

Family Abuse and Violence

JoAnn Langley Miller and Dean D. Knudsen

with Stacey Copenhaver

“Do you know,” my father said ... “there’s only one person who could have given you the strength to leave me” ... I looked at him. “You?” I said, at last. “Yes,” he said. (Harrison, 1997, p. 192)

At age 20 a thoughtful woman from a family with high social status began a lengthy period of enslavement to her father, a theologian. Claiming only that he loved his daughter, the father took possession of his daughter’s body, her sexuality, her emotional well-being, her social and family relationships, and nearly her life itself. Now an acclaimed young novelist, Kathryn Harrison quietly writes about the years of her own father–daughter incest experiences in *The Kiss*. Her memoirs tell about an ordinary case of family abuse. There were no repressed memories recovered, no failed social service agency, no murdered victim, and no falsely accused offender. There are, however, permanent and emotional scars resulting from an especially insidious form of family abuse and perplexing questions that can never be answered. *The Kiss* compels its readers to acknowledge a well-known social fact: A family member characterized by any socioeconomic group, any age, either gender, or any race or ethnicity can experience one or several forms of family abuse and violence. A highly educated mother can neglect her newborn infant, a university professor can kill his partner, an older sister can batter a young brother, a middle-aged husband can rape his wife, and a mother can exploit financially and physically abuse her own elderly mother.

Family abuse and violence has a long, perhaps infinite, history. Infanticide, especially of girl babies, insufferable brutality toward children, the sexual exploitation of children

and adolescents, sibling violence and sexual assaults, and physical and emotional attacks on intimate partners have occurred in family relationships for much of human history. For the past 2 centuries the legitimacy of family abuse and violence has been seriously questioned, but only recently have the many forms of family abuse and violence become generally recognized social problems in the United States and other nations.

Introduction

This chapter examines some of the forms of family abuse and violence, defined generally as “act[s] carried out with the intention, or perceived as having the intention of physically hurting another person” (Gelles & Straus, 1979, p. 554). This general definition requires that one social actor, a family member, *intends* to hurt another family member. Further, it requires a *social act* or a behavior to occur. Accidents, wishes, or fantasies are not included. This definition excludes many acts of verbal or emotional abuse, behaviors that hurt, but not physically (Brassard, Hart, & Hardy, 1993; Daro, 1988; O’Hagan, 1995). According to most states’ laws it excludes many forms of neglect or negligence. Negligence by a parent, because of a religious belief, to seek appropriate medical care for an ill child is not included in this definition, nor are the thousands of cases of neglect of the unborn that result in physical or emotional deficiencies at birth each year in the United States (Garrity-Rokous, 1994; McCurdy & Daro, 1994; Weise & Daro, 1995).

We begin this chapter with a general definition of family abuse, one that claims that the social actor’s intention or state of mind, along with the actor’s physical behaviors, must be scrutinized to study family violence. The general definition includes all possible family members: persons in traditional and nontraditional families; adults and children, including

JoAnn Langley Miller and Dean D. Knudsen • Department of Sociology and Anthropology, Purdue University, West Lafayette, Indiana 47907.

Handbook of Marriage and the Family, 2nd edition, edited by Marvin Sussman, Suzanne K. Steinmetz, and Gary W. Peterson. Plenum Press, New York, 1999.

foster and stepchildren; domestic partners; and cohabiting or noncohabiting romantic and sexual partners. Throughout the chapter, we also provide more specific definitions for each form or type of family abuse and violence analyzed. By introducing both a general definition and specific definitions of family violence we raise a fundamental debate that concerns scholars and policy makers alike: Is family violence a singular phenomenon, a problem that requires a unified method of inquiry and an integrated set of social policies and organizations designed to respond to different forms of a single social problem? Or are the various forms and types of family violence unique, so different and so distant from each other that any attempt to study or remedy them as a single social problem is at best futile, and perhaps dangerous for the various types of victims and survivors of child abuse, partner abuse, and elder abuse?

This debate has critical conceptual and practical implications. At a conceptual level, the debate challenges the validity of two dominant system approaches, a gendered versus nongendered systems approach, for studying family violence problems. A gendered systems approach takes the position that “gender and the unequal distribution of power should be the organizing principle for understanding the [family violence or child abuse] phenomenon” (Berliner, 1990, p. 128). The dominance and power of men over women in a society or a culture, according to a gendered systems approach, explains why women are battered by their male partners or why acts of child sexual abuse tend to be perpetrated by males against female infants or children. A nongendered perspective that adopts a family systems approach (Downs, 1996; Straus, Gelles, & Steinmetz, 1980) explains the various forms of family abuse and violence as a function of family characteristics and interaction patterns. We contend that the dominant gendered and nongendered systems approaches have utility for studying family violence and abuse because they examine how the family, a social institution, and gender relations within the family and the larger society provide explanations for the causes and consequences of child abuse, partner abuse, and elder abuse. Nonetheless, a profound challenge for future scholars is the development of perspectives that can more completely explain the multiple problems subsumed by the umbrella term “family abuse and violence.”

At the practical level, accepting that there are multiple problems of family abuse and violence poses severe challenges to many existing social policies and legal remedies. An extant and dominant social policy across many states and social service agencies is to preserve the family—a presumably vital social institution—while protecting individuals within the family. Programs are designed to minimize the need to place a child in a foster home or the amount of time an abused child spends apart from biological parents (Panel on

Research on Child Abuse and Neglect, 1993). Therapy or counseling programs for men who batter their partners, especially if mandated by the courts, aim at preserving families (Barnett, Miller-Perrin, & Perrin, 1997), and laws promulgated in response to elder abuse protect only the dependent, elderly family member (Penhale, 1993).

Rigorous social science evaluations of service and treatment programs offering help for parents, spouses, or children that are premised on the family preservation model do not find conclusive and positive outcomes (Azar & Wolfe, 1989; Barrera, Palmer, Brown, & Kalaher, 1994; Bath & Haapala, 1993; Berk, 1993; Rossi, 1992; Shepard, 1992; Tracy, Haapala, & Pecora, 1991). Family preservation programs may indeed be cost-efficient alternatives to foster care or the placement of an abused or neglected child or elder family member in a social institution, but there is not empirical evidence to support the contention these social programs are likely to have positive, long-term benefits. They may, in fact, cause irreparable harm.

Once a proponent of family preservation programs, Richard Gelles now argues strongly for the adoption of child-centered policies that, in response to child abuse incidents, will abandon the widespread “fantasy” that social service agencies can protect the abused child while preserving the family. Gelles (1996) presents a case study of a 15-month-old boy, David (a pseudonym), who was killed by his mother 3 months after a social service caseworker determined a lack of evidence sufficient to substantiate a child abuse claim. David was underweight for his age, and an X ray taken months before his death showed he had a chipped elbow. Although both parents were investigated in David’s case, and they had abused their older child severely enough to lose custody of her, David remained for his 15 month life with his biological parents. Gelles says, “What haunts me about David is that we know enough about child abuse that we could have, and should have, saved his life” (p. ix). He shows empirically that “30 to 50 percent of the children killed by parents or caretakers are killed *after* they were identified by child welfare agencies, were involved in interventions, and were either left in their homes or returned home after a short-term placement” (p. 149).

Is there one, multidimensional social problem, aptly called family violence, that requires a singular but systematic explanation and social response? Or are there are there at least three different social problems—child abuse, partner abuse, and elder abuse—that require at least three explanations, three social policies, and three types of responses? We offer no answer to these questions, but instead invite readers to formulate their own conclusions. We do, however, offer a modest proposal for making sense of the pervasive theories and empirical studies we analyze in this chapter: Child abuse, partner abuse, and elder abuse are subject to “hairsplitting

discussions” about what they are, how they are defined, and how common they are. We cannot let the discussions “obscure the fact that a significant number of [persons] are exposed to unacceptable forms of violence.” To prevent child abuse, partner abuse, and elder abuse, social rules (attitudes, norms, public policies, and social programs) must be developed to guarantee safe *dependence* for old people and children, while promoting safe *independence* for adult women and men in contemporary society (Whittaker, 1996, p. 150).

In this chapter we discuss the history of child abuse, violence between adult family members, and elder abuse. We define each form of abuse and violence as distinctive problems, explore their emergence as social problems, assess their incidence and prevalence, and consider the consequences of such behaviors and social interventions for individuals and for society.

The term “family” has many definitions, as other contributors to this *Handbook* point out, but for our purposes it is a small social group, usually sharing a common residence, involving intimacy among members, with expectations of longevity or permanence, and often characterized by age and gender differentiation among members. This definition includes married and unmarried couples, heterosexuals, lesbians, and gays. It includes stepfamilies and families with members from as few as one generation or many as four generations. Because the focus of this chapter is on family abuse and violence, other forms of violence, such as violence between dating couples, attacks among members of social groups, hate crimes, or abuse or violence that occurs outside the family, are excluded. Similarly, research on some forms of child or adult neglect, or the failure to act in a way that protects another from harm, is not included.

The number of published studies on the family violence that harms children, adults, and elderly adults has increased dramatically over the past 2 decades. Our review and analysis is based on what we conclude is a concise yet accurate examination of the history of family violence, the current knowledge and empirical evidence, and the major theoretical perspectives that are most useful for researching family abuse and violence problems. We devote some attention to policy issues, specifically the consequences of changes in laws and the social services on the frequency and severity of violence and abuse within families, and we conclude with an overview of some of the recent controversies that dominate the fields of family violence.

History of Violence in Families

Childhood, the stage of life that is supposed to be carefree, safe, secure, and characterized by innocence and tenderness, is actually a period of insecurity, trauma, and

threat for many social groups. The history of childhood is a history of infanticide, mutilation, beatings, forced labor, and gentleness. Maltreatment “has been justified for many centuries by the belief that severe physical punishment was necessary either to maintain discipline, to transmit educational ideas, to please certain gods, or to expel evil spirits” (Radbill, 1968, p. 3). These harsh behaviors, often associated with the perceived need to socialize children, appear to have existed and been tolerated until recently throughout the world.

Infanticide was outlawed in Rome in 374 AD because of a desire to increase the population. The killing of less socially “desirable” infants, however, persists. The killing of babies born outside of marriage and deformed or unwanted babies, especially girl babies, has continued to the present time in the United States and other nations (Finkelhor, 1997; Silverman & Kennedy, 1988). As late as the middle of the nineteenth century, infanticide victims were sealed in the structures of new buildings and bridges in Germany to make them stronger. Dead or dying infants were common sights on the dung heaps in the London streets (de Mause, 1974). Public concern about the well-being of children is a relatively new phenomenon and is arguably the result of cultural and psychoanalytic mechanisms (de Mause, 1974), the consequence of technological and social changes (Bakan, 1971; Pagelow, 1984), and other factors (e.g., Gartner, 1993; Shorter, 1975).

Changes brought by the Industrial Revolution, urbanization, the creation of schools, geographic mobility, and the intellectual and cultural developments that followed the Renaissance and Reformation produced new understandings and new legal definitions of parental obligations and custody in Western societies. By the 1670s, Puritans in the Massachusetts Bay Colony had enacted the first laws against “unnatural severity” to children and beating of spouses by either husbands or wives (Pleck, 1989, p. 22). By the mid-nineteenth century, a number of U.S. states began to prosecute parents for cruelty toward their children, but the 1893 Mary Ellen Wilson case in New York City crystallized efforts to deal with abuse (Costin, 1991; Ross, 1980). The Society for the Prevention of Cruelty to Children was founded, and “Child Savers” intervened to protect children from parental inattention, neglect, or violence (Bellingham, 1983; Zelizer, 1985). Despite the fact that by the beginning of the twentieth century child protective systems were already in place, industrial expansion, World War I, the Great Depression, and then World War II intervened to divert public attention from child maltreatment. It was not until the 1960s that child abuse was “discovered” by the medical profession, although evidence had been accumulating for decades from radiologists, social workers, and child advocates (e.g., Kempe, Silverman, Steele, Droegemuller, & Silver, 1962; Williams, 1994). The

combination of several factors, including the elimination of a need for child labor, the conception of violence as unacceptable, leadership from high-status medical professionals, and media involvement, resulted in the identification of child abuse as a social problem (e.g., Pfohl, 1977), leading to the identification of other forms of family violence, especially spouse/partner abuse and attacks on elders (Loseke, 1992; Steinmetz, 1988).

Violence and abuse between adult intimates, especially partner abuse or “domestic violence,” like child abuse, has a long history. There is considerable evidence that the patriarchal laws and customs that have existed for centuries are intimately associated with violence toward wives. The inferior social, economic, and political positions assigned to women and the claim of ownership of wives by husbands have been enforced by law, resulting in legitimated battering and rape (O’Donovan, 1993). In essence, the legal rights given to husbands by English common law allowed husbands to judge, control, punish, and even kill their wives for serious offenses (Pagelow, 1984; Sigler, 1989). Religious institutions further reinforced female subservience (e.g., Davidson, 1977; Fortune, 1995; Scarf, 1988; Steinmetz, 1987). The English jurist Blackstone viewed marriage as the merger of the wife’s identity into that of her husband (Weitzman, 1981). Wives lost control of their property, their children, and even their own bodies, placing physical violence, including rape within the marriage, outside the purview of the law. By the late nineteenth century, several states had effected changes that prohibited husbands from such acts. Nevertheless, violence between spouses continued to be so common that Straus (1976), in one of his earliest studies of family violence, described the marriage license as a “hitting license.” Social survey and government data show that social institutional efforts to diminish or eliminate all forms of spouse abuse appear to be only moderately effective (Bachman & Saltzman, 1996; Straus & Gelles, 1986).

Family systems perspectives argue that child abuse, violence between intimates, and elder abuse can only be understood by noting the distinctive features of families and the beliefs about them. Families, compared to other social groups, have several unique characteristics, for example, age and sex differences, a wide range of activities and interests, privacy, and long-term and intense involvement (Gelles & Straus, 1979; Steinmetz, 1987).

These structural features of the family are buttressed by a set of three related beliefs that Pleck (1987) describes as the “Family Ideal.” First, there is the belief in privacy and separation from the public world, where strong emotions and qualitatively different relationships, characterized by more affection, a long-lasting or perceived permanence, and social binding are developed. Second, a belief exists that conjugal and parental rights, including the right to demand obedience

to maintain domestic order and harmony, rest with the head of the household, usually the husband. Third is the belief that the family must be preserved, as the agency through which women achieve happiness by the suppression of self-realization. Given these conditions, it is not surprising that attacks on child abuse and family violence have been seen by some as a challenge to family life itself.

As the media reported evidence of an increase in the level of domestic violence or partner abuse in the 1970s, a social concern about abuse of the elderly also emerged and became a dominant social problem in the 1980s. The discovery of elder abuse by the media (Steinmetz, 1981) was related to a variety of demographic and social changes in modern society. The extension of life and life expectancy and the long-term declining birth rate generated a relatively large senior population with fewer children to care for them. Further, elders are often perceived as a nonproductive or even dependent segment of society, making them subject to inattention, neglect, and control by family members and other caretakers.

Information about elder abuse was initially somewhat difficult to obtain, partly because of the elderly’s dependence, isolation, and invisibility and the family beliefs noted earlier. In one review, the authors suggested that elder abuse is “a phenomenon (a) that we do not know how to define; (b) for which we have no reliable estimate of the number of persons affected; and (c) about which we know little regarding risk factors” (Pillemer & Sutor, 1988, p. 27). These problems affect our understanding of elder maltreatment especially, although information about all types of family violence is subject to severe limitations, both theoretically and methodologically.

To get past the limitation of relying on the elderly for information about how they are abused, Steinmetz (1988) conducted in-depth, face-to-face interviews with 104 middle-aged persons who care for their elder parents. In this first comprehensive self-report study, she finds that elder abuse is associated with the daily tasks and the resulting stress connected to caring for dependent parents. Thus, the prevention of abuse by reducing caretaker stress, increasing caretakers’ knowledge of the possibility of abuse, and reducing the social isolation experienced by many elder parents and their caretakers is currently the preferred social response to this particular social problem (Deitch, 1993; Steinmetz, 1988).

Theories, Perspectives, and Research Methods

Family violence problems cannot be adequately explained or comprehensively studied with any single theory or particular research method. Contemporary publications

show that health-care perspectives (Shornstein, 1997; Stark & Flitcraft, 1996), legal studies (Downs, 1996; Lemon, 1996), criminal justice theories (Buzawa, Buzawa, & Inciardi, 1996), a social work orientation (Mullender, 1996), and interdisciplinary approaches (Kaplan & Davidson, 1996; Wallace, 1996) all attempt to explain and document the problems of child abuse, partner abuse, and elder abuse. The social and behavioral sciences, especially psychology and sociology, have published more than 1000 journal articles on the different forms of family violence over the last decade.

Because family violence is indeed a complex social problem that seems to persist across time and across cultures, it resists the development of a definitive explanation that can be translated into social policy. Moreover, all the forms of family violence that are analyzed in this chapter have evoked strong emotional responses in society. As a result, advocate groups are formed whose members work, often without pay, to help abused children, battered partners, and the elderly. Advocates are often critical of academics and researchers, claiming that social scientists are too “technical,” too focused on “esoteric notions,” and too insensitive to the real life-and-death crises and the real ethical and safety issues that victims and survivors of family violence encounter in society (Gondolf, Yllo, & Campbell, 1997). Consequently, instead of the collaboration between researcher and advocate that is needed to develop effective programs, valid and reliable theory, and rigorous empirical studies, the supposedly “objective” explanation of family violence remains at odds with the “subjective” narratives of those millions of persons who experience the pain, the harm, and the threat of continued family violence. Evaluation studies are still centered on cost-benefit analyses and objective outcome measures, while “street theory” is still dismissed for its lack of testable research hypotheses.

Child abuse, a primary example, is a “highly charged emotional issue” (Azar, 1991, p. 31), and the attention it generated was first directed toward intervention and treatment of victims. As a result, theoretical concerns and the collection of high-quality data that would provide a basis for identifying the causes of abuse were delayed. Instead, diverse perspectives and epistemologies of those most directly associated with the problem shaped the explanations that emerged.

Medical professionals, the first to become involved, focused on the victim’s injuries, placing a heavy emphasis on the psychopathology and mental problems of perpetrators as the primary causes of child abuse. As information accumulated, additional or competing explanations were sought. The legal and criminal justice professions defined abusive behaviors as criminal acts that must be punished with criminal sanctions. Intent, or the “guilty mind,” a central tenet of criminal law, became the basic issue in response to child abuse. However, legal actions, including the prosecution and

conviction of the criminal perpetrator, did not stop the abuse. Thus, social scientists began to offer new perspectives on maltreatment that focused on its context (Knudsen, 1988). By the mid-1960s, systematic research on family violence was initiated (Gelles, 1974; Straus, Gelles, & Steinmetz, 1980; see Steinmetz, 1987, for a review of the literature). As the volume and scientific sophistication of the research increased, questions extended beyond the incidence and prevalence of abuse cases to the social sources, proximate causes, and consequences of abuse. Unfortunately, despite efforts to provide comprehensive information about child maltreatment (e.g., Breire, Berliner, Bulkley, Jenny, & Reid, 1996), consensus about definitions, casual inferences, and appropriate methodologies remains an elusive goal. Reviews of various theories and studies of family violence and aggression provide abundant evidence of these problems.

Theoretical Issues

Efforts to apply theoretical models to explain family violence have had limited success, in part because of the diversity of academic disciplines involved and the lack of collaboration between advocates and social scientists. Numerous theoretical perspectives in the social sciences have been used and adapted to identify the concepts that explain various aspects of violent behavior: attributes of perpetrators, characteristics of victims, interaction patterns, cultural beliefs about the legitimacy of violence, ethnic or religious group norms, and features of social systems. For example, Gelles and Straus (1979) grouped 15 theories into three general categories or types: intraindividual theories, social-psychological theories, and sociocultural theories. Steinmetz (1987) modified the categories somewhat to organize 16 theories or models.

Typologies of classification schemes involve different conceptions of violence and make different assumptions about the origins or causes of violent behavior. They also represent different levels of analysis, and they range from simple single factor explanations of an individual’s behaviors or personality traits to complex, multifactor explanatory or causal models (Azar, 1991).

In this chapter, we distinguish three broad types of theories or perspectives that inform and guide family violence researchers: (1) individualist perspectives, (2) interactional perspectives, and (3) sociocultural perspectives. Each of these types incorporates a variety of specific explanations of family violence that are similar in terms of their levels of analysis, their complexity, and the assumptions they share about social problems and society.

Individualist Theories. Individualist perspectives attempt to explain acts of family violence with characteristics

of the person. What is *wrong* with the person, the individual, who sexually abuses a child? Which *personality trait* best explains the person who batters a marital partner? Why would an *adult child* harm an elderly parent? These individualistic questions focus on the individual and why a person with certain traits, characteristics, or problems acts violently or abusively toward another.

Violence, according to the individualist theory, is narrowly defined as acts of physical aggression. Although there is a focus on specific acts, these theories locate causality within the perpetrator. In general, single factors, such as a particular personality trait or psychiatric disorder, are identified to explain violent behavior directed at a family member. There are three distinctive subtypes of individualist level theories that drive contemporary family violence research: explanations based on (1) psychopathological factors, (2) perpetrator characteristics, and (3) victim characteristics.

1. Psychopathological explanations assume intraindividual causes for acts of aggression, such as a mental illness or a disease of the individual. Each theory in this subtype provides a simple, single factor explanation for acts of family violence.

To illustrate: DMS-IV (American Psychiatric Association, 1994) identifies Factitious Disorder by Proxy (FDP), popularly known as “Munchausen syndrome by proxy,” as a form of child abuse. The perpetrator, often the mother of a young child, feigns a medical disease or illness in her child. The results can be severe or even fatal for the youngest and most vulnerable victims. Psychiatry treats FDP as a form of medical abuse of children and locates causality in the parent or caretaker as a “parent’s pathologic wish for sympathy and attention” (Ostfeld & Feldman, 1996, p. 85).

2. Perpetrator characteristics perspectives identify the individual’s defective personality trait or abnormality, such as poor impulse control or drug or alcohol addiction, as the cause of violence.

To illustrate: Hanson, Gizzarelli, and Scott (1994) report that child sexual abusers tend to suffer from extreme feelings of “vulnerability” or “inadequacy.” Studies of chronic spouse abuse find that an “antisocial orientation” partly explains repeated acts of violence. Some researchers invoke an “antisocial personality disorder,” an adult disorder that according to the American Psychiatric Association may have genetic or biological explanations, to explain the intergenerational transmission of family violence (DiLalla & Gottesman, 1991). Luntz and Widom (1994) used a rigorous, longitudinal research design to follow a sample of 416 abused children and 283 nonabused children from the same metropolitan area into young adulthood. These researchers report that the children who were abused, compared to their nonabused counterparts, were more likely to manifest antisocial

personality problems and abusive behaviors as young adults. (Most of the abused children did not, however, abuse others as young adults.)

3. Victim characteristics perspectives locate the cause of violence in abnormal behavior or attributes of victims of family violence, such as a physical disability, a chronic illness, or a multiple birth, which precipitates a reaction by the abuser.

To illustrate: Psychiatric syndromes, such as “premenstrual syndrome” (Carney & Williams, 1983) or “post-traumatic stress syndrome” (Erlinder, 1984) are sometimes offered as legal explanations for acts of violence committed against ill victims within the family (Downs, 1996).

Individualist perspectives have some strengths, but they tend to have many weaknesses and limitations in their ability to explain family violence. All told, they provide simple, straightforward explanations for specific forms of violence that are perpetrated by individuals whose behaviors fit models of psychological or medical disorders or illnesses. In some cases, an appropriate diagnosis may lead to effective medical or psychiatric treatment. These perspectives, however, tend to offer only post hoc explanations of behaviors and events. Only after a parent kills a family member is posttraumatic stress syndrome invoked to explain what otherwise is incomprehensible. Consequently, individualist theories have little predictive ability and even less utility for proposing strategies to ameliorate the family violence problem. These theories tend to explain only a small amount or part of the family violence problems (Pagelow, 1992). The most common and the most frequently occurring forms and incidents of family abuse cannot be explained with perspectives that focus on the unusual, individual case. Imagine the futility of a homicide prevention program that is designed to address the individualistic pathologies of Charles Manson. In addition, family violence explanations that are based on victim characteristics either tend to blame the victim of violence, for example the abused parent, or they render helpless the adult perpetrator. No effective remedy for family violence, a social problem, can be premised exclusively on an individual’s illness or past trauma.

Interactional Theories. Interactional perspectives broadly identify family violence as patterns of violent acts or incidents of violence that are perpetrated by one social actor against another social actor. Causality is located in the interaction itself or in the relationship between or among social actors. Why are some marriages or some nonmarried couples characterized by *chronic acts* of physical violence? How is it possible for a *mother* to kill her *own children*? Why would a *son* abuse his elderly and frail *mother*? These questions center on repeated acts or patterns of family abuse or vio-

lence. Instead of explaining a problem with individualistic illnesses, disorders, or disabilities, social interactional perspectives focus on social relationships, such as a domestic partnership, parent–child bond, or perceptions of the self in relationship to another social actor. In this chapter we consider five distinctive subtypes of interactional theories that inform contemporary research on family violence: (1) social bonding, (2) exchange theory and deterrence, (3) interpersonal resource or power perspectives, (4) social learning theory, and (5) symbolic interaction perspectives.

1. Social bonding perspectives, derived partly from social control theory (Hirschi, 1969), argue that social interactions generate the formation of relationships and social bonds, including affective attachments, between actors that prescribe and proscribe certain behaviors. Parent–child relationships or domestic partner relationships induce social bonds that prescribe affection, care, and attention while they proscribe neglect, emotional abuse, or acts that will harm the other person in the relationship. Lacking affective attachments to family member(s) and lacking social bonds to family members as well as to the family as a conventional social institution, the individual member faces an increased likelihood of acting in abusive or violent ways toward the other in a familial relationship.

To illustrate: Lackey and Williams (1995) find that inadequate social bonding explains family violence, including violence across generations. The failure of a parent to bond with a child, and the corresponding lack of appropriate affective ties to a child, is offered as a single factor explanation for child homicide or infanticide, the leading cause of death for children under age 18 in the United States (Finkelhor, 1997).

2. Social exchange theories posit that violence, including acts of family violence, result from a pattern or period of negative social interaction that is evaluated by the social actor in cost-benefit terms. Research based on exchange perspectives tends to focus on dyads, especially the married or unmarried adult partnership or the caretaker and victim of elder abuse (Barnett, Miller-Perrin, & Perrin, 1997; Hinrichsen, Hernandez, & Pollack, 1992).

To illustrate: Johnson (1992) studied 426 women who resided in a battered women’s shelter to explain why some of the women decided to return home to their abusive marriages. She found that being employed, rather than personal income, predicted a decision not to return to the violent home: “[A] battered woman with few or no marketable skills or access to employment ... perceives that her alternatives inside the marriage [are] more rewarding and less costly than alternatives outside the relationship, even though she is being subjected to severe abuse” (p. 175). This empirical finding, Johnson argues, supports exchange theory because it

shows how a battered woman may compare the rewards and costs of her alternatives—to remain in an abusive relationship or to leave her marriage. Applications of exchange theory attempt to explain how the threat or use of police arrest can deter repeated acts of domestic violence (Berk & Newton, 1985; Miller & Krull, 1997; Sherman, 1992). A domestic partner, according to an exchange perspective, is deterred from battering episodes once she or he subjectively evaluates and compares the substantial financial, personal, and social “costs” of arrest with the lesser “benefits” of controlling the other partner with acts or threats of physical violence.

3. Resource and interpersonal power theories that explain family violence are derived from basic social exchange hypotheses. These perspectives identify and sometimes quantify the power and control one social actor has over another within the family as a function of the relative resources, such as income or occupational prestige, attributable to the social actor. If violence within the family occurs, it is likely to be perpetrated by the more dominant or powerful family member against the less dominant or less powerful family member. The intention is to use interpersonal power and force to obtain compliance from the less powerful family member. (Some theorists argue the opposite: The partner with higher relative resources and interpersonal power is *less likely* than the other to resort to the use of force to control the other.)

To illustrate: In an early publication, Gelles (1983) proposed that “people hit and abuse other family members because they can” (p. 274). In a more recent publication, the authors integrate social interaction theories to compare battered and nonbattered women who were using shelter, counseling, and support services in a central Virginia county. The researchers found that battered women, compared to the nonbattered women, perceived they had little or no interpersonal power over their abusers and were, therefore, dependent upon them, incapable of leaving the oppressive relationship (Forte, Franks, Forte, & Rigsby, 1996).

4. Social learning theories (Bandura, 1971) propose that violence, like all other social behaviors, is learned. A social actor may observe, model, or experience aggressive and violent behaviors. Children exposed to violence or children who experience abuse or violence within the family face an increased likelihood of perpetrating violence against another child or against a family member as a child or later on as an adult (Dutton, Van Ginkel, & Starzomski, 1995; Egeland, 1993; Fagin & Wexler, 1987).

To illustrate: Lenore Walker’s *The Battered Woman* (1979) articulates a social learning theory that explains a “cycle” of repeated acts of violence perpetrated by men against women who learn “helplessness” in response. Walker derived her “learned helplessness” concept from behavioral research that was conducted by a psychologist, Martin Selig-

man. In his research Seligman administered electric shocks to caged dogs. After repeated shocks the dogs, even when their cage doors were opened, made no attempt to escape—they had learned to be helpless. In generalizing to human, adult women living in abusive relationships, Walker (1984) argued that a cycle of violence perpetrated against a woman generates a “battered woman syndrome,” a form of post-traumatic stress disorder that can result in substance abuse, depression, learned helplessness, and low self-esteem.

There is perhaps no other perspective or theory in the field of family violence that has been more used, more challenged, or more empirically discredited than Walker’s cycle of violence, her use of learned helplessness, and the development of the battered woman syndrome. Downs (1996) analyzes the empirical studies and the ineffective use of Walker’s syndrome by attorneys who represent battered women. He concludes: “Learned helplessness reduces battered women to the status of dogs. It denies the very integrity and potential agency that women wish to attain. . . . [It] is so reductionist as to eliminate volition” (p. 155).

5. Symbolic interaction perspectives focus on the symbolic communication between social interaction partners and the construction and reconstruction of a socially defined “reality.” These perspectives assume a social world in which the self and identity emerge through interaction. To understand family violence requires the researcher to understand the meanings or the definitions that family members attribute to interactions and interpersonal relationships.

To illustrate: An act of family violence may be a response to perceived negative evaluations of the self by others, especially in a culture that tolerates violent behavior. Interpersonal relationships marked by chronic aggression or violence involve interaction partners who try to “make sense” of violent episodes, the relationship, and the self. Stets (1988) argues that an individual who batters another is attempting to regain the self, lost through chronic violence, by the use of physical force. Finkelhor (1993) uses a symbolic interaction perspective to illustrate how a caretaker who is dependent on an elder parent may feel powerless and therefore abuse the elder. Another caretaker who, when interacting with the elder parent attributes negative meanings to the aging process, may neglect the elder.

Interactional level theories offer many insights for the study of family violence. Because they study the processes and patterns of social behavior and family relationships they have greater explanatory power than individualist theories. Family violence by definition involves social relationships and social behaviors, making an interactional level theory appropriate for explaining the types and forms of family violence that occur most frequently and most chronically in contemporary societies. Interaction theories that account for

the multiple factors associated with family violence hold more promise than single factor theories for the development of appropriate social responses to child abuse, partner abuse, and elder abuse. Although the extant interactional perspectives are somewhat limited by their general lack of specificity or ability to offer comprehensive causal explanations, an integration of social bonding, social exchange, interpersonal power, social learning, and symbolic interaction perspectives could generate causal and empirically testable theories of family abuse and violence in the near future. Contemporary work that expounds power theory (Gondolf, 1995) for explaining spouse abuse is an exemplar of an integrative approach.

Sociocultural Theories. Do the social problems of family violence occur *across most societies* and cultures? Do the *norms* that define appropriate family relationships and behaviors vary across geographical regions of the United States, or across religious, ethnic, gender, and age groups in the United States? Are there explanations for certain types of family violence that are best informed by *socialization* perspectives that center on *cultural norms*? Does a sociocultural thesis of *patriarchy* explain why men dominate women in most cultures and societies? Is the *family* itself, a social institution characterized by distinctive features, the best explanation for all forms of family violence? These questions highlight the need for cultural or societal level theories of family violence. The premise is a simple one: Cultural and societal norms define, legitimate or invalidate, and encourage or punish the many forms of control, including the use of force, that family members use in their social relationships and interactions. In this chapter we appraise five types of sociocultural theories: (1) culture of violence perspectives, (2) a theory of patriarchy, (3) feminist theory, (4) functional perspectives, and (5) family systems theories.

1. Culture of violence theories assume broad support within a culture for certain values that tolerate or encourage the use of force, including physical violence, for settling disputes that arise within or outside of the family. These perspectives posit that violence is learned behavior that is perceived within the culture as the appropriate means for dispute resolutions and social control in many settings, from parents punishing children, to the social response to crime, to fighting wars with other nations.

To illustrate: In the United States, the emergence and proliferation of culture of violence theories can be attributed to the pioneering but inherently flawed work of Marvin Wolfgang (1958), who claims that certain “subcultures” in U.S. society, for example, the underclass, show a greater acceptance of violence. As a result, a “subculture of violence” develops, apart from the mainstream culture. Violent

norms developed within the subculture of violence explain why violent crime rates and acceptance of violence are greater in the South than in other regions of the United States. This circular theory (the explanation for the subculture of violence is based exclusively on the definition of the concept) provided some family researchers simple and simply wrong explanations for why poor children and poor adults seem to dominate the ranks of family violence victims. Because all forms of family violence occur behind closed doors (see Straus et al., 1980), family violence researchers reject simplistic cultural theories and instead examine how culture helps explain the social constructions of acceptable identities and gender roles and acceptable social control mechanisms. Katz (1995) and Collier (1995) exemplify the development of perspectives that attend to cultural norms to examine models of the “successful male” and “masculinities” that condone the superior social position of men over women, which in turn lead to patterns of violence, perpetrated by male partners in intimate and familial relationships. These models are socially constructed and legitimated by social institutions, including professional sports, family law, and criminal law. In her exceptionally sophisticated research that is designed to explain violence in African American families in the United States, Ucko (1994) shows the need to study the interaction of African and American cultural norms. The African ideology of gender egalitarianism interacts with African American gender norms that result in part from a history and culture of slavery, discrimination, and poverty in the United States. Only the interaction of cultural norms can explain the rates and types of family violence experienced by black families in the United States.

2. Patriarchal theories draw on the history of patriarchy to explain family violence and especially domestic violence. Patriarchy means the “rule of the father,” and theories based on this concept claim that male dominance across cultures, including the legal use of masculine force and violence to sell, control, exploit, or kill women and children, results in violent behavior within the family. The patriarchal perspective claims that an ideology of male dominance over women is uncontested in the larger society as well as in the family, resulting in the exploitation and oppression of women. Further, it is supported by various social institutions, especially the law and religion in contemporary Western societies (O’Donovan, 1993).

To illustrate: Some theorists explain how patriarchy, a cultural explanation of family violence, emerged. Fischer (1979) and Macionis (1989) examine how historical and technological shifts in the means of food production, from hunting and gathering to horticulture, and then to agriculture, resulted in the production of surplus food, population increases and the need for a political system. Men, the producers of surplus food, created specialized and highly re-

warded occupations to control the distribution of food and related resources and gained positions of power over women. Other theorists explain the consequences of patriarchy. Dobash and Dobash (1978) argue: “Wife beating ... has existed for centuries as an acceptable and a desirable part of a patriarchal family system within a patriarchal society” (p. 426).

Theories of family violence that are based on patriarchy are challenged with empirical research and by competing theories. In general, critics ask two questions: How can a patriarchal perspective explain why many cultures and many social groups lack male-against-female violence, and why do some women kill their children or abuse their lesbian partners or elder parents? Straus, Kaufman, Kantor and Moore (1997) implicitly examine the culture of patriarchy empirically and show a decline between 1968 and 1994 in the acceptance of cultural norms that tolerate husband-to-wife violence. Theoretically, Whittaker (1996) challenges the ability of patriarchy to explain female perpetrated elder abuse, while Spatt (1995) challenges the perspective to explain the California law that makes criminal acts of domestic violence committed within same-sex cohabiting relationships.

3. Feminist perspectives typically build on the traditional and historical understanding of patriarchy in their explanations of how and why power is used and abused against women and girls within the family. Contemporary feminist perspectives address the range of family violence problems in society, including elder abuse and domestic violence in gay and lesbian households. One characteristic that distinguishes a feminist perspective of family violence is the position it takes on social advocacy or activism.

To illustrate: Feminists and feminist theories vary extremely in their scholarship and their politics. Collectively, however, what unites them is a concern for the experiences lived by women and girls and how feminist work can improve the services delivered to victims and survivors of family violence. Feminists work in safe shelters, rape crisis centers, counseling offices, child or elder protective services organizations, and the political arena to improve the social status and conditions of individuals who have been abused and harmed by family members (see e.g., Ferraro, 1989; Pence & Paymar, 1986; Yllo, 1993). A feminist perspective is interdisciplinary, centered by questions pertaining to the oppression of women and girls and characterized by a world view that highly values methods of inquiry that represent women’s and girl’s subjective experiences (Mann & Kelley, 1997). Feminists, including feminist advocates who work collaboratively with academic or government researchers, are deliberately conscious of their own cultural biases, listen reflectively to understand the experiences of family violence, and act as negotiators between clients, service providers, and scientific researchers (Gondolf, Yllo, & Campbell, 1997).

4. Functional theories argue that the family functions to reproduce the population; protect members from emotional, physical, and economic hardships; socialize children and help them adjust to changing social circumstances; and support all family members in their activities in other social institutions, such as education, work, and religion. Functional theorists assume that family violence perpetrators fail to adhere to appropriate social roles and norms that preclude the use of force to maintain stability or order in parent–child or male–female relations. Ambiguity or confusion about norms or inadequate socialization may lead to deviance, including the use of physical force that exceeds normatively acceptable levels.

To illustrate: A theory that concentrates on the importance of preventing domestic violence argues that a preliminary but necessary step to prevention is the acknowledgment of the importance of gender role socialization that condones inequality of the sexes: “[M]ost young persons are socialized to act out ... sex-based power ... and responsibility ‘scripts’ and are therefore likely to encounter work and school arrangements that reinforce the reality and acceptability of battering behavior in intimate relationships” (Tifft, 1993, p.9). Gender role socialization “from birth,” according to some functional orientations, explains why men batter and why women are battered. It is responsible for the man’s desire to exert power and the woman’s acceptance of a “subordinate” position in the family that values nurturance, conciliation, and deference (Birns, Cascardi, & Meyer, 1994).

5. Family systems theories (gender-neutral perspectives) emphasize the interaction of a bounded social system or social institution, for example, the family, with other social institutions and with its environment, such as the community. To explain family violence, the systems theorist must examine the structural and interactional features of the family and consider the social processes in which positive and negative feedback produce or encourage violence.

To illustrate: Rouse (1997), based on the early Gelles and Straus (1979) theoretical articulation, identifies ten distinctive characteristics of the family that contribute to family violence: (1) the privacy norm for family interactions; (2) involuntary membership of children in the family; (3) power differences between parents and children, as well as between domestic partners; (4) unrealistically high expectations for marriage and childrearing; (5) the diffuseness of family roles; (6) the intense, emotional involvement in family relationships; (7) the impinging or constraining activities that limit individual freedom of action within the family; (8) the extended time spent in family interactions; (9) changes in the family life cycle; and (10) a discontinuity or conflict between family and other social institutional roles. Systems theories also consider the stresses from the larger society, such as

poverty or unemployment (Straus, 1980), that increase the likelihood of violence within the family.

Sociocultural theories of family violence have generated a tremendous amount of research in the United States and in other nations on the problems of child abuse, partner abuse, and elder abuse. Murray Straus, the most prominent family violence author, along with his collaborators from the University of New Hampshire Family Research Laboratory, are responsible for this early and continuing influence. The strengths of sociocultural level theories include their ability to edify how characteristics of family members, family relationships, family interactions, and features of the larger society concomitantly work to increase or decrease the likelihood and the severity of the various types of family abuse and violence in contemporary societies. These perspectives recognize the complexity of the problems and generate testable research hypotheses. However, a sociocultural level theory in its entirety defies empirical observation. No researcher can ever observe or collect sufficient data to represent the cultural and societal level features that influence the problems of family violence.

Gelles (1996) claims that a “one-size-fits-all” approach to theorizing family violence problems and their possible remedies is “unreasonable” (p. 113). Our concise and partial consideration of the various theories and perspectives that inform family violence researchers and policy makers illustrates his point well. Many theories, operating at different levels of analysis, are required to understand and research the various problems of family violence. Extant theories and perspectives guide research in family violence by defining the issues to be studied, by framing the questions to be asked, and by shaping the form of causal explanations.

Methodological Issues

Issues and questions facing those who study family violence problems are similar to those addressed by all social science researchers. In addition, family violence researchers face unique challenges and issues, especially ethical ones (Miller, 1991). Research designs for the study of child and adult victims and survivors that depend on the collection of new data (rather than the use of government statistics or already existing databases) include the traditional and quantitative survey methods and evaluation studies. Some of the more important decisions the researcher must make are about sampling designs, instrument design, data collection methods, and analysis methods.

Family violence researchers should expect to find relatively low estimates of abuse and violence when one type of respondent sample is used: samples of the general popula-

tion. Researchers should expect relatively high estimates of abuse and violence when they sample workers or professionals in the field; or clinical populations, such as women in shelters, children or elders in protective care, or survivors of family violence.

Research instruments are critically important tools for measuring family violence and abuse. The social science challenge to use reliable and valid measures is heightened in evaluation studies and in studies that attempt to establish the extent of a social problem, the causes of the problem, and appropriate remedies for the problem. The Conflict Tactics Scale (CTS), both the original and the modified versions, are criticized for not providing information on the context or injury levels that occur when persons are abused by family members. In addition, the CTS is limited by the nature of self-report instruments; that is, respondents may underestimate or exaggerate their behaviors, or they may inaccurately recall them. Nonetheless, the numerous studies published that show high reliability and construct validity for the scale and its subscales (Straus & Gelles, 1990) help convince policy makers and social program administrators to rely on estimates of violence based on the CTS.

Data collection methods are as varied in studies of family violence as they are across the divergent fields of social science inquiry. Face-to-face interviews, phone surveys, and mail surveys are commonly used methods to collect data with the use of quantitative survey research instruments. Other data collection methods that are extremely valuable for understanding the experiences of violence from the victim's and survivor's perspectives include unstructured interviews, reflective listening methods to understand survivors' biographies and narratives, and the observations of persons who work in the field.

The appropriate analysis of data, whether numerical codes in a computer database or transcriptions of audiotaped narratives told to an activist-researcher, is determined largely by the research design, but more importantly by the purpose for the research. If a program administrator wants to know what "works," statistical analyses of data to test research hypotheses that are derived from the more scientific theories of violence or abuse in the family are necessary. However, if state legislators need to understand the process of surviving repeated acts of violence by a marital or domestic partner, appropriate analysis requires the researcher to represent adequately the distinctive voices of survivors with careful, inductive analysis that is not structured by research hypotheses. All family violence researchers need to recognize that their work can be consumed or used in ways that are unanticipated. How the media report and promote their own agenda, based on what scientists find and advocates profess, can misrepresent the intentions of any family violence study.

Family violence research, like all social science research, must be ethical, based on three basic principles. First, research must benefit participants or the larger society. Second, it must respect the autonomy of participants, generally by ensuring the informed and voluntary consent of all participants. Third, it must follow the principle of justice, or the maintenance of research procedures that do not exploit participants or negatively affect other members of society. Newman, Kaloupek, Keane, and Folstein (1997) argue that following these three basic principles requires a delicate balancing act for the family violence or trauma researcher, especially when studying vulnerable or dependent victims.

In addition to general ethical concerns, those who study family violence problems encounter unique ethical issues. Most important, the researcher must work to avoid the harm that can result from family violence research. It is obvious to any researcher that disclosing to abusive partners the location of a battered women's shelter would gravely threaten the residents' safety. The ethical problems faced by family violence researchers also include some less obvious and more subtle questions and dilemmas. For example, where should research findings be published? Which findings should be published? In "value-free" and "objective" science endeavors, these questions are either not relevant or, possibly, unethical. In the field of family violence research, however, even the best-intentioned but misguided intervention in response to family violence can cause harm to individuals or to large numbers of individuals in a community. In addition, the privacy and intimacy of family relations, the dependence of children and the elderly, the politics of lawmaking, the dilemma of including or excluding the abuser in couple research, and the ethical problems of conducting cross-cultural family violence research (Fontes, 1997) provide a partial list of considerations for the ethical researcher who works in the field of family violence.

The physical abuse of children was the first form of family violence brought to public attention, and it illustrates many of the methodological problems in this area of study. Concerns about the definitions of child abuse were complicated by problematic research designs, sampling problems, and measurement issues (Mash & Wolfe, 1991). The interrelationships among theories, definitions (both conceptual and operational), and methods are illustrated by a overview of studies on the incidence and prevalence of the physical abuse of children. Incidence refers to the frequency or the number of cases of abuse that occur within a specified time period, usually 1 year. Prevalence refers to the frequency or the number of times an individual is abused over the course of a relationship or a stage of life. Both incidence and prevalence measures are used to estimate levels of child abuse as well as other forms of family violence.

At least four approaches have been used to calculate the levels of child abuse: (1) surveys of defined populations that identify levels of violence from self-reports of perpetrators or victims, (2) surveys of professionals in agencies that work with children, (3) total reports made by anyone to child protective services, and (4) investigated and validated reports to child protective services. Other sources of data, not specifically oriented toward children but that provide information about child victims, include the FBI's Uniform Crime Reports and the Bureau of Justice Statistics (Whitcomb, 1992). These sources use varied definitions of abuse and distinctive methods for obtaining data and reach different conclusions regarding the incidence or prevalence of child abuse.

Survey research is best exemplified by the National Family Violence Surveys that were designed and conducted by Straus and his associates (Gelles & Straus, 1988; Straus & Gelles, 1986; Straus, Gelles, & Steinmetz, 1978). Interviews were conducted with representative samples of parents in the U.S. general population in 1975 and again in 1985. Parents were asked if they had taken specific actions directed toward a child during the past year. The Conflict Tactics Scale, used to measure all forms of family violence, included the following actions: (1) threw something at the child; (2) pushed, grabbed, or shoved; (3) slapped or spanked; (4) kicked, bit, or hit with fist; (5) hit or tried to hit with an object; (6) beat up the child; (7) threatened with knife or gun; and (8) used knife or gun (Straus & Gelles, 1986). Child physical abuse is measured with responses to items 4–8. Based on this subset of actions, the incidence rate (number of children ages 3–17 experiencing one or more of such actions per 1000 children) was 140 in 1975 and 107 in 1985. If only the most severe violent actions are counted, using responses to questions 4, 6, and 8, the incidence rates were 36 per 1000 children in 1975 and 19 per 1000 children in 1985.

Another general population survey in 1995 was conducted by the Gallup Organization, based on telephone interviews with a sample of 1000 parents age 18 or over, to question them about actions they had taken toward their children. Physical abuse was defined by a “yes” answer to any of the following: “Hit child on some other part of the body besides the bottom with something like a belt, hairbrush, stick, or some other hard object”; “Hit child with fist or kicked hard”; “Shook child (only if *under* age of 2)”; “Threw or knocked child down”; or “Beat child up, that is, you hit him or her over and over as hard as you could.” Researchers reported physical abuse rates of 49 per 1000 children—10 times as high as official rates and over twice as high as the 1985 rate reported for the National Family Violence Survey (Straus & Gelles, 1990).

Surveys of professional respondents (workers or professionals in organizations that respond to child abuse) were used for the National Incidence Studies completed in 1980

and in 1986. Reports of maltreatment were collected from Child Protective Service (CPS) workers and from professionals in other community agencies (schools, hospitals, police, courts). Abuse involved “serious injuries that could have been avoided” for the first study, but abuse also included children “at risk” for the second study (NIS, 1981, 1988). Empirical findings regarding physical abuse indicated an incidence rate of 3.1 in 1980, counting only serious injuries, but 4.9 and 5.7 for 1980 and 1986, respectively, based on the broader “at risk” measure. Either estimate is much smaller than those provided by general population surveys.

Total CPS reports reflect community and professional standards for determining appropriate childcare. Thus, a report to CPS indicates that someone believes that a child has been abused and exercises discretion to report. Given the ambiguity of definitions, such beliefs challenge the validity of indications of abuse. In 1986, CPS agencies received about 2,086,000 reports (American Humane Association [AHA], 1988). Severe injuries, younger victims, and sexual abuse appear to be most likely reported (Ards & Harrell, 1993). Analysis of subsets of states suggests that 28% of the reports involved physical injury, for a total physical abuse rate of 9.2, also considerably lower than rates derived from general population surveys.

If only the investigated and substantiated CPS reports for 1986 are considered, the physical abuse rate is approximately 4.6 per 1000 children (AHA, 1988). The figure for 1993 was 3 incidents per 1000 children (U.S. Department of Health and Human Services, 1994). Such an approach rests on the assumption that CPS workers or police are likely to use more consistent judgments and discretion than reporters, thereby creating a standard operational definition. This incidence rate is lowest of all, and undoubtedly is an underestimate, due to failure of some persons to report, a lack of evidence caused by delayed investigations, conflicting definitions, and other factors.

All told, the disparity in rates and the number identified as physically abused based on those rates varies from 107, or a total of 6.5 million children in 1985 (Straus & Gelles, 1986) to 5.7, or over 358,000 children, in 1986 (NIS, 1988) to 4.6, or about 200,000 children (AHA, 1987, 1987). This disparity reflects differences in definitions, methodologies, and assumptions about causality. Which estimate should be used to document incidence rates of physical abuse? Clear conceptual and operational definitions of violence are essential if research is to answer this question and others about family violence.

Traditional research in the fields of child abuse, partner abuse, and elder abuse tends to be *ex post facto*, single group studies, with relatively few inquiries that use a control or comparison group or an experimental design. Samples are often drawn for convenience, without concern for represen-

tativeness, creating nongeneralizable results (e.g., Mash & Wolfe, 1991; Widom, 1988). Consequently, traditional social science-oriented research must be examined carefully, especially studies offering causal explanation or those that describe the effects of violence for providing evaluations of interventions or treatment programs.

Violence and Abuse toward Children

Following the publication of “The Battered Child Syndrome” (Kempe et al., 1962), media response and the involvement by medical professionals, advocacy groups, and legislatures produced a level of legal activity to protect children that was unmatched for any other social problem (Nelson, 1984). Medical, legal, and social services quickly developed, with each bringing a distinctive set of definitions, different causal approaches, and varied styles of interventions and prevention.

Violence and Definitions of Child Abuse

Public Law 93-247 initiated federally funded research, intervention, and treatment programs. It defined child abuse and neglect in general terms:

the physical or mental injury, sexual abuse, negligent treatment or maltreatment of a child under the age of eighteen by a person who is responsible for the child's welfare under circumstances which indicate that the child's health or welfare is harmed or threatened thereby. (*Interdisciplinary Glossary*, 1978, pp. 8–9)

Considerable discretion is granted by this definition to parents and professionals in their identification of the injuries or the threats to a child's health or welfare. Efforts to provide more specific definitions have generally been unsuccessful (e.g., Besharov, 1985; Gelles, 1982; Hutchinson, 1990), despite the significance of both conceptual and operational definitions for research, practice, and policy.

Vignettes describing the many types of physical violence that are directed toward children, from spanking to severe acts of violence that result in serious injuries, evoke some agreement but also some disagreement in perceptions of seriousness and the reactions taken by physicians, nurses, police, lawyers, teachers and social workers. For cases that do not result in obvious harm only, perceptions and reactions differ widely. Only in extreme situations or in cases that are clearly injurious to the child do researchers find relative consensus in perceptions and judgments of appropriate actions to take (e.g., Giovannoni & Becerra, 1979; O'Toole, Turbett, Sargent, & O'Toole, 1987; Snyder & Newberger, 1986). Responses to child abuse vignettes vary across segments of the general population as well, especially according

to the race, gender, education, religiosity, marital status, occupation, or experience of parenthood, which influence respondents' definitions of appropriate actions (e.g., Garrett, 1982; Roscoe, 1990; Webster, 1991).

Vignettes and perceptions of appropriate responses to child abuse cases generate abstract conceptions regarding the severity of abuse and the appropriate social response to the social problem. However, conceptions of appropriate and inappropriate childcare are grounded in and shaped by cultural, social, and personal factors that influence how legal definitions of child abuse are applied. Laws mandate the reporting of suspected abuse cases to CPS, but many incidents are not reported. Empirical study shows that at least half of all child abuse cases are not reported, regardless of legal mandate (Hazzard & Rupp, 1986; Kalichman, Craig, & Follingstad, 1988; Osborne, Hinz, Rappaport, & Williams, 1988; Warner & Hansen, 1994). Why? In addition to ambiguous definitions, a widespread fear of retaliation by the perpetrator, ignorance of the law, and beliefs that the child will not benefit from the report, as well as the perpetrator's, victim's, and observer's age and sex and their personal beliefs about families, also affect the likelihood of reporting a child abuse case.

Incidence and Prevalence

Despite these circumstances, about 3 million official reports of child maltreatment are now received by CPS and police departments in the United States each year. Any reported case requires an investigation. Based on earlier patterns, about 40% of the reported cases are validated, indicating that about 1.2 million children are victims of some form of physical, emotional, and sexual violence or neglect each year. Approximately half the validated cases are child neglect. Of the remaining 600,000, at least 250,000 are cases of physical violence, at least 150,000 cases are sexual abuse, and the remainder involve multiple types of maltreatment. All cases of child maltreatment involve a component of some form of emotional abuse (AHA, 1988). These figures indicate a growing public awareness of the problem, but the actual number of abused children remains unknown. A challenge to state intervention into families continues, making precise estimates even more difficult to achieve (Olafson, Corwin, & Summit, 1993).

A child's reaction to incidents and the child's conception of sexual behavior are critical for defining actions such as abuse, and thus in determining accurate levels of child sexual abuse (e.g., Lloyd, 1992; Wurtele & Miller, 1987). Official reports underestimate incidence rates, and surveys of children in the general or clinical populations are simply not available for calculating rates of sexual abuse. However, the National Incidence Studies (surveys of professionals) re-

ported 2.5 children per 1000, or about 150,000 victims of molestation annually, based on the assumption of harm from intrusion, molestation with genital contact, other fondling, and inadequate supervision over sexual behavior (NIS, 1988). These figures are similar to those derived from official government agency reports.

Prevalence rates, the number of children per 1000 ever sexually abused from birth to age 18, offer some additional evidence of the frequency of sexual abuse. Based on surveys of adults and college students, prevalence rates range from 60 to 600 for women and 50 to 100 for men (e.g., Fromuth & Burkhart, 1987; Peters, Wyatt, & Finkelhor, 1986; Russell, 1983). Finkelhor (1993) concludes that “at least one in four girls and one in ten boys will suffer victimization” (p. 67). These estimates are based on retrospective accounts by adults, using respondent samples drawn from specific populations rather than randomly selected from the general population, and on definitions of sexual abuse that are induced from the responses to questions about childhood sexual activities and experiences. As a result, the conceptual and methodological limitations preclude definitive statements about the prevalence of child sexual abuse (e.g., Haugaard & Reppucci, 1988; Martin, Anderson, Romans, Mullen, & O’Shea, 1993; Morrison & Green, 1992), but the data do indeed support the claim that sexual abuse is a common experience for thousands of children each year in the United States.

Emotional abuse per se is extremely difficult to define, partly because some psychological harm results in all or most physical and sexual abuse cases. Independent actions, those that are intended to be rejecting, degrading, isolating, corrupting, and exploitive, have been defined as emotional abuse (Brassard, Germalin, & Hart, 1987; Garbarino, Guttman, & Seeley, 1986). The operationalization of emotional abuse is problematic, partly due to definition difficulties and partly due to an inability to distinguish emotional abuse apart from other forms of child abuse, resulting in no clear estimate of incidence or prevalence at this time (Hart & Brassard, 1991).

The National Incidence Studies (NIS) defined emotional abuse as close confinement, verbal assault, deprivation as punishment, or economic exploitation. In the 1980 NIS study, over 138,000 children were counted as actual victims. When the broader “at risk” criteria were applied for the 1986 study, researchers estimate that 211,000 children each year in the United States are victims of emotional abuse—more than the numbers of children victimized by sexual abuse (NIS, 1981, 1988). CPS reports of valid emotional abuse cases are much lower, less than 30,000 children in 1986. This discrepancy illustrates the difficulty in defining and documenting this particular form of child abuse and violence (AHA, 1988).

Causal Factors

Numerous social science studies that are designed to identify the unique characteristics of individual perpetrators of child abuse have produced, at best, ambiguous results. Psychopathology explains the actions of a relatively small number of abusers, and the reviews of studies on personality profiles indicate very limited success in identifying the underlying attributes or perpetrator characteristics that are associated with either physical or sexual abuse (e.g., Okami & Goldberg, 1992; Murphy & Peters, 1992; Milner & Chilamkurti, 1991; Wolfe, 1985). Studies of parents who are identified as physical abusers indicate that many have low self-esteem, poor self-concepts, poorly developed cognitive skills, and unrealistic expectations. Measurement problems, unclear definitions, and the lack of comparison or control groups make such findings tentative (e.g., Holden & Edwards, 1989; Knudsen, 1992).

Individualist explanations of sexual abuse that center on both perpetrator and child characteristics have not been very successful. Abnormal response patterns on personality tests are found to be typical of some abusers (Kalichman & Henderson, 1991; McIvor & Duthie, 1986) but have limited value for explaining sexual activities with children (Hall, 1989). Other factors such as inadequate social skills or inappropriate socialization (e.g., Knight, 1989; Muller, Caldwell, & Hunter, 1993; Parker & Parker, 1986), heightened responsiveness to sexually explicit materials (e.g., Marshall, Barbaree, & Butt, 1988), perpetrator self-centeredness (Gilgun & Connor, 1989), or special vulnerability, such as the “trusting” child or the “availability” of the child victim (Conte, Wolfe, & Smith, 1987), have been identified. Each of these factors offers some insight, but none by itself is sufficient to explain the high levels of sexual abuse. Interactional theories have been used to explain violence toward children. Abuse is the result of a failure in relationships, caused by the inadequate or unequal abilities of the parent and child. Attachment and bonding theories assume a uniqueness in the mother–infant experience that precludes or prevents abuse. Early clinical studies (e.g., Bowlby, 1980) supported this interpretation, but later nonclinical research (e.g., Birns, 1988; Chess & Thomas, 1982; Eyer, 1992) is not able to document the importance of mother–infant bonding for explaining physical violence directed against children in the family. Nevertheless, researchers do find that the risk of sexual abuse is higher in stepfamilies than it is in biologically related families (Alexander & Lupfer, 1987; Finkelhor & Baron, 1986; Gordon, 1989; Paveza, 1988), consistent with a bonding interpretation.

Social learning theories, especially those that explain the intergenerational transmission of violence as learned

behavior, propose that children learn violence and its acceptability through experiences or observations that become major influences on their behavior as children and as adults. Despite the intuitive appeal and popularity of the intergenerational transmission thesis, the empirical data that are analyzed to test the thesis yield inconsistent and inadequate support for it (e.g., Benjamin, 1980; Burgess & Youngblood, 1988). The national surveys of family violence show that less than 20% of abused children become abusers as adults (Straus & Gelles, 1990; Straus, Gelles, & Steinmetz, 1980). A review of self-report studies concluded that less than one-third of abused children become abusive adults (Kaufman & Zigler, 1993). Further, after an extensive review of the research literature, Widom (1983) finds that the majority of abusive adults were not abusive children, concluding: “[E]mpirical evidence demonstrating that abuse leads to abuse is fairly sparse” (p. 23).

The theory and research on how the abused becomes the abuser also fails to explain incest or sexual abuse of children committed outside the family. Though most sexual abuse occurs within families, a significant proportion does not, especially sexual abuse perpetrated by children and adolescents. Further, the diagnosis of sexual abuse is severely hampered by the secrecy and shame that usually surrounds the abuse, by the various conceptions and interpretations of the experience by the charges associated with child custody decisions (e.g., Faller, 1991), and by age and knowledge of the child (Jackson & Nuttal, 1993). Several researchers have noted that some offenders have experienced sexual abuse as children (Benoit & Kennedy, 1992). However, a systematic review of the sexual abuse perpetrator studies that was completed by Hanson and Slater (1988) reports that less than 30% of sexual abusers report any prior victimization. While this figure is about three times the rate for the general population, at least two-thirds of perpetrators of sexual abuse were not sexually abused, suggesting that other factors are important in explaining their abusive behaviors (e.g., Breire, Henschel, & Smijanich, 1992; Hall & Hirschman, 1992; Pawlak, Boulet, & Bradford, 1991).

Undoubtedly, the etiology of incest is complex: Some children are groomed and courted, some are brutally attacked, some submit because family interactions have left them powerless, and some are socialized to believe that some forms of incest are appropriate (e.g., Aiosa-Karpas, Karpas, Pelcovitz, & Kaplan, 1991; deYoung & Lowry, 1992; Frude, 1989; Madonna, Van Scoyk, & Jones, 1991; Okami, 1991; Reis & Heppner, 1993).

Sociocultural theories emphasize the social context and cultural values that support violent acts. Normative support for the physical punishment of children in the United States is reflected by an emphasis on parental responsibility and

family privacy and is rooted in religious and legal traditions (e.g., Ellison & Sherkat, 1993; Garbarino & Kostelny, 1992; Grasmick, Bursik, & Kimpel, 1991; Graziano, Lindquist, Kunce, & Munjal, 1992; Grevan, 1990; Pleck, 1987; Straus, 1991b). In combination with stress-producing events such as unwanted pregnancy, the loss of a job, divorce, and neighborhood instability, the social and cultural values that support or legitimate violence allow and encourage the physical and emotional abuse of children (Trickett, Aber, Carlson, & Cicchetti, 1991).

The findings and theories we present here are suggestive, and not conclusive. Most of the current research in the child abuse field is retrospective rather than prospective; it fails to use control or comparison groups, it lacks specificity in measuring abuse, it is cross-sectional in design rather than longitudinal, and it employs convenience rather than randomly drawn samples. All these limitations mean that caution should be used when any attempt is made to generalize or apply research findings. Further, studies of child abuse reflect the researcher’s disciplinary training, experiences, personal values, and general perspectives of the children abused. Explanations of violence as a social level phenomenon typically rely on individual level data and a lack of adequate theoretical specification. These issues have serious implications for social policy decisions about intervention and prevention programs that intend to ameliorate the problem of child abuse.

Consequences of Violence

A large number of studies attempt to document the negative effects of physical, sexual, and emotional abuse on children. Unfortunately, most of the findings must be qualified due to the theoretical and methodological limitations identified earlier, making causal linkages between violence and specific behavioral conditions difficult (e.g., Breire, 1992; Haugaard & Emery, 1989; Rivera & Widom, 1990). Nevertheless, some consistent results have emerged from studies using different theoretical and methodological perspectives.

Recent research supports the earlier studies regarding the short-term effects of child abuse. Evidence indicates that physically abused children, compared to nonabused children, have lower self-esteem, ambition, social competence, and verbal and cognitive skills and are more likely to experience depression and respond to aggression with aggression (e.g., Eckenrode, Laird, & Doris, 1993; Fatout, 1990; Haskett & Kistner, 1991; Kaufman, 1991; Salzinger, Feldman, Hammer, & Rosario, 1991; Wolfe, 1987; Wolfe & Jaffe, 1991). These findings are important for the development of interpersonal skills and adult psychological health.

Long-term consequences are not easily documented. Efforts to show a direct relationship between violence and later criminality have generally been unsuccessful, largely due to methodological problems (e.g., Doerner, 1987; Gray, 1988; Kratcoski & Kratcoski, 1983; Rivera & Widom, 1990). Further, these effects may be mediated by a variety of factors, such as out-of-home placement, strong social support, or intervention and treatment (e.g., Downs, Miller, Testa, & Panek, 1992; Kurtz, Gaudin, Howling, & Wodarski, 1993; Martin & Elmer, 1992). However, despite the difficulties in making direct inferences, long-term consequences, including low self-esteem and social competence, exist for a significant proportion of adults who were physically abused as children (e.g., Breire & Runtz, 1987; Pollock et al., 1990).

Even nonabusive levels of violence (defined by state statutes) appear to have important, negative impacts on adult development. The most ambitious and careful study that examines the long-term effects of physical punishment of children is Straus' *Beating the Devil Out of Them: Corporal Punishment in American Families* (1994). Using a wide range of analytic techniques, statistics, and sources, Straus concludes that ending the hitting of children will reduce stress and trauma within families, result in more rewarding family relationships, and lower the levels of alienation, depression, and suicidal tendencies that exist, thus producing a society with less crime. In a recently published study, Straus, Sugarman, and Giles-Sims (1997) report the findings from research in which they asked a sample of mothers if they had spanked their 6- to 9-year-old children at least once during the prior week and, if so, how often they spanked their children. Based on a 2-year follow-up survey of the same 807 mothers, Straus reports that spanking is directly correlated with the increased likelihood of school children cheating, lying, bullying other children, and manifesting problems at school. If the elimination of spanking in the family can reduce personal, family, and social problems, imagine the future society in which corporal punishment in school, currently in use in some of the states, exists no longer (Straus & Mathur, 1996; Straus, Sugarman, et al., 1997).

Studies on the consequences of child sexual abuse demonstrate a wide range of possible psychological problems for the child and the adolescent victim. A comprehensive review of the initial and the long-term consequences of sexual abuse (Browne & Finkelhor, 1986) finds numerous negative effects that have been supported by subsequent research. The reviewers indicated that guilt, shame, somatic complaints, inappropriate sexual behavior, and poor social relations are frequently observed short-term sequelae. These findings generally have been bolstered by later research (e.g., Friedrich, 1993; Hotte & Rafman, 1992; Kalichman, 1991; Lanktree, Breire, & Zaidi, 1991; Shapiro, Leifer, Martone, & Kassem, 1992). However, one review of short-term effects noted that

the majority of such effects are symptoms of clinical child samples in general (Beitchman et al., 1992), illustrative of a sampling issue (general population vs. clinical population samples) that pertains to most child abuse studies. The psychological and social difficulties for victims of sexual abuse appear also to be related to the severity and the type of sexual abuse, the age of child victim, the length and intensity of the abuse, and the child's relationship to the perpetrator (e.g., Breire & Runtz, 1987; Conte & Schuerman, 1987; Nash, Zivney, & Hulsey, 1993). Negative, short-term consequences are found in children of all racial, ethnic, religious and socioeconomic groups, although the contexts and circumstances that may modify these effects remain obscure.

Long-term sequelae for sexual abuse have been identified by numerous studies, although it remains impossible to identify specific effects, independent of other factors, such as family problems, the use of force, and the individual's experiences. Still, the consistency of research findings suggest several serious long-term consequences of sexual abuse and the family circumstances associated with it. Sexual dysfunctions, anxiety and fear, depression, and higher levels of suicide are found among adult victims of child sexual abuse (e.g., Beitchman et al., 1991; Collings, 1995; Cutler & Nolen-Hoeksema, 1991; Johnson & Kendel, 1991; Saunders, Villeponteaux, Lipovsky, Kilpatrick, & Veronen, 1992; Tomlin, 1991). In addition, parenting problems, revictimization (battering and rape), and personality disorders have been found (e.g., Alexander & Lupfer, 1987; Cole, Woolger, Power, & Smith, 1992; Russell, 1986).

The emergence of HIV has produced additional concerns regarding forced sexual activities. No adequate data exist to estimate incidence or prevalence rates of HIV among children. However, there appears to be agreement that severe sexual abuse (forced sexual intercourse, oral sex, or sodomy) is associated with an increased risk of contracting the HIV virus (Allers, Benjack, White & Rousey, 1993; Jason, 1991) because of initial contact with an infected adult perpetrator as well as the increased sexual activity by the child or adolescent following abuse.

Despite the documented immediate and long-term effects of sexual violence toward children, one comprehensive review of the published studies finds that many researchers report that they find a substantial proportion of victims who are asymptomatic (Kendall-Tackett, Williams & Finkelhor, 1993). Estimates of those not affected range from 20%–50% of the children who are sexually abused. The wide range in estimates is perhaps due to the use of different measures, delayed reactions, or lack of actual impact. It is clear that many women and men who were once victims of incest have coped, survived, and succeeded despite their experiences, perhaps due to strong social support from family and friends, therapeutic intervention, or personal strengths (e.g., Reis &

Hepner, 1993). Additional research is needed to identify and document those factors that can protect and assist child victims of sexual violence.

Data from the National Family Violence Survey indicate that emotional or verbal violence directed at children is associated with social and psychological problems. Based on a nationally representative sample of 3346 children, verbal aggression by parents is related to physical aggression, delinquency, and interpersonal problems of children. This empirical relationship “applies for all age groups, and for both boys and girls, in both low and high socioeconomic status families” (Vissing, Straus, Gelles, & Harrop, 1991, p. 235).

Other research (e.g., Breire & Runtz, 1987) offers similar findings regarding the effects of emotional abuse per se, or emotional abuse in conjunction with other forms of violence. Unfortunately, more precise definitions and a better elaboration of concepts are needed to delineate these sequelae adequately.

Responses: Treatment and Prevention

Given the emphases on family privacy and parental control and the legitimacy of physical punishment of children, it is only natural that treatment programs for physical violence have been directed toward changing the behavior of parents and perpetrators, with relatively little attention to victims, except in cases of severe injury. Prenatal education of parents, psychotherapy, and crisis management programs are designed to provide knowledge of child needs and developmental processes, effect changes in pathological behaviors, and train parents in stress management. Few programs address many of the sources of stress, such as low income, isolation, poor education, young parenthood, family crises, and social incompetence that appear to contribute to physical abuse. While some multiservice programs have produced desired changes in parents and other abusers (e.g., Lutzker & Rice, 1987; Whiteman, Fanshel, & Grundy, 1987), there is little evidence that traditional therapeutic interventions with individuals are effective.

Two major studies that were designed to measure treatment effectiveness reported similar results. The first concluded that abusers receiving lay services, rather than professional services, were judged to have lower propensities to abuse in the future. A second study examined 46 different factors that were identified as contributors to neglect and emotional, sexual, and adolescent abuse. The length of time services were provided is an important correlate of treatment success. However, the researchers conclude that “treatment efforts in general are not very successful” (Daro, 1988, p. 121). Traditional services, notably one-to-one counseling and casework, were the least likely to produce positive results. A review of treatment program effectiveness studies

suggests that few programs have been subjected to rigorous evaluation despite the dramatic growth of intervention services (Oates & Bross, 1995).

Intervention on behalf of families and victims of sexual violence tends to use traditional approaches. One study assessing over 550 sexual abuse programs reports that individual counseling (93%) and family counseling (90%) are the most common services offered, but less than half of the programs regularly use standardized measures to evaluate clients (Cichetti & Barnett, 1991). These studies show that typically, therapeutic services for sexual abuse are unplanned, unsystematic, and often contradictory in their service characteristics. Treatment for victims and perpetrators may be selected on the basis of availability, cost, or ease of access.

Among the treatment programs available for offenders are biological or organic treatments (antiandrogens or hormonal treatments, including “chemical castration,” and surgery), group therapy, family therapy, and behavioral treatments such as covert sensitization, cognitive restructuring, biofeedback, and arousal conditioning (Becker & Hunter, 1992; O’Donohue & Letourneau, 1993). Analysis of the effectiveness of these types of interventions suggest that a combination of treatments may reduce recidivism (e.g., Hall, Shondrick, & Hirschman, 1993; Marshall & Barbaree, 1988; Rice, Quinsey, & Harris, 1991).

One of the major problems for nonincarcerated offenders is the failure to complete treatment programs, making evaluation of the program or success in the program difficult. Unfortunately, many of those who fail to complete the process appear to be the most in need of therapy (e.g., Chaffin, 1992). Programs for victims of family sexual violence are diverse, but most involve a variety of treatments for both children and adult victims of incest, focused on low self-esteem, guilt, blame, and social relationships (e.g., Alexander, Neimeyer, Follette, Moore, & Harter, 1989; Clarke & Hornick, 1988; Friedrich, Luecke, Beilke, & Place, 1992; Singer, 1989).

Effectiveness of these programs is difficult to determine, and although some recent studies show promise in mediating negative consequences (Faller, 1988; Rust & Troupe, 1991), one review concludes that “to date there has been no study demonstrating definitely the efficacy of any treatment method” (O’Donohue & Elliott, 1992). There is some evidence to support the premise that family and friends are significant factors for minimizing the impact of violence on the victim and the victim’s ability to complete the treatment programs (Edwards & Alexander, 1992; Follette, Alexander, & Follette, 1991).

Efforts to create prevention programs for physical abuse generally have been focused on “at-risk” populations identified through various tests (e.g., Browne & Saqi, 1988; Milner

& Robertson, 1989; Schneider, 1982). Screening is compromised by unacceptably low levels of predictability and negative consequences of labeling for “false positives.” Consequently, the current focus is on primary prevention, including universal access to services such as prenatal medical care, parental education, increased peer involvement, childcare, support groups, and community organizations. In addition, advocacy programs and public education programs have been initiated (Donnelly, 1991). One study (Showers, 1992) examines the outcome of a “Don’t Shake the Baby” program and reports that nearly half of the participants indicate that they are less likely to shake their babies because of the program, although no behavioral data are available to corroborate the participants’ claims.

Sexual abuse prevention, because of the secrecy usually involved, often assumes that children must be prepared to protect themselves from sexual violence, through education programs by teachers, pediatricians, counselors, and others. Numerous approaches have been developed (e.g., Finkelhor & Dziuba-Leatherman, 1995; Tutty, 1990), although there is little solid empirical evidence of effectiveness (e.g., Daro, 1991). Further, family privacy and parental control over their children can only diminish the positive outcomes of any program designed to prevent incest.

Clearly, successful programs that prevent violence toward children have yet to be identified and documented, although some evidence suggests that programs are more successful in providing knowledge than in preventing injuries (Finkelhor, Asdigian, & Dziuba-Leatherman, 1995). Carefully conceptualized research, with appropriate, well-defined samples, is needed to allow the development of comprehensive policies to protect children (Melton & Flood, 1994).

Domestic Violence and Abuse

Domestic violence includes physical violence, sexual abuse, and emotional abuse and refers to the systematic use of force or the threat of force by an adult partner who has the intention to harm the other partner. Domestic violence often includes a motive of control or domination. Domestic partnerships, for the purposes of this chapter, include cohabiting heterosexual, lesbian, and gay couples. Although dissolved domestic partnerships (divorced or separated couples) are included, “dating” couples are not. In contrast to child abuse, some analysts claimed that the scholarly work on domestic violence is “newer, less developed, and less clearly divided into schools of thought” (Breines & Gordon, 1983, p. 507). By the end of the 1990s, such claims are suspect. The research is rich and varied, and clearly is divided into distinctive schools of thought, especially in consideration of the

gendered (feminist) and nongendered (family violence) systems approach for analyzing this particular social problem (Breines & Gordon, 1983; Brush, 1993; Kurz, 1993). Like the child abuse field, partner abuse studies examine offender characteristics, victim characteristics, social interaction patterns, and how families and family-like relationships influence the likelihood and severity of violent patterns. Some studies are conducted at the individual or interpersonal level of analysis; however, more recent work tends to depend on structural factors and the social contexts in which violence between intimates takes place to explain either the levels and consequences of domestic violence or the effectiveness of domestic violence intervention.

Similar to child abuse research, the history of the study of domestic violence shows definitional and operationalization problems (Frieze, 1983; Geffner, Rosenbaum, & Hughes, 1988; Straus, 1991a; Webster, 1991). For example, is the severity of abuse defined by the offender’s acts or by injuries sustained by a partner? Must violence be repeated to be considered “abuse?” Do abusive acts include verbal threats, acts that cause emotional harm, and forced and non-consensual sexual activity? Finally, can men and couples be victims of any or all forms of abuse?

Initial estimates of the levels of domestic violence in the United States (the 1975 National Family Violence Survey, for example) were based only on married couples, inevitably resulting in an underestimation of violence between cohabiting intimates (Miller, 1979). Most recent estimates now include heterosexual cohabiting couples and some include lesbian and gay couples.

Violence between Heterosexual Partners

Physical Abuse. Numerous studies have documented that too much physical violence occurs within intimate heterosexual relationships. The 1975 National Family Violence Survey, based on a large and representative sample of American families (Straus, Gelles, & Steinmetz, 1980), reported that over 16% of the 2143 couples interviewed had engaged in at least one of eight violent acts measured with the CTS. Furthermore, the most common type of incident reported is a situation in which both the husband and the wife engaged in some form of physically violent act.

In the 1985 National Family Violence Resurvey of 6002 currently married or cohabiting couples, 30% of the couples indicated that they experienced at least one violent altercation during the course of their marriage (Gelles & Straus, 1988; Straus, 1991a), and 16% of American couples, or one of every six, reported an incident involving violence during that year. Comparing findings from the two surveys, researchers found a 27% decline in reports of lesser and more severe violence against wives between 1975 and 1985.

Given the magnitude and rapidity of such a drop, the researchers offered three possible explanations: methodological differences between the two surveys, a reluctance to report severe violence due to media coverage of family violence, and an actual decline in violence against women due to changes in family structure, the economy, alternatives for battered women, treatment programs, and deterrence-oriented police intervention. Egley (1991) conducted a cohort analysis of the national studies and concluded that the reported reductions in levels of domestic violence probably do not represent actual decreases. Still, these studies provided a body of evidence “suggesting that the major causes of physical violence in the family are to be found in certain basic characteristics of the American family and American society,” such as male dominance in the family and the larger society and levels of poverty in the U.S. (Straus, 1990b, pp. 6–7).

Relatively little attention has been directed toward documenting variations of violence patterns among racial or ethnic groups. Using data from the National Family Violence Surveys, Hampton, Gelles, and Harrop (1991) reported that the overall rate of violence in black male-to-female incidents remained the same, nearly 17 per 1000 couples, in both 1975 and 1985, while severe violence, a measure of wife-beating, decreased by 43% (from 113 in 1975 to 64 in 1985). Based on a sample of battered women obtained through references by family court, a battered women’s shelter, and a homeless shelter, Joseph (1997) finds “there were no significant differences in the nature and extent of the abuse between Black and White women” (p. 167).

Simply presenting violence rates by race may obscure differences that may have been due to income level, employment status, different cultural expectations and values concerning violence, or access to social networks (Lockhart, 1991). Based on an analysis of data from three social experiments designed to assess the consequences of arrest on repeated acts of violence, controlling for education, family composition, and employment status, Miller and Krull (1997) conclude there is empirical evidence to “refute the contention that Blacks perpetrate more domestic violence than other racial or ethnic groups” (p. 246). Whites, compared to blacks, Hispanics, and Asians, perpetrated significantly *more* repeated acts of domestic violence in one city. When social class and social network embeddedness are controlled in the National Family Violence Survey data, virtually all of the race differences between blacks and whites disappeared (Cazenave & Straus, 1990). Even based on an earlier study of 307 black and white women of various social class positions, Lockhart (1987) found that there are no significant differences between the proportion of black and white women who experienced family violence, or in the number of times violence was experienced. The only significant differ-

ence found was that a larger proportion of black middle-class (45.6%) women reported that they experienced marital violence compared to white middle-class women (27.1%).

Most recently, several studies have examined physical violence against women of color, going beyond presenting rates of violence by race. These studies point to the necessity of taking culture(s) into account when researching physical violence (Campbell, Campbell, King, Parker, & Ryan, 1994; Chester, Robin, Koss, Lopez, & Goldman, 1994; Kantor, Jasinski, & Aldarondo, 1994; Perilla, Bakeman, & Norris, 1994; Urquiza, Wyatt, & Root, 1994). All told, one may safely conclude that racial and cultural stereotypes do not provide any useful or accurate information about the levels or severity of domestic violence experienced in contemporary American society.

Violence against male partners has been examined within the context of violence between intimates (Steinmetz, 1987; Steinmetz & Lucca, 1988; Stets & Straus, 1990; Straus et al., 1980). Researchers, using analysis of National Family Violence Survey data, have reported that in comparison to men, women initiate attacks just as often (Stets & Straus, 1990; Straus, 1991b), are more likely to use physical violence, and use it with greater frequency (Steinmetz, 1987). In their review of changes in family violence rates from 1975 to 1985, Straus and Gelles (1990a) remark that “the rates for violence by wives are remarkably similar to the rates for violence by husbands” (p. 96). Whereas rates of husband-to-wife incidents decreased over the decade, rates of woman-to-man incidents increased. Some contend that the CTS, because it does not adequately measure the context surrounding the violence or the degree of injury sustained, may result in the misrepresentation of “assaults” by women against their male partners. Perhaps acts of retaliation or self-defense explain female-to-male assaults. There is, however, no strong empirical study to support the contention.

Wife abuse and husband abuse research has been widely criticized (Breines & Gordon, 1983; Brush, 1993; Gelles, 1987; Kurz, 1993; Pagelow, 1984; Straton, 1994), usually based on arguments that inadequate measures of who was injured, who initiated the violence, or self-defense were used. Further, some suggest that the use of the CTS is problematic because the scale and its subscales do not “deal with the bias possibly resulting from the fact that ‘violent’ behaviors by a man may be ignored as nothing out of the ordinary, while similar behavior by a woman may be so out of character that it is well remembered” (Breines & Gordon, 1985, p. 512).

The causes of domestic violence remain elusive. Researchers have determined a long list of factors that are associated with higher or lower rates of physical violence between intimates. Risk factors include a previous history with family violence (Straus et al., 1980); the use or abuse of alcohol (Kantor & Straus, 1990); stress from poor economic

circumstances (Straus, 1990b); gender inequality (Coleman & Straus, 1990; Gerber, 1991; Straus et al., 1980; Yllo, 1984); the status of women in the larger society (Yllo, 1984; Yllo & Straus, 1990); pregnancy and the postpartum period (Gelles, 1987, 1990b; Gielen, O'Campo, Faden, Kass, & Xue, 1994); wives' marital dependency (Kalmuss, 1982; Kalmuss & Straus, 1990); and social isolation, particularly among cohabiting couples (Stets, 1991). Additionally, some suggest that the physical abuse of women in a relationship is closely linked with sexual abuse (Frieze, 1983; Hanneke, Shields, & McCall, 1986).

Sexual Assault and Marital Rape. Until recently, rape within marriage was (and still is in a small number of states) considered legally impossible in the United States (Augustine, 1990–1991; Bidwell & White, 1986). Spousal immunity or husband exemption from rape charges is traced back to British Lord Matthew Hale's 1736 proclamation, in *Pleas of the Crown*: “[T]he husband cannot be guilty of a rape committed by himself upon his lawful wife, for by their mutual matrimonial consent and contract the wife hath given up herself in this kind unto her husband which she cannot retract” (cited in Augustine, 1990–1991). This proclamation was based on the notion that a wife was considered her husband's property, and that upon marriage, husband and wife united into a single legal being (a husband). Thus, a husband could not rape his wife any more than he could steal from or rape himself.

Spousal immunity from the charge of rape remained essentially unchanged until the 1970s, and it was only during the 1980s and 1990s that U.S. states displayed an open rejection of the marital exemption by eliminating certain or all aspects of the exemption in their criminal codes. Currently only three states retain explicit marital rape exemptions in their penal codes. The exemption has been eliminated in 24 states, and 23 states specify circumstances or conditions, such as living apart, for a woman to charge her spouse with rape (Barnett, Miller-Perrin, & Perrin, 1997). Although women's organizations have successfully persuaded legislators to abolish or change marital rape exemption laws, the marital rape problem persists and is well documented. The conviction of a husband for raping a wife remains one of the most unusual criminal convictions achieved in any and all U.S. courts.

Russell (1982), in pioneering research, defined sexual assault or rape within the marriage as any type of forced sex (vaginal, anal, and oral sex, as well as forced digital penetration). Other researchers broaden the definition of sexual abuse to include acts such as forced kissing and the forced fondling of genitals (Finkelhor & Yllo, 1985; Frieze, 1983). Researchers examining marital rape must be cautious in how they define and then operationalize sexual abuse, especially

because many women do not define sexual abuse by their husbands as “rape,” even when intercourse has been forced on them. Therefore, without the appropriate questions or measures, many incidents of rape or sexual abuse go undetected.

Through her interviews with 930 women, Russell (1982) found that one of every seven women who had ever been married had reported one or more experiences of marital rape. Beyond the women in Russell's sample who met her definition, “Many women not included in this group saw it as their ‘duty’ to submit to sexual intercourse with their husbands even when they had no desire for sex or were repulsed by the idea” (p. 58). Similarly, Finkelhor and Yllo (1985), based on interviews with 323 Boston women, found that 10% of the women reported that they were forced into having sex with their husbands or male partners. Bidwell and White (1986) identify several factors in the marital dyad that are associated with the occurrence of marital rape: lower quality marriages, continuous disagreement, premarital pregnancies, and the occurrence of physical violence.

Emotional Abuse. A number of researchers study the emotional abuse of children by parents or other caretakers, but studies on adult intimate emotional abuse are still limited in number. Several terms to indicate emotional abuse are often used interchangeably: verbal abuse, verbal aggression, and psychological abuse. Sabourin (1991) notes that verbal abuse is often operationally defined by the occurrence and intensity of several verbal acts: insulting, accusing, rejecting, and disconfirming. Straus and Sweet (1992) define verbal or symbolic aggression as a communication, either verbal or nonverbal, intended to cause psychological pain to another person or perceived as having that intent. It includes threats of physical or sexual aggression and can include acts such as name-calling, door-slamming, and sulking. Using the 1985 National Family Violence Survey data, Straus and Sweet report that 74% of the men and 75% of the women in cohabiting couples engaged in one or more verbal attacks during the year.

The relationship between emotional abuse and physical abuse is complex, and it is usually examined only by research that is designed to study physical violence incidents. Most studies find that some form of verbal abuse is a precursor to physical violence (Miller & Krull, 1997). Gagne (1992) reports that Appalachian wives abused by their husbands are often socially isolated, left at home without transportation, and forced to have children against their own wishes. Tiff (1993) reports that some men who batter also use emotional, torturelike tactics to control their partners, such as the deprivation of sleep or enforced social isolation. In some studies, a decline in verbal aggression is found to be associated with an increase in age and the number of children in a family (Straus & Sweet, 1992).

The most comprehensive study of emotional abuse was conducted by Stacey, Hazelwood, and Shupe (1994) based on their interviews with violent couples who participated in a counseling program in Austin, Texas. These researchers identified 13 forms of emotional abuse, including denial of freedom, censoring phone calls, name-calling, and the use of verbal threats. For both men and women, name-calling or belittling is the most frequently occurring form of emotional behavior. Moreover, men and women are equally likely to deny rights of privacy to each other. There are also some gender differences in the ways adult partners emotionally abuse each other. Women who emotionally abuse are least likely to deny their male partners access to their family members or to withhold sex from their partners. Men who emotionally abuse are least likely to make verbal threats to use a weapon or to kill or to deny their partners access to jointly held money.

Violence between Gay or Lesbian Partners

The U.S. Department of Justice distributed nationwide a special report, *Murder in Families*, based on the analysis of a representative sample survey of state and county prosecutors' records. The report shows that 16% of all murder victims in the United States are killed by a family member, and it summarizes the several known correlates of family murder, including mental illness, the abuse of alcohol, and offender and victim race and gender. In their discussion of gender, the report's authors state, "[S]pousal murder ... by definition includes a man and a woman" (Dawson & Langan, 1995, p. 4, emphasis added). The authors also note that an analysis of the same data, excluding heterosexual spouses and including "other family members," shows "murderers and victims were of the same sex in 65 percent of family murders" (p. 4). If same-sex family homicides and assaults were included in all domestic violence research it is quite possible or even likely that researchers would find that rates of intrasex violence are similar to intersex violence rates of interpersonal violence.

The Department of Justice report serves to corroborate a claim that only domestic violence within heterosexual couples has received considerable research and political attention over the past 2 decades. Relatively few studies have been published on violence between intimates in same-sex relationships (e.g., Coleman, 1994; Letellier, 1994), and an even fewer number of states now recognize that adult family partnerships include lesbian and gay couples. There are, however, some recent and noteworthy changes in domestic violence statutes and documents that are written to encourage uniformity across state laws. *The Model Code on Domestic Violence* (1994) uses only gender-neutral language to define family violence and family or household members. Family

members, according to the Model Code, include adults who live together or have lived together and adults who are (or were) engaged in a sexual relationship. The California legislature amended its Penal Code in 1995 to eliminate any opposite-sex language in its domestic violence statutes. It also defines cohabitants to include "unrelated adult persons ... having sexual relations" (Spatt, 1995). Plowman (1996) writes about a Massachusetts woman who approached the prosecutor's office to file a complaint of domestic violence:

It was a difficult decision to make. She had braved days and nights of physical abuse.... It took her five tries before she was able to summon the courage to walk through the courthouse doors.... [S]he explained that she was a victim of domestic abuse and would like to seek protection under Chapter 209A of the Massachusetts abuse protection law. "Is this your boyfriend or your husband?" the clerk asked. "My girlfriend," she said. (pp. 3-4).

The silence about violence in same-sex relationships is diminishing. It occurs, nonetheless, for a number of reasons: (1) There is a lack of reporting and often a disbelief that same-sex violence can occur; (2) there is a fear among gay and lesbian organizations that publicizing intimate violence would destroy credibility and fuel homophobic attacks; (3) lesbian violence contradicts patriarchal and feminist explanations of family violence; and (4) lesbian violence destroys challenges the belief that a nonviolent, egalitarian lesbian community could emerge (Island & Letellier, 1991; Renzetti, 1988, 1992; Schilit, Lie, Montagne, & Reyes, 1992).

A silence on homosexual domestic violence does not mean that the problem does not exist, as the literature in this field attests. A scarcity of empirical studies is due not only to the sensitive nature of battering and sexual violence, but also to the problems of locating a representative sample of a generally hidden group in the larger society. Despite sampling difficulties, several studies can be examined to form an empirical base from which to estimate the level and severity of the problem (Brand & Kidd, 1986; Lie, Schilit, Bush, Montagne, & Reyes, 1991; Renzetti, 1988, 1992; Waterman, Dawson, & Bologna, 1989).

Estimated levels of domestic violence in gay and lesbian partnerships vary across studies depending on the types of violence examined, whether one or both partners were surveyed, and whether incidence or prevalence measures were used. Renzetti (1992) examines numerous studies of incidence and prevalence among lesbian and heterosexual domestic partnerships and estimates conservatively that at least 25% of lesbians in domestic partnerships experience domestic violence. Coleman (1994) finds that almost 47% of women in lesbian couples are violent, and, in a survey of 1109 lesbians, Lie and Gentlewarrior (1991) find that 52% of the sample reports being victims of aggression by their partners.

With respect to emotional or psychological abuse, a survey of 284 lesbians finds that 90% claim they had experienced psychological abuse and 31% of the women reported that they had been forced to have sex with their current or most recent partners (Waterman et al., 1989). In sum, lesbian couples experience the types and levels of domestic violence found in opposite-sex couples.

Gay domestic violence is also documented in the research literature. Island and Letellier (1991) estimate that between 330,000 and 650,000 gay men are victimized by domestic violence each year. Bourg and Stock (1994) report that valid estimates of the levels of gay partner violence range from 11% to 20%. When the CTS was used to measure and estimate levels of violence among gay couples (Renzetti, 1988, 1992), researchers found that 95% of the sample had verbally abused their partners at least once during the prior year, and 47% had physically abused their partners. Gay men tend to be more verbally and physically abusive toward their partners compared to gay women, but gay men tend to abuse sexually at a lower rate than gay women in their domestic partnerships. Waterman et al. (1989) studied sexual coercion among gay couples and found that 12% of the men reported being forced to have sex with their current or most recent partners. Men who reported being victims of forced sex also were significantly more likely to be either a victim or perpetrator of other forms of violence in their domestic relationship.

Several factors, such as dependency, jealousy, an imbalance of power between partners, personality characteristics (Coleman, 1994), being victimized in a past relationship, a history of family violence, and alcohol abuse, are associated with violence in homosexual domestic relationships. Empirical studies, even those limited by sampling design, clearly show that violence in same-sex relationships exists and poses serious consequences for a large number of persons.

Some of the social responses to gay domestic violence are similar to what is experienced by heterosexual partners who are physically, sexually, or emotionally abused. Gays and lesbians also face unique challenges when, as individual victims or as segments of the general population, they seek a medical, social service, or criminal justice responses to domestic violence. Police, due to homophobia, cultural stereotypes, or inappropriate training, respond ineffectively to domestic violence among gay couples, and prosecutors and judges are reluctant to grant or enforce protective orders. Gay communities are reluctant to acknowledge the problems of domestic violence in fear of contributing to the stereotypes and prejudices held about gay and lesbian relationships. "Outing" by a well-intentioned medical or social service provider can result in the loss of family relationships or work, and gays and lesbians feel ostracized by battered women

shelters or counseling programs that respond to "male" perpetrators and "female" victims (Letellier, 1994; Lockhart, White, & Causby, 1994; Plowman, 1996; Renzetti, 1992).

Consequences of Violence by Heterosexual and Homosexual Partners

Physical violence results in injury and, in the most severe cases, death. There is also evidence to suggest a link between battering and female suicide (Vitanza, Vogel, & Marshall, 1995), especially among black and pregnant women (Stark & Flitcraft, 1995). Physical abuse can cause low self-esteem, feelings of shame, and helplessness in victims (Pagelow, 1984). Many of the psychological consequences are related to common elements of the abusive relationship: betrayal of a trust, a sense of powerless to end the abuse, and isolation and social stigma that may be experienced as a result of the abuse (Finkelhor, Hotaling, & Yllo, 1988). While the effects of physical violence can be apparent in terms of physical injuries such as cuts and bruises, the consequences of verbal or emotional abuse are not as easily observable. However, verbal aggression may be as damaging or even more damaging than physical aggression (Straus & Sweet, 1992).

Women raped or sexually abused by their partners tend to experience a diminished sense of self-worth. They are also likely to feel guilt, depression, and an inability to resume sexual intimacy in subsequent relationships. Fear, a sense of betrayal, anger, humiliation, and degradation are common. Sexual dysfunctions and physical injuries can result (Bidwell & White, 1986; Finkelhor & Yllo, 1985; Pagelow, 1989; Russell, 1982). While there is only a limited empirical base on which to draw conclusions about the consequences of rape for a gay partner, some studies do show that men experience consequences that are very similar to those experienced by women who are marital rape victims (Island & Letellier, 1991).

Intimate violence poses grave consequences for the larger society. Victims of intimate violence face an increased risk of becoming a future victim or a future perpetrator compared to those not victimized by domestic violence (Finkelhor et al., 1988; Straus, 1990a). Straus proposes that the more violent husbands are toward their wives, the more violent the wives and mothers are toward their children. Taking into consideration the number of women who are battered, even if one accepts only the conservative estimates, the implications for children are staggering. Evidence is accumulating to show that the observation of family violence by children has serious consequences for them (e.g., Davis & Carlson, 1987; Kashani, Daniel, Dandoy, & Holcomb, 1992; O'Keefe, 1994; Sternberg et al., 1993; Wilson, Cameron,

Jaffe, & Wolfe, 1989). Experiencing violence firsthand or viewing violence as a legitimate or commonplace behavior may increase a tolerance of violence in other settings, thus contributing to the cultural approval of violence.

Responses to Domestic Violence and Abuse

Social responses to domestic violence, especially in the forms of legislative developments and the development of social, medical, and criminal justice intervention programs, may be aimed at the victim of violence, the perpetrator of violence, or the social agents who assist victims and punish perpetrators. Victim assistance programs include medical assistance to treat immediate physical injuries, legal assistance to file a complaint or file a restraining order, employment assistance, mental health services, and shelters for immediate separation from the batterer to provide a sense of psychological and physical safety (Brown & O'Leary, 1997; Goolkasian, 1986; Grad, 1997; Margolin, Sibner, & Gleberman, 1988; Miller & Krull, 1997; New York State Senate, 1996; Sedlak, 1988). Unfortunately, most shelters are understaffed and underfunded, and only the most unusual shelter provides any services designed specifically for older women, battered lesbians, gay men, or bisexual partners (Letellier, 1994; Margolies & Leeder, 1995; Vinton, 1992).

Intervention with batterers can take the form of therapy or education to change attitudes and stop abuse, or it may take the form of police intervention and arrest (Dunford, Huizinga, & Elliott, 1990; Ferraro, 1993; Gondolf & McFeron, 1989; Margolies & Leeder, 1995; Polsby, 1992). Evaluating the success of therapeutic or educational intervention with batterers is difficult, partly due to the chronic problems of high client attrition levels and low client motivation or commitment levels (Sedlak, 1988). Evaluation studies suggest only modest success for any batterer program, with some researchers concluding that only 50% of the men who complete programs refrain from physical assaults and only 40% refrain from terroristic threats for 6 months or a year (DeMaris & Jackson, 1992; Gondolf, 1995; Hamberger & Hastings, 1990; Tolman & Bhosley, 1991).

A large body of research, including field experimentation, has focused on the effectiveness of police arrest on reducing recidivistic domestic violence (Berk, Campbell, Klop, & Western, 1992; Dutton, Hart, Kennedy, & Williams, 1992; Sherman, 1992). Some researchers (Sherman & Berk, 1984; Syers & Edleson, 1992) argue that police arrest can substantially reduce recidivism of wife-battering, consistent with deterrent and social control perspectives. In other published statements, researchers warn that arrest can stop the violence only for certain types of offenders, usually those who have "stakes" or interests in following the conventional norms of the larger society (Hirschel, Hutchinson, & Dean,

1992; Pate & Hamilton, 1992; Sherman, 1992; Sherman & Smith, 1992). For others—unemployed men, for example—arrest is no more effective for preventing recidivistic violence than any other form of intervention.

In the majority of traditional domestic violence cases, women experience a lack of protection not only from the police, but also from the rest of the criminal justice system. Ferraro (1993) points out that there are very real limitations to the criminal justice approach to protecting women from their batterers because "it focuses on the control of specific incidents without attention to the complex social and economic problems of women" (p. 174). Based on an examination of the multiple factors associated with domestic violence, one author of the major arrest studies concludes that innovative treatment programs, for example, "hybrid programs," including drug and alcohol treatment as well as the more traditional counseling approach, are necessary to prevent recidivism among those domestic violence perpetrators who enter the criminal justice system (Goldkamp, 1996). In 1995, the National Institute of Justice released a report that summarized evaluations of 23 law enforcement training programs it sponsored for police and social service agents. The purpose of the programs was to help those who respond to domestic violence become better educated and more responsive to domestic violence victims. The evaluation report concludes that continued improvements are necessary, including the need "to protect victims better and to allow law enforcement agencies *wider discretion* in dealing with offenders" (Newmark, Harrell, & Adams, 1995, p. 3; emphasis added).

Despite programs that mandate arrest and grant temporary restraining orders, women continue to be abused, harassed, and threatened. Nevertheless, many manage to cope with persistent violence. The frequently asked but erroneous and ignorant question, "Why do victims stay?" fails to address the real problem: "Why do the abusers abuse, and continue to abuse?" It also fails to consider the social, contextual, financial, and relationship factors that can explain domestic partner abuse as well as the interpersonal relationships that can be formed between victim-survivors and social agents that can help stop the abuse (Bowker, 1983; Ford, 1991; Herbert, Silver, & Ellard, 1991; Johnson, 1992; Nurius, Furrey, & Berliner, 1992; Tift, 1993).

Altogether, a thorough examination and a meta-analysis of the correlates and causes of violence between intimates is necessary to develop, implement, and evaluate effective intervention and prevention strategies. Methodologically, there are strong needs for survey research based on representative samples and longitudinal designs, and even stronger needs for interview studies with women and men who are willing to tell their stories of violence to researchers and advocates who are willing to listen. There is less need for any new law

or any more law that mandates a single set of actions for a varied population and varied social problems. There is, however, a strong need for an understanding that *legal discretion* as well as the *victim's power* to use extant laws are imperatives for developing effective social responses to domestic violence. Domestic violence victims are independent adults who need services from programs, including criminal justice programs, that are designed to help stop the violence against domestic partners.

Elder Abuse

A Quiet Scandal

Elder abuse, according to a presidential press release, is this nation's "quiet scandal," although the American Medical Association (AMA) (1995) estimates that 1.8 million victims suffer some medical or psychological consequence annually in the United States. Only in 1992 did the federal government enact the Elder Abuse and Dependent Adult Civil Protection Act (EADACPA), permitting elder victims to file charges and to recover losses in civil courts for physical abuse or neglect, or for financial or fiduciary abuse (Hankin, 1996). In 1995, Wolf testified before a U.S. Senate Special Committee on Aging and identified the types, correlates, and consequences of elder abuse. Wolf (1996) testified that elder abuse cases are characterized by the type of abuse perpetrated, by the victim and perpetrator's relationship, and by the gender and race of the victim. The four major types of abuse are physical, psychological or emotional, financial, and neglect.

Physical and emotional abuse are also found when studying other major forms of family violence, child abuse and domestic violence. Two relatively distinctive types of elder abuse are neglect and financial abuse. Whereas the child neglect problem is well documented by researchers, the levels and consequences of elder neglect are less known. If a caretaker in an institution or at home neglects the elder, dehydration, malnourishment, skin conditions, hemorrhaging below the scalp, and other physical problems, including death, may result (AMA, 1995). The second distinctive form of elder abuse, financial abuse, can result in the loss of money, valued items, and control over one's estate; the accumulation of unpaid bills; and an increased likelihood of state institutionalization.

Explanations

Elder abuse is now a focal concern of family violence research. The documentation of a substantial number of elderly victims was accomplished by the National Family Violence Surveys, conducted in 1975 and 1985, that have

been discussed throughout this chapter. Elder abuse, in part, is explained by the major demographic shifts and changes that characterize the U.S. population over the last 50 years (Steinmetz, 1981). The average life expectancy of the average person in the United States has increased, the number of persons and the proportion of the population 60 years and older have increased, and the push toward deinstitutionalization and home care for the elderly have influenced the emotional and the financial resources families have and use to care for their elder members (Gelles & Cornell, 1990; Steinmetz, 1988).

Perceptions of child abuse and domestic violence have influenced the research and the reporting of elder abuse cases (Crystal, 1987; Utech & Garrett, 1992). Concerns for proving intentionality, injury, physical versus nonphysical maltreatment, and arbitrary age categorizations have posed problems for the development of a clear-cut, universally accepted definition of elder abuse. Little attention has been focused on how race and ethnicity shape definitions of elder abuse in the United States (for exceptions see Carson, 1995; Griffin, 1994), although extensive literature on elder abuse in other nations and cultures is available.

Levels and Types of Abuse

Given its recent "discovery" by the media, the research on elder abuse is somewhat less developed in the field of family violence research than it is in the field of gerontology. Family violence researchers form estimates of elder abuse and its correlates that are generally based on small, nonrandom, area samples. Early estimates of elder abuse and neglect ranged from 4.1% to 10% (see Steinmetz, 1987, 1988, for reviews of these early studies).

Many estimates of abuse come from service providers to the elderly or official reports made to adult protective services. Illinois service providers estimated incidence rates of verbal or emotional abuse at 11.2% and physical abuse at 2.8% (Poertner, 1986). South Carolina's Adult Protective Services substantiated 13,273 cases of elderly "maltreatment" between 1974 and 1984 (Cash & Valentine, 1987). Because determining the separate rates of abuse is difficult, abuse and neglect are often grouped together in elder maltreatment studies.

Harris (1996), rather than studying elder abuse cases perpetrated by caretakers, studied the problem of domestic violence among elderly couples. For this nationwide, representative study, she analyzed the 1985 National Family Violence Resurvey data and identified 842 married participants age 60 or older. Analytically, Harris compared violent and nonviolent elder couples to violent and nonviolent younger couples. She concludes that the risk factors identified to predict domestic violence generally—verbal abuse, marital

conflict, and stress—also predict spouse abuse among the elderly. Also using the 1985 National Family Violence Re-survey data, Pillemer and Suitor (1988) studied 520 respondents age 65 or older and found that 4.2% of the husbands reported physical violence perpetrated by their wives, and 3.3% of the wives reported husband-to-wife physical violence during the year prior. These domestic violence studies show that elder men and women are often the victims of family abuse, but can also be the perpetrators of family abuse and violence (Utech & Garrett, 1992).

The elderly are not exempt from sexual abuse, although the extent of elder sexual abuse is unknown. In a study that examined cases of suspected sexual abuse, researchers found that most victims are women and had experienced a limited capacity for independent functioning and self-protection. Offenders tend to be sons or husbands (Ramsey-Klawnsnik, 1991). Legal prohibitions of rape and sexual assault, although they vary widely across the states, uniformly require voluntary consent for lawful sexual relations. An elder who cannot give consent because of any mental or physical limitation faces an increased vulnerability to rape or sexual abuse by caretakers in institutions or in their private home.

Current research on elder abuse highlights both victim and abuse characteristics, as well as the social factors associated with elder abuse. Reports of elder abuse are most likely to find that most victims are women of very advanced ages with low incomes. Most studies suggest that victims with physical or mental impairments have a higher likelihood of abuse than those not suffering from these types of impairments.

In general, elder abuse is more likely to be perpetrated under conditions of a high degree of external stress and when elders are socially isolated from other relatives or friends. When victims are perceived as a source of stress to the abuser, they are more likely to be abused. The majority of the abusers live with their elderly relatives and are most likely the victim's children. These generalizations, replicated by other social science researchers, are based on a 2-year study titled *Duty Bound: Elder Abuse and Family Care*, in which the researcher-author interviewed elders as well as their caretakers (Steinmetz, 1988).

Some exploratory perpetrator-oriented studies find that the more severe abusers can suffer from mental illnesses, be financially dependent, and have drug and alcohol dependencies (Anetzberger, Korbin, & Austin, 1994; Godkin, Wold, & Pillemer, 1989; Greenberg, McKibben, & Raymond, 1990). Researchers have also reported that abusive relationships are characterized by a high level of conflict between the perpetrator and the elder.

Elder abuse studies clearly challenge patriarchal and feminist systems theories of family violence. In an unusual book based on their own empirical studies, Aitken and Griffin (1996) argue that elder abuse is a highly gendered so-

cial problem. They find, like other researchers, that most victims are women, especially the eldest victims; most perpetrators are women, whether the abuse occurs in an institution or in a home; a large number of elderly men are abused by their domestic partners or by their daughters; and a large number of older women are abused by their sons. These observations and descriptions have implications for understanding the consequences of elder abuse. They also pose questions regarding appropriate social responses to the various forms of elder abuse.

An overview of the literature on the consequences of other forms of family violence suggests strongly that elder victims may suffer from abuse in physical, emotional, or financial ways. Elders may sustain varying degrees of physical injuries from abuse or develop medical problems as a result of maltreatment, including neglect. Greenberg et al. (1990) studies 204 professionally confirmed cases of abuse and neglect and found substantial depression among the maltreated elders. In another study of elderly persons, researchers found that elder abuse victims were significantly more depressed than those elders who had not been abused (Pillemer & Prescott, 1989).

Responses to Elder Abuse

Current intervention and prevention strategies take the form of legal responses or political advocacy and social services. Although lacking any empirical justification, mandatory reporting statutes exist or are under active consideration in most U.S. states. For cases of financial abuse, legal action may take the form of revoking the abuser's power of attorney (Callahan, 1982). Criminal court intervention may result in the mandatory removal of elderly family members from their own homes, where they are in physical danger, and placement in the custody of guardians (Heisler, 1991). Guardianship is intended to safeguard the abused elder, but guardians may perpetrate further abuse, and therefore increase the dependency of elders on their adult (and abusive) children. Psychological abuse is generally not handled by the criminal justice system. Instead, it is likely addressed by social service programs, and referrals for professional assistance for victims and perpetrators are often made.

Adult protective services (APS) programs now operate in every state, but the legal, medical, and social services provided to abused elders vary widely across states (Mixon, 1995). In cases of abuse where the victim is impaired or dependent, housing, health, home maintenance, and financial management services can be extended (Pagelow, 1989; Pillemer & Suitor, 1988). Elder mediation is another method of social intervention available for resolving some types of elder conflicts (Craig, 1994). For elders who are independent of their abusers, self-help groups provide valuable services

and emotional support. Individual assistance can also take the form of reassuring the elderly that abuse is unlawful and of educating them and their caretakers of their rights. Perpetrators of elder abuse may receive psychological counseling or use self-help groups. Those perpetrators who are financially dependent on the elders they abuse can receive assistance for finding housing and employment in some social programs (Pillemer & Suiter, 1988). While these approaches are used to intervene in some elder abuse cases, their effectiveness has not been systematically evaluated.

Preventive measures are the most important methods for ameliorating the elder abuse problems in the United States. They should focus on maintaining and building support systems that are needed by the elderly and their caretakers. Callahan (1982) suggests that to prevent elder abuse, the elderly must have economic security and more funds invested toward their needs. Finally, an informed awareness and sensitivity to the problems and needs of the elderly population are needed. Even with these suggestions, effective intervention and prevention strategies require an improved social science based understanding of the causes and correlates of elder abuse (Blakely & Dolon, 1991). Clear definitions that take into consideration the multiple dimensions of elder abuse are needed, additional research is needed to correct the current limitations and methodological weaknesses associated with elder abuse, and insightful and sophisticated theoretical models based on a blend of social science and victim explanations are needed (Hugman, 1995; Johnson, 1995; Steinmetz, 1988, 1991, 1993). We need no new studies, however, to confirm that people of all ages experience violence and abuse at the hands of a family member.

Omissions, Controversies, and Conclusions

Omissions

We conclude this chapter by first identifying the problems not covered in these pages. Second, we bring forward some current and emerging controversies in the field. We conclude without offering any resolutions for family violence problems. Instead we hope that the information we provided will encourage more work in the field that is designed to create comprehensive and socially useful explanations of family violence and abuse.

Dating Violence. Not discussed in this chapter are the problems of violence and rape in dating but not cohabiting couples in the United States. An emerging research literature shows that the consequences of date rape and date violence can be severe and long-lasting. Established correlates of these forms of violence include alcohol and drug abuse,

conflicting expectations for intimate relationships, prior experiences with the forms of interpersonal violence, and asymmetrical power. Clearly needed are studies that examine couples *not* dating or living on college campuses.

Hate Crimes. A second problem not discussed is often called “hate crime,” or acts and expressions that intentionally cause emotional or physical harm to another because of sex, race, ethnicity, or religion. Since some types of hate crimes are directed at family members or at couples who dare challenge the cultural norms and stereotypes that delimit appropriate “coupling,” these offenses fall within the boundaries of several conceptualizations of family abuse and violence.

Variation by Class, Race, Ethnicity, and Religion. Our third, and in our own estimation most important, omission is the systematic analysis of all forms of child abuse, domestic violence, and elder abuse that vary considerably across social classes, race, ethnicity, and religious groups in the United States. Not only are these factors associated with the likelihood of abuse, but they are also strongly associated with the social programs and the social policies that are developed and implemented in response to family violence across the states and by the federal government. Social class influences the supposedly mandatory reporting of child abuse, the supposedly mandated police arrest of domestic violence offenders, and the supposed mandatory reporting of suspected elder abuse victims. Definitions of abuse and violence and social responses to victims and perpetrators vary across ethnic groups, race groups, and religious groups.

Why did we omit these issues and the volumes of research literature devoted to them? The simple and straightforward response is that only limited space is available to summarize and discuss family violence problems. The more accurate response is that we contend that family violence problems are complex. Current laws provide simplistic responses, and existing social research is plentiful but too limited in scope or focus to assist policy makers effectively. Desperately needed are analyses of all the published and distributed studies that were designed to describe or explain a particular family violence problem or to evaluate the legislation and social programs that were established to ameliorate some of the family violence problems. The meta-analyses that are needed must attend to how social class, race, ethnicity, and religion interact with the other known correlates of family violence and how they influence the programs designed to respond to these social problems.

Controversies

Myths. The study of family violence generates controversy and myth. Consider for example media attention to

the “urban myths” associated with child abuse. A news headline or a book published by a respected press may conclude that ritualistic or satanic abuse of children—usually involving animal mutilations, torture, and sexual abuse of child victims—is a social problem that urgently needs documentation and treatment. But Gelles (1996) reports: “Although a small industry of seminars and training sessions on ritual and satanic abuse has developed over the past few years.... [N]ot a single case of satanic murder, human sacrifice, or cannibalism has been documented” (p. 15). Likewise, the “tens of thousands” of children who are abducted, raped, and killed each year is a grave exaggeration of a particular form of child abuse that helped only to create an industry—the National Center for Missing and Exploited Children (funded by the U.S. Department of Justice)—but does nothing to establish accurately the extent of the kidnapping problem in the United States.

These (and other) myths are not harmless. Myths and exaggerations generate fear, they ask for governments to mispend funds to sponsor the creation of unnecessary programs, and they distract citizens from paying attention to the social problems that effect hundreds of thousands of victims.

The Mandatory Response Flaw. The mandatory response flaw is based on a concept that we borrow from *The Book of David* (Gelles, 1996). We use the concept to generalize the most pervasive social responses to child abuse, domestic violence, and elder abuse. The mandatory response flaw refers to the mandatory reporting and investigation of child abuse cases, the mandatory arrest of suspected domestic violence offenders, and the mandatory reporting of elder abuse. To *mandate* a response eliminates any discretion or any choice in response. Gelles (1996) warns that “abandoning the three-decade-long commitment to mandatory reporting [of child abuse] is only slightly less heretical than arguing that family preservation programs are ineffective or even dangerous for some children” (p. 153). Gelles claims that mandatory reporting of child abuse fails in at least four ways: (1) reported cases disproportionately represent children from lower social classes and minority children; (2) it overworks child protection workers and makes them less capable of responding effectively to the severe cases; (3) it assumes professionals are either unwilling or incapable to treat cases; and (4) it gives only a false hope that cases of maltreatment can all be served.

Mandatory (or preferred) arrest policies for domestic violence suspects that have been adopted by more than 90% of metropolitan police departments in the United States fail for at least five reasons: (1) Arrest can increase the likelihood of physical violence following arrest, especially if the perpetrator was arrested for a verbal threat; (2) victims can be revictimized by police, courts, and programs that do not

respond to victim needs; (3) the victim is unlikely to gain power-by-alliance with criminal justice actors under mandatory arrest conditions that eliminate all power, control, and discretion from the adult victim and from the police; (4) actual arrests are more likely in lower-class and minority neighborhoods; and (5) to avoid problems associated with arrest, police may not respond to reports of domestic violence.

Mandatory reporting of elder abuse fails for at least five reasons: (1) Victims and caretakers can be unnecessarily stigmatized; (2) an unacceptably high level of false accusations can result; (3) nonvoluntary and unnecessary institutionalization of the elder family member can occur; (4) an unnecessary loss of control over decision making, including financial decisions, by the elder and other family members may occur, and (5) social isolation and family abandonment of elders is possible.

The mandatory response flaw to family violence problems has, as yet, undocumented explanations. We attend to three related and problematic issues: (1) the family preservation ideal, (2) the “one-size-fits-all” theory and program approach, and (3) trust in the law-making process and the courts to resolve problems and protect U.S. citizenry.

First is the family preservation ideal, discussed earlier in the context of child abuse problems. To preserve the fiction that “the family” (whatever “the family” means) is the best social context for the child, a social worker may unwittingly return a battered child to the person or persons who will become the child’s murderer (Gelles, 1996). The family preservation ideal also generates problematic responses to other forms of family violence and abuse. A pastor or a mental health counselor may encourage a battered wife to return to “the family,” to her abuser, in order to forgive him, care for her children, and hope that the axe does not fall. A case worker who mandatorily investigates an allegation of elder neglect may encourage the overworked and financially stressed caretaker to provide more physical hygiene, leaving the elder within “the family” to suffer from wounds that will not heal or from an act of violence in response to the investigation.

Let our claim be clearly stated. Whenever it is in:

1. the *best interest of the child* to remain in the family
2. the *best interest of the spouse* to remain in the family
3. the *best interest of the elder* family member to remain in the family

the individual and his or her family should and must receive all the social, medical, and financial services that are necessary to thrive physically, psychologically, and spiritually. However, all laws and all programs that aim to ameliorate the family violence problems in the United States must recognize the necessity to abandon “the family” preservation ideal and recognize the need to develop remedies in the best interest of

the child, the adult, and the elder person who have suffered from abuse and violence within the family. Likewise, social researchers and advocates for social reform need to direct efforts toward the development of multiple theories, multiple programs, and multiple ideals. They must abandon the “one-size-fits-all” theory approach (such as a “family systems theory” to parallel a “family preservation ideal”) for explaining the complex problems of family violence and abuse.

Finally, the mandatory flaw in the field of family violence is perhaps due to a heavy reliance on law and legal agents to solve problems and protect the citizenry from harm. Laws are supposed to keep our streets clean, regulate the quality of air and water, prevent crime, guarantee parasite-free processed food, and maintain social control. Laws are intended to reflect our social and cultural norms. There is, quite candidly, no empirical evidence whatsoever to support any claim that law succeeds in regulating morality, behavior, interpersonal behaviors, or familial behaviors without oppressing all the freedoms U.S. citizens fight for and cherish. To rely on the law to stop child abuse, domestic violence, or elder abuse would naturally require “mandatory” practices. If the law cannot handle the problems, what can? Innovative and perhaps creative ideas are needed.

Conclusions

To conclude, we reiterate: Family violence problems are indeed serious social problems. Although theoretical and methodological questions and issues persist, the widespread abuse of children, adults, and elders in U.S. society is unequivocally established. The variety of perspectives to explain the problems is helpful for identifying a multitude of factors that lead to violence, but as yet, we are far from predicting specific incidents. The integration of different levels of theory and the development of theories that have use value for policy makers are necessary next steps in the development of a comprehensive explanation of the causes and consequences of child abuse, partner abuse, and elder abuse. We know, however, that all forms of family violence have severe, negative consequences for individuals, for families, and for the larger society. Unfortunately, the social response to family violence is still politicized, mandated, and legalized more than it is informed by social science research. Intervention programs appear to have limited effectiveness for stopping violence, in part because of inadequate resources and a lack of coordination among legal and social services and other organizations concerned with family violence. Prevention remains the best hope, but prevention requires support by state and federal governments and private organizations to educate and help rather than to mandate and institutionalize.

References

- Aikten, L., & Griffin, G. (1996). *Gender issues in elder abuse*. Newbury Park, CA: Sage.
- Aiosa-Karpas, C. J., Karpas, R., Pelcovitz, D., & Kaplan, S. (1991). Gender identification and sex role attribution in sexually abused adolescent females. *Journal of the American Academy of Child and Adolescent Psychiatry, 30*, 266–271.
- Alexander, P. C., & Lupfer, S. A. (1987). Family characteristics and long-term consequences associated with sexual abuse. *Archives of Sexual Behavior, 16*, 235–245.
- Alexander, P. C., Neimeyer, R. A., Follette, V. M., Moore, M. K., & Harter, S. (1989). A comparison of group treatments of women sexually abused as children. *Journal of Consulting and Clinical Psychology, 57*, 479–483.
- Allers, C. T., Benjack, K. I., White, J. A., & Rousey, J. T. (1993). HIV vulnerability and the adult survivor of childhood sexual abuse. *Child Abuse and Neglect, 17*, 291–298.
- American Humane Association (AHA). (1988). *Highlights of official child neglect and abuse reporting 1986*. Denver CO: Author.
- American Medical Association. (1995). *Diagnostic and treatment guidelines on mental health effects of family violence*. Washington, DC: Author.
- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- Anetzberger, G. J., Korbin, J. E., & Austin, C. (1994). Alcoholism and elder abuse. *Journal of Interpersonal Violence, 9*, 184–193.
- Ards, S., & Harrell, A. (1993). Reporting of child maltreatment: A secondary analysis of the national incidence surveys. *Child Abuse and Neglect, 17*, 337–344.
- Augustine, R. I. (1990–1991). Marriage: The safe haven for rapists. *Journal of Family Law, 29*, 559–590.
- Azar, S. T. (1991). Models of child abuse: A meta-theoretical analysis. *Criminal Justice and Behavior, 18*, 30–46.
- Azar, S. T., & Wolfe, D. A. (1989). Child abuse and neglect. In E. J. Mash & R. A. Barkley (Eds.), *Treatment of child disorders* (pp. 451–489). New York: Guilford.
- Bachman, R., & Coker, A. L. (1994). Police involvement in domestic violence: The interactive effects of victim injury, offender's history of violence, and race. *Violence and Victims, 10*, 91–96.
- Bachman, R., & Saltzman, L. E. (1996). *Violence against women: Estimates from the redesigned survey* (Bureau of Justice Statistics Special Report, NCJ no. 154348). Rockville, MD: US Department of Justice.
- Bakan, D. (1971). *Slaughter of the innocents: A study of the battered child phenomenon*. Boston: Beacon.
- Bandura, A. (1971). *Social learning theory*. Morristown, NJ: General Learning.
- Barnett, I. W., Miller-Perrin, C., & Perrin, R. D. (1997). *Family violence across the lifespan*. Thousand Oaks, CA: Sage.
- Barrera, M., Palmer, S., Brown, R., & Kalaher, S. (1994). Characteristics of court-involved men and non-court-involved men who abuse their wives. *Journal of Family Violence, 9*, 333–345.
- Bath, H. I., & Haapala, D. A. (1993). Intensive family preservation services with abused and neglected children: An examination of group differences. *Child Abuse and Neglect, 17*, 213–225.
- Becker, J. V., & Hunter, J. A., Jr. (1992). Evaluation of treatment outcome for adult perpetrators of child sexual abuse. *Criminal Justice and Behavior, 19*, 74–92.
- Beitchman, J. H., Zucker, K. J., Hood, J. E., daCosta, G. A., & Akman, D. (1991). A review of the short-term effects of child sexual abuse. *Child Abuse and Neglect, 15*, 537–556.
- Beitchman, J. H., Zucker, K. J., Hood, J. E., daCosta, G. A., Akman, D., & Cassavia, E. (1992). A review of the long-term effects of child sexual abuse. *Child Abuse and Neglect, 16*, 101–118.

- Bellingham, B. (1983). The unspeakable blessing: Street children, reform rhetoric, and misery in early industrial capitalism. *Politics and Society*, 12, 303–330.
- Benjamin, M. (1980). Abused as a child, abusive as a parent: Practitioners beware. In R. Volpe, M. Breton, & J. Milton (Eds.), *The maltreatment of the school-aged child* (pp. 197–202). Lexington, MA: Lexington Books.
- Benoit, J. L., & Kennedy, W. A. (1992). The abuse history of male adolescent sex offenders. *Journal of Interpersonal Violence*, 7, 543–548.
- Berk, R. A. (1993). What the scientific evidence shows: On average, we can do no better than arrest. In R. J. Gelles & D. R. Loseke (Eds.), *Current controversies on family violence* (pp. 323–336). Newbury Park, CA: Sage.
- Berk, R. A., Campbell, A., Klap, R., & Western, B. (1992). The deterrent effect of arrest: A Bayesian analysis of four field experiments. *American Sociological Review*, 57, 698–708.
- Berk, R., & Newton, P. (1985). Does arrest really deter wife battery? An effort to replicate the findings of the Minneapolis spouse abuse experiment. *American Sociological Review*, 50, 253–262.
- Berkeley Planning Associates. (1978). *Evaluation of child abuse and neglect demonstration project, 1974–1977* (Vol. 1 & 2, Child Abuse and Neglect Treatment Programs: Final Report and Summary of Findings). Washington, DC: U.S. Department of Health, Education and Welfare.
- Berliner, L. (1990). Domestic violence: A humanist of feminist issue? *Journal of Interpersonal Violence*, 9, 209–228.
- Besharov, D. (1985). Right versus rights: The dilemma of child protection. *Public Welfare*, 43, 19–27.
- Bidwell, L., & White, P. (1986). The family context of marital rape. *Journal of Family Violence*, 1, 277–287.
- Birns, B. (1988). The mother–infant tie: Of bonding and abuse. In M. B. Straus (Ed.), *Abuse and victimization across the life span* (pp. 9–31). Baltimore: Johns Hopkins University Press.
- Birns, B., Cascardi, M., & Meyer, S. (1994). Sex role socialization: Developmental influences on wife abuse. *American Journal of Orthopsychiatry*, 64, 50–59.
- Blackman, J. (1989). *Intimate violence: A study of injustice*. New York: Columbia University Press.
- Blakely, B. E., & Dolon, R. (1991). Area agencies on aging and the prevention of elder abuse: The results of a national study. *Journal of Elder Abuse and Neglect*, 3, 21–40.
- Bourg, S., & Stock, H. V. (1994). A review of domestic violence arrest statistics in a police department using a pro-arrest policy: Are pro-arrest policies enough? *Journal of Family Violence*, 9, 177–192.
- Bowker, L. H. (1983). *Beating wife-beating*. Lexington, MA: Heath.
- Bowlby, J. (1980). *Attachment and loss: Loss, sadness and depression*. New York: Basic Books.
- Brand, P. A., & Kidd, A. H. (1986). Frequency of physical aggression in heterosexual and female homosexual dyads. *Psychological Reports*, 59, 1307–1313.
- Brassard, M. R., Germain, R., & Hart, S. N. (Eds.). (1987). *Psychological maltreatment of children and youth*. New York: Pergamon.
- Brassard, M. R., Hart, S. N., & Hardy, D. (1993). The psychological maltreatment rating scales. *Child Abuse and Neglect*, 17, 715–729.
- Breines, W., & Gordon, L. (1983). The new scholarship on family violence. *Signs*, 8, 490–531.
- Breire, J. (1992). Methodological issues in the study of sexual abuse. Effects. *Journal of Consulting and Clinical Psychology*, 60, 196–203.
- Beire, J. H., & Runtz, M. (1987). Post sexual abuse trauma: Data and implications for clinical practice. *Journal of Interpersonal Violence*, 2, 367–379.
- Breire, J., Henschel, D., & Smiljanich, K. (1992). Attitudes toward sexual abuse: Sex differences and construct validity. *Journal of Research in Personality*, 26, 398–406.
- Breire, J., Berliner, L., Bulkley, J., Jenny, C., & Reid, T. (1996). *The APSAC handbook on child maltreatment*. Thousand Oaks, CA: Sage.
- Brown, P. D., & O’Leary, K. D. (1997). Wife abuse in intact couples: A review of couples treatment programs. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 194–207). Thousand Oaks, CA: Sage.
- Browne, A., & Finkelhor, D. (1986). The impact of sexual abuse: A review of the research. *Psychological Bulletin*, 91, 66–77.
- Browne, K., & Saqi, S. (1988). Approaches to screening for child abuse and neglect. In K. Browne, C. Davies, & P. Stratton (Eds.), *Early prediction and prevention of child abuse* (pp. 57–85). New York: Wiley.
- Brush, L. C. (1993). Violent acts and injurious outcomes in married couples: Methodological issues in the National Survey of Families and Households. In P. B. Bart & E. G. Moran (Eds.), *Violence against women: The bloody footprints* (pp. 240–251). Newbury Park, CA: Sage.
- Burgess, R. L., & Youngblood, L. M. (1988). Social incompetence and the intergenerational transmission of abusive parental practices. In G. T. Hotaling, D. Finkelhor, J. T. Kirkpatrick, & M. A. Straus (Eds.), *Family abuse and its consequences* (pp. 38–60). Beverly Hills, CA: Sage.
- Buzawa, E. S., Buzawa, C. G., & Inciardi, J. A. (Eds.). (1996). *Domestic violence: The criminal justice response (2nd ed.)*. Thousand Oaks, CA: Sage.
- Callahan, J., Jr. (1982). Elder abuse programming: Will it help the elderly? *Urban and Social Change Review*, 15, 15–16.
- Campbell, D. W., Campbell, J., King, C., Parker, B., & Ryan, J. (1994). The reliability and factor structure of the Index of Spouse Abuse with Allcan-American women. *Violence and Victims*, 9, 259–274.
- Carney, R. M., & Williams, B. D. (1983). Premenstrual syndrome: A criminal defense. *Notre Dame Law Review*, 58, 2726.
- Carson, D. K. (1995). American Indian elder abuse: Risk and protective factors among the oldest Americans. *Journal of Elder Abuse and Neglect*, 7, 17–39.
- Cash, T., & Valentine, D. (1987). A decade of adult protective services: Case characteristics. *Journal of Gerontological Work*, 10, 7–60.
- Cazenave, N. A., & Straus, M. A. (1990). Race, class, network embeddedness, and family violence. In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 321–339). New Brunswick, NJ: Transaction Publishers.
- Chaffin, M. (1992). Factors associated with treatment completion and progress among intrafamilial sexual abusers. *Child Abuse and Neglect*, 16, 257–264.
- Chess, S., & Thomas, A. (1982). Infant bonding: Mystique and reality. *American Journal of Orthopsychiatry*, 52, 213–222.
- Chester, B., Robin, R. W., Koss, M. P., Lopez, J., & Goldman, D. (1994). Grandmother dishonored: Violence against women by male partners in American Indian communities. *Violence and Victims*, 9, 249–258.
- Cicchetti, D., & Barrett, D. (1991). Toward the development of a scientific nosology of child maltreatment. In D. Cicchetti & W. Grove (Eds.), *Thinking clearly about psychology* (pp. 346–377). Minneapolis: University of Minnesota Press.
- Clarke, M. E., & Hornick, J. P. (1988). The child sexual abuse victim: Assessment and treatment issues and solutions. *Contemporary Family Therapy*, 10, 235–242.
- Cole, P., Woolger, C., Power, T. G., & Smith, K. D. (1992). Parenting difficulties among adult survivors of father–daughter incest. *Child Abuse and Neglect*, 16, 249–249.
- Coleman, D. H., & Straus, M. A. (1990). Marital power, conflict, and violence in a nationally representative sample of American couples. In M. S. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 287–304). New Brunswick, NJ: Transaction Publishers.

- Coleman, V. E. (1994). Lesbian battering: The relationship between personality and the perpetration of violence. *Violence and Victims, 9*, 139–152.
- Collier, R. (1995). *Masculinity, law, and the family*. London: Routledge.
- Collings, S. J. (1995). The long-term effects of contact and noncontact forms of child sexual abuse in a sample of university men. *Child Abuse and Neglect, 19*, 1–6.
- Conte, J., & Schuerman, J. R. (1987). Factors associated with an increased impact of child sexual abuse. *Child Abuse and Neglect, 11*, 201–211.
- Conte, J., Wolfe, S., & Smith, T. (1987, July). *What sexual offenders tell us about prevention: Preliminary findings*. Paper presented at the Family Violence Conference, University of New Hampshire, Durham.
- Costin, L. B. (1991). Unraveling the Mary Ellen legend: Origins of the “cruelty” movement. *Social Service Review, 65*, 203–223.
- Craig, Y. (1994). Elder mediation: Can it contribute to the prevention of elder abuse and the protection of the rights of elders and their careers? *Journal of Elder Abuse and Neglect, 6*, 83–96.
- Crystal, S. (1987). Elder abuse: The latest crisis. *Public Interest, 88*, 56–66.
- Cutler, S. E., & Nolen-Hoeksema, S. (1991). Accounting for sex difference in depression through female victimization: Childhood sexual abuse. *Sex Roles, 24*, 425–438.
- Daro, D. (1988). *Confronting child abuse: Research for effective program design*. New York: Free Press.
- Daro, D. (1991). Child sexual abuse prevention: Separating fact from fiction. *Child Abuse and Neglect, 15*, 1–4.
- Davidson, T. (1977). Wifebeating: A recurring phenomenon throughout history. In M. Roy (Ed.), *Battered women: A psychosociological study of domestic violence* (pp. 2–23). New York: Van Nostrand Reinhold.
- Davis, G. E., & Leitenberg, H. (1988). Adolescent sex offenders. *Psychological Bulletin, 101*, 417–427.
- Davis, L. V., & Carlson, B. E. (1987). Observation of spouse abuse: What happens to the children? *Journal of Interpersonal Violence, 2*, 279–291.
- Dawson, J. M., & Langan, P. A. (1994). *Murder in families* (Bureau of Justice Statistics, Special Report, NCJ no. 143498). Rockville, MD: Department of Justice.
- Deitch, I. (1993, August). *Alone, abandoned, assaulted: Prevention and intervention of elder abuse*. Paper presented at the Annual Meeting of the American Psychological Association, Toronto.
- DeMaris, A., & Jackson, J. K. (1987). Batterers’ reports of recidivism after counseling. *Social Casework, 68*, 458–465.
- de Mause, L. (1974). The evolution of childhood. In L. de Mause (Ed.), *The history of childhood* (pp. 1–73). New York: Psychohistory Press.
- deYoung, M., & Lowry, J. A. (1992). Traumatic bonding: Clinical implications in incest. *Child Welfare, 71*, 165–175.
- DiLalla, L. F., & Gottesman, I. (1991). Biological and genetic contributors to violence—Widom’s untold tale. *Psychological Bulletin, 109*, 125–129.
- Dobash, R. E., & Dobash, R. P. (1978). Wives: The “appropriate” victims of marital violence. *Victimology, 2*, 426–441.
- Dobash, R. E., & Dobash, R. P. (1980). *Violence against wives: A case against the patriarchy*. London: Open Books.
- Doerner, W. G. (1987). Child maltreatment seriousness and juvenile delinquency. *Youth and Society, 19*, 197–224.
- Doll, L., Joy, D., Bartholow, B., Harrison, J., Bolan, G., Douglas, J., Saltzman, L., Moss, P., & Delgado, W. (1992). Self reported childhood and adolescent sexual abuse among adult homosexual and bisexual men. *Child Abuse and Neglect, 16*, 855–864.
- Donnelly, A. H. C. (1991). What we have learned about prevention: What we should do about it. *Child Abuse and Neglect, 15*, 99–106.
- Downs, D. L. (1996). *More than victims: Battered women, the syndrome society, and the law*. Chicago: University of Chicago Press.
- Downs, W. R., Miller, B. A., Testa, M., & Panel, D. (1992). Long term effects of parent-to-child violence for women. *Journal of Interpersonal Violence, 7*, 365–382.
- Dunford, F. W., Huizinga, W. D., & Elliott, D. S. (1990). The role of arrest in domestic assault: The Omaha police experiment. *Criminology, 28*, 183–206.
- Dutton, D. G., Hart, S. D., Kennedy, L. W., & Williams, K. R. (1992). Arrest and the reduction of repeat wife assault. In E. S. Buzawa & C. G. Buzawa (Eds.), *Domestic violence: The changing criminal justice response* (pp. 11–128). Westport, CT: Auburn House.
- Dutton, D. G., Van Ginkel, C., & Starzomski, A. (1995). The role of shame and guilt in the intergenerational transmission of abusiveness. *Violence and Victims, 10*, 121–131.
- Eckenrode, J., Laird, M., & Doris, J. (1993). School performance and disciplinary problems among abused and neglected children. *Developmental Psychology, 29*, 53–62.
- Edwards, J. J., & Alexander, P. C. (1992). The contribution of family background to the long-term adjustment of women sexually abused as children. *Journal of Interpersonal Violence, 7*, 306–320.
- Egeland, B. (1993). A history of abuse is a major risk factor for abusing in the next generation. In R. J. Gelles & D. R. Loseke (Eds.), *Current controversies on family violence* (pp. 197–208). Newbury Park, CA: Sage.
- Egley, L. C. (1991). What changes the societal prevalence of domestic violence? *Journal of Elder Abuse and Neglect, 3*, 65–69.
- Ellison, C. G., & Sherkat, D. E. (1993). Conservative Protestantism and support for corporal punishment. *American Sociological Review, 58*, 131–144.
- Erlinder, P. (1984). Paying the price for Vietnam: Post-traumatic stress disorder and criminal behavior. *Boston College Law Review, 305*, 308.
- Eyer, D. (1992). *Infant bonding: A scientific fiction*. New Haven, CT: Yale University Press.
- Faller, K. C. (1991). Possible explanations for child sexual abuse allegations in divorce. *Journal of Orthopsychiatry, 61*, 86–91.
- Faller, K. C. (1988). *Child sexual abuse*. New York: Columbia University Press.
- Fagin, J., & Wexler, S. (1987). Crime at home and in the streets: The relationship between family and stranger violence. *Violence and Victims, 2*, 5–23.
- Fatout, M. F. (1990). Consequences of abuse on the relationships of children. *Families in Society, 71*, 76–78.
- Ferraro, K. (1989). Policing woman battering. *Social Problems, 36*, 61–74.
- Ferraro, K. (1993). Cops, courts and women battering. In P. B. Bar & E. G. Moran (Eds.), *Violence against women: The bloody footprints* (pp. 165–176). Newbury Park, CA: Sage.
- Ferraro, K. J., & Johnson, J. M. (1983). How women experience battering: The process of victimization. *Social Problems, 30*, 325–339.
- Finkelhor, D. (1993). Epidemiological factors in the clinical identification of child sexual abuse. *Child Abuse and Neglect, 17*, 67–70.
- Finkelhor, D. (1997). The homicides of children and youth: A developmental perspective. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 17–34). Thousand Oaks, CA: Sage.
- Finkelhor, D., & Baron, L. (1986). Risk factors for child sexual abuse. *Journal of Interpersonal Violence, 1*, 43–71.
- Finkelhor, D., & Dziuba-Leatherman, D. (1995). Victimization prevention programs: A national survey of children’s exposure and reactions. *Child Abuse and Neglect, 19*, 129–139.
- Finkelhor, D., & Yllo, K. (1985). *License to rape: Sexual abuse of wives*. New York: Holt, Rinehart and Winston.
- Finkelhor, D., Hotaling, G. T., & Yllo, K. (1988). *Stopping family violence*. Newbury Park, CA: Sage.
- Finkelhor, D., Asdigian, N., & Dziuba-Leatherman, J. (1995). The effectiveness of victimization prevention instruction: An evaluation of children’s responses to actual threats and assaults. *Child Abuse and Neglect, 19*, 141–153.

- Fischer, E. (1979). *Woman's creation: Sexual evolution and the shaping of society*. New York: Doubleday.
- Follette, V. M., Alexander, P. C., & Follette, W. C. (1991). Individual predictors of outcome in group treatment for incest survivors. *Journal of Consulting and Clinical Psychology, 59*, 150–155.
- Fontes, L. A. (1997). Conducting ethical cross-cultural research on family violence. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 296–312). Thousand Oaks, CA: Sage.
- Ford, D. A. (1991). Prosecution as a victim power resource: A note on empowering women in violent conjugal relationships. *Law and Society Review, 25*, 313–334.
- Forte, J. A., Franks, D. D., Forte, J. A., & Rigsby, T. (1996). Asymmetrical role-taking: Comparing battered and nonbattered women. *Social Work, 41*, 59–73.
- Fortune, M. M. (1995). The importance of religious issues: Roadblocks or resources? In Staff of Volcano Press (compilers), *Family violence and religion: An interfaith resource guide* (pp. 267–288). Volcano, CA: Volcano Press.
- Friedrich, W. N. (1993). Sexual victimization and sexual behavior in children: A review of recent literature. *Child Abuse and Neglect, 17*, 59–66.
- Friedrich, W. N., Luecke, W. J., Beilke, R. L., & Place, V. (1992). Psychotherapy outcome of sexually abused boys. *Journal of Interpersonal Violence, 7*, 396–409.
- Frieze, I. H. (1983). Investigating the causes and consequence of marital rape. *Signs, 8*, 552–553.
- Fromuth, M. E., & Burkhart, B. R. (1987). Childhood sexual victimization among college men: Definitional and methodological issues. *Violence and Victims, 2*, 244–253.
- Frude, N. (1989). Sexual abuse: An overview. *Educational and Child Psychology, 6*, 34–44.
- Gagne, P. L. (1992). Appalachian women: Violence and social control. *Journal of Contemporary Ethnography, 20*, 387–415.
- Gallup Organization. (1996). *Disciplining children in America: A Gallup poll report*. Princeton, NJ: Author.
- Garbarino, J., & Kostelny, K. (1992). Child maltreatment as a community problem. *Child Abuse and Neglect, 16*, 455–464.
- Garbarino, J., Guttman, E., & Seeley, J. W. (1986). *The psychologically battered child*. San Francisco, CA: Jossey-Bass.
- Garrett, K. (1982). Child abuse: Problems of definition. In P. H. Rossi & S. L. Nock (Eds.), *Measuring social judgments: The factorial survey approach* (pp. 177–203). Beverly Hills, CA: Sage.
- Garrity-Rokous, F. E. (1994). Punitive legal approaches to the problem of prenatal drug exposure. *Infant Mental Health Journal, 15*, 218–237.
- Gartner, R. (1993). Methodological issues in cross-cultural large-survey research on violence. *Violence and Victims, 8*, 199–215.
- Geffner, R., Rosenbaum, A., & Hughes, H. (1988). Research issues concerning family violence. In V. B. Van Hasselt, R. L. Morrison, A. S. Bellack, & M. Hersen (Eds.), *Handbook of family violence* (pp. 457–481). New York: Plenum.
- Gelles, R. J. (1974). *The violent home*. Beverly Hills, CA: Sage.
- Gelles, R. J. (1982). Problems in defining and labeling child abuse. In R. H. Starr, Jr. (Ed.), *Child abuse prediction: Policy implications* (pp. 1–30). Cambridge, MA: Ballinger.
- Gelles, R. J. (1983). An exchange/social control theory. In D. Finkelhor, R. J. Gelles, G. T. Hotaling, & M. A. Straus (Eds.), *The dark side of families: Current family violence research* (pp. 151–165). Beverly Hills, CA: Sage.
- Gelles, R. J. (1987). *Family violence*. Newbury Park, CA: Sage.
- Gelles, R. J. (1990a). The medical and psychological costs of family violence. In M. A. Straus & R. S. Gelles (Eds.), *Physical violence in American families* (pp. 425–430). New Brunswick, NJ: Transaction Publishers.
- Gelles, R. J. (1990b). Violence and pregnancy. In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 279–286). New Brunswick, NJ: Transaction Publishers.
- Gelles, R. J. (1996). *The book of David: How preserving families can cost children's lives*. New York: Basic Books.
- Gelles, R. J., & Cornell, C. P. (1990). *Intimate violence in families*. Newbury Park, CA: Sage.
- Gelles, R. J., & Straus, M. A. (1979). Determinants of violence in the family: Toward a theoretical integration. In W. R. Burr, R. Kill, F. I. Nye, & I. L. Reiss (Eds.), *Contemporary theories about the family* (pp. 549–581). New York: Free Press.
- Gelles, R. J., & Straus, M. A. (1988). *Intimate violence*. New York: Simon & Schuster.
- Gelles, R. J., & Cornell, C. P. (1987). Elder abuse: The status of current knowledge. In A. J. Gelles (Ed.), *Family violence* (pp. 168–182). Newbury Park, CA: Sage.
- Gerber, G. L. (1991). Gender stereotypes and power: Perceptions of roles in violent marriages. *Sex Roles, 24*, 439–458.
- Gielen, A. C., O'Campo, P. J., Faden, R. R., Kass, N. E., & Xue, X. (1994). Interpersonal conflict and physical violence during the childbearing year. *Social Science and Medicine, 39*, 781–787.
- Gilgun, J. F., & Connor, T. M. (1989). How perpetrators view child sexual abuse. *Social Work, 36*, 249–251.
- Giovannoni, J. M., & Becerra, R. M. (1979). *Defining child abuse*. New York: Free Press.
- Godkin, M. A., Wolf, R. S., & Pillemer, K. A. (1989). A case comparison analysis of elder abuse and neglect. *International Journal of Aging and Human Development, 28*, 207–225.
- Godkin, M. A., Wolf, R. S., & Pillemer, K. A. (1989). A case comparison analysis of elder abuse and neglect. *International Journal of Aging and Human Development, 28*, 207–225.
- Goldkamp, J. S. (1996). *Role of drug and alcohol abuse in domestic violence treatment: Dade County's domestic violence court experiment: Final report*. Rockville, MD: Department of Justice.
- Gondolf, E. W. (1995). Alcohol abuse, wife assault, and power needs. *Social Service Review, 69*, 274–284.
- Gondolf, E. W. (1997). Expanding batterer program evaluation. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 208–218). Thousand Oaks, CA: Sage.
- Gondolf, E. W., & McFerron, J. R. (1989). Handling battering men: Police action in wife abuse cases. *Criminal Justice and Behavior, 16*, 429–439.
- Gondolf, E. W., Yllo, K., & Campbell, J. (1997). Collaboration between researchers and advocates. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 255–267). Thousand Oaks, CA: Sage.
- Goode, W. J. (1971). Force and violence in the family. *Journal of Marriage and the Family, 33*, 624–636.
- Goolkasian, G. A. (1986). *Confronting domestic violence: A guide for criminal justice agencies*. Washington, DC: U.S. Department of Justice.
- Gordon, M. (1989). The family environment of sexual abuse: A comparison of natal and stepfather abuse. *Child Abuse and Neglect, 13*, 121–130.
- Grad, S. (1997, August 29). Abuse case handling debated. *Los Angeles Times, A3*.
- Grasmick, H. G., Bursik, R. J., & Kimpel, M. (1991). Protestant fundamentalism and attitudes toward corporal punishment of children. *Violence and Victims, 6*, 273–298.
- Gray, E. (1988). The link between child abuse and juvenile delinquency: What we know and recommendations for policy and research. In G. Hotaling, D. Finkelhor, J. Kirkpatrick, & M. A. Straus (Eds.), *Family abuse and its consequences* (pp. 108–123). Beverly Hills, CA: Sage.
- Graziano, A. M., Lindquist, C. M., Kunce, L. J., & Munjal, K. (1992).

- Physical Punishment on Childhood and Current Attitudes. *Journal of the Interpersonal Violence*, 7, 147–155.
- Greenberg, J. R., McKibben, M., & Raymond, J. A. (1990). Dependent adult children and elder abuse. *Journal of Elder Abuse and Neglect*, 2, 73–86.
- Greven, P. (1990). *Spare the child: The religious roots of physical punishment and the psychological impact of physical abuse*. New York: Knopf.
- Griffin, L. W. (1994). Elder maltreatment among rural African-Americans. *Journal of Elder Abuse and Neglect*, 6, 1–27.
- Hall, G. C. (1989). WAIS-R and MMPI profiles of men who have sexually assaulted children: Evidence of limited utility. *Journal of Personality Assessment*, 53, 404–412.
- Hall, G. C., & Hirschman, R. (1992). Sexual aggression against children: A conceptual perspective of etiology. *Criminal Justice and Behavior*, 19, 8–23.
- Hall, G. C. N., Shondrick, D. D., & Hirschman, R. (1993). Conceptually derived treatment for sexual aggressors. *Professional psychology: Research and practice*, 24, 62–69.
- Hamberger, L., & Hastings, J. E. (1990). Recidivism following spouse abuse abatement counseling: Treatment program implications. *Violence and Victims*, 5, 157–170.
- Hampton, R. L., Gelles, R. J., & Harrop, J. (1991). Is violence in black families increasing? A comparison of 1975 and 1985 national survey rates. In R. L. Hampton (Ed.), *Black family violence* (pp. 3–18). Lexington, MA: Lexington Books.
- Hanneke, C. R., Shields, N. M., & McCall, G. J. (1986). Assessing the prevalence of marital rape. *Journal of Interpersonal Violence*, 1, 350–362.
- Hanson, R. K., & Slater, S. (1988). Sexual victimization in the history of sexual abusers: A review. *Annals of Sex Research*, 1, 485–499.
- Hanson, R. K., Gizzarelli, R., & Scott, H. (1994). The attitudes of incest offenders. *Criminal Justice and Behavior*, 21, 187–202.
- Harris, S. B. (1996). For better or for worse: Spouse abuse grown old. *Journal of Elder Abuse and Neglect*, 8, 1–33.
- Harrison, K. (1997). *The kiss: A memoir*. New York: Random House.
- Hart, S. N., & Brassard, M. R. (1991). Psychological maltreatment: Progress achieved. *Development and Psychopathology*, 3, 61–70.
- Haskett, M. E., & Kistner, J. A. (1991). Social interactions and peer perceptions of young physically abused children. *Child Development*, 62, 979–990.
- Haugaard, J. J., & Emery, R. E. (1989). Methodological issues in child sexual abuse research. *Child Abuse and Neglect*, 13, 89–100.
- Haugaard, J. J., & Reppucci, N. D. (1988). *The sexual abuse of children*. San Francisco, CA: Jossey-Bass.
- Hazzard, A., & Rupp, C. (1986). A note on the knowledge and attitudes of professional groups toward child abuse. *Journal of Community Psychology*, 14, 219–223.
- Heisler, C. J. (1991). The role of the criminal justice system in elder abuse cases. *Journal of Elder Abuse and Neglect*, 3, 5–33.
- Herbert, T., Silver, R. C., & Ellard, J. H. (1991). Coping with an abusive relationship: How and why do women stay? *Journal of Marriage and the Family*, 53, 311–325.
- Hinrichsen, G. A., Hernandez, N. A., & Pollack, S. (1992). Difficulties and rewards in family care of depressed older adults. *Gerontologist*, 32, 486–492.
- Hirschel, J. D., Hutchinson, I. W. III, & Dean, C. W. (1992). The failure of arrest to deter spouse abuse. *Journal of Research in Crime and Delinquency*, 29, 7–33.
- Hirschi, T. (1969). *Causes of delinquency*. Berkeley, CA: University of California Press.
- Hoff, L. A. (1988). Collaborative feminist research and the myth of objectivity. In K. Yllo & M. Bograd (Eds.), *Feminist perspectives on wife abuse* (pp. 269–281). Newbury Park, CA: Sage.
- Holden, W., & Edwards, L. E. (1989). Parental attitudes toward child rearing: Instruments, issues and implications. *Psychological Bulletin*, 106, 29–58.
- Hotte, J., & Rafman, S. (1992). The specific effects of incest on prepubertal girls from dysfunctional families. *Child Abuse and Neglect*, 16, 273–283.
- Hugman, R. (1995). The implications of the term “elder abuse” for problem definition and response in health and social welfare. *Journal of Social Policy*, 24, 493–507.
- Hutchinson, E. D. (1990). Child maltreatment: Can it be defined? *Social Service Review*, 64, 60–78.
- Interdisciplinary glossary on child abuse and neglect: Legal, medical, and social work terms*. (1978). Washington, DC: U.S. Department of Health, Education and Welfare.
- Island, D., & Letellier, P. (1991). *Men who beat the men who love them: Battered gay men and domestic violence*. New York: Haworth.
- Jackson, H., & Nuttal, D. (1993). Clinician responses to sexual abuse allegations. *Child Abuse and Neglect*, 17, 127–143.
- Jason, J. M. (1991). Abuse, neglect, and the HIV-infected child. *Child Abuse and Neglect*, 15, 79–88.
- Johnson, B. K., & Kenkel, M. E. (1991). Stress, coping and adjustment in female adolescent incest victims. *Child Abuse and Neglect*, 15, 293–305.
- Johnson, I. M. (1992). Economic, situational, and psychological correlates of the decision making process of battered women. *Families in Society*, 73, 168–176.
- Johnson, I. M. (1995). Family members’ perceptions of and attitudes towards elder abuse. *Families in Society: The Journal of Contemporary and Human Services*, 76, 220–229.
- Joseph, J. (1997). Woman battering: A comparative analysis of black and white women. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 161–169). Thousand Oaks, CA: Sage.
- Kalichman, S. C. (1991). Psychopathology and personality characteristics of criminal sexual offenders as a function of victim age. *Archives of Sexual Behavior*, 20, 187–197.
- Kalichman, S. C., & Henderson, M. (1991). MMPI profile subtypes of nonincarcerated child molesters: A cross-validation study. *Criminal Justice and Behavior*, 18, 379–396.
- Kalichman, S. C., Craig, M. E., & Follingstad, D. R. (1988). Mental health professionals and suspected cases of child abuse: An investigation of factors influencing reporting. *Community Mental Health Journal*, 24, 43–51.
- Kalmuss, D. S. (1982). Wife’s marital dependency and wife abuse. *Journal of Marriage and the Family*, 44, 227–286.
- Kalmuss, D. S., & Straus, M. A. (1990). Wife’s marital dependency and wife abuse. In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 369–382). New Brunswick, NJ: Transaction Publishers.
- Kantor, G. K., & Straus, M. A. (1990). The “drunken bum” theory of wife beating. In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 203–224). New Brunswick, NJ: Transaction Publishers.
- Kantor, G. K., Jasinski, J. L., & Aldarondo, E. (1994). Sociocultural status and incidence of marital violence in Hispanic families. *Violence and Victims*, 9, 207–222.
- Kaplan, S. J., & Davidson, H. A. (Eds.). (1996). *Family violence: A clinical and legal guide*. Washington, DC: American Psychiatric Press.
- Kashani, J. H., Daniel, A. E., Dandoy, A. C., & Holcomb, W. R. (1992). Family violence: Impact on children. *Journal of the American Academy of Child and Adolescent Psychiatry*, 31, 181–189.
- Katz, J. (1995). Reconstructing masculinity in the locker room: The Mentors

- in Violence Prevention Project. *Harvard Educational Review*, 65, 163–174.
- Kaufman, J. (1991). Depressive disorders in maltreated children. *Journal of the American Academy of Child and Adolescent Psychiatry*, 30, 257–265.
- Kaufman, J., & Zigler, E. (1993). The intergenerational transmission of abuse is overstated. In R. J. Gelles & D. R. Loeske (Eds.), *Current controversies in family violence* (pp. 209–221). Newbury Park, CA: Sage.
- Kempe, C. H., Silverman, F. N., Steele, B. F., Droegemueller, W., & Silver, H. K. (1962). The battered child syndrome. *Journal of the American Medical Association*, 181, 107–112.
- Kendall-Tackett, K. A., Williams, L. M., & Finkelhor, D. (1993). Impact of sexual abuse on children. *Psychological Bulletin*, 113, 164–180.
- Knudsen, D. D. (1988). *Child positive services: Discretion, decisions, dilemmas*. Springfield, IL: Charles C Thomas.
- Knudsen, D. D. (1992). *Child maltreatment: Emerging perspectives*. Dix Hills, NY: General Hall.
- Kratcoski, P. C., & Kratcoski, L. D. (1983). The relationship of victimization through child abuse to aggressive delinquent behavior. *Victimology*, 7, 199–203.
- Kurz, P. D., Gaudin, J. M., Howling, P. T., & Wodarski, J. S. (1993). The consequences of physical abuse and neglect on the school age child: Mediating factors. *Children and Youth Services Review*, 15, 85–104.
- Kurz, D. (1993). Social science perspectives on wife abuse. In P. B. Bart & E. G. Moran (Eds.), *Violence against women: The bloody footprints* (pp. 252–269). Newbury Park, CA: Sage.
- Lackey, C., & Williams, K. R. (1995). Social bonding and the cessation of partner violence across generations. *Journal of Marriage and the Family*, 57, 295–305.
- Lanktree, C., Briere, J., & Zaidi, L. (1991). Incidence and impact of sexual abuse in a child outpatient sample: The role of direct inquiry. *Child Abuse and Neglect*, 15, 447–453.
- Larowitz, S. (1990). Whatever happened to Mary Ellen? *Child Abuse and Neglect*, 14, 143–149.
- Leonard, K. E., & Jacob, T. (1988). Alcohol, alcoholism, and family violence. In V. B. Van Hasselt, R. L. Morrison, A. S. Bellack, & M. Hersen (Eds.), *Handbook of family violence* (pp. 383–406). New York: Plenum.
- Lemon, N. K. D. (Ed.). (1996). *Domestic violence laws: A comprehensive overview of cases and sources*. Bethesda, MD: Austin & Winfield.
- Letellier, P. (1994). Gay and bisexual male domestic violence victimization: Challenges to feminist theory and responses to violence. *Violence and Victims*, 9, 95–106.
- Lie, G. Y., & Gentlewarrior, S. (1991). Intimate violence in lesbian relationships: Discussion of survey findings and practice implications. *Journal of Social Service Research*, 15, 41–49.
- Lie, G. Y., Schilit, R., Bushy, J., Montague, M., & Reyes, L. (1991). Lesbians in currently aggressive relationships: How frequently do they report aggressive past relationships? *Violence and Victims*, 6, 121–135.
- Lloyd, R. M. (1992). Negotiating child sexual abuse: The interactional character of investigative practices. *Social Problems*, 39, 109–124.
- Lockhart, L. L. (1987). A reexamination of the effects of race and social class on the incidence of marital violence: A search for reliable differences. *Journal of Marriage and the Family*, 49, 603–610.
- Lockhart, L. L. (1991). Spousal violence: A cross-racial perspective. In R. L. Hampton (Ed.), *Black family violence* (pp. 85–101). Lexington, MA: Lexington Books.
- Lockhart, L. L., White, B. W., & Causby, V. (1994). Letting out the secret: Violence in lesbian relationships. *Journal of Interpersonal Violence*, 9, 469–492.
- Loseke, D. R. (1991). Reply to Murray A. Straus: Readings on “Discipline and deviance.” *Social Problems*, 38, 162–165.
- Loseke, D. R. (1992). *The battered woman and shelters: The social construction of wife abuse*. Albany: State University of New York Press.
- Luntz, B. K., & Widom, C. S. (1994). Antisocial personality disorder in abused and neglected children grown up. *American Journal of Psychiatry*, 151, 670–674.
- Lutzker, J. R., & Rice, J. M. (1987). Using recidivism data to evaluate Project 12-Ways: An ecobehavioral approach to the treatment and prevention of child abuse and neglect. *Journal of Family Violence*, 2, 283–290.
- Macionis, J. J. (1989). *Sociology*. Englewood Cliffs, NJ: Prentice-Hall.
- Madonna, P. G., Van Scoyk, S., & Jones, D. P. H. (1991). Family interactions within incest and nonincest families. *American Journal of Psychiatry*, 148, 46–49.
- Mann, S., & Kelley, L. R. (1997). Standing at the crossroads of modernist thought: Collins, Smith, and the new feminist epistemologies. *Gender and Society*, 11, 391–408.
- Margolies, L., & Leeder, E. (1995). Violence at the door: Treatment of lesbian batterers. *Violence Against Women*, 1, 139–157.
- Margolin, G., Sibner, L. G., & Gleberman, L. (1988). Wife battering. In V. B. Van Hasselt, R. L. Morrison, A. S. Bellack, & M. Hersen (Eds.), *Handbook of family violence* (pp. 89–117). New York: Plenum.
- Marshall, W. W., & Barbaree, H. (1988). The long-term evaluation of a behavioral treatment program for child molesters. *Behavioral Research and Therapy*, 26, 499–511.
- Marshall, W. W., Barbaree, H. E., & Butt, J. (1988). Sexual offenders against male children: Sexual preferences. *Behavioral Research and Therapy*, 26, 338–391.
- Martin, J. A., & Elmer, E. (1992). Battered children grown up: A follow-up study of individuals severely maltreated as children. *Child Abuse and Neglect*, 16, 75–87.
- Martin, J., Anderson, J., Romans, S., Mullen, P., & O’Shea, M. (1993). Asking about child sexual abuse: Methodological implications of a two stage survey. *Child Abuse and Neglect*, 17, 383–392.
- Mash, E. J., & Wolfe, D. A. (1991). Methodological issues in research on physical child abuse. *Criminal Justice and Behavior*, 18, 8–29.
- McCurdy, K., & Daro, D. (1994). Child maltreatment: A national survey of reports and fatalities. *Journal of Interpersonal Violence*, 9, 75–94.
- McIvor, D. L., & Duthie, B. (1986). MMPI profiles of incest offenders: Men who molest younger children and men who molest older children. *Criminal Justice and Behavior*, 13, 450–452.
- Melton, G. B., & Flood, M. F. (1994). Research policy and child maltreatment: Developing the scientific foundation for effective protection of children. *Child Abuse and Neglect*, 18(Suppl.), 1–27.
- Miller, J. L. (1991). Family violence research: Some basic and applied questions. In D. D. Knudsen & J. L. Miller (Eds.), *Abused and battered: Social and legal responses to family violence* (pp. 3–16). New York: Aldine de Gruyter.
- Miller, J. L., & Krull, A. C. (1977). Controlling domestic violence: Victimization resources and police intervention. In G. G. Cantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 235–254). Thousand Oaks, CA: Sage.
- Milner, J. S., & Chilamkurti, C. (1991). Physical child abuse perpetrator characteristics: A review of the literature. *Journal of Interpersonal Violence*, 6, 345–366.
- Milner, J. S., & Robertson, K. R. (1989). Development of a random response scale for child abuse potential inventory. *Journal of Clinical Psychology*, 41, 639–643.
- Mixon, P. M. (1995). An adult protective services perspective. *Journal of Elder Abuse and Neglect*, 7, 60–87.
- Morrison, S., & Greene, E. (1992). Juror and expert knowledge of child sexual abuse. *Child Abuse and Neglect*, 16, 595–613.
- Mullender, A. (1996). *Rethinking domestic violence: The social work and probation response*. London: Routledge.

- Muller, R. T., Caldwell, R. A., & Hunter, J. E. (1993). Child provocativeness and gender as factors contributing to the blaming of victims of physical child abuse. *Child Abuse and Neglect, 17*, 249–260.
- Murphy, W. D., & Peters, J. M. (1992). Profiling child sexual abusers: Psychological considerations. *Criminal Justice and Behavior, 19*, 24–37.
- Nash, M. R., Zivney, O. A., & Hulsey, T. A. (1993). Characteristics of sexual abuse associated with greater psychological impairment among children. *Child Abuse and Neglect, 17*, 401–408.
- National Council of Juvenile and Family Court Judges. (1994). *Model code on domestic and family violence*. Drafted by the Advisory Committee of the Conrad N. Hilton Foundation Model Code Project. San Diego, CA: National Council of Juvenile and Family Court Judges.
- National Institute of Justice Research Preview Series. Rockville, MD: U.S. Department of Justice.
- National Research Council, Panel on Research on Child Abuse and Neglect, Commission on Behavioral and Social Sciences and Education. (1993). *Understanding child abuse and neglect*. Washington, DC: National Academy Press.
- Nelson, B. J. (1984). *Making an issue of child abuse: Political agenda setting for social problems*. Chicago: University of Chicago Press.
- Newman, E., Kaloupek, D. G., Keane, T. M., & Folstein, S. F. (1997). Ethical issues in trauma research: The evolution of an empirical model for decision making. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 271–281). Thousand Oaks, CA: Sage.
- Newmark, L., Harrell, A., & Adams, W. P. (1995). *Evaluation of police training conducted under the family violence prevention and services act*.
- New York State Senate. (1996). Albany, NY: Senate Bill No. S06260. "Domestic Violence." Passed April 2, 1997.
- NIS. (1981). *Executive summary: National Study of the Incidence and Severity of Child Abuse and Neglect*. Washington, DC: U.S. Government Printing Office.
- NIS. (1988). *Study findings: Study of national incidence and prevalence of child abuse and neglect*. Washington, DC: U.S. Department of Health and Human Services.
- Nurius, P., Furrey, I., & Berliner, L. (1992). Coping capacity among women with abusive partners. *Violence and Victims, 7*, 229–243.
- Oates, R. K., & Bross, D. C. (1995). What have we learned about treating child physical abuse? A literature review of the last decade. *Child Abuse and Neglect, 19*, 463–473.
- O'Donohue, W. T., & Elliott, A. N. (1992). Treatment of the sexually abused child: A review. *Journal of Clinical Child Psychology, 21*, 218–228.
- O'Donohue, W., & Letourneau, E. (1993). A brief group treatment for the modification of denial in child sexual abusers: Outcome and follow-up. *Child Abuse and Neglect, 17*, 299–304.
- O'Donovan, K. (1993). *Family law matters*. London: Pluto Press.
- O'Hagan, K. P. (1995). Emotional and psychological abuse: Problems of definition. *Child Abuse and Neglect, 19*, 449–461.
- Okami, P. (1991). Self-reports of "positive" childhood and adolescent sexual contacts with older persons: An exploratory study. *Archives of Sexual Behavior, 20*, 437–457.
- Okami, P., & Goldberg, N. (1992). Personality correlates of pedophilia: Are they reliable indicators? *Journal of Sex Research, 29*, 297–328.
- O'Keefe, M. (1994). Linking marital violence, mother-child/father-child aggression, and child behavior problems. *Journal of Family Violence, 9*, 63–78.
- Olafson, E., Corwin, D. L., & Summit, R. C. (1993). Modern history of child sexual abuse awareness: Cycles of discovery and suppression. *Child Abuse and Neglect, 17*, 7–24.
- Osborne, Y. H., Hinz, L. D., Rappaport, N., & Williams, H. (1988). Parent social attractiveness, parent sex, child temperament and socioeconomic status as predictors of the tendency to report child abuse. *Journal of Social and Clinical Psychology, 6*, 69–76.
- Ostfeld, B. M., & Feldman, M. D. (1996). Factitious disorder by proxy: Clinical features, detection, and management. In M. D. Feldman & S. J. Eisendrath (Eds.), *The spectrum of factitious disorders* (pp. 83–108). Washington, DC: American Psychiatric Press.
- O'Toole, R., Turbett, J. P., Sargent, J., & O'Toole, A. (1987, July). Recognizing and reacting to child abuse: Physicians, nurses, teachers, social workers, law enforcement officers, and community residents. Paper presented at the Family Violence Conference, University of New Hampshire, Durham.
- Pagelow, M. D. (1984). *Family violence*. New York: Praeger.
- Pagelow, M. D. (1989). The incidence and prevalence of criminal abuse of other family members. In L. Ohlin & M. Tonry (Eds.), *Family violence* (pp. 263–313). Chicago: The University of Chicago Press.
- Pagelow, M. D. (1992). Adult victims of domestic violence. *Journal of Interpersonal Violence, 7*, 87–120.
- Panel on Research on Child Abuse and Neglect. (1997). *Understanding child abuse and neglect*. Washington, DC: National Academy Press.
- Parker, H., & Parker, S. (1986). Father-daughter sexual abuse: An emerging perspective. *American Journal of Orthopsychiatry, 56*, 531–549.
- Pate, A. M., & Hamilton, E. E. (1992). Formal and informal deterrents to domestic violence: The Dade County spouse assault experiment. *American Sociological Review, 57*, 691–697.
- Paveza, G. J. (1988). Risk factors in father-daughter child sexual abuse: A case-control study. *Journal of Interpersonal Violence, 3*, 290–306.
- Pawlak, A. E., Boulet, J. R., & Bradford, J. M. W. (1991). Discriminant analysis of a sexual functioning inventory with intrafamilial and extrafamilial child molesters. *Archives of Sexual Behavior, 20*, 27–34.
- Pence, E., & Paymar, M. (1986). *Power and control tactics of men who batter*. Duluth: Minnesota Program Development.
- Penhale, B. (1993). The abuse of elderly people: Considerations for practice. *British Journal of Social Work, 23*, 95–112.
- Perilla, J. L., Bakeman, R., & Norris, F. H. (1994). Culture and domestic violence: The ecology of abused Latinas. *Violence and Victims, 9*, 325–339.
- Peters, S. D., Wyatt, G. E., & Finkelhor, D. (1986). Prevalence. In D. Finkelhor (Ed.), *Sourcebook on child sexual abuse* (pp. 15–59). Beverly Hills, CA: Sage.
- Pfohl, S. J. (1977). The "discovery" of child abuse. *Social Problems, 24*, 310–323.
- Pillemer, K., & Prescott, D. (1989). Psychological effects of elder abuse: A research note. *Journal of Elder Abuse and Neglect, 1*, 65–73.
- Pillemer, K., & Suito, J. (1988). Elder abuse. In V. B. Van Hasselt, R. L. Morrison, A. S. Bellack, & M. Hersen (Eds.), *Handbook of family violence* (pp. 247–270). New York: Plenum.
- Pleck, E. (1987). *Domestic tyranny: The making of American social policy against family violence from colonial times to the present*. New York: Oxford University Press.
- Pleck, E. (1989). Criminal approaches to family violence, 1640–1980. In L. Ohlin & M. Tonry (Eds.), *Family violence* (pp. 19–57). Chicago: University of Chicago Press.
- Plowman, W. B. (1996). Domestic violence transcends social groups. *Domestic Violence Prevention, 2*, 3–5.
- Poertner, J. (1986). Estimating the incidence of abused older persons. *Journal of Gerontological Social Work, 9*, 3–15.
- Pollock, V. E., Briere, J., Schneider, L., Knop, J., Mednick, S. A., & Goodwin, D. W. (1990). Childhood antecedents of antisocial behavior: Parental alcoholism and physical abusiveness. *American Journal of Psychiatry, 147*, 1290–1293.
- Polsby, D. D. (1992). Suppressing domestic violence with law reforms. *Journal of Criminal Law and Criminology, 83*, 250–253.

- Radbill, S. X. (1968). A history of child abuse and infanticide. In R. E. Helfer & C. H. Kempe (Eds.), *The battered child* (pp. 3–17). Chicago: University of Chicago Press.
- Ramsey-Klawnsnik, H. (1991). Elder sexual abuse: Preliminary findings. *Journal of Elder Abuse and Neglect*, 3, 73–90.
- Reis, S. D., & Heppner, P. P. (1993). Examination of coping resources and family adaptation in mothers and daughters of incestuous versus non-clinical families. *Journal of Counseling Psychology*, 40, 100–108.
- Renzetti, C. (1988). Violence in lesbian relationships: A preliminary analysis of causal factors. *Journal of Interpersonal Violence*, 3, 381–399.
- Renzetti, C. (1992). *Violent betrayal: partner abuse in lesbian relationships*. Newbury Park, CA: Sage.
- Rice, M. E., Quinsey, V. L., & Harris, G. T. (1991). Sexual recidivism among child molesters released from a maximum security psychiatric institution. *Journal of Consulting and Clinical Psychology*, 59, 381–386.
- Rivera, B., & Widom, C. S. (1990). Childhood victimization and violent offending. *Violence and Victims*, 5, 19–35.
- Roscoe, B. (1990). Defining child maltreatment: Ratings of parental behavior. *Adolescence*, 25, 517–529.
- Ross, C. J. (1980). The lessons of the past: Defining and controlling child abuse in the United States. In G. Gerbner, C. J. Ross, & E. Zigler (Eds.), *Child abuse: An agenda for action* (pp. 63–81). New York: Oxford University Press.
- Rossi, P. H. (1992). Assessing family preservation programs. *Children and Youth Services Review*, 14, 75–95.
- Rouse, L. P. (1997). Domestic violence: Hitting us where we live. In D. Dunn & D. V. Walker (Eds.), *Analyzing social problems: Essays and exercises* (pp. 17–22). Upper Saddle River, NJ: Prentice-Hall.
- Russell, D. E. H. (1982). *Rape in marriage*. New York: Collier Books.
- Russell, D. E. H. (1983). The incidence and prevalence of intrafamilial and extrafamilial sexual abuse of female children. *Child Abuse and Neglect*, 7, 133–146.
- Russell, D. E. H. (1986). *The secret trauma: Incest in the lives of girls and women*. New York: Basic Books.
- Rust, J. O., & Troupe, P. A. (1991). Relationship of treatment of child sexual abuse with school achievement and self concept. *Journal of Early Adolescence*, 11, 420–429.
- Sabourin, T. C. (1991). Perceptions of verbal aggression in interspousal violence. In D. D. Knudsen & J. L. Miller (Eds.), *Abused and battered: Social and legal responses to family violence* (pp. 135–145). New York: Aldine de Gruyter.
- Salzinger, S., Feldman, R. S., Hammer, M., & Rosario, M. (1991). Risk of physical child abuse and personal consequences for its victims. *Criminal Justice and Behavior*, 18, 64–81.
- Saunders, B. E., Villepontoux, L. A., Lipovsky, J. A., Kilpatrick, D. G., & Veronen, L. J. (1992). Child sexual assault as a risk factor for mental disorders among women. *Journal of Interpersonal Violence*, 7, 189–204.
- Scarf, M. (1988). *Battered Jewish wives: Case studies in the response to rage*. Lexington, NY: Edwin Mellen Press.
- Schilit, R., Lie, G. Y., & Montagne, M. (1990). Substance use as a correlate of violence in intimate lesbian relationships. *Journal of Homosexuality*, 19, 51–65.
- Schilit, R., Lie, G. Y., Montagne, M., & Reyes, L. (1992). Intergenerational transmission of violence in lesbian relationships. *Affilia*, 6, 72–87.
- Schneider, C. J. (1982). The Michigan screening profile of parenting. In R. H. Starr, Jr. (Ed.), *Child abuse prediction: Policy implications* (pp. 157–174). Cambridge, MA: Bellinger.
- Seaver, C. (1996). Muted lives: Older battered women. *Journal of Elder Abuse and Neglect*, 8, 3–21.
- Sedlak, A. J. (1988). Prevention of wife abuse. In V. B. Hasselt, R. L. Morrison, A. S. Bellack, & M. Hersen (Eds.), *Handbook of family violence* (pp. 319–358). New York: Plenum.
- Shapiro, J. P., Leifer, M., Martone, M. W., & Kassem, L. (1992). Cognitive functioning and social competence as predictors of maladjustment in sexually abused girls. *Journal of Interpersonal Violence*, 7, 159–164.
- Shepard, M. (1992). Predicting batterer recidivism five years after community intervention. *Journal of Family Violence*, 7, 167–178.
- Sherman, L. W., & Berk, R. A. (1984). The specific deterrent effects of arrest for domestic assault. *American Sociological Review*, 49, 261–272.
- Sherman, L. W. (1992). *Policing domestic violence: Experiments and dilemmas*. New York: Free Press.
- Sherman, L. W., & Smith, D. A. (1992). Crime, punishment, and stake in conformity: Legal and informal control of domestic violence. *American Sociological Review*, 57, 680–690.
- Shornstein, S. L. (1997). *Domestic violence and health care: What every professional needs to know*. Thousand Oaks, CA: Sage.
- Shorter, E. (1975). *The making of the modern family*. New York: Basic Books.
- Showers, J. (1992). “Don’t Shake the Baby”: The effectiveness of a prevention program. *Child Abuse and Neglect*, 16, 11–18.
- Sigler, R. T. (1989). *Domestic violence in context: An assessment of community attitudes*. Lexington, MA: Lexington Books.
- Silverman, R. A., & Kennedy, L. W. (1988). Women who kill their children. *Violence and Victims*, 3, 113–127.
- Singer, K. I. (1989). Group work with men who experienced incest in childhood. *American Journal of Orthopsychiatry*, 59, 468–472.
- Snyder, J. C., & Newberger, E. H. (1986). Consensus and differences among hospital professionals in evaluating child maltreatment. *Violence and Victims*, 1, 125–139.
- Spatt, M. (1995, January 24). Same-sex domestic violence cases now covered by state law. *OutNOW*, 1–2.
- Stacey, W. A., Hazelwood, L. R., & Shupe, A. (1994). *The violent couple*. Westport, CT: Praeger.
- Stark, E., & Flitcraft, A. (1995). Killing the beast within: Woman battering and female suicidality. *International Journal of Health Services*, 25, 43–64.
- Stark, E., & Flitcraft, A. (1996). *Women at risk: Domestic violence and women’s health*. Thousand Oaks, CA: Sage.
- Steinmetz, S. K. (1981, January/February). Elder abuse. *Aging*, 6–10.
- Steinmetz, S. K. (1987). Family violence: past, present, and future. In M. B. Sussman & S. K. Steinmetz (Eds.), *Handbook of marriage and the family* (pp. 725–765). New York: Plenum.
- Steinmetz, S. K. (1988a). *Duty bound: Elder abuse and family care*. Newbury Park, CA: Sage.
- Steinmetz, S. K. (1988b). Elder abuse by family caretakers: Processes and intervention strategies. *Contemporary Family Therapy: An International Journal*, 10, 256–261.
- Steinmetz, S. K. (1993). The abused elderly are dependent: Abuse is caused by the perception of stress associated with providing care. In R. J. Gelles & D. R. Loeske (Eds.), *Current controversies in family violence* (pp. 222–236). Newbury Park, CA: Sage.
- Steinmetz, S. K., & Lucca, J. A. (1988). Husband battering. In V. B. Van Hasselt, R. L. Morrison, A. S. Bellack & M. Hersen (Eds.), *Handbook of family violence* (pp. 233–246). New York: Plenum.
- Sternberg, K. J., Lamb, M. E., Greenbaum, C., Cicchetti, D., Dawud, S., Cortes, R. M., Knspin, O., & Lorey, F. (1993). Effects of domestic violence on children’s behavior problems and depression. *Developmental Psychology*, 29, 44–52.
- Stets, J. E. (1988). *Domestic violence and control*. New York: Springer.
- Stets, J. E. (1991). Cohabiting and marital aggression: The role of social isolation. *Journal of Marriage and the Family*, 53, 669–680.
- Stets, J. E., & Straus, M. A. (1990). Gender differences in reporting marital violence and its medical and psychological consequences. In M. A.

- Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 151–165). New Brunswick, NJ: Transaction Publishers.
- Straton, J. C. (1994). The myth of the “battered husband syndrome.” *Masculinities*, 9, 70–82.
- Straus, M. A. (1976). Social inequality, cultural norms, and wife beating. *Victimology*, 1, 54–76.
- Straus, M. A. (1990). Societal stress and marital violence in a national sample of American families. In F. Wright, C. Bahn, & R. W. Rieber (Eds.), *Annals of the new York Academy of Sciences, Vol. 347: Forensic psychology and psychiatry* (pp. 229–250). New York: New York Academy of Sciences.
- Straus, M. A. (1990a). How violent are American families? Estimates from the National Family Violence Resurvey and other studies. In M. A. Straus & R. J. Gelles (eds.), *Physical violence in American families* (pp. 95–112). New Brunswick, NJ: Transaction Press.
- Straus, M. A. (1990b). Ordinary violence, child abuse, and wife beating: What do they have in common? In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 403–424). New Brunswick, NJ: Transaction Publishers.
- Straus, M. A. (1990c). Social stress and marital violence in a national sample of American families. In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 181–201). New Brunswick, NJ: Transaction Publishers.
- Straus, M. A. (1991a). Physical violence in American families: Incidence rates, causes, and trends. In D. D. Knudsen & J. L. Miller (Eds.), *Abused and battered: Social and legal responses to family violence* (pp. 17–34). New York: Aldine de Gruyter.
- Straus, M. A. (1991b). Discipline and deviance: Physical punishment and violence and other crime in adulthood. *Social Problems*, 38, 180–197.
- Straus, M. A. (1994). *Beating the devil out of them: Corporal punishment in American families*. New York: Lexington Books.
- Straus, M. A., & Gelles, R. J. (1986). Societal change in family violence from 1975 to 1985 as revealed by two national surveys. *Journal of Marriage and the Family*, 48, 465–479.
- Straus, M. A., & Gelles, R. J. (1990). *Physical violence in American Families: Risk Factors and adaptations to violence in 8,145 families*. New Brunswick, NJ: Transaction Publishers.
- Straus, M. A., Gelles, R. J., & Steinmetz, S. K. (1980). *Behind closed doors: Violence in the American family*. Garden City, NY: Doubleday.
- Straus, M. A., Kantor, G. G., & Moore, D. W. (1997). Change in cultural norms approving marital violence from 1968 to 1994. In G. G. Kantor and J. L. Jasinski, (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 3–16). Thousand Oaks, CA: Sage.
- Straus, M., & Mathur, A. K. (1996). Social change and trends in approval of corporal punishment by parents from 1968 to 1994. In D. Frehsee, W. Horn, & K. Bussman (Eds.), *Violence against children* (pp. 91–105). Berlin: Walter de Gruyter.
- Straus, M. A., & Sweet, S. (1992). Verbal symbolic aggression in couples: Incidence rates and relationships to personal characteristics. *Journal of Marriage and the Family*, 54, 346–357.
- Straus, M. A., Gelles, R. J., & Steinmetz, S. (1980). *Behind closed doors: Violence in the American family*. Garden City, NY: Anchor Press.
- Straus, M. A., Kantor, G. K., & Moore, D. W. (1997). Change in cultural norms approving marital violence from 1968–1994. In G. Kaufman Kantor & J. L. Jasinski (Eds.), *Out of the darkness: Contemporary perspectives on family violence* (pp. 3–16). Thousand Oaks, CA: Sage.
- Straus, M. A., Sugarman, D. B., & Giles-Sims, J. (1997). Spanking by parents in subsequent anti-social behavior of children. *Archives of Pediatric and Adolescent Medicine*, 151, 761–767.
- Syers, M., & Edleson, J. L. (1992). The combined effects of coordinated criminal justice intervention in woman abuse. *Journal of Interpersonal Violence*, 7, 490–502.
- Tiftt, L. L. (1993). *Battering of women: The failure of intervention and the case for prevention*. Boulder, CO: Westview Press.
- Tolman, R. M., & Bhosley, G. (1991). The outcome of participation in a shelter-sponsored program for men who batter. In D. Knudsen & J. Miller (Eds.), *Abused and battered* (pp. 113–122). New York: Aldine de Gruyter.
- Tomlin, S. S. (1991). Stigma and incest survivors. *Child Abuse and Neglect*, 15, 557–566.
- Trickett, P. K., Aber, J. L., Carlson, V., & Cicchetti, D. (1991). Relationship of socioeconomic status to the etiology and development sequelae of physical child abuse. *Developmental Psychology*, 27, 148–158.
- Tracy, E. M., Haapala, D. A., & Pecora, J. (Eds.). (1991). *Intensive family preservation services: An instructional sourcebook*. Cleveland, OH: Case Western Reserve University.
- Tutty, L. M. (1990). Preventing child sexual abuse: A review of current research and theory. In M. Rothery & G. Cameron (Eds.), *Child maltreatment: Expanding our concept of helping* (pp. 259–275). Hillsdale, NJ: Erlbaum.
- Ucko, L. G. (1994). Culture and violence: The interaction of Africa and America. *Sex Roles*, 31, 185–204.
- Urquiza, A. J., Wyatt, G. E., & Root, M. P. P. (1994). Introduction: Violence against women of color. *Violence and Victims*, 9, 203–206.
- U.S. Department of Health and Human Services. (1994). *Child maltreatment 1993: Reports from the states to the National Center on Child Abuse and Neglect*.
- Utech, M. R., & Garrett, R. R. (1992). Elder and child abuse: Conceptual and perceptual parallels. *Journal of Interpersonal Violence*, 7, 418–428.
- Vinton, L. (1992). Battered women’s shelters and older women: The Florida experience. *Journal of Family Violence*, 7, 63–72.
- Vissing, Y. M., Straus, M. A., Gelles, R. J., & Harrop, J. W. (1991). Verbal aggression by parents and psychosocial problems of children. *Child Abuse and Neglect*, 15, 223–238.
- Vitanza, S., Vogel, L. C. M., & Marshall, L. L. (1995). Distress and symptoms of posttraumatic stress disorder in abused women. *Violence and Victims*, 10, 23–34.
- Walker, L. (1979). *The battered woman*. New York: Harper and Row.
- Wallace, H. (1996). *Family violence: legal, medical, and social perspectives*. Lexington, MA: Allyn & Bacon.
- Warner, I. E., & Hansen, D. J. (1994). The identification and reporting of physical abuse by physicians: A review and implications for research. *Child Abuse and Neglect*, 18, 11–25.
- Waterman, C., Dawson, L., & Bologna, M. J. (1989). Sexual coercion in gay male and lesbian relationships: Predictors and implications for support services. *Journal of Sex Research*, 26, 118–124.
- Webster, R. L., Goldstein, J., & Segall, A. (1985). A test of the explanatory value of alternative models of child abuse. *Journal of Comparative Family Studies*, 16, 295–317.
- Webster, S. W. (1991). Variations in defining family mistreatment: A community survey. In D. D. Knudsen & J. Miller (Eds.), *Abused and battered: Social and legal responses to family violence* (pp. 49–61). New York: Aldine de Gruyter.
- Weise, D., & Daro, D. (1995). *Current trends in child abuse reporting and fatalities: The results of the 1994 annual fifty state survey*. Chicago: National Committee to Prevent Child Abuse.
- Weitzman, L. (1981). *The marriage contract: Spouses, lovers, and the law*. New York: Free Press.
- Whitcomb, D. (1992). *When the victim is a child* (2nd ed.). Washington, DC: U.S. Department of Justice.
- Whiteman, M., Fanshel, D., & Grundy, I. F. (1987). Cognitive-behavioral interventions aimed at anger of parents at risk of child abuse. *Social Work*, 32, 469–474.

- Whittaker, T. (1996). Violence, gender, and elder abuse. In B. Fawcett, B. Featherstone, J. Hearn, & C. Toft (Eds.), *Violence and gender relations: Theories and interventions* (pp. 147–160). Thousand Oaks, CA: Sage.
- Widom, C. S. (1988). Sampling biases and implications for child abuse research. *American Journal of Orthopsychiatry*, 58, 260–270.
- Widom, C. S. (1989). Does violence beget violence? A critical examination of the literature. *Psychological Bulletin*, 106, 3–28.
- Williams, L. M. (1994). Recall of childhood trauma. *Journal of Consulting and Clinical Psychology*, 62, 1167–1176.
- Williamson, I. M., Borduin, C. M., & Howe, B. A. (1991). The ecology of adolescent maltreatment: A multilevel examination of adolescent physical abuse, sexual abuse, and neglect. *Journal of Consulting and Clinical Psychology*, 59, 449–457.
- Wilson, S. K., Cameron, S., Jaffe, P., & Wolfe, D. (1989). Children exposed to wife abuse: An intervention model. *Social Casework*, 70, 180–184.
- Wolfe, D. A. (1985). Child-abusive parents: An Empirical Review and Analysis. *Psychological Bulletin*, 97, 462–782.
- Wolfe, D. A. (1987). *Child abuse: Implication for child development and psychopathology*. Beverly Hills, CA: Sage.
- Wolfe, D. A., & Jaffe, P. (1991). Child abuse and family violence as determinants of child psychopathology. *Canadian Journal of Behavioral Science*, 23, 282–299.
- Wolf, R. S. (1996). Elder abuse and family violence: Testimony presented before the U.S. Senate Special Committee on Aging. *Journal of Elder Abuse and Neglect*, 8, 81–96.
- Wolfgang, M. E. (1958). *Patterns of criminal homicide*. Philadelphia: University of Pennsylvania Press.
- Wurtele, S. K., & Miller, C. L. (1987). Children's conceptions of sexual abuse. *Journal of Clinical Child Psychology*, 16, 184–191.
- Yllo, K. (1984). The status of women, marital equality, and violence against wives. *Journal of Family Issues*, 5, 307–320.
- Yllo, K. (1993). Through a feminist lens: Gender, power, and violence. In R. J. Gelles & D. R. Loseke (Eds.), *Current controversies on family violence* (pp. 47–62). Newbury Park, CA: Sage.
- Yllo, K., & Straus, M. A. (1990). Patriarchy and violence against wives: The impact of structural and normative factors. In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families* (pp. 383–399). New Brunswick, NJ: Transaction Publishers.
- Zelizer, V. (1985). *Pricing the priceless child: The changing social value of children*. New York: Basic Books.