

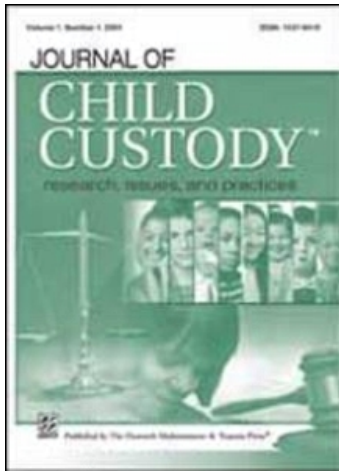
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### Assessing Intimate Partner Violence: A Context Sensitive Aggression Scale

Alyce LaViolette <sup>a</sup>

<sup>a</sup> Private Practice, Long Beach, California

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## **Assessing Intimate Partner Violence: A Context Sensitive Aggression Scale**

ALYCE LAVIOLETTE

*Private Practice, Long Beach, California*

*In the late 1970s and early 1980s, researchers began exploring the differences in men who physically abused their female intimate partners. Since that time, there has been an emergence of research on that topic which has led to the development of batterer typologies. These men were identified around the issues of behavioral characteristics, traits, emotional responses, and experiences. Shelter advocates, for the most part, have presented a relatively one-dimensional view of abusive men based on their experiences with battered women and their children. This author proposes a continuum of aggressive acts with the intention of creating a context that could aid in assessment and intervention when intimate partner violence (IPV) is an issue. The continuum contains acts of aggression that may occur without a context or pattern of abuse.*

**KEYWORDS** *assessment, conflict, continuum of aggression, gender equivalence, terror, violence*

### ANGER CONTINUUM: WHAT'S DOMESTIC VIOLENCE AND WHAT IS NOT?

Advocates, researchers, batterer intervention group facilitators, and clinicians reach agreement that the problem of intimate partner violence (IPV) crosses socio-economic, racial, ethnic, and spiritual barriers reaching into heterosexual and GLBT (gay, lesbian, bisexual, and transgender) relationships. It occurs in every neighborhood and is distributed throughout population groups across the globe. There is research on male perpetrators, and more

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Address correspondence to Alyce LaViolette, MFT, Alternatives to Violence, 6621 E. Pacific Coast Highway, Ste. 220, Long Beach, CA 90803. Phone: (562) 493-1161 ext. 2.

recently, on female perpetrators of abuse (Dowd, 2001; Johnson & Ferraro, 2000). Individuals who commit acts of aggression in their intimate relationships are as diverse as the communities they represent. The heterogeneity of participants in batterer intervention programs (BIPs) and the individuals who appear in anonymous statistical data has led to attempts at classifying these individuals according to their differences and similarities.

Research on perpetrator differences and similarities began in the late 1970s and exploded in the 1980s and 1990s. Some researchers differentiated abusive individuals according to their patterns of violent behavior (Brisson, 1981; Gondolf, 1987; Hershorn & Rosenbaum, 1991; Saunders, 1992). Others looked at personality type, attitudes toward women, levels of anger, substance abuse, family of origin, and psychiatric history (Dutton, 1998; Hamburger & Hastings, 1986; Holtzworth-Monroe & Stuart, 1994; Saunders, 1992).

Johnson (1995) created a continuum of violence anchored on one end by common couple violence and on the other end by patriarchal terrorism. In 2000, Johnson and Ferraro refined the continuum, emphasizing distinctions between types of violence, motivation for the violent acts, and the cultural context in which the violence occurs. These researchers suggested that, at a relationship level, four significant patterns of partner violence can be distinguished: Common Couple Violence (CCV); Intimate Terrorism (IT); Violent Resistance (VR); and Mutual Violent Control (MVC). Johnson and Ferraro included female violence, both initiating and retaliatory, in their research.

Controversy regarding female-initiated or retaliatory violence has been inflamed by studies that purport equal or higher levels of IPV perpetrated by females (Anderson, 2002; Archer, 2000; Straus & Gelles, 1990; Straus, 1997). Although Straus and Gelles pointed out that the consequences of female aggression were not as dire as their male counterparts, the proponents of gender equivalence embraced these data. Research on female-perpetrated violence proliferated, leading to requests for Violence Against Women Act (VAWA) funding and shelters for male victims of domestic violence.

In a meta-analysis of more than 180 studies, Archer (2000) found that although women were slightly more likely than men to use physical aggression, men were more likely to cause injury to their female partners. Women also experienced more severe psychological consequences (fear, anxiety, depression, and substance abuse) than their male counterparts (Anderson, 2002; Dasgupta, 1999; Magdol et al., 1997; Umberson, Anderson, Glick, & Shapiro, 1998).

Empirical results are affected by the definition of abuse used by the researcher. Definitions vary from experimenter to experimenter. Results are also impacted by the context in which the acts of aggression occur (escalating arguments, attempts to control, self-defense) and the outcome of the violence (injury, fear, anger, indifference). In addition, the method

whereby specific acts of aggression (severe, mild) are classified without regard to gender or outcome: the instruments used to gather data, the number of individual subjects, and the length of time during which the research occurs factor into the results (Campbell, 2000; DeKeseredy, 2000; LaViolette & Barnett, 2000; Saltzman, 2000).

According to Dowd (2001, p. 76): "Language used in describing violent couples and their acts is often ill-defined, lacking in operational definition, or laden with emotional, judgmental or political connotation." Although a rose is a rose, an act of aggression is not necessarily synonymous with abuse. According to Geffner and Rosenbaum (2001, p. 2): "The term aggression should not be used as a synonym for abuse. Aggression is an action, abuse is a dynamic."

Johnson's (1995) continuum proved intriguing and led this author to develop a continuum that differentiates between aggressive and abusive behavior. The process began in the late 1990s after reading Johnson's work. Initially, this author's continuum was used in training seminars. It was more formally utilized (though not fully developed) as part of expert testimony in a child custody case. In that case, the judge had been convinced that the father (the alleged perpetrator) was not abusive because he did not look like the antagonistic co-star of "The Burning Bed" or "Sleeping With the Enemy." The continuum proved to be useful in providing a context for and range of his controlling, verbally abusive, and sporadically physical outbursts. The remainder of this article describes the LaViolette continuum as proposed in this study as distinct from Johnson (1995), and concludes with some preliminary recommendations as to how the proposed continuum might be used to aid in assessment and intervention in IPV cases.

There are five discrete points on the continuum, allowing for areas of gray and acknowledging that human beings cannot be pigeon-holed or exactly profiled. There is also an acknowledgement that isolated acts of physical aggression can occur in healthy relationships without a context of abuse (see Figure 1).

*Common couple aggression (CCA)* describes isolated acts of aggression that can occur in any relationship. These acts can occur in the context of an escalating argument, a period of stress, or trauma. For example, a minister at a clergy conference admitted to breaking his wife's dishes during a period of time when his mother was terminally ill, several congregants were in need of extensive aid, and he was not sleeping. This act occurred in a 20-year relationship in which there were no other acts of physical or emotional aggression or abuse.

*Common couple aggression* can be initiated by either partner. There is a balance of power between the partners, and the relationship would be described by both partners as generally loving and healthy. Genuine remorse follows the incident as neither person believes that aggression is an appropriate way to handle problems. Long-term beliefs are an

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|---|---|---|---|---|
| <p><b>Common Couple Aggression:</b></p> <ul style="list-style-type: none"> <li>- Aberrant act</li> <li>- Remorse</li> <li>- Does not cause fear, oppression or control</li> <li>- No injury</li> <li>- Comes from escalating arguments</li> <li>- Could happen in any family</li> </ul> | <p><b>High Conflict:</b></p> <ul style="list-style-type: none"> <li>- Do not solve problems well</li> <li>- Anger is an issue in family</li> <li>- May have remorse</li> <li>- May have sporadic physical aggression and/or destruction of property</li> <li>- Not emotionally abusive</li> <li>- No fear</li> <li>- Comes from escalating arguments</li> </ul> | <p><b>Abuse:</b></p> <ul style="list-style-type: none"> <li>- Sporadic physical aggression</li> <li>- Name-calling, but not character assassination</li> <li>- Verbal abuse, but not psychological</li> <li>- Development of apprehension</li> <li>- May be remorseful</li> <li>- Threats of abandonment</li> <li>- Aggression takes place without witnesses</li> </ul> | <p><b>Battering:</b></p> <ul style="list-style-type: none"> <li>- Monopolization of perception</li> <li>- Generally more regular physical abuse, but may occur without physical</li> <li>- Threats to victim's support system</li> <li>- Isolation</li> <li>- Name-calling that attacks character</li> <li>- Threats to kill self or others</li> <li>- Jealousy</li> <li>- Putting down friends and family</li> <li>- Destruction of Property</li> <li>- Self-Absorbed</li> <li>- Sexual abuse</li> <li>- Change in victim's personality</li> <li>- More generally violent</li> </ul> | <p><b>Terrorism/Stalking:</b></p> <ul style="list-style-type: none"> <li>- Monopolization of perception</li> <li>- Insidious psychological abuse</li> <li>- Well-thought out threats to kill</li> <li>- Torturing pets</li> <li>- Extreme isolation</li> <li>- Generally more regular physical abuse, but may occur without physical</li> <li>- Sexual humiliation and degradation</li> </ul> |
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**FIGURE 1** LaViolette continuum of aggressive acts ranging from Common Couple Aggression to Terrorism.

important aspect of the continuum as healthy human beings do not believe destructive behavior is a solution to problems or a positive way to handle conflict.

When this isolated act of aggression occurs, there are no long-term emotional consequences. Fear, oppression, and control do not characterize this relationship. These acts are not motivated by the aggressor's pervasive insecurity, fear, or need to control his partner. Physical injury is seldom an outcome, and if present, it is generally mild and does not result in the development of chronic apprehension.

This author has seen healthy anger called abuse when it is expressed in a way unfamiliar or uncomfortable to the individual judging it. Physical aggression directed at an intimate is not a good way to handle stress, but it does happen in healthy relationships. Age is also a factor. Younger people (both male and female) are more likely to use aggression to handle conflicts and to argue about issues that older couples might disregard. Developmentally, healthy younger couples may lack the "on the job" experience that older couples acquire based on their years of experience with each other. It may be helpful for the reader to flash back to his or her own early experiences in relationship. If relationships are basically respectful partnerships, they retain their friendships with one another.

*Conflictual* relationships are characterized by an inability to ameliorate conflict and frequent or intense arguing. The arguments are unproductive. These relationships may include sporadic acts of physical or emotional aggression. There is no pattern of coercion, no build-up of apprehension, and no imbalance of power. There is, however, an erosion of the couple's friendship. These couples often "show up" for marriage counseling years after they have lost positive feelings for each other.

The mood in the relationship is often one of resignation (e.g., "This is as good as it gets"). The motivation for the aggressive behavior usually comes from lack of knowledge rather than a need to control the other partner. The term "mutual" is more likely to apply to these couples. These relationships are not healthy, but they would not be classified as abusive. They may yell, they may curse at each other, they may occasionally slam doors, but they do not fear each other.

Persons who use abusive tactics (Calgary Counseling Centre, personal communication, May 2006) most often come from families in which they were exposed to aggression and/or violence. Many have developed "chronic combat readiness." They may display symptoms of post-traumatic stress disorder (PTSD). These symptoms do not reappear until they face the powerlessness they experienced as children—the powerlessness they feel in their adult intimate relationships.

This is usually true for men and women who are abusive. However, the socialization of males and females in most cultures also promotes a hierarchy with men on the top. Much like racism, homophobia and other oppressions,

everyone is affected by the smog of sexism, and sexist attitudes can exacerbate violent entitlement in an already abusive personality.

Research and clinical work with the perpetrators of domestic violence indicate that a majority suffer from conditions in addition to the effects of sexism. These conditions include depression, anxiety, delayed trauma, and other disorders (Dutton, 1998; Hamburger & Hastings, 1991; Sonkin & Liebert, 2001). Substance abuse is also a common problem for perpetrators of IPV (Dutton). At the very least, fear is a pervasive underlying emotion.

Abusive behavior is varied, and the range of behavior is indicated by three points on the continuum (*Abuse*, *Battering*, and *Terrorism*). There is also variation indicated by the space between categories. These are not linear divisions, but rather descriptions that could aid in creating a context for assessment and intervention. This continuum should not stand alone but can be used with other assessment tools. It, along with other tools, cannot be used effectively without the most significant ingredient: sound judgment.

*Abuse* is characterized by a pattern of aggression that is often not motivated by the intention to control and intimidate, but most often it will have that effect. Physical assaults generally include grabbing, pushing, shoving, slapping, hitting, and restraining. Injuries can include redness, bruises, scratches, and cuts. The acts and the injuries could be considered “low level,” but the emotional consequences can be significant. These victims can be afraid and apprehensive.

Verbal abuse can include screaming, yelling, generic name-calling (“bitch,” “bastard,” and other nasty epithets), and sarcasm. It does not include character assassination (“you’re a rotten parent,” “stupid,” “fat,” “ugly,” “nobody will ever want you,” etc.). The physical and verbal abuses are more likely to occur within the confines of the nuclear family and not in front of witnesses.

The emotional abuse seen at this level is limited relative to that seen in battering or terrorism. Individuals who behave abusively do not tend to isolate their partners from family or friends. These couples often have friends and can “look good” socially. Perpetrators in this group may be mildly jealous, withdraw, and pout but usually not to the point of controlling their partners. Many of these individuals are not jealous. Rigid gender roles are not usually part of these relationships. These couples may share in parenting their children and in household chores.

Threats are generally around the issue of abandonment. Threats to leave, to cheat, to withhold money, or to divorce are not uncommon. Threats do not usually include harming the partner or anyone else. They are more general than specific. Erratic behavior such as wild driving can be part of the threatening behavior. Many of the individuals in BIPs have long periods of time between incidents, particularly physical assaults.

Destruction of property is often part of the abusive pattern. Throwing things, punching walls, kicking inanimate objects, and jumping on furniture

have all been reported in perpetrator's programs. One participant in a BIP came into the program after his wife and children had left. He was shocked and distraught. He said, "But I never hit anybody." He punched holes, threw things, and frequently yelled. The family walked on eggshells. He struggled to understand that his wife and children lived in chronic apprehension of his outbursts. They also believed they could be the next targets of his rage.

Sexual abuse tends to be motivated by fear in this group of men. Most abusive individuals are fearful. After an incident, they can become afraid that their partners will leave them. They may push to be sexual to get close and to alleviate their own fear. They are not thinking about their partner's feelings. Their intention is probably not to humiliate or degrade, but that may be the outcome. There is often a "the world as it affects me" mentality.

Incidents of abuse can be followed by guilt and remorse. Guilt can prevent these individuals from setting appropriate boundaries. When tapped into, chronic guilt can ignite the fuse on pent-up anger and powerlessness.

The behaviors of abusers can lead to the development of apprehension on the part of the non-abusing partner. When interviewed, many partners of BIP group participants will say they are not afraid until they are asked how they feel when their partners get mad. Then they will often talk about feeling cautious or anxious. The development of chronic apprehension comes from the anticipation of negative outcomes. It also leads to emotional depletion. An abused partner may not truly rest if he or she is anxious all the time.

*Battering* behavior generally involves more frequent physical outbursts. This type of behavior may also have more severe results for the victim, both physically and emotionally, than abusive behavior. Assaults can include multiple hits, punches, kicks, choking, etc. Persons who physically abuse their intimate partners may also be violent in non-family environments. There is, in this group, more likely intention to hurt or harm their partners. These physical assaults can lead to the development of greater and more obvious fear on the part of the victim.

The verbal abuse tends to get more personal. Name-calling, putdowns, and insults can be directed at the partner's physical, emotional, or intellectual characteristics; job; friends; and family. This behavior can occur in front of other people and at public places. The side effect of public outbursts or sarcasm is an exacerbation of what the individual may already experience when the rage is private.

Psychological abuse can include isolating or attempting to isolate the partner. There may be threats of suicide, homicide, or other forms of harm. One participant in a BIP talked about beating his head against a wall when he argued with his partner so that she would stop. Another man in the program dragged his wife outside and poured gasoline on himself and screamed at her that "this is what you make me do" as he had a lighter in his hand. Threats may be tied to behavior that is already occurring (e.g., threats to take money

although already in control of it, they may also include weapons or forms of jealous behavior). There is greater range in the forms of emotional abuse.

Rigid or more explicit gender roles tend to be part of heterosexual relationships. The belief system can be characterized by a sense of entitlement. There may be greater expectations from partners who believe they are entitled to gender-specific demeanor and behavior (submissiveness, cooking, cleaning, caring for children). GLBT relationships may not exhibit rigid role behavior, but they certainly may be characterized by entitlement.

Destruction of property may become more severe and directed at objects that have meaning to the non-violent partner. A participant in the author's program, Alternatives to Violence (ATV), raged at his wife, and in the process, destroyed her \$25,000 crystal collection. One of the battering women in the program ripped up her husband's irreplaceable photographs of his deceased mother.

Sexual batterers are often more coercive than are the individuals at the abusive point on the continuum. The sexual battering can include assaults. These assaults can occur during the rape or after. Sexual behavior in a battering relationship can feel intense (when it is not abusive). This intensity is sometimes described by both the perpetrator and the victim as passion. Fear can be disguised as passion.

Battering behavior is likely to set up a pattern of reactivity in the victimized partner. It is very difficult to think clearly if a person is anticipating the future behavior of a partner who is intimidating. Battering is more overtly intimidating and controlling than abusive behavior. There is a pattern of more generally-expressed aggression. Battering can also be less physical and more psychological in nature; however, it is less insidious than terrorism. One of the byproducts of more extreme battering and terrorism is a change in the victim's personality.

*Terrorism* includes behaviors that are more frequently and more severely expressed. These behaviors can be of a physical or psychological nature, but more often they include both. There are persons who are psychological terrorists and do not physically or sexually assault their partners; they do not have to. Their behavior is threatening enough to control their partners.

Physical violence can include multiple attacks during an incident, assaults with a weapon, and life-threatening behaviors. More often, it involves severe injuries at some time during the relationship (broken bones, burns, strangulation trauma). These are the people we most often read about or observe on television or in movies like "The Burning Bed or Sleeping with the Enemy." They are closer to the one-dimensional media stereotypes than the other two groups (and the range in between). However, most of the perpetrators initially demonstrate (or do have) more than one dimension or they would not have intimate partners.

Psychological terror includes mind control (monopolization of perception). In other words, the victim of these tactics loses an individual

worldview and begins to see the world through the eyes of his or her terrorist. Mind control happens in a context of extreme isolation and fear. The worst cases of domestic violence seem to positively correlate with the most extreme isolation. Controlling behaviors such as disabling vehicles, destroying emotionally significant items (to the victim), disabling phones or computers, installing spyware and GPS equipment in the victim's blackberry or car (high-tech stalking), torturing or tormenting pets, and depriving the victim of sleep can be part of the pattern. The list of insidious behaviors could go on.

Verbal violence is extreme. There can be personal attacks on the victim's integrity, intellect, physical appearance, job performance, social skills, and parenting as well as on his or her friends and family. These verbal assaults can be part of a private or public (or combined) campaign. One of the participants in ATV posted signs at his girlfriend's workplace, claiming she was a slut and had venereal disease. He also advised co-workers not to get close to her as she was contagious. All of this was untrue.

Threats to kill self or others can be embellished by descriptions of how it will be accomplished. Threats can be made while brandishing a weapon. There may be threats to kill children or to take them away forever. Threats are made that include details of humiliating or degrading acts. Threats can be exacerbated by violence directed at others in the presence of the victim. Thus, vicarious trauma can become entrenched in the miasma of terrorism.

Destruction of property can be extreme. One survivor reported that her husband broke every piece of glass in the house, pulled all of the plants out of their pots (she was a gardener), punched holes in all of the canned goods, took the frozen food out of the freezer, and took a hammer to the piano. He completed his reign of terror by holding her hostage overnight. A participant in ATV set his girlfriend's car on fire.

Sexual violence can be more physically and psychologically assaultive. The perpetrator is most often motivated by the intention to humiliate and degrade his intimate partner. The victims of these acts often experience shame similar to that of an incest survivor. They often feel culpable. One survivor of sexual terrorism said to an advocate, "I'm afraid if I tell you what he did to me you won't like me anymore."

"Normal stalking" (the author's term) is often seen in the range from abuse through battering. Normal stalking occurs in the context of IPV, in part, because neither party believes the other. The abused partner does not believe her intimate perpetrator will stop perpetrating, and the abusive partner does not believe the survivor will leave. The abusive individual is used to cajoling, apologizing, manipulating, and threatening—whatever it takes—to get his partner to forgive and to stay. The intimidator has reason to believe these things will work because they have in the past. They continue their efforts to persuade their abused partners to return, even if it means violating protective orders.

In cases of “normal stalking,” phone calls, unexpected visits, notes, and other contacts diminish once the aggressor recognizes that the partner means what he or she says and will not return. Once a terrorist understands that his or her partner means business and wants no further contact, the stalking behavior can escalate.

One of the byproducts of terrorism, and in some cases battering, is a change in the survivor’s personality. An outgoing, happy, productive individual can become closed off, depressed, and unable to function effectively at work. The key ingredients to this transformation are isolation and a threat to an individual’s psychological and physical well-being.

Both batterers and terrorists are more likely than abusive persons to directly abuse their children. They may behave in more emotionally inappropriate ways, be physically abusive, and be psychologically manipulative. Individuals who fall anywhere along the continuum (from abusive to terrorist) can be naïve regarding the nuances of their behavior and can be unaware of its impact on their children. All of this information should be considered when making assessments and creating effective interventions in domestic violence cases.

There are also factors that affect and can exacerbate each area of the continuum. One of these factors is the family of origin. The impact of learning, beliefs, and traumatic experiences that occur within the family context cannot be ignored in assessment. Each individual learns his or her emotional language and relational skills within the family or with the individuals with whom they are living during their formative years. Participants in BIPs most often report abuse at some level within their families. Many report intergenerational violence. Many of the participants do not recognize the violence; they call it discipline.

Substance abuse is often a factor in domestically violent homes. It is not primarily a causative factor but often a concomitant factor. Most substances do not directly cause violent behavior, but they are disinhibitors. Mental health issues can also be present with many of the individuals in BIPs. To participate in a group setting, individuals have to be mentally functioning, but most have experienced trauma in their childhoods. Some of them were the children of the women who lived in shelters all over the country. In addition to the factors that can negatively affect abusive behavior, it is also important to consider factors that mediate the quality and severity of violent behavior. For example, one of the group members in ATV had spent most of his adolescence and adult life in jail or prison. His last incarceration involved a conviction for voluntary manslaughter. He had a history of alcoholism and drug addiction, violent intimate relationships, and an extremely violent family of origin. He had abused his current girlfriend. Given this information, he would be seen as an extreme batterer, and maybe a terrorist, which is not a pretty picture. The information that often eludes the individuals making assessments is the collateral data that might mediate the level

of dangerousness. Individual resources, community support, attachment to other people and to a job, and personal strength can all affect the outcome of anyone's story.

This particular man had four solid years of recovery. He met several times a week with his long-time sponsor and attended a minimum of two AA meetings a week. He voluntarily enrolled in a BIP and chose one in which he was told (by a friend who had been a participant) that he would be held accountable for his behavior. He negotiated a fee he could regularly afford. One of the most important mediating factors was his job: He had recently gotten his dream job. Those factors were all significant in ameliorating his violent behavior.

It is important to note that men are the primary perpetrators at the battering-terrorism end of the continuum. According to Geffner and Rosenbaum (2001, p. 2): "Women may hit their male partners, but infrequently batter them, because battering or abuse includes a pattern of coercion, intimidation and control, which is less frequently present in female to male aggression." Isolated acts of aggression do not equate to a battering relationship. It is not to say there are no battering women in both lesbian and heterosexual relationships, just not in as great numbers (Bureau of Justice Statistics, 1998; Rennison & Welchans, 2000; Tjaden & Thoennes, 2000).

The continuum has been used in conjunction with other assessment tools to describe abusive behaviors and prescribe possible interventions. More accurate assessment informs more appropriate intervention. The one-dimensional stereotype, the "Attila the Hun" batterer, represents the smallest percentage of participants in batterer intervention programs. Most of these terrorists are either in jail or are not interested in changing.

Using that description (terrorist) to describe all abusive individuals has backfired in criminal and child custody cases as so many of the defendants and litigants do not fit into that category. I believe it is time to refine our work, to make our interventions work for the people they affect the most: the victims and perpetrators of abuse.

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