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## METHODS AND PERSPECTIVES IN VIOLENCE AND MALTREATMENT IN INTIMATE RELATIONSHIPS

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## LEARNING OBJECTIVES

1. Describe the various explanations for violence and maltreatment in intimate relationships (VMIR) that have been proposed, including structural characteristics of intimate relationships, cultural acceptance of violence, the low costs of VMIR, and the intergenerational transmission of VMIR.
2. Interpret the funnel metaphor as it is used in measuring VMIR.
3. Compare and contrast the important data sets and self-report survey instruments used in VMIR research.
4. Identify the various methodological issues relevant in conducting research on VMIR, including those related to defining VMIR, establishing cause-and-effect relationships, and research designs.

The invisibility and secrecy of violence and maltreatment in intimate relationships (VMIR), as well as the ongoing debates about definitions and measurement of VMIR, create empirical and methodological hurdles that are difficult to overcome. Our task in this chapter is to try to simplify these complicated issues. We begin with a discussion of several broad explanatory perspectives that provide a context for our understanding. We then turn to measurement issues, and the important data sets and self-report instruments that are used to study VMIR. We conclude with a discussion of several important methodological issues relevant to the study of VMIR.

## AN EXPLANATORY CONTEXT

We begin with a discussion of several factors that help explain why VMIR is so common. Our intent in this section is *not* to introduce specific theories. Instead, we hope to provide a contextual beginning point for understanding why VMIR occurs. Although we often discuss this topic under the stated assumption that VMIR is “inexplicable,” the reality is that it is in many ways quite understandable and predictable. Why is this so? Why might we reasonably *expect* VMIR to be a common occurrence under specific conditions?

### Structural Characteristics of Intimate Relationships

All families and intimate relationships have tensions, and it is reasonable to expect that these tensions will not always be resolved in the most appropriate ways. Even the best parents and the most loving couples sometimes lose their temper, say intentionally hurtful

things to one another, or raise their voices when arguing. Sometimes, they even lash out physically.

Part of the reason why these behaviors occur is structural. Intimates spend a lot of time together, which increases the opportunity for VMIR. Intimate interactions are often emotional, and therefore potentially volatile. Power differentials often exist among intimates: Children are subordinate to parents, elderly parents may be subordinate to adult children, and wives may be subordinate to husbands. No doubt patriarchy and the historical devaluation of children, as discussed in Chapter 1, also contribute to dynamics within intimate relationships. Further complicating matters is the fact that victims are often physically weaker and thus more vulnerable. Intimates also cannot always choose with whom they will or will not interact. Whereas many interpersonal conflicts can be resolved simply through the dissolution of relationships, family relationships are protected by law and are not so easily severed. Spouses can easily feel trapped by the cultural, legal, and economic constraints of marriage. Children are dependent both financially and emotionally on their parents. The elderly may be similarly dependent on their adult children or other caregivers. Finally, the privacy and autonomy traditionally granted to families in our society make violence relatively easy to hide (Brinkerhoff & Lupri, 1988).

Levesque (2001) asserts that the problem begins with an idealized notion of the family, and intimate relationships more broadly, that offers rights and protections that are sometimes undeserved. The apparent reasonableness of this notion serves to “justify what otherwise could be construed as violent, abusive, and worthy of intervention” (p. 5). According to Levesque, this idealized image of “the family” includes several beliefs: (a) that parental rights supersede children’s rights and that parents can and should have control over the development of their children; (b) that family members will act in the best interests of children and elderly parents who are not capable of caring for themselves; (c) that families rooted in traditional cultures are “strong families,” even though some of their cultural customs justify intimate maltreatment; and (d) that families have the right to privacy and autonomy, even though this right often results in harm to vulnerable members (this assumed right may also indirectly result in society’s reluctance to provide social services or criminal justice assistance).

### **A Culture of Acceptance**

Too often, we would argue, interactions that would not be tolerated outside intimate relationships are seen as inevitable and unavoidable within intimate relationships. Intimate partners sometimes hit and push. Siblings fight. Parents sometimes get frustrated and spank harder than they should. Men push sexual boundaries beyond agreed-upon limits. “It just happens,” observers might respond.

The “it just happens” argument is troubling, in large part because we generally do not accept this argument outside of intimate relationships. We might see hitting a child,

for example, as an “inevitable part of childhood or family life” that is “educational” and “builds character” (Finkelhor, 2008, p. 9). Even intimate partner hitting is, to a limited degree, tolerated (Simon et al., 2001).

This issue will be discussed in more detail in Chapter 11. For now, our point is simply to provide a cultural context for this implied acceptance. The more we as a society accept physical, emotional, and sexual aggression as “appropriate” or “inevitable,” the more likely it is that abuses will occur. Physical, emotional, and sexual aggressions generally deemed “legitimate” in American society (e.g., a slap on the hand of a misbehaving child) and aggression deemed “illegitimate” (e.g., a fist to the face of a misbehaving child) exist on a hitting continuum. It stands to reason that the more society accepts minor forms of VMIR as legitimate and inevitable, the more abusive VMIR will occur.

### Low Costs of VMIR

Sociologists define **social control** as the collective efforts of a society to ensure conformity and prevent deviance. Theories of social control begin with the assumption that humans are rational beings who maximize benefits and minimize costs. We would argue that part of the reason why VMIR exists is because social costs for these behaviors are often low.

Famed sociologist Peter Berger envisions social control as a series of concentric circles, with the individual sitting at the center. The outer rings represent the political and legal system that coerces conformity: what we will call *formal* mechanisms of social control. This is the system that, in the words of Berger (1963, pp. 73–74), “will tax one, draft one into the military, and make one obey its innumerable rules and regulations, if need be put one in prison, and in the last resort will kill one.” The formal mechanisms of control relevant to topics in this book include the criminal justice system, Child Protective Services, and Adult Protective Services, each of which has the power to impose costs on intimate offenders. The outer circles describe what criminologists refer to as **deterrence theory**. For deterrence theorists, *costs* are defined as the perceived probability of getting caught by formal agents of social control (*certainty* of punishment) and the perceived seriousness of the punishment these agents will impose (*severity* of punishment).

The inner circles represent *informal* mechanisms, where we imagine the approval (rewards) or disapproval (costs) of others (e.g., frowns, judgments, ridicule, gossip). Where these social bonds are weak, and where the inner circle does not condemn the behavior, deviance is more common.

This system of formal and informal social control ensures that most of us, most of the time, play by the rules. But when we perceive the potential costs to be low, as they often are with VMIR, we are more likely to deviate. Gelles and Straus (1988) provide an interesting illustration of the relatively low costs of VMIR, arguing that one of the reasons why family members hit other family members is “because they can.” That is, there are insufficient controls, or “costs,” to keep them from hitting one another when they are

inclined to do so. To illustrate, they tell the story of David, who is at the hospital with his son Peter. Peter had been playing with the family's new television set and had knocked it over. In anger, David "lost it" and hit Peter, who fell onto the coffee table and was injured.

If we apply what we know about social control, we might reasonably conclude that people are far less likely to "lose control" when the costs are high—when they cannot afford to "lose control." What would happen, for example, if Peter was not David's son? What if Peter is a neighborhood boy who is visiting David's son when he knocks over the TV? How is David likely to respond? "Does David slap, spank, or even beat the wayward 3-year-old? Absurd" (Gelles & Straus, 1988, p. 21).

Family members hit one another "because they can" (Gelles & Straus, 1988). In many ways it is that simple. There are insufficient costs—both formal (outer circle) and informal (inner circle)—to keep them from hitting one another.

Note that the Gelles and Straus book cited earlier was written in 1988, long before VMIR was fully discovered. As societal concern about VMIR has risen, so too have the costs. And as costs have risen, rates of VMIR have declined. Researchers have been tracking victimization rates since the early 1990s, and these data suggest that, almost without exception, rates of intimate partner violence, adult sexual assault, child sexual abuse, and child physical abuse are all down (Finkelhor, Saito, & Jones, 2016; Finkelhor, Shattuck, Turner, & Hamby, 2014a; Langton, Krebs, Berzofsky, & Smiley-McDonald, 2013; Truman & Morgan, 2014). There is every reason to believe, furthermore, that as costs continue to rise, VMIR will continue to decline. (Declining rates of VMIR are discussed in more detail in Chapter 11.)

### Intergenerational Transmission: VMIR as Learned Behavior

How are parents *supposed* to discipline children? How are married couples *supposed* to interact? How are men and women *supposed* to navigate sexual interactions? Each of us is likely to answer these questions very differently, in part because we are each socialized to answer these questions differently. Human behavior is not instinctual; human behavior is learned.

Most social science students will remember the research of psychologist Albert Bandura (1978), who placed an adult in a room with a "bobo" doll (a large clown blow-up doll) while a child watched the interaction from another room. Some of the adults acted both verbally and physically aggressively (i.e., yelling, hitting, and punching the doll), while others acted nonaggressively. When the children were placed in the room with the doll, the reaction was predictable; those who observed the adults acting aggressively acted aggressively themselves, and those who observed nonaggression acted nonaggressively. The implications for VMIR are obvious. Some children grow up in families where violence is common: Parents hit children, children hit each other, and parents hit each other. Other children grow up in families where nobody hits. There is an inherent logic

in the observation that children who experience or observe VMIR are more likely to act aggressively as adults (Widom & Wilson, 2015).

While learning theory is logical, and is generally supported empirically, it is important to note that the research on **intergenerational transmission** is not as strong as many imagine (see Widom & Wilson, 2015, for a review). For example, in an important article published in the prestigious journal *Science*, Widom, Czaja, and DuMont (2015) found support for the intergenerational transmission of sexual abuse and neglect but not physical abuse—a finding that is difficult to explain theoretically.

Scholars remind us that there are many factors that complicate what would seem to be a “common sense” association. For example, if the individual who is observed reaps rewards from the violence, or if the aggressive model is someone the observer greatly admires, the observer is more likely to model the behavior (see Leve, Khurana, & Reich, 2015; Thornberry & Henry, 2013; Widom & Wilson, 2015).

Evidence for intergenerational transmission is described in more detail in subsequent chapters that address the different forms of VMIR.

## MEASUREMENT ISSUES: THE FUNNEL METAPHOR

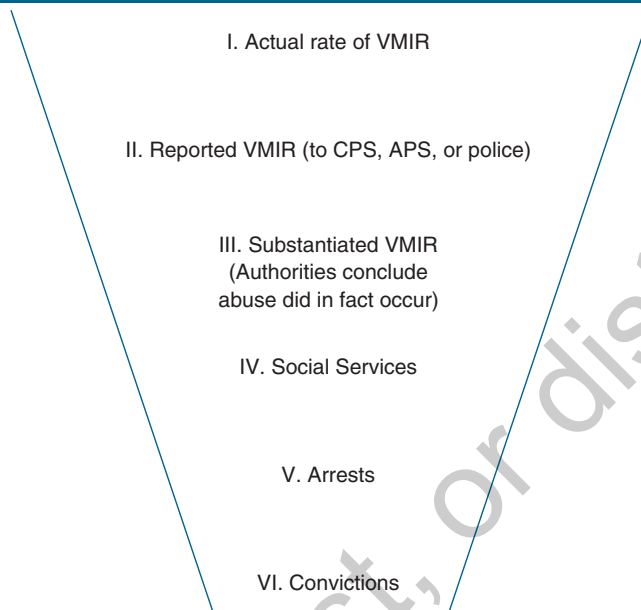
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Social phenomena are inherently difficult to study. We don't know the percentage of high school students who have tried alcohol, for example. We only know how many *tell us* they have done so. However, because alcohol use is relatively easy to operationalize, and it is not an overly sensitive topic (since most teens do it), if we read that a national survey has found that 80 percent of 12th graders have consumed alcohol at some point in their lives we can trust that the estimate is reasonably accurate.

With VMIR, however, the issues are much more complex. To demonstrate the problems associated with measuring crimes and other deviant behaviors, criminologists sometimes use the metaphor of a funnel. Figure 2.1 illustrates what this funnel might look like with respect to VMIR. Keep in mind that while the funnel metaphor applies to all forms of VMIR, the specifics encountered along the way vary with each specific type of VMIR. The discussion that follows, therefore, details the general issues that apply to all forms of VMIR.

At the top of the funnel sits the actual amount of VMIR present within society (Level I). This is an unknowable number and can only be estimated with surveys. Level II represents the cases that are actually reported to official agents of social control. This would include reports made to Child Protective Services (CPS), Adult Protective Services (APS), and/or law enforcement. Level III represents cases that, upon investigation, are determined to have occurred. For example, if a concerned neighbor calls CPS to report a case of child neglect, authorities must investigate. If CPS determines that a preponderance

**FIGURE 2.1** ■ Problems in Estimating the Amount of VMIR:  
The VMIR Funnel



of evidence suggests that the abuse did in fact occur, the case is said to be **substantiated**. Typically, approximately one-fifth of the children investigated are found to be victims of abuse or neglect (U.S. Department of Health and Human Services [U.S. DHHS], 2019b). In cases reported as a crime, law enforcement authorities must essentially do the same thing. If a wife reports to law enforcement that she has been raped by her husband, police must decide whether there is sufficient evidence to conclude that the rape did in fact occur. At Level IV the funnel narrows even further as authorities must decide how to proceed. In the case of child maltreatment, the assumption is that the state will mandate services (e.g., counseling for the parents, foster care for the child, permanent removal of the child). In reality, however, CPS intervenes in only approximately two-thirds of substantiated cases (U.S. DHHS, 2019b). At Levels V and VI the funnel narrows even more, as a small number of cases move through the criminal justice system.

The funneling metaphor is helpful as we turn our attention to specific data sources and survey instruments that are commonly used to study VMIR. Each source examines a different level in the funnel. **Self-report surveys** (Level I) are mail, phone, or face-to-face surveys of the general public concerning VMIR. Self-report surveys can question people about their own history of VMIR toward intimates (**perpetration surveys**) or question people about their experiences with VMIR as victims (**victimization surveys**). There are many unavoidable methodological problems associated with perpetration and

victimization surveys. The most obvious problem with perpetration surveys is that people may well minimize, or lie about, their behavior. Or perpetrators may perceive their own violence as justified and therefore not reportable. Victims, on the other hand, may not feel free to share their story in an interview or on a survey, especially if they are still living with the abuser. And adults who are asked to recall childhood victimization may have memory lapses and distortions. One of the most contentious debates about child sexual abuse, for example, is the question of whether adults can recover previously **repressed memories** of childhood victimization. Some question the accuracy of these **recovered memories**, suggesting that false memories are easily constructed (Loftus & Davis, 2006).

Level II and Level III are two different levels of **official statistics** compiled by formal agents of social control. This would include, for example, the Uniform Crime Report and the National Child Abuse and Neglect Data System, both of which are discussed in the next section of this chapter. Recall from Chapter 1 that the gap between the *actual* rate and the officially recorded rate is termed the *dark figure*. In our funnel, this represents the difference between Level I (actual rate of VMIR) and Level II (reported VMIR) or the difference between Level I and Level III (substantiated VMIR). Since VMIR has a very large dark figure, official statistics must be interpreted with a degree of caution. An increase or decrease in a particular form of VMIR could reflect a change in the actual behavior, a change in the reporting of that behavior, or both.

Imagine, for example, that we have reliable official statistics from the Federal Bureau of Investigation (FBI) on marital rape from 100 years ago. How would we expect these data to compare to present-day rates? Since marital rape was not a crime 100 years ago, the official rate would have been *zero*. Today, marital rape *is* a crime (by the mid-1990s, all states had criminalized marital rape). As a result of these legal changes, official statistics obviously indicate that there has been a dramatic *increase* in marital rape. Logic, however, suggests otherwise. With criminalization, increased awareness, the empowerment of women, and cultural challenges to a patriarchal model of marriage, we would fully expect that the *actual* rates would have declined dramatically over the past 100 years. And if we had reliable self-report data from 100 years ago to compare to current patterns, we can imagine what they might reveal: a dramatic decline. In this case we would simply conclude the obvious: Increased awareness and criminalization have driven up official rates and driven down self-report rates. The point is that self-report statistics and official statistics provide very different information, reminding us that questions of prevalence will always be difficult to answer.

## IMPORTANT DATA SETS AND SELF-REPORT SURVEY INSTRUMENTS

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There are several data sources and survey instruments that attempt to track and estimate the occurrence of VMIR in society. These sources are described in this section as they



relate to the measurement funnel described earlier, as well as in terms of the advantages and disadvantages of each.

### Uniform Crime Report

The Uniform Crime Reporting Program is a nationwide effort by the FBI to collect and report crimes, number of arrests, and persons arrested. These official statistics (Levels II, III, V, and VI from Figure 2.1) are published annually in the **Uniform Crime Report (UCR)**, the most important and commonly cited crime data in the United States.

Because most of the cases of VMIR discussed in this book are *not* typically reported as crimes, the UCR is of limited value in the study of VMIR. However, for the most serious forms of violence the UCR is an invaluable resource. Consider, for example, what the UCR can tell us about intimate homicide. Overall, women are, when compared to men, unlikely to be victims of homicide. Only about 25 percent of homicide victims are female. However, when women are killed, they are especially likely to have been killed by a male intimate (which the UCR defines as husbands, ex-husbands, boyfriends, or ex-boyfriends). According to the UCR, each year approximately 40 percent of female homicide victims are killed by an intimate (U.S. Department of Justice, Federal Bureau of Investigation, 2019). Less than 5 percent of male homicide victims are killed by an intimate. However, these data do not, and cannot, tell the entire story. Think about it. Not every homicide is reported. Most are, of course, but not all. Additionally, not all homicide cases are solved. In fact, in approximately 40 percent of homicides each year, the victim–offender relationship is unknown when the UCR is published for that year. Since no doubt *some* of these unknowns are intimates, we can reasonably assume that the actual percentage of female homicide victims killed by intimates is well above 40 percent. Perhaps it is closer to 50 percent? The UCR, therefore, tells us a great deal about intimate homicide. Male homicide victims are rarely killed by an intimate, but we can reasonably conclude that approximately one-half of female homicide victims are killed by intimates.

### National Child Abuse and Neglect Data System

The **National Child Abuse and Neglect Data System (NCANDS)** is a federally sponsored data collection system on reported child abuse and neglect. Every year NCANDS compiles CPS data from all 50 states on a variety of important issues relevant to child maltreatment such as source of child abuse reports, investigation outcomes, types of maltreatment reported, description of the victims of maltreatment, the relationship of perpetrators to victims, CPS caseloads and response time, and services provided. These official statistics (Levels II, III, and IV from Figure 2.1) are disseminated annually in the publication *Child Maltreatment*. This publication is now in its 26th edition, *Child Maltreatment 2017* (U.S. DHHS, 2019b).

## National Incidence Studies

The **National Incidence Studies (NIS)** are unique in that they actually sit between Level I and Level II on our funnel (Figure 2.1). These are surveys of professionals who are mandated to report cases of child maltreatment to CPS. The logic behind the NIS is that mandated professionals do not always report suspected cases of child maltreatment, and this fact must be taken into consideration in determining the extent of child maltreatment. Professionals may fail to report, for example, because they have conflicting responsibilities (e.g., they may be in a counseling relationship with a victim or perpetrator), because they may not want to get involved with CPS, or because they may not trust CPS or the reporting system.

The NIS uses sampling procedures to select community professionals who work in agencies where it is common to come into contact with abused and neglected children (e.g., police departments, school and day care centers, hospitals, social service agencies, shelters). In the NIS-4, nearly 11,000 professionals were selected. These mandated reporters essentially served as lookouts for child abuse and neglect. Researchers then extrapolated from the reports filed by these professionals to create national estimates of child maltreatment (Sedlak et al., 2010). There have been four NIS studies published—in 1981, 1988, 1996, and 2010.

## National Crime Victimization Survey

The **National Crime Victimization Survey (NCVS)** is a semiannual victim survey (Level I from Figure 2.1) conducted by the U.S. Census Bureau on behalf of the U.S. Department of Justice. The NCVS has been conducted since 1973 and is the primary source of information in the United States on the characteristics of criminal victimization.

Approximately 45,000 households and 100,000 individuals are interviewed every six months for three consecutive years. Respondents are asked about a variety of victimizations during the previous six months, including sexual and physical assaults. Children under the age of 12 are not interviewed, so the NCVS is not especially useful in the study of child maltreatment. However, because respondents are asked if and how they are connected to the offender, the NCVS is a valuable source of information on adult intimate partner violence, or IPV (Bureau of Justice Statistics, 2019).

There are two significant limitations with the NCVS as a measure of IPV. First, because the respondent is typically home for the interview (interviews are over the phone or face-to-face in the home), they may not always feel free to openly discuss VMIR. How many women, for example, are going to openly discuss their husband's abuse if he is in the next room watching television? Second, the NCVS is introduced to respondents as a *crime* survey. The survey actually begins, "I am going to read some examples that will give you an idea of the kinds of crimes the study covers" (Bachman, 2015, p. 24).

The concern is that a respondent who is primed in this way will likely think of acts he or she perceives to be a crime. A woman who has a very narrow understanding of sexual assault, or who may not realize that a husband can sexually assault his wife, may not respond affirmatively to questions on sexual assault, even if she has had experiences that would satisfy legal definitions of rape (Bachman, 2015). Despite the limitation, since the NCVS provides biannual data on crime victimization, it is a very important source of data on IPV.

### National Intimate Partner and Sexual Violence Survey

The **National Intimate Partner and Sexual Violence Survey (NISVS)** is a victimization survey (Level I from Figure 2.1) that measures adult respondents' recollections about physical violence and sexual assault experienced by the respondent. It is an ongoing, nationally representative victimization phone survey of approximately 18,000 adult men and women that assesses the past 12 months as well as lifetime rates for VMIR (S. Smith et al., 2018).

In the NISVS, unlike the NCVS, researchers make a more conscious effort to avoid preconceptions of what terms like *crime*, or *violence*, or *rape* might mean to a respondent. The NISVS introduces the topics of violence and sexual assault as a "health concern," which is a much less imposing and threatening approach to measuring sensitive and misunderstood topics like rape. In addition, unlike earlier measures of sexual assault, the NISVS includes measures of sexual contact where consent was compromised by drugs or alcohol. The preamble reads (National Center for Injury Prevention and Control, 2014, p. 3):

Sometimes sex happens when a person is unable to consent to it or stop it from happening because they were drunk, high, drugged, or passed out from alcohol, drugs, or medications. This can include times when they voluntarily consumed alcohol or drugs or they were given drugs or alcohol without their knowledge or consent. . . .

When you were drunk, high, drugged, or passed out and unable to consent, how many people have ever . . .

The survey then goes on to ask the respondent about several sex acts. For example, how many people have ever "had vaginal sex with you?" or "made you perform anal sex?"

Another strength of the NISVS is that it measures maltreatment that has not typically been studied in national surveys, including sexual violence other than rape, psychological coercion, control of reproductive/sexual health, and stalking (S. Smith et al., 2018).

### Conflict Tactics Scales

The **Conflict Tactics Scales (CTS)**, originally created by Murray Straus (1979), are the most historically significant and widely used scales in self-reported VMIR (Level I

from Figure 2.1). The CTS are based on the assumption that conflict is an inevitable part of intimate interactions. Introducing the questionnaire in this way “normalizes” conflict in hopes that respondents will speak more freely and honestly about the “tactics” they use to resolve intimate conflict. The CTS use several questions to measure three categories of conflict resolution: reasoning/negotiation (e.g., “suggested a compromise to a disagreement”), verbal/psychological aggression (e.g., “shouted or yelled at my partner”), and physical aggression (e.g., “kicked my partner”). In 1996, Straus and his colleagues introduced the CTS2, a revised version that includes additional items and new scales for physical injury (e.g., “had a sprain, bruise, or small cut because of a fight with my partner”) and sexual coercion (e.g., “used force to make my partner have sex”) (Straus, Hamby, Boney-McCoy, & Sugarman, 1996).

The original CTS was designed to measure marital or dating violence, but it could be altered to measure child maltreatment by changing the reference from “your partner” to a specific child. Eventually Straus, Hamby, Finkelhor, Moore, and Runyan (1998) created a modified version of the CTS specifically to measure child maltreatment: the **Parent–Child Conflict Tactics Scale (CTSPC)**. Like the CTS, the CTSPC normalizes conflict in a preamble that acknowledges that children often engage in wrongful or disobedient behavior that might make parents angry. Respondents are asked several questions about a variety of conflict tactics their mother or father might have used when they misbehaved. Three conflict tactics are measured in the CTSPC: nonviolent responses (e.g., “explained why something was wrong”), psychological aggression responses (e.g., “cursed or swore at me”), and physical aggression responses that measure everything from various forms of corporal punishment (e.g., “spanked me on the bottom with her hand”) to extreme forms of child maltreatment (e.g., “grabbed me around the neck and choked me”). The CTSPC also includes a series of optional supplemental questions designed to measure weekly discipline (including more measures of corporal punishment), neglect, and sexual abuse.

It is worth noting that the Conflict Tactics Scales, especially the two versions that measure IPV (CTS and CTS2), have been somewhat controversial. Critics maintain that because the CTS merely counts violent acts, it ignores the context and consequences of those acts. In doing so, it underestimates the consequences of IPV for women (DeKeseredy & Schwartz, 1998).

## **National Survey of Children’s Exposure to Violence and Juvenile Victimization Questionnaire**

The **National Survey of Children’s Exposure to Violence (NatSCEV)** uses the **Juvenile Victimization Questionnaire (JVQ)** to measure exposure to a wide variety of childhood victimization, including conventional crime, child maltreatment, peer and sibling victimization, sexual assault, and witnessing an indirect victimization. It was defined specifically to measure the *polyvictimization* of children (Finkelhor, Turner, Shattuck,

Hamby, & Kracke, 2015). As discussed in Chapter 1, child maltreatment research is often fragmented, with studies focusing on the measurement of one specific form of child maltreatment. In reality, of course, there is considerable overlap between the various forms of child maltreatment. If we read, for example, that 10 percent of children are physically abused and 10 percent are neglected, we cannot conclude that 20 percent of children are victims of physical abuse or neglect, because it is likely that a high percentage experienced both abuse and neglect.

The JVQ measures not only the most serious forms of direct childhood victimization but also a wide variety of indirect forms of exposure (e.g., witnessing fights in and outside the home, hearing gunfire) as well as relatively common forms of victimization, including bullying and teasing. The NatSCEV has been conducted three times, in 2008 (NatSCEV I), 2011 (NatSCEV II), and 2014 (NatSCEV III; Finkelhor, Turner, Shattuck, & Hamby, 2015).

## METHODOLOGICAL ISSUES: CONDUCTING BETTER RESEARCH

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During the 1980s, editors of major social science journals were asked why they seemed unwilling to publish research on VMIR. They responded that they would like to publish more but that the research they had seen generally did not meet minimal standards of scientific rigor (Rosenbaum, 1988). Researchers interested in VMIR, therefore, were faced with two alternatives: either improve the quality of their research or find alternative outlets. In many respects, the past years have seen both alternatives occur.

Today, numerous journals are devoted specifically to VMIR (e.g., *Child Abuse and Neglect: The International Journal*, *Child Maltreatment*, *Journal of Child Sexual Abuse*, *Journal of Family Violence*, *Sexual Abuse: A Journal of Research and Treatment*, *Violence Against Women*).

Methodological rigor has also increased, and dramatically so. The federal government, for one, has become active in collecting, funding, and disseminating important data. And increasingly the top social science and medical journals are publishing VMIR research. For example, the Widom et al. (2015) research on intergenerational transmission, as discussed previously in this chapter, was published in *Science*, one of the most prestigious journals in the world.

Despite improvements, however, research on VMIR can never be perfect. There will always be tensions associated with the study of a topic so emotional and personal (see Box 2.1). Additionally, there are many methodological hurdles that sometimes stand in the way of full understanding. In the following sections, we consider several of these problems.

**BOX 2.1****IS IMPARTIAL EMPIRICISM IN THE STUDY OF VMIR POSSIBLE?**

The scientific method, we are told, is “value-free.” Empiricists report what they see, not what they hope to see. Given the passions that many bring to the study of VMIR, however, a truly value-free approach is extremely challenging. Most professionals who study VMIR want to make the world a safer place for victims and do not want their research and writing to be completely void of that passion. At the same time, however, one must be careful not to discard the scientific method in favor of an advocacy-driven approach to knowledge. How do we, and how should we, balance advocacy and research? (See Perrin & Miller-Perrin, 2011, for a more detailed discussion of the ideas presented in this section.)

We would argue that advocacy, absent scientific objectivity, is inherently problematic and may do more harm than good. To consider why, we must briefly revisit the social constructionist perspective on social problems, as discussed in Chapter 1. Social conditions become social problems when claims makers successfully define them as such. Claims makers may employ many strategies for raising awareness, including the use—and sometimes misuse—of statistical facts and dramatic rhetoric. Because social conditions essentially compete for attention, claims makers will inevitably be drawn to larger numbers and dramatic rhetoric (Best, 2001).

Why is this a potential problem? Consider the debate between Dianna Russell and Neil Gilbert. Gilbert (1997) is critical of Russell’s (1984) claim that 54 percent of children are victims of sexual abuse. This estimate from Russell, Gilbert argues, is an exaggerated “advocacy statistic.” In fairness, Russell is clear that the 54 percent figure is based on a very broad definition of sexual abuse that includes unwanted kisses and nongenital sexual touching as well as exposure to exhibitionism (D. Russell & Bolen, 2000). However, it is also fair to remind the reader that Russell, like advocates more generally, likely assumes that broad definitions and large numbers will further her cause. The potential problem, Perrin and Miller-Perrin argue (2011), is that if the public *perceives* that advocacy is driving

social science, that social scientists manipulate or misuse data to support certain causes, or that social scientists make claims beyond what the data can justify, public confidence in social scientific findings are undermined. It is easy for the public to dismiss social scientific claims about particular issues if they perceive that the claims are ideologically motivated. And having dismissed the claims, it is easy for the public to dismiss the issues themselves.

Furthermore, if almost everyone is a victim of abuse, do the terms *victim* and *abuse* not lose their meaning? If marital pushing and shoving is abuse, then many marital couples have engaged in “abusive” behavior. If spanking is child abuse, then almost all children are “victims of abuse.” If sibling pushing or hitting is abusive, then almost all siblings are victims or perpetrators or both. In each of these scenarios, the meaning of the terms *victim* and *abuse* have been diluted. However inappropriate and indefensible these relatively minor forms of VMIR are, they should be clearly distinguished from more serious and damaging forms of VMIR. Giving a child an occasional swat on the bottom may not be good or effective, and we might want to advocate that society not accept these behaviors, but do they constitute *abuse*? Certainly, we must acknowledge that the effects of spanking are minor compared with severe assault. If our advocacy leads us to claim otherwise and our attention is diverted from more serious forms of abuse, then we may do more harm than good.

The notion of *value-free inquiry* can be traced to the very beginnings of the social sciences. Sociologist Max Weber (1949) reasoned that if values influence research, the findings will be rejected and the discipline discredited. But Weber also reminds us that the topics we choose, and the ways we approach these topics, are always “value relevant.”

We cannot be, nor should we be, completely value-free. It simply is not possible. Yet we must be careful. If our advocacy commitments lead to poor scholarship and shoddy research, then we may win a battle here and there, but we may be less likely to win the war.

## Negotiated Definitions

It is very important to remember that the behaviors we categorize as abuse will always be debated and negotiated. They will never be, and can never be, “objectively defined.” The definitional criteria deemed important vary from one audience to the next and from one generation to the next.

The problem, at least in part, is that we want our facts delivered neatly and succinctly (see Best, 2001). Yet there are very few neat and succinct facts in the study of VMIR. Consider as an example these two empirical statements (Leve et al., 2015, p. 1429): “Official statistics from the National Center for Injury Prevention and Control [2014] indicate that the rate of victimization in the United States is as high as 9.2 children per 1,000 children. Self-report studies reveal that as many as one-in-four U.S. children will experience some form of maltreatment in their lifetime.” We would argue that these two statements essentially tell us nothing. In no way do we intend to criticize Dr. Leve and her colleagues with this critique. They have appropriately cited statistics, and readers who want to know more can go to the source of those statistics. And, quite frankly, we are all, including the authors of this book, often guilty of oversimplifying statistics in this way. It is likely not feasible to *always* provide the definitional details of the statistics we cite. But the fact of the matter is that without the definitional details of the terms *victimization* (first sentence) and *maltreatment* (second sentence), these statistics tell us very little. In subsequent chapters addressing the various forms of VMIR, we attempt to clarify the definitions used as much as possible.

## Correlation Isn't Causation: Problems Establishing Cause-and-Effect Relationships

Most of the research on VMIR is **retrospective**, **cross-sectional**, and **correlational**, making causal connections difficult to identify. If a researcher wanted to study the effects of IPV on women, for example, he or she might examine a sample of IPV victims for emotional, behavioral, or cognitive problems and compare them to a sample of individuals who were not abused. In general, this is how research on the effects of abuse is conducted (Dillon, Hussain, Loxton, & Rahman, 2013). Predictably, most of this research reveals that IPV is associated with a range of behavioral and emotional problems (e.g., depression, post-traumatic stress disorder, anxiety, self-harm, and sleep disorders). Does the violence cause these emotional and behavioral problems? This is a much more difficult question to answer. Two variables can be associated without necessarily being causally related.

A causal link between correlated variables can only be established if two criteria are met: **time order** and **nonspuriousness**. Time order refers to the obvious fact that a cause must occur before an effect. For example, the correlation between spanking and behavioral problems in children is well established in the literature (see Gershoff & Grogan-Kaylor, 2016). If one hopes to argue that spanking causally contributes to behavioral problems in children,

however, it must be established that the spanking occurred before the behavior problems. Obviously, parents who spank are likely to make the opposite argument, since it is misbehaving children who must be spanked. Nonspuriousness refers to the requirement that the relationship be nonaccidental. A spurious relationship is one in which a third unknown and uncontrolled variable accounts for the correlation between the two variables in question. The number of fire trucks is indeed correlated with the amount of financial damage caused by a fire, but not because fire trucks cause fire damage. Perhaps spanking and behavioral problems are correlated because emotionally detached parents (or poor parents, or physically aggressive parents) are more likely to hit and have poorly behaved children. Or perhaps child maltreatment victims are more likely than nonvictims to suffer from adult depression because of other factors that are also correlated with abuse and depression (e.g., living in a chaotic family environment, living in poverty, and having few social supports).

### Randomized Controlled Trials (Experimental Design)

Researchers, of course, are keenly aware of the issues discussed in the previous section, and make every effort to control for as many potential intervening variables as possible. But the only way to establish clear cause-and-effect relationships is to devise an **experimental design** using a **randomized controlled trial (RCT)**. The experimental design is considered the “gold standard” in research design. In this methodological design, the researcher randomly assigns participants to two or more groups and then introduces an independent variable into one or more of the groups. Because subjects are randomly assigned, one can reasonably assume that the groups are alike on any trait that might be causally relevant, essentially controlling for all extraneous effects. Any observed differences between the groups can then be attributed to the independent variables.

Of course, RCTs are rarely feasible in the study of VMIR. It is hardly ethical, for example, to take a sample of 200 infants who are up for adoption and randomly assign 100 to abusive families and 100 to nonabusive families and observe the outcome. Interestingly, one area where RCTs are feasible is evaluation research of prevention and intervention programs. Even here, however, ethical dilemmas present themselves. For example, researchers who randomly assign at-risk families to prevention and intervention programs must consider the potential consequences of excluding at-risk families that are in the control group and therefore miss out on the potential benefit of such programs.

### Longitudinal Studies and Matched Comparison Groups

With **longitudinal designs** and **matched control groups** we can approximate the methodological power of RCTs. Longitudinal studies allow us to track effects over time, thus controlling for the time order problem inherent in many correlation studies. And with a matched comparison group we have a reference point with which we can compare our research participants. Unfortunately, these studies are expensive, participants are difficult



to obtain, and attrition rates for participants are high. In addition, sometimes researchers are under pressure to produce immediate results. A researcher who needs tenure today may not be able to wait for results tomorrow (i.e., over several years). Consequently, most research designs are cross-sectional, using retrospective self-report survey data.

With increased funding and interest in VMIR research, longitudinal studies are becoming more common. For example, Widom has been following a **prospective cohort** of child abuse victims since the late 1960s. The original sample included almost 1,000 children, ages 11 years and under, all of whom were court-substantiated victims of abuse and neglect. Widom also selected a comparison group, matched for known correlates of abuse and criminality (e.g., age, sex, race, class). Making the two groups as similar as possible is important, of course, because causal assertions are dependent on the assumption that the primary difference between the two groups is the abuse they endured as children. A prospective design like this is powerful because both cohorts, the abused children and the matched comparison group, were free of the “outcome” (intergenerational transmission, the effects of abuse, etc.) when the study began. Widom has been following these two cohorts for 50 years now, and she and various colleagues have evaluated the effects of abuse as well as the intergenerational transmission of abuse in the original cohort (generation 1), their children (generation 2), and their children’s children (generation 3). It is a fascinating and impressive endeavor, and effectively demonstrates not only the power of the longitudinal research, but also how sophisticated some VMIR research has become (see, for example, Widom et al., 2015).

## CHAPTER SUMMARY

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We have approached this chapter with three goals in mind. First, we try to explain VMIR. This section is not intended to be a detailed discussion of theory. Rather, it is an attempt to provide a context for understanding why VMIR is so common. Second, we introduce the various measurement issues that all researchers must navigate. This includes a discussion of important data sources and measurement instruments. Finally, we discuss the many methodological issues that make VMIR, and frankly all social science, so complicated.

Many cultural and social-structural antecedents contribute to physically violent and verbally aggressive intimate interactions. The structural characteristics of intimate relationships partly explain why VMIR is so common. Intimates spend a great deal of time together, and interactions tend to be intense. The subordination and in some cases dependency of intimates also make them vulnerable to abuse, and privacy norms make VMIR relatively easy to conceal. The culture sometimes encourages, condones, and accepts verbal and physical aggression between parents that, arguably, could indirectly contribute to VMIR. VMIR is also a relatively low-cost form of deviant behavior, which partially explains why it is so common. Finally, we introduce the concept of intergenerational

transmission: the idea that VMIR is learned behavior and is passed on across generations. We conclude that learning factors are relevant, but that intergenerational transmission theory is not as powerfully predictive as many suspect.

The many difficulties associated with determining the extent of VMIR are illustrated in Figure 2.1. The top of the funnel (Level I) is the actual amount of VMIR that exists in society. Although this figure is obviously unknown and unknowable, it can be estimated with self-report perpetration or victim surveys, such as the National Crime Victimization Survey (NCVS), the National Intimate Partner and Sexual Violence Survey (NISVS), the Conflict Tactics Scales (CTS and CTS2), and the Juvenile Victimization Questionnaire (JVQ). Self-report and victim surveys are the only way we can estimate the *dark figure*, which is the gap between the actual rate of VMIR (Level I) and the officially reported and recorded rate (Level II). Level II data sets include the Uniform Crime Report (UCR) and the National Child Abuse and Neglect Data System (NCANDS). Our funnel narrows even more at this point, through various stages of substantiation (determining whether or not the alleged abuse did in fact occur), social services, or criminal proceedings.

Many methodological problems continue to plague the field. The most glaring of these may be definitional ambiguity. For example, terms like *sexual assault* or *child neglect* or *intimate partner violence* are commonly used in popular and professional circles, but there is not always agreement on exactly what these terms mean, and how they should be operationalized. This ambiguity makes findings difficult to compare across studies. Another problem is that most VMIR research is retrospective and correlational. This makes it very difficult to establish cause-and-effect relationships. Randomized controlled trials (RCTs), also called experimental designs, are rarely feasible. Longitudinal research is expensive and difficult to conduct.

Despite these many difficulties, research on VMIR has become increasingly sophisticated in recent years, and we fully expect this trend to continue.

## Recommended Resources

Finkelhor, D., Turner, H. A., Shattuck, A., & Hamby, S. L. (2015). Prevalence of childhood exposure to violence, crime, and abuse: Results from the National Survey of Children's Exposure to Violence. *JAMA Pediatrics*, *169*(8), 746–754.

Perrin, R. D., & Miller-Perrin, C. (2011). Interpersonal violence as social construction: The potentially undermining role of claims-making and advocacy

statistics. *Journal of Interpersonal Violence*, *26*, 3033–3049.

U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2019). *Child Maltreatment 2017*. Washington, DC: Government Printing Office.

Widom, C. S., Czaja, S. J., & DuMont, K. A. (2015). Intergenerational transmission of child abuse and neglect: Real or detection bias? *Science*, *347*(6229), 1480–1485.