

Only initial pages of article given  
in accordance with international copyright laws.  
Full article available upon request of the author.

## CHAPTER

# 4

## Effects of Intimate Partner Violence Against Women

KÁTHY McCLOSKEY AND DEIDRE HUSSEY

### DEFINITION OF INTIMATE PARTNER VIOLENCE (IPV)

The frequency and severity of violence against women worldwide within the context of intimate relationships is devastating, yet so common in both developed and poverty-stricken countries that it has become commonplace and, in many cases, simply invisible (Watts & Zimmerman, 2002). Due to this situation, in order to truly grasp the extent of the problem, it is necessary to concisely define what is meant when using the phrase *intimate partner violence* (IPV).

At first glance, defining IPV should be simple and straightforward. We often assume we can easily identify IPV when it happens because it seems so obvious. However, a perusal of the literature clearly demonstrates this is not the case (e.g., Malloy, McCloskey, Grigsby, & Gardner, 2003). Does calling your intimate partner a derogatory name constitute IPV? Is a shove in frustration also considered IPV? Must a mark, bruise, or broken bones or teeth be a result in order to classify as "true" IPV?

We can loosely describe this meaning-making problem by highlighting the

tensions between two categories: (1) injury and other physical damage-related definitions of IPV (mostly reflected within legal statutes and often used in medical settings), and (2) emotional-injury definitions of IPV (Nicolaidis & Paranjape, 2009). Commonly, legal definitions are predicated on physical assault upon a person or property. For example, legal statutes across the United States rarely if ever include emotional abuse over time within their definitions of prosecutable IPV offenses, with the notable exception of relatively new stalking laws (Norris, Huss, & Palarea, 2011; Rajan & McCloskey, 2009). Instead, there must be evidence of physical pain and/or damage inflicted upon a person or property in order to meet statutory requirements for criminal justice system intervention (note that sexual assault would also fall under this general construct).

Additionally, two interesting assumptions are embedded within this definitional approach: (1) because physical pain/injury or property damage are centralized within this definition, the discrete assaultive event becomes of paramount importance, and any other related types of events are thereby obscured; and (2) because physical pain/

*Acknowledgments:* We would like to thank Dr. Shari Miles-Cohen and Ms. Tanya Burrell of the American Psychological Association (APA) Women's Program Office for their assistance in identifying key references for this effort.

injury or property damage must be present for IPV to “legally” occur, negative emotional sequelae are assumed to arise primarily from physical damage, and therefore any negative emotional impact is unfortunately viewed as secondary or of lesser importance (Blasco-Ros, Sanchez-Lorente, & Martinez, 2010; Rajan & McCloskey, 2009; Saltzman & Houry, 2009).

In contrast, emotional-injury definitions of IPV include patterned abusive behavior over time and do not assume that physical pain/injury or property damage must be present in order to inflict severe damage upon a victim (Blasco-Ros et al., 2010). However, an emotional-injury definitional approach requires a thorough understanding of abusive patterns within intimate relationships *across time*, as well as the common terrorist-like tactics abusers effectively use against their partners (e.g., Basile & Hall, 2011). Therefore, law enforcement, as well as healthcare providers in general, are often unable to accurately identify the presence of IPV, especially if the infliction of obvious physical pain/injury is absent [see Saltzman (2000a, 2000b) and Saltzman, Fanslow, McMahon, & Shelley (2002) for detailed discussions of these definitional issues].

In addition, if professionals cannot come to agreement on an acceptable IPV definition, then we certainly cannot expect individuals within the general population to provide accurate reports about the incidence or prevalence of their own IPV experiences. More often than not, individuals do not readily self-define themselves as abusers or victims of IPV, even in the presence of physical pain/assault. For example, while a slap or shove both meet the criteria of a legal assault, individuals typically do not classify these actions as IPV unless contextually prompted with concrete definitions

(DeKeseredy, 2000). It also appears that psychological and emotional abuse alone will not prompt individuals to classify such behavior as IPV, even though the long-term effects can be devastating (e.g., Blasco-Ros et al., 2010).

Obviously, these types of definitional issues directly lead to population measurement problems and impact the quality of information available to us concerning IPV incidence and prevalence. For the purposes of this effort, we will use the IPV definition provided by the United States Centers for Disease Control and Prevention (CDC). This definition is the result of years of work and consensus building, which culminated in the publication of two special editions of the *Violence Against Women* journal (Saltzman, 2000a, 2000b), as well as other relevant publications since that time. As can be seen in Table 4.1, the two general IPV constructs outlined previously (physical and emotional) have each been broken down into two categories: (1) physical injury has been separated into physical and sexual, and (2) emotional injury has been separated into threats and psychological/emotional abuse. It is important to note that within this definition, property damage has been moved from the physical category into the emotional category, stalking has been included in the emotional category, and threats against or actual violence toward loved ones (e.g., children, extended family members, friends, co-workers, pets) as a controlling tactic, are altogether missing.

Given the definition of IPV in Table 4.1, there appears to be a disconnect between the legal definitions reviewed earlier and those used for United States public health surveillance by the CDC. This causes further inaccuracies to arise when collecting incidence and prevalence data regarding IPV. As shown later, accurate “base rates” (and