



Calling 911 during episodes of domestic abuse: What justifies a call for help?

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Abstract

This preliminary investigation built on the work of Johnson and Sigler (2000), indicating that the public was highly intolerant of wife abuse and increasingly willing to criminalize its occurrence. Videotaped or written scenes containing domestic violence were presented to college students who were asked to indicate the seriousness of each situation, as well as respond to the question, “Is a call to 911 emergency services justified?” The results suggested that these participants were highly intolerant of both physical and nonphysical spousal abuse and that they reliably viewed 911 calls to be justified following scenes with physical violence and no physical injury, as well as scenes with verbal threats, but no physical violence.

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Introduction

In the U. S., approximately four million women are subjected to a severe assault by intimate partners each year (APAOnline, 2000). Furthermore, only about half of the episodes of intimate partner violence tend to be reported to police (U.S. Department of Justice, 2000) based on data from 1993 to 1998. Definitions of domestic abuse appear to have broadened in the last two decades, so that the public has become less tolerant of wife abuse and more willing to criminalize abusive behavior (Johnson & Sigler, 2000). Little is known about public perceptions of the specific circumstances in which emergency services should be contacted during episodes of domestic abuse. In the present research, male and female college students were presented with videotaped or written presentations related to domestic violence. Half of the participants were told that the female victim had been

hospitalized with severe injuries in the past, resulting from domestic disputes. Other participants were told innocuous information about the female victim. Following each abusive scene, participants were asked to rate the seriousness of the scene and respond to the question, “Is a 911 call justified?”

Methods in Study 1: videotaped scenes of violence

Participants were thirty-eight females and ten males, ranging in age from eighteen to twenty-seven years ($M = 18.63$, $SD = 0.71$). They were recruited in a general psychology course and received course credit for participation, although alternative opportunities were offered to earn the same credit. Testing took place in a lecture hall outside of the class period.

For ethical reasons, participants were forewarned that they would be watching videotaped scenes that could cause psychological discomfort, due to violent content. At the start of the session, participants were asked to complete the Crowne and Marlowe (1964) test of social desirability to determine their individual tendencies to respond to test items in a socially

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Table 1
Brief descriptions of the male character's actions in selected scenes from "The Burning Bed" (1980), a made-for-television movie, starring Farrah Fawcett and Paul LeMat

Scene 1:	Mild verbal insult between apparent strangers
Scene 2:	Gently attempting to touch female's breast while necking and stopping when requested
Scene 3:	In presence of adult family members: yelling, chasing, shoving, ripping clothes, and punching wall
Scene 4:	In presence of adult friends: attempting to control daily activities and slapping female's face
Scene 5:	Alone together: giving compliments and a gift
Scene 6:	In presence of children: aggressively initiating sex, ignoring requests to stop sexual contact, shoving, verbally threatening female, physical restraint, banging female's head against wall, and kicking
Scene 7:	Alone in bed: gentle (but threatening) touch to female's neck and verbal threat of murder
Scene 8:	In front of children: throwing inanimate object, physical contact that visibly causes pain, and slamming stove shut
Scene 9:	In front of children: threatening gestures and intimidating body posture, destruction of personal property, hitting, choking that is life-threatening, and shoving
Scene 10:	In front of children: using inanimate objects to intimidate, shoving, throwing objects, physical restraint, pushing face to floor, and causing facial bleeding

desirable fashion. Then, ten videotaped scenes were presented from the 1980 made-for-television movie, "The Burning Bed," co-starring Farrah Fawcett and Paul LeMat. These scenes were selected to represent both violent and nonviolent interactions between a husband and wife (see Table 1). Participants were randomly selected so that half of the females and half of the males were informed that the woman in the videotaped scenes had previously been hospitalized with serious injuries relating to domestic violence, whereas the remaining participants were told innocuous information about the woman. Immediately following each videotaped scene, participants were asked to respond to a series of questions regarding their personal reactions, including ratings of the perceived "seriousness" of each videotaped scene ranging from 0 (*not serious*) to 10 (*very serious*), as well as whether victim calls to 911 emergency services were justified.

Findings

Participants' social desirability scores were not significantly correlated with their mean ratings of

"seriousness" for the first videotaped scene showing domestic violence (i.e., Scene 3; $r = 0.13$, $n = 48$, $p > 0.05$), nor with the mean "seriousness" ratings for the first two videotaped scenes (i.e., Scenes 3 and 4) showing domestic violence ($r = 0.23$, $n = 48$, $p > 0.05$). Furthermore, social desirability was not correlated with the mean reported "seriousness" of the last two videotaped scenes (i.e., Scenes 9 and 10) showing domestic violence ($r = 0.25$, $n = 48$, $p > 0.05$), although the latter approached significance. Mean "seriousness" ratings for the first and last two violent scenes were strongly correlated with each other ($r = 0.29$, $n = 48$, $p < 0.05$). The total number of times that participants said that 911 should be called for the ten videotaped scenes was not correlated with participants' social desirability scores ($r = -0.07$, $n = 48$, $p > 0.05$), nor with the overall mean "seriousness" ratings for the ten scenes ($r = 0.17$, $n = 48$, $p > 0.05$).

Most interesting, the majority of participants indicated that emergency services should be called in a domestic situation that involved physical abuse and no injury (Scene 3; 63 percent of all participants), as well as in a situation with verbal threats and no physical violence (Scene 7; 88 percent of all participants). For Scene 5, which showed neither physical abuse nor verbal threats, but was presented following scenes with abusive episodes, only 13 percent of the participants said that a call to emergency services was justified. For participants who were initially informed that the woman in the videotaped scenes had previously been hospitalized with serious injuries relating to domestic violence, the mean "seriousness" rating for Scene 3 was 8.79 ($SD = 1.21$), compared to 7.83 ($SD = 1.55$) for participants who were not given this information. This difference achieved significance ($F(1, 46) = 5.68$, $p < 0.05$). Information about the woman's history with domestic violence had no effect on participants' mean "seriousness" ratings for Scene 5 (no violence), nor on their "seriousness" ratings for

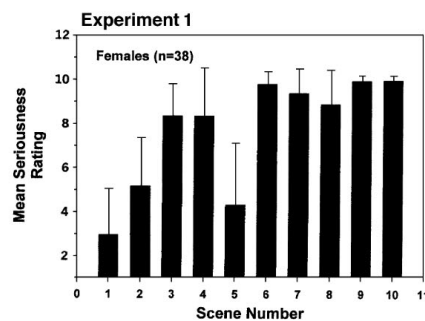


Fig. 1. Mean Seriousness ratings of videotaped scenes in female participants.

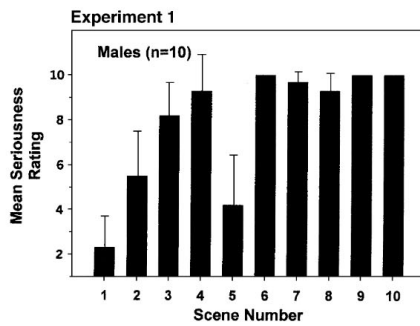


Fig. 2. Mean seriousness ratings of videotaped scenes in male participants.

Scene 7 (verbal threat of violence, all $p > 0.05$). Furthermore, mean “seriousness” ratings increased significantly from the first to the last two violent scenes ($F(1,46) = 59.88$, $p < 0.05$), although there was no significant difference in these measures as a function of whether participants were told about the woman’s hospitalization ($F(1,46) = 0.15$, $p > 0.05$), and no interaction effect ($F(1,46) = 0.10$, $p > 0.05$). Finally, there were no apparent differences between male and female participants in these mean “seriousness” ratings (see Figs. 1 and 2).

Methods in Study 2: written scenes of violence

Participants were twenty-two males and 159 females enrolled in the general psychology course during the subsequent semester. Comparable alternatives for earning course credit were again provided.

The procedures for Experiment 2 were similar to those in the first experiment, except that the number of scenes was reduced to three (i.e., Scenes 3, 5, and 7), including one nonviolent scene, a scene with physical abuse, and a scene with a verbal threat, but no physical abuse. These three scenes were transcribed in detail from the videotape and presented in written format, allowing convenient control of potential order effects. Following the presentation of each written scene, participants were again asked to respond to a series of questions regarding their personal reactions, including their opinions about the seriousness of each situation and whether victim calls to 911 emergency services were justified.

Findings

Social desirability scores were not significantly correlated with mean ratings of “seriousness” for



Fig. 3. Mean seriousness ratings of written scenes in female participants.

Scene 5 (nonviolent scene; $r = -0.08$, $n = 181$, $p > 0.05$), nor with mean ratings of “seriousness” for Scene 7 (scene with verbal threat; $r = 0.02$, $n = 181$, $p > 0.05$). On the other hand, social desirability was significantly correlated with mean “seriousness” ratings for Scene 3 (scene containing physical abuse; $r = 0.18$, $n = 180$, $p < 0.05$). Mean “seriousness” ratings for the two scenes with domestic abuse were strongly correlated with each other ($r = 0.69$, $n = 180$, $p < 0.05$). The total number of times that participants said that 911 should be called for the three videotaped scenes was not correlated with social desirability scores ($r = -0.03$, $n = 177$, $p > 0.05$), nor with the overall mean “seriousness” ratings for the three scenes ($r = 0.04$, $n = 180$, $p > 0.05$).

As in the previous study, the majority of participants indicated that emergency services should be called in a domestic situation that involved physical abuse and no injury (83 percent of all participants), as well as in a situation with verbal threats and no physical violence (84 percent of all participants).

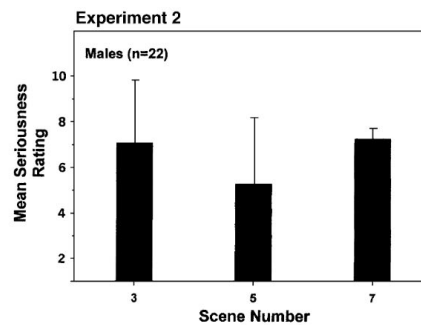


Fig. 4. Mean seriousness ratings of written scenes in male participants.

For Scene 5, which showed neither physical abuse nor verbal threats, 25 percent of the participants said that a call to emergency services was justified. For participants who were not informed regarding the woman's previous experience with domestic abuse and who observed Scene 5 prior to the two scenes with domestic abuse, only 14 percent said that a call to emergency services was justified.

Manipulation of participants' awareness that the woman in the written scenes had previously been hospitalized with serious injuries relating to domestic violence did not have a significant effect and there were no interaction effects with the order in which the three scenes were presented (all $p > 0.05$). Finally, although there were substantial differences in the numbers of male and female participants, these data did not reveal gender effects in mean "seriousness" ratings for the three scenes (see Figs. 3 and 4).

Conclusion

In two studies, research materials were tested and preliminary data collected to investigate public perceptions of the forms of domestic violence episodes that justify calls to 911 emergency services. The findings presented here were consistent with those of Johnson and Sigler (2000) regarding the public's intolerance of wife abuse. Participants in the present investigation were highly intolerant of both physical and nonphysical wife abuse, indicating that 911 calls were justified following domestic abuse episodes with physical violence and no physical injury, as well as following episodes with verbal threats, but no physical violence.

In the first study, informing participants regarding a woman's prior history with domestic abuse resulted in a greater likelihood that they would say that a call to 911 emergency services was justified, for only one of ten videotaped scenes. Information about the woman's history of domestic abuse had no effect on participant responses in the second study. Therefore, it would appear that these participants were making their judgments based on the facts presented in each situation, regardless of the woman's history of domestic abuse. Although fewer males than females participated in this study, an examination

of the mean "seriousness" ratings in these two studies failed to reveal gender differences in the participants' reactions to scenes of domestic violence. Future directions for this research will involve a more systematic investigation of possible gender effects, using digitized presentations of domestic violence to the general public. It would also be interesting to test professionals who work in law enforcement, to determine if their responses differ from general societal reactions to various forms of domestic violence.

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Notes

1. Co-authors can be contacted via the same departmental address.

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