FAMILY VIOLENCE

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Abstract  Family violence occurs in many forms; the most prominent are domestic violence, child abuse, and elder abuse. Family violence affects many persons at some point in their life and constitutes the majority of violent acts in our society. Although there has been considerable study of the patterns, risk factors, and interventions for each form of family violence, great controversy still exists within each area. There is growing recognition of an overlap in the patterns, causes, and effective interventions across types of family violence. There is also an increasing awareness of the value of greater integration of theory and research across areas into a family violence approach through an ecological perspective. This review focuses on current knowledge related to these problems and suggests integrative steps to advance knowledge.

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INTRODUCTION

In the past ten years, family violence has come to be recognized as a major public health issue with important psychological components and ramifications (Am. Psychol. Assoc. 1996, Chalk & King 1998). In part, this recognition is the result of efforts to track prevalence patterns, to evaluate potential risk and protective factors, and to execute well-designed evaluations of interventions (Tolan & Gorman-Smith 2002). But much of the recognition is from advocacy about policy related to each of the major component problems: domestic violence, child abuse, and elder abuse1 (Loseke et al. 2005, Graham-Bermann & Edleson 2001). Although science and social pressure both contribute to bringing needed interest in this problem, the difference in motivations for these two types of efforts has impeded advancement of scientific study that could lead to integration of knowledge and policy about family violence. Because there has been passionate and sophisticated advocacy on questions of how key constructs should be composed, what research is relevant, and how results should be interpreted, at times, much of the research has substantial limitations in resolving major contentions.

The field is also marked by segregated understanding and policy direction for each of the major forms of family violence (O’Leary 1993). Theory and research tend to be focused on domestic violence, child abuse, or elder abuse, with little crossover in investigators or in how issues are framed. There has been preoccupation with controversies about conceptualization, definition, and measurement within each area, rather than focus on the relation between areas and an overall understanding of violence in families (Loseke et al. 2005). Because research has been cast within area-specific perspectives, many studies are not able to address alternative explanations. Similarly, advocacy efforts to promote policy change in one area have usually focused on a single problem or perspective about family violence and in doing so have oversimplified or ignored other forms of family violence or complex issues in affecting change in violence rates (Am. Psychol. Assoc. 1996). For example, advocates for policies to affect child abuse by requiring removal of the offending parent may overlook that important ties of the nonoffending parent to the abusing parent could undermine compliance with reporting abuse.

Thus, a survey of the work of the past decade reveals disparate sets of studies, each with its own scientific and policy discussions. Also, within areas the relation of policy advocacy to research has been limited. However, there is an emerging recognition of considerable overlap in the occurrence of these problems: They share many risk factors, and effective interventions for each share many features. In addition, it is being recognized that such broader consideration helps relate

1For efficiency and consistency in referencing, we refer to the three general types of family violence with terms that are commonly used: domestic violence, child abuse, and elder abuse. This is not meant to ignore the complex issues under debate about terminology, nor is it an indication of a particular perspective on this issue.
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how work to affect families with one type of violence can help affect and even prevent other forms (Chalk & King 1998). There is also growing recognition of the importance of understanding why so much violence is family based and how focusing on family may have benefits for each type (Jouriles et al. 2001). Recognition of the need for greater integration is accompanied by an appreciation that family violence is a complex problem marked by a challenging set of scientific and practical issues that need to be managed to reduce this public health threat (Graham-Bermann & Edleson 2001).

This review examines the recent research on patterns of occurrence, risk factors, and promising interventions across three major areas of family violence (domestic violence, child abuse, and elder abuse). With an orientation toward integration into a family violence perspective, this summary then serves as the basis for recommendations for conceptualizing the problem, for conducting needed research, and for proposing how such research might inform policy. Because conceptual issues remain controversial, we first address why a focus on family violence in particular is valuable and then discuss some of the issues related to controversies about defining family violence and its forms.

FOCUSING ON FAMILIES AND VIOLENCE

There are several reasons why family violence merits an integrative focus while being distinguished from other forms of violence. First, in contrast to other forms of violence, such as gang violence, violent crime, or war, family violence presupposes a relationship between those involved. Violence that occurs among family members presents a paradox in that harm is purposely inflicted by those who are supposed to care for or depend on one another (Jouriles et al. 2001). Family violence is antithetical to the widely and firmly held value of the family as a dependable, safe, and critical positive developmental influence (Am. Psychol. Assoc. 1996). The violence seems inextricably bound up in multifaceted important relationships, and addressing family relationships is essential for understanding and addressing the problem (O’Leary 1993).

Second, family violence is the most prevalent form of violence in this country (Am. Psychol. Assoc. 1996, Tolan & Gorman-Smith 2002). Regardless of age, violence between family members is more common than violence between acquaintances or strangers. Affecting violence rates depends much on understanding how violence within families occurs and can be prevented.

Third, unlike other forms of violence, relationships usually exist between family violence victims and perpetrators prior to, during, and after violent incidents or periods. Also, throughout the life cycle of the family, members can be both perpetrators and victims. Risk assessment and intervention will be enhanced if these complexities, which differentiate family violence from other forms of violence, are considered (Cordova et al. 1993, O’Leary 1993).

A fourth reason to differentiate family violence is that in most societies, violence among family members has a legal meaning that is different from other forms of
violence. Some forms of violence may be viewed by many as helpful or necessary (e.g., physical punishment of children) or typical or normative (e.g., violence between siblings) and therefore not criminal or a social problem. Milder versions of most forms of family violence are common and occur at some point in many marital, child rearing, or elder care relationships (Shafer et al. 1998). Linkages of milder forms of family violence to harmful effects are inconsistent and usually modest (Magdol et al. 1997, Margolin & Gordis 2000). Because many forms of family violence are sanctioned, accepted, or considered only a minor threat, study and interventions may require more complex approaches than would occur for other types of violence. Moreover, there is a need to facilitate an understanding of the substantial harm to children who are abused, couples that injure each other, women who are battered, and elders who are harmed by those caring for them (Shafer et al. 1998). Family violence results in physical injuries and deaths, psychological impact, and detrimental functioning as well as great costs related to health care, criminal justice, and decreased productivity, particularly when it is chronic, causes serious injury, and is accompanied by other harmful and dysfunctional relationship characteristics (Am. Psychol. Assoc. 1996).

These multiple distinguishing features provide ample reason to focus on family violence. Although not wholly independent of other forms of violence, family violence presents unique conceptual, scientific, and policy challenges. A focus on family violence can also serve to relate the emerging pieces of scientific evidence and the important conceptual and policy contentions that are vexing each area. Such integration should advance understanding and effective response to this major health and social problem.

DEFINING FAMILY VIOLENCE

Much controversy exists about how to define family violence and its components. As noted by Jouriles et al. (2001), these are more than semantic disputes; they represent major differences in views about the important features of the problem.

A central controversy is the degree to which the term “family violence” should be synonymous with abuse or substantial mistreatment of family members (Jouriles et al. 2001). Should the definition encompass all acts of violence, or only serious or ongoing patterns of violence? One argument is that family violence should be limited to problems and patterns that clearly are harmful and for which there is consensus that they are not to be tolerated. Restricting the definition in this manner would assure that these serious problems are not underemphasized as the result of the inclusion of minor and more accepted acts, and would prevent a muddying of the meaning of empirical findings and policy discussions. In contrast, it has been argued that focusing only on physical violence that clearly causes serious harm is too narrow a conception because it does not include some behaviors and relationship characteristics of families that do not involve physical violence or its threat, particularly coercive control, neglect, and psychological and verbal abuse, which may occur along with, and be as threatening as, physical violence (Heise
Another argument is that actual physical violence is part of a set of behaviors that define abuse, and to separate them is to neglect important contributors to the abusive impact (Jouriles et al. 2001).

The behaviors included in the definition of family violence can affect the rates, meanings, and implications drawn about family violence. The current prevailing view seems to be to equate family violence to abuse, including nonviolent abuse, because this type of abuse is most relevant in forming policy. However, while the conceptual interest may be on serious violence, it may make up only a small portion of the measure of violence. For example, studies of child abuse often include not only abused children but also children who have been neglected in regard to care for their basic needs (Jouriles et al. 2001). Because the prevalence of neglect is about three times that of physical abuse, many samples in studies of child abuse are predominately made up of children who have been neglected. If results are rendered without consideration of the sample makeup, the implications for family violence may be misunderstood (Cicchetti et al. 2000) and the different as well as overlapping effects of neglect and violence may be overlooked (Edleson 2001).

Another controversial issue is how to incorporate into the definition of family violence the gender inequities and dependency differences related to power within family relationships. A central tenet of much of the initial work bringing attention to domestic violence was that male-to-female violence differed from female-to-male violence, even when the specific acts were the same, because of social differences in gender-accorded power in male-female relationships (Am. Psychol. Assoc. 1996, Heise 1998). Others argue that failure to equate violence perpetrated by females with that perpetrated by males may lead to inappropriate characterization of violence that may harm both genders. This view is predicated on the idea that violent acts should be measured along with the circumstances of their occurrence, and then meaning should be attached to the acts to formulate understanding. To date, empirical tests do not support the contention that all violence of spouses or other couples occurs within the context of such a power differential (Johnson 1995). Similarly, emerging data that include more broadly based samples and both genders as sources suggest that much of the violence between couples is similar in frequency, seriousness, and initiation, and that it may be better explained from a relationship perspective than as the imposition of power of one person over another (Magdol et al. 1997). Other studies provide evidence of patterns of serious, quite dangerous violence primarily by men toward women, which calls into question the extent to which the survey data are sensitive to this type of domestic violence (Hines & Malley-Morrison 2004).

A fourth issue in defining family violence is the extent to which common or socially sanctioned violent behavior in family relationships should be considered problematic (Hines & Malley-Morrison 2004). If some violence is not unusual in dating, marital, and other similar intimate relationships, and if both males and females use it with no clear pattern of initiation or seriousness, how should it be considered when formulating definitions of family violence (Magdol et al. 1997)? Should the definition be limited to violence that is unusual, lasting, or that causes serious harmful effects, so that family violence can be understood as a major health...
threat? A similar issue arises in consideration of corporal punishment, which is a common practice in the United States. Although researchers find inconsistent results regarding negative effects of corporal punishment, parenting experts and mental health professionals are consistently negative regarding its value for disciplining children (Benjet & Kazdin 2003). A third example of this issue is the often overlooked but perhaps most prevalent form of family violence, violence between siblings (Straus & Gelles 1990). Those arguing from a human rights perspective have noted that these forms of violence would carry legal sanction if they occurred between persons in any relationship other than that of a parent and child or siblings (Hines & Malley-Morrison 2004). Others argue that equating disciplinary spanking of a child to abusive violence undercuts the credibility of findings and may distract attention from more serious violence toward children.

Each of these controversies contains disputed elements about the political ramifications of terminology, the value of studying violence apart from presumption of effects or implications, and the extent to which violent acts are seen as part of a broader set of problematic behaviors and relationship characteristics. Also, each arises from an emphasis on one part of the ecological picture of family violence, often within a specific type of family violence. Because work has been segregated within areas, and much of that work has been developed with the intent to validate a given view rather than to resolve key controversies, the field has the formidable challenge of attempting to forge conceptual consensus about how to define components of family violence while simultaneously trying to relate these areas of study. As the literature develops and reviews accumulate, it has become evident that this is a complex problem with multiple influences, and many aspects must be considered when weighing potential solutions (Daro et al. 2004, Margolin & Gordis 2000).

Numerous reviews have attempted to address this issue and to suggest why one aspect is more primary or important than another, why one view should prevail over others, and/or to suggest operational definitions that promote one connotation (see Am. Psychol. Assoc. 1996, Chalk & King 1998, Natl. Res. Counc. 1993 for examples). However, there is also increasing interest in relating these components and views in order to understand the ecology of family violence (Daro et al. 2004, Jouriles et al. 2001). Consensus is forming to consider threatening verbal behavior and intimidation as components of family violence, especially when measuring impact and characterizing patterns of such violence (Chalk & King 1998, Jouriles et al. 2001). Also, there is shared recognition that violence in family relationships may have different meanings because of dependency among family members, and that variation exists in the role that violence may play in family relationships (Johnson 1995). Growing evidence also indicates that there are multiple influences on family violence, ranging from individual, to relationship, to setting or context characteristics.

The building of further consensus would require studies that measure violent acts specifically but separately, while also measuring psychological aggression and coercive and intimidating aspects of relationships along with related components such as felt fear, intention of violent acts, relation to other relationship qualities, and developmental and functional outcomes. Such studies would permit work
that could address competing hypotheses about the nature and heterogeneity of family violence forms as well as permit better understanding of the interrelations among forms of family violence and the relation of violent behavior to abuse. Accurate characterization of these features would clarify which contentions about defining family violence are most supported and how different concepts might be ordered and related—information that is critical for real advancement in risk and intervention research.

THE PREVALENCE OF FAMILY VIOLENCE

The many controversies and disagreements in the conceptualization, definition, and measurement of family violence make it difficult to ascertain the prevalence rates and patterns of its different forms (Loseke et al. 2005). For example, in domestic violence research, opinions differ on whether prevalence—in particular, gender rates—should be determined from community samples that use surveys listing aggressive acts or from clinical samples of victims or perpetrators of domestic violence (Archer 2000, Johnson 1995). Although the survey sampling method may capture the basic differences in rates, it has been argued it may relegate to low importance differences in felt fear, injury, or patterns of threatening and controlling use of violence. Population-based surveys may overlook the serious problem of women being battered and terrorized by men because such patterns are relatively rare in the general population and because such surveys do not tap psychological aspects of the violent act (Johnson 1995). These contentions also extend to the samples of interest. Much of the early work to measure domestic violence relied on reports of female victims, particularly those residing at shelters for abused women (Loseke et al. 2005). Although it served to identify the seriousness of domestic violence, this sampling approach is biased when it is used to generalize about rates or patterns of domestic violence. Johnson (1995) argued that these strategies can be complimentary and may focus on nonoverlapping populations. For example, studies of partner violence that use community samples find high rates of “common couple violence”—the “occasional lapses of control by either partner” (Archer 2000, p. 651). In contrast, studies that use clinical samples or samples selected because of their involvement as victims or perpetrators of violence tend to suggest high rates of battering by men toward women. Both approaches accurately describe patterns among their samples, but do not account well for the focus of the other. Moreover, what the studies describe in juxtaposition are two important aspects of domestic violence: (a) There are relatively high rates of violence among couples, with perpetration rates similar for both genders, and (b) male battering of females is a rare but very serious pattern within those overall rates.

Domestic Violence Prevalence

Without exception, community and representative samples report similar high rates of violent domestic or partner acts for men and women (Straus & Gelles 1990).
For example, in the National Family Violence Survey, the overall rates of assaults by women were 124 per 1000 couples, as compared with 122 per 1000 for assaults by men. The rate of minor assaults by women was 78 per 1000 couples; the rate by men was 72 per 1000. The severe assault rate by women was 46 per 1000 couples; the rate by men was 50 per 1000. None of these differences was statistically significant. Estimates were based on reports by women regarding their own and their partner’s behavior, to account for the possibility that men may underreport their own assaults. Evidence suggests that among younger age groups, rates for perpetration are somewhat higher for women (Archer 2000, Magdol et al. 1997, Straus & Gelles 1990). Moffitt & Caspi (1999) used the findings of three studies with large community-based samples to compares rates of physical aggression toward partners in late adolescence and young adulthood. Perpetration rates ranged from approximately 36% to 50% for women and 25% to 40% for men. The same patterns have been found in studies using observational measures (Capaldi & Gorman-Smith 2003).

In addition to comparable rates of violence perpetration, data from national surveys and longitudinal studies indicate that violence between partners is often bidirectional, meaning that it occurs by women to men as well as by men to women (Capaldi & Clark 1998). Rates of bidirectional aggression among couples with any history of violence range from 59% to 71% (Capaldi & Clark 1998, Henton et al. 1983). In every study that has examined the issue, rates of initiation by women are as high as rates of initiation by men (Straus 2005). That is, women do not use violence only in self-defense. Couples report similar frequency and severity of violence perpetration, victimization, and levels of responsibility for initiating the violence (Henton et al. 1983, Moffitt & Caspi 1999). Contrary to what might be expected, in comparison with bidirectional violent couples, couples with unidirectional violence report fewer acts and forms of violence, and the acts are less likely to lead to more violence and injuries. Individuals participating in bidirectional aggression are also more likely to be involved in physical aggression across relationships (Capaldi & Clark 1998, Moffitt & Caspi 1999).

These survey findings suggest that few gender differences exist in overall perpetration of violence with partners. Existing findings also do not support the view that unidirectional violence is more persistent across relationships or is more serious or injurious. The strength of the sampling and measurement in these studies suggest results are valid. However, although these surveys are capable of addressing overall patterns, they are less able to characterize rarer and perhaps more harmful patterns of violence. A recent meta-analysis (Archer 2002) of sex differences in aggression between male-female partners suggests some directions for extending understanding of gender patterns and for relating overall findings to more specific patterns. In a meta-analysis of 522 articles, Archer (2002) found a higher prevalence of aggression for females than for males among younger couples (14–22 years of age), and a higher prevalence of aggression for males than for females among older couples (23–49 years of age). Injury rates among younger couples were almost equal for males and females, but rates were higher by males in samples of older couples.
Also, although this gender difference emerged, a significant proportion of injuries were sustained by males from female partners. These findings suggest that in addition to characterizing relative rates of violent acts, researchers should attempt to understand how such rates may change as a function of age, duration, status of relationship, and the relation of gender identity to these characteristics (Jouriles et al. 2001). These data do suggest value in increasing the focus on relationship factors to understand risk and develop interventions, even while proper interventions and policies contribute to efforts to address more unidirectional male-to-female violence.

Attempts have rarely been made to use more general samples to identify and adequately characterize the rate of battering of women by men. Because the base rates of this type of violence are likely to be low in community-representative samples, very large samples would be needed. Also, it has been contended that perpetrators and victims of serious battering may be less likely to report such behaviors for a variety of legal, social norm, and safety reasons (Loseke & Kurz 2005). These issues call for methods that build on trust and extended involvement, which are difficult to achieve with large sample studies. Some have argued that arrests for domestic violence can be useful in identifying such patterns, as these arrests are more likely to occur with the type of violence that characterizes battering (Loseke & Kurz 2005). Although such studies find an arrest rate for partner violence that is seven times higher for men than for women, these rates are much lower than rates found in surveys for similar behaviors. This discrepancy raises questions about whether these gender rate differences reflect actual differences in seriousness and frequency of behavior, or whether they result from a differential relation of behavior to reporting violence to police and in police reaction depending on the gender of the victim.

Child Abuse Prevalence

As with the other forms of violence, rates of family violence toward children are difficult to ascertain due to controversies and related variations in definition, measurement, methods, sampling, and reporting across studies and surveys. As noted above, many studies that attempt to measure the problem focus on child abuse, including neglect and other maltreatment of children, rather than on violence specifically. For example, the World Health Organization (2002) offers the following definition: “Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, or neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power” (p. 38). Although this definition is inclusive and perhaps is helpful in serving policy discussions, it leaves unanswered the question of whether a given act would be considered abuse. Moreover, there is no explicit emphasis on differences in the relationship of the child to the perpetrator. Even when more specific criteria are used, definitions vary substantially regarding which
forms of violence are included. For example, sexual violence often is not included in measures of violence toward children, nor is it studied as a separate problem. In part, this is because of the more general issue that any report of abuse toward a child can create a legal liability for the reporter, could lead to a loss of custody or other parental rights, and may otherwise be perceived as dangerous. Moreover, protections for human subjects appropriately emphasize the well-being of the child over the confidentiality of the reporter or the scientific integrity of the study. These features make it difficult to obtain valid and full reporting, even if the definition of abuse were clear and consistently applied.

Because of these reporting hindrances, child abuse prevalence estimates are most often based on official records of legal and social service agencies. These data have the same limitations as other official records about crime: Many influences determine which acts are recorded, which calls into question the usefulness of official data in measuring actual prevalence. Moreover, because child welfare budgets are major components of most state budgets, these rates can have serious political importance. In combination, these features should lead to researchers to use great caution in relying on estimates of child abuse as currently assessed and defined, and that caution should be heightened when the interest is in family violence.

With those cautions, the best available data suggest that child abuse is a prevalent problem. The most recent data from the National Clearinghouse on Child Abuse and Neglect Information (2004) are based on official reports collected from child protective services and professionals in schools, hospitals, and other agencies. These data indicate that approximately 906,000 children were victims of child abuse or neglect in 2003, which is a rate of 12.4 victims per 1000 children in the national population. More than 60% of victims experienced neglect, 19% were physically abused, 10% were sexually abused, and 5% were emotionally abused. In addition, 17% were associated with other types of abuse. Children under age 3 had the highest rates of victimization (16.4 per 1000), and girls were slightly more likely to be victims than were boys. Rates also differed by ethnic group. In 2003, an estimated 1500 children died as the result of abuse or neglect. Approximately 80% of the perpetrators were parents. Other relatives accounted for 6% of the deaths, and unmarried partners of parents accounted for 4% of perpetrators. Of those killed, 79% were younger than 4 years. As expected, community surveys suggest much higher rates of all forms of child abuse and maltreatment. For example, Straus and colleagues (1997) reported prevalence rates for physical abuse of 49 per 1000 children. Survey estimates of the prevalence of sexual abuse also show higher rates than official those reflected by records. However, the rates across surveys vary greatly (e.g., 3% to 36%), depending on the definition used, the way data are recorded, the age group surveyed, the period of exposure considered, and the extent to which the survey relies on recall of distant past events (Finkelhor et al. 1997). Unlike other forms of abuse, females are much more likely to be victims of sexual abuse than are males (approximately four times as likely).
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Elder Abuse Prevalence

Similar to other areas of family violence, definition issues affect the understanding of findings about elder abuse. However, there appears to be more consistency in what definition is used. The definition most widely used and adopted is by the International Network for the Prevention of Elder Abuse, which states: “Elder abuse is a single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person” (World Health Org. 2002, p. 126). Such abuse is usually divided into the following categories: (a) physical abuse, (b) psychological or emotional abuse, (c) financial or material abuse, (d) sexual abuse, and (e) neglect. Because elder abuse has only relatively recently been recognized as a problem, there are few studies of prevalence or incidence. Surveys using this inclusive definition indicate an overall rate of elder abuse between 4% and 6% of the population (Pillemer 2005, World Health Org. 2002). The National Center on Elder Abuse (1998) survey found that approximately 450,000 persons aged 60 and older were abused and/or neglected in the United States during a single year. Official reports that were substantiated were filed for only 16% of the victims. Rates were significantly higher for those over 80 years of age and females; 80% of victims were white.

RISK FACTORS AND EXPLANATORY MODELS

Reviewing the risk factor research for any one type of family violence could easily occupy all of the space allocated for this chapter. In-depth reviews have been published periodically and can be consulted by interested readers (e.g., Chalk & King 1998, Graham-Bermann & Edleson 2001, Margolin & Gordis 2000). Instead, we apply an ecological approach to summarize understanding of three aspects of risk explanation for each type of family violence: individual factors, relationship factors, and contextual/situational factors.

Domestic Violence Risk Factors

INDIVIDUAL CHARACTERISTICS  Research to identify risk factors for violence has largely focused on perpetration, particularly on male perpetrators. Across studies, the strongest predictors of domestic violence perpetration are a history of prior aggression and a history of violence victimization (Capaldi & Gorman-Smith 2003, Magdol et al. 1997). Low impulse control and low self-esteem have also been related to domestic violence perpetration (Kantor & Jasinski 1998). Psychopathology other than aggression also predicts domestic violence perpetration, with one study showing a rate 13 times greater among those with a diagnosable disorder than among those without (Moffitt & Caspi 1999). The forms of mental illness varied and included anxiety disorders, depression, antisocial personality disorder, and alcohol and drug dependence. Individuals who grew up in families characterized by
unskilled parenting and poor family functioning also have higher rates of domestic violence (Capaldi & Clark 1998, Widom 2000).

RELATIONSHIP FACTORS Because of the emphasis on men as perpetrators and women as victims, and related sensitivity about “blaming the victim,” there has been limited attention to relationships factors in explaining domestic violence. Studies of such factors indicate that qualities of the relationship provide independent explanation even when individual characteristics are considered (Capaldi & Clark 1998). Across studies, the levels of conflict and relationship discord are most related (Chalk & King 1998). Also, while expected to relate inversely and strongly, there are negative but modest relations found for violence and positive qualities such as communication quality, felt support, and relationship satisfaction (Cordova et al. 1993, Margolin et al. 1988). Level of violence does not always correlate with levels of support and intimacy.

Evidence also indicates that partner violence, more so than other forms of violence, is related to low relationship skills or difficulty in maintaining quality relationships (Capaldi & Gorman-Smith 2003). Similarly, men who were violent in their marriage reported more felt stress during marital interactions than did nonviolent men (Margolin et al. 1988). Some have interpreted these findings as supporting the role of assortative partnering in the extent to which relationship factors affect risk for domestic violence. That is, domestic violence is at least partly dependent on constraints and similar shared histories that lead to partnering with individuals with greater aggressive tendencies (Moffitt & Caspi 1999). For example, a history of aggression and antisocial behavior in each individual in the couple relationship is likely to increase the probability of domestic violence. Conversely, partnering with a person without this history will decrease the probability of domestic violence. The question of whether the decrease is due to more relationship skills, less acceptance of violence, or less use of violence in the relationship remains to be answered. Assortative partnering by antisocial behavior has been demonstrated with several samples (Krueger et al. 1998).

These findings suggest that relationship factors can be an important component in explaining and addressing domestic violence, particularly in light of findings that suggest much bidirectional violence among couples. The data suggest that helpful findings might result from concurrent consideration of views about violence in relationships, multiple dimensions of the relationship qualities, and partner selection factors, in addition to increased assessment of these qualities.

CONTEXTUAL/SITUATIONAL FACTORS Although partner violence exists across all socioeconomic levels, those living in poverty are disproportionately affected (Benson et al. 2004). However, beyond this basic correlation, there has been some valuable study of why this may occur. For example, women living in disadvantaged neighborhoods were more than twice as likely to be the victims of domestic violence as were women residing elsewhere; within these neighborhoods, women struggling with money in their own relationships had the greatest risk (Benson
et al. 2004). Others have suggested that poverty may contribute to other processes, such as greater stress, hopelessness, or financial constraints, that mitigate against leaving the relationship (Heise 1998).

Contextual factors such as stress level have been related to domestic violence as well (O’Leary 1993). In addition, situational factors can play a role. Alcohol use by either partner is related to increased levels of domestic violence, with likelihood elevated further when both partners use alcohol (Flanzer 1993). In this case, alcohol use may act as a situational factor, increasing the likelihood of violence by reducing inhibitions and impairing an individual’s ability to interpret cues.

Child Abuse Risk Factors

An ecological model emphasizing multiple influences has largely guided research on risk factors for child abuse and maltreatment (Cicchetti et al. 2000). In comparison with studies that emphasize a single aspect of this ecology, this conceptual framework has produced continuity in understanding the relation among studies and has resulted in greater theoretical progress.

INDIVIDUAL CHARACTERISTICS Few studies have focused on child characteristics that might differentiate risk for abuse. Risk is greatest for males, younger children, and those with medical complications and disabilities (Dubowitz & Black 2001). Perpetration is related to several individual characteristics. Contrary to commonly held beliefs, physical abuse is not related to marital status or parental education (Chaffin et al. 1996), although a relation does exist for sexual abuse probability (Finkelhor et al. 1997). Age of parent has inconsistently related to physical abuse (Chaffin et al. 1996, Straus 2005). Abusers are more likely to have low self-esteem, low empathy toward the child, unrealistic expectations about child capabilities, poor impulse control, mental health problems, and a history of antisocial behavior (Natl. Res. Counc. 1993, World Health Org. 2002).

RELATIONSHIP FACTORS Several of the individual characteristics noted above relate to parenting orientation and expectations. Thus, many of these have been studied within a relationship focus, with the assumption being that these individual differences translate to poorer parenting and other relationship factors. Studies of the relation between family functioning and parenting practices and abuse provide relatively strong evidence that abusive families tend to have poorer functioning and parent-child relationship quality than do nonabusive families (Chalk & King 1998). In addition, growing evidence indicates that domestic violence increases the likelihood of violence toward children, and even without such violence, has deleterious effects on children (Cicchetti et al. 2000, Jouriles et al. 2001). Thus, these results suggest that relationship factors are important risk contributors for child abuse, regardless of whether the factors pertain to unskilled parenting, co-occurrence of marital discord and domestic violence, or dysfunctional child-parent interactions.
CONTEXTUAL/SITUATIONAL FACTORS Numerous studies link poverty and associated neighborhood characteristics to increased risk for child abuse (see Chalk & King 1998 for summary). However, as with domestic violence, this increase may merely indicate some more informative relations. For example, some studies found slightly higher rates of severe physical abuse among lower socioeconomic parents but did not detect socioeconomic differences for minor physical abuse (Wolfner & Gelles 1993). Also, most studies have interpreted poverty effects as reflecting stress and resource issues, similar to those found to relate to domestic violence. A recent multilevel analysis of data found, in models testing only individual and neighborhood factors, that crime and concentrated poverty were positively related to physical abuse of children, as was expected from previous research. However, when family factors were added and interactions with individual and neighborhood factors were considered, neither crime level nor concentrated poverty independently predicted abuse (Molnar et al. 2003). In communities with a large concentration of immigrants and with larger social networks among residents, abuse was lower. This suggests that the poverty relation to abuse may reflect limited resources and support (Tolan et al. 2003).

Contextual and situational factors have been considered important in explaining abuse propensity. Stress on the family, lack of adequate social supports, and residing in neighborhoods with high crime rates and limited resources have all been associated with abuse (Chalk & King 1998, Williamson et al. 1991). For example, Murphy et al. (1985) found that a family stress checklist administered before the birth of children strongly predicted whether the children would be abused, neglected, or fail to thrive 2 to 2.5 years later. Research on social support suggests a complex role in affecting risk for abuse. In some cases, the results suggest adequate social support protects against risk, whereas in other cases, the absence of needed support elevates risk (Williamson et al. 1991). In addition, the impact may depend on the type of support available. For example, Coohey & Braun (1997) found that abusing mothers evidence less emotional support but no difference in instrumental or tangible support compared with nonabusing mothers. However, Corse et al. (1990) found that tangible support was important in differentiating risk. They also reported that the support network size was smaller for abusing mothers.

ELDER ABUSE The classes of risk factors involved in elder abuse appear to be similar to those seen in other forms of family violence, although research is much less extensive. Empirically linked individual risk factors for victimization include advanced age, illness or disability, and other types of vulnerability (Natl. Cent. Elder Abuse 1998). Individual factors linked for elder abuse perpetration are history of aggression and violence and current substance abuse (Pillemer 2005). The relationship predicting elder abuse is not the dependence of the elder on the caregiver, but rather the dependence of the caregiver on the elder financially; mental illness or substance use problems also contribute to elder abuse (Natl. Cent. Elder Abuse 1998). Social setting and contextual factors are also important predictors, but in a more complex manner than was initially presumed. Social isolation of the elder
and caregiver is associated with increased risk for elder abuse, but residing with one another also relates to risk in comparison with residing separately (Natl. Cent. Elder Abuse 1998, World Health Org. 2002). It appears that although isolation can increase risk, residing with a caregiver alone also increases risk.

Integrating Risk Explanation Within and Across Forms of Family Violence

SIMILARITY IN RISK FACTORS  Risk factors for the three major forms of violence tend to overlap substantially, and there is growing interest in how these risk factors might suggest family-focused approaches to reduce multiple forms of family violence. All three forms have substantial empirical linkages to relationship and community/situational factors as well as to individual characteristics, which suggests the value of ecological models that consider multiple influences and the interrelation of these influences in explaining risk (Tolan & Gorman-Smith 2002). However, form-specific factors emerge not only because there may be different contributors to each form of violence, but also because the relationship between perpetrator and victim differs. Thus, the relationship risk factors of natural interest for understanding domestic violence may be quite different from those of interest for child abuse. For example, in considering child abuse, at least three people are of interest: the perpetrator, the nonoffending or other parent, and the child. Careful study of multiple ecological factors, with adequate consideration of relationship factors, is important to gain a more complete understanding of the various forms that arise and how they interrelate.

RELATION OF OCCURRENCE OF FORMS OF FAMILY VIOLENCE  There is increasing recognition that the presence of one form of family violence is a risk factor for the presence of another form (Graham-Bermann & Edleson 2001). Across the life span, involvement in a given form can be a risk factor for or an outcome of the other forms. An examination of more than 30 studies of the link shows a 41% median co-occurrence of child maltreatment and domestic violence in families studied (Appel & Holden 1998). As noted earlier, childhood abuse is one of the best predictors of domestic violence (Widom 2000). Children who have witnessed violence between their parents are at increased risk for abuse themselves and for later domestic violence (Margolin & Gordis 2000). Moreover, elder abuse is related to a prior history of aggression within that relationship.

Intergenerational continuity or transmission explanations have guided much of this work, with social learning explanations of aggression as the most commonly theorized mechanism, emphasizing the ways in which exposure to domestic violence might lead to later partner violence, for example. Violence between parents may be observed and directly modeled in later relationships with partners (Widom 2000). This violence between parents legitimizes later violence against intimate partners (Heise 1998). Second, physical abuse toward a child may teach that child that aggression is a tactic to use in family relationships. Parents with a history of
abuse and neglect are more likely to abuse their own children (Finkelhor et al. 1997, Widom 2000). Although there is considerable support for a role of these processes, recent efforts have started to test mediators of this transmission, such as partner choice, relationship skills, and overall aggression level (Capaldi & Gorman-Smith 2003).

UNDERSTANDING VARIATIONS IN RISK PATTERNS While it is important to link the risk factors shared by forms of family violence and to identify how continuity of occurrence may be affected, it is also important to recognize the discontinuity of family violence. In addition, among the overall prevalence rates, several patterns of involvement probably exist (Natl. Res. Counc. 1993, Tolan & Gorman-Smith 2002). Most families with one or more of the risk factors for family violence will not exhibit family violence, and most families that have experienced one form of family violence do not exhibit other forms. Thus, it is important that ensuing studies recognize the ways in which incidents of violence and discontinuity of involvement occur and might be important in understanding risk models.

FAMILY VIOLENCE INTERVENTIONS

Many approaches to intervention have been applied for family violence (Chalk & King 1998, Natl. Res. Counc. 1993). These include legal policies and sanctions applied to the perpetrator; protective efforts, advocacy, and case management for victims; educational efforts to increase awareness and identification; group and individual programs to stop perpetration and treat effects on victims; and family interventions to address family relationship and management issues that might mitigate violence. These interventions range from universal prevention programs meant to lessen social acceptance and overall prevalence of family violence to intensive programs for treating and managing chronic offenders (Chalk & King 1998). Most programs seem to aim to prevent further exhibition of the abusive behavior when applied to perpetrators and to prevent further victimization or stem the harmful psychological and functional impacts of prior violence among victims (Tolan & Gorman-Smith 2002).

As occurs for understanding patterns and risk influences, interventions usually are focused on a specific form of family violence and few consider shared risk factors or overlap among the forms of family violence. Almost none consider that perpetrators are also often victims of some form of family violence. Also, interventions usually are developed from a particular perspective about the reasons for that form of violence. Many programs are ideologically driven or policy determined, and they are not grounded in risk-factor research (Austin & Dankworth 1999). Few efforts have been adequately evaluated. Most have not had any evaluation, and of those that have been evaluated, many did not have an adequate design to permit valid determination of efficacy. When adequate outcome designs were applied, methodological issues such as failure to achieve randomization, inadequate power,
inappropriate statistical models, and serious attrition rates often occurred. When these challenges were managed, the evaluation often limited the assessment of effects to variables associated with family violence, but did not actually test effect on family violence. Thus, despite extensive intervention efforts at multiple levels, representing many perspectives, there is scarce literature with adequate empirical qualities available to guide intervention efforts (Chalk & King, 1998).

This state of affairs means that the evaluation efforts with adequate design features clearly are not representative of the broad set of approaches being applied in practice. However, the use of basic design criteria does provide some direction about promising efforts. We review here studies with adequate designs (strong quasi-experimental or experimental designs with random assignment) and complete evaluations. We also concentrate on interventions that measured outcomes directly related to violence itself wherever possible; we relied on correlates or theorized mediators when such data were not available. Because individual studies tend to focus on single forms of family violence, we summarize this knowledge within each area.

Interventions for Domestic Violence

SHELTERS FOR VICTIMS Separation of perpetrator and victim through arrest or the use of shelters is often the first intervention for marital or partner violence. It is also among the most common interventions, comprising approximately two-thirds of the programs for this problem (Plichta 1995). While the specific approach and circumstances of shelter programs vary, most are intended to help female victims of male battering to leave the home and relationship and to develop skills, resources, and support for safe, independent living. A major challenge for evaluating such programs is the limited acceptance for experimental manipulation involving those whose safety is under imminent threat and who are in dire need of shelter. We could locate only a single study with even minimal methodology quality. The study suggests that for a portion of those coming to shelters, incidents of violence decreased after a shelter visit (Berk et al. 1986). Also, some studies suggest that provision of advocacy services as a part of separation or after exit from shelters may relate to a more effective use of resources and social support, but there is not evidence that this also reduces subsequent violence (Sullivan & Davidson 1991, Tan et al. 1995).

MANDATORY PROSECUTION OF PERPETRATORS Based on the recognition that domestic violence is often repetitive and that domestic violence is often regarded as not serious by police, advocates argue that predictable and substantial legal consequences for domestic violence should make victims safer and deter or remove perpetrators. This led to several changes in law, including mandatory reporting by health professionals, wider use of protective orders, and required prosecution of offenders. A substantial set of studies have evaluated the effects of compulsory arrest in contrast to arrest at officer discretion (Sherman 1992, Sherman & Berk
1984) and to other interventions such as mediation or separation (Ford & Regoli 1993). Others have tested the impact of arrest when coupled with other sanctions compared with arrest alone (Steinman 1990) and arrest earlier in the cycle of violence (Ford & Regoli 1993, Hirschel & Hutchinson 1992). The results of these studies have suggested some modest but inconsistent positive effects. In part, these studies face some of the same ethical issues regarding random assignment as studies of shelters. Although place-based random assignment of policies has been used to overcome this limitation, many of those studies have site variations in effects and other methodological limitations, including limited implementation and inadequate power to detect effects (Tolan & Gorman-Smith 2002). Also, practical issues such as the fact that perpetrators in domestic violence incidents often flee by the time police arrive make it unclear whether these studies validly estimate impact.

OTHER LEGAL SANCTION APPROACHES Popular approaches such as training court personnel and specialized courts have not been evaluated adequately to date. However, when arrest is under a warrant and victims are given the opportunity to press charges, they are more likely to be safe from subsequent violence than when arrest is done without a warrant or a misdemeanor citation is issued to the perpetrator (Hirschel & Hutchinson 1992). Evaluations have found no evidence that alternatives to traditional sentencing are related to greater safety for victims (Ford & Regoli 1993).

TREATMENT OF PERPETRATORS Several randomized and quasi-experimental studies have evaluated psychosocial treatment of perpetrators, primarily the use of cognitive behavioral methods. The evidence from these studies is mixed, with stronger studies finding no effects. For example, Dunford (2000) conducted a four-group randomized controlled trial with more than 800 Navy personnel. Men who had assaulted their wives were randomly assigned to one of four conditions: (a) single cognitive behavioral therapy, (b) conjoint cognitive behavioral therapy with their wives, (c) rigorous monitoring consisting of individual counseling and reporting of subsequent incidents to commanding officers, and (d) a control condition in which wives received assistance in stabilization and safety planning. Results showed no evidence of significant effects for the cognitive approach or any other treatment condition based on the reports of the men or their wives. As these are among the most popular approaches, these findings are troublesome. In contrast, there is evidence that alcohol abuse treatment may help reduce domestic violence (O’Farrell et al. 2004, Stuart et al. 2003).

COUPLES OR MARITAL COUNSELING/ThERAPY Another frequently promoted approach for addressing domestic violence, particularly for less serious or more infrequent forms of domestic violence, is marital therapy that emphasizes communication, relationship skills, and conflict resolution. In another program, no significant difference was observed in a comparison of marital therapy and separate
groups for the male perpetrator and the wife victim, although both methods resulted
in significant drops in violence levels (O’Leary et al. 1994). The best evidence is
for this approach is from a preventive effort. The Prevention and Relationship
Enhancement Program (Markman et al. 1993) is a five-session program designed to
modify communication, problem-solving skills, and coping with negative affect.
Matched pairs of couples were randomly assigned to intervention; approximately
half of the couples who were assigned to intervention declined to participate.
However, decliners were retained for evaluation assessments that extended to five
years post intervention. At that point, those who received the intervention had
significantly lower levels of self-reported marital violence than did controls and,
although not significantly different, also had lower levels of violence than did the
couples who had declined.

**DATING VIOLENCE AND DOMESTIC VIOLENCE PREVENTION**

Dating violence, while not family violence, is often a precursor to family violence. Interventions to reduce
dating violence are seen as preventive for later domestic violence. Randomized
trials of two different programs found preventive effects on subsequent reports of
dating violence (Foshee et al. 2004, Wolfe et al. 2003). The Youth Relationship
Project (Wolfe et al. 2003), a group-based health promotion approach to dating
violence, provided 18 sessions of education on abuse and power dynamics, skills
training, and social action. The Safe Dates Program (Foshee et al. 2004) consisted
of a 10-session classroom-based curriculum taught by health professionals, com-
bined with a theater production by students in the program. Results from these trials
suggest that such preventive efforts may be among the most valuable approaches
to reducing domestic violence rates overall.

**Child Abuse Interventions**

**COURT-MANDATED TREATMENT FOR OFFENDERS**

Court-mandated treatment is one of the most common approaches in cases of child abuse. Only two studies with
adequate designs have addressed this approach, and these did not focus on abuse
as an outcome. They did find positive effects on parenting skills and amenability

**PARENTING PRACTICES AND FAMILY INTERVENTIONS**

One of the most studied ar-
eas in child abuse is interventions to aid parenting practices and family functioning
(Brunk et al. 1987). These include programs that educate, engage families in therapeu-
tic activity, including modeling and practice to improve parenting, and attempt
to engage family support services. Substantial evidence indicates that parenting
practices and family functioning interventions can have positive effects on parental
discipline methods (including use of nonviolent approaches), level of familial con-
lict, and management of stress affecting the family (see Dishion & McMahon
1998 for a review). Because these are key potential mediators of child abuse,
such an approach seems promising. However, few studies tested effects of such
interventions on parental abuse, and for those that did, results have not been strong (Kolko 1996, Lutzker et al. 1984).

**FAMILY PRESERVATION** Another favored approach is family preservation intervention, which involves intensive social casework, family therapy, parent training, and other support services (such as day care and homemaker or nutrition services). The intent of family preservation is to provide comprehensive, wrap-around services to help high-risk families avoid the need for removal of the child for protection (Barton 1994). The preponderance of strong tests shows that these interventions reduce the length and frequency of out-of-home placements and improve parenting and family functioning. However, when subsequent rates of abuse were measured, effects were not found, except in one study that tailored services to each family’s needs (Jones 1985).

**HOME VISITATION FOR AT-RISK MOTHERS** The most well-evaluated approach for reducing child abuse and neglect by improving parenting is home visitation through the Nurse-Family Partnership for low-income women (Olds et al. 1997). Pre- and postnatal visits to high-risk first-time mothers by nurses or trained paraprofessionals, for up to two years after birth, are intended to improve pregnancy outcomes, child health and development, the mother’s parenting skills and well-being, and the family’s economic stability. Trials have consistently shown that Nurse-Family Partnerships result in significantly fewer child injuries, behavioral problems, emergency room visits, and reports of abuse. The effects may depend on the profession of the home visitor: Larger effect sizes on child abuse were obtained with nurse visitors than with paraprofessionals (Olds et al. 2004).

**COGNITIVE SERVICES TO ABUSERS** Kolko (1996) compared cognitive behavioral training for the offending parent and the child with family therapy. In this well-controlled study, with one-year follow-up, both groups showed significant decreases in child abuse, but those in cognitive behavioral training evidenced lower levels of parental anger and a decreased use of physical discipline in comparison with those in family therapy. In a meta-analysis, Skowron & Reinemann (2005) summarized 21 studies of a variety of psychological interventions for child abuse. Methodological quality was high for most of the studies. Half of these studies involved random assignment, and one fourth provided longer-term follow-up data. Studies were categorized as behavioral, cognitive/behavioral, or other. Positive effects were found for all three groups, but effects were primarily found for parents’ self-report about their behavior. Effects were not as great when independent assessments were used. Stronger and more consistent effects were found for non-behavioral, as compared with behavioral and cognitive/behavioral, interventions. The few studies with longer-term follow-up data showed evidence of positive effects up to several years after the interventions.
CRITICAL ASPECTS OF EFFECTIVE CHILD ABUSE INTERVENTIONS  In addition to these evaluations of specific programs, a recent meta-analysis provides some understanding of what might be critical aspects of effective child abuse interventions. In a meta-analysis, MacLeod & Nelson (2000) examined 47 studies testing interventions to affect child abuse and classified studies as either proactive or reactive. Studies of sexual abuse prevention were excluded. The proactive interventions included home visitation, multicomponent treatment (educational + community development + social services), social support interventions, and media campaigns. The reactive interventions included family preservation, multicomponent treatment (e.g., home visitation + parent training + homemaker services), social support/mutual aid, and parent training. Among the proactive programs, home visitation and the multicomponent programs had positive effects, but there was substantial heterogeneity in effects among these. Among the reactive interventions, the multicomponent and parent-training interventions had positive effects, and these findings were consistent across studies.

Elder Abuse Interventions

It is not surprising that there are fewer studies of interventions for elder abuse than for the other forms of family violence. Few studies have actually measured subsequent abuse as an outcome. The preponderance of studies have focused on reducing stress and providing respite to the caregiver; others have attempted to reduce depression, economic hardship, and anger (Beigel & Schulz 1999, Cook et al. 1999, Mittelman et al. 1995). For example, in a test of an intervention providing education and anger management training for persons who abused elders, Reay & Browne (2002) found significant reductions in caregiver strain, depression, anxiety, and negative interpersonal conflict tactics for abusers. Using a different approach, Filinson (1993) found positive effects for advocacy services on elders’ goal-setting skills and use of resources, but did not report effects on subsequent incidents of abuse. These recent studies have stronger designs and suggest more positive effects than earlier efforts (Knight et al. 1993). As noted in a review by Bourgoise et al. (1996), although more comprehensive, multicomponent interventions seem to have more effects, many interventions are remarkably brief. These findings suggest that elder abuse interventions that provide respite, support, and address dependency of the caregiver on the elder are most promising.

Summary of Intervention Findings

Across the forms of family violence, there are several examples of efficacious interventions. Preventive efforts and those focused on relationship skills and family management are supported by more evidence than are other approaches. However, there is also evidence that work to manage impulse, anger, and other behavior related to abuse has promise. Also, the effective interventions are similar across forms of family violence. Even more striking is the extent to which favored and widely used interventions either have not been evaluated or, if evaluated, show no
efficacy. Further, there has been little examination of how interventions work, so research is minimally informative about major contentions concerning intervention foci.

ADVANCING UNDERSTANDING OF AND IMPACT ON FAMILY VIOLENCE

Family violence research has provided important information that has only started to shed light on the patterns, prevalence, risk, and consequences of this major threat to development and well-being. This area of study has emerged out of advocacy as much as from scientific interest. The result is that the literature and “evidence” have advanced along relatively segregated lines of inquiry within particular perspectives. Because of the serious threats to safety of some children, women, and elders, there has been heightened tension about how family violence is conceptualized and studied and how research is interpreted. Although earlier work provided the important increase in attention to these problems and recognition of the extent of public health threat and costs attributable to these forms of violence, there has been more difficulty in linking such work to more recent, methodologically stronger, and more complex studies and results.

The emerging patterns across studies of prevalence, risk factors, and interventions suggest that it is not likely that family violence will be adequately explained or addressed by continuous focus on one form (e.g., domestic violence, child abuse, or elder abuse) or by the rejection of research challenging strongly held beliefs. Reconciling disparities and relating various forms seems likely to advance scientific knowledge and to direct practice and policy more reliably. Recognition seems to be emerging that while family violence is too prevalent and imposes serious harm on many, there is substantial heterogeneity in patterns of family violence, of how it occurs, and what interventions are most promising. Within these trends, there is increasing clarity that there is considerable overlap as to who is involved in various forms of family violence, and participation in each type of family violence relates to increased risk for participation in the other types. There is also growing recognition that while individuals need to be held responsible for harmful behavior. Much of family violence has multiple determinants: Beyond the individual, characteristics of the relationship and social context have consistently been found to contribute to risk, thus explaining why interventions that take these factors into account have more consistent positive effects. While there are great challenges to studying family violence, in any form, let alone in relating forms, the field is in need of integrative study that considers the ecology of contributors to family violence.

As others have argued, this means emphasizing a multifactor, multilevel understanding of violence that can (a) help explain the high prevalence as well as the rare but distinctly endangering patterns, (b) examine population patterns but also account for individual differences among any population, and (c) suggest both
predisposing and precipitating factors (Cicchetti et al. 2000, Daro et al. 2004). These ecological models integrate and relate multiple influences to explain variations in rate and reasons for violence across populations and settings. They also have a goal of identifying meaningful patterns that have direct relevance to interventions and policy. It is likely then that sets of interventions will be identified that are effective for different populations and different aspects of family violence. Perhaps most fundamentally, such an ecological perspective can advance the research and related policy discussion beyond disputes about which part of the problem or part of the explanation is most important to a discussion that relates what seem like diverging findings. Although such a model may be challenging to articulate, refine, and test, it seems preferable to continuation of contentious agendas that constrain what can be learned, what might be considered, and most importantly, the pace of development and application of effective interventions, programs, and policies to lessen family violence (Daro et al. 2004).

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