Chapter One

Setting the Stage

> In the Arab-Muslim world, argues David Landes, certain cultural attitudes have in many ways become a barrier to development, particularly the tendency to still treat women as a source of danger or pollution to be cut off from the public space and denied entry into economic activities. When a culture believes that, it loses a large portion of potential productivity of the society. A system that privileges the men from birth on, Landes argues, simply because they are male, and gives them power over their sisters and other female members of society, is bad for the men. It builds in them a sense of entitlement that discourages what it takes to improve, to advance, and to achieve. This sort of discrimination, he notes, is not something limited to the Arab Middle East, of course. Indeed strains of it are found in different degrees all around the world, even in so-called advanced industrial societies. (Friedman 2006, 412–13)

Every scholar of any topic must begin by examining the work on which his or hers is built. A thorough understanding of previous research is critical to advancing knowledge in any field. Similarly, it is not enough to simply describe a social phenomenon; if we truly seek understanding then we must ground these descriptions in a theoretical framework. This chapter provides the reader with some statistics that create a context for understanding intimate partner violence, a review of previous research on IPV, and a review of the race, class, and gender paradigm which provides the theoretical underpinning for this book. Because intimate partner violence can mean many things to different people, I begin with some definitions that will be employed in this book.

DEFINITIONS

Intimate partner violence (IPV) refers to the physical, emotional, psychological, and sexual abuse that takes place between intimate partners. The focus

of this book is limited to a discussion of violence between heterosexual partners. I do not use the term "domestic," as I am not referring to violence that occurs between other members of the domestic household, such as the abuse of children by parents. In addition, "domestic" implies a shared residence. Many of the casualties of IPV do not live together, or the violence began before they moved in together and often continues long after they physically separate. Finally, I choose the term "intimate partner" rather than "domestic partner" in order to underscore the nature of the relationship—these are intimate partners who claim to love each other—yet they may or may not be legally married. IPV is present in both marital and cohabiting relationships. I do not differentiate between these legal statuses but rather focus on the intimate nature of the relationship.

Intimate Terrorism versus Situational Couple Violence

As noted above, I prefer the term "IPV" to others that are also common in the field, such as "domestic violence" and "battering." However, as noted in the definition above, IPV involves many forms of violence, including physical violence. Because this is the case, I sometimes use the term "battering" or "men who batter." This is in recognition of both the physical violence that takes place and the need to utilize clear language.

Among scholars of IPV a critical debate centers on "mutual combat," a term coined by Gelles and Straus (1988). Michael Johnson and his colleagues have extended this debate and attempted to distinguish between two different forms of IPV: (1) situational couple violence and (2) intimate terrorism. These corresponding forms of violence against women differentiate themselves in terms of the *lethality* of the violence and the *level of control* in the relationship.

> The importance of categorizing types of violence, rather than viewing partner violence as a continuum of severity or frequency of physical violence, rests on the assumption that intimate terrorism and situational couple violence involve qualitatively different patterns of control rather than high or low levels of physical violence. (Leone et al. 2004, 473)

Intimate Terrorism: Johnson and his colleagues (Johnson and Ferraro 2000; Leone et al. 2004) describe intimate terrorism as "a partner's attempt to exert control over his partner using a broad range of power and control tactics, which include physical violence" (2004, 473).

Situational Couple Violence: In contrast, situational couple violence "does not exist within a general pattern of controlling behavior. This form of

violence is not motivated by a desire to control and overpower a partner or a relationship, but rather occurs when specific conflict situations escalate to violence" (Leone et al. 2004, 473).

Though these distinctions may be important, especially to practitioners and intervention specialists, I find them to be problematic for two reasons: (1) this distinction often blurs or hides the ways in which IPV is about gender and power, and (2) the fact that in many violent relationships both types of violence exist.

The data collected, analyzed, and presented in this book come primarily from men and women whom Johnson and his colleagues would define as engaging primarily in "intimate terrorism." This is a function of the data collection strategies employed for my study. It is not problematic, however, because the analyses in this book are not based on the schematic developed by Johnson and others but rather on the race, class, and gender paradigm. Furthermore, unlike most of the studies conducted by Johnson and colleagues that rely on large-scale, mostly superficial data collection techniques, this book is based on thick descriptions generated by in-depth, life history interviews and weaves the stories both of women who are battered (and sometimes batter back)[1] and men who batter, shedding light on the often hidden details of intimate partner violence as it is experienced by men and women in America.

A BRIEF HISTORY OF THE DOMESTIC VIOLENCE MOVEMENT

The earliest research on "domestic" violence dates to the 1970s. The second wave of feminism with all of its consciousness raising, support groups, public marches, and rhetoric brought battering to the mainstream discourse. Women like Susan Brownmiller and Lenore Walker helped to bring battering to the attention of lawmakers and law enforcement agencies.

During the late 1970s and early 1980s shelters for battered women began to spring up all over the country, though they are still outnumbered three to one by shelters for abandoned animals (Browne 1987; Koss et al. 1994). More recently, researchers and advocates for victims of domestic violence have put together protocols for dealing with domestic violence that have been codified into laws such as mandatory arrest. Yet we still know very little about the inner workings of IPV, and we are still relatively unsuccessful in reducing its prevalence.

Domestic violence remains a misdemeanor in most states, punishable by probation rather than jail time. In fact, in many communities batterers can opt for a treatment program (as many of those interviewed for this book did) and

forgo jail time altogether. In these treatment programs batterers learn the rhetoric, but they seldom cease battering. Most of the men whose stories are told in this book admitted openly and freely that they were still in abusive relationships with their partners, and some admitted, or their partners confessed, that battering episodes had occurred just a day or two prior to my interview.

SOME FACTS

From Durkheim (1982, 50–59) we learn that "social facts" are things. That is, they prove the existence of a social reality in addition to an individual reality. In order to understand the power of the stories of the women and men that are told in this book, we must first have a context for these experiences. Statistics on IPV provide an appropriate context that allows us to better interpret these experiences. The statistics on women who are battered are followed by statistics on men who batter.

Women Who Are Battered

Many women in the United States experience violence within their own homes, exacting from them severe physical, emotional, and economic costs (Browne 1987; Koss et al. 1994). The Centers for Disease Control (2006) estimates that women are nine times more likely to be injured in their homes than in the streets; domestic violence accounts for more injuries to women than car accidents, muggings, and rapes combined (Browne 1987). In 2006 women *reported* 4.8 million acts of violence.

Domestic violence can also be lethal; 1,544 women were murdered in 2004 by their intimate or former intimate partners (Centers for Disease Control 2006). Domestic violence homicide accounts for 33 percent of all female homicides each year (Rennison 2003; *USA Today* 2003) with beatings being the most common method of murder (Browne 1987; Fields 1977–1978).

In addition to the injury tolls associated with intimate partner violence, it has many other negative consequences for women. Intimate partner violence forces many women into poverty and homelessness both during and after marriage and partnership; in fact an estimated 25–50 percent of homeless women left violent homes (Mason 1993). Also, the majority of women who are welfare (TANF) recipients have experienced IPV (Brush 2000, 2001; Brush, Raphael, and Tolman 2003; Renzetti 2001; Taylor Institute 1997).

Intimate partner violence also affects women psychologically. Browne (1987) noted that an inordinate number of women (50 percent) whom she interviewed considered or attempted suicide; rates were higher among those who killed their abusive partners than those who did not. Many others exhibited symptoms of depression, post-traumatic stress disorder, and/or anxiety disorder (Browne 1987, Walker 1979, 1984). Psychological injury can also render women unable to hold steady jobs, thus leaving them in poverty, homeless, or simply unable to leave their abusers because they are economically unable to do so (Browne 1987; Brush 2000, 2001; Brush, Raphael, and Tolman 2003).[2] See box 1.1 for statistics on intimate partner violence in the United States.

Box 1.1. Statistics on the Impact of IPV

4.8 million acts of intimate partner violence are reported by U.S. women each year.
CDC Fact Sheet, 2006

1,544 women were murdered in 2004 by their intimate or former intimate partners.
CDC Fact Sheet, 2006

Females accounted for **39 percent** of hospital emergency department visits for violence-related injuries.
National Center for Injury Prevention and Control. 2003. *Costs of Intimate Partner Violence against Women in the United States.* Atlanta, GA: Centers for Disease Control and Prevention.

31,260 women were **murdered** by an intimate from 1976 to1996.
U.S. Department of Justice. 1998. *Violence by Intimates: Analysis of Data on Crimes by Current or Former Spouses, Boyfriends, and Girlfriends.*

25 percent of women report being raped.
Warshaw, R. 1988. *I Never Called It Rape: The MS. Report on Recognizing, Fighting, and Surviving Date and Acquaintance Rape.* New York: Harper & Row.

8 in 10 rape victims are raped by someone they know.
Centers for Disease Control, http://www.cdc.gov/nchs/fastats.htm.

1 in 4 women report having sex with their male partners when they did not want to.
Russell, D. E. H. 1990. *Rape in Marriage.* Bloomington, IN: University of Indiana Press.

Men Who Batter

Large-scale surveys (Tjaden and Thoennes 2000) reveal that approximately one in four men (25 percent) indicate that they engaged in an act of violence against their intimate partner during the previous year. The most common types of violence include slapping, pulling hair, throwing things at their partner, and "beating her up" (Tjaden and Thoennes 2000).

Given these statistics it is not surprising that the research on men who batter is focused primarily in two areas: differentiating men who batter from the rest of the male population (Hanson et al. 1997; Holtzworth-Munroe and Stuart 1994)—what makes batterers different from "regular" men—and evaluating the efficacy of interventions with men who batter (Hirschel, Hutchison, and Dean 1992; Pate and Hamilton 1992; Sherman et al. 1992).

One of the shortcomings of the existing research on men who batter is that very little has focused on the *batterers' perceptions* of the violence they engage in (Goodrum, Umberson, and Anderson 2001). Rather, what we know about the dynamics of battering in couples we have learned almost exclusively from the accounts of the female victims (Browne 1987; Goodrum, Umberson, and Anderson 2001).

In that context, the vast majority of research that relies on the voices of batterers is focused on evaluating various intervention programs. A variety of programs have been implemented with limited success in treating battering primarily because, according to Adams (1988), they seldom incorporate the victim's perspective into treatment. Rather, Adams suggests that many interventions attribute the battering to external forces, such as alcoholism or depression. By designing treatment protocols around these "social problems," which are clearly linked to battering (Hanson et al. 1997), instead of the core issue, which Adams defines as the batterer's need to retain and enforce power over his partner, many interventions are only moderately effective (Adams 1988; Hattery, Williams, and Smith 2004).

Other scholars have noted that batterers use denial to protect their self-concepts, often failing to acknowledge the inappropriate nature of their actions; batterers have very little understanding of the violence from the perspective of their wives or partners. These researchers speculate that batterers have a limited ability to take the role of the other in the context of this power relationship (Goodrum, Umberson, and Anderson 2001). Thus, Adams (1988) suggests that a successful intervention requires the identification and understanding of the ways in which both partners perceive the violence in the relationship. This is similar to Scully's (1990) research with convicted rapists.

Finally, scant literature exists about nonwhite men who batter. Smith (2008) addresses this void and argues that while an examination of rates of battering shows no difference between African American and white men,

other issues need to be taken into account when trying to understand cross-cultural issues related to men who batter. Indeed, recent large-scale, nationally representative surveys have established stable estimates of the prevalence of IPV in our society—one in four women report at least one violent episode in their lifetimes, and one in four men report perpetrating IPV—and its relative blindness to social demarcations of race/ethnicity, social class, or region of the country (Tjaden and Thonnes 2000). However, recent research does identify the ways in which race (and class) shape the experiences of both battered women and men who batter (Hattery and Smith 2007a; Hill 2005; Hill-Collins 2004; hooks 2004). Though these processes and outcomes will be examined in depth in chapter 5, this finding that race and class influence the shape that IPV takes calls out for using the tenets of the race, class, and gender paradigm to contextualize and analyze the data presented in this book. Thus I turn now to a brief discussion of race, class, and gender theory as it has developed to guide the research that attempts to understand and explain the phenomenon of violence between intimate partners.

RACE, CLASS, AND GENDER THEORY

This book takes a different approach to examining IPV than most others have. Rather than fitting squarely into a family violence or feminist framework—the two most common theories used to analyze IPV—the framework for the analyses discussed throughout the many chapters of this book will be the race, class, and gender paradigm. My analyses consider the ways in which IPV is experienced and dealt with differently by men and women, African Americans and European Americans, the working class and poor, and to a lesser extent, the affluent.

I argue that the most effective way to analyze and explain the phenomenon of IPV is through the lens that focuses our attention on the context of a web of intersecting systems of oppression: primarily the systems of racial domination, class oppression, and patriarchy. This assumption guides the analyses which will examine the various ways that these systems (racism, sexism, and classism) work independently and intersect, become mutually reinforcing, and thus shape the contours of IPV.

Every system of domination has a countersystem of privilege. In other words, oppression is a system of both costs and benefits. For example, we know that African American men die prematurely: seven or eight years earlier than their white counterparts (Hattery and Smith 2007a). Generally a discussion of this gap in life expectancy focuses on the reasons that

African American men die early, including jobs that involve physical labor, poverty, lack of access to health care, discrimination, and the stresses associated with being an African American man. Yet, a race, class, gender framework forces us to ask the opposing question: why is it that white men live so much longer? Posing the question this way reveals that the gap is also created by the fact that white men tend to have more access to white collar employment, the best quality health care, and their affluence affords them the ability to have the "dirty" work in their lives taken care of by others, mostly African American men and women. Thus the intersection of race and social class creates *simultaneously* a disadvantage for African American men and an advantage for white men. Furthermore, when we dig deeper into this question of life expectancy, we see that significant gender differences exist as well. Specifically, not only do women live longer than men, but the racial gap is significantly smaller for women than for men. In short, our understanding of racial disparities in health and illness are improved when we layer these explanations: focusing not only on gender or race, but on the ways they interact to produce outcomes that vary by both statuses.[3]

At the structural level, the race, class, and gender framework illuminates the ways in which different systems of domination are mutually reinforcing: patriarchy is woven with racism (or race supremacy), both of which are woven with capitalism. For my work then, the race, class, and gender perspective provides a framework for understanding, for example, the ways in which white, affluent men feel threats to their masculinity, or beat their wives, or are dealt with at the police station—ways that are very different from the experiences of African American men who may experience different threats to their masculinity, and who are certainly exposed to a criminal justice system that can only be characterized as racially unjust (Hattery and Smith 2007a, b).

This attention to race, class, *and* gender is rather unique in the literature on IPV. For example, researchers who attempt to include the stories of a racially and ethnically diverse sample often fail to include variance by social class.[4] Furthermore, it is critical to point out that the race, class, and gender paradigm requires more than the simple inclusion of individuals of different race/ethnic groups, social classes, and genders into the sample. The paradigm also *requires* that the data be analyzed with attention to the inequality regimes based in the systems of patriarchy, capitalism, and racial domination (Acker 2006). Analyzing the data with attention to these systems of power also separates this book from much of the research on IPV, even that which includes a racially diverse or class-diverse sample.

Race and Class: Images of Batterers and Battered Women

As a society we have an image of IPV. The truth is that no description of a batterer exists. Men who batter are of all races/ethnicities, all ages, all levels of education, all different occupations, they practice all religions, and they live in all different regions of the country.

Similarly, we have an image of what constitutes a battered woman. We imagine that most battered women are poor and nonwhite. They are hit, beaten to a pulp, and often must seek serious medical help for their injuries. In so doing they show up at (1) emergency rooms, and (2) when they have little children, they become occupants of battered women's shelters. Yet, just as is the case with batterers, women who are battered come from all social locations; they are of all race/ethnic groups, all ages, all religions, all levels of education, and they live in all regions of the country. Some victims of IPV experience just physical violence whereas others experience serious emotional and sexual abuse alongside physical abuse. This book tells the stories of women and men who come from different walks of life and who have different experiences with IPV. This diversity is one of the strengths of this book.

The Question of Race: IPV in the African American Community

Because the data for this book come from a racially and ethnically diverse sample, it is important at the outset to consider some of the ways in which IPV may be shaped by race/ethnicity. I argued at the beginning of the book that IPV is the "dirty little secret" that Americans do not want to talk about. Among African Americans the subject is taboo as well (Hattery and Smith 2003, 2005). Furthermore, the underlying reasons for the taboo nature of IPV in the African American community are significantly shaped by race. Though researchers are often focused on the fluctuations and seeming contradictions among different forms of oppression within communities, often members of these communities either are not aware of or choose to remain silent on forms of internal oppression. Black feminists (King 1988; Hill-Collins 2004; hooks 2000, 2004) have pointed out, for example, the ways in which sexism and gender oppression are rendered invisible in the African American community. The concerns of African American women *as women* are dwarfed by discussions of race as well as by a fear of contributing to existing negative images and myths of African American men. The consequences of this invisibility have been deadly for African American women.

> Currently, one of the most pressing issues for contemporary Black sexual politics concerns violence against black women at the hands of Black men. . . . Much of this violence occurs within the context of Black heterosexual love

> relationships, Black family life, and within African American social institutions. Such violence takes many forms, including verbally berating Black women, hitting them, ridiculing their appearance, grabbing their body parts, pressuring them to have sex, beating them, and murdering them. (Hill-Collins 2004, 225–26)

That is, the "internal silence" within African American civil society turns out to be as dangerous as the outwardly conflicted racial violence heaped on African Americans from without. Hill sums it up nicely when she says, "Black Communities must begin facing up to the lethal consequences of our own sexism. The time is over for expecting black women to be silent about the sexual violence and personal suppression they experience in ostensible fidelity to our common cause" (2005, 171).

Intimate partner violence in the African American community is both serious and controversial. Yet, as both Hill and Hill-Collins note, it is time to begin honest discussions of the violence that African American women experience at the hands of African American men who proclaim to love them. And, though patriarchy in the African American community is tied up in ideologies of racial superiority, we need to examine both the intersections of race and gender, and we also need to deconstruct them and examine gender oppression as it exists singularly in the African American community.

The Question of Social Class

What we do not have in the accumulated data on IPV are good, accurate portraits of those women who are white and of upper-class status. What we rely on instead when we attempt to paint a picture of the upper-class victims are the cases in which a woman's story has been told, often through either a biography or a court record, or most frequently through the analytical writings of therapists. These stories are difficult to unearth. From Anna Quindlen, former op-ed writer for the *New York Times*[5] to Farrah Fawcett, the actress and sex symbol, women in the upper classes have been the victims of IPV, but their stories are rarely heard outside a tight-knit "community" of close friends and therapists. Why? They, like all battered women, are mostly afraid and ashamed to go public with their pain (Weitzman 2001).

Susan Weitzman's study of upper-class women who are battered is possible because of a particular niche that she occupies: that of therapist. As part of her practice, upper-class women who are having "trouble" in their marriages come to her for therapy, and during the course of this therapy stories of violence tumble out.

This is not the case for poor women who must seek shelter away from their batterers in ways that upper-class battered women often do not. With finan-

cial resources and a full range of social capital to draw on, these women can make choices. Poor women almost always have no choices to make. In fact, when presenting on the topic of IPV I am often asked if the women I interview seem to experience the telling of their stories as cathartic. My answer is always "yes." On one occasion a colleague in the audience said, "Do you suppose that's because affluent women can afford therapy, but the women you interview can only find therapy in a research study?" I think the answer to this is also yes. As a result, researchers have access to certain parts of the population (in this case middle-income women and poor women), and they do not have access to other parts of the population—in this case affluent women. I am grateful for studies like Susan Weitzman's, but they are less possible for sociologists to conduct.

Hence, the literature is skewed with a variety of types of accounts of poor women who find themselves in predicaments they do not control. I have found that both types of studies are limited in that they do not capture the full range of experiences and the ways they are shaped by social class. Also, race and ethnicity are almost always absent.

But perhaps the biggest flaw in previous research is that seldom do studies of IPV incorporate the experiences of *both* men and women, batterers and battered, in the same study.[6] Interviewing both battered women and the men who batter them provided me an opportunity to see both sides of the same relationships—"his" and "hers"—and also allowed me to understand more fully the ways that men, who are much less frequently included in studies of IPV, understand their own attitudes and behavior. Taken together, data from both men and women allow for richer analyses and a more complete understanding of IPV in contemporary America.[7] (A lengthy description of the methods and sampling as well as a list of the subjects, identified by pseudonym, can be found in the appendix.)

PROFILES OF THE MEN AND WOMEN WHOSE STORIES ARE TOLD HERE

The men and women whose stories are told in this book come from a variety of backgrounds. Just over half of the men and women live in the South, and the vast majority of these men and women have never lived outside the South. Most were born and raised and continue to live in the community in which the interviews were conducted. The other half of the people we spoke with live in the upper Midwest. The majority of these folks had lived their whole lives in this region of the country, though most had moved as adults to the actual community in which we interviewed. Just about half of the men and

women identify as white and the other half identify as African American. The majority of these men and women come from the lower end of the socioeconomic spectrum, most are working class, though some of them are college educated and hold professional jobs.

THE ORGANIZATION OF THIS BOOK

The book is organized so that each chapter focuses on a different issue within the discussion of IPV. Chapters 2 through 4 are devoted to the three different "causes" of IPV. One of the main risk factors for IPV among both men and women is exposure to violence in childhood and adolescence. Therefore, I begin with an examination of individuals' experiences with violence, both sexual and physical, in childhood, adolescence, and adulthood. This allows me to examine childhood exposure to violence as a potential pathway into adult intimate relationships that included violence (chapter 2). In chapter 3 I examine structural causes of IPV, specifically the ways in which three systems of domination, patriarchy, capitalism, and racial domination, shape both the risk for IPV and its contours. In chapter 4 I turn to an examination of the role that cultural factors play in the development and preponderance of IPV. Specifically, I examine social constructions of masculinity and femininity and the ways in which these constructions, as they exist in the contemporary United States, create a situation that is ripe for high levels of IPV.

The second part of the book is devoted to different outcomes of IPV. In chapter 5 I look at the ways in which race shapes the probability for and contours of IPV. Specifically, this chapter compares interracial and intraracial experiences with IPV. Chapter 6 is devoted to a discussion of the early warning signs of IPV[8] as well as the fatalistic interpretations that many victims and offenders hold about their relationships. Many battered women and their batterers believe they are destined for each other, and thus, though they desire a decrease in the violence, they do not desire to separate their lives. Chapter 7 offers a look forward. In this final chapter I propose both individual and structural transformations that would reduce the epidemic rates of IPV that so many men and women in the United States live with and are perpetuated from generation to generation.

NOTES

1. At the time of writing this book men who have been battered by their spouses and significant others had begun a movement. See http://menshealth.about.com/od/relationships/a/Battered_Men.htm.

2. In chapter 3 I return to a longer discussion of the experiences of battered women.

3. Deborah King (1988) refers to this as "double jeopardy," and Maxine Baca Zinn and Bonnie Thorton Dill (2005) refer to this as the "matrix of domination."

4. A common problem that plagues much research on IPV is that most investigations have ignored its occurrence among the affluent. IPV is far more hidden in affluent families who have more access to resources that result in their underrepresentation in social service agencies that are used to recruit subjects. For example, affluent women rarely use the battered women's shelter, and affluent men can afford legal representation that limits their required participation in court-ordered intervention programs. Similarly, the small financial incentive that is offered to subjects for an interview is less attractive to affluent potential subjects. While this study will not be able to adequately deal with IPV in affluent families, a few affluent subjects are in the sample, and their experiences will be analyzed with special attention to social class.

5. When Quindlen came to Wake Forest several years ago to speak at convocation, absent was any mention of her book *Black and Blue* that details the experience of a battered woman.

6. This sample, though small, is racially/ethnically diverse, but this is less the case when it comes to socioeconomic diversity. However, the inclusion of both men and women will perhaps be the greatest contribution of this book.

7. This book is based on in-depth, one-on-one interviews with twenty-five men who batter and thirty-five battered women. These interviews were conducted between July 2001 and August 2004. The interviews were conducted by me and several colleagues who worked on different portions of the project. Dr. Cynthia Gendrich worked on the early portion of the project (2001) and Dr. Earl Smith worked on the latter (2003–2004), during which time the bulk of the interviews were collected in both North Carolina and Minnesota.

8. Angela Browne (1987) coined this term.