

SUMMARY OF RESEARCH ON FAMILY VIOLENCE

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1. Between 600,000 and 6 million women are victims of domestic violence, also known as *intimate partner abuse*, each year, and between 100,000 and 6 million men, depending on the type of survey used to obtain the data (Rennison, 2003; Straus & Gelles, 1990; Tjaden & Thoennes, 2000). Most surveys find that men and women assault one another and strike the first blow at approximately equal rates (Archer, 2000; Dutton, Kwong, Bartholomew & Kim, 1999; Morse, 1995; Straus, 1993).
2. There are different types of domestic violence. The great majority of domestic violence involves yelling, pushing, grabbing, slapping and throwing things, results in no or minor physical injuries, and may include low to moderate levels of emotional abuse and control. The most serious type of domestic violence, known as *battering* or *intimate terrorism*, is typically chronic, usually leads to physical injury, and usually accompanied by high and frequent rates of emotional abuse and control (Hamel & Nicholls, 2007).
3. Risk factors for partner abuse are varied, but similar across genders, and include: low socioeconomic status, high levels of stress, under 30 years of age, past childhood abuse, having pro-violent attitudes, personality disturbance and substance abuse (Anderson, 2002; Babcock et al., 2003; Conradi, 2004; Dutton, 1998; Follingstad et al., 1991; Henning, Jones, & Holford, 2003; Holtzworth-Munroe & Stuart, 1994; Johnston & Campbell, 1993; Magdol et al., 1997; Morse, 1995; Simmons et al., 2004; Sommer, 1994; Stacey et al., 1994; Straus et al., 1990).
4. Substance abuse significantly increases the risk for partner violence. In the general population, between 22% - 41% of male-perpetrated incidents of partner violence, and between 10% - 33% of female-perpetrated partner violence, occur after the consumption of alcohol (Graham et al., 2004; Kantor & Straus, 1987). One study found that 18% of men, and 8% of women, arrested for domestic violence could be characterized being substance dependent (Henning et al., 2003); and 38% of partner violence victims in national crime survey (Durose et al, 2005) reported that the offender was under the influence during the incident.
5. Partner abuse is also correlated with dysfunctional relationship dynamics (Babcock et al., 1993; Burman et al., 1992; Cordova et al., 1993; Moffitt et al., 2001; Ridley & Feldman, 2003; Telch & Lindquist, 1984), and insecure patterns of attachment (Bartholomew et al., 2001; Bookwala, 2002; Roberts & Noller, 1998).
6. In countries where women lack economic, political and social empowerment, rates of partner abuse by men are significantly higher than those by women (Archer, 2006). In Western industrialized countries such as the United States, patriarchal explanations for intimate partner abuse are less relevant, as indicated by the following research: a large majority of relationships are equalitarian (Coleman & Straus, 1990); most men are neither physically abusive nor highly controlling (Dutton, 1994); lesbians engage in high rates of abuse, including physical assaults (West, 1998); violent men have less, not more traditional masculine characteristics (Neidig et al., 1986; Sugarman & Frankel, 1996); there are few if any differences in sex-role inequality between abusive and non-abusive couples (Hotaling & Sugarman, 1986); structural power does not necessarily translate to individual power (Felson,

- 2002); and societal norms support female-perpetrated abuse in the home (Straus et al., 1997; Straus, 1999).
7. Men and women engage in overall comparable levels of abuse and control, such as diminishing the partner's self-esteem, isolation and jealousy, using children and economic abuse; however, men engage in higher levels of sexual coercion and can more easily intimidate physically (Coker et al., 2002; Graham-Kevan & Archer, 2004; Hammock & O'Hearn, 2002; Kasian & Painter, 1992; Stacey et al., 1994; Straus et al., 1980). Individuals who are controlling of their partners are much more likely to also be physically assaultive, and this holds equally for both male and female perpetrators (Felson & Outlaw, 2007; Graham-Kevan, 2007).
 8. Large scale surveys (Mirrlees-Black, 1999; Tjaden & Thoennes, 2000), as well as a comprehensive meta-analysis of the research literature (Archer, 2000), indicate that approximately 62% - 76% of physical injuries are incurred by women in the general population. An international sample of university students in dating relationships found the percentage of injuries to females to be around 57% (Straus, 2004). The 2001 National Longitudinal Study of Adolescent Health, with a sample of more than 11,000 young adults between the ages of 18 and 28, found that in reciprocally-violent relationships men incurred the majority of the physical injuries. Overall, women incurred more physical injuries, but the difference was quite small (Whitaker, Haileyesus, Swahn, & Saltzman, 2007).
 9. Female victims are at far greater risk of being killed by an intimate partner (women are victims in over 75% of domestic violence homicides; Rennison, 2003), and have more reason to be in fear of physical danger and to need shelter services. However, victims of both genders may have a fear of emotional harm. Due to cultural norms that require men to present a strong façade and that minimize female-perpetrated abuse (Mooney, 2000; Straus et al, 1997; Sorenson & Taylor, 2005), men are less likely to verbalize fear of any kind (Dutton & Nicholls, 2005; Hines et al, in press).
 10. Female victims evidence higher levels of psychological symptoms as a result of being physically assaulted (Anderson, 2002; Straus & Gelles, 1990; Vivian & Langhinrichsen-Rohling, 1994). However, psychological abuse is far more prevalent, and its effects on men and women are comparable (Harned, 2001; Lawrence et al., 2009; Pimlott-Kubiak & Cortina, 2003; Prospero, 2009; Taft et al., 2006; Vivian & Langhinrichsen-Rohling, 1994).
 11. In families, the highest rates of serious physical abuse (punching, kicking, biting, choking, beating up, use of weapons) are perpetrated by siblings upon one another. Interparental violence accounts for the lowest rates, half as frequent as assaults by parents on children, or by children on parents (Straus & Gelles, 1990).
 12. Children who have witnessed their parents physically abuse one another are at higher risk than other children for experiencing emotional and conduct disturbance, deterioration in peer and family relations, and poor school performance (Wolak & Finlehor, 1998); and they incur these problems regardless of the parent's gender (English et al., 2003; Fergusson & Horwood, 1998; Johnston & Roseby, 1997; Mahoney et al., 2003).
 13. There is a high correlation between perpetration of spousal abuse and child abuse for both genders (Appel & Holden, 1998; Margolin & Gordin, 2003; Straus & Smith, 1990).
 14. The overall impact on children of having witnessing interparental violence versus having been physically abused are comparable (Kitzmann et al., 2003), but verbal and emotional

abuse directed by a parent against a child may cause the greatest damage (English et al., 2003; Moore & Pepler, 1998).

15. Adults are more likely to remember having witnessed interparental abuse by their father, rather than mother (Straus, 1992); however, correlational studies indicate that child witnesses to interparental violence are at equal, or greater, risk for becoming depressed, engaging in substance abuse and themselves perpetrating intimate partner abuse as adults when mother was the abuser (Kaura et al., 2004; Langhinrichsen-Rohling et al., 1995; Sommer, 1994; Straus, 1992).
16. Family violence is a complex phenomenon, characterized by a variety of possible pathways of abuse, (Appel & Holden, 1998), often reciprocal (Ullman and Straus, 2003), sometimes initiated by the children (Lynch & Cicchetti, 1998; Sheehan, 1997); with stress a central mediator (Margolin & Gordis, 2003; Salzinger et al., 2003).

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John Hamel, LCSW, acquired both his B.A. in Psychology (1986) and Masters in Social Welfare (1988) from the University of California at Los Angeles, and was licensed as an LCSW (LCS 15194) in November, 1989. Since 1991, he has been Director of John Hamel & Associates, with offices in Walnut Creek, Berkeley and San Rafael, California. Mr. Hamel and his associates provide a wide range of clinical, consultation and training services. His areas of expertise are in the assessment and treatment of anger management and family violence, as well as substance abuse and co-dependency. Specialized clinical services include a substance abuse relapse prevention group, family violence assessments (including specialized assessments in disputed-child custody cases), victim services and advocacy (including victim support groups), and treatment programs for angry and violent men, women, couples, parents and teens. Although many of his clients are voluntary participants, many are referred from Family Court or Child Protective Services, or mandated by the courts to participate in either a batterer treatment program, or a parenting program.

Mr. Hamel has provided consultation and training for mental health professionals, batterer intervention providers, shelter workers and victim advocates, court mediators and evaluators, teachers, attorneys and law enforcement; and speaks regularly at domestic violence conferences around the country. He is a pioneer in the development of the gender-inclusive approach to domestic violence, a newly-emerging, empirically-based model of research and treatment. His trainings been praised both for their innovative look at theory and policy, as well as their abundance of practical, hands-on intervention tools. Mr. Hamel has also served as an expert court witness on the subject of family violence, and has testified before the California Legislature on domestic violence public policy.

Mr. Hamel is currently Editor-in-Chief of the peer-reviewed journal, *Partner Abuse*, published quarterly by Springer Publishing. His first book, *Gender-Inclusive Treatment of Intimate Partner Abuse: A Comprehensive Approach*, was published by Springer in 2005. His second book, co-edited with Tonia Nicholls, PhD, is *Family Interventions in Domestic Violence: A Handbook of Gender-Inclusive Theory and Treatment* (Springer, 2007), and includes contributions from the most respected experts in the field. His most recent book, *Intimate partner and family abuse: A Casebook of gender-inclusive therapy* (Springer, 2008), includes chapters by clinicians from the United States and several other countries, and is the first domestic violence casebook to include extensive case studies of both male and female perpetrators and victims.

Mr. Hamel is married and lives with his wife, Judi, and their twins, Jacob and Aviva, in San Rafael, California.