harms associated with intimate partner violence

Responses from the survey were consistent with the limited literature available on IPV victimisation in rural areas. Emotional abuse, lost or damaged property, poor relations with family/friends, and fear of retaliation were common in the IPV victims' experiences according to victim–service workers' perceptions of the issues. Importantly, both emotional and property loss were rated higher than physical injuries. One explanation is that emotional and property abuses are more prevalent in providers' observations. However, it is also possible that IPV victims may lack access to medical care. In addition, the lost days at work or school were rated less prevalent than other harms. It may indicate that IPV victims in Kansas also lack employment and educational opportunities, preventing the victims from becoming financially independent from their abusers. Table 10.2 provides quantitative results to questions regarding direct effects of IPV.

The researchers explored additional harms associated with IPV victimisation in Kansas. These narrative responses provided critical insight to the unique experiences of rural IPV victims from the perception of service providers, as reported in what follows, including those linked to poverty, lack of affordable and safe housing, childcare and safety, fear of deportation, experiencing discrimination in the criminal legal system, animal abuse, and loss of dignity. Service providers also observed that victims experienced difficulty seeking help that was necessary to escape abuse. Instead, victims commonly faced harsh, unempathetic, punitive treatment from family, communities and the legal system.

Table 10.1: Respondent breakdown (n/%)

Organisation types	
Non–profit organisation	57 (76)
Hospital or emergency department	5 (6.7)
Physical or mental health service provider (not based in a hospital)	1 (1.3)
Justice-system based (such as law enforcement, courts, prosecution, correction, etc)	5 (6.7)
Campus organisation or other educational institution	4 (5.3)
Tribal agency or organisation	3 (4.0)
Years of experience working with victims	
Less than one	9 (11.4)
1–4	23 (29.1)
5–9	20 (25.3)
10–19	18 (22.8)
20 or more	9 (11.4)
Current position	
Frontline staff (such as advocate, nurse, case manager)	50 (61)
Mid-level manager (such as programme coordinator, staff supervisor, charge nurse)	19 (23)
Executive director (of an organisation)	7 (9)
Others	6 (9)
Number of paid staff	
Less than 10	16 (20)
11–49	59 (73)
50–99	1 (1.3)
100 and more	4 (5.0)
Service area(s)	
Rural	51 (68)
Urban	16 (21.3)
Suburban or tribal areas	8 (10)
A state–level or national–level victim services organisation or association	
Yes	67 (83.8)
No	7 (8.8)
Don't know	6 (7.5)

Table 10.2: Understanding harm (n/%)

Always	Often	Sometimes	Rarely	Don't know
Physical injuries requiring medical attention				
2 (2.6)	23 (29.9)	42 (54.5)	9 (11.7)	1 (1.3)
Physical injuries not requiring medical attention				
6 (7.8)	45 (58.4)	24 (31.2)	1 (1.3)	1 (1.3)
Emotional suffering, such as anxiety or stress				
55 (71.4)	20 (26.0)	1 (1.3)	0 (0.0)	1 (1.3)
Mental healthcare costs				
15 (19.5)	47 (61.0)	11 (14.3)	2 (2.3)	2 (2.3)
Lost or damaged property				
8 (10.4)	44 (57.1)	20 (26.0)	3 (3.9)	2 (2.3)
Legal costs, including lawyer's fees				
7 (8.1)	39 (50.6)	26 (33.8)	3 (3.9)	2 (2.3)
Lost days at school or work due to physical and emotional harms				
13 (17.1)	38 (50)	22 (28.9)	0 (0)	3 (3.9)
Lost days at school or work due to court proceedings				
11 (14.3)	25 (32.5)	35 (45.5)	3 (3.9)	3 (3.9)
Lost job or withdrew from educational programme				
2 (2.6)	27 (35.1)	35 (45.5)	8 (10.4)	4 (5.2)
Problems with family or friends				
15 (19.5)	44 (57.1)	15 (19.5)	1 (1.3)	2 (2.6)
Fear of crime and/or victimisation				
22 (28.6)	44 (57.1)	6 (7.8)	2 (2.6)	3 (3.9)
How often are victims' children negatively affected by victims' experiences?				
38 (55.9)	23 (33.8)	7 (10.3)	15 (17.4)	3 (3.50)
How often are victims' other family/relatives negatively affected by victims' experiences?				
8 (11.8)	48 (70.6)	12 (17.6)	17 (19.8)	1 (1.16)
How often are victims' friends negatively affected by victims' experiences?				
4 (5.9)	38 (55.9)	21 (30.9)	4 (5.9)	1 (1.5)
How often are victims' neighbours negatively affected by victims' experiences?				
3 (4.4)	9 (13.2)	39 (57.4)	12 (17.6)	5 (7.4)
How often are victims' co-workers/classmates negatively affected by victims' experiences?				
3 (4.5)	16 (23.9)	35 (52.2)	9 (13.4)	4 (6.0)

Housing insecurity

Being evicted from housing because of IPV and damages that have been done to property and/or disturbance due to abusers' aggressions. Such as mandatory arrest law. (Advocate, Qi et al, 2020)

Loss of housing, loss of children through court proceedings, loss of transportation, loss and/or harm to pets, loss of state assistance benefits, damage to credit scores, loss of church/faith-based community, loss of personal & non-replaceable heirlooms (pictures, furniture, letters, etc). (Advocate, Qi et al, 2020)

Immigration status as a threat

Threats to use immigration status to deter victims from reporting. (Advocate, Qi et al, 2020)

Deportation threats. (Advocate, Qi et al, 2020)

Racial injustice

Racism and racial bias throughout the system response. (Hospital, court, law enforcement, MH [mental health].) (Advocate, Qi et al, 2020)

Some victims, more likely those of color, being arrested for DV [domestic violence] when the perpetrator manipulated law enforcement. This causes additional trauma, stigma, missed time at work, and difficulty finding employment due to criminal background. (Advocate, Qi et al, 2020)

Children's custody

I see IPV as an underlying issue in many child welfare cases, so the costs of the victims' involvement with CPS for 'failure to protect' are very important. Also, I see harms from legal involvement the IPV victim had during their relationship manifest in being denied subsidised housing or blacklisted in rural areas with local landlords because of their known association with the abuser. (Advocate, Qi et al, 2020)

Fear of losing access to their children or fear of their children being unsafe. (Advocate, Qi et al, 2020)

Low self-esteem

Distorted image of self and world (low self-esteem, paranoia/hypervigilance), drug/alcohol use to cope, chronic instability (job, home, relationships), psychological harm to children, insecure parenting skills/self-image, shame/silence. (Advocate, Qi et al, 2020)

Fear of retaliation

Harm to pets. (Advocate, Qi et al, 2020)

Harms from substance abuse being a common coping mechanism for IPV victims. I marked 'rarely' on legal costs including lawyer fees because the 'often' answer is that they can't afford a lawyer and simply aren't represented. Advocates are the ones doing most civil and criminal legal advocacy, costs paid through the agency funding sources. (Advocate, Qi et al, 2020)

Lack of trust towards the justice system

Fear of trusting others, difficulty reaching out for help, credit ruined. (Advocate, Qi et al, 2020)

Officers lack domestic violence specific training and behave punitively towards victims. (Advocate, Qi et al, 2020)

Indirect costs associated with intimate partner violence victimisation

Indirect victimisation measures the magnitude of harm that family, friends and community may suffer. Family (including dependent children), friends or those closely related to victims are most likely to be impacted by victims' experiences. Victimisation can negatively impact family members' emotional and physical health, especially children who reside in the same household where the abuse occurs. Research has found that children (especially males) who witness domestic violence are at a higher risk of being victimised themselves or becoming abusers as adults (Hochstein and Thurman, 2006).

IPV is also a public health crisis when victims experience a diminished level of physical health, productivity and healthy relations with family, friends, co-workers and the community due to abuse and trauma. For example, many IPV victims in rural areas may suffer emotional and financial loss when their pets and farm animals are a factor in an abusive relationship. Victims may either forego their beloved animals or witness animal abuse from their abusers. Table 10.3 provides quantitative results to questions regarding indirect effects of IPV.

Table 10.3: Indirect victimisation (n/%)

Always	Often	Sometimes	Rarely	Don't know
How often are victims' children negatively affected by victims' experiences?				
38 (55.9)	23 (33.8)	7 (10.3)	15 (17.4)	3 (3.50)
How often are victims' other family/relatives negatively affected by victims' experiences?				
8 (11.8)	48 (70.6)	12 (17.6)	17 (19.8)	1 (1.16)
How often are victims' friends negatively affected by victims' experiences?				
4 (5.9)	38 (55.9)	21 (30.9)	4 (5.9)	1 (1.5)
How often are victims' neighbours negatively affected by victims' experiences?				
3 (4.4)	9 (13.2)	39 (57.4)	12 (17.6)	5 (7.4)
How often are victims' co-workers/classmates negatively affected by victims' experiences?				
3 (4.5)	16 (23.9)	35 (52.2)	9 (13.4)	4 (6.0)

Ways of calculating costs of victimisation

In the current study, almost 60 per cent of respondents believed the calculation of victimisation costs was helpful for their work. Specifically, advocacy for the increased resources (69.8 per cent) and as reference for grant applications (68.6 per cent) were the primary reasons for calculating the costs. Respondents, via open-ended questions, provided important insights on ways to calculate the costs of victimisation (see the narrative responses in the following sections). According to the responses, the direct costs of victimisation include medical expenses, therapy and other services provided by the victim advocates, the costs of criminal procedure, including the responses to calls, investigation, prosecution and court fees; while indirect costs include loss of productivity due to long-term trauma and indirect impacts on family members. The responses that follow are the main themes from the responses. They also indicate that service providers, personally, may bear some of the direct costs due to transportation needs, insufficient staffing and limited (yet vital) resources.

> Cost of service (advocates, shelter and medical care). Number of victims (direct and indirect) served; cost to provide services (minus some specific admin expenses). (Advocate, Qi et al, 2020)

> Calculated the cost of medical services by treatment and visit. (Advocate, Qi et al, 2020)

> Expense reports/actual calculating money spent on victims when we would purchase an item for them. We use a reporting database to record

any time we help them with clothing, food, hygiene items, and other financial assistance. (Advocate, Qi et al, 2020)

Purely from a budgetary standpoint identifying costs that are determined to be allowable within the funding scope. Staff salary, client services, training, etc. (Advocate, Qi et al, 2020)

Measure community resource capacity usage, such as how much law enforcement time is spent responding to calls, medical appointment slots used for victims, percent of available affordable housing units used for victims, etc. (Advocate, Qi et al, 2020)

Intangible emotional costs

Emotional trauma to advocates. (Advocate, Qi et al, 2020)

In the mental and physical health of the survivors of violence and their children. (Advocate, Qi et al, 2020)

Long-term trauma and impact to family that can't be calculated easily. (Advocate, Qi et al, 2020)

Discussion

IPV victims in rural areas are subject to unique social, legal and economic abuses. Financial constraints may be more pronounced for victims in rural areas because most employment opportunities in rural communities are low-paying, low-skilled and labour-intensive, providing fewer opportunities for advancement and economic independence (Klein et al, 2017). Victims may also lack education and have limited knowledge about how to seek financial support. Abusers tend to take away individual autonomy from the victim by making all critical decisions, isolating both the social and financial networks of the victim. Without financial independence, victims may be afraid to seek victim services or medical care, especially when affordable healthcare and mental health services are insufficient.

As indicated in the survey, respondents expressed their concern regarding the punitive responses from the criminal justice system, such as the mandatory arrest policies. Such punitive responses from law enforcement create additional barriers to victims' willingness to report and such policies may jeopardise the safety of victims and their children while upending the lives of victims socially and economically. The closed-door nature of the system also erodes victims' confidence in a favourable outcome. Victims' lack of

confidence in the criminal justice system results in lower reporting rates, which may cause an increase in IPV offences.

In addition to the everyday barriers that victims face, some additional challenges immigrant victims commonly experience are fear of deportation, language barriers, and lack of awareness of rights and protections. In this study, several respondents mentioned immigrant victims feared deportation. The threat of deportation is a powerful deterrent for immigrants to report their abusers, especially when children are involved in the relationship (Runner et al, 2009). Often, abusers use immigration status to threaten deportation and warn that the abuser and children could be deported if victims decided to report. The Violence Against Women Act's immigration remedies can prevent or interrupt the actual deportation of an IPV immigrant victim. This threat remains and is exacerbated when a victim lacks information about their rights and options.

As mentioned earlier, IPV is often more prevalent in rural than urban areas; yet, victim services are less accessible to rural residents. Victim services provide safety for the survivor during a difficult transition, especially when children are involved. As a result, victims of domestic abuse must not only find the appropriate resources to maintain their own and their children's safety, but also gain access to them. The limited number of agencies for a particular area is of paramount concern in these situations. For instance, in rural northwestern Kansas, one victim shelter provides services for over 13 counties, and for some, the shelter is 200 miles away. Transportation may be an issue in seeking out the necessary services when victims have no access to vehicles. Many rely on the support of close friends and family, who often are (or know) their abusers. Confidentiality is a considerable concern for IPV victims. Further complications arise when providing victims services in rural areas as it may be difficult for IPV survivors to access resources due to staffing shortages, lack of programmes and geographic isolation, or even a complete lack of service providers within an accessible area.

It is important to examine the intersectionality of financial constraints, poverty, gender disparities and lack of access to services in rural areas around the globe. Such barriers and challenges observed in rural Kansas may also be, unfortunately, well regarded in countries experiencing a higher level of poverty and lower level of social access to services overall. Therefore, more research should prioritise place-centred studies focusing on the unique sociocultural characteristics of rural areas and the needs of the victims.

Conclusion

The current chapter provides critical insights on the prevalence, barriers to access, needs of victims and IPV-associated costs from service providers'

perspectives, specific to rural Kansas, with an intent to draw policy implications for other rural communities. The findings from the study are consistent with the available literature on IPV in rural areas. First, victims of IPV in rural Kansas experience long-term emotional and psychological trauma. The effect of long-term trauma may further jeopardise the productivity, health and social engagement of victims. Adequate and affordable care addressing the psychological and emotional wellbeing of the victims is critical. Second, victim service providers should address the unique needs of rural victims, including intervention programmes involving aftercare for children and pets, transportation, and sufficient availability of services. Third, law enforcement in rural communities should participate in trauma-informed and domestic violence-specific training with an understanding that punitive policies incur significant costs to the criminal legal system when they fail to properly address victims' needs.

Addressing economic independence is crucial to set victims on the path of freedom. Programmes to connect with education and employment opportunities should be a priority to victim service providers. IPV affects a significant proportion of the population in the United States and around the world. It profoundly influences the economic security, health and wellbeing of victims and their families, as well as the community and society.

Another contribution of the current chapter attempts to provide a viable method of the measurement of the costs of victimisation including both tangible and intangible costs through quantitative and qualitative measures from the perspective of service providers. The underlying causes of IPV are complex and deeply entrenched in places that are permeated with patriarchal values, racism, classism and sexism. However, the causes of IPV are maintained and even (intentionally or unintentionally) encouraged, by varied spaces, places and times. Researchers and policymakers should prioritise the intersectionality of socioeconomic and cultural inequalities and IPV in rural areas and develop future research and policy changes. To fully measure the scope and costs of IPV, future studies should be survivor-centred. Such research should recruit survivors to provide their insights and systematically examine their perceptions of what is most important to keep them safe, ensure accountability and restore their wellbeing. Thus, more resources should be allocated to address these needs in these areas.

Despite the endeavour of the study, limitations should be acknowledged from a methodological perspective. For example, the methodology can be improved to include both survivors and service providers' voices through survey and focus groups. Efforts to include more respondents, especially victims who did not seek or receive services, into the study can also broaden the understanding of the overall costs of victimisation, as well as identifying barriers for IPV victims in accessing services. Thus, researchers should be

mindful to build networks and rapport with agencies and connections outside of the legal system to reach a broader population.

The current survey only represents the perceptions of service providers. To fully measure the scope and costs of IPV, future studies should be survivor-centred. Such research should recruit survivors to provide their insights on all measures in the survey and systematically examine their perceptions of what responses keep them safe, ensure accountability and restore their wellbeing from the wide range of harms caused by IPV. Researchers need to gather information about a range of responses to IPV, from law enforcement interventions to batterers' intervention programmes, from healthcare, mental healthcare and employment to community-based organisations.

Although survey results may not represent every service provider's voice, or every rural community in the United States and around the globe, the key takeaway is that IPV victims in rural areas encounter unique barriers to access affordable and necessary care and programmes. Researchers who plan to conduct a similar study could easily replicate the survey instrument and add additional open-ended questions tailored to the specific needs and characteristics of the rural area in their study.

Finally, the researchers propose a novel idea to examine the intersectionality of economic empowerment and the ending of violence. Supporting survivors through career counselling and development are crucial to their long-term wellbeing and successful transitions. Research on social psychology and counselling in most recent studies also implicated the importance of incorporating employment and intervention into victims' services. The policy recommendations from this research suggest that an effective career counselling and support programme should address survivors' personal feelings and beliefs. It includes the emphasis on confidence, hopefulness and personal goals of the victims (Chronister and McWhirter, 2006).

When it comes to specific programme strategies, the researchers recommended interventions focusing on the following: collaboratively identify the needs and barriers of the survivors; build a strong social network for survivors, which allows them to make successful life choices; understand the contextual situation the survivors face, such as their career concerns, family structure, religious beliefs and socioeconomic circumstances; identify the strengths and skills of the survivors which may contribute to their success during their recovery; increase social consciousness which emphasises the importance of self-esteem and freedom of choice; connect the survivors to the community, which promotes a restorative environment for survivors and improvements in the community and its response and ensures the long-term safety of survivors and their families.

References

Annan, S. (2011) '"It's not just a job. This is where we live. This is our backyard": The experiences of expert legal and advocate providers with sexually assaulted women in rural areas', *Journal of American Psychiatric Nurses Association*, 17(2): 139–147. DOI: 10.1177/1078390311401024

Banyard, V.L., Edwards, K.M., Moschella, E.A. and Seavey, K.M. (2019) '"Everybody's really close-knit": Disconnections between helping victims of intimate partner violence and more general helping in rural communities', *Violence Against Women*, 25(3): 337–358. DOI: 10.1177/1077801218768714

Bender, A.K. (2016) 'Using the consolidated framework for implementation research to increase provider screening for intimate partner violence in rural health clinics', *Women's Health Issues*, 26(4): 384–392. http://dx.doi.org/10.1016/j.whi.2016.05.005

Benson, S.R. (2009) 'Failure to arrest: A pilot study of police response to domestic violence in rural Illinois', *American University Journal of Gender, Social Policy & the Law*, 17(3): 685–703.

Buttell, F., Cannon, C.E.B., Rose, K. and Ferreira, R.J. (2021) 'COVID-19 and intimate partner violence: Prevalence of resilience and perceived stress during a pandemic', *Traumatology*, 28(1). https://doi.org/10.1037/trm0000296

CDC (Centres for Disease Control and Prevention) (2010) *Intimate Partner Violence: Definitions*, Atlanta: CDC [online] Available from: http://www.cdc.gov/violenceprevention/intimatepartnerviolence/definitions.html [Accessed 20 June 2021].

Chronister, K.M. and McWhirter, E.H. (2006) 'An experimental examination of two career interventions for battered women', *Journal of Counseling Psychology*, 53(2): 151–164. https://doi.org/10.1037/0022-0167.53.2.151

Clifford, A. (2003) 'Intimate partner violence in rural women', *Kentucky Nurse*, 51(4): 9.

Cohen, M.A., Miller, T.R. and Rossman, S.B. (1994) 'The costs and consequences of violent behaviour in the United States', in J. Roth and A. Reiss (eds) *Understanding and Preventing Violence*, Washington, DC: National Academy Press, pp 67–166.

Coll, C., Ewerling, F., García-Moreno, C., Hellwig, F. and Barros, A. (2020) 'Intimate partner violence in 46 low-income and middle-income countries: An appraisal of the most vulnerable groups of women using national health surveys', *BMJ Global Health*, 5(1): E002208.

Crowell, N.A., and Burgess, A.W. (eds) (1996) 'Understanding violence against women', *American Psychological Association*. https://doi.org/10.1037/10204-000

DeKeseredy, W.S. (2021) *Woman Abuse in Rural Places*, New York: Routledge.

DeKeseredy, W., Hall-Sanchez, A., Dragiewicz, M. and Rennison, C. (2016) 'Intimate violence against women in rural communities', in J. Donnermeyer (ed) *The Routledge International Handbook of Rural Criminology*, London: Routledge, pp 171–179.

Donnermeyer, J. (2007) 'Rural crime: Roots and restoration', *International Journal of Rural Crime*, 1: 1–20.

DuBois, K.O., Rennison, C.M. and DeKeseredy, W.S. (2019) 'Intimate partner violence in small towns, dispersed rural areas, and other locations: Estimates using a reconception of settlement type', *Rural Sociology*, 84: 826–852. https://doi.org/10.1111/ruso.12264

Dudgeon, A. and Evanson, T.A. (2014) 'Intimate partner violence in rural U.S. areas: What every nurse should know', *American Journal of Nursing*, 114(5): 26–36. DOI: 10.1097/01.NAJ.0000446771.02202.35

DuMonthier, A. and Dusenbery, M. (2016) 'Intersections of domestic violence and economic security', Institute for Women's Policy Research [online] Available from: https://iwpr.org/iwpr-general/intersections-of-domestic-violence-and-economic-security/ [Accessed 29 November 2021].

Farris, E.M. and Holman, M.R. (2015) 'Public officials and a "private" matter: Attitudes and policies in the county sheriff office regarding violence against women', *Social Science Quarterly*, 96(4): 1117–1135.

Golding, J.M. (1996) 'Sexual assault history and women's reproductive and sexual health', *Psychology of Women Quarterly*, 20: 101–121. https://doi.org/10.1111/j.1471-6402.1996.tb00667.x

Hart, L.G., Larson, E.H. and Lishner, D.M. (2005) 'Rural definitions for health policy and research', *American Journal of Public Health*, 95(7): 1149–1155. https://doi.org/10.2105/AJPH.2004.042432

HRSA (Health Resources and Services Administration) (2021) 'Defining rural population' [online] Available from: https://www.hrsa.gov/rural-health/about-us/definition/index.html [Accessed 23 June 2021].

Hirschel, D., Buzawa, E., Pattavina, A. and Faggiani, D. (2007) 'Domestic violence and mandatory arrest laws: To what extent do they influence police arrest decisions', *Journal of Criminal Law & Criminology*, 98(1): 255–298.

Hochstein, L.E. and Thurman, Q.C. (2006) 'Assessing the need for domestic violence victim services in one rural county', *Police Quarterly*, 9(4): 448–462. DOI: 10.1177/1098611105276545

KBI (Kansas Bureau of Investigation) (2018) 'Domestic violence, stalking and sexual assault in Kansas: As reported by law enforcement agencies' [online] Available from: https://www.kansas.gov/kbi/stats/docs/pdf/DVStalking%20Rape%202019.pdf [Accessed 3 June 2021].

Kansas Coalition against Sexual and Domestic Violence (KCSDV) (2020) '2020 Kansas sexual assault, domestic violence, and stalking advocacy services' [online] Available from: https://www.kcsdv.org/wp-content/uploads/2021/02/2020_SA-DV-KS-Services-Stats_Final.pdf [Accessed 2 November 2022].

Kernic, M.A., Wolf, M.E. and Holt, V.L. (2000) 'Rates and relative risk of hospital admission among women in violent intimate partner relationships', *American Journal of Public Health*, 90(9): 1416–1420. https://doi.org/10.2105/AJPH.90.9.1416

Kessler, R.C., McGonagle, K.A., Zhao, S., Nelson, C.B., Hughes, M., Eshleman, S. et al (1994) 'Lifetime and 12-month prevalence of DSM–III–R psychiatric disorders in the United States: Results from the National Comorbidity Survey', *Archives of General Psychiatry*, 51(1): 8–19. https://doi.org/10.1001/archpsyc.1994.03950010008002

Klein, B., Allison, K. and Harris, C. (2017) 'Immigration and violence in rural versus urban counties, 1990–2010', *The Sociological Quarterly,* 229–253. https://www.tandfonline.com/doi/abs/10.1080/00380253.2017.1296339

Lambert, E.G., Hogan, N.L., Barton, S.M., Jiang, S., Ventura, L. and Nerbonne, T. (2007) 'The impact on officer and agency characteristics on the likelihood of arrest in domestic violence situations among rural law enforcement officers', *Journal of Police and Criminal Psychology*, 22(2): 91–101.

Logan, T.K., Shannon, L. and Walker, R. (2005) 'Protective orders in rural and urban areas: A multiple perspective study', *Violence Against Women*, 11(7): 876–911.

Lugo, K. and Przybylski, R. (2019) 'Estimating the financial costs of crime victimization: Executive summary', *Justice Research and Statistics Association* [online] Available from: https://www.ojp.gov/pdffiles1/nij/grants/254010.pdf [Accessed 3 January 2023].

Madigan, S., Racine, N., Cooke, J.E. and Korczak, D.J. (2021) 'COVID-19 and telemental health: Benefits, challenges, and future directions', *Canadian Psychology/ Psychologie Canadienne*, 62(1): 5–11. http://dx.doi.org/10.1037/cap0000259

McLean, G. and Bocinski, S. (2017) 'The economic cost of intimate partner violence, sexual assault, and stalking', Institute for Women's Policy Research [online] Available from: https://iwpr.org/wp-content/uploads/2020/10/B367_Economic-Impacts-of-IPV-08.14.17.pdf [Accessed 9 August 2021].

Miller, T.R., Cohen, M.A. and Rossman, S.B. (1993) 'Victim costs of violent crime and resulting injuries', *Health Affairs (Project Hope)*, 12(4): 186–197. https://doi.org/10.1377/hlthaff.12.4.186

National Center for Injury Prevention and Control (2003) 'Costs of intimate partner violence against women in the United States' [online] Available from: https://www.cdc.gov/violenceprevention/pdf/ipvbook-a.pdf [Accessed 2 November 2022].

NIJ (National Institute of Justice) (2009) 'Practical implications of current domestic violence' [online] Available from: https://www.ojp.gov/pdffiles1/nij/225722.pdf [Accessed 21 June 2021].

Novisky, M.A. and Peralta, R.L. (2015) 'When women tell: Intimate partner violence and the factors related to police notification', *Violence Against Women*, 21(1): 65–86.

O'Neal, E.N. and Hayes, B.E. (2020) '"A rape is a rape, regardless of what the victim was doing at the time": Detective views on how "problematic" victims affect sexual assault case processing', *Criminal Justice Review*, 45(1): 26–44. doi: 10.1177/0734016819842639.

Qi, Z., Jimenez, C., Hanson, B. and Lizzaraga, V. (2020) *The Costs of IPV Victimization in Rural Kansas.* Survey, 18 November.

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749. DOI: 10.1089/jwh.2011.2891

Postmus, J.L., Plummer, S.B., McMahon, S., Murshid, N.S. and Kim, M.S. (2012) 'Understanding economic abuse in the lives of survivors', *Journal of Interpersonal Violence*, 27(3): 411–430. https://doi.org/10.1177/0886260511421669

Rajan, M. and McCloskey, K.A. (2007) 'Victims of intimate partner violence: Arrest rates across recent studies', *Journal of Aggression, Maltreatment & Trauma*, 15(3): 27–50.

Rennison, C.M. and Welchans, S. (2000) *Intimate Partner Violence* (NCJ No. 178247), Washington, DC: US Department of Justice.

Roush, K. and Kurth, A. (2016) 'The lived experience of intimate partner violence in the rural setting', *Journal of Obstetric, Gynecologic, and Neonatal Nursing*, 45(3): 308–319. https://doi.org/10.1016/j.jogn.2016.02.008

Runner, M., Yoshihama, M. and Novick, S. (2009) 'Intimate partner violence in immigrant and refugee communities: Challenged, promising practices, and recommendations', *Family Violence Prevention Fund* [online] Available from: https://www.futureswithoutviolence.org/userfiles/file/ImmigrantWomen/IPV_Report_March_2009.pdf [Accessed 3 January 2023].

Slakoff, D.C., Aujla, W. and PenzeyMoog, E. (2020) 'The role of service providers, technology, and mass media when home isn't safe for intimate partner violence victims: Best practices and recommendations in the era if COVID-19 and beyond', *Archives of Sexual Behavior*, 49: 2779–2788. DOI: 10.1007/s10508-020-01820-w

Stylianou, A.M. (2018) 'Economic abuse within intimate partner violence: A review of the literature', *Violence and Victims*, 33(1): 3–22. https://doi.org/10.1891/0886-6708.VV-D-16-00112

United Census Bureau (2020) 'Kansas: 2020 census' [online] Available at: https://www.census.gov/library/stories/state-by-state/kansas-population-change-between-census-decade.html (Accessed 4 November 2022).

van Wormer, K. (2019) 'Restorative justice as social justice for victims of gendered violence: A standpoint feminist perspective', *Social Work*, 54(2): 107–116. https://doi.org/10.1093/sw/54.2.107

Walby, S. (2009) *The Cost of Domestic Violence: Up-date 2009*, Lancaster: Lancaster University.

Websdale, N. (1998) *Rural Woman Battering and the Justice System: An Ethnography*, Thousand Oaks: SAGE.

'Nowhere to Go': Intimate Violence and Opioid Use in Rural Vermont

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Introduction

The problem of intimate partner violence (IPV) in rural areas intersects with another rural crisis: the epidemic of opioid use disorder (OUD) and opioid-related deaths. Rural opioid-related mortality rates are particularly high in the New England region (Stopka et al, 2019). At the same time, feminist criminological research shows that rural women are more likely than their suburban or urban counterparts to experience violence when separating from or divorcing their spouses (DeKeseredy and Schwartz, 2009; Rennison et al, 2013). Rates of intimate partner homicide also appear to be higher in rural areas (Edwards, 2015). There is a known, bidirectional relationship between opioid use and IPV (Stone and Rothman, 2019), such that drug use may precede abuse by an intimate partner and experiencing IPV is related to subsequent drug use. Abusive partners may exercise control by introducing their partners to drugs or coercing them to use, or by interfering with a partner's treatment and recovery efforts (Warshaw et al, 2014). IPV survivors have also described how substance use in their relationships can increase violence, paranoia, jealousy and arguments over procurement or sharing of drugs (Gilbert et al, 2001).

By understanding the first-hand experiences of people accessing rural IPV and OUD services, we can identify gaps in service provision and work to close them. In 2020, this goal became even more urgent as the COVID-19 pandemic widened these gaps and highlighted limitations of social services to respond to rural communities in crisis. For example, the pandemic saw

the rapid implementation and expansion of telehealth services (Demeke et al, 2020). Telehealth has the potential to expand access to care in rural communities and has demonstrated effectiveness and patient satisfaction (DelliFraine and Dansky, 2008; Kruse et al, 2017; Totten et al, 2019). However, it requires substantial investment in infrastructure (for both providers and communities), and uneven implementation may worsen rural health disparities (Hirko et al, 2020; Pierce and Stevermer, 2020).

In this chapter, we connect the results of two data collection efforts: (1) a series of in-depth interviews with rural Vermonters with lived experience of IPV and OUD regarding their experiences accessing services and resources; and (2) a series of in-depth interviews with representatives of a county-level Coordinated Community Response (CCR) team comprising professionals working in IPV- and substance use disorder (SUD)-related services. We begin with a discussion of the Vermont context as both typical and atypical of rural US regions, then move to a description of the methods and results. We conclude with recommendations for increasing service reach in rural communities while maintaining a high standard of care.

Vermont context

By percentage of residents living in areas defined as rural, Vermont is the second most rural state in the United States (United States Census Bureau, 2012). It is also one of the least racially diverse states, with 94.2 per cent of the population identifying as White alone (United States Census Bureau, nd). Vermont's population is relatively well-educated, with 38 per cent of Vermonters holding a bachelor's degree or higher, compared to 32.1 per cent nationally (McElrath and Martin, 2021). Like many rural areas, Vermont has seen its population age shrink in recent years due to low birth rates and to out-migration, especially of young, upwardly mobile Vermonters. The population is older than the US national average; it has as many seniors (age 65+) as children (age <18) and by 2030, it is estimated that one in every four Vermonters will be senior (Brighton et al, 2019). Residents have also been shifting away from rural areas and towards metropolitan areas, specifically Burlington and its neighbouring counties (Brighton et al, 2019). Vermont also differs from many rural states with respect to its relatively progressive political climate (Rakich, 2020).

Internet and cell phone service have been an ongoing problem in Vermont. Large swathes of the state do not have access to the broadband internet service needed for streaming and videoconferencing (Trombly, 2020). Vermont is consistently ranked in the bottom quintile of states for overall broadband access due to low speed and high cost (BroadbandNow, 2021; U.S. News, nd). Cell phone service, too, is unreliable. In 2018, an independent drive test found that cell service in Vermont falls far below what service providers

claim they are providing, resulting in large 'dead zones' where it is impossible to get a signal (Dillon, 2019).

In recent decades, Vermont has struggled with high rates of opioid use and related injuries and deaths. The rate of drug overdose deaths involving opioids in Vermont was 22.8 per 100,000 residents in 2018, relative to 14.6 nationally. In response to the crisis, Vermont developed a state-wide 'hub-and-spoke' medication-assisted treatment system (Rawson, 2017) comprising regional 'hubs' providing intensive specialty addiction treatment and outlying 'spokes', which are primary care settings that can provide office-based treatment. Unfortunately, after a promising decrease in opioid-involved fatalities in 2019, 2020 saw a new record rate of 25.2 fatalities per 100,000 Vermonters, a 38 per cent increase from 2019. This means that in 2020, Vermont saw more opioid-involved fatalities than COVID-19 fatalities (Cotton, 2021).

This study

The data discussed in this chapter were collected during a multi-stage community-based participatory research (CBPR) project (Stone et al, 2021; 2022). CBPR traditions are consistent with feminist and critical criminology in centring the voices of historically marginalised people (Dupont, 2008; Langan and Morton, 2009; Muhammad et al, 2015; Deckert, 2017). This approach builds research capacity in communities that have often been *under* the microscope and not behind it. CBPR is also well-suited to rural communities facing stark social inequities, who may understandably be wary of outside researchers, and where community evidence and local knowledge may have been overlooked or outright excluded from public conversations about policy and practice (Stoudt et al, 2012; Wallerstein, 2017).

The first stage of our project, which began in September 2018, was a needs assessment. We conducted one-on-one telephone interviews with 33 central Vermont residents who had experiences with both IPV and OUD. The participants identified as women (32, 97 per cent) or non-binary or genderqueer (1, 3 per cent) and most were White (28, 85 per cent). The mean age of the sample was 34 (SD=8) and all participants spoke English. The interview guide was developed in consultation with our community partner (author Kinney), and our project advisory board of four individuals with lived experience of SUD and IPV. Participants were recruited through flyers shared with local advocacy agencies and substance use treatment providers.

Interviews covered experiences with opioid use and IPV, participants' perceptions of the relationship between OUD and IPV, and participants' experiences with help-seeking, including barriers or obstacles to care, and

what they would change to help other people in similar situations. We used a flexible open-coding approach to qualitative analysis (Deterding and Waters, 2018) and identified five major themes describing barriers to accessing IPV and OUD services in rural Vermont: (1) geographic isolation and transportation difficulties; (2) social isolation; (3) lack of integrated services; (4) inaccessible services; and (5) amplified stigma in small communities.

Several months after the conclusion of this stage of the research, the COVID-19 pandemic began. Our plans for our project evolved as the community adapted to Vermont Governor Scott's 'stay at home' order, which included the closure of all in-person 'non-essential' businesses and not-for-profit entities (State of Vermont, Executive Department, 2020). To capture the impact of the pandemic and the related public health restrictions on services for people experiencing IPV and OUD, we conducted one-on-one telephone interviews with members of a county-level CCR team. CCR members are representatives from the criminal justice system, victim advocacy services, mental health care, substance use treatment and other sectors. The CCR team engages partner agencies to develop a common understanding of IPV and to coordinate a multidisciplinary community response.

Between September 2020 and March 2021, we interviewed 18 CCR members by telephone about their perception of the demand for their services during the pandemic, how their agencies adapted to continue their work under the COVID-19 restrictions, and the impact of these changes on service delivery. The resulting sample included representatives from both government and non-government organisations covering courts, economic services, law enforcement and corrections, health services, substance use services, and IPV advocacy services. We then used the five themes identified in the first stage of our research as a guide for analysing these interviews, adopting a similar flexible open-coding strategy (Deterding and Waters, 2018) sensitised by the concepts of geographic isolation and transportation difficulties, social isolation, availability and accessibility of services, and stigma towards people experiencing IPV and/or SUD. This approach allowed us to use the barriers identified by people with lived experience as a lens through which to examine the changes in service described by the CCR members, while also providing data source triangulation between service users and service providers (Carter et al, 2014).

Our results demonstrate how the pandemic exacerbated many of the previously existing challenges described by our participants, especially themes of isolation and inaccessibility of services in rural communities. Adaptations made by CCR partner agencies, especially those involving teleservices, were perceived by service providers to have increased service reach and reduced barriers to access but also illustrated remaining limitations, both in access and in service quality.

Results: Barriers to accessing intimate partner violence and opioid use disorder services in rural Vermont

The full results of the needs assessment can be read elsewhere (Stone et al, 2021) and are briefly discussed and contextualised here.

Geographic isolation and transportation barriers

Participants reported that they often lived many miles away from the nearest town where they might seek help. One participant shared that she lived with her partner and their newborn baby "on a back road. I knew I wanted to get out [of the situation]", but the nearest town was two miles away. In winter, when her partner left the house for the day, "he would take my shoes and all the baby's warm winter gear". Cars could help to close the distance, but they were often a source of control by one partner over the other. One participant shared that if she said "the littlest thing wrong", her partner would "kick me out in the middle of nowhere out of the car, and I'd have to walk for an hour thinking I was not gonna get a ride even though he would always come back for me". Without personal vehicles, participants relied on public transportation. The 2020 Vermont public transit report outlines the difficulties of providing public transportation to rural residents, noting that 'in rural areas, fixed-route bus services are unlikely to generate enough riders to be viable' (Vermont Agency of Transportation, 2020: 27–31).

Social isolation

Social isolation was frequently cultivated by abusive partners as a tool of control, exacerbating the connection between opioid use and IPV victimisation. Danielle's[1] partner "paid all my bills, moved all my stuff into his apartment, and then he just started feeding my habit. And then I was stuck with this monster that I had to pretend to like because I was now completely reliant on him". To cope with this isolation and their dependency on a person who was abusing them, some participants reported using drugs more frequently or in larger quantities. Michelle said that when her partner became emotionally and physically abusive toward her, "[t]o get through it, I just did more – just got high. I wasn't talking to anybody, and I just completely shut myself down." For women using illicit substances, reaching out for help is particularly fraught because of the penalties they may face. When she needed help, Jennifer described how she:

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[1] This and all other names are pseudonyms.

'was always worried that if I called and admitted I had an opiate problem, that they would take custody of my daughter. I was really worried that if I did reach out for help, that they would call the State and the State would come in and take the child that I already had, and I didn't want to lose her.' (Jennifer, interview)

Lack of integrated services and inaccessible services

A lack of integrated services means services are not well-suited to meet the needs of clients experiencing *both* IPV and OUD. "I think there needs to be more places where it's a combination of getting out of toxicity and detoxing", said Laurie, referencing the toxicity of abusive relationships and 'detoxing' from substances. When she was looking for help, she found an IPV shelter but did not perceive that the organisation could also help her with her opioid use. "I didn't even wanna ask. I didn't wanna tell them I was still on [opioids], and I wanted to get off [opioids]."

Where services *did* exist, they were often inaccessible to participants. 'Sober houses' or recovery houses were not accessible to women with children. Nikki had been unable to access a women's shelter because "I couldn't have the kids there. I can't go to a shelter and not have my kids there, so what, I'm gonna go sleep in the car?" Later, when she was in recovery, she faced the same issue with recovery housing, explaining that "not seeing my kids was the most depressing thing in the world" and wasn't conducive to her recovery. Participants reported facing long wait lists, especially for women's residential treatment or beds in women's shelters, a shortage of long-term treatment options (versus short-term 'detox' facilities), and a lack of 'halfway' or transitional housing for women. In Kelly's words, "There's nothing for women out here."

Amplified stigma in small communities

Participants spoke about the amplification of stigma in small towns where 'everyone knows everyone'. In tight-knit communities, people trying to access services felt highly visible and worried that their personal problems would become local gossip. "We have a [medication-assisted treatment] clinic here, you go in and dose every day", explained Crystal, "but it's also in front of everybody, and everybody that goes is gonna know you're going". Crystal didn't like going to the clinic because "if everybody knows I'm an addict, then I'm probably gonna lose my job".

Participants felt that if they were identified as people with SUD, people in their communities would judge them and dismiss the abuse they were experiencing. Kelly said:

'People will say, "Well, if you weren't on drugs, you wouldn't have been abused", or, "If you weren't under the influence of anything, this [abuse] might've not happened to you." And it varies. It could've happened to anybody, whether you're high or sober, because it has happened to me while I was sober.' (Kelly, interview)

The impact of COVID-19 restrictions on rural services

Geographic and social isolation

CCR representatives described worsening isolation during the pandemic. While Vermont's low population density was seen by some as a boon for limiting the spread of disease, one victim advocate described how "being in a rural place, isolation increases the risk for survivors". A strong concern for CCR members was that isolation may prevent reporting of victimisation. "It seems like things aren't reported at the earlier stages like they might have been before, because folks are so isolated, and that works to the advantage of an abuser." This was particularly true for reports that might come through children disclosing to their teachers at school: "Teachers are not hearing about violence that is happening in kids' homes" and "Because we don't see those kids, there's a whole lot fewer kids coming into DCF [Department of Children and Families] custody, there's domestic violence going on but people aren't able to get out of the house to access support." CCR members also linked pandemic isolation to worsening substance use. "I've lost a few girls, I've had some who were sober for nine or ten months who have crashed because of this, I think because of the isolation", explained a case manager for mental health services, "and it's not just the substance use, it's the [domestic violence], it's like I need to stay in this relationship because I have nowhere to go, no one else to talk to".

Transportation was also more limited during the pandemic. Teleservices helped to reduce transportation burdens, but for those who still needed to physically go to service providers, the prospect of taking public transportation was daunting. While a local bus service continued operating and removed all fees, "that's a potential risk of exposure [to COVID-19] for folks so they don't always wanna utilise it", said one victim advocate. A mental health services professional adapted by installing a clear plastic divider in her vehicle to separate the back seat from the front seat so she could safely transport her clients. "I hardly ever do home visits", she explained, "but if they need groceries or they need to get to a prenatal appointment, or need to get their ID, that's what I try to wrap my piece around. I can sit in the parking lot while they go in and get their [methadone or buprenorphine] dosing."

Service availability and accessibility

The COVID-19 pandemic also impacted service availability. CCR representatives reported increased demand for mental health services that resulted in a "three-month wait just to get an intake appointment". Mental health providers "were doing remote services … but maybe not as many. And [providers] were dealing with having children at home, so they had less availability, all those things significantly impacted folks". A victim advocate mentioned that access to substance abuse services was also very limited, and "everything everywhere has a waitlist, it's really devastating". Difficulties finding stable housing were also exacerbated as "people who wanted to move couldn't move because the people who were living in their apartment decided not to move, they were worried about paying new bills, and starting a new place with a new deposit" at a time when finances were uncertain. Court services were backed up, "with folks having to wait a really, really long time to get their cases in front of a judge". The court delays, in particular, were a major source of frustration for advocates who typically supported survivors through court procedures.

Teleservices are frequently mentioned in the rural health literature as a possible solution to transportation difficulties, service inaccessibility, childcare problems and isolation/quarantine restrictions (CDC, 2020; Jack et al, 2021; Wood et al, 2022). Pandemic restrictions prompted service providers to add or increase their teleservice offerings. Although CCR representatives mentioned missing their colleagues, they reported lifestyle benefits to working from home such as increased attendance at inter-agency meetings and spending less time in the car travelling between sites. Fewer benefits were realised, however, from trying to work remotely with clients experiencing IPV and OUD. Lack of internet and phone access and the limitations of virtual interactions left many providers feeling that they were not providing the same level of service that they had been able to provide before the pandemic.

Poor internet and cell phone service was mentioned repeatedly as a barrier for clients and CCR members. A SUD clinician shared that "sometimes I can't even talk to a client because on any given day, if it's cloudy or damp out, I don't have service". A probation officer explained that:

> 'A lot of times people will go down the road, to like a store, so we can call them. Sometimes people live in the boonies. Some clients do live in the sticks in Vermont so people go down to the general store, call in, then go back home. A lot of our clients will go to, like, a library to get internet service, but now I don't think the libraries are open.' (SUD clinician, interview)

Beyond internet and cell phone service, many clients also lacked the devices necessary to connect.

A court-based advocate said that "Some clients don't even have a cell phone. … The Chief of Police brought over a bunch of cell phones that they weren't using, and we gave them out to victims." An SUD clinician was able to advocate for her agency to purchase smartphones for clients so they could connect to the internet. However, both respondents noted that these phones were not useful without service plans or pay-as-you-go minutes, which were an additional expense.

CCR representatives raised the issue of safety and security when meeting with clients virtually rather than face-to-face. In some ways, remote service increased privacy and safety. For example, courts implemented an online platform for routine hearings that allowed victims to call in via telephone and leave their cameras off and names hidden, affording a measure of anonymity. However, one advocate noted that call-ins for lengthy hearings could be prohibitively expensive for clients using pay-as-you-go phone plans with limited minutes. CCR members accustomed to doing home visits with clients experiencing IPV raised concerns that, when conducting teleservice meetings, they could not be sure who else was in the room but off-camera. "Because we're not face to face, you may think you're having a meeting with just mom", shared a DCF specialist, "but ten feet from her [her partner] is right there listening". An SUD clinician said that "I have clients on my caseload who are in abusive relationships, and I *know* when the partner is in the house, in the room. So, then I make them come into the office – they usually ask, actually." This is a serious limitation to the use of teleservices for clients who are or may be experiencing IPV that is not typically raised when teleservice is recommended more broadly.

Discussion

Barriers to care, including geographic and social isolation, service inaccessibility, a lack of appropriate and integrated services, and the amplification of stigma in small communities were largely exacerbated during the COVID-19 pandemic as rural Vermont service providers struggled to adapt to social distancing and work-from-home measures and demand for mental health services increased. Service providers were innovative in finding ways to continue their work, including shifting to teleservices, which was perceived to lower some barriers to access, but the lack of phone and internet access in rural areas and for low-income clients limited the benefits of this adaptation. Service providers also had concerns about the safety and privacy of teleservices, particularly for clients experiencing IPV who may be living with their abuser. They also felt that the lack of in-person services

worsened clients' isolation and that this had consequences for the prevalence and severity of IPV and SUD.

The pandemic presented an opportunity to implement long-recommended teleservices like phone and video check-ins and online support groups. Service providers did perceive that these services were beneficial for those who could make use of them. However, the limitations imposed by poor telecommunications infrastructure and the expense of internet/phone service and internet-ready devices limited the reach of these services, suggesting that – for now, at least – teleservices may be a useful addition to service offerings but cannot fully replace in-person services. To maximise the potential of teleservices to reduce barriers to healthcare for rural populations, we must invest in telecommunication infrastructure. In Vermont, some areas are exploring communications union districts, which are organisations of two or more towns that join together to build fibre-optic communication infrastructure to deliver internet services (State of Vermont DPS, nd), typically in areas with population densities below what is usually seen as profitable for private internet service providers. Additionally, Vermont may be able to make use of federal funds to expand broadband internet access in rural areas (Landen, 2021). These initiatives should be a top priority for Vermont in the interest of closing the 'digital divide' between urban/ suburban and rural areas.

Service providers should also prioritise the safety, privacy and dignity of their clients. The themes of stigma, shame and hypervisibility in rural communities repeatedly arose in interviews with both service users and providers. Where possible, waiting areas should be relatively private and not require that service users line up outside the building. Take-home medication dosing privileges would help to ameliorate both geographic and social barriers to care by reducing the frequency of in-person office visits. Teleservices may help to protect the privacy of service users, but providers must be cognisant of clients who share a living space and may not be able to share safely in a video conference. In these situations, in-person office or home visits may be preferable. Providers should defer to the clients' preference as to what is comfortable and most useful for them, with reasonable safety precautions to protect all parties.

Service providers navigated some transportation difficulties by offering teleservices and adapting company vehicles for safer use. However, the problems of providing reliable, timely and convenient public transportation to rural communities persist and are unlikely to be resolved in the near future. Service innovations may help to close this gap. For example, expansion of 'microtransit' or other shared-use mobility options (for example, Rodier and Podolsky, 2017; Godvarthy et al, 2019) may be appropriate, though the implementation of such services is likely to intersect with related issues of internet/phone service as well as stigma and discrimination towards people

with SUD. An alternative would be to expand the integrated home visitation to bring services directly to those who need them or extending service reach by bringing resources (including staff) to community locations such as local grocery stores and pharmacies (for example, Lowrie et al, 2019) that are more likely to be accessible by limited rural bus service or within reasonable walking distance. Outreach materials could be provided to local businesses; ideally, service providers may consider a rotating schedule where staff cycle through different community locations on different days of the week.

This research has important limitations. While the small, non-representative samples are appropriate for our methods, they may not be representative of the larger population of either people experiencing IPV and SUD or of service providers interacting with similar clients. Additionally, our samples are almost all White people who identify as women, and thus our results likely do not capture the experiences of members of racial, ethnic or gender minorities, who face additional barriers to care.

Conclusion

IPV and OUD are highly complex with interrelated problems, and rural residents face significant barriers to treatment and resources. While many organisations were able to expand their service offerings during the COVID-19 pandemic to include teleservices and socially distanced visits, this experiment also highlighted many shortfalls of commonly suggested solutions to gaps in rural health access. With these lessons learned, it is time to shift attention to more innovative solutions to close service gaps and better meet the needs of people experiencing both IPV and OUD. Through researcher–practitioner partnerships and participatory research designs, we can ground our interventions in the lived experiences of rural residents and design the integrated, accessible services that meet their most salient needs and make safety and recovery possible.

References

Brighton, D., Kleppner, B. and Trenholm, S. (2019) *Population Changes and Vermont State Revenue*, Vermont Tax Structure Commission [online] Available from: https://ljfo.vermont.gov/assets/Subjects/Commission-Resources/05a742b874/Population-Changes-and-Vermont-State-Revenue-FULL-REPORT.pdf [Accessed 17 June 2021].

BroadbandNow (2021) 'Internet access in Vermont', 7 June [online] Available from: https://broadbandnow.com/Vermont [Accessed 17 June 2021].

Carter, N., Bryant-Lukosius, D., DiCenso, A., Blythe, J. and Neville, A.J. (2014) 'The use of triangulation in qualitative research', *Oncology Nursing Forum*, 41(5): 545–547.

CDC (Centers for Disease Control and Prevention) (2020) 'Telehealth in rural communities', 18 August [online] Available from: https://www.cdc.gov/chronicdisease/resources/publications/factsheets/telehealth-in-rural-communities.htm [Accessed 17 June 2021].

Cotton, E. (2021) 'Fatal overdoses rose during the pandemic: But they'd been increasing for years', *VTDigger* [online] Available from: https://vtdigger.org/2021/05/16/fatal-overdoses-rose-during-the-pandemic-but-theyd-had-been-increasing-for-years/ [Accessed 17 June 2021].

Deckert, A. (2017) 'A level playing field: Conceptualizing an empowering research framework for criminologists who engage with marginalized communities', *Critical Criminology*, 25(4): 559–575. doi:10.1007/s10612-017-9367-6.

DeKeseredy, W.S. and Schwartz, M.D. (2009) *Dangerous Exits: Escaping Abusive Relationships in Rural America*, New Brunswick: Rutgers University Press.

DelliFraine, J.L. and Dansky, K.H. (2008) 'Home-based telehealth: A review and meta-analysis', *Journal of Telemedicine and Telecare*, 14(2): 62–66.

Demeke, H.B., Pao, L.Z., Clark, H., Romero, L., Neri, A., Shah, R. et al (2020) 'Telehealth practice among health centers during the COVID-19 pandemic: United States, July 11–17, 2020', *Morbidity and Mortality Weekly Report*, 69(50): 1902–1905.

Deterding, N.M. and Waters, M.C. (2018) 'Flexible coding of in-depth interviews: A twenty-first-century approach', *Sociological Methods & Research*, 50(2): 708–739.

Dillon, J. (2019) 'NPR: One man's quest to prove Vermont has terrible cell service', *NPR*, 1 February [online] Available from: https://www.npr.org/2019/02/01/690071045/one-mans-quest-to-prove-vermont-has-terrible-cell-service [Accessed 17 June 2021].

Dupont, I. (2008) 'Beyond doing no harm: A call for participatory action research with marginalized populations in criminological research', *Critical Criminology*, 16(3): 197–207. doi:10.1007/s10612-008-9055-7

Edwards, K.M. (2015) 'Intimate partner violence and the rural–urban–suburban divide: Myth or reality? A critical review of the literature', *Trauma, Violence, & Abuse*, 16(3): 359–373. doi:10.1177/1524838014557289

Gilbert, L., El-Bassel, N., Rajah, V., Foleno, A. and Frye, V. (2001) 'Linking drug-related activities with experiences of partner violence: A focus group study of women in methadone treatment', *Violence and Victims*, 16(5): 517–536.

Godvarthy, R., Hough, J., Libberton, S. and Koff, R. (2019) 'Opportunities for state DOTs (and others) to encouraged shared-use mobility practices in rural areas', Small Urban and Rural Center on Mobility, Upper Great Plains Transportation Institute, North Dakota State University [online] Available from: http://onlinepubs.trb.org/onlinepubs/nchrp/2065/Task76Report.pdf [Accessed 17 June 2021].

Hirko, K.A., Kerver, J.M., Ford, S., Szafranski, C., Beckett, J., Kitchen, C. et al (2020) 'Telehealth in response to the COVID-19 pandemic: Implications for rural health disparities', *Journal of the American Medical Informatics Association*, 27(11): 1816–1818.

Jack, S.M., Munro-Kramer, M.L., Williams, J.R., Schminkey, D., Tomlinson, E., Jennings Mayo-Wilson, L. et al (2021) 'Recognising and responding to intimate partner violence using telehealth: Practical guidance for nurses and midwives', *Journal of Clinical Nursing*, 30(3–4): 588–602.

Kruse, C.S., Krowski, N., Rodriguez, B., Tran, L., Vela, J. and Brook, M. (2017) 'Telehealth and patient satisfaction: A systematic review and narrative analysis', *BMJ Open*, 7(8): e016242.

Landen, X. (2021) 'Vermont leaders say federal money for broadband could help close "digital divide"', *VTDigger*, 7 April [online] Available from: https://vtdigger.org/2021/04/07/vermont-leaders-say-federal-money-for-broadband-could-help-close-digital-divide/ [Accessed 17 June 2021].

Langan, D. and Morton, M. (2009) 'Reflecting on community/academic "collaboration": The challenge of "doing" feminist participatory action research', *Action Research*, 7(2): 165–184. doi:10.1177/1476750309103261

Lowrie, F., Gibson, L., Towle, I. and Lowrie, R. (2019) 'A descriptive study of a novel pharmacist led health outreach service for those experiencing homelessness', *International Journal of Pharmacy Practice*, 27(4): 355–361.

McElrath, K. and Martin, M. (2021) *Bachelor's Degree Attainment in the United States: 2005 to 2019 (ACSBR-009; American Community Survey Briefs)*, United States Census Bureau, U.S. Department of Commerce [online] Available from: https://www.census.gov/content/dam/Census/library/publications/2021/acs/acsbr-009.pdf [Accessed 17 June 2021].

Muhammad, M., Wallerstein, N., Sussman, A.L., Avila, M., Belone, L. and Duran, B. (2015) 'Reflections on researcher identity and power: The impact of positionality on community based participatory research (CBPR) processes and outcomes', *Critical Sociology*, 41(7–8): 1045–1063. doi:10.1177/0896920513516025

Pierce, R.P. and Stevermer, J.J. (2020) 'Disparities in use of telehealth at the onset of the COVID-19 public health emergency', *Journal of Telemedicine and Telecare*, advance online publication, doi: 10.1177/1357633X20963893.

Rakich, N. (2020) 'How urban or rural is your state? And what does that mean for the 2020 election?', *FiveThirtyEight.Com*, 14 April [online] Available from: https://fivethirtyeight.com/features/how-urban-or-rural-is-your-state-and-what-does-that-mean-for-the-2020-election/ [Accessed 17 June 2021].

Rawson, R. (2017) *Vermont Hub-and-Spoke Model of Care for Opioid Use Disorders: An Evaluation*, Vermont Center on Behavior & Health, The University of Vermont [online] Available from: https://www.healthverm ont.gov/sites/default/files/documents/pdf/ADAP_Hub_and_Spoke_Ev aluation_2017_1.pdf [Accessed 17 June 2021].

Rennison, C.M., DeKeseredy, W.S. and Dragiewicz, M. (2013) 'Intimate relationship status variations in violence against women: Urban, suburban, and rural differences', *Violence Against Women*, 19(11): 1312–1330. doi:10.1177/1077801213514487

Rodier, C. and Podolsky, L. (2017) *Opportunities for Shared-Use Mobility Services in Rural Disadvantaged Communities in California's San Joaquin Valley: Existing Conditions and Conceptual Program Development*, National Center for Sustainable Transportation [online] Available from: https:// rosap.ntl.bts.gov/view/dot/34234 [Accessed 17 June 2021].

State of Vermont DPS (Department of Public Service) (nd) 'Vermont communications union districts' [online] Available from: https://public service.vermont.gov/content/vermont-communications-union-districts [Accessed 17 June 2021].

State of Vermont, Executive Department (2020) *Addendum 6 to Executive Order 01–20* [online] Available from: https://governor.vermont.gov/ sites/scott/files/documents/ADDENDUM%206%20TO%20EXECUT IVE%20ORDER%2001-20.pdf [Accessed 12 August 2021].

Stone, R. and Rothman, E.F. (2019) 'Opioid use and intimate partner violence: A systematic review', *Current Epidemiology Reports*, 6(2): 215–230.

Stone, R., Campbell, J.K., Kinney, D. and Rothman, E.F. (2021) '"He would take my shoes and all the baby's warm winter gear so we couldn't leave": Barriers to safety and recovery experienced by a sample of Vermont women with partner violence and opioid use disorder experiences', *The Journal of Rural Health*, 37(1): 35–44.

Stone, R., Campbell, J.K., Halim, N., Kinney, D. and Rothman, E.F. (2022) 'Design and pilot evaluation of a cross-training curriculum for intimate partner violence advocates and peer recovery coaches', *Victims & Offenders*: 1–21. doi:10.1080/15564886.2022.2026544

Stopka, T.J., Jacque, E., Kelso, P., Guhn-Knight, H., Nolte, K., Hoskinson, R. et al (2019) 'The opioid epidemic in rural northern New England: An approach to epidemiologic, policy, and legal surveillance', *Preventive Medicine*, 128: 105740.

Stoudt, B.G., Fox, M. and Fine, M. (2012) 'Contesting privilege with critical participatory action research', *Journal of Social Issues*, 68(1): 178–193. doi:10.1111/j.1540-4560.2011.01743.x

Totten, A.M., Hansen, R.N., Wagner, J., Stillman, L., Ivlev, I., Davis-O'Reilly, C. et al (2019) *Telehealth for Acute and Chronic Care Consultations*, Rockville: Agency for Healthcare Research and Quality (US) (AHRQ Comparative Effectiveness Reviews) [online] Available from: http://www.ncbi.nlm.nih.gov/books/NBK547239/ [Accessed 12 August 2021].

Trombly, J. (2020) 'State stepping up broadband efforts as feds mull the same', *VTDigger*, 12 May [online] Available from: https://vtdigger.org/2020/05/12/state-stepping-up-broadband-efforts-as-feds-mull-the-same/ [Accessed 17 June 2021].

United States Census Bureau (nd) *QuickFacts: Vermont* [online] Available from: https://www.census.gov/quickfacts/VT [Accessed 17 June 2021].

United States Census Bureau (2012) *Growth in Urban Population Outpaces Rest of Nation, Census Bureau Reports* [online] Available from: https://www.census.gov/newsroom/releases/archives/2010_census/cb12-50.html [Accessed 17 June 2021].

U.S. News (nd) *Internet Access Rankings* [online] Available from: https://www.usnews.com/news/best-states/rankings/infrastructure/internet-access [Accessed 18 June 2021].

Vermont Agency of Transportation (2020) *Vermont Public Transit Policy Plan 2020*, Vermont Agency of Transportation, Division of Policy, Planning, and Intermodal Development [online] Available from: https://vtrans.vermont.gov/sites/aot/files/publictransit/documents/PTPP%20Final.pdf [Accessed 18 June 2021].

Wallerstein, N. (ed) (2017) *Community-based Participatory Research for Health: Advancing Social and Health Equity*, third edition, Hoboken: Jossey-Bass & Pfeiffer Imprints, Wiley.

Warshaw, C., Lyon, E., Bland, P., Phillips, H. and Hooper, M. (2014) *Mental Health and Substance Use Coercion Surveys: Report from the National Center on Domestic Violence, Trauma & Mental Health and the National Domestic Violence Hotline*, National Center on Domestic Violence, Trauma & Mental Health [online] Available from: http://www.nationalcenterdvtraumamh.org/wp-content/uploads/2014/10/ NCDVTMH_NDVH_MHSUCoercionSurveyReport_2014-2.pdf [Accessed 17 June 2021].

Wood, L., Baumler, E., Schrag, R.V., Guillot-Wright, S., Hairston, D., Temple, J. et al (2022) '"Don't know where to go for help": Safety and economic needs among violence survivors during the COVID-19 pandemic', *Journal of Family Violence*, 37: 959–967. https://doi.org/10.1007/s10896-020-00240-7

Rural Rape Crisis Centres and Extreme Financial Deprivation

Anne Kirkner

Introduction

Rape crisis centres (RCCs) were born out of the women's liberation movement of the 1970s in the United States. Though they have changed over the past 40 years and institutionalised into more formal structures (Campbell et al, 1998), they retain a central importance in the struggle to end sexual violence. RCCs are still the only organisations that exist solely in support of survivors of sexual violence. While sexual victimisation remains at epidemic proportions (Black et al, 2011), RCCs will remain a much-needed resource for all survivors but especially those who cannot afford mental health services or do not find mainstream services to be welcoming spaces. Past research has demonstrated the importance of RCCs and advocacy work in improving survivors' experiences within formal systems of reporting and help-seeking (Campbell, 2006). Yet, chronic underfunding of RCCs is a persistent problem and routinely acts as a barrier to reaching more survivors (Ullman and Townsend, 2007). The tension between professionalisation and more grassroots approaches revolve partially around the issue of funding sources and whether or not being beholden to state funding is more harmful than helpful. Critical feminist scholarship on sexual violence must also consider the economic violence of austerity governance – for the people who rely on such services and for the anti-violence movement itself – when theorising societal and community responses to gender violence.

Analysing interview data from rural RCC workers during a state fiscal crisis that lasted for two years, I explicate the survival strategies they engaged in and hypothesise that conditions of extreme deprivation coupled with 'smart' survival strategies must be viewed as an extension of gender violence and not separate from it. Rather than take for granted these conditions,

scholars and practitioners must incorporate them in their analysis as part of the continuum of (state) violence.

Background

The inception and proliferation of RCCs and domestic violence agencies were a tangible outcome of the women's movements of the 1970s. Black women had been organising for decades around sexual violence, as part of a larger struggle to gain bodily autonomy from slavery through de jure Jim Crow segregation, forming the basis of the modern Civil Rights Movement in the United States (McGuire, 2010). Jim Crow laws, which began in 1865, were local and state statutes legalising segregation in the United States (Alexander, 2010). Given this history, it is not surprising that women of colour, and Black women, were central actors in the early anti-violence movement.

Women from feminist consciousness-raising groups that proliferated in the 1970s women's liberation movement were the first to organise and form collectives dedicated to eradicating sexual violence and providing mutual aid to survivors (Craft, 1981). RCCs began as radical grassroots organisations without formal hierarchies. Their direct services, crisis hotlines and counselling were developed directly by victims/survivors who met informally at first to establish more organised programmes (Rape Crisis Center, 1972; Freinkel and Smith, 1988). RCCs viewed their organisations as having social change missions, as they viewed gender inequality as the direct cause of sexual violence.

As their services grew, many RCCs took on paid staff. This was partly for efficiency but also to mitigate stratification among movement organisers. Typically, White, middle-class women had the ability to serve as volunteers while many poor women and women of colour could not do so as they were much more dependent on wages (Freinkel and Smith, 1988).

The movement for RCCs (and domestic violence agencies) has always contained a tension between maintaining a non-hierarchical, feminist political organising ethos and becoming professionalised in order to expand service capacity and find sustainable funding. The current composition of most agencies as volunteer and professional staff reflects the historical public–private partnerships that helped provide early funding for these groups (Freinkel and Smith, 1988). At the federal level, Congress began studying the problem of sexual assault and providing grant funding for research and demonstration projects in the late 1970s. Congress did not want to fund direct services because the explicit feminist ideology of most RCCs made legislators uncomfortable at best and openly hostile to the cause at worst (Freinkel and Smith, 1988). Federal funding eventually made it possible for more professionalised, hierarchical, apolitical groups of social service

providers to benefit from the early labour of movement organisers and then swiftly kick them out of the spaces they created, as was the case in Pittsburgh's RCC (Johnston, 1981).

By the early 1980s, the government was drastically cutting funding for all types of social services and did not want to support new efforts. From their inception, the ability of RCCs to survive under extreme financial hardship has obscured the deep need for sustainable funding (Freinkel and Smith, 1988). RCCs who secured some federal and state funding in the 1980s received the money on the condition that local entities would take over the funding after one year (Freinkel and Smith, 1988). Yet, in many cases, the funding was quietly eliminated instead of being renewed locally and services were forced to go away or be taken over by volunteers. Some funding streams of this nature did persist, especially for agencies that partnered with existing institutions such as hospitals and law enforcement agencies. In these cases, the RCC began to take on the instrumental aims of its partner agencies (such as forensic evidence collection, increased victim reporting to police) at the expense of fostering solidarity and peer support among victims/survivors (Freinkel and Smith, 1988). By the late 1980s, the Center for Disease Control was in charge of administering federal appropriations for violence against women (VAW) agencies but most were receiving US$10,000 or less annually (Freinkel and Smith, 1988).

Austerity policies towards VAW agencies may be an old story, but it is not without struggle. Even with limited and uncertain funding, and amidst struggles within the feminist anti-violence movement against institutionalising, VAW organisations have still managed to grow and influence national discourse and policy around interpersonal violence. Fiscal crises are particularly disruptive to this ongoing work and illuminate the ways in which VAW agencies still struggle with the state for legitimacy and survival. Today, RCCs retain very little of the practical collectivist, radical intersectional feminism of the past. One study of RCCs in Texas found the 'feminist' orientation to be the least common among organisations, with most preferring labels such as the apolitical 'empowerment model' instead (Reinelt, 1994).

While the funding streams created by the Violence Against Women Act and other federal programmes have had a clear impact on increasing the availability of services for victims, especially in rural areas, there remain large gaps for providers due to restrictions on how the funds may be used. A study conducted in North Carolina of domestic violence and sexual assault programmes revealed the lack of consistent funding to be the most-identified challenge to providing services, with the issue creating problems such as the inability to recruit and retain qualified staff (Macy et al, 2010). Another study conducted in four states along the East Coast of the United States (with only RCCs) found similar results: funding cuts create problems

that trickle down to staffing and programmatic decisions, which negatively affect the ability of the providers to reach out to communities and law enforcement (Maier, 2011).

Rape crisis centres in rural areas

Rural areas of the United States have experienced large increases in concentrated poverty between 2000 and 2012, a trend that accelerated just before the 2008 recession (Thiede et al, 2018). Prior to this trend, poverty in the United States had been clustered in urban centres but there has been a shifting reversal of this phenomenon. Concentrated poverty brings a host of negative social and health-related outcomes to communities, including poor physical health, low educational attainment, increased exposure to violence and the transmission of generational poverty (Thiede et al, 2018). There is evidence to suggest that rural counties have higher rates of sexual victimisation compared to urban counties (Ruback and Menard, 2001). Therefore, rural areas likely have greater need of RCC services.

While all organisations that assist survivors of intimate partner violence (IPV) regardless of location are underfunded, rural centres have several points of unique disadvantage. Confidentiality is more difficult to maintain in rural communities where everyone knows everyone, and providers tend to have negative views of their communities due to the victimisation and victim-blaming they know about (Annan, 2011). The biggest challenge for rural IPV services is having fewer resources to cover large geographic areas (Peek-Asa et al, 2011), which are likely to be even more underfunded than urban counterparts due to a smaller population from which to gather funding (Edmond et al, 2019). This also leads to needing more services related to transportation while also having less or worse transit infrastructure compared to urban centres (Stommes and Brown, 2002). Rural areas are also less likely to have comprehensive mental health and medical services, which constitutes fewer places for referrals for survivors (Edmond et al, 2019).

Feminist economics framework

Feminist economists have taken up analysis of austerity politics in recent years. Women have always fared badly under capitalism, and austerity policies are simply a ratcheting up of capitalism's historical ill effects on disadvantaged groups (Evans, 2015). A feminist political economy of austerity does not simply point out the impact of economic policies on women but views economic structures as fundamentally gendered (Pearson and Elson, 2015). Women are not equally distributed in decision-making positions throughout the spheres of finance, production and reproduction, which immediately calls into question the justice of public policies (although this theoretical review

is *not* arguing to simply put more women in positions of power). Pearson and Elson (2015) argue that cuts in social services disproportionately affect poor women, who cannot usually afford to privately pay for services and may be forced to forfeit access to shelter, counselling and legal services, which then deprives them of power in other spheres. Women are overrepresented in the populations most dependent on government aid while also being overrepresented in professions responsible for administering aid programmes, such as social work and mental health (Rubery, 2015).

Going beyond the gendered analysis of policy and the effects of policy, other feminist economists argue for an understanding of austerity as a 'political strategy' rather than a series of misguided policies that cut services and freeze wages (Adkins, 2015). Neoliberal government policies during recent recessions include tax cuts for the wealthy, cuts to social programmes, financial deregulation and 'devolved' federal responsibilities pushed onto state and local levels (Albelda, 2013). In 2009 in the United States, following the Great Recession, most states cut their budgets by 4.2 per cent and then 6.8 per cent the following year, on average (Albelda, 2013). Under austerity, women stood to lose many of the gains they have won over the decades, such as an uncontested right to education and access to public services, as well as the hard-won gains of the feminist anti-violence movement, however imperfect and incomplete they may be (Griffin, 2015; Rubery, 2015). Some feminist economists believe women should organise and mobilise around redistributing monetised risk from the poor and most vulnerable back to the wealthy, as this is one of the main root causes of inequality that disproportionately harms women (Adkins, 2015). In other words, corporations take risks with public money and then when those risks do not work out they force cuts in public services.

Feminist economists have also argued that all financial policies are gendered because they reflect the patriarchal structures of society and tend to over-distribute risk to people living in poverty, many of whom are women and people of colour. Griffin (2015) argues a step beyond this, saying crisis governance is discursively gendered, meaning the gendered power relations of governance structures are produced again and again through social and cultural practices. She also argues that feminists are guilty of accepting the discourse of crisis governance as one-time, 'time-bound' events even though the effects of austerity policies are long-ranging (Griffin, 2015).

Extending this analysis to rural areas specifically, it is known in the literature that women who experience violence in rural areas have a harder time accessing services due to the remote nature of their regions and the close-knit communities where it is hard to be discreet. These communities benefit greatly from coordinated community responses that often require more resources to sustain (Annan, 2011; Carter-Snell et al, 2020). Research from the UK suggests smaller agencies within smaller communities are more

affected by cuts to funding (Coy et al, 2007). This is partially due to the increased competition between small and large organisations that occurs when resources are scarce. Smaller agencies typically lose out to larger ones (Hirst and Rinne, 2012). Anecdotally, one shelter in Illinois was in danger of closing due to the budget impasse and reported this would affect survivors in the entire county, for whom they were the only service provider (Conn, 2017). The agency eventually was able to survive by relying on community donations and lines of credit at the bank. Agencies located outside of the major metropolitan areas of Illinois may be less likely to obtain larger grants but more likely to be responsible for a large geographic area, and thus more susceptible to funding changes.

Taking cues from feminist economists who are critical of neoliberal models of governance, this chapter examines how rural RCCs (uniquely vulnerable to economic crises) survived being cut off from state funding for a two-year period (2015–2017). Of note, the centres did not know when this crisis would end and the state would pass a budget, which undergirded the uncertainty. Another study using the quantitative data generated from the larger analysis found specific effects on rural centres that were not present for their suburban and urban counterparts. While individual counselling and group counselling remained intact, rural centres saw their telephone counselling hours soar during the time periods of interest which suggests in-person counselling was displaced to occur over the phone (Kirkner, 2021). Additionally, medical and criminal justice advocacy (having advocates accompany survivors through these processes) declined significantly as the budget crisis continued (Kirkner, 2021).

Operating under austerity

The data discussed here come from interviews with 22 representatives of RCCs, with nine from centres that were considered exclusively rural and two centres serving geographic regions with several types of communities (rural, suburban and urban). Interview participants were staff members at the victim service agency with the power to make financial decisions. This could be the executive director or development officer, but it varies by agency. Nearly all participants self-identified their race as White (N=15), while one respondent identified as Latina, one as Black and one as Mixed Race (White and South Asian). The average annual salary reported was US$71,000, with a range from US$39,000 to US$125,000. All respondents had financial decision-making power except for one, though that person made programmatic decisions during the budget crisis. Their titles included executive director, programme director, chief executive officer and director of victim services.

Respondents were recruited between June and October of 2018 from the author's connections at a state agency charged with storing their data in

one centralised location. The author worked as a graduate intern and ran recruitment through the agency after working on a quantitative data project using their administrative data. Recruitment lists were organised from these contacts at the state agency (Griffin, 2015).

Interviews were conducted in a Midwestern state immediately following the passage of a state budget after a two-year budget impasse during which all state funds were frozen, regardless of prior contracts and commitments. Centre representatives were asked to reflect on their recent experience of receiving no state funding. While state funding did not represent the entirety of their budgets, it did account for between 40 per cent and 80 per cent (at the extreme end).

Cutting spending to the bone

Centres reported trimming their budgets to the point where they hit 'the bone'. One interviewee noted cuts to transportation support:

> 'We were not able to provide as much to clients that we would normally provide such as gas vouchers to help them get to court or to services. We were not able to update some of our equipment, not able to purchase things that we might give to individuals in counselling.' (Centre 19)

In addition to cutting spending on 'extras' like transportation for clients, rural centres reported resorting to extreme cost-cutting measures:

> 'We have to keep toilet paper in an office. We reached a point where staff were bringing things in and that's ridiculous in my opinion, but it happened. We always had our office building clean, [people shared] the responsibility of the cleaning of the facilities and no one griped, no one complained. Did they like doing it? Probably not. A master's degree therapist is not hired to clean toilets.' (Centre 9)

> 'Then I had to stop paying people for doing on call but we still had to do on call. And I stopped paying people travel but we still had to travel. And we were walking into a building that was dark the majority of the day because we weren't turning on lights. Like hey guys you need Kleenex in your office you better grab a box from home. And everybody was 100 per cent on board. Like at no point did any of my staff say you know what I'm scared I'm out, I can't do this I have a family to support.' (Centre 11)

This extreme deprivation and sacrifices were undertaken by centres that were *already* underfunded. These deep cuts and extreme examples of sacrifice

189

constitute economic state violence against service providers and the people they serve.

Layoffs and volunteers

Volunteers filled in the gaps in services and were relied upon more heavily than ever before as paid staff were laid off or furloughed. However, volunteers could not do the administrative work of paid staff. As a result, this administrative work fell to the remaining staff and increased workloads even more.

> 'We have a very small volunteer pool and all of them either work full-time or are students and so getting somebody to come in to all day answer phones so they could still go out and do what they needed like advocacy … was difficult and sometimes they had to put clients off you know in order to stay in the office and they took turns in staying in the office and answering phones.' (Centre 19)

> 'When I laid people off, obviously I talked to the people I laid off first. I called them into my office and explained to them like hey I'm so sorry but here's where we're at. Love you, we'll call you back as soon as I can.' (Centre 11)

The layoffs and furloughs coupled with increased workloads for remaining staff drained morale and led to fear at the rural RCCs. During several interviews, representatives displayed trauma responses recalling this difficult period of time. While using volunteers and shifting staff hours through furloughs are another practical survival strategy, it also comes with the cost of organisational trauma and overburdening staff. This, in turn, affects clients, who were worried their services might go away at any moment (a not unfounded worry as some centres had to put people back on waitlists).

Using lines of credit

More rural directors (n=6) spoke about using credit lines compared to providers in urban or suburban counties (n=3). It is possible the rural centres relied more on lines of credit compared to other agencies for several reasons. Rural centres were less likely to have reserves while also feeling the effects of the cuts more acutely. Several representatives also had an easier time accessing credit because they worked with a local, community-minded bank.

This survival strategy emerged through the interview process and was largely responsible for centres being able to survive the budget crisis.

However, this is also an example of neoliberal governance working. The state defaulted on its funding obligations, forcing the agencies to rely on credit. When the state finally passed a budget again it did not include funds to help centres pay the interest on their debts (and federal funds could not be used for debt service). Centres were forced to find money to pay interest on US$10,000–40,000 lines of credit, turning more profits over to the banks. In this way, one of the only options for survival for RCCs redistributed profit during the crisis from struggling non-profits to the banks.

Discussion

This chapter sought to understand how rural RCCs functioned under conditions of extreme deprivation in the form of budget crises or extreme financial deprivation for nearly two years. State budget crises are de facto austerity policies. Austerity policies are a form of neoliberal governance and concentrate the effects of budget cuts on the most vulnerable groups in a society. I argue that these policies constitute a form of gendered, economic violence especially against already marginalised survivors living in rural areas of the United States.

The United States has a car-centred transportation system and for many people the costs of car ownership and maintenance are prohibitive. This exacerbates other problems for those living in rural areas because cars are necessary to access jobs and services. Rural areas of the US have a higher poverty rate than their urban counterparts (17.7 per cent versus 14.5 per cent) while also being far from needed health and human services and having inadequate transportation (National Advisory Committee on Rural Health & Human Services, 2014). The violence of rural poverty extends to cuts in services for survivors of violence. Cut off from other options, survivors who experience a reduction in services are thrown further into instability and unsafety. While violence may be less visible in rural areas, it is often much harder to restore survivors to safety and wholeness. Austerity adds to and augments the violence experienced by survivors in the rural United States.

While all RCCs must make do with small budgets, this is compounded for rural agencies who have even smaller budgets than their urban counterparts yet often provide the same level and capacity of services (Edmond et al, 2019). Not surprisingly, nearly all directors (both rural and non-rural) reported making cuts to staffing through reductions in staff hours, layoffs and hiring freezes. Rural directors were more likely to report making cuts to transportation for clients and travel for staff. This theme emerged in four interviews with rural directors but was not listed as a survival strategy among urban or suburban agencies. Directors from across the state reported cutting expenses for basic necessities such as toilet paper, tissues, heat, electricity and programme supplies. The interview participants relayed this

extreme cost–cutting information in a straightforward manner, but it is worth investigating further. In no other professional sector would this sort of deprivation be treated as the norm. In other literature and this chapter, it is evident that RCCs have normalised austerity and figured out ways to stretch incredibly small budgets. This is perhaps why virtually no agencies in the state of Illinois closed their doors despite going without 40–80 per cent of their budgets for nearly two years. RCCs were founded on the principle of mutual aid and from their inception eschewed a fee–for–service model (Craft, 1981). Even with the professionalisation of these centres, nearly all RCCs to this day do not charge for their services. This commitment to free services for survivors explains the approach RCCs have to their operations – they look for grants and government funding, in addition to donations, because they do not and probably will never view their clients as a revenue source.

Another strategy for survival was to engage a line of credit. Over half of all agency directors interviewed either used all their reserve money (such as savings) or did not want to deplete it due to the uncertainty of when the budget crisis would end, with the majority of rural RCCs reporting using this survival strategy. Agencies that used their lines of credit were able to do so because they had collateral in the form of property. Several directors in the larger study (Kirkner, 2021) reported trying to open a line of credit but being denied by banks because they did not have collateral, or the banks did not trust the state to repay the agencies. As an organisational strategy, the use of credit lines contributed to RCCs' long-term sustainability. Directors universally viewed using credit as a smart strategy if it was available to an agency. One director even characterised using credit as a moral act (the researcher's characterisation) because it allowed agencies to deliver on their promises to survivors.

While using credit lines prevented many RCCs from closing, they also required the agencies to pay interest. This arrangement warrants closer inspection. First, the state failed to honour its contracts with RCCs and did not remit payment for two years while also not communicating to agencies when payments would start again. Next, agencies were forced to either deplete their savings or borrow against their assets to make up for the shortfall. Then, when they engaged lines of credit they were obligated to pay interest on this money (there was a small subset of agencies that secured no-interest loans from larger non-profits, though this was rare). Funding levels were eventually restored and sometimes even exceeded prior amounts, but the interest payments were not directly reimbursed to agencies. A feminist economic framework helps us recognise this process as a form of economic violence (Evans, 2015; Pearson and Elson, 2015). This study shows how the state manufactured a budget crisis, starved social service agencies, and then made it possible for large banks to profit off the crisis at the expense of survivors of sexual assault by collecting interest. One of the primary causes

of the crisis was the toxic swaps of bonds owned by the state, which ended up costing over US$600 million in swap payments to some of the largest banks in the country (Bhatti and Sloan, 2016). Beyond simply harming the mostly women survivors of sexual violence and the mostly women workers at RCCs, as a feminist economic framework helps elucidate, credit use by RCCs demonstrates how this neoliberal policy went a step beyond de-funding to create profit-making opportunities on the backs of survivors and those who serve them. This suggests the budget crisis was part of a neoliberal political strategy that shifted the risks of austerity to vulnerable populations while simultaneously shifting the rewards to corporate entities (Adkins, 2015).

Implications

This study demonstrates the need for more unrestricted funding to rural RCCs, more militant tactics from RCCs to wield political power, and ultimately a return to grassroots organisational models. Directors stated a preference for state funding over federal because it came with fewer restrictions. Federal funding is often only available for direct service, whereas state funding can be used to pay for prevention programmes, overhead expenses and transportation costs. Without the unrestricted funds, rural RCCs must make severe cuts to needed services and make risky business moves by engaging their lines of credit. These smaller agencies are less likely to make up the ground lost to credit and interest after a fiscal crisis because they have fewer resources than their urban counterparts.

States can support rural RCCs by fully funding them and helping them expand to be able to cover the large areas they serve. States can also open special funding streams to help agencies purchase their own buildings and invest in other long-term strategies to reduce overheads while increasing sustainability for their organisation. Funding transportation services for survivors is also important and this should be done with the lowest amount of tracking as possible in order to reduce the administrative burden, which is harder on smaller and more rural agencies.

While some of the literature on RCCs in the United States focuses on their negotiated and compromised relationships with the state and concludes they are merely extensions of the state, this chapter reveals the relationship to be one of negotiated dependence. This limitation renders RCCs similar to every other social service agency during times of fiscal austerity.

All RCCs discussed in this chapter operate within an explicitly feminist framework as laid out by the Illinois coalition guidelines. Past research has focused on the ability of RCCs to engage in social change and remain true to their radical feminist grassroots (Campbell et al, 1998). There were attempts to mobilise collectively to lobby for funding, yet these efforts were unsuccessful for several reasons. This chapter shows the limits

of 'unobtrusive mobilization' (Katzenstein, 1990) as a political strategy as agencies were unable to succeed in garnering any funding. The data showed the limits of collective advocacy under the current framework. Though agency directors tirelessly advocated through coalition work and individually to their legislators, a legislative solution was slow to come. The lack of radical, direct action during the budget crisis can also be traced back to the professionalisation and de-radicalisation of feminist organisations currently (Knight and Rodgers, 2012). While past literature has critiqued the mainstreaming of RCCs and subsequent de-politicisation, few studies have applied this analysis to a specific political event.

To overcome this limitation, RCCs should consider the value in fostering shared understandings of a painful experience to spur collective action, which could help people think through the issue of collective efficacy for future budget crises or severe cuts. Agencies may start to think about where and how they can leverage power to demand stable funding from the state. This might take the shape of more coordinated activism that mounts more of a direct challenge to state power. Viewing austerity as a form of violence is essential to acting on a more collective scale and should be prioritised over continued 'safe' relationships with the state, which this chapter has demonstrated to be an unreliable source of funding.

The early organisers of the anti-violence movement were right to be sceptical of taking state funds, as the state always has a monopoly on economic violence via manufactured crises and austerity governance policies. These effects only compound the problems of social service organisations operating in rural areas, which are often places of concentrated poverty. Newer models of organisation such as mutual aid or simply grassroots fundraising may prove to be more resilient in the long-term. These models would require RCCs to reorient politically and return to more radical models of organising.

References

Adkins, L. (2015) 'What can money do? Feminist theory in austere times', *Feminist Review*, 109(1): 31–48. https://doi.org/10.1057/fr.2014.37

Albelda, R. (2013) 'Gender impacts of the great recession in the United States', in M. Karamessini and J. Rubery (eds) *Women and Austerity: The Economic Crisis and the Future for Gender Equality*, England: Routledge. 82–101.

Alexander, M. (2010) *The New Jim Crow*, New York: The New Press.

Annan, S.L. (2011) '"It's not just a job. This is where we live. This is your backyard": The experiences of expert legal and advocate providers with sexually assaulted women in rural areas', *Journal of the American Psychiatric Nurses Association*, 17(2): 139–147. https://doi.org/10.1177/107839031 1401024

Bhatti, S. and Sloan, C. (2016) *Turned Around: How the Swaps that were Supposed to Save Illinois Millions Became Toxic* (ReFund America Project), Roosevelt Institute, Action Center on Race & the Economy (ACRE) [online] Available from: http://rooseveltinstitute.org/wp-content/uploads/2016/01/ Turned-Around-Jan-2016.pdf [Accessed 14 June 2021].

Black, M., Basile, K., Breiding, M., Smith, S., Walters, M., Merrick, M. et al (2011) *National Intimate Partner and Sexual Violence Survey: 2010 Summary Report*, Atlanta: Centers for Disease Control and Prevention [online] Available from: https://www.cdc.gov/violenceprevention/pdf/nisvs_report2010-a.pdf [Accessed 29 May 2021].

Campbell, R. (2006) 'Rape survivors' experiences with the legal and medical systems do rape victim advocates make a difference?', *Violence Against Women*, 12(1): 30–45. https://doi.org/10.1177/1077801205277539

Campbell, R., Baker, C.K. and Mazurek, T.L. (1998) 'Remaining radical? Organizational predictors of rape crisis centers' social change initiatives', *American Journal of Community Psychology*, 26(3): 457–483. https://doi.org/10.1023/A:1022115322289

Carter-Snell, C., Jakubec, S. and Hagen, B. (2020) 'Collaboration with rural and remote communities to improve sexual assault services', *Journal of Community Health*, 45(2): 377–387.

Conn, J. (2017) 'State budget mess could close Decatur's only domestic violence shelter', *Herald & Review*, 24 June [online] Available from: http://herald-review.com/news/local/state-budget-mess-could-close-decatur-s-only-domestic-violence/article_cce2a249-9afc-5de1-9fd8-661bcf086894.html [Accessed 21 March 2022].

Coy, M., Kelly, L. and Ford, J. (2007) *Map of Gaps: The Postcode Lottery of Violence Against Women Support Services in Britain*, London: End Violence Against Women. DOI: 10.13140/RG.2.2.33703.34724

Craft, N. (1981) 'Drifting from the mainstream: A chronicle of early anti-rape organizing', in F. Delacoste and F. Newman (eds) *Fight Back! Feminist Resistance to Male Violence*, New Jersey: Cleis Press.

Edmond, T.E., Voth Schrag, R.J. and Bender, A.K. (2019) 'Opening the black box: Identifying common practice approaches in urban and rural rape crisis centers', *Violence Against Women*, 26(3–4): 312–333. https://doi.org/10.1177/1077801219832903

Evans, M. (2015) 'Feminism and the implications of austerity', *Feminist Review*, 109(1): 146–155. https://doi.org/10.1057/fr.2014.39

Freinkel, S. and Smith, S.R. (1988) *Adjusting the Balance: Federal Policy and Victim Services*, Westport, Connecticut: Greenwood Publishing Group.

Griffin, P. (2015) 'Crisis, austerity and gendered governance: A feminist perspective', *Feminist Review*, 109(1): 49–72. https://doi.org/10.1057/fr.2014.44

Hirst, A. and Rinne, S. (2012) 'The impact of changes in commissioning and funding on women-only services', Research Report No. 86 [online] Available from: https://www.equalityhumanrights.com/en/publication-download/research-report-86-impact-changes-commissioning-and-funding-women-only-services [Accessed 21 March 2022].

Johnston, E. (1981) 'Attack from the right', in F. Delacoste and F. Newman (eds) *Fight Back! Feminist Resistance to Male Violence*, New Jersey: Cleis Press.

Katzenstein, M.F. (1990) 'Feminism within American institutions: Unobtrusive mobilization in the 1980s', *Signs Journal of Women in Culture and Society*, 16(1): 27–54.

Kirkner, A. (2021) 'Effects of the budget impasse on Illinois rape crisis centers', Illinois Criminal Justice Information Authority [online] Available from: https://icjia.illinois.gov/researchhub/articles/weathering-fiscal-uncertainty-a-study-of-the-effects-of-the-illinois-budget-impasse-on-rape-crisis-centers [Accessed 21 March 2022].

Knight, M. and Rodgers, K. (2012) '"The government is operationalizing neo-liberalism": Women's organizations, status of women in Canada, and the struggle for progressive social change in Canada', *NORA – Nordic Journal of Feminist and Gender Research*, 20(4): 266–282. https://doi.org/10.1080/08038740.2012.747786

Macy, R.J., Giattina, M.C., Parish, S.L. and Crosby, C. (2010) 'Domestic violence and sexual assault services: Historical concerns and contemporary challenges,' *Journal of Interpersonal Violence*, 25(1): 3–32. https://doi.org/10.1177/0886260508329128

Maier, S.L. (2011) 'Rape crisis centers and programs: "Doing amazing, wonderful things on peanuts"', *Women & Criminal Justice*, 21(2): 141–169. https://doi.org/10.1080/08974454.2011.558802

McGuire, D.L. (2010) *At the Dark End of the Street: Black Women, Rape, and Resistance: A New History of the Civil Rights Movement from Rosa Parks to the Rise of Black Power*, New York: Vintage Books.

National Advisory Committee on Rural Health & Human Services (2014) *The Intersection of Rural Poverty and Federal Human Services Programs*, Policy Brief [online] Available from: https://www.hrsa.gov/sites/default/files/hrsa/advisory-committees/rural/publications/2014-rural-poverty.pdf [Accessed 21 March 2022].

Pearson, R. and Elson, D. (2015) 'Transcending the impact of the financial crisis in the United Kingdom: Towards plan F—a feminist economic strategy', *Feminist Review*, 109(1): 8–30. https://doi.org/10.1057/fr.2014.42

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749. https://doi.org/10.1089/jwh.2011.2891

Rape Crisis Center, Washington, D.C. (1972) 'How to start a rape crisis center' [online] Available from: https://eric.ed.gov/?id=ED108060 [Accessed 17 November 2021].

Reinelt, C. (1994) 'Fostering empowerment, building community: The challenge for state-funded feminist organizations', *Human Relations*, 47(6): 685–705. https://doi.org/10.1177/001872679404700606

Ruback, R.B. and Menard, K.S. (2001) 'Rural-urban differences in sexual victimization and reporting: Analyses using UCR and crisis center data', *Criminal Justice and Behavior*, 28(2): 131–155. https://doi.org/10.1177/0093854801028002001

Rubery, J. (2015) 'Austerity and the future for gender equality in Europe', *Industrial and Labor Relations Review*, 68(4): 715–741. https://doi.org/10.1177/0019793915588892

Stommes, E.S. and Brown, D.M. (2002) *Transportation in Rural America: Issues for the 21st Century* (No. 2221–2019–2484), Rural America/Rural Development Perspectives [online] Available from: https://doi.org/10.22004/ag.econ.289506 [Accessed 1 November 2021].

Thiede, B., Kim, H. and Valasik, M. (2018) 'The spatial concentration of America's rural poor population: A postrecession update', *Rural Sociology*, 83(1): 109–144. https://doi.org/10.1111/ruso.12166

Ullman, S.E. and Townsend, S.M. (2007) 'Barriers to working with sexual assault survivors: A qualitative study of rape crisis center workers', *Violence Against Women*, 13(4): 412–443. https://doi.org/10.1177/1077801207299191

Gender–based Violence Against New Immigrants

Carly E. McPeak and Valerie K. Sprout

Introduction

Victims of gender–based violence (GBV) who are non–citizens of the United States may seek lawful immigration statuses through legal pathways to escape abuses and receive services in the United States. Immigration/non–citizen status refers to a foreign–born individual's permission to lawfully reside in the United States. A non–citizen's status can be limited by the amount of time they are permitted to be in the United States, the type of work they are and are not allowed to engage in, who they are able to marry, and what activities (such as studying or caring for children) they are able to do while in the country. These rigid and often confusing constraints cause many immigrants in the United States to lose their lawful status either by violating the terms of their visa or by remaining in the United States for longer than the allocated time given to them upon entering the country.

Immigrant victims of GBV may have escaped violence in their home country and/or currently victimised in the United States. Those present in the United States without a lawful immigration status can experience uncertainty, instability and greater risk of revictimisation. Without a lawful status, a non–citizen is subject to being detained and/or deported from the United States. Fear of losing legal status and deportation often prevents GBV victims from seeking outside help (Chang–Muy et al, 2016). Perpetrators of violence frequently use immigration status as a vulnerability to exploit (Orloff and Sullivan, 2013). To understand why immigration status carries such weight, one needs to examine lawful immigration status and the general pathways to obtain such a status in the United States. First, the chapter provides three common legal pathways to gain lawful status in the United States. This chapter discusses both victims of GBV who reside in and outside

of the United States and pathways to obtain lawful residency. Yet, we will primarily address the victims of GBV who reside in the United States. Next, policy limitations, barriers to access services and future policy reforms will be discussed to address the needs of immigrant victims and their families.

Common pathways to lawful residency in the United States

In general, there are three common pathways to gain lawful residency for a non-citizen. From least to most stable (in terms of the length of stay and eligibility), those statuses are undocumented, nonimmigrant and lawful permanent residents (SJI, 2013). It is important to note the differences between visa categories and immigration status as many use these two terms interchangeably. A visa is often associated with a passport when foreign citizens travelling to the United States are required to obtain a permit to enter. A 'status', however, is often associated with the formal immigration classifications (such as student visa F–1 or work visa H–1) as indicated in the I–94 form (legal documentation of non-citizens handled by US Citizenship and Immigration Services [USCIS] at the Department of Homeland Security). Each of these statuses may present unique challenges and opportunities, sometimes legal and civil obligations of the non-citizens.

An undocumented immigrant is an individual who either came to the United States without a visa or overstayed the time permitted on a valid visa. Nonimmigrant status is a temporary visa usually tied to a specific purpose, such as students, seasonal workers, highly skilled workers or visitors. Lawful permanent residency or lawful permanent residents (LPRs) is the most stable and secure status compared to the formerly mentioned two. LPRs are also commonly known as 'green-card' holders since they are non–United States citizens who are authorised to live lawfully in the United States permanently (INA §101(a)(20)). This can be obtained through family members, employment or humanitarian avenues (INA §§201–09). LPRs enjoy many rights and privileges such as automatic entry to the United States and full constitutional due process rights (*Landon* v *Plasencia*, 459 U.S. 21, 1982). However, LPR status can be abandoned if the immigrant is absent from the United States for more than one year (8 CFR §211.1(a)(2)) and LPRs are subject to deportation if they commit certain criminal offences (INA §237(a)(2)). LPRs can apply to become United States citizens. United States citizenship can be obtained through birth in the United States (INA §§301(a)–(b) and (f)), the citizenship of one or both parents (INA §301(c)–(d) and (g)–(h)) and naturalisation (INA §316). Naturalisation is an application process that is available only to LPRs who have resided in the United States for five years (INA §316(a)(1)), can demonstrate they are and have been a person of good moral character, and support the principles of the United States Constitution (INA §316(a)(3)).

Lawful immigration categories

There are generally five potential pathways to obtain legal immigration status in the United States: employer based; family based; humanitarian relief; battered spouse waivers; and Violence Against Women Act (VAWA) self-petition (U visa). Humanitarian relief, battered spouse waivers and U visa are specific for non-citizen victims of crime. However, humanitarian relief is generally limited to refugees, asylum seekers who are fearful of persecution in their home country, victims of certain enumerated crimes, and temporary protected status from a country designated by the executive branch. VAWA creates specific avenues of eligibility to non-citizen GBV victims. Humanitarian immigration relief is a frequently used avenue of relief for victims of GBV, regardless if they previously legally resided in the United States. Under the humanitarian relief clause, it allows non-citizens to apply for lawful immigration status completely independent of their abuser. For non-citizens who were abused in their home country, they may have the ability to apply for asylum once they are in the United States based on their past mistreatment. To a certain extent, humanitarian relief offers legal and sovereign protection for people in crisis outside of the United States. In this chapter, however, we will primarily focus on the legal immigration categories for non-citizen victims of crime that occurred in the United States.

Employer sponsored

An employer may sponsor a non-citizen for both nonimmigrant status (such as temporary agricultural workers) and permanent residency. Depending on the type of status, an employer is required to prove a variety of evidence, including nature of the work, requirements of the position, qualifications of the beneficiary, and sometimes a test of the labour market to show there are no eligible, qualified US workers that could otherwise fill the position. To qualify for employment-sponsored immigration status, a non-citizen must maintain lawful status the entire time they are in the United States or must be applying abroad.

   Despite the advantages of employer-sponsored immigration, not all types of immigrants are eligible for such sponsorship. For non-citizen victims of GBV who reside in the United States unlawfully, an employer-sponsored immigration status usually is not a viable option for immediate immigration relief. Even if the non-citizen is otherwise qualified for a sponsorship, if they cannot show they have maintained a lawful status during the entirety of their time in the United States they will not be eligible to apply for the status and remain in the United States. Departing the United States to apply for employer-based status may also be impermissibly difficult if the non-citizen has accrued unlawful presence. If the non-citizen has been in the

United States without a lawful status for more than six months, they may trigger a three- or ten-year bar to re-entering the United States depending on the amount of time the non-citizen has been out of status (INA § 212(a)(9)(B)(i)(I) and (II)).

Family sponsored

United States citizens and LPRs can petition certain non-citizen family members for their permanent resident status. US citizens may petition for their non-citizen spouses, children, parents and siblings. LPRs may petition for their non-citizen spouses and unmarried children. There are a statutorily limited number of permanent residencies that can be issued per year for children over 21 years of age, spouses of permanent residents and siblings (INA §203I). These limitations are further compounded by the additional restriction on how many permanent residencies are granted per country (INA §202(a)(2)) and per category (family or employer) based on the relationship of the petitioner to the beneficiary (INA §203(a)). Depending on the category and the country of birth for the intending immigrant, wait times vary dramatically. For example, a Costa Rican unmarried daughter of a permanent resident has an approximate wait time of five years to be eligible to apply for permanent residency, but a Mexican sibling of a US citizen must wait approximately 160 years (Wheeler, 2019).

Non-citizen victims of GBV may qualify for family-sponsored immigration status. However, the qualifying relationship relies upon the perpetrator of violence, especially when the perpetrator obtains citizenship or LPR. US citizens and LPRs are not obligated to file petitions for qualifying relatives. The filing of a family-sponsored petition is solely at the discretion of the petitioner. In abusive relationships, perpetrators use the promise to file or threaten to withdraw a petition as a tactic to exert power and control over their victim. This is especially true in petitions where the US citizen spouse petitions for a non-citizen. If the abuser and victim were married for less than two years when their permanent residency was granted, the non-citizen was given conditional permanent residency (INA §216). To remove the conditions of the permanent residency, the couple must file a joint petition to show they have maintained a shared relationship for the duration of the conditional residency (INA §216(c)). Abusers will often threaten to withhold support of this petition as a form of control over the non-citizen.

Battered spouse waivers

When United States citizen spouses or LPRs petition for their non-citizen spouse, if the marriage is less than two years old at the time of adjudication, USCIS grants conditional residence to the non-citizen. At the end of the

two-year period, the non-citizen and their spouse must jointly file an I–751 Petition to Remove Conditions on Residence and demonstrate that the couple still maintains a good faith marriage. Proof generally includes evidence of a shared life together, such as joint bills, joint residence, children in common, and photographs. Prior to a legislative fix, this provision gave perpetrators of abuse additional power. Married victims of violence would stay in the marriage during this two-year period to ensure they would be able to jointly file a petition to remove conditions. Congress found victims were remaining in relationships longer and were being subjected to continued violence at the hands of their US citizen or LPR spouses. In 1990, Congress amended the Immigration and Nationality Act (INA) to include a waiver of this provision. The waiver is known as the 'battered spouse waiver'. To qualify for a battered spouse waiver, a victim must prove the marriage was entered into in good faith and the victim was subjected to battery or extreme cruelty. The applicant must detail both of these elements in a personal affidavit. It is not hard to imagine that non-citizen victims bear the burden of proving their good faith in marriage and the degree of battery imposed by their spouses. In many circumstances, GBV victims may fail to provide sufficient proof or have no legal knowledge of their eligibility.

Violence Against Women Act self-petition

Congress passed the VAWA in 1994. This legislation recognised that US citizens and LPR spouses could use immigration status as a tactic to further exert power and control against non-citizen victims. VAWA carved out relief for spouses of United States citizens and lawful permanent residents in the form of a self-petition. To be eligible for relief under a VAWA self-petition, the non-citizens must prove their relationship to a US citizen or lawful permanent resident abuser. The victim must be the abused spouse or former spouse. If filing as a former spouse, the victim must show that the divorce was finalised less than two years before the filing of the self-petition. Victims must also show joint residence with the perpetrator at some point in the past or present. USCIS must also make a finding that the victim suffered from battery or extreme cruelty. Victims must also show that they have good moral character. USCIS will perform a criminal background check as well as take into consideration evidence submitted in support of the victim's good moral character. A victim must also establish that she or he entered the marriage in good faith, not for an immigration benefit (INA § 204(a)(1)(A)).

An approved VAWA self-petition grants the victim deferred action, which is a form of prosecutorial discretion, and employment authorisation. In some, but not all cases, an approved VAWA self-petition could result in permanent

residence. A thorough screening of the victim is required to ensure there are no criminal or immigration issues that would otherwise prevent the victim from obtaining permanent residence.

Violence Against Women Act cancellation of removal

VAWA also allows non-citizen GBV victims to apply for U nonimmigrant status if they reported the crime and were helpful with law enforcement in the investigation of the crime (INA §101(a)(15)(U)). VAWA cancellation of removal is a defensive form of immigration relief used exclusively in removal proceedings in immigration court to keep the non-citizen from being deported. In a VAWA cancellation of removal case, the victim must prove that he or she has been battered or subjected to extreme cruelty by a US citizen or LPR spouse or parent; physical presence in the United States for three years; good moral character; that removal would cause extreme hardship; and that certain inadmissibility grounds do not apply or that he or she qualifies for a waiver of inadmissibility (INA § 240A(b)(2)).

U nonimmigrant status (U visa)

U nonimmigrant status (commonly known as the U visa) is a status for victims of certain enumerated crimes that have been, are currently being, or will be helpful to the detection, investigation or prosecution of crime. To qualify for a U visa, the applying non-citizen must show he or she:

1. suffered substantial physical or mental abuse as a result of the crime;
2. has information about the criminal activity;
3. has been helpful, is currently being helpful or is likely to be helpful to a federal, state or local investigation or prosecution;
4. has obtained a certification from a law enforcement official, prosecutor, judge, Department of Homeland Security, or other federal or state authorities investigating or prosecuting the criminal activity;
5. is admissible to the United States under immigration law or otherwise qualifies for a waiver of inadmissibility; and
6. the crime occurred in the United States or violated US laws.

There are 27 enumerated qualifying crimes. Those most relevant to victims of GBV include abusive sexual contact, domestic violence, sexual assault and stalking (INA § 101(a)(15)(U)(iii)). Domestic violence, sexual assault, child abuse, stalking and human trafficking make up 76.3 per cent of the U visa cases filed (Orloff et al, 2021).

U nonimmigrant status is granted for a period of four years. After three years of continuous physical presence, the individual can apply for lawful permanent

residence. There is a statutory cap of 10,000 grants of U nonimmigrant status per fiscal year. As of the second quarter of 2021, there were over 160,000 principal U nonimmigrant status petitions pending. The cap has created a heavy backlog, leading to a wait that lasts years for victims of violence who desperately need stability of immigration status. Prior to June 2021, USCIS would only issue employment authorisation to individuals whose cases had been reviewed and put on a 'waitlist' for U nonimmigrant status. This led to a wait of approximately five years to receive employment authorisation from the date of filing the petition. However, in June 2021, USCIS began implementing a *bona fide* determination process in which employment authorisation is granted to those who meet initial criteria. The U visa has become a popular remedy for non-citizen victims of domestic and sexual violence. One study of 11,171 participants found the U visa was used 71 per cent of the time versus the VAWA self-petition at 26 per cent (Orloff et al, 2021).

Diversity

Each fiscal year, 50,000 immigrant visas are awarded from a random selection of applicants who are from countries with low rates of immigration to the United States (INA §203(c)). The programme is administered through the Department of State, which annually publishes a list of eligible countries based on statistical data. Like employment-sponsored relief, an individual residing in the United States will have to show maintenance of immigration status to benefit from a diversity visa. This requirement will eliminate diversity visas as a viable option for many victims of GBV.

An individual who does not qualify for any of the outlined relief will not likely be able to obtain lawful immigration status within the United States. Immigration opponents frequently use statements such as 'I am not opposed to immigration, just do it the *right* way', or 'Get in line.' This is a clear misconception that assumes there is always a way to 'get in line' and that individuals who have not been able to secure a lawful immigration status have somehow been fraudulent or deceitful. The reality is that pathways to lawful immigration status are limited and incredibly complex to navigate. Even when victims of GBV qualify for relief, they frequently experience long waits before receiving employment authorisation and immigration status.

Tactics used by perpetrators against new immigrant victims

The complexity of the immigration system is often weaponised against non-citizen victims. Abusers will weaponise the victim's lack of knowledge about the immigration process against them. If the abuser was the petitioner

for the non–citizen immigration status, the abuser can threaten to revoke their support or report fraud to Immigration and Customs Enforcement. Although each victim experiences abuse in different ways, it is important to understand that non–citizen victims of domestic violence can experience perpetrator tactics that are unique to their status as an immigrant. Two strong threats often used by perpetrators of violence against immigrant women are the threat of reporting the victim to immigration authorities and the threat of withdrawing or not filing immigration paperwork.

In addition to threats stemming from immigration status, abusers also use tactics outlined in the Duluth Model's Power and Control Wheel to control their victims - view this wheel online at www.thedeluthmodel.org.

Perpetrators of GBV often isolate immigrant victims from friends, especially those that speak the victim's language, or may forbid the victim to learn English. Emotional abuse may consist of lying about the victim's immigration status, writing to the victim's family with false information about the victim, and calling him or her racist names. Economic abuse includes reporting victims who 'work under the table' or not allowing victims to get job training or schooling. Sexual abuse unique to immigrants, especially undocumented victims, can include calling the victim a prostitute or 'mail order bride' or alleging that she has a history of prostitution on immigration papers, which can be damaging to an immigration case. Perpetrators often use children to threaten immigrant victims of GBV by threatening to take the children from the United States or threatening to have the victim deported, thus separating the non–citizen from his or her US citizen children. Perpetrators also might threaten to report undocumented children to immigration authorities.

Challenges for non-citizen victims in rural areas

Barriers faced by non–citizen victims in rural areas can become tools used by abusers to further exert power and control over victims. Therefore, in examining potential solutions, it is crucial to dissect the unique barriers experienced by victims of GBV living in rural areas.

Isolation

Non–citizen victims living in rural areas are likely geographically isolated, but may also be isolated from resources, social support networks, individuals who speak their language and their own cultural communities. The overall foreign-born population of the United States is 13.2 per cent. In rural counties, that per centage drops to 2.3 to 2.9 per cent depending on whether the county is mostly or completely rural (Gryn, 2016).

Access to employment

The laws regarding employment for non-citizens are difficult and often exploited by employers. Generally, it is unlawful to hire a person who is not authorised to work in the United States (INA §274A(a)(1)). All employees must be authorised to work automatically (such as LPRs) or by USCIS. Employers can often circumvent this rule by classifying non-citizens as independent contractors instead of employees and therefore not be required to confirm that the non-citizen has work authorisation (8 CFR §274a.1(j)). Even if the non-citizen has valid employment authorisation, their access to employment may be limited by their English language ability and recognition of their foreign degrees or job experience.

   In rural areas, there are generally fewer opportunities for employment (Bishop and Cushing, 2021). For undocumented non-citizens, there may be less availability of employers willing to pay cash 'under the table' or accept a non-citizen as an independent contractor. Non-citizens living in rural areas may also struggle to get consistent transportation to and from employment. Non-citizens may also be unaware of their eligibility to work in the United States.

Transportation

Public transportation in rural areas is limited (Shoup and Homa, 2010). In many states, one must show proof of lawful presence in the United States to obtain a driver's licence. For example, to obtain a driver's licence in Kansas, one must present evidence of lawful immigration status or employment authorisation as well as proof of a Social Security Number (Kansas Department of Revenue, nd). Driving without a licence can have a steep cost for non-citizens. In jurisdictions that arrest violators for driving without a licence, non-citizen victims are at an increased risk. Information-sharing systems enable the sharing of information between local law enforcement and Immigration and Customs Enforcement (ICE, nd). Lack of public transportation, coupled with the inaccessibility of driver's licences for undocumented non-citizens, places further burdens on victims attempting to access assistance.

Limited English proficiency

Non-citizens with limited English proficiency encounter additional challenges when accessing services. A non-citizen's ability to report abuse to the police, access social services, receive medical care and obtain legal services may be negatively impacted if proper language services are not in place. In rural communities where resources are already stretched thin, adequate language services may not be available. This may lead agencies to

use inappropriate interpreters such as children, family members related to the perpetrator and community members.

Unqualified interpreters present a myriad of problems. First, they may not understand the importance of confidentiality. The interpreter could disclose information provided by the immigrant to the perpetrator or other family members. Not only could this have a chilling effect on immigrants accessing services, but also could increase the possibility that they could be in extra danger of retaliation by the perpetrator. Second, the interpreter may not be able to provide competent interpretation. A challenge of interpretation is that the unqualified interpreter may summarise the immigrant's statements instead of interpreting the statement word-for-word. The interpreter could also misunderstand the immigrant's statement and relay an incorrect interpretation. The immigrant could also be hesitant to fully disclose information, especially if the interpreter is a child.

Unavailability of social service programmes in rural areas

Regardless of their citizenship status, rural women have less access than urban women to domestic violence shelters, physical and mental health professionals, law enforcement and judicial personnel (Peek-Asa et al, 2011). Rural women are also twice as likely to be denied services because of the insufficient number of programmes and inadequate staffing of community-based health programmes (Peek-Asa et al, 2011). Furthermore, rural social and legal service agencies often have large coverage areas. It may be more difficult to anticipate and provide for culturally specific services for all non-citizens within the community.

A lack of services means that it is that much harder for a non-citizen to escape an abuser. Without a place to live, non-citizens (especially those with minor children) are unlikely to leave a shared residence. Non-citizens are also unlikely to request protection from law enforcement if they are unaware of the services they could provide, such as a protection from abuse order.

Limited access to public benefits and housing

Individuals living undocumented in the United States rarely qualify for public benefits. Navigating immigrant eligibility for federal benefits programmes is difficult for even those familiar with US systems (NILC, n.d.). To compound this problem, eligibility for federal programmes, such as Temporary Assistance for Needy Families, Medicaid and the Supplemental Nutrition Assistance Program, depend not only on the non-citizen's immigration status but also the time of their arrival and length of residence in the United States (Perreira et al, 2012).

In rural areas where non-citizen populations are statistically lower, navigating these systems can be even more difficult. In some circumstances, accessing public benefits can have a detrimental impact on potential immigration relief. Some applications, such as an application for cancellation of removal for non-LPRs specifically asks if the non-citizen or any members of the non-citizen's family has applied for or received public benefits (EOIR-42B). This information can be used to determine the non-citizen's 'good moral character' and often will be weighed against the non-citizen if they have applied for or used public benefits, even for qualifying family members.

Proposed improvements to remedy inequities in non-citizens' experience in rural areas

There are several changes that can address the difficulties non-citizen victims of GBV face in rural areas.

Changes to U visa regulations and procedures

Victims of qualifying U visa crimes are wholly reliant on federal, state or local agencies to certify that they were helpful with the detection, investigation or prosecution of a crime. A U visa certification is a requirement of the U visa application. There are no federal mandates regulating when a certification must be signed. Instead, in most areas, certification is completely discretionary for the certifying agency. This can lead to unequal access to immigration relief based solely on the location where the crime occurred. For example, a sheriff in a rural area that is up for re-election may think twice before certifying a U visa victim. Immigration has become a hot-button issue in the United States. It has taken the front seat in many election campaigns. Some officials up for election may not want to give the impression they are pro-immigration. In that instance, if the sheriff denied the U visa certification, there would be no appeals procedure that compels certification for the victim, and she would be unable to proceed with a U visa petition.

The state of California passed a law that serves as a model for the U visa, which should be adopted nationwide. The law states there is a rebuttable presumption that the victim meets the helpfulness requirement if there is no evidence that the survivor refused or failed to provide information or assistance to law enforcement (ILRC, 2021). Further, it mandates that agencies process certification requests within 30 days or seven days if the victim is in removal proceedings. The law also clarifies the certification can be signed even if there were no charges, or the case has been closed. California also requires all certifying agencies to report to the legislature annually regarding the number of certification requests received, signed

and denied (ILRC, 2021). To encourage uniformity and equal access to immigration relief, state and local governments should pass legislation like California. This would ensure that anti-immigrant bias in rural areas does not limit access to much needed immigration relief.

The statutory cap on U visas should be increased and additional funding should be allocated to allow for faster adjudication of U visa petitions. This proposal would impact all U visa applicants, not just those in rural areas. However, increased visa availability and faster adjudication times would undoubtedly eliminate certain barriers that disproportionately impact non-citizen victims residing in rural areas.

In addition, federal funding should be increased to improve and expand culturally specific services and outreach in underserved, rural communities. Without adequate funding, social service programmes cannot reach and address the needs of rural non-citizen victims. Non-citizen victims in rural areas face enough barriers that prevent them from accessing help. It is imperative that when these individuals do access social services, they are greeted with appropriate, well-funded, culturally appropriate services.

State and local governments, particularly those in rural areas, should make public benefits available to all victims of GBV, irrespective of immigration status. Access to housing and public benefits provide resources to victims attempting to leave violent relationships. In rural areas where resources are scarce, access to public benefits could help non-citizen victims secure safe, stable living situations.

Conclusion

Immigrant victims of domestic violence are subject to unique social, legal and economic abuse compared to victims with US citizenship. As the chapter discussed, some major challenges immigrant victims commonly face are fear of deportation, language barriers, fear of ostracism and extreme poverty. Immigration categories are lengthy and costly and qualification and application processes are long and expensive. For many immigrant victims who experience poverty and lack access to legal counsel, it is almost impossible to obtain legal protection from the formal legal system.

Immigrant victims may also be afraid of direct contact with the formal legal system, such as the police and court, due to their immigration statuses. The threat of deportation is a powerful deterrent for immigrants to report their abusers, especially when children are involved in the relationship. The threat is exacerbated when a victim lacks information about her rights and options because the victims are isolated at home or have language barriers to access victim services. In many situations, the process to request and receive legal protections for legal and undocumented immigrants from the US government is highly complex, requiring the hiring of legal professionals with large amounts

of expenses or referral from comprehensive victim advocacy organisations. Without readily available income and resources, immigrant victims are stranded in the cycle of abuse. The current chapter mainly focused on the immigration statutes, pathways to gain and maintain legal statutes, legal challenges, legal remedies and policy solutions for victims of domestic violence. The purpose of the chapter is to provide an overall review of legal battles that victims face to obtain legal support and help when experiencing violence and abuse in the United States. As an immigration country, the authors want to shed new light on the challenges and opportunities victims face in the United States.

Congress has made important legislative changes over the last two decades that have helped provide safety, security and stability for non-citizen victims of GBV. However, governments can go further to protect rural, non-citizen victims of GBV. Federal, state and local governments should prioritise the strengthening of protections for non-citizen victims of GBV by improving pathways to immigration relief and eliminating barriers experienced in rural areas.

References

Bishop, B. and Cushing, R. (2021) 'Rural employment flatlines for the past 11 years', *The Daily Yonder*, 14 June [online] Available from: https://dailyyonder.com/rural-employment-flatlines-for-the-past-11-years/2021/06/15/ [Accessed 29 January 2022].

Chang-Muy, F., Congress, E.P., Warrier, S. and Rose, J. (2016) 'Women, gender-based violence, and immigration', in F. Chang-Muy and B. Congress (eds) *Social Work with Immigrants and Refugees: Legal Issues, Clinical Skills, and Advocacy*, New York: Springer, pp 235–256.

Gryn, T. (2016) 'The foreign-born by urban-rural status of counties: 2011–2015', United States Census Bureau, 8 December [online] Available from: https://www.census.gov/newsroom/blogs/random-samplings/2016/12/the_foreign-bornby.html [Accessed 9 September 2021].

ILRC (2021) 'California state laws on the U visa' [online] Available from: https://www.ilrc.org/sites/default/files/resources/6-21_ca_state_u_visa_laws.pdf [Accessed 5 September 2021].

Immigration and Customs Enforcement (ICE, n.d.) [online] Available from: https://www.ice.gov/le-information-sharing [Accessed 7 November 2022].

Kansas Department of Revenue (nd) 'Driver's license proof of identity' [online] Available from: https://www.ksrevenue.org/dovproof.html [Accessed 10 August 2021].

NILC (nd) 'Overview of immigrant eligibility for federal programs', National Immigration Law Center, July [online] Available from: https://www.nilc.org/wp-content/uploads/2015/11/tbl1_ovrvw-fed-pgms.pdf [Accessed 1 September 2021].

Orloff, L. and Sullivan, K. (2013) 'Breaking barriers: A complete guide to legal rights and resources for battered immigrants', [Online] NIWAP, American University, and Legal Momentum, p 2. Available from: https://niwaplibrary.wcl.american.edu/breaking-barriers-maunal [Accessed 7 November 2022].

Orloff, L., Magwood, H., Campos-Mendez, Y. and Hass, G. (2021) 'Transforming lives: How the VAWA self-petition and U visa change the lives of survivors and their children after employment authorization and legal immigration status', National Immigrant Women's Advocacy Project, American University, Washington College of Law, p 5, 16. Available at: https://niwaplibrary.wcl.american.edu/wp-content/uploads/Transforming-Lives-Final-6.8.21-Final.pdf [Accessed 7 November 2022].

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P. and Saftlas, A. (2011) 'Rural disparity in domestic violence prevalence and access to resources', *Journal of Women's Health*, 20(11): 1743–1749. doi: 10.1089/jwh.2011.2891

Perreira, K.M., Crosnoe, R., Fortuny, K., Pedroza, J., Ulvestad, K., Weiland, C. et al (2012) 'Barriers to immigrants' access to health and human services programs', Office of the Assistant Secretary for Planning and Evaluation, May [online] Available from: https://www.aspe.hhs.gov/sites/default/files/migrated_legacy_files//43821/rb.pdf?_ga=2.139156147.1039740980.1642877757-1187841598.1642877757 [Accessed 10 August 2021].

Shoup, L. and Homa, B. (2010) 'Principles for improving transportation options in rural and small town communities', *Transportation for America*, p 11.

SJI (2013) 'Overview of types of immigration status', Immigration and the State Courts Initiative, 1 April [online] Available from: https://www.sji.gov/wp/wp-content/uploads/Immigration-Status-4-1-13.pdf [Accessed 15 August 2021].

Wheeler, C. (2019) 'Backlogs in family-based immigration: Shedding light on the numbers', Clinic Legal, 1 March [online] Available from: https://cliniclegal.org/resources/family-based-immigrant-law/backlogs-family-based-immigration-shedding-light-numbers [Accessed 23 January 2022].

Understanding Gender–based Violence and Rurality: Conclusion and Future Implications

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Gender-based violence (GBV) takes many forms, including direct physical, psychological, emotional and economic abuse, and indirect abuses such as intentional gender blindness. These actions, or inactions, can have detrimental effects across generations and cultures. The triangulation of GBV, rurality and rural culture has become a challenging, yet essential, topic. The discussion on rural crime is also timely and urgent when considering most criminological theories in the Western world focus on urban settings. Since the definition of rural and rurality differs worldwide, the study of the phenomena of violence and rurality needs innovative, sophisticated and up–to–date methodologies. In this text, readers explored the most current research about GBV in the United States with implications that can be applied internationally, with chapters utilising qualitative and quantitative methods. Chapters are rich and diverse in topics, focused on oppressed groups such as immigrants and lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual and ally plus (LGBTQIA+), by exploring new theories on the patterns of violence with a spotlight on patriarchy. Chapters examine best practices to positively affect the lives of survivors – moving from policy review into actionable change. The text collects a series of research and agency reports that provide a holistic view of GBV in rural communities. The text also emphasises insights on the prevention and education of GBV from youth to college-aged adults. The text introduces interdisciplinary approaches (such as community justice and non–profit victim advocacy work) to tackle intersectional issues of GBV in rural areas.

We also want to reiterate the ultimate intent of the current text while encouraging scholars and practitioners to continue their research endeavours in the following areas that will most benefit.

A global perspective

Research on GBV in rural areas should involve international scholars to capture and disseminate findings from a global perspective. For example, readers may refer to national datasets and more localised data to explore the study on rural violence and victimisation. Research should be more inclusive by including the characteristics, prevalence and incidences of GBV in rural places worldwide to provide a comprehensive perspective on the intersectional relationship between rurality and GBV in myriad contexts. Scholars must be able to engage in comparative research, and especially, to be comparative in reviews of literature as the individual scholar sets the stage for individualised studies. Research on rural crime should be extended beyond Western-centric foci and welcome a wide breadth of studies across the world to provide an understanding and tools to measure, describe, monitor, evaluate and analyse gender-based violence within different political, economic, cultural and geographic boundaries. More importantly, international scholars should conduct comparative research focusing on patterns of crime and violence in rural areas, bridging theories of critical criminology, globalisation and neoliberal policies across the globe.

Theorising of rural crime

A continued engagement on the theorisation of GBV and rurality is necessary. Rural crime literature needs concerted attention in theorising the patterns of behaviours, criminalities, victimisations and solutions, often supported by feminist approaches. Urban-centric theories have their inherent limitations in understanding rural crime and criminality.

Critical perspectives on gender and violence

Critical perspectives on gender and violence should be highlighted and further engaged with in rural-focused research. The continuation and reproduction of violence against women is deeply embedded in the sociocultural inequality and sustained stereotypical beliefs on gender roles. Critical theories, such as feminist criminology, should be utilised to tackle the causes and consequences of GBV. Scholars should push the focus from 'just' gender to other identifiers as well. Intersectional work has much to add to all academic fields and will benefit those working on the frontlines with survivors and their loved ones. Intersectionality is an analytical

framework used for understanding how different aspects of a person's social categorisations (such as race, class and gender) create overlapping systems of discrimination and disadvantage.

Rural–focused intervention programmes

Studies suggest rural-focused intervention programmes are currently limited while the literature suggests a much greater demand. A rural-specific intervention programme should focus on the intersectional characteristics of victims, access to rural justice, and specific community needs. Researchers can explore opportunities to develop such programmes by creating partnerships between victims and service providers, criminal justice agencies, local workforce development, and educational service providers and building service providers' capacity to enhance services to rural victims.

We propose a transformative justice model that emphasises changing the trajectory from recovery to empowerment when providing services for GBV victims. These crucial components of the transformative justice model include resources, safety, freedom from abuse, healing, training and financial independence. Victim services should provide survivors with housing resources, education and skills training, not only in the United States but globally as well. Such services would reduce the overall costs associated with short-term and long-term trauma and financial losses that victims experience. Rural criminologists and policymakers should engage in scholarship and political advocacy to further rural intervention programmes that focus on the intersectional characteristics of victims, trauma–informed and gender-responsive services, and education and employment opportunities. Such an approach should also address the rural sociocultural context, lack of anonymity and adverse effects of dense social ties in the community that may deter victims from seeking services. Such efforts must operate utilising coordinated community collaboration and responses that emphasise both the short-term and long-term needs of the victims.

Raising awareness on gender–based violence in rural communities

Educating local and state lawmakers about the unique issues facing rural victims of GBV is a necessary step to increase awareness of victimisation in these communities. Further, educating beyond system decision-makers can also help raise public awareness of the issue, which could result in more willingness for citizens to intervene and for survivors to feel more comfortable reporting. Targeting state funding towards rural areas with the sole purpose of supporting victims of GBV will help guide rural

communities in reducing the obstacles experienced by victims. Intentional efforts should be made to connect area providers together to assist survivors in locating holistic assistance even while residing in rural communities with diminished and inaccessible services. In addition, criminal justice professionals, including law enforcement and the courts, must approach victims in a professional manner, which includes putting aside the geopolitics that continue to reinforce a culture of victimisation. Eradicating GBV will require system–wide support – culturally, politically and economically; yet, rural communities pride themselves on close-knit interpersonal relations that create an ideal opportunity to promote intentional change in addressing rural GBV.

Limitations: Part I

While the current text includes many contributions to GBV in rural areas, we would be mistaken to not address limitations. Part I provides readers with a range of definitions for conceptualising rural spaces, as well as several matrices for categorising rurality. Yet, no singular chapter can fully cover all suggestions for measuring rurality as scholars continue to disagree on the most effective approach as this is generally dependent upon the actual location, methodological plans and research questions. Chapter concepts and rural–based ideologies should be considered with acknowledgement to the many layers of rurality, as these vary based on time, space and place. Not all rural locations are the same – not within the United States and not when attempting to generalise globally.

Part I diligently includes chapters spanning the developmental stages of youth through young adulthood. Samples focused on children are a highly protected and vulnerable population, so these contributions are critical. However, readers should recognise that one study within this age demographic cannot be generalised to all youth, even in rural areas. The youth-focused chapters all utilised samples from the Midwestern United States – youth in other states, and globally, may have quite different experiences of GBV in their respective communities. This sentiment can be extended into the chapter using a convenience sample of undergraduate students. Experiences of college and university students vary greatly and may be heavily influenced by recent personal accounts of GBV as this is a highly vulnerable group, as well.

Limitations: Part II

Part II begins with characterisations of GBV victimisation in a rural community in the western United States where victims share experiences of isolation, limited social support and barriers to accessing services. While

215

similar themes are noted in other chapters, these experiences may not be representative of GBV victims at other locations, not only across the United States but globally. GBV knows no boundaries as Part II includes one of the first studies to determine differences in victimisation between rural and urban areas. The findings are significant for recognising greater levels of violence in rural areas and the tendency that rural victims will not cooperate with criminal justice professionals. Future research is necessary to uncover whether similar patterns are evident, globally.

Part II continues with chapters that evaluate responses of social institutions towards victims of GBV. Media reports of violence towards transgender people include victim-blaming as well as other negative references. This study intended to evaluate differences in reporting between rural versus urban media outlets. Findings indicate rural media outlets often receive news reports from a national affiliate, meaning reports are similar across geographic locations in the United States. A limitation of these findings includes a small sample size and victims only from the United States. Part II ends with responses of religious leaders towards at–risk girls and women who disclose sexual victimisation. Rural communities in the central United States rely heavily on religious leaders to counsel victims, regardless of whether other services are available. Future research that evaluates responses towards GBV victims by media outlets and religious leaders is crucial, not only at different locations across the United States but in global rural communities.

Limitations: Part III

Part III focuses on the access to rural justice and its related policies for service providers, local stakeholders and community members across rural America. Common challenges GBV victims face include poverty, gender inequality, lack of resources and services, informal social support, and lack of legal protection. Because the current text focuses on these relevant issues in the United States, we must acknowledge that other countries, places and rural communities outside the United States face challenges unique to their own sociocultural, political, economic and religious influence that are not well represented in the current text. The current text may be helpful in depicting the intersectionality of victimisation, poverty and other sociopolitical factors as well as the additional challenges and barriers victims face when they seek services in rural communities. Each chapter included in Part III explicitly discussed challenges and policy recommendations specific to the local sociopolitical climate. Thus, discussion and insights drawn from a broad range of perspectives and research conducted worldwide may be beneficial to readers to gain a comprehensive and comparative understanding of the relationship between gender–based violence and rurality.

Index

References in **bold** type refer to tables.

217