



Child abuse and neglect and intimate partner violence victimization and perpetration: A prospective investigation[☆]



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ABSTRACT

This paper describes the extent to which abused and neglected children report intimate partner violence (IPV) victimization and perpetration when followed up into middle adulthood. Using data from a prospective cohort design study, children (ages 0–11) with documented histories of physical and sexual abuse and/or neglect ($n = 497$) were matched with children without such histories ($n = 395$) and assessed in adulthood ($M_{\text{age}} = 39.5$). Prevalence, number, and variety of four types of IPV (psychological abuse, physical violence, sexual violence, and injury) were measured. Over 80% of both groups – childhood abuse and neglect (CAN) and controls – reported some form of IPV victimization during the past year (most commonly psychological abuse) and about 75% of both groups reported perpetration of IPV toward their partner. Controlling for age, sex, and race, overall CAN [adjusted odds ratio (AOR) = 1.60, 95% CI [1.03, 2.49]], physical abuse (AOR = 2.52, 95% CI [1.17, 5.40]), and neglect (AOR = 1.64, 95% CI [1.04, 2.59]) predicted increased risk for being victimized by a partner via physical injury. CAN and neglect also predicted being victimized by a greater number and variety of IPV acts. CAN and control groups did not differ in reports of perpetration of IPV, although neglect predicted greater likelihood of perpetrating physical injury to a partner, compared to controls. Abused/neglected females were more likely to report being injured by their partner, whereas maltreated males did not. This study found that child maltreatment increases risk for the most serious form of IPV involving physical injury. Increased attention should be paid to IPV (victimization and perpetration) in individuals with histories of neglect.

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Introduction

Intimate partner or domestic violence (IPV) continues to be a serious problem in the United States and internationally. It is estimated that more than a third of women (35.6%) and more than a quarter of men (28.5%) in the United States experience rape, physical violence, and/or stalking by an intimate partner in their lifetime (Black et al., 2011). Estimates from the National Family Violence Surveys indicate that approximately 1 out of 6 couples experience IPV annually (Schafer, Caetano, & Clark, 1998). The medical care, mental health services, and lost productivity costs associated with IPV have been estimated to be more than \$8.3 billion (Max, Rice, Finkelstein, Bardwell, & Leadbetter, 2004).

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Another form of family violence, child maltreatment, also represents a major public health concern in the United States and abroad (Gilbert et al., 2009). In the United States in fiscal year 2010, approximately 3.3 million children were referred to child protection service agencies for suspected maltreatment, and about 695,000 children were determined by state and local child protective service agencies to be victims of maltreatment. About 1,560 children died as a result of child abuse or neglect in 2010 (U.S. Department of Health and Human Services, 2011).

This paper examines the extent to which experiencing abuse or neglect in childhood increases a person's risk for intimate partner violence perpetration and victimization in adulthood. Numerous studies have reported a relationship between child abuse and neglect (CAN) and the perpetration of IPV. Using data from the Toledo Adolescent Relationships Study, Swinford, DeMaris, Cernkovich, and Giordano (2000) found that child abuse (measured by exposure to harsh physical discipline) predicted IPV. In another study controlling for early family violence, Linder and Collins (2005) found that individuals exposed to child abuse were at risk for IPV in romantic relationships. In one of the few prospective studies to examine this relationship, Ehrensaft et al. (2003) found that childhood physical abuse was the best predictor of perpetrating partner violence as well as injury to the victim, but that the effect was due to other factors, including exposure to partner violence between parents. Although White and Widom (2003) found that CAN was a significant predictor of perpetration of IPV in adulthood, other researchers have questioned the relationship between experiencing abuse as a child and subsequent spouse abuse (Herrera & McCloskey, 2003; O'Leary & Jouriles, 1993; Simons, Wu, Johnson, & Conger, 1995).

In their meta-analysis of the research literature on the intergenerational transmission of spouse abuse, Stith et al. (2000) concluded that the findings suggest a "weak-to-moderate relationship between growing up in an abusive family and becoming involved in a violent marital relationship" (p. 640), with an overall effect size of .16 across 30 studies. More than 10 years later, Capaldi, Knoble, Shortt, and Kim (2012) concluded that the "findings indicate a low-to-moderate significant association of child abuse and neglect with later IPV" (p. 247), based on their systematic review of risk factors for intimate partner violence that included the role of child abuse. Capaldi and colleagues also cautioned that these findings are "generally over-reliant on retrospective reports" (p. 247).

Studies have also examined whether child abuse is associated with increased risk for being victimized in the context of partner violence (Cappell & Heiner, 1990; Feerick, Haugaard, & Hien, 2002; McKinney, Caetano, Ramisetty-Mikler, & Nelson, 2009; Mihalic & Elliot, 1997; Murphy, 2011; Renner & Slack, 2006; Renner & Whitney, 2012; Seedat, Stein, & Forde, 2005; Simons, Johnson, Beaman, & Conger, 1993). Many of these studies have focused on childhood sexual abuse as a risk factor IPV victimization. For example, Renner and Slack (2006) found that childhood physical and sexual abuse predicted IPV victimization, controlling for demographic and other childhood factors. One recent systematic review of data from the East Asia and Pacific Region reported that children who had been sexually abused had a threefold increase in risk of IPV victimization later in life (Fry, McCoy, & Swales, 2012). In studies of civilian women (Caetano, Ramisetty-Mikler, & Field, 2005) and female enlisted soldiers married to civilian men (Forgey & Badger, 2010), women reporting severe bi-directional IPV were more likely to endorse a child sexual abuse history. In a large nationally representative Canadian sample, childhood sexual abuse was associated with later IPV victimization for women and men, although the relationship was stronger for women than for men (Daigneault, Hebert, & McDuff, 2009). In contrast, a study of young adults participating in the National Longitudinal Study of Adolescent Health found no relationship between reports of sexual abuse and partner violence (Renner & Whitney, 2012), and another study involving adult methadone users found that forceful child sexual abuse or sexual abuse by a family member was not associated with an increased risk of later IPV (Engstrom, El-Bassel, & Gilbert, 2012).

Thus, findings on the extent to which exposure to violence in childhood increases a person's risk for IPV in adulthood are not always consistent. Part of the problem for these contradictory findings may be related to a number of issues that Stith et al. (2000) note that make studying the intergenerational transmission of spouse abuse complex. The first issue concerns potentially different effects of witnessing violence compared to experiencing violence as a child. Although much of the existing literature focuses on children who witness violence between parents, a number of studies suggest that the consequences of these two childhood experiences may differ (Cappell & Heiner, 1990; Dunlap, Golub, Johnson, & Wesley, 2002; Mihalic & Elliot, 1997; Moffitt & Caspi, 1999; Simons & Johnson, 1998). In this paper, we focus exclusively on the experience of abuse and neglect in childhood and its impact on risk for intimate partner violence in adulthood.

The second issue raised by Stith et al. (2000) and relevant here is the extent to which children growing up in violent homes are at risk for becoming perpetrators and/or victims of intimate partner violence. As noted, there is some support for each of these outcomes, with some studies showing increased risk for perpetration of partner violence and others showing increased risk for IPV victimization.

Third, there is some reason to expect that rates and patterns of victimization and perpetration may vary by gender and that the link between childhood abuse and subsequent partner violence perpetration and victimization may be manifest differently in males and females (Langhinrichsen-Rohling, Neidig, & Thorn, 1995; Mihalic & Elliot, 1997; Stith et al., 2000). Downey, Feldman, Khuri, Reynolds, and William (1994) suggested that the consequences of child abuse may parallel gender differences in the expressions of psychopathology, with maltreated boys being more likely to externalize their pain and suffering and becoming perpetrators of violence, whereas maltreated girls more likely to internalize their pain (Friedrich, Urquiza, & Beilke, 1986) and become attached to men who victimize them and increase their risk of IPV victimization in the process (Carmen, Rieker, & Mills, 1984; Jaffee, Wolfe, & Wilson, 1990; Widom, 1989b). In their meta-analysis, Stith et al. (2000) predicted that there would be gender differences in socialization experiences, based on the rationale that where men are socialized to be aggressive and to use violence to settle arguments and conflicts (Sugarman & Frankel, 1996), this is not

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