



RISK AND CONTRIBUTING FACTORS OF VIOLENCE AGAINST WOMEN- A REVIEW

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ABSTRACT

Separate areas of research have investigated the risk factors for partner violence, sexual assault, emotional abuse, and stalking. Little is known about risk factors for stalking or emotional abuse. Because there is so much overlap among the risk factors for sexual and physical assault by intimate partners, they are discussed together. There is a strong consensus that there is no single risk factor for violence against women. Rather, researchers have learned that a number of factors may increase the likelihood that a woman will be victimized. Because there are numerous risk factors, an ecological framework has been adopted for organizing the different factors that are nested within one another. Some explanations for violence look to socio cultural risk factors characteristics of society that promote social tolerance of violence. In contrast, social structural risk factors include social and economic factors that increase the probability of involvement in violence. Family risk factors include relationship characteristics that are related to violence. The risk markers that have been most studied are those that pertain to individuals both perpetrators and victims.

Key Words: Socio cultural, Social Structural, Family Risk, Individual Risk, Stalking

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1. INTRODUCTION

For the purposes of this project, violence against women is defined as any physical, emotional, sexual, or psychological abuse or violence committed against women by intimate partners or acquaintances, including current or former spouses, cohabiting partners, boyfriends, or dates. Although this definition is broader than ones adopted by many practitioners and narrower than others, it captures the scope of women's victimization at its most fundamental level. Regardless of how it is socially or legally defined, women's experiences of violent victimization are dominated by victimization by people they know (Browne and Williams, 1993; Lentzner and DeBerry, 1980; Mercy and Saltzman, 1989; Tjaden and Thoennes, 1998a). Moreover, although the law distinguishes between sexual assault, domestic violence, and stalking, research shows

that these types of victimization often occur simultaneously or sequentially (Browne, 1987; Caputi, 1989; Eby et al., 1995; Frieze, 1983; Shields and Hanneke, 1983; Zillman, 1984).

Researchers and practitioners have yet to develop a complete consensus on what constitutes violence against women, but many include the following:

- Acts carried out with the actual or perceived intention of causing physical pain or injury to another person (Gelles and Harrop, 1989).
- Acts that are, or potentially are, physically and emotionally harmful (O'Leary and Browne, 1992).
- Physical, visual, verbal, or sexual acts that are experienced as threatening, invasive, assaultive, hurtful or degrading, or controlling (American Psychological Association, as cited in Koss et al., 1994). Legally and historically, these behaviors have been distinguished as physical violence, sexual assault, and, most recently, stalking.

Physical violence includes fatal and nonfatal physical assault. Consistent with the definitions most commonly used by researchers, physical violence is defined herein as any act of physical aggression intended to harm one's partner. These acts include pushing, grabbing, and shoving; kicking, biting, and hitting (with fists or objects); beating and choking; and threatening or using a knife or gun.

Legal definitions of rape and sexual assault differ from State to State, although their common element is the lack of victim consent to sexual acts. Many States have ceased to use the term "rape" in their criminal codes, substituting more general definitions of sexual assault and abuse. In general, State laws distinguish between aggravated sexual assault (forcing a victim to engage in a sexual act through actual or threatened death, serious bodily injury, or kidnapping) and sexual abuse, as well as other forced or coerced sexual acts that do not involve penetration.

Emotional or psychological abuse includes any act intended to denigrate, isolate, or dominate a partner. Emotional abuse is intended to control victims by limiting resources and social contacts; creating actual and emotional dependence; and reducing victims' sense of self-worth, competence, and value. Emotional maltreatment can include verbal abuse, such as insults, criticism, ridicule, name calling, discounting, and discrediting; isolation of the victim; control of social and family contacts; denial of access to finances or transportation; demonstration of extreme jealousy and possessiveness; the monitoring of behavior; accusations of infidelity; threats of harm to the victim's family, children, or friends; threats of abandonment or infidelity; and damage to or destruction of personal property (Davis and Swan, 1999; Follingstad et al., 1990; Marshall, 1999). Health care, mental health, and legal researchers have not reached full agreement on a definition of emotional abuse, and less is known about this form of abuse than others (O'Leary, 1999).

Stalking has been defined by the National Institute of Justice as "a course of conduct directed at a specific person that involves repeated visual or physical proximity, nonconsensual communication, or verbal, written implied threats, or a combination thereof, that would cause a reasonable person fear" (Tjaden and Thoennes, 1998b). Examples include behavior such as following the victim, conducting surveillance, threatening the victim or victim's family, harassing the victim through phone calls or letters, appearing at the victim's home or place of business, or breaking into the victim's home. Although high-profile cases of celebrity stalking have attracted media and public interest, the majority of stalking victims are ordinary people who are pursued or threatened by someone with whom they have had a relationship. Almost 80 percent of stalking cases involve women stalked by persons they know (Tjaden and Thoennes, 1998b). In recognition of this problem, 48 States and the District of Columbia passed antis stalking statutes between 1990 and 1994.

2. SOCIOCULTURAL RISK FACTORS

Historically, socio cultural risk factors establish a broad context that has made many forms of violence against women socially acceptable. Sexism in American society and sex-role stereotyping contribute to both physical and sexual victimization of women. A recent review of research attributes social acceptance of violence to “historically male dominated social structure and socialization practices teaching men and women different gender-specific roles” (Kantor and Jasinski, 1998). Research comparing rates of marital violence across States has concluded that rates are highest “in those [American] states where structural inequality in economic, educational, political, and legal institutions is greatest,” thus supporting patriarchy as a contributing factor (Yllo and Straus, 1990). Research on cultural explanations for rape rates across States has reached the same conclusions (Baron and Straus, 1989).

The impact of cultural values has also been examined at the individual level, but findings have been inconclusive. Some studies find that men who sexually assault women are more likely than other men to see sexual violence as acceptable (Burkhart and Stanton, 1988), although other researchers have not consistently reached this conclusion (Neff, Holamon, and Schluter, 1995; Sugarman and Frankel, 1996). Sugarman and Frankel (1996) concluded that assaultive men had more positive attitudes toward violence than nonviolent men, but violent behavior was not associated with the trait of masculinity. In addition, they found that abused women hold more traditional gender role orientations than non abused women, which may account in part for the difficulty some women experience in extricating themselves from abusive relationships. Thus, research is inconsistent regarding whether traditional sex roles are a risk factor for violence against women (O’Leary and Cascardi, 1998).

Race and ethnicity have been widely researched as possible risk factors for violence against women, but the results have been inconclusive. Some studies show that black women experience higher rates of physical violence than white women (Neff, Holamon, and Schluter, 1995; Sorenson, Upchurch, and Shen, 1996). Other research reports higher rates for whites than for Hispanic women (Neff, Holamon, and Schluter, 1995; Sorenson and Telles, 1991) or no racial or ethnic differences (Bachman and Saltzman, 1995; Tjaden and Thoennes, 1998a). Many of these studies have not considered the effects of socioeconomic status, which is correlated with race and ethnicity, so they may overestimate the effect of race on violent victimization. For example, when Straus and Smith (1990) controlled for age, income, and urban residence, the apparently higher rate of spouse abuse for Hispanic families disappeared.

The research on sexual assault indicates that

Except for college students, sexual assault is slightly more prevalent among African-American women compared to White women. The prevalence rate of sexual assault among non-Hispanic Whites has been reported to be 2.5 times higher than that of Hispanics. Prevalence varies by acculturation [based on the work of Sorenson and Siegel, 1992]. (Koss, 1993).

Among college students, the highest rates of sexual victimization were reported by Native American women, followed by white, black, and Latino women (Koss, Gidycz, and Wisniewski, 1987). Tjaden and Thoennes (1998a) also found the highest rates of rape among Native American women and the lowest among Hispanic women. As is the case with domestic violence, however, most research on race and sexual assault has not controlled for the effects of socioeconomic factors, such as income, that may help to explain ethnic differences in sexual assault rates.

The findings on race or ethnic differences in stalking from the National Violence Against Women Survey indicate the highest rates for American Indian women and the lowest rates for Asians, with no differences between Hispanic and non-Hispanic women (Tjaden and Thoennes, 1998b).

3. SOCIAL STRUCTURAL RISK FACTORS

Two kinds of social structural risk factors have been investigated: economic status and community factors. Domestic violence occurs in households of all income levels, but researchers agree that low income is a risk factor for partner violence (Bachman and Saltzman, 1995; Greenfeld et al., 1998; Plichta, 1996). It is not only severe poverty and its associated stressors that increase the risk for partner violence. Higher income correlates with lower reported intimate violence rates.

For example, in a large national sample, Sorenson, Upchurch, and Shen (1996) found that families with incomes below \$40,000 were at higher risk. Several studies have also found unemployment of the male partner to be a risk factor (Straus and Gelles, 1986). Low income has also been found to predict the continuation of violence over time (Aldarondo and Sugarman, 1996), with higher income a predictor of cessation (Aldarondo and Kantor, 1997).

Economic status may increase the risk of violence in two ways. First, insufficient income can affect the perpetrator. Second, researchers have documented that poverty or economic dependency on the abuser can also be a barrier to the victim's ability to terminate an abusive relationship (Horton and Johnson, 1993; Strube and Barbour, 1983; Sullivan et al., 1994; Woffordt, Mihalic, and Menard, 1994).

The most compelling finding regarding community-level risk factors is that rates of intimate partner violence are highest in urban areas (Greenfeld et al., 1998; Plichta, 1996; Sorenson, Upchurch, and Shen, 1996). Little has been written about how urban life may increase the risk for violence, but associations between urban residence and poverty may account for the relationship. This finding has significant implications for prevention and intervention efforts.

A second community-level risk factor relates to the availability and quality of prevention and intervention services. A lack of services increases the risk that a victim will stay in an abusive relationship or be unable to address the consequences of physical or sexual abuse. In the past, the lack of services was a major barrier that prevented women from addressing the consequences of violence against women, and abused women were often "frustrated in their efforts to obtain help from traditional institutions such as the criminal justice, legal, and mental health systems" (Mitchell and Hodson, 1983). Since the 1970s, services, especially domestic violence programs and rape crisis centers, have grown dramatically (Chalk and King, 1998); however, victims were often dissatisfied with the help they received from community agencies through the middle 1980s (Gondolf and Fisher, 1988). Although not well researched, many community services for partner violence and sexual assault were reported to be culturally insensitive and "in large part inappropriate and inadequate" (Heron et al., 1997). Thus, they were underused by certain racial and ethnic groups (Neville and Pugh, 1997). The stigma associated with violent victimization also interfered with women's willingness to access those services, especially in the case of rape. Few women utilized rape crisis centers, although those who did reported satisfaction with the services they received.

4. FAMILY RISK FACTORS

Risk factors pertaining to the family or couple unit have not been well researched, although mental health professionals assume such factors play a contributing role in partner violence. There is a consensus that relationship status is a risk factor. Among intimates, separated and cohabiting couples are at a higher risk for partner violence than are married or dating couples (Bachman and Saltzman, 1995; Capaldi and Crosby, 1997; Plichta, 1996), even when important risk factors such as age and education are taken into account (Stets and Straus, 1989). Rates of violence by cohabiting men in this study were almost triple those of married males (Yllo and Straus, 1981).

Although it is often assumed that factors such as poor problem solving and communication skills and unilateral power and decision making are significant risks for partner violence, there is little research comparing violent and nonviolent couples on these dimensions. Based on data from the 1975 National Family Violence Survey, Kalmuss (1979) concluded that highly dependent wives were significantly more likely to experience marital violence because “wives who are highly dependent on marriage are less able to discourage, avoid, or put an end to abuse” than wives in more egalitarian relationships. Victim substance abuse and serious mental health problems can increase dependency and interfere with a woman’s ability to prevent violence or leave an abusive relationship once it has developed (Hilbert, Kolia, and VanLeeuwen, 1997).

Research also suggests that conflict is an important risk factor for partner violence. An early study showed that both male and female dominance were associated with marital conflict, which was in turn predictive of violence unless the wife believed that the husband should be dominant (Coleman and Straus, 1990).

5. INDIVIDUAL RISK FACTORS PERPETRATORS

Individual risk factors affecting perpetrators have been studied extensively. Age is among the best documented individual risk factors for physical and sexual violence for both victims and perpetrators, with younger age being at greater risk (Bachman and Saltzman, 1995; Koss, Gidycz, and Wisniewski, 1987; Pan, Neidig, and O’Leary, 1994; Plichta, 1996; Sorenson et al., 1987; Tjaden and Thoennes, 1998a). Substance abuse, especially alcohol use and abuse, has also been found to be associated with both partner violence (Aldarondo and Kantor, 1997; Kantor and Jasinski, 1998; Leonard and Senchak, 1996; Pan, Neidig, and O’Leary, 1994; Woffordt, Mihalic, and Menard, 1994) and sexual assault (Ullman, Karabatsos, and Koss, 1999). Between 33 and 66 percent of sexual assaults are reported to be alcohol related (Ullman, Karabatsos, and Koss, 1999).

Numerous perpetrator personality characteristics or traits have been studied as antecedents of physical or sexual abuse, although findings have been inconclusive. It is clear that there is no single male personality type that is prone to sexual or physical violence. Kantor and Jasinski’s (1998) review of research concluded that the following are personality risk markers for male partner abuse:

- Emotional dependence and insecurity.
- Low self-esteem, empathy, and impulse control.
- Poor communication and social skills.
- Aggressive, narcissistic, and antisocial personality types.
- Anxiety and depression.

Some research has attempted to identify different types of batterers (Holtzworth-Munroe and Stuart, 1994). These studies have concluded that there may be several different types of abusive men. At least two types one that is violent only toward intimates and another that more generally is violent toward others may require different types of interventions. Because emotional or psychological abuse typically precedes and accompanies physical abuse (O’Leary, Malone, and Tyree, 1994), emotional abuse should also be considered a risk factor.

A history of violence in the family of origin has been extensively researched, with most researchers concluding that exposure to violence between parents and being the recipient of violent punishment are risk factors for violence toward intimates as an adult (Aldarondo and Kantor, 1997; Barnett and Fagan, 1993; Leonard and Senchak, 1996), but not all studies have supported this conclusion (MacEwen and Barling, 1988; Riggs and O’Leary, 1996).

Although stress is assumed to be a risk factor for violence against women, there is limited research support for this assertion. One study found that men who were violent toward intimate partners reported more stressors (Barnett and Fagan, 1993), but another found that work and marital stressors were not predictive of partner violence (Pan, Neidig, and O'Leary, 1994). The relationship between stress and intimate partner violence is complex and may be affected by other important factors, such as social isolation, the husband's belief that he should be dominant or his approval of violence, and his exposure to violence as a child (Straus, 1990).

6. INDIVIDUAL RISK FACTORS VICTIMS

It is difficult to study risk factors for victimization because most studies do not identify victims until after abuse has occurred. Consequently, what appears to be a risk factor might actually be a consequence of victimization. This is especially true for social isolation and substance abuse.

There is strong research support for the assertion that earlier victimization, especially childhood physical and sexual abuse, and witnessing violence between parents increases the risk of sexual assault and partner violence in adulthood (Collins, 1998; Gidycz and Koss, 1991; Maker, Kemmelmeier, and Peterson, 1998; Miller and Downs, 1993; Weaver et al., 1997).

Substance abuse has also been studied as a risk factor for victimization, especially sexual assault. Several studies have documented the association between alcohol or drug abuse and physical (Hilbert, Kolia, and VanLeeuwen, 1997; Plichta, 1996) and sexual victimization (Collins, 1998; Miller and Downs, 1993; Teets, 1997). Kilpatrick and colleagues (1997) attempted to disentangle substance abuse as a cause or effect of violent victimization in a 2-year longitudinal study that concluded that substance abuse, especially drug use, is both a predictor *and* an effect of violent victimization, affecting young women and minority women in particular. Abuse of alcohol or drugs, which may have origins in childhood victimization and the ongoing distress it causes, appears to be associated with the kind of lifestyle and male relationships that increase women's risks for victimization and makes it more difficult for women to terminate abusive relationships (Hilbert, Kolia, and VanLeeuwen, 1997; Kilpatrick et al., 1997; Weaver et al., 1997).

Social isolation of abused women has been documented by researchers. Although it can be a consequence of abuse, it may also serve as a risk factor. It is plausible that women with greater social support are less likely to be physically or sexually assaulted, and thus social support may be protective. The research of Nielsen, Endo, and Ellington (1992) suggests that social isolation both precedes and follows partner violence. Research suggests that abusive men often attempt to control their partners by cutting them off from meaningful social contact. In addition, isolated women and families may be less closely monitored by others, allowing abuse to occur more easily (Nielsen, Endo, and Ellington, 1992). Although social isolation has not been widely studied as a risk factor for sexual assault, Zweig, Barber, and Eccles (1997) found that it was one predictor of sexual coercion in young adults.

7. RISK FACTORS FOR STALKING

Little is known about the risk factors for stalking. One study concluded that batterers who also stalk their victims are different from non-stalking abusive men. They are more likely to have stalked previous victims and have a history of assault, alcohol abuse, and no cohabitation (Burgess et al., 1997). Women surveyed in the National Violence Against Women Survey perceived motivations to be the stalker's desire to control the victim, continue the relationship, or instill fear (Tjaden and Thoennes, 1998b). A history of physical or sexual assault by an intimate partner can also be considered a risk factor for stalking (Tjaden and Thoennes, 1998b).

8. CONCLUSIONS

Neither physical nor sexual assault are caused by one factor. Usually several factors, often interconnected, interact with one another to increase risk. The following risk factors for violence against women have the strongest research support:

- Low income.
- Urban residence.
- Relationship status (unmarried or separated).
- Relationship conflict.
- Emotional abuse.
- Young age.
- Substance abuse.
- Childhood abuse.

Although little is known about risk factors for stalking, a history of domestic violence, sexual assault, stalking behavior, and alcohol abuse can be considered risk factors.

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