Intimate Partner Violence and Substance Abuse:
Male and Female Perpetrators

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What is intimate partner violence? (IPV)

Violence perpetrated against an intimate partner, including physical and sexual violence.

(National Research Council, 1996)

What is substance abuse?

“Substance dependence” has now been replaced with the term “substance use disorder”. To meet the criteria, you must fulfill 2 out of the 11 possible physiological, cognitive, and behavioral components of the disorder.

(Rehm, et al., 2013, American Psychiatric Association, 2013)
Statistics

44.6 million people (U.S.) - severe physical violence in lifetime.

29 million women (1 in 4) and 15.6 million men (1 in 7).

1 in 10 women raped by their IP and 9 million men (sexual violence)

(Stöckl, Devries, Rotstein, Abrahams, Campbell, Watts, & Moreno, 2013)

1 in 5 women first IPV experience between age 11-17 (22.4%)
47.1% women first IPV experience between 18-24

(Breiding, Chen, & Black, 2014)

1/7 homicide deaths by IP
1/3 female homicide deaths by IP

(Globale average 30% women over 15.

(Devries, et al., 2010)

Most IPV acts are pattern of continued abuse.

(World Health Organization, 2005)
1871 First state (Alabama) rescinded the “husbandly” right to punish wives.  
(Fulgrahm vs. State, 46 Ala. 143)

Early 1900’s first programs combining short jail sentences with psychological treatment (in small minority of places).  
(Dobash & Dobash, 1992)

1960’s IPV offenses misdemeanors, low arrest rates.  
(Barner & Carney, 2011)

1970’s Battered Women’s Movement, increased awareness, community level interventions available, towards the end focus on perpetrators, not only victims. IPV homicide decreased.  
(Hackett, McWhirter, & Lesher, 2016; Dugan, Nagan, & Rosenfeld 1999)

1980’s Laws change to require more response from law enforcement.  
(Barner & Carney, 2011)

1990’s Female perpetrators and homosexual IPV research begins.  
(Conradi, 2004; Roberts, 2006)
Historical Overview - Laws

**Thurman vs. City of Torrington** (1984)

**Watson vs. City of Kansas City** (1988)

Mandatory Arrest Laws - with suspicion of probable cause.

Mandatory Prosecution - Prosecutor instead of victim decides whether to press charges.

Laws increasingly implemented across the United States even though findings on benefits and failings are not definitive.  
(Hirschel, Buzawa, Pattavina, & Faggiani, 2008)

In 2017 bill passed to include “dating partners” in IPV legislation.

*House Bill 223*
Types of Violent Situations

**Coercive controlling violence** - physical violence combined with a pattern of intimidation and control. “Traditional” idea of domestic violence (i.e. “wife beating”).

**Violent resistance** - violence in self-defense (against someone who is coercively controlling).

**Situational couple violence** - refers to violence that is contextual and not part of a power and control dynamic.

**Separation instigated couple violence** - violence not a pattern of continued violence and occurs at, not before separation.

(Kelly & Johnson, 2008)
Myths - Can Women Be Perpetrators?

Originally research focused only on women as victims, not perpetrators of violence.

(Kelly & Johnson, 2008)

Women can be perpetrators of intimate partner violence.

(Haynes, 2015; Eynon, 2014; Conradi, 2005)

Females are more likely to initiate aggressive acts of violence - rates have been found to be similar or higher than males.

(Archer, 2005; Centers for Disease Control, 2005)

Women believe female perpetrated IPV is more justifiable and women are largely the victims of IPV.

(O'Keefe, 1997)
Why was women’s violence perpetration ignored?

Original nature of the sampling (police reports, women’s shelters, emergency rooms, court-mandated batterer intervention programs) female perpetration largely ignored.  

(Dutton, 2005)

Males are more likely to injure their partners.  
(Archer, 2000; Roberts, Auinger, & Klein, 2005; Whitaker, et al., 2007)

Females - more likely to suffer possible psychological consequences: post-traumatic stress disorder and depression.  
(Lewis, Travea, & Fremouw, 2002)
Myths - Mutual Abuse

“Mutual Violence”  “Bidirectional Violence”  “Reciprocal Violence”  “Symmetrical Violence”

Due to escalation, the severity of injury and frequency of injury is much higher when abuse is mutual.


Studies have found half of all violence was bidirectional. Bidirectional violence is also associated with more frequent violence instigation from women.

(Whitaker, Haileyesus, Swahn, & Saltzman, 2007; Archer, 2005)
Gender Differences

There are similarities and differences between gender violence perpetration. (Kelly & Johnson, 2008)

Due to the sampling of early studies (police reports, shelters) more male perpetrated coercive control violence was found and less bidirectional violence. (Dutton, 2005)

National and community samples found greater gender symmetry and more contextual situational violence that results in less injury and need for shelters. (Johnson, 2006)

A study found that men blamed substance abuse and jealousy for their perpetration of violence. (Gilchrist, et al. 2015)

Another study found anger and jealousy was associated between female (but not male) violence perpetration. (Belus, et al., 2014)
Gender Differences

Females have been found to believe that female perpetration is more justifiable and that females are mostly the victims of violence. (O'Keefe, 1997)

Male perpetration has been linked to male gender role ideation and power and control dynamics within the relationship. (Santana, Raj, Decker, La Marche, & Silverman, 2006; Gilchrist, et al. 2015; Kernsmith, 2005).

Females give reasons related to self-defense, non-violent provocation, poor emotional regulation, retaliation, and unhealthy relationship behavior (not related to gender roles or power and control). (Stuart, Moore, Hellmuth, Ramsey, & Kahler, 2006; Reed, 2008; Kernsmith, 2005)

Females tend to perpetrate situational couple violence (situations escalate). (Palmetto, Davidson, Breitbart, & Rickert, 2013)
Substance Abuse

Theories of etiology have changed significantly in the past few years, but considerable controversy exists in both theory of etiology and substance abuse policy.

Physiological, cognitive, and behavioral syndrome that leads to loss of control. Same criteria for all psychoactive substances. (Mild, Moderate, Severe by number of criteria met - not use or dependence).

Eleven criteria (cognitive, behavioral, physiological, and consequence) - fulfill any two to meet the criteria.

Twelve-month prevalence rate of alcohol use disorder is 8.5% (most common disorder).

- 1.5% cannabis use disorder
- 0.37% opioid use disorder
- 0.2% stimulant use disorder

(American Psychiatric Association, 2013)

88,000 alcohol related deaths in United States per year.

(Gonzales, Roeber, Kanny, Tran, Saiki, Johnson, ... & Miller, 2014)

17 million Americans meet criteria for alcohol use disorder.

(Hedden, 2015)
Relationship Between Intimate Partner Violence and Substance Abuse
Prevalence

Higher rates of perpetration and victimization of intimate partner violence in those abuse substances, compared to the general population. Up to half of perpetrators in batterer intervention programs meet the criteria for substance abuse disorders.

(Kraanen, Scholing, & Emmelkamp, 2010).
One of the greatest risk factors for IPV is substance abuse. Heavy drinking has been associated with IPV perpetration. (Ten Have, de Graaf, van Weeghel, & van Dorsselaer, 2014)

Reports have shown that a significant amount of IPV occurs when the perpetrator is intoxicated. (Gilchrist, Ireland, Forsyth, Laxton, & Godwin, 2014; Friend, Langhinrichsen-Rohling, & Eichold, 2011)

Victim’s injuries are also most often more extensive when the perpetrator is intoxicated. (Graham, Bernards, Wilsnack, & Gmel, 2011)

Alcohol and drug use have become accepted risk factors for IPV perpetration. (Capaldi, Knoble, Shortt, Kim, 2012; Stith, et al., 2004)
Recent Findings

There has been controversy for some time between feminist approaches and traditional individual psychology approaches to violence intervention. Neither approach fully integrates substance abuse treatment.

(Gilchrist, Ireland, Forsyth, Laxton, & Godwin, 2014)

Some researchers claim that there is enough evidence to show that there is a causal relationship between substance abuse and intimate partner violence.

(Leonard & Quigley, 2017)
There is a threshold for aggression that is lowered by alcohol. Those with low levels of aggression may not be affected, those with higher levels (although not usually violent) are more likely to become violent from perceived provocation because their “threshold” is lower.

(Fals-Stewart, & Stappenbeck, 2003)
Differences Between Types of Substances

Alcohol and cocaine use disorders associated with perpetration. Marijuana and opioid associated with victimization.

Comorbid alcohol and marijuana decreased likelihood of IPV.

Comorbid alcohol and cocaine increased likelihood, but decreased (compared to alcohol alone but not cocaine alone).

Alcohol, marijuana, opioid, and cocaine study found alcohol and cocaine associated with IPV perpetration.

Comorbid alcohol use and cocaine/marijuana use disorder increased likelihood.

Comorbid alcohol use disorder and marijuana use disorder decreased likelihood.

(Smith, Homish, Leonard, & Cornelius, 2012). (Crane, Oberleitner, Devine, & Easton, 2014)
Treatment

Contrary to the myth that men do not want help, one study found that half of male intimate partner violence perpetrators stressed their needs for family services.

(Wu, El-Bassel, Gilbert, Sarfo, & Seewald, 2010)

A number of intervention programs have been found to be useful (particularly ones that involves friends and family members).

(Roozen, Blaauw, & Meyers, 2009)
Integration could be more effective in dealing with relationship violence.  

(McMurran, 2012)

Regardless of the high prevalence rates, very few substance abuse programs address violence problems in their intervention.  

(Timko, Valenstein, Lin, Moos, Stuart, & Cronkite, 2012)

Integration could be of particular value because those in substance abuse treatment programs have been shown to be less likely to attend multiple treatment programs, particularly batterer intervention programs.  

(Torrens, Rossi, Martinez-Riera, Martinez-Sanvisens, & Bulbena, 2012; Schumache, Fals-Stewart, & Leonard, 2003)
**Future Study**

**CRITERIA:**
- 100 participants (50 male, 50 female)
- Substance abuse problem
- Committed some form of intimate partner violence in the past
- Heterosexual

**Purpose:** Examine known risk factors for IPV perpetration among a high-risk population of substance abusers. Due to the high rates of IPV in substance abuse populations it has been suggested that treatment interventions should be integrated for better effectiveness. Identifying these risk factors in different populations and contexts can help better inform treatment and policy in order to reduce the problem of IPV in our society.

**Risk Factors:** childhood physical abuse, childhood sexual abuse, and psychological abuse

**Instruments:** Psychological Maltreatment of Women Inventory (PMWI), Revised Conflicts Tactics Scale (CTS2), Childhood Maltreatment History Self Report (CMHSR)

- These risk factors will be examined separately for male perpetrators of IPV and female perpetrators of IPV.
- These risk factors will also be examined separately depending of the directionality of violence (whether the relationship was one-way abusive or mutually abusive).
Advocacy

- Center for Relationship Abuse Awareness - Education, Manuals, Screening, Legal Resources
- NCADV - Awareness, Legislation, Coalition
  State Coalition Against Domestic Violence  
  [http://ncadv.org/stay-connected/state-coalitions](http://ncadv.org/stay-connected/state-coalitions)
- DVCAC - Advocacy, Awareness, Volunteer Opportunities
Thank You.

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