

“I suffered in silence and certainly all women are like that” – Silenced: reproduction of, and breaking with, violence against women living in rural areas

1

THEMATIC ARTICLE

Luciane Stochero (<https://orcid.org/0000-0003-0432-2739>)¹

Liana Wernersbach Pinto (<https://orcid.org/0000-0003-1928-9265>)²

Abstract *By way of life stories drawn from 20 interviews of women in two municipalities of Rio Grande do Sul, this qualitative study examined how violence against women living in rural areas is silenced and the challenges involved in breaking that silence. Narrative Analysis arrived at two categories: “I suffered in silence and certainly all women are like that” (Violence silenced) and “We take care of her” (Breaking the silence). The first relates to the oppression of imposed silence and how women were affected by violence and isolation. The second shows the challenges facing women who break the silence and leave abusive relationships and how, through their narratives, to access the stories of other women who suffer violence. The narratives stress that the imposition of silence, which arose from gender roles and constraints on freedom, contributed to their continuing in the abusive relationship. The violence was sustained by the rural setting, where women were even more isolated, alone and unsupported, which heightened their fears, guilt, shame and financial dependence. An inter-sector approach, with more information and care for rural women, is fundamental to addressing this problem.*

Key words *Violence against Women, Gender-based Violence, Rural Areas, Narrative*

¹ Escola Nacional de Saúde Pública Sergio Arouca, Fundação Oswaldo Cruz (Fiocruz). R. Leopoldo Bulhões 1480, Manguinhos. 21041-210 Rio de Janeiro RJ Brasil. luciane.stochero@gmail.com

² Departamento de Estudos sobre Violência e Saúde Jorge Careli, Escola Nacional de Saúde Pública Sergio Arouca, Fiocruz. Rio de Janeiro RJ Brasil.

Introduction

Understanding the problem of violence against women hinges on gender issues, because it is tied to relations of unequal power¹. In this regard, Bandeira² (p.295) writes that “this type of violence has historically concentrated significantly on female bodies; violent relationships exist because asymmetric power relations permeate people’s routine lives”. In that way, the gender violence carried out in women’s daily lives ends up being tolerated and socially accepted, silencing the women involved. Saffioti¹ argues (p.80) “the threat of male aggression hangs over all women’s heads, functioning as a mechanism of subjection to men inscribed into gender relations”.

Feminist movements have played a fundamental role in transposing the issue of violence against women from the private to the public domain, thus helping to extend endeavours to combat it to the political, public health and human rights spheres². With time, the gains that have emerged in Brazil included Special Women’s Police Stations in the 1980s, Houses of Shelter in the 1990s, Notification System for Interpersonal and Self-Inflicted Violence in 2003, Women’s Assistance Centres (Call 180) in 2005, the “*Maria da Penha* Law” in 2006, the Femicide Law in 2015 and other measures and services to assist women. Despite all these advances, it continues to be a challenge for women to break the silence and reach out to assistance services. Souza and Silva³ point out that women generally approach services only in more extreme cases of violence or when they realise that they have reached a limit. Importantly, services still suffer from certain deficiencies, such as care personnel’s lack of knowledge and preparedness to make referrals and deal with situations of violence, underreporting of cases of violence, lack of structure to accommodate women and others⁴.

Addressing specifically violence against women living in rural contexts, Scott *et al.*⁵ drew attention to the dimension of “locality”. They argue that rural contexts, besides their particular characteristics, such as the way of life, of working and relating to the land, also display weaknesses, including lack of access to goods and services, generally located in urban centres. As regards combating violence against women, rural areas are also more deprived of institutions and services, such as police stations, health centres and shelters. Remember that, in smaller towns, institutions specifically to assist women in situations of violence are practically non-existent. Lack of

information, long distances, limited access to transport, dependence on a partner and health personnel untrained to identify and refer cases are factors that contribute to rural women’s continuing to live in situations of violence⁶. In this way, women who live in rural contexts, “where cries for help are barely heard”⁷ (p.63), are relegated to silence and face a life of everyday violence alone.

The systematic silencing of women has extirpated them from history and clothed them in social standards, relegating them to anonymity even in the domestic sphere, which has been designated “their place”⁸. Through orality and their memories, however, women have told their stories and broken the oppressive silence. Del Priore⁹ (p.229) wrote “by evoking private subjectivity, oral history has helped restore women’s political dimension and given political significance to their personal discourse”. Daron¹⁰ (p.2) argued that “we need to put together a set of data search and analysis resources to address the silence” to which rural women have been subjected. In that regard, this study, by way of life stories, examines violence against women living in rural contexts, how they are silenced and the challenges of breaking that silence.

Methodological pathways

This qualitative study was inspired by the Life History Method. Bertaux¹¹ writes that life stories are incomparable as an instrument for accessing subjective experience and their wealth of content is an inexhaustible source of hypotheses. Accordingly, the narrator’s subjectivity can be seen as a “unique, precious” element. What is important is that memory functions not as a passive depository of facts, but rather as an active process of creating meanings^{12,13}. In that regard, the “image of the mosaic is useful in thinking about such a scientific enterprise. Each piece added to a mosaic adds a little to our understanding of the total picture”¹⁴. Becker¹⁴ (p.104) argued that attention to diversity is important, because “different pieces contribute different things to our understanding: some are useful because of their color, others because they make clear the outline of an object”.

The two small municipalities chosen for this study, Bossoroca and São Miguel das Missões, belong to the 12th Regional Health Coordination Area of Rio Grande do Sul (RS). Both have populations of around 7,000, with approximately 48% living in rural areas. These locations were chosen

for the main researcher's proximity to the territory and the key informants. Proximity was an important consideration as, in rural areas, it was necessary to know the roads and have someone accompany you on journeys and mediate with women. The residences in rural areas were from 2 to 45 km from the urban centre, all on dirt roads. The study participants were 29 women over the age of 18, who had lived in rural areas for most of their lives. The study took place in September and October 2022.

To reach the women, we were supported by rural community health workers (CHWs). The women were interviewed in their own homes at times when they were alone. The technique chosen was to interview using a guiding script prepared by the researchers. The interviews lasted an average of 45 minutes, were recorded and later transcribed in full. Of the 29 interviews, 20 were chosen for this article, because of their narratives of violence.

This study applied narrative analysis, understood as a "strategy based on a critical and thoughtful look at the stories and information that emerge from the data production stage. Its purpose is to examine the components of the narrative, especially events, experiences and discourse. The interpretation thus introduces another explanatory and interpretative layer to the narratives"¹⁵ (p.87). This analysis focuses on the interviewee's experience and not the chain of events. The interview transcriptions were read in full and the main elements with similarities across interviews were summarised. The thematic categories observed were organised into 1) "*I suffered in silence and certainly all women are like that*" - *Violence and imposed silence*; 2) "*We take care of her*" - *Breaking the silence*. The first refers to the oppression of imposed silence and how the women have been affected by violence and isolation. The second poses the challenges facing women who break the silence and leave abusive relationships and how their narratives give access to the stories of other women who suffer violence.

To illustrate the narratives, excerpts considered noteworthy are given below. For that purpose, the story fragments were written with an aesthetic in mind, with a view to highlighting the experiences shared in the interviews, since "aesthetics propels and captures sensibilities, subjectivities, discourses and lived experiences, the stories that are hidden, invisible and minimised"¹⁵ (p.103). The excerpts thus give the interviewees' own words, but are more organised aesthetically so as to sustain the main story.

The interview excerpts show participants coded from M1 to M20, with "M" taken from Margarida Maria Alves, a union leader and symbol of resistance and the fight against violence in the countryside and for agrarian reform and rural workers' rights. To silence her, she was murdered, shot in the face on August 12, 1983. However, "they didn't know that Margarida was a seed"¹⁶ and that her death continues to inspire rural women in the fight for their rights and a life free from violence. Other interviewee characteristics (age, race/colour, education, age at marriage, marital status), are organised in Chart 1 in the Results and Discussion section.

The study was submitted to the Research Ethics Committee of the Sergio Arouca National School of Public Health, Fiocruz, and approved on May 9, 2022 (Opinion No. 5.395.759). All study participants signed a declaration of free and informed consent.

Results and discussion

Entering the silence and introducing the Margaridas

Travelling the long dirt roads flanked by fields, forests or crops to the women's houses was like entering a deep silence, now broken by the voices of the narratives, at times firmer, at times emotional and interrupted by pauses and at times in lowered tones, when speaking of the problems that caused them the most suffering. The women who opened the doors of their homes to us sat in the shade in their backyards and kindly shared their lives, stories and experiences, at the same time making their own analyses of past and present. Silva *et al.*¹⁷ describe how the experience of telling a life story offers the teller an opportunity to relive it, to re-signify their life and reconstruct it in a therapeutic direction.

The study participants' ages (Chart 1) were quite varied: two were 30 to 39 years old; four, 40 to 49 years old; nine, 50 to 59 years old; and five, 60 to 78 years old. Twelve declared their race/skin colour to be white and eight, mixed or black. Most (12) were married, half were in their second marriage, five were separated, three were widows and all had children. At marriage, 11 were between 13 and 18 years old, six between 13 and 15 years old, and the others between 19 and 31 years old. Sixteen had not completed, and only one had completed, lower secondary school; two had completed, and one had not completed,

upper secondary school. For own income, nine received a retirement pension or a pension from their husband, seven received government assistance and, of these, three supplemented the assistance with day labour or temporary work. Only one interviewee received a wage, two had not income of their own, but worked with their husbands selling milk and surplus, and another was trying to recover the government family allowance that had been cancelled.

“I suffered in silence and certainly all women are like that” [M20] - Violence and imposed silence

Silence is imposed by oppression, by something that prevents a person from speaking, from expressing themselves, and forces them to hold silent. Solnit¹⁸ (p.17), writes that “silence is the ocean of the unsaid, the unspeakable, the repressed, the erased, the unheard”. Historically, women have been silenced and, Perrot⁸ notes (p.9), “forgotten”, their stories neither narrated nor documented, as if women were outside of events. “Silence is common among women”, she

Chart 1. Characteristics of the rural women interviewed.

Id	Characteristics of the Margaridas (Rural Women)
M1	58 years old, white, married, lower secondary school incomplete, married at 18, has 2 children.
M2	40 years old, brown, completed lower secondary school, married at 14, then separated at 18. Currently married, has 5 children.
M3	46 years old, white, divorced, incomplete upper secondary school, married at 15, then separated at 28. Has 3 children.
M4	54 years old, white, lower secondary school incomplete, married at 18, then separated at 23. Has 5 children.
M5	61 years old, brown, widow, lower secondary school incomplete, married at 15, married 34 years. Has 6 children.
M6	30 years old, white, lower secondary school incomplete, married at 14. Has 3 children.
M7	78 years old, white, widow, lower secondary school incomplete, married at 19, married 38 years. Has 5 children.
M8	60 years old, white, completed lower secondary school, married at 16, then separated 12 years later. Remarried and separated again. Went back to live with her first husband. Has 2 children.
M9	64 years old, white, lower secondary school incomplete, married at 19. Has 2 children.
M10	49 years old, brown, married, lower secondary school incomplete, married at 15, has 2 children.
M11	34 years old, white, completed upper secondary school, married at 19, separated 6 years later. Remarried and currently separated. Has 2 children.
M12	52 years old, black, married, lower secondary school incomplete, married at 13. Has 5 children.
M13	57 years old, brown, lower secondary school incomplete, married at 19, then separated after 5 years, currently married. Has 2 children.
M14	48 years old, white, completed upper secondary school, married at 19 then separated 13 years later. Currently married. Has 2 children.
M15	52 years old, brown, lower secondary school incomplete, married at 14, then was widowed after 28 years married. Remarried and is currently separated. Has 4 children.
M16	53 years old, white, married, lower secondary school incomplete, married at 21, then separated after 21 years married. Has one child.
M17	52 years old, brown, widow, lower secondary school incomplete, married at 16, has been married 32 years. Has 3 children.
M18	69 years old, white, lower secondary school incomplete, married at 18, then separated 40 years later. Has 3 children.
M19	54 years old, brown, married, lower secondary school incomplete, married at 29. Has one child.
M20	58 years old, white, lower secondary school incomplete, married at 31, then separated 20 years later. Has 3 children.

Source: Authors.

writes, because it is tied up with their secondary, subordinate position. In that respect, Beauvoir¹⁹ refers to women as the “Other”, that is, with men defined as the absolute, essential subject and women as non-essential, “the second sex”. If women are not part of the essential world, then their stories need not be told or heard and, if heard, do not warrant due attention. In this way, their words are deprived of legitimacy and not taken seriously.

The gender roles deep-rooted in society have granted men primacy and power, affording them approval and tolerance to punish whatever appeared to them to be deviations and transgressed the behaviour culturally expected of women¹. This has tended to naturalise and disguise the most diverse forms of violence practiced against women:

At first, when we were going out together, I didn't notice, you know. I always liked my hair up, and he would come and let it down, saying he liked women with their hair down, and I allowed that. I thought that's how it was. Then, when we got married, at first it wasn't violence against me, it was rudeness, a lack of affection. The violence as such, that came later [M14].

Looking at her past, this interviewee was able to perceive how subtly the violence began; in other words, with her then boyfriend's interfering in how she presented herself, based on his taste and preference for loose, “more feminine” hair. The fact that she “thought that was the way it was” underlines the woman's submissive role. At first, violence may be veiled, so that the woman does not realise what is going on. At the same time, she starts to feel she cannot “please” her partner enough, besides feeling guilt for not achieving what is expected of her²⁰. Another salient aspect is his “rudeness and lack of affection” once they were married. These attitudes can be interpreted as psychological violence, which happens surreptitiously and silently, without the woman herself realising it: as the interviewee herself said, “*at first it wasn't violence as such*”. In this way, a woman's self-esteem is undermined, leaving her insecure and keeping her role submissive. Accordingly, other attacks emerge^{21,22}. Moreover, these situations cause feelings of loneliness and abandonment. Nader²⁰ explains that the subtle violence of loneliness is difficult to identify as a form of abuse, because it leaves no marks on the body and takes place over time.

In that connection, another factor that contributes to loneliness is restricted freedom. Seven women described a lack of freedom in their re-

lationships. For instance, they were not allowed to spend time with their families: “*I couldn't see my brothers, who lived four kilometres away, and I couldn't even see my family*” [M20]. Other situations, such as needing the husband's consent to visit her own mother, to go to health appointments, to the hospital to take care of a relative; only being able to participate in social activities accompanied by him or, when she needed to go alone, the husband would go to check that she was really there. “Alone”, that expression appeared often during the interviews: being alone because they were isolated from family and friends and because they felt weakened and humiliated:

I married very young. I was 14 and he was 33 and I just wanted to have a home of my own. I wanted to stop being beaten and watching my mother being beaten. But after a year the same thing started with my husband... First he forbid me from seeing my family. [...] I was very afraid because he attacked me a lot, threatened me a lot. I was a very humiliated person, alone, with no family. My brothers were a long way away and I didn't talk to my mother; he stopped me [M2].

That excerpt shows several things: first, her teenage marriage to a man more than twice her age, because of her wanting “a home” without violence. Early marriage is often motivated by the young woman's desire to have more freedom to go out, to have fun or even to have a better life free from violence or poverty. What happens, though, is the opposite. The teenager generally gets pregnant and stops going to school. As a result, she is less likely to have a formal job and becomes financially dependent on her partner, is relegated to housework and subjected to violence. Early marriage can also be regarded as violence²³. Secondly, prohibition on seeing the family isolates her, highlighting the abusive relationship and demarcating a power to limit what relationships and space she can enjoy and frequent. Kipnis²⁴ placed the absence of support networks and feelings of loneliness among the consequences of isolation that work to maintain women in situations of violence. She observes that social isolation, in addition to being the first step towards other forms of violence, can itself be a form of aggression against women; for example, when they are prevented from visiting family and friends or from working outside the home.

From this perspective, Solnit¹⁸ (p.19) saw violence as a way of silencing: “a husband hits his wife to silence her”. She also notes that women are silenced when their wishes are not respected, as in partner sexual violence, when their words

or statements are devalued and delegitimised and when they are interrupted during conversation, humiliated, belittled:

It took ten years. He said 'that pain in your chest is from not working'. He never let me go to the doctor and what I have is a heart problem. [...] I was pregnant and didn't know it. I worked hard and ended up having two miscarriages. My uterus was removed during the second abortion. He didn't go with me to the hospital and, even when I got home he disrespected me [M20].

This painful account tells not only of the husband's neglect of his wife's health care by denying the symptoms of illness and not even accompanying her to the health centre, but his disregard for her post-surgical recovery by forcing her to have sexual intercourse. Saffioti²⁵ (p.18) argued that "the extreme case of the use of power in male-female relationships can be characterised by rape. Against to the woman's wishes, the man has sexual relations with her, thus proving his ability to submit the other party". In this way, male power is reinforced by his enforcing his will over any situation. During the study, only two women spoke spontaneously about sexual violence, which may be because it is an extremely intimate matter or even culturally regarded as a woman's "conjugal duty" towards her husband and not perceived as violence²⁶. Another aspect of this statement that should be considered is the dimension of "locality", mentioned previously by Scott *et al.*⁷. A woman living in a rural area far from the urban centre and neighbours may be retrained from leaving the house, even for a healthcare appointment. Lack of public or private transport increases dependence on the husband, who is generally the one with a driver's license, or on neighbours' help to get around^{27,28}.

Silencing causes women to continue in abusive relationships, because besides feeling alone and isolated, they are uncomfortable talking about the subject with other people: "*The truth is, no one opens up, says what's happening. Even today they don't open up, they still don't talk about it. It's hard for someone to open up and say my husband beat me up, he swore at me*" [M18]. Nader²⁰ reports that it is common for women to hide situations of violence they experience from their families and other people close to them. This is partly because they harbour ambivalent feelings towards their partner, as well as self-blame and shame. There may be two other aspects – religious and moral – to this difficulty in "opening up" and speaking out. Schmitz²⁹, who interviewed rural women in a region of settlers of German stock,

found a religious influence educating women to be good mothers and obedient wives, not to complain about overwork, to be submissive to their husbands and ask permission for everything. This made them "suffer in silence" to safeguard the family honour and morals, making the women feel responsible for the family unit at whatever cost: "*now, the family we won't change, no matter how bad it is*" [M12].

It is also significant that three of the interviewees were widows whose life stories tell of enduring and "seeing it out to the end" beside their partners, as in this excerpt:

He passed away when he was 54, but I put up with everything, always respected him, down to the last hour of his life. Back at that time we were ashamed to separate. I was raised in that system where you only married once. Now I'm here with my daughter and I feel like a different kind of person. I have my freedom. I can go out. Because before I couldn't even visit my child [M5].

Here one can see the influence of a strict education that influences women to stay on in relationships for "shame of separating" and dishonour. It was only widowhood that brought her "freedom". Motta³⁰ one aspect of widows is that they emerge from the subordinate role they lived during marriage, aggravated by situations of violence, poverty and privation of a family or social life. They thus find a certain "relief" and are able to resume their lives and experience of fun, work and independence anew.

"We take care of her" - Breaking the silence

Breaking the silence is a bold, courageous act, because the woman is breaking with everything that patriarchal society has imposed on her as normal. Participants said that continuing in the relationship was connected with financial dependence, having nowhere to go, fear, protecting their children, shame, fear of being judged and criticised, self-blame, thinking their husband would change and having received a religious and moralistic education. There is a limit to everything, though, and "*there comes a point where no honour is worth the price*" [M13]. Women who broke off abusive relationships identified the main challenges in the separation process as being how to maintain themselves financially and threats from their former husband. Three filed complaints with the police requesting protective measures, which took them away from their former husbands and therefore made them feel safer:

He started pestering me, getting at me and saying he was going to kill me. So I told the police. He mistreated the children. I wouldn't let him and then he left. But after he left, he never bothered me again. But I also have a protective order against him. You can't make it easy [M4].

Of the women who had applied for protective orders, none had access to public transport – so much so that they had to walk or hitchhike into town: “I couldn't take it anymore. I hitchhiked and went in to do what I had to do [apply for a protective order], because there's no bus here, you depend on getting a ride” [M15]. “Hitchhiking” highlights their dependence on someone else's “goodwill” and the difficulty of getting from their home into town. Ultimately, these factors often prevent women from asking for help, filing a complaint and applying for a protective order, or they delay the process, leaving them exposed to violence and the risk of femicide³¹.

Another important concern among the interviewees was how to support themselves financially, especially because they have children who will remain with them. Some at first depended on support from their families and government benefits, such as the family allowance program and sickness benefit until, with time, they managed to get back on their feet. Some moved for a while to work as domestics in town. Others stayed on their rural properties and, with the help of children or siblings, supported themselves by selling milk or other produce, or found employment on nearby rural properties. Women who lived three to four kilometres from town found it easier to get jobs as dailies or domestics, even with no means of transport, by walking in on dirt roads, notwithstanding the intense heat, dust, cold, rain and mud. Financial autonomy “thus entails not only involve financial independence and income generation, but also presupposes autonomy to make choices”³² and even functions as an auxiliary mechanism in breaking off the violent relationship. It is thus essential to have public financial aid policies for women who have left abusive relationships, as well as offering professional qualification and placement on the job market³³. Also essential are measures specifically for rural women, such as courses in managing their properties, to strengthen family farming, financing, selling their produce and so on, so that they can stay on in the rural area and are not forced to migrate to the town, leaving their culture and way of life.

Support came not just from family, but from neighbours and health personnel:

A close friend and neighbour said to me, “why don't you go to a doctor, woman?!” So I went. The doctor referred me to a psychologist, who told me: “your case is serious, you are in the last stage of depression and anxiety”, so then I brought up the business of my husband. But my husband prohibited me from seeing a psychologist to help me. Then my sister got involved, because I had a really bad crisis and I ended up in hospital. [...] So I went to the psychologist, talked to her and asked what I could do [about the abusive relationship] [M2].

Only one interviewee had spoken to a doctor and psychologist and two others had support from CHWs. Now, over the years the women suffered violence, at some point, they must have seen health professional or been visited by CHWs. Could something more not have been done for them through health services? In their studies on combating violence against rural women, Arboit *et al.*³⁴ found that CHWs lacked the qualifications and multi-professional and inter-sector support necessary to respond effectively to the violence-related demands of rural women. Costa *et al.*³⁵ observed that personnel of the Family Health Strategy (ESF) felt they lacked the skills required to act in both recognising and addressing situations of violence against rural women. The silence thus also pervades institutions that should offer help, but are not fully capable of performing their role in combating violence. Meanwhile, the women are submerged in silence, which ultimately is also a form of communication.

Some women who participated in the study did not talk about their experiences of violence, but their stories emerged during interviews with other women with whom their lives intersected:

I know her and I know that she's having conflicts. I don't know if she told you, but she does. She's very depressed. She suffers conflict with her husband. She's left home before now and ended up next door, at my daughter's, her sister-in-law's, house. It's about 12 kilometres from her house to here. She comes to get away from him. We look after her [M8].

There is an African proverb, “Silence is also a way of speaking”. From that, these women can be seen to be subjugated and silenced, their silence a cry for help for their very life.

Memory brings up a confluence of past and present, individuality and collectivity. Tedeschi³⁶ (p.356) argued that “although personal memories are unique and unrepeatable, a person never remembers alone, they are always immersed in a collective order that contains them”. Accordingly, when narrating their own stories permeated with

violence, they are also telling the stories of other women, thus breaking the silence collectively.

As rightly expressed by Soares³⁷, “we are not giving these women a voice; they have always had a voice, but they have not always been heard, because they have been systematically silenced”. In this way, telling their own stories becomes a political act, as described by Ricoeur³⁸, the experience as experienced, as lived, remains private, but from the moment the experience is shared and information is transferred its sense, its meaning becomes public. Orality is one of the ways to make ordinary women’s stories visible. Perrot⁸ argued that women mobilise their memories when telling their stories, because “women’s memory is a verb” and is intimately linked to the orality of traditional societies through the storyteller’s mission. The life history method’s potential to bring to light experiences of violence in the interviewees lives is thus plain to see. It encouraged them to break the silence in which they lived or had once lived in their relationships, to revisit their memories and conduct their own analyses, enabling them to give new meaning to what they had experienced. Most of them no longer lived in violent relationships, but remember that experiences of violence and their effects persisted in their lives in different ways: “*It is a lifelong process*” [M14].

Final remarks

I was happy to be able to help you and help other women who might try to go on, change or improve, right? And I’m very grateful! Even when my good friend called me asking if I agreed to participate, I said, It will be a pleasure to give an interview, because it would never occur to me, you know, to describe the realities of our lives like this [M2].

Telling their own stories is an opportunity to revisit their memories and give new meanings to what they have experienced. By sharing them, the women made public their trajectories and resistance to all they had experienced. Breaking the silence is no simple task. The women who agreed to take part in the study and tell their stories infused with the violence they suffered did not speak for themselves alone, but for a group of women: their mothers, grandmothers, sisters-in-law, friends, neighbours, relatives and even oth-

ers unknown to them, but represented in their declarations. Ultimately, all of us are responsible for helping to break the silence. Attentive, respectful listening during care at health and assistance facilities, training for managers and staffs, stronger public policies for women living in rural areas, research on the issue, discussion of the issue in academic settings and so on are all ways of addressing and exposing this problem.

These women were subjected to the most diverse kinds of violence observed in the course of this article, “Gender violence, including its family and domestic forms, does not occur randomly, but derives from a social organisation of gender, which privileges the male”¹ (p.85). Moreover, the study observed that the violence found support in the rural context itself, in the form of long distances and difficult travel, which left women even more isolated and lonely, accentuating their fears, guilt and shame. There was also a lack of witnesses, contributing to the women’s not being seen or heard when asking for help. The women were also seen to find support to the extent that they spoke to people they trusted and sought to escape their violent situation. Support came from family, neighbours and health personnel, especially when they were going through difficult times. This is an important consideration and one that could be more present in women’s lives. What does one do so that they do not feel alone? How does one reach them and make them feel understood and safeguarded? If the patriarchal culture that silences them is still present in their families and calls for long-term awareness building, then short-term measures are needed, because the women who suffer violence cannot wait. In this regard, there is an urgent need for inter-sector work between the health sector and unions, movements, social assistance and police, which can make a difference for women in guaranteeing them safety, health, financial and legal assistance and, most importantly, their very lives.

It is thus essential that women living in rural areas receive more information, so that they know their rights, know where to turn and who to count on when they need to. It is hoped that this article can help break the silence on the issue of violence against rural women and thus encourage other studies, which are still scarce, in order to strengthen the discussion and combat violence against this public.

Collaborations

L Stochero was responsible for the study conception, analysis and writing of the manuscript. LW Pinto was responsible for review of the analysis and critical review of the manuscript.

Funding

Fundação Carlos Chagas Filho de Amparo à Pesquisa do Estado do Rio de Janeiro (FAPERJ).

References

1. Saffioti H. *Gênero, Patriarcado, violência*. 2ª ed. São Paulo: Expressão Popular, Fundação Perseu Abramo; 2015.
2. Bandeira LM. Violência de gênero: a construção de um campo teórico e de investigação. In: Hollanda HB, organizador. *Pensamento feminista brasileiro: formação e contexto*. Rio de Janeiro: Bazar do Tempo; 2019. p. 293-314.
3. Souza MB, Silva MFS. Estratégias de enfrentamento de mulheres vítimas de violência doméstica: uma revisão da literatura brasileira. *Pensando Fam* 2019; 23(1):153-166.
4. Santos JDLB, Santos CVM. Considerações sobre a rede de enfrentamento à violência contra as mulheres. *Rev Contexto Saude* 2020; 20(40):139-148.
5. Scott P, Nascimento FS, Cordeiro R, Nanes G. Networks for facing violence against women in sertao of pernambuco. *Rev Estud Fem* 2016; 24(3):851-870.
6. Costa MC, Silva EB, Soares JDSE, Borth LC, Honnelf F. Mulheres rurais e situações de violência: fatores que limitam o acesso e a acessibilidade à rede de atenção à saúde. *Rev Gaucha Enferm* 2017; 38(2):e59553.
7. Scott P, Rodrigues AC, Saraiva JC. Onde mal se ouvem os gritos de socorro: notas sobre a violência contra a mulher em contextos rurais. In: Scott P, Cordeiro R, Menezes M, organizadores. *Gênero e geração em contextos rurais*. Ilha de Santa Catarina: Editora Mulheres; 2010. p. 63-93.
8. Perrot M. *As Mulheres ou os Silêncios da História*. Bauru: EDUSC; 2005.
9. Del Priore M. História das mulheres: as vozes do silêncio. In: Freitas MC, organizador. *Historiografia brasileira em perspectiva*. 4ª ed. São Paulo: Contexto; 2001. p. 217-235.
10. Daron VLP. *Um grito lilás: cartografia da violência às mulheres do campo e da floresta*. Brasília: Secretaria de Políticas para as Mulheres; 2009.
11. Bertaux D. La perspectiva biográfica: validez metodológica y potencialidades. *Cahiers Int Sociol* 1980; 69:197-225.
12. Fraser R. La Historia Oral como historia desde abajo. *Ayer* 1993; 12:79-92.
13. Portelli A, Ribeiro TMTJ, Fenelón RTDR. O que faz a história oral diferente. *Revph* 1997; 14:25-39.
14. Becker HS. A história de vida e o mosaico científico. In: Becker HS. *Métodos de pesquisa em ciências sociais*. São Paulo: Hucitec; 1993. p. 101-115.
15. Cecon RF, Garcia-Jr CAS, Dallmann JMA, Portes VM. *Narrativas em Saúde Coletiva: memória, método e discurso*. Rio de Janeiro: Fiocruz; 2022.
16. Barack F. *Eles não sabiam que Margarida era semente e se espalharia por todo o Brasil* [Internet]. FETAG-PB; 2018 [acessado 2023 mar 15]. Disponível em: <https://www.fetagpb.org.br/2018/08/10/eles-nao-sabiam-que-margarida-era-semente-e-se-espalharia-por-todo-o-brasil/>.
17. Silva AP, Barros CR, Nogueira MLM, Barros VA. “Conte-me sua história”: reflexões sobre o método de História de Vida. *Mosaico* 2007; 1(1):25-35.
18. Solnit R. *A mãe de todas as perguntas: reflexões sobre os novos feminismos*. São Paulo: Companhia das Letras; 2017.
19. Beauvoir S. *O segundo sexo: fatos e mitos*. Vol. 1. 5ª ed. Rio de Janeiro: Nova Fronteira; 2019.

20. Nader MB. Violência sutil contra a mulher no ambiente doméstico: uma nova abordagem de um velho fenômeno. In: Silva GV, Nader MB, Franco SP, organizadores. *História, mulher e poder*. Vitória: Edufes; 2006. p. 235-252.
21. Clark LM, Silva LFI, Andrade RD. Violência psicológica contra a mulher. *Eixos Tech* 2018; 5:1-19.
22. Gomes R, Minayo MCS, Silva CFR. Violência contra a mulher: uma questão transnacional e transcultural das relações de gênero. In: Brasil. Ministério da Saúde (MS). *Impacto da violência na saúde dos brasileiros*. Brasília: MS; 2005.
23. Taylor A, Lauro G, Segundo M, Greene ME. "Ela vai no meu barco." *Casamento na infância e adolescência no Brasil. Resultados de Pesquisa de Método Misto*. Rio de Janeiro, Washington, D.C.: Instituto Promundo, Promundo-US; 2015.
24. Kipnis BJ. *Mulheres em situação de violência em áreas rurais* [dissertação]. São Paulo: Fundação Getúlio Vargas; 2018.
25. Saffioti H. *O poder do macho*. São Paulo: Moderna; 1987.
26. Sousa RF. Cultura do estupro - a prática implícita de incitação à violência sexual contra mulheres. *Rev Estud Fem* 2017; 25(1):9-29.
27. Bueno ALM, Lopes MJM. Rural women and violence: Readings of a reality that approaches fiction. *Ambient Soc* 2018; 21:e01511.
28. Honnef F, Costa MC, Arboit J, Silva EB, Marques KA. Social representations of domestic violence against women and men in the rural settings. *Acta Paul Enferm* 2017; 30(4):368-374.
29. Schmitz AM. Mulheres camponesas de Itapiranga e a invisibilidade da violência. *Grifos* 2013; 22(34/35): 195-213.
30. Motta AB. Viúvas: o mistério da ausência. *Estud Interdiscip Envelhec* 2005; 7:7-24.
31. Grossi PK, Grossi ML, Gasparotto G, Vieira MS, Coutinho ARC. Violence against rural women in Rio Grande do Sul, Brazil: challenges for public policies. *ESJ* 2014; 1(10):295-310.
32. Entidade das Nações Unidas para a Igualdade de Gênero e o Empoderamento das Mulheres (ONU MULHERES). *Gênero e Autonomia Econômica para as Mulheres. Caderno de Formação*. Brasília: Secretaria Especial de Políticas para as Mulheres; 2016.
33. Piciula LN, Pavarina AF, Morong FF. Aspecto financeiro diante da violência doméstica: como fator de risco e característica emancipadora da mulher. *Colloquium Socialis* 2021; 5(3):45-58.
34. Arboit J, Costa MC, Silva EB, Colomé ICS, Prestes M. Domestic violence against rural women: Care practices developed by community health workers. *Saude Soc* 2018; 27(2):506-517.
35. Costa MC, Silva EB, Arboit J, Honnef F, Marques KA, Barbieri J, Silva, DM. Violência doméstica contra a mulher em contexto rural: reconhecimento das estratégias de atenção. *Rev Bras Promoc Saude* 2019; 32:9271.
36. Tedeschi LA. Os lugares da História Oral e da Memória nos Estudos de Gênero. *OPSIS* 2015; 15(2):330-343.
37. Borges GS, Soares PHE. *Mulheres (in)visíveis: A opressão e a luta das mulheres do campo de São Lourenço do Sul* [Internet]. 2021 [acessado 2023 mar 15]. Disponível em: <https://www.youtube.com/watch?v=UsOKRrcFA-A>
38. Ricoeur P. *Teoria da Interpretação: o discurso e o excesso de significação*. Lisboa: Edições 70; 1976.

Article submitted 04/11/2023

Approved 01/02/2024

Final version submitted 17/02/2024

Chief editors: Maria Cecília de Souza Minayo, Romeu Gomes, Antônio Augusto Moura da Silva