Denise A. Hines / Kathleen Malley-Morrison / Leila B. Dutton

FAMILY VIOLENCE
in the UNITED STATES

Defining, Understanding, and Combating Abuse

THIRD
EDITION

Family Violence

3
edition

in the United States

in the United States

Family Violence

3 edition

Violence

in the United States

Defining, Understanding, and Combating Abuse

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Preface and Acknowledgments

My friend went out with a boy who tried to control what she did. He would say he hated her.

I had a former female friend who tended to be very domineering. She would never resort to physical violence, but she used guilt-manipulation and yelling to control her boyfriends.

My best friend was in an abusive relationship. Her boyfriend used to push her around and try to control her appearance, activities, and friendships.

My boyfriend and I were fighting and he tried to go to sleep, so I punched him in the chest to wake him up.

These descriptions of aggressive relationships are quotes from college students, just like most of you who are reading this book right now. They describe the typical type of aggression occurring between partners in relationships—what some researchers call "minor violence" (Straus, 1990a) and others call "situational couple violence" (Johnson, 2008). Indeed, most aggression in relationships, both intimate relationships and other family relationships, is not the type that we see on the news or in most of the case studies presented in this book. Such cases are extreme examples; they are meant to capture our attention and spur research into, and resources for, people involved in highly abusive situations.

People involved in extremely abusive family relationships are the ones most in need of intervention services such as those offered by domestic violence agencies, Child Protective Services, medical professionals, and mental health professionals. They are also the ones who tend to receive the most research attention. However, most cases of family aggression involve psychological aggression and occasional minor violence. In fact, according to dozens of studies on dating aggression in college students and young adults (e.g., Hines & Saudino, 2003; Sabina & Straus, 2008), about one third of the students reading this book right now are involved in dating relationships in which at least some violence (e.g., slapping, pushing, shoving) has occurred. Some researchers argue that prevention services need to focus on these types of relationships because preventing minor violence in intimate partner and family relationships will result in a large improvement in social and psychological health (M. Straus, personal communication, March 4, 2004). Compared to people not involved in aggressive relationships, men and women in relationships in which minor violence has occurred suffer from more depression, psychological distress, and psychosomatic symptoms (e.g., Stets & Straus, 1990). Because at least one third of the population has been

involved in these types of relationships, eliminating even minor violence from close relationships, Straus argues, would result in vast improvements in mental health. We focus in this preface on dating aggression because many of you are involved in such relationships; however, consider how much social and psychological health would improve if violence and aggression are eliminated from all forms of family and intimate relationships.

Family and intimate partner aggression, in the form of minor physical violence or psychological aggression, has touched most of us. Most of us have witnessed it, experienced it, and/or used it in our lifetimes. In order for us to eliminate aggressive and abusive behaviors from relationships, we must be willing to confront our own experiences with these behaviors. All aggression matters, whether it is extreme or minor, verbal or physical, committed by men or women, by ourselves or someone else. How often have you been victimized by someone else's cruel words or actions? How often have you done or said something that could harm another person (e.g., boyfriend or girlfriend, brother or sister, mother or father) either emotionally or physically? Because most of us have been socialized to view aggression and abuse as something outside of ourselves, confronting our own abilities to behave aggressively and abusively is a crucial first step in understanding and eliminating aggression and abuse from our lives and the lives of others in this country (Mills, 2003).

Because the bulk of the research on family violence has focused on those most in need of intervention services, much of the research and many of the case examples presented in this book involve individuals subjected to severe forms of family violence. We also present as much research as possible on population-based studies, which include cases of minor violence and psychological aggression as well. As you read this book, consider the quotes at the beginning of this preface and this discussion of the impact of even minor aggression on people's psychological and social health. Consider also your own life and the lives of your loved ones—how many of them have been involved in relationships in which aggression occurs? How much better do you think your life and/or their lives would be if aggression were not present in your or their closest relationships?

This book addresses all types of family aggression. For most of the chapters, we limit our discussion to relationships in which some type of close, long-term commitment is involved (e.g., parent–child relationship, sibling relationship, husband–wife relationship, committed intimate partner relationship, even if not married). However, we do have a chapter focusing on maltreatment in college student relationships which might not be long-term or intimate, but in which aggression may still occur (Chapter 9). In addition, in both the chapter on maltreatment of men by female partners (Chapter 8) and maltreatment in sexual minority relationships (Chapter 10), we also consider some of the research on dating violence. Our decision to do this reflects two issues: (1) there is a dearth of research on these populations of victims in general because the bulk of the research, practice, and policy attention has focused on female victims of men; and (2) until the June 2015

Supreme Court decision on marriage equality, for the sexual minority population, in most states, gays and lesbians were denied the right to marry; consequently, we were forced to concentrate mostly on violence in their nonmarital intimate relationships, and research typically does not distinguish between committed versus noncommitted intimate relationships in this population. Because the types of aggression discussed in these two chapters occur at rates at least equal to those of men's maltreatment of female partners (Chapter 7), we consider it important to devote a chapter to each of them, even though systematic research is still developing in these two areas and is certainly not as extensive as research on the maltreatment of female partners by men.

In the first chapter of this book, we focus on a discussion of the problems and controversies surrounding the process of defining family violence and abuse. We also discuss the different perspectives that can be found in the legal, medical, and social service professions, and the differences between these professional points of view and lay opinions. We then introduce a cognitive-affective-ecological conceptual approach, which provides a unifying framework for the book. In the second chapter, we tackle several larger cultural issues (e.g., media violence, gun laws) that impact not just the prevalence of different forms of family violence but also the way society views violence and prevention and intervention efforts.

In Chapters 3–13, we discuss specific types of aggression in family relationships. Chapter 3 is devoted to child physical maltreatment, Chapter 4 to child sexual maltreatment, and Chapter 5 to child neglect and psychological maltreatment. Although research shows that these forms of maltreatment typically overlap, we chose to discuss them separately for ease of presentation. However, we provide a discussion of the co-occurrence of many of these types of child maltreatment and the implications for the child's adjustment, and in Chapter 6, we discuss the prevention and intervention in all forms of child maltreatment because often the efforts are similar if not the same. In Chapters 7–11, aggression within adult intimate relationships is discussed. Specifically, we provide a discussion of the maltreatment of female partners by men (Chapter 7), of male partners by women (Chapter 8), within college student dating relationships (Chapter 9), and within the sexual minority community (Chapter 10). In Chapter 11, we discuss the various efforts to prevent and intervene in all forms of intimate partner aggression. In Chapter 12, the maltreatment of older adults is discussed, while in Chapter 13 we provide the limited information available on two "hidden" types of family violence: violence against siblings and parents by children and adolescents. In all these chapters, we begin with illustrative case studies, then address definitional issues and provide a discussion of the prevalence of the particular type of aggression. Next, predictors and correlates are discussed, structured according to our conceptual model, followed by information on the possible consequences of each type of aggression. Within these chapters, we also provide information on the most extreme type of family violence, that of homicide of family members. Most chapters also have a "special

issues" section addressing a specific issue related to that particular type of family violence.

Our book concludes with a thought-provoking discussion of the various forms of family violence, using some of the case studies we provided previously in the book. We then pay tribute to the pioneer of family violence research—Murray Straus, PhD—who passed away in 2016 and left an indelible mark on the field, including the major practice and policy changes that occurred since he backed his research in this "new" area in the late 1960s. We then look ahead to what we feel are the major emerging areas within the field of family violence that need research, practice, and policy initiatives to carry this field forward and to carry on the legacy that Dr. Straus began decades ago.

Our decision to write the first edition of this book was a result of writing our first book with SAGE Publications. When writing that book, *Family Violence in a Cultural Perspective*, we became so involved in the research that we could not contain everything we wanted to write in just one book. Our editor at the time at SAGE, Jim Brace-Thompson, noticed the problem and suggested the possibility of a second book, a possibility we had already thought of but had not yet mentioned to him. We were thrilled that all of us were on the same page, and we would like to thank Jim for giving us the opportunity to write the first edition of this book, and Kassie Graves, the editor of the second edition of this book. We are continually delighted with the book's reception in the field and the feedback we received from people who read it or use it in their classes. When Joshua Perigo, our current editor at SAGE, approached us to update the book for a third edition, we were thrilled to have SAGE's continued excitement and support for this book. We would like to thank Joshua and his editorial assistant for their patience and suggestions as we updated this book. We would also like to thank four reviewers for their valuable suggestions on how to update the book, many of which we incorporated.

Several of Denise's students provided valuable efforts for the current and previous editions by searching for relevant research and case studies, helping with the tables, developing the end-of-chapter discussion questions, and compiling the reference section. They are Stephanie Henderson, Alexa Chu, Emily Corbett, Claire Hunt, Julia Kelley-Vail, Michelle Collett, Dani Dimitrova, Gayatri Khosla, Ashley McCartney, C. J. Burka, Madeline Reynolds, Madison Schofield, Lexi Williams, Letitia Barber, Haley Cronshaw, Mira Syracuse Siewert, Emily Valante, and Kelli Woodson. Some of Kathie's students provided much needed help with tracking down sources, doing Internet searches for important documents, and putting together references. They include Heidi Niederhausen, Xiaofei Jalette, Candace Cantrell, Erin Anderson, Linh Phuong Vu, Elan Parker, Nikki Pelezza, Rina Beyda, Yijing Lin, and Yuan Yuan. Many thanks go to two University of New Haven students—Evin Carmack and Mengbei Wang—who helped Leila by obtaining articles, conducting Internet searches, and assembling references.

Denise would like to acknowledge the support of her many family members and friends through the years. Her parents especially have supported her and expressed much pride and love at every step along the way. Her husband remains a constant source of support and encouragement in all of her work, and their two children are the inspiration for her continued efforts to work to end all forms of family violence. Likewise, Kathie extends her appreciation to her family and to her friends Eli and Carolyn Newberger. Leila would like to also thank Cynthia Dutton, Elizabeth Dutton, Tracy Tamborra, Gabriel Cabezas, and John Zrnich for their support in all of her endeavors, including this project.

Defining and Understanding Abuse

Issues in the Definition of Family Violence and Abuse
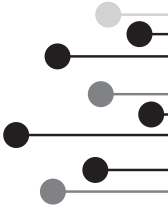
Consider this case: On June 29, 2018, Katrina Coursey, 21, and Terrell Lloyd, 27, of Weatherford, Texas, were indicted for endangering a child following a Child Protective Services (CPS) report of child abuse. According to reports,

> *Coursey admitted to using methamphetamine daily and hourly in front of her children .... according to the probable cause affidavit. "At this time Coursey was pregnant with her second child, which was born [later]. Coursey's live-in boyfriend is Lloyd. It is suspected that he also uses methamphetamine in the presence of children," according to the affidavit. "[CPS] recently received positive results indicating [the child] had methamphetamine in her system." Coursey and Lloyd, who stated he is the father of the child, both tested positive for methamphetamine and marijuana. (Owens, 2016)*

If Coursey and/or Lloyd is convicted of any of the counts of endangering a child, they will face 6 months to 2 years in a state jail facility and up to a $10,000 fine. What is your reaction to this case? Is it clear that Coursey and Lloyd's children, even before the second child was born, were endangered by their parents' use of methamphetamines in their presence? Is it likely that the children also experienced neglect as a result of their parents' drug use? Do you believe the parents' behavior should be considered to be child abuse and/or neglect as well as endangerment? Do you think they should go to jail? It is likely that the law enforcement and social service systems worked together to take the children from their parents immediately upon discovery of their situation and place them in the custody of Child Protective Services (CPS); the children were probably moved into foster care while the legal case against their parents was pursued. Does this seem like the best outcome for the children?

> *I was living in Brookwood [affluent community] when I was married. I had everything. I mean, all I had to do was ask. But, I was getting beat up like every day!... We lived in a beautiful subdivision. I was driving a beautiful truck, but I was being abused physically, and more than that, mentally. I was tired of him saying, "You're a bitch. You're ugly." I was really over-weight and he would say, "Oh, you're a fat whore and nobody wants you. What are you going to do when you leave?" I was very scared. My son was 6 years old and I had just had the baby. He was like 3 months. And one day, he [husband] just*

hit me really bad. And I said, "You know what? I can't take it!" I called 911 and he fled. (Lewinson, Thomas, & White, 2014, p. 196)

The woman who is telling her story here is living in a homeless shelter with her children. Has she made a good move for herself and them? Do you believe her husband was abusive? If your answer is yes, which of his behaviors would you label as abusive? The beatings? The hitting hard? Would either of those behaviors be acceptable under any conditions? How about swearing at her and calling her names? Was that abusive, too? What if anything should be done with him? For her?

How about the case below?

He just constantly just wanted to have sex with me and it was rough…I begged him [to stop] and it was like it didn't matter. Then he started getting rougher and rougher and then doing things I didn't want him to do against my will there towards the end…. He generally never asked, toward the end. It was either have sex or get beat to death and then have sex, that's just how it was…. And he choked me so bad one time that I lost my voice for two weeks. (Logan, Walker, & Cole, 2015, p. 110)

Is there any doubt in your mind that this particular husband physically abused his wife? How about his sexual aggression? Would you call that "rape"? Have you ever heard the term "marital rape"? Why or why not? Is the idea of rape in marriage a strange one to you? In this case, the narrator of the story was a woman. What if the victim had been a man? Would that affect your judgment in any way? What kind of resources, if any, do you think should be available for victims of marital rape?

Historically, many shelters did not consider cases of marital rape to fall within their domain because it is not life threatening, and many rape crisis centers did not want to deal with female domestic violence victims. Consequently, battered women who had also been sexually assaulted were often left unaided, sometimes shuffled back and forth between facilities (Flicker et al., 2011). More recently, there has been increased outreach to such women, increased attention to their dual burdens, and greater efforts to find appropriate intervention and prevention programs for them (e.g., Safe Haven, 2017).

I remember one night when she got really out of control. I had accidentally left the toilet seat up before going to bed…. She started yelling and screaming and stomping around… Then she came into the bedroom…. She had something in her hands, raised above her head. I figured it was a wooden spoon or a rolling pin or something like that because she had hit me with those before. So I waited until she came around to my side of the bed, then rolled over to the other side. When I turned back over, I saw that she had stuck two of the biggest steak knives into the bed up to the handles exactly where I had been laying. I grabbed my pants, ran out of the apartment, and jumped into the car. (Migliaccio, 2001, p. 26)

Does this story shock you? Do you tend to assume that domestic violence is always perpetrated by a man against a woman? When you read a story like this, do you ask yourself what kinds of things this man must have done to warrant this level of violence from his wife? That's the kind of question all too many people—even other women—ask when the victim of domestic violence is a woman. Do you think that question is even more common when the victim of domestic violence is a man? Whenever you have heard of a case of someone getting beaten up by a romantic partner, did you find yourself wondering what the abused partner did to "deserve" the abuse? If so, you are not alone. It has taken decades for our society to start reaching the conclusion that violence is not acceptable in families or within romantic relationships and that a marriage license is not a hitting license or any sort of permit to hit, hurt, or punish. Another question: do you think this man is a wimp for running out of his apartment, away from his violent wife? Many abused men stay silent about abuse for precisely that concern (National Domestic Violence Hotline, 2017).

> *Lisa is an undocumented immigrant from Jamaica who was kicked out of her family home when she came out as lesbian at 16. She met another lesbian, Joanne, and they moved in together. In time, Joanne became controlling, made Lisa tell her where she was at all times, didn't allow her to call friends, and occasionally even pushed and shoved her. After a particularly bad incident, Joanne apologized and proposed marriage. Lisa accepted. After the marriage, Joanne became physically abusive, causing multiple contusions. Lisa was afraid to call the police because Joanne told her they would arrest and deport her. (Adapted from National Coalition of Anti-Violence Programs (NCAVP), 2016a, p. 71)*

What forms of abuse has Joanne subjected Lisa to? Which forms of abuse do you think could be most serious for Lisa? Pushing and shoving? Hitting to the extent of causing multiple contusions? Not allowing her to call her friends? Threatening to call the police and have her arrested and deported? Which do you think would be most scary to you if you were in Lisa's shoes? And how do you feel about her parents kicking her out at age 16 because she told them she was a lesbian? Could that be considered child abuse? Child neglect?

Lisa's story at the time of this writing had had a positive ending. She fled the relationship, entered a domestic violence shelter, was later referred to the New York City Anti-Violence Project, and filed a Violence Against Women Act (VAWA) self-petition, which had been initially approved. She was then able to get public benefits, started a GED program, and was looking forward to moving out of the shelter into an apartment. Undocumented immigrants are not always so fortunate and often fail to leave abusive relationships precisely because they are afraid of deportation. Major newspapers have been replete with such stories in recent years (e.g., Engelbrecht, 2018). Have you read any of these stories? What do you think about the plight of these women?

For many decades after the public recognition of child abuse and domestic violence against women as serious social problems, members of the LGBTQ community, fearing additional stigmatization, were reluctant to admit that abuse took place within their romantic relationships. Only recently have victims of intimate partner violence (IPV) in those communities begun to speak out, although services are still limited. Gay marriages started becoming legal in the United States following several court decisions indicating that gay couples had the right to marry. In 2004, Massachusetts became the first state to legalize gay marriage, followed by Connecticut, Iowa, Vermont, Maine, and New Hampshire (Vestal, 2009, April 8). In 2015, the Supreme Court ruled that same-sex couples have the constitutional rights to marry and have their marriages recognized as heterosexual couples, making same-sex marriages legal in every state. Related to these developments, many researchers have begun studying violence in LGBTQ relationships. In a 2010 Internet study of 402 men who have sex with men, 11.8% of the total sample reported physical violence from a current male partner and 7% reported perpetrating violence against a male partner (Walters, Chen, & Breiding, 2013).

> Mrs. Johnson, an 83-year-old widow, lived with her son, Ronald. A family member called Adult Protective Services after a frightened Mrs. Johnson made a whispered phone call to that relative from her locked bedroom to report that Ronald had pulled her hair, yelled at her, and called her a "stupid bitch." (NAPSA, n.d.)

What are your views on Mrs. Johnson's situation? Is Ronald's behavior "abusive enough" to warrant Adult Protective Service agency intervention? If your answer is yes, what do you think the agency should do, could do? In reality, what Adult Protective Services did do was: contact the police; verify that a crime report had been filed; confirm that the son was being charged with a crime; transport Mrs. Johnson to the courthouse and assist her in the process of filing restraining orders; accompany her to the emergency restraining order hearing in the courtroom a month later; and transport and accompany her to the hearing for a permanent restraining order. Does this sound like an appropriate solution to you? Can you think of other steps that you wish could have been taken?

Definitional Issues

At the heart of many of the debates concerning whether particular behaviors are abusive or not are inconsistencies in the definitions of terms. Definitions of abuse, for example, have varied in the extent to which they incorporate assumptions about causes (e.g., people who hurt the ones they love are "sick"); effects (e.g., abusive behaviors are those that cause harm); motivations (e.g., abusive behaviors are intended to hurt rather than discipline); frequency (e.g., slapping is abusive only if it is chronic); and intensity (e.g.,

hitting is abusive if it is hard enough to cause injury). Such definitions, which vary in their inclusiveness and differ within and across fields, influence the likelihood that individuals subjected to unwanted and potentially harmful behaviors within domestic settings will receive interventions from the legal, medical, and/or social service communities. In one study of social workers in military Family Advocacy programs, these clinicians reported that existing definitions of spousal and child maltreatment were ambiguous and needed further operationalization; in making their own determinations concerning whether maltreatment had taken place, these clinicians often overrode the official definitions and followed their own judgments (Heyman & Slep, 2006; Petersen, Joseph, & Feit, 2014, March 25).

Efforts to distinguish among terms such as *violence*, *abuse*, and *maltreatment* have not led to any consensus. Definitions continue to vary in their inclusiveness (how broadly the construct is defined) and their abstractness (the extent to which they focus on specific behaviors or define one abstract construct in terms of another). For example, the American Academy of Family Physicians (2018, para 1) cites the World Health Organization's (2011) definition of **violence** as "the intentional use of physical force or power, threatened or actual, against oneself, against another person or against a group or community, which either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation." The Academy goes on to say (para 1) that "[a]ll violence is functional, intended to dominate, punish, control, harm, or eliminate an individual, a group, or a community." Timshel, Montgomery, and Dalgaard (2017, p. 318) defined *violence* as "an act or threat that, for whatever purpose, can or will damage another person's integrity or which scares, pains or harms the person"; they identified *family violence* as a subtype of violence occurring within a household and including child abuse ["violence between a caregiver and a child (child maltreatment)"] and "intimate partner violence/domestic violence." Timshel et al. also state that family violence involves "threatening or committing physical, verbal, emotional, financial or sexual violence (p. 318)." Thus, for Timshel et al., *violence* subsumes *abuse* and *maltreatment* with no clear differentiation among the three terms.

Emery and Laumann-Billings (1998), by contrast, distinguished between two levels of *abuse*—*maltreatment* (i.e., minimal or moderate forms of abuse, such as hitting, pushing, and name-calling) and *violence* (i.e., more violent abuse involving serious endangerment, physical injury, and sexual violation). Here, *abuse* is the broader term, and *maltreatment* and *violence* are considered subtypes of abuse, varying in level of intensity. By contrast, Heyman, Slep, Erlanger, and Foran (2012) refer to "intimate partner maltreatment" as "comprising physical abuse, emotional abuse, and sexual abuse," thus making *maltreatment* the broader and more inclusive construct.

To complicate the definitional issues, Emery (1989) argued that "calling an act 'abusive' or 'violent' is not an objective decision but a social judgment, a judgment that is outside of the realm of responsibility of social scientists"

(p. 322). Similarly, Follingstad (2007) noted that value judgments are inherent in the use of the term "psychological abuse." In her view,

> "Abuse" seems to imply that a judgment has been made, based on some standard, by which the psychological actions of one partner can be labeled as truly reprehensible and deserving of sanction…. In contrast, the terms "aggression" or "maltreatment" imply a range of actions, which could encompass mild, and possibly more typical, acts up through the most patently horrific behaviors which could be psychologically inflicted on another person. (p. 443)

In the United States, one can expect considerable disagreement regarding the abusiveness of many behaviors that have a long history of use within American families. One of the biggest debates in the field is whether corporal punishment should be considered inherently abusive. A major leader in the field of family violence, Murray Straus (2010), defined corporal punishment as "the use of physical force with the intention of causing [bodily] pain, but not injury, for purposes of correction or control of the child's behavior" (pp. 1–2)—thus emphasizing both intent and expectations concerning outcomes. He went on to explain, "Examples include spanking on the buttocks, hand slapping, shoving, grabbing or squeezing hard, ear twisting, pinching, and putting hot sauce or soap on a child's tongue (for example, for cursing)" (2010, p. 2). Straus also noted that substantiated cases of physical abuse have indicated that in at least two thirds of the cases, the abusive incident began as ordinary corporal punishment, and then escalated. If child abuse is defined as behaviors that put children at risk for injury, and both psychological and physical injuries are considered, then there is a basis for considering corporal punishment abusive because of the demonstrated negative effects of corporal punishment (Grogan-Kaylor, Ma, & Graham-Bermann, 2018; Grogan-Kaylor et al., 2018).

Consider the cases in Box 1.1, all of which involve corporal punishment of a child. Do you think the parents' behaviors in each case should be considered forms of maltreatment? Or would you see the behaviors as "ordinary discipline?" On what do you base your judgment?

All 50 of the United States, plus the District of Columbia, and other U.S. territories such as Puerto Rico have identified professionals who are mandated to report child maltreatment (Child Welfare Information Gateway, 2016a). Mandated reporters include teachers and other school personnel, healthcare personnel, social and clinical services personnel, and law enforcement personnel. In each of the cases described, someone considered the parental behavior abusive and reported the parent to authorities. What is your opinion concerning the decision to report in each of the cases in Box 1.1? As you read each brief description, did you think, "Wow, that's abusive! No justification for that parent's behavior! I hope someone turned him (or her) in"? Or did the parental behavior seem fairly "normal" under the circumstances? Have you heard of or been exposed to similar scenarios in your own lifetime? If so, what was your view of such episodes at the time?

Box 1.1   Are These Parents Maltreating Their Children?

....

A mother hits her 12-year-old daughter hard enough with a wooden spoon to leave bruises. Why did she do it? Because, she says, the daughter was "slacking off at school." (CBS.com, 2014)

While his wife and other children are at church, a father uses part of a wooden cutting board to slap his son's buttocks four or five times, leaving bruises. Why? Because, he says, the boy had stolen some liquor to share with his friends. (Lecker, n.d.)

A father spanks his 12-year-old daughter with a paddle. Why? Because, he says, the girl got into a heated argument with her sister. (Robinson, 2015)

A father hit his 11-year-old son hard enough with a folded belt to leave welts. Why? Because, he says, his son lied repeatedly about how he was doing in school. (Machelor, 2014)

In the first case, a local social service agency submitted the incident to a California state child abuse agency that screened prospective adoptive or foster care parents and child care workers. The case went to court and a Santa Clara County Superior Court judge ruled in favor of the mother, arguing that the beating with the spoon constituted "reasonable corporal punishment as a legitimate disciplinary measure."

In the second case, which took place in New Jersey, the boy's bruises were serious enough to get the attention of his coach at wrestling practice the next day. The coach contacted the local social service agency, as he was required by law to do. The father was charged with domestic violence and the case went to court. A jury acquitted him.

Regarding the third case, what do you think about a father paddling a 12-year-old daughter? Any red flags there? Ironically, the father himself thought there might be, so he called the local sheriff's office in Okeechobee County, Florida, and requested that the sheriff come watch the paddling so as to be sure it was not a crime. Apparently, that was not the first time that the sheriff's office in this community was asked to observe and give their blessings to physical disciplinary activities. Does this fact reassure you that no abuse was taking place?

The final case example of discipline with an object took place in Tuscon, Arizona. After the boy's father, who was the custodial parent, administered the whipping, the boy called his mother, the noncustodial parent, and she told him to call 911. He did so; his father was arrested, and the boy was put

in foster care. In this case, the father was initially indicted for felony child abuse, but the case was sent back, a second grand jury failed to indict him, and charges were reduced to misdemeanor child abuse.

Again, what is your view of these cases? Does the parental behavior seem to you like "reasonable and appropriate discipline," which is legal throughout the United States, or does it seem abusive, as the social service workers involved in these cases concluded? Do the parents' motives for striking their children with spoons or boards or belts influence your judgments? How about your own childhood experiences? Are your judgments concerning whether those parents' actions were abusive influenced by the ways your own parents reacted to any of your behaviors that they disliked or considered "bad" enough to need "correction" or "punishment"? If so, did you agree at the time that what you did was bad and deserved punishment? What do you think now about punishments you received as a child? Should individuals judge the abusiveness of particular behaviors by a parent against a child on the basis of their own experience?

Globally, there has been a strong movement to ban corporal punishment of children ever since the United Nations approved the Convention on the Rights of the Child, which stated

> States parties shall take all appropriate … measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation … while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

As of 2018, 54 countries worldwide had prohibited all forms of child corporal punishment and an additional 54 countries had indicated a commitment to full prohibition (Global Initiative to End All Corporal Punishment of Children, 2019). Nevertheless, within the United States, the extent to which corporal punishment should be considered abusive continues to be controversial, as evidenced by the case studies above. Although the percentages of adults who approve of corporal punishment may be declining, a substantial proportion of parents in the United States continue to physically punish their children (Gershoff, Lee, & Durant, 2017), although many professional organizations, such as the American Psychological Association and the American Academy of Pediatrics, have issued statements recommending against the practice. Despite efforts to develop programs to reduce corporal punishment (Gershoff et al., 2017), there continues to be considerable resistance to a ban on corporal punishment among some professionals as well as laypeople in the United States. Box 1.2 provides a sampling of major social science perspectives on the issue. Each of these authorities presents empirical data in support of his or her position, and there are no signs that the differences will be resolved soon. We consider these issues in greater detail in Chapters 3–5.

After reading all of these "expert opinions" from workers in the field of child maltreatment, what is your current view on the acceptability of corporal

Box 1.2   Is Corporal Punishment Abusive?

Violence against children, including corporal punishment, is a violation of the rights of the child. It conflicts with the child's human dignity and the right of the child to physical integrity. It also prevents children from reaching their full potential, by putting at risk their right to health, survival and development. The best interests of the child can never be used to justify such practice, the need to promote non-violent values and awareness-raising among all those working with children is essential if we want this situation to come to an end. (Office of the High Commissioner on Human Rights, 2013, para 2)

Parents should, however, retain the option to use spanking appropriately, unless they have abused that option. Current research indicates that customary spanking is not associated with child outcomes that are any more adverse than the outcomes of any other type of corrective discipline. The most empirically supported use for a two-swat spanking is when two- to six-year-olds respond defiantly to nonphysical disciplinary tactics, such as time-out, or when imposed to stop dangerous misbehavior. (Larzelere & Baumrind, 2010, p. 86)

Spanking is not a very effective strategy. It does not teach children new behaviors or what to do in place of the problem behavior. It is also not useful in suppressing the problematic behavior beyond the

moment. Research indicates the rate of misbehavior does not decline, in fact, the problem behavior returns, even if the parent escalates the punishment. (Kazdin, 2010, p. 1)

[We] encourage adoption of functional impairment as the standard for evaluating the reasonableness of the force used and thus for drawing the line between reasonable corporal punishment and abuse. We promote this standard to ensure that the state has the authority to intervene in the family in the face of good evidence that a child has suffered or risks suffering important disabilities, and to restrict state authority to intervene merely to mediate suboptimal conditions. (Coleman, Dodge, & Campbell, 2010, p. 112)

Among the outcomes in childhood, spanking was associated with more aggression, more antisocial behavior, more externalizing problems, more internalizing problems, more mental health problems, and more negative relationships with parents. Spanking was also significantly associated with lower moral internalization, lower cognitive ability, and lower self-esteem. The largest effect size was for physical abuse; the more children are spanked, the greater the risk that they will be physically abused by their parents. (Gershoff & Grogan-Kaylor, 2016a, p. 463)

punishment? What further information, if any, would you like to have to inform your point of view?

While agreeing that terms like maltreatment represent social constructions and value judgments, we believe that social and medical scientists are in some ways uniquely qualified to provide evidence concerning the harmfulness of

particular behaviors on the well-being of their recipients, others with whom those recipients interact, and even the larger community within which the recipients of those behaviors must function. Indeed, in considering the kinds of behaviors and interactions that may be harmful to members of families (broadly defined to include LGBTQ relationships and cohabiting couples), we prefer the term *maltreatment* to the other commonly used terms, in part because of the explicit value judgment built into the prefix "mal."

Thus, our conceptual framework is consistent with, although more encompassing than, the World Health Organization's (WHO, 2018, p. 1) definition of *childhood maltreatment*:

> **Child maltreatment** *is the abuse and neglect of people under 18 years of age. It includes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power.*

In this book, our term *maltreatment* embraces *corporal punishment* as well as *abuse*, *neglect*, *family violence*, *wife beating*, *domestic violence*, *child abuse*, *sexual abuse*, *spousal abuse*, and *elder abuse*, as these are commonly defined. We acknowledge that some forms of maltreatment are more serious than others. Children who receive a single slap on the hand or the buttocks during childhood are not being maltreated to the same degree as a child who is raped, or beaten every day, or constantly criticized and humiliated. However, we view all these behaviors as forms of maltreatment, nonbeneficial ways for individuals to treat each other, inside or outside of families. As Straus has repeatedly pointed out, even acts that seem like relatively minor forms of maltreatment (e.g., spanking) are risk factors for negative outcomes for individuals and society (Straus & Kaufman Kantor, 2005). Although our conceptual preference is for the term *maltreatment*, most researchers in family violence study forms of maltreatment that they consider more extreme; therefore, throughout this book, we generally use the term that the researchers used to describe the particular form of maltreatment of interest to them.

Definitions of terms such as maltreatment are embedded in broader perspectives on human beings, families, and intimate relationships. During the second half of the 20th century, new perspectives emerged within the international community, including the view that the more vulnerable members of the human race (particularly women, children, the elderly, and people with mental and physical disabilities) have an inherent right to freedom from exploitation and abuse. Concurrent with the evolution of that perspective, many countries criminalized forms of family aggression that had a long history of normative acceptance—for example, the beating and rape of

wives and children. Accompanying the *criminalization* of such behaviors has been a *medicalization* of their effects (Sweet, 2015). **Medicalization** refers to perceiving a behavior, such as child maltreatment, as a medical problem or illness, and expecting the medical profession to treat the problem. The medical communities in many countries, including the United States, have increasingly been given and/or have assumed the responsibility not just to heal intentional burns, set broken bones, and mend bruised and battered skin, but to alert legal and social service agencies about behaviors now deemed abusive. Sweet (2015) has argued that this process of medicalization can have unfortunate consequences for women, who may come to be seen merely as a high-risk group, with little ability to take control of their own lives.

Just as the concept of "family" has been broadened to include nonmarital cohabiting relationships and same-sex intimate relationships, legal protections against spousal abuse have increasingly been expanded to include nonmarital relationships. Also, because most definitions of abuse emphasize negative outcomes, the social science community has directed intensive efforts at providing a scientific basis for defining, studying, and intervening in situations of family violence and abuse. In the next sections, we provide a brief introduction to major perspectives on maltreatment in family settings. Many of these perspectives reflect assumptions held before individuals selected a profession or assumptions developed as part of their professional training and experience. These perspectives, which may guide important decisions concerning the current or future well-being of victims of family maltreatment, may or may not have a solid theoretical or empirical basis. This section is followed by an overview of several theories of familial maltreatment. During the past several decades, increasing work has been done to empirically test such theories in order to improve our understanding of the predictors and consequences of maltreatment and to provide a foundation for intervention and prevention efforts.

Perspectives on Maltreatment

The Human Rights Perspective

One persistent and ethically problematic view on human rights is that they are privileges granted by people in power to those who are less powerful. For much of human history, women and children were seen as having no rights separate from those that men offered them—and such rights were generally extremely limited. A second major view is that human rights are *inherent* in being human. This second view is embodied in the United States Declaration of Independence: "We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness." It is also embodied in international human rights agreements promulgated by the United Nations and other nongovernmental organizations (NGOs).

Emerging from the horrors of World War II, wherein "disregard and contempt for human rights have resulted in barbarous acts which have outraged the conscience of mankind," the newly born United Nations adopted the task of establishing a lasting peace. One of its first accomplishments (1948) was the Universal Declaration of Human Rights, which proclaimed "all members of the human family" have "equal and inalienable rights" and that recognition of these rights is "the foundation of freedom, justice, and peace in the world" (United Nations, Universal Declaration, Preamble, para. 1). Article 5, which is most relevant to family maltreatment, states "No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment."

Since the passage of the Universal Declaration, the United Nations has promulgated other international treaties addressing the rights of individuals to freedom from maltreatment, even within their own families. The Convention on the Rights of the Child (Office of the High Commissioner for Human Rights, 1989) specifies that member states

> *shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child. (Article 19)*

According to this Convention, assuring such rights to children is necessary in order to rear them "in the spirit of the ideals proclaimed in the Charter of the United Nations, and in particular in the spirit of peace, dignity, tolerance, freedom, equality and solidarity" (Preamble, para. 7). Thus, the international promulgators of this document, like many social scientists in the United States, recognize a connection between eschewing violence in the home and promoting international peace.

Child advocates in many countries have argued that corporal punishment violates the United Nations Convention on the Rights of the Child. Indeed, Knox (2010) strongly contended that "[h]itting children is an act of violence and a clear violation of children's human rights" (p. 103). The European Network of Ombudspersons for Children (ENOC) (2015) urged the governments of all European countries, as well as NGOs concerned with children, to work to end all corporal punishment. In their view, "eliminating violent and humiliating forms of discipline is a vital strategy for improving children's status as people, and reducing child abuse and all other forms of violence in European societies" (para. 2). ENOC concurred that no level of corporal punishment is compatible with the Convention on the Rights of the Child and that legal and educational steps should be taken to eliminate it. The Global Initiative to End All Corporal Punishment of Children (2013) recommends that every time a government reviews its laws regarding children, advantage should be taken of this opportunity to prohibit corporal punishment of children.

The United States is the only country in the world that has not ratified the Convention on the Rights of the Child (UNGA, 2017). One principal reason for the resistance is that treaty ratification requires support from two

thirds of the U.S. Senate—a level of support that has been lacking because of Republican Party opposition linked to fierce hostility among conservative groups, including the Christian Coalition, the Family Research Council, Focus on the Family, and the John Birch Society (Wittner, 2015). Conservatives argue, for example, that the Convention would override important U.S. legislation, including laws permitting children under the age of 18 to be jailed for life, with no possibility of parole.

Another important declaration adopted by the United Nations General Assembly was the Declaration on the Elimination of Violence Against Women (CEDAW), endorsed by all member states of the United Nations, and signed and ratified by almost all of them. According to this Declaration,

> violence against women means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life. (United Nations, Declaration on the Elimination of Violence against Women, 1993, Article 1)

Nongovernmental agencies (NGOs) also take a stand against maltreatment in domestic settings. For example, Amnesty International maintains (2018b, para. 1) "Living free from violence is a human right, yet millions of women and girls suffer disproportionately from violence both in peace and in war…. States have the obligation to prevent, protect against, and punish violence against women." Meyersfeld (2015, p. 15) argued that over the last 50 years,

> International law began to recognize the peculiar way in which violence and sexism intersect, and how violence against women is used as a technique of subordination, a method of inculcating a culture of fear, and an instrument that impedes women's ability to flourish. As a result, previously lawful actions are now categorized as human rights violations, and patterns of behavior, once condoned, are now condemned.

As of 2017, the United States is one of the two countries (the other is Palau) that have signed but not ratified the Convention on the Elimination of Discrimination Against Women (UNHR, 2017). Other governments that have taken no action on this convention are the Holy See, Iran, Niue, Somalia, Sudan, and Tanga. Although late in 2011, President Obama had a list of UN treaties to be ratified, including the Convention of the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination against Women, the opposition in the U.S. government prevented the Senate from ratifying these treaties, which need to get two thirds of the votes to pass, as required by the U.S. Constitution for passage of a treaty (Schast, 2014).

The international human rights perspective emphasizes the relationship between social justice and individual rights to freedom from abuse and between peaceful resolution of conflict in the home and peaceful resolution of conflict in the international community. Proponents of a human rights perspective are often critical of *systemic* or *structural* abuse and the way social

institutions and social systems can contribute to violence within families at an individual level (e.g., Kent, 2006; Montesanti & Thurston, 2015; Schwebel & Christie, 2001). These sources generally emphasize the ways in which poverty and a variety of isms can contribute to frustration, despair, and violence within families.

Inherent in the international human rights perspective is the view that the United Nations Conventions and the rights they are designed to guarantee are based on universal ethical principles such as the Golden Rule (i.e., "Do unto others as you would have them do unto you."). Reading et al. (2009) attested that although the United Nations Convention on the Rights of the Child is a legal document, it is based on ethical and moral foundations, and the rights granted to children around the world are comparable to the basic principles of medical ethics (beneficence, justice, nonmalfeasance, and autonomy). Rose (2015) identified IPV toward women by men as a *crime against humanity*. In a U.S. Department of Immigration Board of Immigration Appeals case, domestic violence was labeled "a crime involving *moral turpitude*" (p. 465), and infliction of serious injury on individuals viewed as deserving special protection, such as children or domestic partners, was labeled "moral depravity" (p. 466) (U.S. Department of Justice Executive Office for Immigration Review, Board of Immigration Appeals, 2011). What are your views on the moral implications of violence? Should all forms of family violence be considered immoral? Do you think violence in the family could be connected to violence in neighborhoods? Countries? The world? Do you think recognition of the immorality of family violence could be an important step away from widespread consideration of family violence as commonplace or "normal"?

Legal/Criminal Justice Perspectives

Although the United Nations Convention on the Rights of the Child has some legal status in international law, its main function has been to establish a universal standard that the international community has agreed to adopt. To our knowledge, the World Court has not tried any cases of family maltreatment. However, the European Court of Human Rights, established by the European Convention on Human Rights and Its Five Protocols, has addressed cases of family violence originating in a number of different European countries (e.g., European Court of Human Rights, 2018).

In general, the legal approach to family maltreatment in the United States has been to criminalize it. The focus is on both punishment and deterrence. Criminalization has involved mandating members of medical and social service professions to report suspected cases of abuse and imposing criminal penalties on perpetrators of acts identified as abusive. Although the United States has not ratified the Convention on the Rights of the Child, it has criminalized abuse of children, domestic partners, and the elderly. According to the federal Child Abuse Prevention and Treatment Act (CAPTA),

> *child abuse and neglect is, at a minimum, any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or*

emotional harm, sexual abuse or exploitation of a child (individual under the age of 18) and any act or failure to act which presents an imminent risk of serious harm. (42 U.S.C. 5106g)

However, each state has its own set of laws, and, in contrast to the stance taken in many European countries, corporal punishment by parents is legal in every state. Moreover, it is rare for perpetrators of child abuse to be criminally prosecuted, unless serious injury, death, or sexual abuse is involved; typically, child abuse cases are handled by child protective service agencies (Krugman, 2018).

Passed in 1994 as part of an Omnibus Crime Bill, modified in 2002, 2005, and 2013, the Violence Against Women Act (VAWA) was revolutionary in its provisions for addressing violence against women, including wife abuse. The Act faced fierce opposition in 2012–2013 from conservative Republicans objecting to extending its protections to same-sex couples and making it possible for battered illegal immigrants to gain temporary visas; it was finally reauthorized in 2013. Despite its name, VAWA has antidiscrimination language that aims to protect *all* victims, regardless of gender, race/ethnicity, religion, social class, and now sexual orientation and gender identity. Yet, victims of domestic violence who are sexual minorities or men still report having trouble accessing services (see Chapters 8 and 10), and many domestic violence agencies report an inability and/or unwillingness to serve sexual minorities and men (Hines & Douglas, 2011). An International Violence Against Women Act (I-VAWA) has been introduced in Congress several times in recent years, most recently in 2018, but thus far has failed to pass. One of the principal complaints concerning the Act is that it fails to account for violence against men and boys.

In addition to criminalizing particular forms of family violence, the government has also enacted some legislation to provide services for victims. For example, the VAWA created new programs within the Department of Health and Human Services (HHS) with the goals of reducing domestic violence, improving the response to incidents of domestic violence, and promoting recovery from domestic violence (Sacco, 2014). Even before passage of the VAWA, Congress enacted the Family Violence Prevention and Services Act (FVPSA, P.L. 98457) to assist states in providing shelter and other assistance to victims of family violence and their dependents. The Child Abuse Amendments of 1984 (P.L. 98–457) included authorization of the Family Violence Prevention and Services Act (FVPSA). Located in the Family and Youth Services Bureau (FYSB), FVPSA provides support for emergency shelter and supportive services for victims of domestic violence and their dependents. The federal Older Americans Act provides definitions of elder abuse and authorizes expenditure of federal funds for a National Center on Elder Abuse but does not fund adult protective services or shelters for abused older persons. Every state has its own set of statutes criminalizing abuse of women and elders and its own procedures for investigating complaints and prosecuting violators. Actual practices often fall far short of the intent of the

law; however, there has been enormous change since the days when the criminal justice system saw itself as not concerned with any violence short of murder that took place behind the closed doors of the family home (Guzik, 2009).

Although physical assault of women in intimate relationships has received increasing attention over the years, *marital rape* was a virtual oxymoron until the 1990s. The so-called marital rape exemption, mandating that forced sex of a wife by a husband could not be considered a form of rape, had its basis in English common law, according to which wives, by virtue of the marital contract, gave themselves willingly and irrevocably to their husbands (Bennice & Resick, 2003). It was not until July 5, 1993, that all states had enacted legislation to criminalize the rape of wives; however, many laypeople are unaware that wife rape is now considered a crime, and still others do not believe it can or should be a crime (Malley-Morrison & Hines, 2004). Moreover, there continues to be widespread acceptance of the idea that sexual assault within the context of marital or other intimate relationships is less serious and less likely to have negative consequences than sexual assault by a stranger (Randall & Venkatesh, 2015). Although marital rape laws technically would apply to women who rape their husbands—or rape within same-sex marriages—we know of no relevant arrests or court cases. However, we do know that sexual assault and coercion by women against their male partners occurs (Cook, Morisky, Williams, Ford, & Gee, 2016; Hines & Douglas, 2015, Unpublished data) and that sexual assault occurs within same-sex relationships as well (Walters et al., 2013).

Although the principal legislation relating to family maltreatment provides funding for educational and social service programs, the legal perspective emphasizes the criminal justice system response to violation of federal and state statutes. Studies using legal definitions of abuse typically report the number of cases of identified child, intimate partner, or elder abuse reported to protective or social service agencies. Such reports provide a vast underestimation of the actual frequency of maltreatment in families because many cases are never reported to any agency. Moreover, many statutes related to maltreatment have exemptions. For example, in every state, the child abuse statutes have exemptions allowing parents to use "reasonable force" for purposes of child discipline and control. However, the laws fail to provide clear guidelines that differentiate acts considered as "reasonable force" from those that are not (Straus, Douglas, & Medeiros, 2014). Moreover, many states still have exemptions from prosecution for a husband raping his wife (Jackson, 2015), such as when he does not have to use force to make her have sex (e.g., if she is physically or mentally impaired and unable to give consent). What is your view of such omissions?

Medical Perspectives

Maltreatment in families has been recognized not just as a human rights and a legal issue but also as a medical issue. On an international level, the World

Health Organization (WHO, 2016) recognized that interpersonal violence, particularly against women and children, persists in every country in the world and represents a major global challenge to public health. To address this problem, WHO (2016) formulated a global plan of action to strengthen the role of the international health system in combatting these forms of violence. Within the United States, professional organizations such as the American Academy of Family Physicians (2004) have also noted that family violence is a public health issue of epidemic proportions. The medical perspective on maltreatment tends to focus on recognizing symptoms, identifying causes, and providing treatment. Medical practitioners frequently view the causes of maltreatment as having a biological component (e.g., substance abuse, psychiatric disorders). For example, recent neuroscience research indicates that partner-abusive men may have a number of contributing medical problems (e.g., traumatic brain injury [TBI]); they have, thus, recommended biomedical interventions designed to alleviate the symptoms of these conditions and thereby, presumably, reduce aggression against the partner (Howard, 2011).

From this medical perspective, perpetrators are often viewed as victims themselves and more in need of treatment than of criminal prosecution. For this and many other reasons (including assumptions that the social welfare system does not always respond appropriately and concern about creating barriers to patient care), medical personnel often do not report the cases of maltreatment they are mandated to report (Phelan, 2007; Zellman & Fair, 2002). What is your view of this practice? Should judgments about whether a particular case of family violence requiring medical care should be reported to authorities be left to the doctors and nurses dealing with the case or could their judgments about what will or will not be helpful result in failure to protect?

Social Service Perspectives

The social service system has generally had a much broader perspective on family violence than the medical or legal systems, traditionally viewing maltreatment within family settings as a symptom of family crisis and a need for services. The social service system has been more concerned with ameliorating conditions that give rise to maltreatment than with promoting the prosecution of offenders or providing medical treatment to victims. Much of the emphasis on acts of omission (neglect) in definitions of child and elder maltreatment is derived from social service perspectives. Workers within the field have often emphasized the role of external forces—for example, poverty and discrimination (Chung et al., 2016)—in contributing to childhood maltreatment and other forms of childhood adversity. Goodman, Smyth, Borges, and Singer (2009) described how poverty can both contribute to and result from IPV. Goodman and Smyth (2011) noted that domestic violence occurs within community contexts that can operate to either maintain or alleviate the problem and suggest that domestic violence services should

adopt a more network-oriented approach to the problem, promoting partnerships between professionals and survivors' informal social support networks.

Within the social service literature, there has been increasing emphasis on **intersectionality**, a perspective that focuses on the intersection of race, class, gender, and other social/cultural aspects of identity, such as religion and sexual orientation, along with hierarchical power systems privileging some groups (e.g., Whites, males, the rich) over other groups (e.g., people of color, females, the poor) in shaping people's experiences, including their experiences with domestic violence (e.g., Sokoloff & Dupont, 2005). For example, Ragavan, Fikre, Millner, and Bair-Merritt (2018) argued that to intervene effectively with South Asian children living in the United States and exposed to domestic violence, social service agencies should adopt an intersectional perspective that attends not only to ethnic background but also to cultural identity, gender, immigration status, and relationships with family and community.

Need for Multidisciplinary Cooperation

In many cases of family maltreatment, representatives of the legal, medical, and social service professions all become involved. A coordinated approach of these various services is often hard to achieve because of the differing definitions and perspectives within these professions. Members of the legal profession want to pursue prosecution of the perpetrator if they believe they can "win" their case. Medical practitioners are more concerned with providing treatment for victims and perpetrators, but typically see it as beyond their purview to address any problems of poverty, community violence, and despair besetting the family. Social service personnel may believe that any focus on helping, prosecuting, or changing individuals is shortsighted and emphasize the need to find better housing and employment for family members and address substance abuse problems. Perhaps in part because of the very breadth of their perspective, social service systems have been overwhelmed by family violence cases in recent decades and are not always able to respond appropriately. A number of legal cases (e.g., Therolf, 2016) have been brought against local social service agencies for maltreating their clients or failing to serve them adequately.

Consider the case of L.J.B.—a baby born to a woman who abused drugs during pregnancy, thereby putting her unborn child at risk—in Box 1.3. How did the differing perspectives of the various relevant agencies play out in this case? A government social and protective service agency, the Pennsylvania Department of Child and Youth Services (CYS), maintained the position that L.J.B.'s mother was guilty of child abuse and that her baby should be kept away from her. Three appeal court justices agreed with CYS but two other justices raised serious concerns about the CYS decision—suggesting, for example, that labeling an addicted mother as a

Box 1.3   If a Woman Abuses Drugs During Pregnancy, Is She Guilty of Abusing Her Unborn Child?

L.J.B.'s mother tested positive for opiates, benzodiazepines, and marijuana while pregnant with *L.J.B.*, who, when born in February, 2017, suffered from withdrawal symptoms necessitating hospitalization. During *L.J.B.*'s 19 days of treatment, the Pennsylvania Department of Child and Youth Services (CYS) took custody of the baby, accusing the mother of child abuse under Pennsylvania's Child Protective Services Law (CPSL). *L.J.B.*'s parents protested the CPS decision in the Clinton County Common Pleas Court, which ruled in favor of the parents, arguing that the mother's prenatal drug abuse did not constitute child abuse because it occurred when *L.J.B.* was a fetus and a fetus is not legally considered to be a child. CYS appealed to the state Superior Court, which, with three jurors arguing for CYS and two jurors arguing in favor of the parents, concluded that "a mother's use of illegal drugs while pregnant may constitute child abuse under the CPSL if CYS establishes that, by using the illegal drugs, the mother intentionally, knowingly,

or recklessly caused, or created a reasonable likelihood of, bodily injury to a child after birth. We therefore vacate the order and remand for further proceedings." Ultimately, the case went to the Pennsylvania Supreme Court. Arguments on behalf of the mother were filed on May 13, 2018, by the Women's Law Project, with supportive briefs from the Support Center for Child Advocates, Community Legal Services, the National Advocates for Pregnant Women, the Drug Policy Alliance, and the ACLU of Pennsylvania. These particular social service and legal agencies made the case that prenatal exposure to drugs should not be considered child abuse because ultimately such punitiveness toward the mother would harm children, impose lasting limitations on children and children's families, undermine public health, deter women from seeking medical care, undermine human rights, and involve a risky over-interpretation and over-expansion of the Child Protective Services Law.

Source: Women's Law Project (2018).

child abuser might make it less likely for women to seek help for addiction during pregnancy or receive prenatal care.

At the time of this writing, no final determination had been made in this case. What is your view of what the final judgment should be? Should the parents be allowed to keep their baby? Under any circumstances? Under supervision? Do you think the differing perspectives we discussed—legal/criminal, medical, social service—would have differing opinions as well? If so, what would they likely be?

Disrespect for each other's professions may often hamper cooperation among representatives from different agencies. For example, although several United States Supreme Court decisions in the post-World War II years (e.g., *Brown v. Board of Education of Topeka*, 1954; *In re Gault*, 1967) provided some recognition that juveniles have rights protected by the Constitution, more recent decisions by a more conservative Supreme Court have eroded some of these rights, in part because of a decreased willingness to attend to social science data (Walker, Brooks, & Wrightsman, 1999). For example, "Justice Scalia consistently has considered social science studies to be irrelevant when deciding on constitutional law; for him, the only 'empirical' materials of relevance… are legislation and jury decisions" (Walker et al., 1999, p. 11).

Ecological Models of Maltreatment

Many theories have been formulated about various forms of family violence, and most of these theories reflect broader views (paradigms) about human nature. The dozens of competing theories concerning the causes of child, intimate partner, and elder maltreatment can all be incorporated into an *ecological paradigm*—which we do in the sections that follow.

In general, the prevailing ecological paradigm within the field of family violence derives from the work of Bronfenbrenner (1979), who argued that human development and behavior should be analyzed within a nested set of environmental contexts or systems. The *microsystem* consists of the relations between developing individuals and their immediate settings (e.g., the home). The *mesosystem* consists of relations among the settings in which the developing individual is involved (e.g., between home and school). The *exosystem* includes the larger neighborhood, the mass media, state agencies, and transportation facilities. Finally, the **macrosystem** consists of broad cultural factors, including views about the role of children and their caretakers in society. In an important modification of the theory, Belsky (1993) argued that the ecological system includes an *ontogenetic* or *individual/developmental* level—that is, the unique biological/genetic characteristics that exist even before birth and that individuals bring to every interaction. These biological/genetic characteristics change during the process of development under the influence of both nature and nurture. Building on the Bronfenbrenner/Belsky model, researchers have identified co-occurring causes of child maltreatment (e.g., Algood, Hong, Gourdine, & Williams, 2011; Begle, Dumas, & Hanson, 2010; MacKenzie, Kotch, & Lee, 2011; Tucker & Rodriguez, 2014), IPV (e.g., Dixon & Graham-Kevan, 2011; Exner-Cortens, Eckenrode, John Bunge, & Rothman, 2017; Goodlin & Dunn, 2010), and elder abuse (e.g., Labrum & Solomon, 2015) at several different ecological levels. Inherent within an ecological perspective is the dictum that, to understand how so many people can maltreat family members or other intimates, we need to understand many factors: the genetic endowments and evolving biological/neurological processes of those individuals; the

microsystem in which they grew up; the microsystem in which they are currently embedded; characteristics of the neighborhood within which their family functions (including the availability of social support and social services, and relationships between the community and the criminal justice system); and the larger social systems that influence the neighborhoods within which they live. From this ecological perspective, maltreatment is the product of the genetic endowments, psychoneurological functioning, behaviors, cognitions, and effects of the individual at the center of the nested set of ecological contexts, as well as of the genetic endowments, psycho-neurological functioning, behaviors, cognitions, and effects of the other actors at each ecological level.

There have been and continue to be single-factor or single-process theories of maltreatment that focus on causes at just one particular level of the ecological framework. Empirical research addressing hypotheses concerning causes of maltreatment has confirmed that there are identifiable risk factors at every ecological level. Table 1.1 provides examples of studies that support assumptions from several current theories of maltreatment in families, all of which are relevant to one or more levels of an ecological model. The table also indicates the ecological level being addressed by each theory and representative study and the particular focus of each study.

Individual/Developmental Theories

As part of the normal development process, characteristic ways of thinking, feeling, and behaving evolve in individuals along with their physical maturation. Individual/developmental theories of maltreatment in families focus on the ways of thinking, feeling, and behaving—and the biological bases of those thoughts, feelings, and actions—that individuals bring to their relationships and interactions with others as perpetrators and victims of maltreatment. The core of an ecological framework begins with the individual.

Biological Theories

Studies linking biology to the perpetration of IPV generally fall into one of four major areas: head injuries; psychophysiological processes; neuro-chemistry, metabolism, and endocrinology; and genetic factors (Pinto et al., 2010). Based on their review of the psychophysiological studies of batterers, Pinto et al. (2010) suggest that although the results across studies are not fully consistent, there is some evidence that batterers may experience irreg-ularities in autonomic nervous system functioning that lead to problems in emotion regulation and thereby to IPV. A review of studies of TBI in IPV perpetrators revealed that across six studies, more than half of the perpetrators had a history of TBI—a prevalence substantially higher than in the general population (Farrer et al., 2012). In a study of offenders with

Table 1.1 Major Theories of Family Violence and Representative Studies Within an Ecological Paradigm

Theory	Supportive Study	Focus	Key Assumptions and/or Findings
Biological Individual/Developmental Theories			
Biological theories	Klinesmith, Kasser, and McAndrew (2006)	Interaction with a handgun, testosterone levels, and aggressive behavior in males	In an experiment with college males, handling a gun was associated with increases in testosterone levels and in interpersonal aggression in part by increasing testosterone levels. The effect of the guns on aggression was significantly mediated by changes in testosterone.
	Pinto et al. (2010)	Review of research on biological correlates of intimate partner violence (IPV) perpetration	In abusive males, the combination of decreased serotonin levels, increased testosterone levels, reduced hypothalamic activity, and reduced cortical and subcortical structural activity (which aids in mediating fear-related aggression) results in a predisposition to react violently to perceived or actual threats from their partners.
	Farrer, Frost, and Hedges (2012)	Meta-analysis of published studies on prevalence of traumatic brain injury (TBI) in IPV perpetrators	Across studies, more than 50% of the IPV perpetrators had a history of TBI, a prevalence rate significantly higher than estimates of TBI in the general population.
	Skowron, Cipriano-Essel, Benjamin, Pincus, and Van Ryzin (2013)	Maternal physiological responses in child-maltreating and nonmaltreating mothers during a	Physically abusive mothers displayed a markedly different pattern of associations between respiratory

Theory	Supportive Study	Focus	Key Assumptions and/or Findings
		laboratory-based joint challenge with their preschool children	sinus arrhythmia (RSA) scores (a measure of parasympathetic nervous system influence on heart rate) and parenting behaviors. For example, among abusive mothers, higher resting RSA was correlated with less positive parenting and greater strict/hostile control parenting during the joint task.
	Crane and Easton (2017)	Medical correlates of IPV in offenders with alcohol use problems	Recent perpetration of physical IPV was more than twice as likely in participants having a medical condition, with brain injury, cardiac issues, and pain being particularly strong predictors of IPV.
Behavioral genetics	Hines and Saudino (2004)	Genetic and environmental contributions to use and receipt of partner aggression in adult twins	Monozygotic twins, in contrast to dizygotic twins, were remarkably similar to each other in frequency of physical and psychological IPV, suggesting an important genetic contribution. Specifically, approximately 16% and 22% of the variance in physical and psychological aggression could be accounted for by the monozygotic twins' shared genes.
	Barnes, TenEyck, Boutwell, and Beaver (2013)	Data from the National Longitudinal Study of Adolescent Health were analyzed to explore	Genetic factors explained around 50% of the variance in each of three IPV indicators (hitting one's partner,

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Table 1.1 *(Continued)*

Theory	Supportive Study	Focus	Key Assumptions and/or Findings
		intergenerational transmission of intimate aggression	injuring one's partner, and forcing sexual activity on one's partner).
	Stuart, McGeary, Shorey, Knopic, Beaucage, and Temple (2014)	Relationship between a cumulative genetic score (CGS) and IPV	A cumulative genetic score was significantly associated with physical and psychological aggression and injuries to one's partner.
Nonbiological Individual/Developmental Theories			
Attachment	Grych and Kinsfogel (2010)	Family aggression, attachment style, and dating aggression in 391 ethnically diverse adolescents	In boys, the relationship between aggression in the family and aggression in the dating relationship was strongest for those high in attachment anxiety. In girls, the relationship between interparental aggression and abusive behavior toward dating partners was strongest in those high in avoidant attachment.
	Rodriguez and Tucker (2011)	Insecure attachment and child abuse potential	Insecure attachment style, independent of domestic violence history, predicted dysfunctional parenting practices and child abuse potential.
	Clift and Dutton (2011)	Role of attachment in female dating aggression perpetration	Fearful attachment was moderately positively correlated with perpetration of dating aggression, particularly psychological aggression, by young women.

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	Ulloa, Martinez-Arango, and Hokoda (2014)	Insecure attachment and adolescent dating violence	In a 10-month longitudinal study of adolescents, insecure (anxious) attachment at Time 1 was associated with perpetration of dating violence at Time 2. This relationship was mediated by symptoms of depression.
	Hocking, Simons, and Surette (2016)	Anxious attachment, childhood maltreatment, and adult victimization	Anxious attachment partially mediated the relationship between childhood maltreatment and victimization as an adult, including maltreatment by a partner.
	Rholes, Paetzold, and Kohn (2016)	Disorganized and anxious attachment, childhood maltreatment, and partner aggression	Adult disorganized attachment as well as an anxious attachment style mediated relationships between childhood maltreatment and externalizing behaviors, including anger and aggression toward partners.
Social information processing/cognitive behavioral theories	Rodriguez, Garcia, and Lila (2016)	Attitudes and attributions as predictors of risk of child physical abuse in expectant parents	Higher approval of parent–child aggression, lower empathy, and more negative child behavior attributions independently predicted abuse potential.
	Rodriguez, Smith, et al. (2016)	Attitudes and attributions as predictors of risk of child physical abuse in expectant parents	Positive attitudes regarding parental aggression toward children, negative child attributions, and higher compliance

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Table 1.1 *(Continued)*

Theory	Supportive Study	Focus	Key Assumptions and/or Findings
			expectations predicted risk for parent–child aggression.
	Rodriguez, Garcia, et al. (2016)	Empathy, anger, attitudes toward parent–child aggression, and child abuse potential in male IPV offenders	Higher approval of parent–child aggression, lower empathy, and more negative child behavior attributions independently predicted abuse potential.
Social learning	Gomez (2011)	Child abuse, adolescent dating aggression, and IPV	Child abuse and adolescent dating violence predicted IPV victimization and perpetration in both men and women.
	Smith-Marek et al. (2015)	Meta-analytic review of 124 studies of childhood violence and adult IPV	Findings from this meta-analytic review partially supported the social learning theory that family-of-origin violence is associated with adult IPV perpetration and victimization, but the relationship between childhood violence and IPV perpetration was stronger in males than in females, and the relationship between childhood violence and IPV victimization was stronger in females than in males.
	Widom, Czaja, and DuMont (2015)	Self-reported childhood maltreatment and child maltreatment reports for offspring	Individuals with childhood histories of childhood abuse and neglect had higher rates of being reported to CPS for maltreating their own children than their matched comparisons but did

Theory	Supportive Study	Focus	Key Assumptions and/or Findings
			not self-report more physical and sexual abuse. Findings supported intergenerational transmission of neglect and sexual abuse but not physical abuse.
	Bartlett, Kotake, Fauth, and Easterbrooks (2017)	Self-reported childhood maltreatment and child maltreatment reports for offspring	Young mothers with a history of at least one maltreatment report during their own childhood were significantly more likely to be reported for maltreating their own children.
Microsystem Theories			
Systems theory	Tucker, Finkelhor, Turner, and Shattuck (2014)	Sibling victimization and family dynamics	In general, sibling victimization was associated with negative family dynamics; severely abused siblings had even less parental warmth, poor parental supervision, and greater exposure to interparental conflict and family violence than children experiencing more common types of victimization.
Stress theory	Roberts, McLaughlin, Conron, and Koenen (2011)	Adult stressors, childhood adversity, and risk of IPV	For males who had experienced a high level of childhood adversity, recent stressors were associated with heightened risk to commit an act of IPV (as compared to men with low levels of childhood adversity). For women, high levels of childhood adversity

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Table 1.1 *(Continued)*

Theory	Supportive Study	Focus	Key Assumptions and/or Findings
			and recent stressors were associated with increased IPV risk.
	Maguire-Jack and Negash (2016)	Neighborhood social service accessibility, parental stress, and child maltreatment	Parental stress, mental health concerns, and economic hardship were all positively associated with child abuse and neglect. Social service availability moderated the effect of parental stress on child physical abuse.
Exosystem Theories			
Ecological theories	Goodlin and Dunn (2010)	Domestic violence victimization in different types of household—single victimization (just one violent episode), repeat victimization (one victim attacked repeatedly), and violence co-occurrence (more than one victim in household)	In households in which family violence occurred, the number of individuals within the household was significantly positively correlated with repeat and co-occurring forms of victimization. Victims without a high school diploma were significantly more likely to live in a household with co-occurring forms of victimization than a household where the same victim suffered from multiple violence incidents, and those victimized by ex-spouses, parents/stepparents, siblings, and other relatives were more likely to live in co-occurrence households than those victimized by current spouses.
	Molnar et al. (2016)	Neighborhood conditions and child abuse	Neighborhoods characterized by higher levels of