



Research article

Co-occurrence of intimate partner violence and child sexual abuse: Prevalence, risk factors and related issues



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ARTICLE INFO

Article history:

Received 22 September 2015

Received in revised form 9 March 2016

Accepted 18 March 2016

Keywords:

Co-occurrence

Intimate partner violence

Child sexual abuse

ABSTRACT

This article proposes a review of the scientific literature on the cooccurrence of intimate partner violence and intrafamilial child sexual abuse. The review of these two types of violence has evolved in distinct research fields and their cooccurrence has rarely been examined. The objective of this article is to examine the existing knowledge about this cooccurrence. A systematic examination of the scientific literature in several relevant databases was conducted using combinations of 20 keywords so as to identify scientific articles, published between 2003 and 2013, that investigated this cooccurrence. The final sample comprised 10 studies. These studies revealed the presence of much heterogeneity regarding the prevalence of the cooccurrence for intimate partner violence with sexual abuse and other maltreatment (from 12% to 70%). The review also highlighted a greater risk for children to be victims of sexual abuse or other maltreatment when exposed to intimate partner violence. The implications of these results and the ensuing recommendations for practice and future research are considered in the discussion section.

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1. Introduction

Intimate partner violence (IPV) and child sexual abuse (CSA) are two distinct social problems that, up to now, have been examined rather independently by the scientific community (Alaggia & Turton, 2005; Dong et al., 2004; Finkelhor, Ormrod, & Turner, 2007b; Hamby, Finkelhor, Turner, & Ormrod, 2010; Ramirez, Pinzon-Rondon, & Botero, 2011; Zolotor, Theodore, Coyne-Beasley, & Runyan, 2007). Research conducted since the end of the 20th century shows that these types of violence and abuse are neither rare nor isolated from other social problems. On the contrary, they seem to be widespread, especially in families characterized by certain risk factors such as difficult living conditions, addictions, disabilities, mental health difficulties, distress, and others (Bowen, 2000; Dietz & Craft, 1980; Finkelhor, Ormrod, Turner, & Hamby, 2005; Goddard & Hiller, 1993; Lessard et al., 2010; Ray, Jackson, & Townsley, 1991; Shipman, Rossman, & West, 1999). Growing concerns and awareness regarding these forms of violence and abuse are due in part to women movements and the work of humanitarian organizations such as the World Health Organization (WHO), UNICEF, and the United Nations (UN). In the 1970s, these organizations began to emphasize the importance and prevalence of such social problems, the relations between interpersonal violence and structural violence, and their impact on women and children due to unequal social relations. Scientific research soon followed, confirming the aforementioned concerns by demonstrating the prevalence and

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some of the social, legal and policy challenges that they represent (Appel & Holden, 1998; Finkelhor, 1994; Finkelhor, Hamby, Ormrod, & Turner, 2005; Finkelhor et al., 2007b; Zolotor et al., 2007).

As the number of studies on the incidence, prevalence, characteristics, and associated risk factors increased, specialized fields of research emerged: (a) family violence (Dietz & Craft, 1980; Finkelhor, 1998; Gelles & Jon, 1990; Ray et al., 1991); (b) intimate partner violence (Cox, Kotch, & Everson, 2003; Johnson, 2008; Lessard et al., 2015; Lussier, Farrington, & Moffitt, 2009; McCloskey, Figueredo, & Koss, 1995); (c) violence against women by men (Heise, 1998; Hiebert-Murphy, 2001; Ward & Beech, 2004); (d) child maltreatment (Finkelhor & Asdigian, 1996; Finkelhor, Ormrod, et al., 2005; Hamby et al., 2010; Tajima, 2004); and (e) child sexual abuse (Finkelhor, 1984, 2008; Finkelhor & Browne, 1985; Kennedy, Bybee, Kulkarni, & Archer, 2012; Lussier, 2015; Lussier, Beauregard, Proulx, & Nicole, 2005; Lussier, Proulx, & Leblanc, 2005; Ramirez et al., 2011). Each of these fields developed rather in isolation, therefore creating its own knowledge base with few or no interactions with the other fields (Edleson et al., 2007; Gelles & Jon, 1990). Such compartmentalization of the fields of research is usually based on the underlying assumptions that these various phenomena are theoretically distinct and caused by rather specific and distinct risk factors.

Researchers have not always been specific about the type of violence and abuse being investigated and the definitions used have significantly evolved over the years. For example, the use of the generic term “domestic violence” was widespread up till the end of the 1980s. Nowadays, more researchers distinguish between the different types of family violence, using a more precise terminology that makes it possible to grasp the various particularities of each form of violence and abuse. This also explains the slow decrease over time in the use of the term domestic violence. These changes have contributed to improve the theoretical and methodological frameworks as well as the instruments to measure each type of violence, in specific social settings, whether it be for married couples, partners, dating relationships, etc. Nonetheless, the lack of more standardized definitions and measures of various forms of violence remains a significant issue. Even though the definitions of the WHO, UN, and UNICEF are readily available, they are rarely used as conceptual and operational definitions of violence and abuse.

It was toward the middle of the 1990s that researchers began to report the co-occurrence between IPV and child maltreatment (Fantuzzo, Boruch, Beriama, Atkins, & Marcus, 1997; Goddard & Hiller, 1993; Shipman et al., 1999). In that regard, Appel and Holden (1998) conducted a quantitative meta-analysis of 31 studies that investigated the co-occurrence of IPV and physical abuse of children in families. The results indicated that the median rate of co-occurrence is 40% in clinical populations and identified a typology of five possible family dynamics in co-occurrent situations. In the first, the only aggressor is the father. He is responsible for both the IPV and child abuse. The second dynamic is rather sequential: the father assaults the mother, who in turn reacts to her victimization by mistreating the child. Thirdly, it is possible to have situations where the IPV is directed by the man against the woman, but where both parents are responsible for the child abuse. In the fourth and fifth dynamics, the IPV is bidirectional, with both parents responsible for the child abuse. However, the fifth is characterized especially by violence on the part of the child against both parents. Their research, however, did not contain data for CSA. Conversely, Edleson (Edleson, 1999) carried out a literature review of scientific articles published from 1975 till the end of the 1990s in which different types of maltreatment were included. None of the studies however looked exclusively at the relation between IPV and CSA. One of the main results that the above-mentioned authors noted was the separation of IPV and maltreatment in the studies. They also demonstrated their co-occurrence, emphasizing that the variations in the results of the reviewed studies could be explained by the methodologies, sampling criteria, and diverse measurement tools. These two articles are still relevant and still cited by numerous other scientific articles on this subject.

Since the early 2000s, the co-occurrence between IPV and child maltreatment has come to the forefront in international research as a key research topic. In general terms, this type of co-occurrence can be caused by any individual behavior and happens while individuals of the same family interact. Researchers now have access to more valid and reliable data on the subject in part because newly conducted investigations with clinical sample populations (Alaggia & Turton, 2005; Bowen, 2000; Cox et al., 2003; Damant et al., 2010; Hiebert-Murphy, 2001; Kellogg & Menard, 2003; Lapierre & Côté, 2011; Lavergne, Turcotte, & Damant, 2008; Martin et al., 2007; Tajima, 2004). Some studies have examined co-occurrence between the presence of IPV and the presence of physical abuse of children within the same families (Appel & Holden, 1998; Chan, 2011), whereas others have looked at the co-occurrence between IPV and psychological abuse (McCloskey et al., 1995) and neglect (Finkelhor, Ormrod, & Turner, 2007a). Such clinical investigations significantly contributed to the emergence of the concept of polyvictimization (Finkelhor, Ormrod, & Turner, 2009; Turner, Finkelhor, & Ormrod, 2010). Finkelhor and colleagues set out to determine how these forms of victimization develop and weave together in the lives of victims. All of that being said, very few authors have examined co-occurrence between IPV and CSA (Edleson et al., 2007; Goddard & Bedi, 2010) at the same time in the same family. There now exists a good deal of knowledge and expertise about IPV and CSA, and yet we do not have many studies that have demonstrated a relation between these two issues.

This scoping review aims to demonstrate contemporary knowledge about co-occurrence of IPV and intrafamilial CSA. According to the WHO, IPV refers to any controlling behaviors within an intimate relationship, and physical, emotional, psychological or sexual abuse causing harm to any of the partners who are in the relationship. According to UNICEF and Finkelhor et al. (2007b), CSA refers to a wide range of acts between a child and parent, stepfather, caretaker, grandparent or older sibling. These acts include sexual coercion, rape, sexual harassment, looking at or touching a child's genitalia, and other violent acts against the will of a child. In this specific case, the child is used and treated as a sexual object. Co-occurrence refers to the simultaneous presence of two different issues in the study period, often in the last year. Given the rarity of studies specifically examining this type of co-occurrence (Alaggia & Turton, 2005; Kellogg & Menard, 2003), the scientific

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