

BEYOND PROTECTION: A CRITICAL FEMINIST ANALYSIS OF VIOLENCE AGAINST WOMEN SERVICE GOVERNANCE IN RURAL INDONESIA

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ABSTRACT

Violence against women remains a pervasive global crisis requiring effective institutional responses, yet conventional public service approaches often fail to address the structural power relations that perpetuate such violence. This study examines service governance for violence against women in a rural Indonesian district, applying critical feminist analysis to interrogate whether state-provided protection services challenge or reproduce patriarchal structures. Employing qualitative methodology with in-depth interviews, participant observation, and document analysis across multiple stakeholders—government agencies, law enforcement, healthcare providers, civil society organizations, and survivors—the research evaluates service quality through five dimensions: tangibles, reliability, responsiveness, assurance, and empathy. Findings reveal a fundamental paradox: while institutions provide crisis intervention, they simultaneously perpetuate gender inequality through absent standardized protocols, differential treatment favoring certain violence types over others, and reconciliation mechanisms that prioritize family preservation over survivor safety. Sexual violence cases consistently receive legal prosecution, whereas domestic violence is channeled toward mediation despite power imbalances and recidivism risks. This differential treatment creates conditional protection regimes that privilege institutional convenience over survivor autonomy. The absence of dedicated psychological services, written operating procedures, and comprehensive risk assessment protocols further undermines service credibility. Critical feminist analysis exposes how ostensibly neutral bureaucratic processes embed patriarchal assumptions about women's roles, agency, and deservingness of protection. The study demonstrates that service quality deficiencies represent not merely technical or resource failures but ideological manifestations of deeply rooted power relations. Meaningful transformation requires moving beyond capacity-building toward fundamental restructuring of institutional cultures, accountability mechanisms, and inter-agency coordination guided by survivor-centered, rights-based feminist principles. The findings challenge public administration assumptions of bureaucratic neutrality, contributing to scholarship on feminist governance, violence against women service delivery, and state responses to gender-based violence in rural contexts across the Global South

Keywords: violence against women, service governance, gender-based violence, feminist analysis, public service quality

INTRODUCTION

Violence against women (VAW) represents one of the most pervasive human rights violations globally, transcending geographical, cultural, and socioeconomic boundaries. Contemporary scholarship increasingly recognizes VAW not merely as isolated criminal acts, but as a manifestation of deeply embedded structural inequalities, patriarchal power relations, and systemic gender discrimination (Webster et al., 2021). The World Health Organization estimates that approximately one in three women worldwide experience physical or sexual violence during their lifetime, with the majority of cases perpetrated by intimate partners (Sardinha et al., 2022). This phenomenon reflects what feminist scholars have long argued: violence against women is fundamentally political, rooted in unequal power structures that systematically subordinate women across social, economic, and political spheres (Bardall, 2020).

Indonesia, as a signatory to the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) since 1984, has demonstrated progressive legislative commitment to addressing gender-based violence through various national frameworks. The ratification of CEDAW through Law No. 7 of 1984, followed by the enactment of Law No. 23 of 2004 on the Elimination of Domestic Violence and the groundbreaking Law No. 12 of 2022 on Sexual Violence Crimes, represents significant milestones in Indonesia's legal architecture (Mutiara & Lubis, 2024). These legislative developments align with global movements recognizing VAW as both a public health crisis and a barrier to sustainable development, as articulated in the United Nations Sustainable Development Goals, particularly SDG 5 on gender equality (Wulandari et al 2025; Afrianty 2020). However, the translation of legal frameworks into effective institutional

responses remains a critical challenge, particularly in rural and peripheral regions where patriarchal norms persist most strongly (Julius 2025; Chigbu, 2019)

The magnitude of VAW in Indonesia reveals disturbing patterns that demand urgent attention. National data indicates a persistent crisis, with systematic underreporting masking the true scope of violence experienced by women.

Table 1. Violence against Women Cases in Indonesia and South Sulawesi (2020-2024)

| Year | Indonesia Total Cases | Total Victims | Women Victims | South Sulawesi Total Cases | Women Victims (South Sulawesi) | Percentage Women Victims |
|------|-----------------------|---------------|---------------|----------------------------|--------------------------------|--------------------------|
| 2020 | 29,315 | 24,867 | 21,189 | 1,287 | 1,045 | 81.2% |
| 2021 | 25,781 | 22,356 | 18,924 | 1,156 | 934 | 80.8% |
| 2022 | 32,488 | 28,127 | 24,513 | 1,398 | 1,123 | 80.3% |
| 2023 | 35,621 | 30,945 | 27,134 | 1,521 | 1,234 | 81.1% |
| 2024 | 31,947 | 27,658 | 24,156 | 1,484 | 1,197 | 80.7% |

Source: SIMFONI-PPA, Ministry of Women Empowerment and Child Protection (2024)

As illustrated in Table 1, South Sulawesi Province consistently ranks among the regions with the highest incidence of VAW outside Java Island, with women comprising approximately 80% of all violence victims throughout the five-year period. These official statistics, however, represent merely the "tip of the iceberg"—the iceberg phenomenon documented extensively in VAW literature, where actual prevalence far exceeds reported cases due to cultural barriers, social stigma, economic dependency, and institutional distrust (Fielding-Singh et al., 2020; Mshweshwe, 2020). Research indicates that for every reported case of VAW in Indonesia, an estimated three to five cases remain unreported, particularly in rural contexts where traditional patriarchal structures maintain stronger influence over women's lives and choices (Yusuf 2023; Hamdy & Hudri 2022).

Luwu Regency in South Sulawesi Province exemplifies the complex intersection of cultural tradition, socioeconomic marginalization, and gender-based violence characteristic of rural Indonesian contexts. With its diverse ethnic composition, strong adherence to customary law (adat), and persistent patriarchal family structures, Luwu presents unique challenges for VAW intervention (Salamor et al., 2025). Data from the District Women Empowerment and Child Protection Office reveals fluctuating patterns: 53 cases in 2020, declining sharply to 25 in 2021, rising to 39 in 2022, peaking at 54 in 2023, and declining to 36 in 2024. These fluctuations likely reflect not actual prevalence changes, but variations in reporting mechanisms, institutional capacity, and community awareness—underscoring the unreliability of administrative data as accurate prevalence measures (Mubaiwa, 2022). Cultural norms in Luwu emphasize family harmony (rukun) above individual rights, creating powerful disincentives for women to report violence perpetrated by intimate partners or family members, as doing so risks social ostracism, economic vulnerability, and being blamed for "destroying family unity" (Hajar, 2025).

In response to constitutional obligations to protect citizens' rights and ensure safety, the Luwu Regency Government established the Technical Implementation Unit for Women and Child Protection (UPT PPA) as the frontline institutional mechanism for addressing gender-based violence. Operating under the regulatory framework of Minister of Women Empowerment and Child Protection Regulation No. 4 of 2018, UPT PPA embodies the state's commitment to providing comprehensive services including intake and assessment, case management, legal accompaniment, psychological counseling, temporary shelter, and social reintegration (Rostini, et al., 2023). The service delivery model, as visualized in official procedural guidelines, presents a seemingly rational, linear pathway: complaint reception (through multiple channels) → case assessment and disposition → intervention planning → implementation (legal, psychological, shelter services) → social reintegration. This bureaucratic architecture projects an image of systematic, comprehensive, and survivor-centered response that aligns with international best practices for VAW service provision (Ellsberg et al., 2015). Despite the apparent comprehensiveness of institutional mechanisms, critical scholarship increasingly questions whether bureaucratic service models adequately address the structural roots of gender-based violence or inadvertently perpetuate harmful power dynamics (Bumiller, 2020). Several problematic dimensions emerge upon closer examination. First, the bureaucratization of trauma: linear service pathways risk reducing survivors' complex, multidimensional experiences into administrative "cases" processed through standardized procedures, potentially stripping survivors of agency and transforming them from subjects with autonomy into objects of bureaucratic intervention (Crenshaw et al., 2020). Second, the myth of reintegration: returning survivors to communities and family structures that maintain patriarchal values and may have enabled violence in the first place, without parallel efforts to transform those structures, risks re-victimization and perpetuates cycles of violence (Htun & Jensenius, 2020). Third, co-optation by gender-biased legal systems: despite legal accompaniment services, Indonesia's criminal justice system has been extensively documented as exhibiting gender bias, victim-blaming attitudes, and procedures that constitute secondary victimization (Rinaldo, 2020). Fourth, the individualization of structural problems: emphasis on psychological counseling and individual trauma recovery, while crucial, may inadvertently depoliticize VAW by framing it as a personal mental health issue rather than addressing the patriarchal structures that produce and normalize such violence.

Critical feminist theory provides essential analytical tools for interrogating ostensibly neutral bureaucratic structures and revealing hidden power relations embedded within institutional practices. Unlike liberal feminist approaches that focus primarily on equal access to existing systems, critical feminism fundamentally questions whether those systems themselves are constructed in ways that perpetuate gender subordination (Walby et al., 2017). This perspective insists that institutional responses to VAW must be examined not merely for their procedural efficiency, but for how they may reproduce patriarchal assumptions about women's roles, agency, and needs (Fraser, 2013). Critical feminism's central insight—"the personal is political"—demands that we understand VAW not as individual pathology or family dysfunction, but as a systematic manifestation of gendered power structures operating across intimate, institutional, and societal levels (Htun & Jensenius, 2020). Furthermore, intersectional feminist approaches remind us that women's experiences of violence and access to services are mediated by multiple, intersecting systems of oppression including class, ethnicity, disability status, and geographic location—requiring service governance that acknowledges and responds to this heterogeneity (Crenshaw et al., 2020; Mahajan et al., 2021).

While substantial research exists on VAW prevalence and institutional responses in Indonesia, critical gaps remain. Previous studies have primarily focused on either (1) documenting VAW prevalence or forms (Nuraeni, 2021; Assidiq et al., 2023), or (2) evaluating service delivery effectiveness through conventional public administration frameworks that assume neutrality of bureaucratic structures (Syahribulan et al., 2022; Baharuddin et al., 2023). However, these approaches typically accept existing institutional frameworks as given, without interrogating the power relations, ideological assumptions, and potential for structural reproduction embedded within service governance itself. Notably absent is critical feminist analysis that deconstructs how service delivery mechanisms may simultaneously provide individual assistance while inadvertently perpetuating the patriarchal structures that generate VAW.

This study addresses this gap by applying critical feminist theory to examine VAW service governance in rural Indonesia, specifically Luwu Regency. The research objectives are threefold: (1) to critically analyze how power relations operate within and through the UPT PPA service delivery system, including examining whose voices are centered, whose knowledge is privileged, and where survivor agency may be constrained; (2) to deconstruct the ideological assumptions underlying bureaucratic procedures, particularly examining how concepts like "case management," "assessment," and "reintegration" may reflect and reinforce patriarchal norms; and (3) to identify transformative possibilities for reconfiguring service governance toward genuinely feminist, survivor-centered approaches that address structural rather than merely individual dimensions of VAW. By centering critical feminist analysis, this research moves beyond technical evaluation to fundamental questioning of whether and how state responses to VAW can contribute to dismantling, rather than reproducing, the gender hierarchies that produce violence against women..

METHODOLOGY

This study employs a qualitative descriptive approach grounded in critical feminist epistemology to examine the governance of VAW services in Luwu Regency, South Sulawesi, Indonesia. The research design follows Creswell's (2014) framework for investigating complex social phenomena, focusing on three interconnected dimensions: (1) how public service governance practices operate in VAW response systems, (2) how power relations function within service delivery processes, and (3) how critical feminist perspectives can reveal and catalyze transformative change toward survivor-centered services. Data collection involved purposive sampling of key stakeholders across the service delivery ecosystem, including officials from the District Women Empowerment and Child Protection Office (DP3A) as the lead coordinating agency, Luwu Police Resort (Polres) representing law enforcement, the Technical Implementation Unit for Integrated Service Center (UPTD P2TP2A), District Health Office for medical services, civil society organizations (CSOs), and most critically, survivors who accessed these services. Primary data were gathered through in-depth semi-structured interviews with 15-20 key informants, supplemented by non-participant observation of service delivery processes and critical document analysis of policy frameworks, standard operating procedures, case management records (with appropriate ethical protocols), and institutional reports covering 2020-2024. Data analysis followed Miles and Huberman's (1994) three-stage iterative process: (1) data reduction through systematic coding and identification of themes aligned with critical feminist theoretical constructs including power relations, agency, institutional discourse, and structural barriers; (2) data display through narrative synthesis and thematic matrices that illuminate patterns of governance practices and their gendered implications; and (3) conclusion drawing through constant comparative analysis and theoretical interpretation that connects empirical findings to broader critical feminist scholarship on state responses to VAW. To ensure rigor and trustworthiness, the study employed multiple validation strategies: triangulation across data sources (interviews, observations, documents), methods (qualitative interviews with different stakeholder groups), and theoretical perspectives (integrating governance theory with critical feminist analysis); member checking whereby preliminary findings were shared with selected participants to verify interpretive accuracy; and reflexivity practices.

RESULTS AND DISCUSSION

Tangibles: The Material Infrastructure of Protection

The tangible dimension of service quality at UPT PPA Luwu Regency reveals significant infrastructural deficiencies that fundamentally undermine service credibility and accessibility. The absence of standardized operating procedures (SOPs) represents a critical systemic gap, with the unit operating without documented service protocols despite being mandated to provide comprehensive protection services. This procedural vacuum extends to human resource capacity, most notably the complete absence of dedicated psychological counseling personnel at the district level. Survivors requiring trauma counseling must be referred to provincial-level services, creating additional bureaucratic layers, extending waiting times, and imposing financial burdens on already vulnerable individuals. The physical service environment, while nominally designated as a protection unit, lacks specialized facilities such as child-friendly interview rooms, private counseling spaces, or temporary safe accommodations—essential elements for trauma-informed service delivery. These material deficiencies are compounded by limited accessibility for persons with disabilities and inadequate provision of informational materials in formats comprehensible to diverse literacy levels and linguistic backgrounds.

From Zeithaml et al.'s (1996) framework, tangibles serve as the primary cues through which service users evaluate institutional commitment and service credibility, particularly in high-stakes contexts where intangible service quality is difficult to assess *ex ante*. The infrastructural gaps observed at UPT PPA Luwu directly contradict the SERVQUAL model's emphasis on tangibles as foundational to service expectations and perceptions. When physical evidence of service capability is absent or inadequate, survivors face heightened uncertainty regarding whether the institution possesses the capacity to deliver promised protection—a particularly consequential assessment when personal safety is at stake. Recent scholarship emphasizes that inadequate physical infrastructure in VAW services not only reflects resource constraints but constitutes a form of symbolic violence, communicating to survivors that their trauma merits insufficient societal investment (Goodmark, 2018; Rackley et al., 2020). The absence of SOPs particularly contradicts evidence-based practice in trauma-informed care, which requires standardized protocols to ensure consistency, prevent re-traumatization, and protect survivors from arbitrary treatment varying by individual staff discretion (Substance Abuse and Mental Health Services Administration, 2022). Establish comprehensive, written SOPs aligned with trauma-informed care principles and invest in dedicated psychological counseling personnel at the district level, following evidence that localized mental health services significantly improve survivor engagement and recovery outcomes compared to distant referral systems (Keynejad et al., 2020).

2. Reliability: Inconsistent Protection across Violence Typologies

The reliability dimension reveals systematic inconsistencies in service delivery that vary dramatically according to violence typology, creating differential protection regimes that privilege certain forms of violence while marginalizing others. Sexual violence cases consistently follow formal legal pathways in compliance with Law No. 12 of 2022 on Sexual Violence Crimes, with the institution maintaining a firm stance against mediation and demonstrating procedural adherence to prosecutorial processes. In stark contrast, domestic violence cases are routinely channeled toward reconciliation and mediation mechanisms, with survivors frequently encouraged to pursue peaceful resolution with perpetrators. This bifurcated approach extends to cases involving pregnancy outside marriage, which are addressed through "family solution" frameworks that prioritize marriage as the primary resolution mechanism. The differential treatment creates a reliability hierarchy where survivors of sexual violence receive consistent legal protection, while survivors of domestic violence encounter unpredictable, context-dependent responses that often prioritize family preservation over individual safety.

Table 2. Case Resolution Pathways by Violence Type (2020-2024)

| Violence Type | Total Cases | Legal Prosecution | Mediation/Reconciliation | Family Solution | No Further Action |
|----------------------------|-------------|-------------------|--------------------------|-----------------|-------------------|
| Sexual Violence | 89 | 84 (94.4%) | 0 (0%) | 0 (0%) | 5 (5.6%) |
| Domestic Violence | 103 | 31 (30.1%) | 58 (56.3%) | 0 (0%) | 14 (13.6%) |
| Dating Violence | 47 | 18 (38.3%) | 23 (48.9%) | 0 (0%) | 6 (12.8%) |
| Pregnancy Outside Marriage | 28 | 2 (7.1%) | 0 (0%) | 23 (82.1%) | 3 (10.7%) |
| Bullying/Harassment | 37 | 5 (13.5%) | 27 (73.0%) | 0 (0%) | 5 (13.5%) |
| Total | 304 | 140 (46.1%) | 108 (35.5%) | 23 (7.6%) | 33 (10.9%) |

Source: Research data compiled from UPT PPA Luwu Regency records (2020-2024)

Zeithaml et al.'s (1996) SERVQUAL model identifies reliability—the ability to perform promised services dependably and accurately—as the most critical dimension of service quality across contexts. The empirical evidence from Luwu demonstrates fundamental reliability failure, as the institution cannot be trusted to provide

consistent protection standards across violence types. This inconsistency directly violates the core principle that quality service delivery requires standardization and predictability, enabling users to form accurate expectations regarding institutional response (Parasuraman et al., 1988; Zeithaml et al., 1996). The differential treatment of domestic violence through mediation mechanisms, despite overwhelming evidence that such approaches increase recidivism and survivor danger, reflects what feminist scholars term "coercive reconciliation"—institutional pressure that transforms survivor agency into institutional convenience (Douglas et al., 2021). Contemporary research demonstrates that mediation in power-imbalanced relationships like domestic violence systematically disadvantages survivors, who negotiate under conditions of fear, economic dependency, and threatened retaliation (Bates et al., 2022). The approach to pregnancy outside marriage through marriage promotion directly contravenes international human rights standards on reproductive autonomy and constitutes what reproductive justice frameworks identify as reproductive coercion—institutional pressure that constrains reproductive decision-making (Amnesty International, 2021). Implement standardized risk assessment protocols for all violence types that prohibit mediation in cases involving power imbalances, repeat violence, or high-risk indicators, following evidence-based lethality assessment models that have demonstrated effectiveness in preventing repeated victimization (Campbell et al., 2017).

3. Responsiveness: Proactive Outreach amid Systemic Constraints

The responsiveness dimension represents a relative strength within UPT PPA Luwu's service portfolio, characterized by proactive outreach mechanisms and rapid mobilization capacity when cases are reported. The institution has established multiple reporting channels including direct walk-in services, telephone hotlines, and referrals from health facilities, educational institutions, and community organizations, demonstrating accessibility across diverse entry points. Field observations documented rapid response times, with outreach teams deploying to survivors' locations—including homes, schools, and healthcare facilities—within 24-48 hours of initial reports. This proactive approach contrasts sharply with passive, office-bound service models common in resource-constrained public service contexts. Particularly noteworthy is the institution's willingness to conduct on-site interventions in cases involving child and adolescent survivors, including direct engagement with educational institutions to address bullying and harassment cases. These practices demonstrate institutional capacity to transcend bureaucratic rigidity and adapt service delivery to survivor contexts rather than requiring survivors to navigate complex institutional pathways.

However, this responsiveness operates within significant structural constraints that limit its transformative potential. Rapid initial response does not necessarily translate into sustained, comprehensive support throughout survivors' often-lengthy recovery and justice-seeking processes. The institutional emphasis on immediate crisis intervention, while valuable, risks reproducing what feminist service scholar's term "emergency paradigm" approaches that prioritize acute response over long-term structural change (Bumiller, 2020). Additionally, responsiveness is constrained by the institution's position within a broader ecosystem of gender-biased legal and social service systems. Even when UPT PPA responds rapidly to survivor needs, subsequent stages involving law enforcement, prosecution, and judicial processes frequently introduce delays, procedural barriers, and victim-blaming attitudes that undermine the initial responsive intervention. Zeithaml et al.'s (1996) conceptualization of responsiveness emphasizes not merely speed, but willingness to help customers and provide prompt service as an integrated commitment. The institutional responsiveness observed at UPT PPA, while commendable in its immediacy, remains incomplete without parallel transformation of the broader service ecosystem within which it operates. Recent scholarship on coordinated community responses to VAW demonstrates that isolated responsive agencies cannot compensate for systemic unresponsiveness across the justice and social service continuum (Liu et al., 2024). Expand responsiveness beyond crisis intervention to include long-term case management and survivor advocacy throughout legal and recovery processes, implementing coordinated community response models that ensure sustained support and accountability across multiple institutional actors (Belisle, et al., 2024).

4. Assurance: Knowledge, Competence, and Persistent Gender Bias

The assurance dimension reveals a complex paradox wherein institutional investments in staff capacity-building coexist with deeply embedded gender biases that undermine survivor confidence in service quality and outcomes. UPT PPA personnel have participated in multiple training programs on VAW response, trauma-informed care, and gender-sensitive service delivery, representing genuine efforts to enhance professional competence. Staff demonstrated awareness of confidentiality protocols, with explicit commitments to protecting survivor identity and case information throughout service delivery processes. The institution has established data protection procedures and internal accountability mechanisms designed to prevent unauthorized disclosure. Furthermore, staff expressed commitment to accompanying survivors through legal processes including police reporting, forensic examination, and court proceedings—a form of advocacy that theoretically should enhance survivor sense of security and institutional trustworthiness.

Table 3. Survivor Confidence Levels by Service Dimension (N=15 Survivors Interviewed)

| Service Dimension | High Confidence | Moderate Confidence | Low Confidence | Very Low Confidence |
|----------------------------|-----------------|---------------------|----------------|---------------------|
| Confidentiality Protection | 13 (86.7%) | 2 (13.3%) | 0 (0%) | 0 (0%) |
| Staff Courtesy/Respect | 11 (73.3%) | 4 (26.7%) | 0 (0%) | 0 (0%) |

| | | | | |
|--------------------------------------|-----------|-----------|-----------|-----------|
| Legal Process Knowledge | 9 (60.0%) | 4 (26.7%) | 2 (13.3%) | 0 (0%) |
| Gender Sensitivity | 5 (33.3%) | 6 (40.0%) | 3 (20.0%) | 1 (6.7%) |
| Commitment to Survivor Safety | 6 (40.0%) | 4 (26.7%) | 4 (26.7%) | 1 (6.7%) |
| Consistency Across Cases | 4 (26.7%) | 5 (33.3%) | 4 (26.7%) | 2 (13.3%) |

Source: Research data from survivor interviews (2024)

However, these assurance-building efforts are fundamentally compromised by institutionalized gender bias manifested through differential case handling. The divergent pathways for sexual violence (consistent legal prosecution) versus domestic violence (frequent mediation) create what might be termed "conditional assurance"—survivors can only be confident of consistent, rights-protective response if their victimization aligns with institutionally prioritized violence categories. This conditionality directly contradicts Zeithaml et al.'s (1996) conceptualization of assurance as conveying confidence and trust through consistent demonstration of knowledge, competence, and credibility. When survivors of domestic violence witness institutional pressure toward reconciliation despite professed commitments to safety, their confidence in the institution's actual willingness and ability to protect them appropriately erodes. The approach to pregnancy outside marriage through marriage promotion frameworks further illustrates this assurance deficit, as survivors confronting reproductive decision-making receive normatively laden guidance that prioritizes social conformity over reproductive autonomy. Contemporary scholarship demonstrates that institutional legitimacy in VAW services fundamentally depends on survivors' perception that institutions will consistently prioritize their safety and autonomy over competing interests such as family preservation, social harmony, or administrative convenience (Goodmark, 2018). When this consistency fails—regardless of staff courtesy or confidentiality protections—assurance collapses. Recent research indicates that survivor trust in VAW services is most significantly predicted not by staff training levels but by institutional track record of challenging rather than accommodating patriarchal norms. Restructure training programs to move beyond technical skills toward critical consciousness-raising that enables staff to identify and resist institutionalized gender bias, following transformative learning approaches demonstrated effective in challenging deeply held patriarchal assumptions among service providers (Szilassy et al., 2024).

5. Empathy: Procedural Respect Constrained by Structural Limitations

The empathy dimension demonstrates institutional capacity to recognize survivor autonomy and provide individualized attention, tempered by structural constraints that limit truly holistic, survivor-centered care. UPT PPA staff demonstrated procedural empathy through explicit recognition of adult survivors' legal capacity to make autonomous decisions regarding case reporting, prosecution, and service engagement. This recognition represents a significant departure from paternalistic approaches common in Indonesian public services, where women's autonomy is frequently subordinated to family or community interests. The institution has implemented differentiated consent protocols recognizing developmental capacity differences between adult and child survivors, requiring dual consent (survivor and guardian) for minors while respecting adults' independent decision-making. Staff demonstrated attentiveness to individual survivor circumstances, including accommodation of scheduling preferences, location flexibility for meetings, and responsiveness to specific requests regarding service delivery modalities. These practices indicate awareness that quality service requires moving beyond standardized treatment to recognize the unique circumstances, preferences, and needs characterizing each survivor's situation.

Nevertheless, this procedural empathy operates within structural limitations that constrain its transformative potential. The institutional approach tends toward individualistic empathy that recognizes survivors as autonomous decision-makers while insufficiently acknowledging the relational, economic, and social contexts that shape those decisions. For survivors embedded in patriarchal family structures, economically dependent on perpetrators, or facing community stigmatization, autonomous decision-making occurs under conditions of severe constraint—what feminist scholars term "constrained agency". The institution's practice of minimizing family involvement in adult survivor cases, while respecting formal autonomy, risks isolating survivors from potential support systems and returning them to unchanged social environments after case resolution. Additionally, empathy appears stronger in interpersonal interactions than in structural provisions: staff may demonstrate caring attitudes, but institutional arrangements—such as absence of local psychological services, requiring survivors to travel to provincial offices—impose practical burdens that contradict empathic intentions. Zeithaml et al.'s (1996) conceptualization of empathy as providing caring, individualized attention requires not merely respectful treatment but institutional flexibility and resource allocation that genuinely center survivor needs and circumstances. The empathy demonstrated at UPT PPA, while genuine at the interpersonal level, remains constrained by resource limitations and insufficient integration of contextual analysis into case management. Recent scholarship on trauma-informed care emphasizes that empathy must extend beyond individual provider attitudes to encompass organizational culture, physical environments, and policies that consistently prioritize survivor safety, choice, and dignity (Substance Abuse and Mental Health Services Administration, 2022; Bloom & Farragher, 2013). Research on VAW service delivery in rural contexts specifically demonstrates that meaningful empathy requires addressing structural barriers—including geographic accessibility, economic support, and community education—that shape survivors' service

engagement and recovery trajectories (Cannon et al., 2021). Develop comprehensive, contextually-informed case management approaches that assess and address the relational, economic, and social contexts shaping survivor autonomy, implementing family engagement protocols where appropriate and desired by survivors, supported by evidence demonstrating that ecological approaches addressing multiple system levels enhance long-term survivor wellbeing compared to individual-focused interventions alone (Oesterle, et al., 2023).

CONCLUSION

This critical feminist analysis of violence against women service governance in Luwu Regency, South Sulawesi, reveals a fundamental paradox: the state's institutional response, embodied in UPT PPA, simultaneously provides crucial crisis intervention while inadvertently reproducing the patriarchal structures that generate violence against women. Through systematic examination of service quality dimensions—tangibles, reliability, responsiveness, assurance, and empathy—this study demonstrates that bureaucratic rationality, absent critical feminist consciousness, operates as a double-edged mechanism that offers individual protection while perpetuating collective subordination. The absence of standardized operating procedures and dedicated psychological personnel (tangibles), differential treatment of violence types privileging sexual violence over domestic violence (reliability), rapid crisis response constrained by systemic ecosystem failures (responsiveness), conditional assurance undermined by institutionalized gender bias, and procedural empathy operating within structural limitations collectively illustrate how ostensibly neutral service governance embeds and normalizes patriarchal assumptions about women's roles, agency, and deservingness of protection. The findings challenge conventional public administration approaches that assume bureaucratic neutrality and procedural rationality, demonstrating instead that institutions inevitably reflect and reproduce dominant power structures unless explicitly designed and continuously interrogated through emancipatory frameworks. For policy and practice, this research underscores that meaningful transformation of VAW service governance requires moving beyond capacity-building and resource allocation toward fundamental restructuring of institutional cultures, accountability mechanisms, and inter-agency coordination guided by survivor-centered, rights-based, and structurally-aware feminist principles. The Luwu case exemplifies broader tensions facing VAW service provision across rural Indonesia and similar contexts in the Global South, where progressive legal frameworks coexist with persistent patriarchal norms, resource constraints intersect with political marginalization of women's rights, and state institutions oscillate between protection and control. Future research should expand critical feminist analysis to comparative examination across diverse Indonesian regional contexts with varying cultural configurations, investigate survivor perspectives on service governance through participatory action research methodologies that center their knowledge and agency, and develop context-appropriate models for transformative service delivery that address both immediate safety needs and long-term structural change. Ultimately, this study affirms that the question is not whether state institutions can respond to violence against women—the evidence demonstrates they can and do—but whether those responses challenge or reinforce the gender hierarchies, power asymmetries, and normative assumptions that produce and normalize such violence in the first place, and whether institutional arrangements can evolve from sites of benevolent patriarchy toward genuine partnerships in feminist transformation.

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