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Resources on Intimate Partner Violence

Center for Disease Control and Prevention http://www.cdc.gov/violenceprevention/intimatepartnerviolence/

National Coalition Against Domestic Violence http://www.ncadv.org/

Texas Council on Family Violence http://www.tcfv.org/

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Generational Cycles of Intimate Partner Violence in the US: A Research Brief

Kelly E. Knight, Ph.D. Scott Menard, Ph.D. Sara Simmons, M.A. Leana A. Bouffard, Ph.D. Rebecca Orsi, Ph.D.

Do individuals involved in intimate partner violence (IPV) have children who grow up to become involved in IPV themselves?

According to the Centers for Disease Control and Prevention, IPV refers to psychological, physical, or sexual harm committed by either a current or former partner or spouse (CDC, 2010). IPV may include "intense criticisms and putdowns, verbal harassment, sexual coercion and assault, physical attacks and intimidation, restraint of normal activities and freedoms, and denial of access to resources" (Browne, 1993, p. 1077). Involvement in IPV can have lifelong (Campbell, 2002; Fischbach & Herbert, 1997) and intergenerational consequences (Ehrensaft et al., 2003; Ireland & Smith, 2009; McNeal & Amato, 1998).

This research brief provides a summary of results from a recent study designed to examine the relationship between parent's involvement in IPV and their children's later experiences with IPV. The full study is currently being prepared for potential publication in a scientific journal and is entitled "Intergenerational Continuity of Intimate Partner Violence: Findings from the National Youth Survey Family Study."

Sample

Report No. 2013-05

This research is drawn from the National Youth Survey Family Study (NYSFS), which is a nationally-representative sample of US respondents originally consisting of 1,683 families assessed across three generations covering a 27-year period from 1976 to 2004. Overall, eligibility, participation, and retention rates are quite reasonable compared to other longitudinal studies—generally ranging from 70% to 90% depending on the respondent and wave of data collection (Menard, 2012; Menard et al., 2011). Results presented here focus on the second generation parents and their offspring.

This study measures IPV using the conflict tactics scale (Straus, 1979). Second generation respondents were asked about their experiences with IPV during their 6th interview in 1984 through their 11th interview in 2003. The third generation offspring were also asked similar questions about their involvement in IPV during their first interview in 2003 and their last interview in 2004. For each generation, this report examines responses to 22 questions related to victimization and perpetration. Questions asked, for example, how many times respondents had: thrown something, pushed or grabbed, slapped, hit with fist, hit with an object, choked, beat, threatened with a weapon, used a weapon, or attempted to kill a partner or spouse.

For the current study, an analytic sample was created to study intergenerational continuity of intimate partner violence, specifically. First, we started with 1,725 second generation respondents. Second, we eliminated respondents who were never involved in a romantic relationship during an interview period and, therefore, were not asked any questions about their IPV experiences. Third, of the 1,401 individuals retained, we selected the 681 parents who also had children enrolled in the study. Fourth, we eliminated families with offspring who were not yet adults. Fifth, of the 333 parents and 507 adult offspring remaining, we eliminated families with offspring who were never involved in a romantic relationship during an interview period and, therefore, were also never asked about their own IPV experiences. This strategy yielded a total sample size of 353 respondents (151 second generation parents and 202 third generation offspring). For the parent generation, 40% are male, 30% are nonwhite, and their ages ranged from 37 -44 at their last interview (Wave 11). For the offspring generation, 37% are male, 25% are nonwhite, and their ages ranged from 18-31 at their last interview (Wave 12).



Generational Cycles of Intimate Partner Violence

Generational Cycles of Intimate Partner Violence

Prevalence of Intimate Partner Violence

To begin, the current study examined each generation's involvement in IPV, separately. Parent and offspring respondents were asked about their experiences with violent and minor perpetration of IPV. Across all interviews, 67.6% of parent respondents reported perpetrating violent IPV at least once. In addition, 33.7% of their adult children also reported perpetrating violent IPV. In total, the prevalence of IPV perpetration appears to have decreased 33.9% from one generation to the next. Across all interviews, 92.1% of parents reported perpetrating minor IPV at least once. Showing more stability across generations, 81.7% of offspring respondents also reporting perpetrating minor IPV.

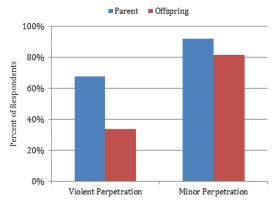


Figure 1: Prevalence of IPV Perpetration

Turning next to the prevalence of victimization, parent and offspring respondents were asked similar questions about their involvement with violent and minor IPV victimization. Across all of their interviews, 66.2% of parent respondents reported being violently victimized by an intimate partner at least once. In contrast, 36.1% of their offspring reported being violently victimized—which is a 30.1% decrease across the two generations. In terms of minor victimization, 93.4% of the parents and 78.8% of their adult children reported experiencing minor victimization from an intimate partner.

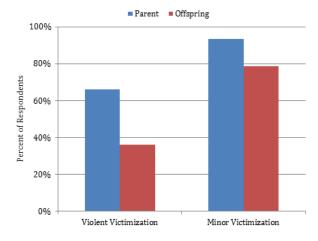


Figure 2: Prevalence of IPV Victimization

Types of Intimate Partner Violence

In addition to examining the prevalence of IPV, this study investigated the number of different types of IPV occurring within an interview period, which can help document the magnitude or severity of IPV. When considering the 10 different types of IPV perpetration measured for the parent generation, 7.3% did not perpetrate any IPV while 25.8% perpetrated 1 type, 11.3% perpetrated 2 types, 14.6% perpetrated 3 types, and 41.1% perpetrated 4 or more types of IPV. For the offspring, 17.3% did not perpetrate any IPV while 45.1% perpetrated 1 type, 14.4% perpetrated 2 types, 5.9% perpetrated 3 types, and 17.3% perpetrated 4 or more types of IPV. Across both generations, more than 20% of respondents reported perpetrating 3 or more types of IPV.

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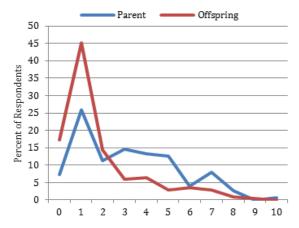


Figure 3: Number of Different Types of IPV Perpetration

Next consider IPV victimization. When examining the 10 different types of IPV victimization measured for the parent generation, 5.3% did not experience any IPV victimization while 27.8% experienced 1 type, 15.9% experienced 2 types, 8.0% experienced 3 types, and 43.1% experienced 4 or more types of IPV victimization. For the offspring, 19.8% did not experience any IPV victimization while 44.6% experienced 1 type, 8.9% experienced 2 types, 7.4% experienced 3 types, and 19.3% experienced 4 or more types of IPV victimization. For both generations, over a quarter of respondents experienced three or more types of IPV victimization.

Intergenerational Continuity of IPV

The overarching research question for this study asks whether or not parent respondents with a history of IPV are more likely to have offspring with a history of IPV. As such, we first investigated intergenerational continuity of IPV perpetration and, then, intergenerational continuity of IPV victimization.

For each type of intergenerational continuity, we divided the sample of families into four groups: (1) parents who were never involved in IPV who have adult offspring also never involved in IPV, (2) parents who were never in-

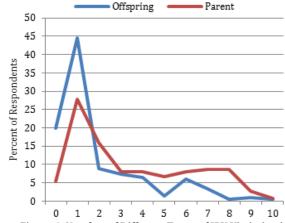


Figure 4: Number of Different Types of IPV Victimization

volved in IPV but who have adult offspring involved in IPV, (3) parents who were involved in IPV but whose adult offspring were never involved in IPV, and (4) parents who were involved in IPV who also have offspring involved in IPV.

For the purposes of this research brief, group (3) and group (4) are of primary importance. Group (3) represents those families who experienced discontinuity from one generation to the next and, thus, were able to break the "cycle of violence". Group (4), on the other hand, represents those families who experienced continuity across both generations. These families, unfortunately, were not able to break the "cycle of violence".

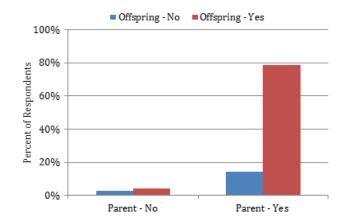


Figure 5: Intergenerational Continuity of IPV Victimization

Consider the prevalence of IPV perpetration. Across all four groups, 14.4% of families experienced intergenerational discontinuity of IPV perpetration (group 3), whereas 78.8% of families experienced intergenerational continuity of IPV perpetration (group 4).

Last, consider the prevalence of IPV victimization. Overall, 18.3% of the families experienced intergenerational discontinuity of IPV victimization (group 3) whereas 76.2% of families experienced intergenerational continuity of IPV victimization (group 4).

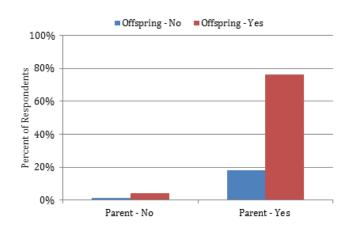


Figure 6: Intergenerational Continuity of IPV Victimization

Conclusion

Studies of intergenerational relationships are difficult to conduct and most do not meet the methodological criteria needed to draw valid conclusions (for a review, see Thornberry, Knight, & Lovegrove, 2011). This research brief summarizes findings from a methodically-rigorous study on intergenerational continuity of IPV by analyzing prospective, longitudinal, and multigenerational data collected from the National Youth Survey Family Study. The findings are threefold. First, the results presented here indicate that most respondents, regardless of generation, are involved in IPV perpetration or victimization. Second, findings highlight that at least one-fifth of the sample was involved in 3 or more different types of IPV. Third, very few families were able to desist, generationally, from IPV altogether. Most parents who had experienced IPV had children who eventually grew up to experience IPV themselves.

The practical implication of this research for victim services involves improving knowledge of the various pathways to IPV, which can then be used to help inform policy and program recommendations. Clearly, parents' own involvement in IPV represents an important pathway for children's later experiences of IPV. Past theoretical (Giordano, 2010) and empirical work (Hines & Saudino, 2004) supports these findings. Future research, however, is needed to determine how to interrupt the cycle of IPV that occurs both across the life course and in subsequent generations.

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