Fall 2010

Correlates of Inter-Generational Transmission of Intimate Partner Violence

Nivin A. Qudeimat-Tercero
Regis University

Regis University
College for Professional Studies Graduate Programs
Final Project/Thesis

Disclaimer

CORRELATES OF INTER-GENERATIONAL TRANSMISSION OF INTIMATE PARTNER VIOLENCE

by

Nivin A. Qudeimat-Tercero

A Research Project Presented in Partial Fulfillment
of the Requirement for the Degree Master of Arts
Specialization: Psychology of Deviant Behavior

Regis University

December, 2010

CORRELATES OF INTER-GENERATIONAL TRANSMISSION OF INTIMATE PARTNER VIOLENCE

by

Nivin A. Qudeimat-Tercero

has been approved

December, 2010

APPROVED:

_____, Course Facilitator

Therese Halas Lincoln, MA, ATR-LPC , Faculty Advisor

ABSTRACT

Correlates of Inter-Generational Transmission of Intimate Partner Violence

Intimate partner violence is a prevalent phenomenon plaguing society, with its negative effects being propagated from one generation to the next. The author hypothesized that there exists a qualitative correlation between male children who witnessed adult males perpetrate violence against females in childhood and subsequent adult onset perpetration of violence against women. After conducting a meta-analysis of 44 peer-reviewed articles, the author found that: (a) children who witnessed interparental IPV manifested increased disturbed behaviors as well as cognitive and emotional impairment corresponding to the severity and frequency of the episodes witnessed; and (b) men who witnessed parental IPV were more likely to perpetrate IPV in their intimate relationships and have more positive attitudes towards abuse.

TABLE OF CONTENTS

Chapter 1

INTRODUCTION

Statement of the Problem: Crime and Punishment

Intimate partner violence (IPV) has long been a prevalent phenomenon plaguing many cultures spanning antiquity to modernity, with detrimental effects which extend beyond the family (Barnett, Miller-Perrin & Perrin, 2005). According to Owen, Thompson, Shaffer, Jackson and Kaslow (2009):

> Each year, approximately 1.5 million women are raped and/or assaulted and 1,200 are murdered by an intimate partner in the United States . . . [and] approximately 15.5 million children living in the US reside in families in which one or more IPV incidents have occurred in the prior year . . . of these almost half are exposed to severe violence (pp. 433-434).

Researchers who examined the origin of criminality attributed criminal behavior to various elements, which include but are not limited to: (a) physiological/developmental impairment, (b) cognitive/psychological impairment, and (c) general social environmental factors. In this research project, the author investigated the potential correlation between adult perpetration of IPV and childhood exposure to family violence, especially that which is directed towards the mother-figure. Specifically, the author endeavored to determine that maritally violent men have a history of exposure to maternal IPV.

Purpose of the Project: Brief Review of the Problem and Literature

There are numerous theories that attempt to explain the origin of criminality which include, but are not limited to: (a) genetic predisposition, (b) cognitive and psychological impairment, (c) social learning, (d) attachment difficulties, (e) childhood

exposure to IPV, and (f) experiencing of physical, psychological, sexual abuse and neglect (Abrahams & Jewkes, 2005; Adams, 2005; Bandura, 1973; Barnett et al., 2005; Holtzworth-Munroe & Stuart, 1994; Huesmann & Eron, 1992; Leibman, 1992; Seltzer & Kalmuss, 1988). Each of the above theories is supported by research that established a correlation between the abuse phenomena and criminality, though no single theory offers a comprehensive understanding or causation to criminality. Theories of genetic predisposition, for example, entail that individuals may genetically inherit neurological impairment or chemical imbalance that predisposes them to more aggressive and non-empathetic behavior (Holtzworth-Munroe & Stuart, 1994; Huesmann & Eron, 1992; Wang, Horne, Holdford & Henning, 2008). In such individuals, the prefrontal cortex—responsible for the regulation and integration of consequential thought processes and impulsivity—may not be entirely functional due to a possible birth defect or brain trauma during childhood, which in turn may cause impairment in its ability to regulate impulsive, non-moral, or aggressive behaviors (Holtzworth-Munroe & Stuart, 1994). Thus, an individual with such impairment may be functionally unable to respond to stimuli in a socially acceptable manner. In some cases, neural manipulation of particular regions in the brain through surgical or chemical means may in fact benefit the individual and possibly prevent criminality. Similarly, there are numerous psychological disorders that are associated with aggressive tendencies and criminal behaviors which may likewise be altered with proper psychiatric supervision and cognitive therapy (Adams, 2006; Barnett et al., 2005).

However, there are aspects of criminality that arise more out of environmental factors than inherent innate physical ones. Humans are an advanced species that learn

and adapt to their environments. They are adept at survival, and acclimate to their surroundings to ensure their species' progression and propagation (Cole & Cole, 2001). The cumulative theory that explains this human phenomenon is *social learning*, which is briefly defined as a child's ability to learn acceptable behavior from his or her individual surroundings, by utilizing observation, mimicking, and recognition of rewards and punishment cues for the continuation of a particularly desired or discouragement of an offensive or inappropriate behavior (Barnett et al., 2005; Wang et al., 2008; Eron, Huesmann & Zelli, 1991). Numerous researchers have concluded that children exposed to familial violence were likely to suffer from various developmental, cognitive, and psychological disorders which may impair their ability to positively interact with their family, peers, and intimates upon reaching adulthood (Fantuzzo & Mohr, 1999; Leschied, Chiodo, Nowicki & Rodger, 2008; Owen et al., 2009; Silvern, Karyl, Waelde & Hodges, 1995; Sternberg, Lamb, Guterman & Abbott, 2006). Research also evidenced that children exposed to abuse lacked the proper mechanism for positive interaction with others, and were more likely as adults to resort to violence as a mode of conflict resolution (Barnett et al., 2005). Moreover, such exposed children often exhibited improper empathy skills necessary for the recognition of social cues (i.e. fear) and possessed deficient reasoning abilities for proper perception and analysis of the surrounding environmental stimuli (Barnett et al., 2005). Furthermore, attachment theory is closely related to social learning, in that children exposed to abuse failed to establish proper affectional attachment with one or both of their caregivers and most often identified with the aggressor, if a male child, or victim, if a female child (Dutton, 2000; Wang et al., 2008). Thus, children with such characteristics and impairments were more

likely to use violence to achieve their desired outcome, and manifested a higher probability of devolving into insecure, distrustful, and generally violent adults who may victimize their intimates and others to fulfill their need for power, control, and wish-fulfillment (Barnett et al., 2005; Wang et al., 2008; Dutton, 2000).

But how does this relate to adult criminality? Research conducted by Jankowski, Leitenberg, Henning and Coffey (1999) and Simons, Wurtele and Durham (2008) has shown a statistical correlation between childhood exposure to abuse and adult criminality. Such research showed that the more abusive and violent of an episode a child witnessed, the higher the likelihood of a traumatic effect, increasing the child's susceptibility to psychopathology as well as externalized and internalized manifestations of aggression—in some cases, these disturbed behavioral manifestations may develop into adult IPV, and, in the most violent of cases, adult criminals of the most severe type (Jankowski et al., 1999; Simons et al., 2008). Interestingly, there are a multitude of studies evidencing that children who witnessed abuse also underwent some form of physical, sexual, psychological abuse and neglect simultaneously (Barnett et al, 2005). In the current project, the author explored the possible existence of a link relating the aforementioned childhood manifestations of disturbed behavior and adult criminality towards intimate and general others, with a hypothesis which is materialized in the following section.

Overview: Hypothesis and Research Strategy

This author hypothesized that there exists a qualitative correlation between male children who witness adult males perpetrate violence against females in childhood and subsequent adult onset perpetration of violence against women. The author tested her hypothesis by reviewing literature conducting a meta-analysis of 44 articles focusing on

young adult males and their perpetration of dating violence, correlating with a possible history of maternal IPV and aggressive childhood behavior.

This research topic exhibits significant relevancy because it examines the consequences of childhood exposure to interparental abuse and its implications on the future of the family unit, and our society as a whole. The stronger the established correlation between exposure to interparental IPV in childhood and adult perpetration of IPV, the greater the likelihood of renewed social interest in programs directed at the prevention of such abusive behaviors and ideologies, in addition to a likely collaborative educational outreach efforts of proactive individuals championing healthy interaction among family members, which span conflict resolution, proper attachment, and cohesion.

Chapter Summary

Witnessing abuse as a child can be very traumatic and often manifests in various forms of psychopathology in adult life to include dating or marital violence. Many adults, who as children witnessed abuse, failed to develop the necessary social skills to interact non-violently with other humans, to include intimate partners. This researcher examined the history of exposure to parental violence among individuals with prior IPV perpetration offenses in their intimate relationships, and strove to demonstrate that adult perpetrators of IPV may have had an exposure to interparental IPV, in addition to possible manifestations of childhood psychopathology and disturbed behaviors.

Chapter 2

REVIEW OF LITERATURE

Introduction

It is estimated that between three to eighteen million children are exposed to interparental violence each year (Knutson, Lawrence, Taber, Bank & DeGarmo, 2009). Various sources on the general topic of abuse indicated that there may be a strong correlation between male children witnessing interparental abuse during childhood and the possibility of perpetrating abuse on intimate partners in adulthood (Abrahams & Jewkes, 2005; Gover, Kaukinen & Fox, 2008; Jankowski, Leitenberg, Henning & Coffey, 1999; Simons, Wurtele & Durham, 2008). This phenomenon is generally referred to as the *intergenerational transmission of violence* and entails varied explanations on how violent attitudes, ideologies, and behaviors may be transmitted from parents to children.

In order to understand adult perpetration of intimate partner violence (IPV), the author examined childhood socialization and how elements present in childhood may affect behavior, interpretation of relevant stimuli, and interaction with intimate others upon reaching adulthood. In this chapter, the author reviewed a diverse literature on the topic of intergenerational transmission of abuse, with a focus on the following: (a) micro-socialization and macro-socialization factors promoting abusiveness in the home; (b) childhood responses to witnessing IPV; (c) childhood exposure to IPV and social learning; (d) childhood exposure to IPV and attachment; and (e) characteristics of perpetrators of IPV.

Understanding Intimate Partner Violence

IPV is a term social scientists use to describe spousal abuse. IPV encompasses the following list of abusive behaviors that occur between cohabitating or ex-cohabitating partners or ex-partners, who are at least 18 years old, regardless of marital status: (a) psychological abuse, (b) fear and oppression, (c) stalking, (d) threats, (e) physical assault and injury, (f) sexual assault, and (g) homicide (Barnett, Miller-Perrin & Perrin, 2005). IPV ranges from verbal abuse and arguments, termed common couple violence, to intimate terrorism, characterized by severe physical violence and death (Barnett et al., 2005). Though IPV could be inflicted reciprocally by either gender, it is more prevalent in most societies to encounter male inflicted aggression towards female partners (Barnett et al., 2005).

There are many factors contributing to the prevalence of IPV in modern society, which include familial and cultural socialization (i.e. patriarchy, power differentials, and expected gender roles), psychological dysfunction, and most simply the proximity and long duration of time spent by intimate partners in the same setting (Barnett et al., 2005). This proximity exponentially elevates the frustrations experienced by the stressful interactions with intimates, which aligns the environmental elements necessary for the occurrence of violence (Barnett et al., 2005). However, for the scope of this work, the author only discussed the family socialization aspect of intergenerational transmission of IPV.

Intergenerational Transmission of IPV and the Effects of Negative Family Socialization on Children

Supporters of the intergenerational transmission of IPV theory postulated that childhood exposure to family violence significantly correlated with subsequent involvement in IPV in adult relationships (Gover et al., 2008; Jankowski et al., 1999). In fact, various researchers proposed that the groundwork of IPV may be socialized early in childhood through modeling, conditioning and reinforcement, and that childhood exposure to IPV correlated to neurological impairments, destructive externalizing/ internalizing or violent behaviors, and disturbed attachment styles in both childhood and adulthood (Abrahams & Jewkes, 2005; Adams, 2005; Bandura, 1973; Barnett et al., 2005; Holtzworth-Munroe & Stuart, 1994; Huesmann & Eron, 1992; Leibman, 1992; Seltzer & Kalmuss, 1988).

In this section, the author will: (a) discuss the family socialization of IPV, (b) examine the effects of early exposure to IPV on children, and (c) explore the long term effects of early childhood exposure to IPV on adults.

Family Socialization and Intimate Partner Violence

Early Childhood Family Socialization

According to Barnett et al. (2005), "men are the primary injury-producing perpetrators of intimate partner violence, and women are the more routinely victimized partners" (p. 314). Researchers postulated that though many factors contribute to the violent aggression of abusive men, childhood socialization greatly dictates social functionality and intimate interaction in a family setting (Barnett et al., 2005). Early childhood family socialization is theorized to significantly influence adult behavior, with

negative family interactions possibly instilling the following in a child: (a) impaired problem solving and communication skills; (b) lack of empathy, security, and respect (for the self and others); and (c) a distorted model for interpersonal interaction and attachment (Roche, Ahmed, & Blum, 2008).

Cole and Cole (2001) defined socialization as "the process by which children acquire the standards, values and knowledge of their society . . . [and] develop their own unique patterns of feeling, thinking, and behaving in a wide variety of circumstances" (p. 374). The family is considered a micro-socialization, with whom an individual maintains intimate relationships, and constant interactions, over a long period of time. Because of the prolonged exposure between family members, individuals will absorb and retain various cues on how to interact, and set the foundation of personality and consequent behavior. According to Lopez, Perez, Ochoa and Ruiz (2008), "children establish their first social relations with parental figures and the nature of those parent–child relationships and the context in which they are sustained may determine the social skills and social relations the child will develop with others later in life" (p. 434). Thus, parents play a pivotal role in the behavioral development of their children by "[displaying] pleasure or disapproval with the way they do behave, and [rewarding], [ignoring], or [punishing] them accordingly" (Cole & Cole, 2001, p.374). It is understandable, then, that "a negative family environment, characterized by high levels of family conflict, poor or negative communication with parents, and lack of parental support, has a substantial and negative effect on the development of particular social skills in children," (Lopez et al., 2008, p. 434).

The Social Learning of Intimate Partner Violence

Numerous sources suggested that intimate partner violence is transmitted from one generation to the next by means of social learning (Barnett et al., 2005; Wang, Horne, Holdford & Henning, 2008; Eron, Huesmann & Zelli, 1991). The general premise of the social learning of IPV entails that children who are exposed to interparental violence learn to communicate with others in their environment by using witnessed techniques and, upon reaching adulthood, apply those same learned skills to their own interactions with intimate others. According to Barnett et al. (2005), children primarily learn by modeling observed behavior, whether positive or negative, and judge each behavior's appropriateness and efficacy based upon how well it achieves the desired outcome with minimal subsequent negative consequences. Social learning, or modeling, then, is a theory often cited to explain the intergenerational transmission of violence, in which a child observes and mirrors the actions of his or her parents, with the added phenomenon of mimicking the behaviors of the same sex parent (Wang et al., 2008). Thus, in accordance with the social learning theory, "children growing up in a violent home environment may both directly and indirectly learn from their parents' interaction patterns and attitudes through modeling, direct reinforcement, and coercion training. . . [and] may be emotionally, behaviorally, and cognitively impaired by long-term exposure to violence in the home environment" (Wang et al., 2008, p.157). Eron et al. (1991) supported the conclusions of Wang et al. (2008) by affirming that parents are responsible for their children learning aggression by the models of behaviors they present, the reinforcements they may provide, as well as the home environments they furnish which

may frustrate and victimize the child. Furthermore, Eron et al. (1991) summarized the basic premises of the social learning of aggression in the following:

> Learning is hypothesized to occur both as a result of one's own behavior and the environment's response to those behaviors . . . and/or as a result of viewing the behavior of others in the environment . . . A child's exposure to others behaving aggressively will increase the chances that a child will respond to frustration and victimization with aggression . . . the parents' aggressiveness, punitiveness, and rejection serve as reinforcements and as models of behavior for children to observe and incorporate into their own behavioral repertoires, especially when children observe the rewards that such behaviors provide. (p. 170)

In accordance with Eron et al. (1991), Seltzer and Kalmuss (1988) suggested that children who observe that physical violence against a loved one is a possible response to conflict are more likely to perpetrate IPV than those who have not been exposed to interparental IPV, with the latter not having incorporated violence into their behavioral repertoires, and thus choose responses to conflict from an alternate set of possible behaviors. Similarly, Huesmann and Eron (1992) opined that programs for aggressive social behavior are established during a child's early development, *scripts* that are stored in the child's memory as guidelines for behavior and general problem-solving:

> A child's initial observation of others behaving aggressively combine with learning conditions that reinforce aggression to establish aggressive scripts in the child's memory at a young age. Cognitive rehearsal of these scripts through fantasy, positive reinforcements for the aggressive behaviors suggested by these scripts, and behavioral strategies that allow the child to escape the negative consequences of aggression combine to cement these scripts in place. These cognitive scripts become increasingly unmalleable as the child grows up. (pp.150-151)

As explained in the above quotation, the longer negative social scripts persist in a child's behavioral repertoire—as they are rehearsed, enacted, and generate consequences—they become increasingly more resistant to modification and change, and, overtime, are more likely to become those same scripts guiding the adult into antisocial behavior (Huesmann

& Eron, 1992). Therefore, males who witnessed interparental violence are more likely to perpetrate violence on future intimate partners as they have observed more functionally positive than negative consequences to their parents' use of IPV (Foshee, Bauman & Linder, 1999). Thus, the author inferred that when a male child is grown and a conflict situation arises with his intimate partner, similar to that witnessed between his parents, he may retrieve a solution from that which he has stored in his behavioral repertoire (IPV, namely), which he has been conditioned to accept as an appropriate mode of communication and problem solving.

Gender specific modeling. In addition to social learning of IPV behaviors from the parent generation, some studies suggested that children are significantly more likely to mimic the behaviors of the same sex parent (Bandura, 1973; Wang et al., 2008). Children exposed to more frequent episodes of interparental violence exhibit a greater likelihood to identify with and mimic the actions of the same sex parent (Bandura, 1973; Wang et al., 2008). Hence, male children are more likely to identify and mirror the actions and attitudes of their fathers, and female children are more likely to identify and mirror the actions and attitudes of their mother, practicing as an adult the gender role dynamic witnessed at home, with males presumably fulfilling the role of perpetrators, with females as the most probable victims, of IPV (Gover et al., 2008; Wang et al., 2008).

Summary

The author demonstrated that aggression is a socially learned and reinforced behavior that children develop from witnessing interparental violence. The more frequently a child is exposed to IPV, the more likely he is to develop, rehearse, and

utilize aggressive reactions to solve conflicts with intimate others upon reaching adulthood. Furthermore, children more likely reflect in their own behavioral repertoires attitudes and behaviors witnessed to repeatedly elicit desired results. Thus, children are indirectly rewarded for aggression, a trait that may likely resurface in adult intimate interactions (Eron et al., 1991; Wang et al., 2008).

Effects of Negative Family Socialization & Witnessing IPV on Children

Witnessing interparental violence is likely to be one of the most traumatic experiences an individual may witness as a child, an experience that may have lasting imprints on cognition and behavior. In this section, the author discusses various cognitive, psychological, and behavioral factors associated with witnessing IPV during childhood, which may include: (a) neurological, cognitive, and psychological impairment; (b) externalizing and internalizing behaviors; and (c) impaired attachment styles.

Neurological, Cognitive, & Psychological Correlates to Childhood Exposure to IPV

As stated above, witnessing IPV between the parents is likely to be a significant trauma in a young child's life, one which causes intense fear, insecurity, and stress. According to Ward and Beech (2006), prolonged exposure to IPV caused structural and functional alterations to the brain that may adversely affect a child's ability to address social challenges and problems, in childhood and later adulthood. In fact, aggressive children are thought to possess defective cognitive processes that may hinder them from appropriately interpreting and responding to the behaviors of others (Huesmann & Eron, 1992). Many researchers correlated the neurological and cognitive impairment generally

observed in children frequently exposed to interparental violence with increased stress and elevated levels of stress hormones in the body (Adams, 2006; Carpenter & Stacks, 2009). According to Carpenter and Stacks (2009), children who are exposed to frequent episodes of parental IPV had a higher concentration of stress hormones, which, if present long term in the frontal and temporal regions of the brain—responsible for attention, expression, and language—may negatively affect emotional regulation, cognitive development, memory, learning, reasoning, behavior, empathy, and recognition and interpretation of the emotional states and behaviors of others. Specifically, Adams (2006) reported that children who witness violence repeatedly may manifest an altered neurochemistry, which, based upon animal models, may lead to an activation of the catecholamine system and the release of corticotrophins, resulting in anxious, hyperaroused and hypervigilant behaviors that correspond to symptoms of posttraumatic stress disorder (PTSD). In humans, El Sheik, Harger and Whitson (2001) found evidence suggesting that children who undergo highly stressful episodes have increased parasympathetic nervous system (PNS) functioning, in which they have increased physiological arousal accounting for both internalized and externalized behaviors (discussed in depth in the *Children's Reactions to IPV: Externalizing and Internalizing Behaviors* section below).

Developmentally, children who are exposed to parental IPV may exhibit a higher risk of experiencing emotional and cognitive disturbances (i.e. increased manifestation of verbal or physical expression of anger, low self-esteem, PTSD), delayed cognitive development, and low academic performance (Adams, 2006). Specifically, Adams (2006) found that children who witnessed violence against their mother were

characterized by lower verbal, visual, and spatial skills when compared to children who were not exposed to maternal abuse. The author opined that the increased levels of stress hormones present in the aforementioned frontal and temporal regions of the brain—which generally orchestrate thought, memory, behavioral expression, and language—may significantly associate with the decreased emotional regulation (i.e. aggressive behaviors), low academic performance (i.e. lower verbal, visual and spatial skills), generally delayed cognitive development.

Children's Reactions to IPV: Externalizing and Internalizing Behaviors

Externalizing and internalizing behaviors. As detailed above, children may experience cognitive structural and functional disturbances in reaction to elevated stress hormones caused by undergoing a traumatic event, specifically parental IPV (Adams, 2006; Carpenter & Stacks, 2009; Ward & Beech, 2006). Disturbances in frontal and temporal lobe functioning specifically evidenced negative effects in emotional regulation, cognitive development, memory, learning, reasoning, behavior, empathy, and recognition and interpretation of the emotional states and behaviors of others (Carpenter & Stacks, 2009). Because those regions are responsible for orchestrating thought, memory, behavioral expression, and language, the author finds it reasonable to assume that there may be significant manifestations of unhealthy behaviors in children with marked impairments in those regions. The behavioral manifestations are commonly referred to as externalizing and internalizing behaviors (Fantuzzo & Mohr, 1999; Owen, Thompson, Shaffer, Jackson & Kaslow, 2009). Externalizing behaviors often refer to destructive actions that children openly express anger or frustration, and may include the following: (a) hostility and aggression, (b) excessive risk taking, (c) vandalism, (d) theft, and (e)

cruelty to animals, among many others (Edleson, 1999; Fantuzzo & Mohr, 1999; Gewirtz & Edleson, 2007; Leschied, Chiodo, Nowicki & Rodger, 2008; Owen et al., 2009). In contrast, internalizing behaviors correspond to internal and involuntary responses to stressful external stimuli, and may include the following: (a) depression, (b) PTSD, (c) suicidal behaviors, (d) anxiety, fears, and phobias, (e) insomnia, (f) tics, (g) bed-wetting, (h) low self-esteem, (i) impaired ability to concentrate, (j) difficulty in academics, (k) social withdrawal, and (l) generally low scores on measures of verbal, motor and cognitive skills (Fantuzzo & Mohr, 1999; Leschied et al., 2008; Owen et al, 2009; Silvern, Karyl, Waelde & Hodges, 1995; Sternberg, Lamb, Guterman & Abbott, 2006).

Experimental research. A great amount of literature suggested that childhood exposure to parental IPV significantly correlated with externalizing and internalizing behaviors in children (Edleson, 1999; Fantuzzo & Mohr, 1999; Fantuzzo, DePaola, Lambert, Martino, Anderson & Sutton, 1991; Gewirtz & Edleson, 2007; Hughes, 1988; Leschied et al., 2008; Owen et al., 2009; Silvern et al., 1995; Sternberg et al., 2006). In their study of 61 boys and 49 girls, using various interviews and mother reported questionnaires, Sternberg et al. (2006) found that children who were exposed to family violence had more significant externalizing and internalizing behaviors by comparison to non-violence exposed children. Interestingly, Sternberg et al. (2006) observed a phenomenon that was evidenced in previous research: Boys who witnessed father initiated IPV on their mother were more likely to manifest externalized behaviors, whereas exposed girls manifested generally internalized symptoms (Doumas, Margolin & John, 1994; Edleson, 1999; Gewirtz & Edleson, 2007; Jaffe, Wolfe, Wilson & Zak, 1986; Wolfe, Jaffe, Wilson & Zak, 1985). This conclusion strongly supported earlier findings

of gender specific modeling: Male children are more likely to mirror externalizing behavior of hostility and aggression practiced by the father, whereas female children are more likely to exhibit similar internalized behaviors and symptoms exhibited by the mother (Doumas et al., 1994; Spaccarelli, Sandler & Roosa, 1994). Sternberg et al. (2006) also found evidence suggesting that exposure to abuse was more potent and more damaging at a younger age in childhood than late childhood or adolescence.

In another experiment, Wolfe et al. (1985) interviewed 142 mothers and 198 children by using the *Conflict Tactics Scale* with *Physical Aggression Subscale*, and came to a threefold conclusion: (a) More boys than girls exhibited externalizing behaviors that fell within the clinically significant range; (b) being exposed to a higher frequency of violence also correlated with the increased severity of the behavior problems; (c) battered mothers reported a significant prevalence of behavior problems and diminished social competence in children who have been exposed to IPV. Wolfe et al. (1985) also found evidence suggesting that maternal effectiveness may be impaired by frequent episodes of battery, which further correlated with a child's externalizing and internalizing behaviors. Vulnerability to maternal violence is yet another phenomenon observed in various studies, one which resulted in unique variance in child mental health problems (Adams, 2006; Gewirtz & Edleson, 2007; Leschied et al., 2008; Spaccarelli et al., 1994). A mother's lack of proper supervision, decreased focus and awareness of her child's emotional needs and behavioral difficulties, and general acceptance of abuse were presented as possible explanation on the prevalence of externalizing and internalizing behaviors among children exposed to IPV (Leschied et al., 2008; Spaccarelli et al., 1994).

Summary

Various researchers indicated that children who witnessed interparental abuse are more likely to manifest externalizing and internalizing behaviors as part of their daily behavioral repertoires (Adams, 2006; Carpenter & Stacks, 2009; Ward & Beech, 2006). Externalizing behaviors may include antisocial, destructive, or otherwise delinquent actions (i.e. tantrums, fights, vandalism, stealing, etc), indicating a generally disturbed cluster of behaviors associated with children whom have been exposed to frequent IPV (Edleson, 1999; Fantuzzo & Mohr, 1999; Gewirtz & Edleson, 2007; Leschied et al., 2008; Owen et al., 2009). Contrastingly, internalizing behaviors include depression, anxiety, low self-esteem, inability to concentrate in school, as well as somatic disorders and illnesses (Fantuzzo & Mohr, 1999; Leschied et al., 2008; Owen et al., 2009; Silvern et al., 1995; Sternberg et al., 2006). Boys are more likely to exhibit externalizing behaviors, whereas girls are more likely to internalize (Edleson, 1999; Gewirtz & Edleson, 2007; Jaffe et al., 1986; Wolfe et al., 1985).

Childhood Exposure to IPV and Attachment

According to Cole and Cole (2001), attachment is defined as "an enduring emotional bond between babies and specific people" (p. 208). Attachment theory traces back to Bowlby's desire to explain the psychological phenomenon that occurs when a child is removed from their parents, to whom they are attached, and placed in the care of unfamiliar caregivers in an unfamiliar setting (Sable, 1997). Young children usually performed one or more of the following behaviors that became staples of attachment theory, namely: (a) protest, during which a child manifests fear and separation anxiety, and searches for his or her familiar parent; (b) despair, where a child becomes withdrawn

and less active, as if in a state of mourning; and (c) detachment, during which a child defensively withdraws emotional attachment (Sable, 1997). Attachment is a crucial milestone for a healthy cognitive and psychological development of children, and will determine their success in interacting and relating with others in adulthood (Cole & Cole, 2001). Witnessing parental IPV may significantly affect the child's attachment to one or both of the parents, which may be detrimental to the child's cognitive and emotional health (Barnett et al., 2005; Cole & Cole, 2001).

According to Dutton (2000), witnessing interparental violence as a child may destroy the child's belief in his parents' ability to protect and provide him with security, and may force the child to "localize loyalty" usually siding with the same sex parent. IPV exposed children will more likely develop poor attachments characterized by the lack of proper conflict resolution necessary for healthy adult interaction (Dutton, 2000). Sable (1997) similarly reported that inconsistent or rejecting caregivers thwart healthy personality development and positive models of healthy interaction with others, which continue to affect the person as an adult. Childhood, and later adulthood, symptoms of anxiety, depression or anger, therefore, are responses to disruptions of personal bonds, which interfere with adequate functioning and fulfilling relationships with others (Sable, 1997).

According to Carpenter and Stacks (2009), there are two notable types of attachment styles that are observed among children exposed to IPV: Insecure and disorganized attachment. Insecure patterns of attachment correlated with a child's need to constantly monitor his caregivers for fear of separation, resulting in decreased exploration and activity, which further impairs cognitive functioning and increases the risk for

behavioral problems (Carpenter & Stacks, 2009). Without exploration and activity, children, and later adults, are likely to manifest delayed cognitive development, with low verbal, visual, and spatial skills (Adams, 2006; Carpenter & Stacks, 2009). Disorganized patterns of attachment, on the other hand, associated closely with disrupted maternal affective communication and parenting behaviors that are frightened, frightening, and helpless, resulting in a mother's inability to sooth and emotionally and physically tend to the child, who then becomes distrustful of her ability to care for and protect from the father's aggression (Carpenter & Stacks, 2009). Thus, when a male child is manifesting insecure or disorganized patterns of attachment as a response to failed parenting, he is unable to properly develop emotional connectivity and appropriate communicative cues that lead to healthy social engagement and interpersonal interaction.

Summary

Aggression is a socially learned and reinforced behavior that children develop from witnessing interparental violence. The more frequently a child is exposed to IPV, the more likely he is to develop, rehearse, and utilize aggressive reactions to solve conflicts with intimate others upon reaching adulthood. Furthermore, children are more likely reflect in their own behavioral repertoires attitudes and behaviors witnessed to repeatedly elicit desired results. Thus, children are indirectly rewarded for aggression, a trait that may likely resurface in adult intimate interactions. In addition to learning of behavior, children exposed to frequent parental IPV more likely manifest gender specific modeling, in which they are more likely to identify and mimic the same sex parent, performing the correspondingly witnessed gender role dynamic—which in most scenarios, and relevant to this author's work, the male fulfilling the father's role as

perpetrator of IPV, and female fulfilling the mother's role as IPV victim (Eron et al., 1991; Wang et al., 2008).

Research indicated that children who witness interparental abuse were more likely to manifest externalizing and internalizing behaviors as part of their daily behavioral repertoires (Adams, 2006; Carpenter & Stacks, 2009; Ward & Beech, 2006). Externalizing behaviors may include antisocial, destructive, or otherwise delinquent actions (i.e. tantrums, fights, vandalism, stealing, and etcetera), indicating a generally disturbed cluster of behaviors associated with children whom have been exposed to frequent IPV (Edleson, 1999; Fantuzzo & Mohr, 1999; Gewirtz & Edleson, 2007 Leschied et al., 2008; Owen et al., 2009). Contrastingly, internalizing behaviors include depression, anxiety, low self-esteem, inability to concentrate in school, as well as somatic disorders and illnesses (Fantuzzo & Mohr, 1999; Leschied et al., 2008; Owen et al., 2009; Silvern et al., 1995; Sternberg et al., 2006). Boys were more likely to exhibit externalizing behaviors, whereas girls are more likely to internalize (Edleson, 1999; Gewirtz & Edleson, 2007; Jaffe et al., 1986; Wolfe et al., 1985).

Finally, witnessing parental IPV may significantly affect the child's attachment to one or both of the parents, which may be detrimental to the child's cognitive and emotional health (Barnett et al., 2005; Cole & Cole, 2001). Inconsistent or rejecting caregivers thwart healthy personality development and positive models of healthy interaction with others, which continue to affect the person as an adult (Sable, 1997). Childhood, and later adulthood, symptoms of anxiety, depression or anger, therefore, are responses to disruptions of personal bonds, which interfere with adequate functioning and fulfilling relationships with others (Sable, 1997).

Intergenerational Transmission of Intimate Partner Violence and the Effects of Negative Family Socialization on Adults

According to Barnett et al. (2005) "men are the primary injury-producing perpetrators of intimate partner violence, and women are the more routinely victimized partners" (p. 314). There are two major characteristics common to men who abuse: (a) Displacing the blame for abuse, and (b) minimizing the gravity of their actions (Barnett et al., 2005). Abusive men often blame their female partners for the abuse they caused, and justify their behavior by claiming that her actions elicited his response (Barnett et al., 2005). Moreover, abusive men downplay the seriousness of their actions, and declare themselves innocent of spousal abuse (i.e. "I did not hurt her," or "I barely touched her!"), thereby washing their hands clean of any subsequent consequences that the victim may incur (Barnett et al., 2005).

Researchers postulated that though many factors contribute to the violent aggression of abusive men, childhood socialization and trauma, as well as biological dysfunction, greatly dictate social functionality and intimate interaction in a family setting (Barnett et al., 2005). Early childhood family socialization significantly influences adult behavior, as positive family interactions instill non-violent problem solving and communication skills, empathy, security, respect (for the self and others), and a healthy model for interpersonal interaction and attachment (Roche et al., 2008). As mentioned in the previous section, children primarily learn through modeling behavior, whether positive or negative, and those who observe and experience abuse may manifest various problematic behaviors in adulthood (Barnett et al., 2005). Barnett et al. (2005) reported that "direct physical or sexual abuse during childhood is associated with later

aggression . . . [However,] observing abuse may be a more powerful predictor of future IPV than experiencing abuse directly" (p.319). Furthermore, shame and humiliation experienced during childhood correlated with anxious attachment to parents, which translates to adult insecurity and fear of abandonment in intimate relationships, and may trigger abusive rage against a partner who threatens to leave (Barnett et al., 2005). Studies show that men who were socialized in a negative family environment, characterized by episodes of physical and emotional abuse (especially that directed towards the mother) are (a) unable to effectively communicate their feelings, (b) find difficulty solving problems rationally and non-violently, (c) lack sympathy and empathy for their victims and others, and (d) are incognizant of the negative consequence precipitated by their violent actions (Barnett et al., 2005). Thus, abusive men utilize and resort to violence as a mode of physical expression of feelings they cannot express verbally (Barnett et al., 2005).

In this section, the author intends to accomplish the following: (a) present experimental research correlating adult history of childhood exposure to IPV and perpetration on intimate partner; and (b) discuss neurological, cognitive, and psychological effects manifested in adulthood, which may be significantly associated with childhood exposure to parental IPV.

Experimental Research Correlating Childhood Exposure to IPV and Adult Perpetration of Violence on an Intimate Partner

According to Simons et al. (2008) and Jankowski et al. (1999), children who are exposed to interparental IPV perpetrated by the father have a higher risk for engaging in violence against their intimate partner(s) as adults, perpetrating dating aggression.

Simons et al. (2008) administered questionnaires and polygraphs to and conducted interviews with 280 incarcerated male sexual offenders (ranging from adult rapists to child sex offenders) serving their sentence in Colorado prisons and found that rapists were significantly more likely to be exposed to IPV during childhood in comparison to child sexual abusers. Simons et al. (2008) opined that "males who observe parental violence while growing up have an increased likelihood of engaging in violence against women, [as] witnessing a parent being struck by another parent may destroy a child's belief in the parent's ability to protect a child or make life secure" (p.558). Furthermore, Simons et al. (2008) suggested that children who grow up in an environment where women are viewed as inferior and unworthy, such as one where they initially observed maternal IPV, may find it acceptable and even justifiable to perpetrate violence against women.

In their study exploring the relationship between violence in the family of origin and dating violence among college students, Gover et al. (2008) surveyed over 2500 students via questionnaires and found that "children who witnessed one parent hit the other parent perpetrated and expressed significantly higher rates of physical violence in dating relationships compared to those who were not exposed to violence during childhood." (p. 1675). Specifically, "respondents who witnessed their father hitting their mother were almost twice as likely to perpetrate and experience violence compared to those who did not witness their father hitting their mother (44% vs. 28% for perpetration and 39% vs. 21% for victimization)" (Gover et al., 2008, p.1675). Furthermore, adults who witnessed father-to-mother violence as children were more likely to perpetrate (males) and experience (females) physical and psychological abuse (Gover et al., 2008).

According to Jankowski et al. (1999), witnessing interparental IPV increased the likelihood of perpetration and/or sustaining dating and marital violence as an adult. Using the *Physical Aggression Scale* of the *Conflict Tactics Scale*, among other measures, Jankowski et al. (1999) conducted their research project with 1576 participants (974 men and 602 women), specifically measuring for experiencing the following, being: (a) slapped; (b) kicked, bit, hit with a fist; (c) hit or tried to be hit with an object; (d) beat up; (e) chocked; (f) threatened with a knife or a gun; and (g) abused with a knife or a gun. Jankowski et al. (1999) found that 186 (13.9%) of adults reported witnessing interparental aggression before the age of 16; of those, 28% witnessed only same sex parent perpetrate, 31% witnessed only opposite sex parent perpetrate aggression, with 41% observing both parents engage in violence. Individuals who witnessed their same sex parent perpetrate violence were more likely to repeat that gender specific modeling by perpetrating against a dating partner than those who observed opposite sex parent perpetrate the violence (Jankowski et al., 1999).

In addition to the above studies, Wang et al. (2008) distinguished between violent offenders and classified them into two groups: (a) family-only offenders, who, just like the name suggests, perpetrate against their family only; and (b) generally offending criminals, who participate in aggressive behaviors both inside and outside the family and were more likely to have experienced, as well as having witnessed, severe interparental episodes of IPV. In their study, Wang et al. (2008) interviewed and administered questionnaires (i.e. *Physical Assault Subscale* of the *Conflict Tactics Scale*) to 492 violent men court mandated for treatment, and found that approximately 39% of the family oriented and 37% of the generally offending groups reported having witnessed

interparental violence, with the most common physical aggression inflicted on their maternal parent being (a) pushed, grabbed, or shoved (44%), (b) slapped (16%), (c) having something thrown at her (15%). Wang et al. (2008) concluded that exposure to father-to-mother IPV dramatically increases the likelihood if intimate partner violence in adulthood, in both men who are family-only as well as generally-offending offenders. In an effort to offer an explanation for the intergenerational transmission of abuse, Wang et al. (2008) opined that "children who are exposed to parental violence and abuse not only witness violent behavior toward intimate partners but also learn values and moral standards of how to resolve conflict through violence" (p. 168).

Effects of Negative Family Socialization & Witnessing IPV on Adults

In the above section, the author discussed an array of research correlating childhood exposure to parental IPV and adult perpetration (Gover et al., 2008; Jankowski et al., 1999; Simons et al., 2008). In order to properly contextualize the possible effects of childhood exposure to IPV on adults, however, the author must explore the possible outcomes correlated with negative early family socialization and its manifestations in deviant adult behavior. In this section, the author intends to achieve the following: (a) describe general traits characteristic of adult perpetrators of IPV; and (b) discuss the cognitive and psychological effects correlated with a history of witnessing parental IPV, by examining neurological, emotional, and attachment related impairments found among the perpetrating population.

General Characteristics of Adult Perpetrators of IPV

Holtzworth-Munroe and Stuart (1994) introduced three typologies of male perpetrators of violence: (a) family-only, who engage in the least severe marital violence and evidence little to no psychopathology or personality disorders; (b) borderline/dysphoric, who engage in moderate to severe IPV and evidence psychological distress, borderline personality disorders, emotional volatility, and substance abuse problems; and (c) violent/antisocial, who engage in moderate to severe violence spanning beyond the family unit, and may have not only a history of criminal behavior, but also significant manifestations of antisocial tendencies and psychopathy. Holtzworth-Munroe and Stuart (1994) referenced the earlier described social learning theory to explain the intergenerational transmission of abuse, and stated that children not only mimic the actions but also the attitudes exhibited by their parents in the IPV episode. According to Holtzworth-Munroe and Stuart (1994), family-only perpetrators of IPV depicted the most "normal" and likely productive member of society among the above typologies, with the least likelihood for impulsive, non-controlled behavior, and generally feel the most empathy and remorse for their use of aggression against their spouse. Borderline/dysphoric perpetrators lie somewhere in the middle and are more likely to experience high levels of jealousy, marital dissatisfaction, and relationship strife, but may feel somewhat empathetic and remorseful for their violent actions. Violent or antisocial perpetrators evidence a greater likelihood of manifesting narcissistic personality disorder (i.e. viewing their wives as objects used for their own whim and satisfaction rather than being equal individuals), impulsivity, an inability to control anger, and feel little to no empathy or remorse for perpetrating severe IPV against her, usually blaming her for

provoking the violent episode (Holtzworth-Munroe & Stuart, 1994; and Holtzworth-Munroe, Meehan, Herron, Rehman & Stuart, 2000).

Tilley and Brackley (2005) did not distinguish between the types of IPV perpetrators, but generally agreed with and evidenced similar findings to the conclusions of Holtzworth-Munroe and Stuart (1994) and Holtzworth-Munroe, Meehan, Herron, Rehman and Stuart (2000). In their study of men who engaged in IPV, Tilley and Brackley (2005) found the following: (a) numerous attitudes of the devaluement of women (i.e. objectifying and demeaning); (b) positive associations and general acceptance of abuse as a valid method to solve marital conflict; (c) evading responsibility for and minimizing actions (i.e. "could not have been that bad if nothing was broken"); (d) inability to manage anger, or express it appropriately; (e) power and control issues; (f) mistrust and jealousy; (g) a history of childhood exposure to interparental physical and emotional violence or threats of violence; (h) substance use and abuse; (i) high rate of unemployment, or intermittent employment; and (j) less than high school education.

Childhood Exposure to IPV and Adult Cognitive & Emotional Health

The conclusions presented in the previous section include evidence suggesting that male perpetrators of IPV may exhibit cognitive impairments manifested through impulsive, angry, and generally unstable behavior. As mentioned in the *Neurological, Cognitive, & Psychological Correlates to Childhood Exposure to IPV* section, children who are exposed to frequent episodes of parental IPV have a higher concentration of stress hormones, which, if present long term in the frontal and temporal regions of the brain—responsible for attention, expression, and language—may negatively affect emotional regulation, cognitive development, memory, learning, reasoning, behavior,

empathy, and recognition and interpretation of the emotional states and behaviors of others in adulthood (Carpenter & Stacks, 2009). Male perpetrators of IPV with a history of witnessing parental violence have a higher tendency for impulsivity, aggression, and antisocial behavior, which may be genetically inherited, or significantly more likely to develop in response to a highly stress-inducing traumatic event (Holtzworth-Munroe & Stuart, 1994; Huesmann & Eron, 1992; Wang et al., 2008). Moreover, Holtzworth-Munroe and Stuart (1994) suggested that male perpetrators of IPV have been shown to have high activity in the behavioral activation system and low activity in the behavioral inhibition system, explaining:

> The behavioral activation system (BAS) regulates behavior in response to unconditioned rewards or nonpunishment (e.g., it activates behavior in response to cues for reward); the behavioral inhibition system (BIS) regulates appetitively motivated behavior in response to stimuli, indicating that punishment will occur if the response is made (e.g., it inhibits behaviors that would otherwise occur when cause for response-contingent punishment are present . . . Individuals who have either high activity in the BAS or low activity in the BIS may be impulsive. (p.488)

According to Dutton (1999), the younger the age and the longer the duration of a highly stressful traumatic event experienced in childhood (i.e. parental IPV), the more likely adult individuals will manifest long-term effects with the regulation of arousal, anger, anxiety, and sexual impulse in adulthood. Dutton (1999) continued to explain that "because people with PTSD are primed to identify threat, they engage in survival mode anger more rapidly. The spreading activation of threat schemas strongly potentiates anger. Anger schemas are integrated mental representations that entail appraisals of threat. As soon as an individual detects evidence of a threat, anger and aggression are potentiated," (p.439).

In addition, studies showed that men who were socialized in a negative family environment, characterized by episodes of physical and emotional abuse (especially that directed towards the mother): (a) were unable to effectively communicate their feelings, (b) found difficulty solving problems rationally and non-violently, (c) lacked sympathy and empathy for their victims and others, and (d) were incognizant of the negative consequences precipitated by their violent actions (Adams, 2006; Barnett et al., 2005). Thus, abusive men utilized and resorted to violence as a mode of physical expression of feelings they cannot express verbally (Barnett et al., 2005). According to Dutton (1999) "martially violent men demonstrated social information processing skills deficits (i.e. generation of aggressive responses, inability to generate conflict resolving responses) in response to marital conflicts, particularly marital conflicts depicting wife rejection or abandonment. These findings suggest that violent men, when faced with conflict situations, evidence a variety of social information processing skills deficits that increase the risk of physical aggression" (p.441).

Childhood Exposure to IPV and Adult Attachment

According to Craissati, McClurg and Browne (2002), a majority of young offenders who are incarcerated significantly evidenced a history of poor family relationships, parental separation and loss, and physical/sexual abuse or neglect, with poor emotional attachments with primary caretakers. Craissati et al. (2002) also reported that adult males who were psychologically abused by episodes of interparental IPV exhibit behaviors characteristic of insecure attachment, and perceive threats of abandonment differently than those individuals with normal attachment styles. Similarly, Holtzworth-Munroe and Stuart (1994) postulated that maritally violent men who were

unable to form trusting relationships with the maritally abusive or abused parent may exhibit difficulties in maintaining positive and healthy relationships with intimates. Bowlby (1973) the impetus behind attachment theory explained, there are four adult patterns of attachment, each with its own unique characteristics that are believed to lead to a particular type of abuser, propagating the cycle of abuse from the witnessing child to the abusive adult: (a) anxious-ambivalent or anxious attachment; (b) compulsive self-reliance; (c) compulsive care-giving; and (d) emotional detachment—three of which will be discussed, namely (a), (b), and (d) (Sable, 1997).

Individuals who grow up in an attached and emotionally responsive setting, where their affectional needs are being met, are confident that others will be supportive in their time of need, and are capable of forming meaningful and healthy relationships with others (Sable, 1997). Anxiously attached individuals lack the certainty that they have others to count on and feel that they must be very close to people or places that represent security for fear of losing them. Those adults generally lack feelings of security and experience adult separation anxiety at the possibility of losing a relationship, or that which they deem as their "safety net". Anxiously attached individuals may exhibit some if not all of the following characteristics: (a) clinginess; (b) overdependence; (c) immaturity; (d) demanding nature; (e) hesitance to pursue new activities or relationships; (f) over-involvement with past issues. This type of adult anxiety may lead to depression, suicidal ideation, and eating disorders. In contrast, individuals who are compulsively self-reliant do not have confidence that the affectional figures will be available, therefore they deny any need for support and attachment, and maintain their self-sufficiency while hiding their fear of trusting others. These individuals were most likely products of

unreliable parenting, parental separation, rejection, pressure to inhibit feelings, and ridicule when seeking comfort, therefore emotional attachment, dependence or manifestations thereof are defensively avoided. Some disorders associated with this type of attachment style are: (a) depression, (b) psychosomatic symptoms, (c) personality disorders, (d) alcoholism, and (e) suicide. Finally, the detached personality depicts an individual who is extremely removed and distrustful of others, who may manifest severe anxiety, depression and/or anger if they were pushed into emotionally connecting. They arise from traumatic familial setting characterized by emotional and physical abuse, separation and loss (Sable, 1997).

Summary

Generally, men who perpetrate IPV may manifest many of the following characteristics: (a) numerous attitudes of the devaluement of women (i.e. objectifying and demeaning); (b) positive associations and general acceptance of abuse as a valid method to solve marital conflict; (c) evading responsibility for and minimizing actions (i.e. “could not have been that bad if nothing was broken”); (d) inability to manage anger, or express it appropriately; (e) power and control issues; (f) mistrust and jealousy; (g) a history of childhood exposure to interparental physical and emotional violence or threats of violence; (h) substance use and abuse; (i) high rate of unemployment, or intermittent employment; and (j) less than high school education (Tilley & Brackley, 2005). Moreover, male perpetrators of IPV with a history of witnessing parental violence have a higher tendency for impulsivity, aggression, and antisocial behavior, which may be genetically inherited, or significantly more likely to develop in response to a highly

stress-inducing traumatic event (Holtzworth-Munroe & Stuart, 1994; Huesmann & Eron, 1992; Wang et al., 2008).

Furthermore, studies showed that men who were socialized in a negative family environment, characterized by episodes of physical and emotional abuse (especially that directed towards the mother): (a) were unable to effectively communicate their feelings; (b) found difficulty solving problems rationally and non-violently; (c) lacked sympathy and empathy for their victims and others; and (d) were incognizant of the negative consequence precipitated by their violent actions (Adams, 2006; Barnett et al., 2005). According to Bowlby (1973), there are three IPV relevant adult patterns of attachment: (a) anxious-ambivalent or anxious attachment; (b) compulsive self-reliance; and (c) emotional detachment. Anxiously attached individuals may exhibit some if not all of the following characteristics: (a) clinginess, (b) overdependence, (c) immaturity, (d) demanding nature, (e) hesitance to pursue new activities or relationships, and (f) over-involvement with past issues. Compulsively self-reliant perpetrators of IPV do not have confidence that the affectional figures will be available, therefore they deny any need for support and attachment and maintain their self-sufficiency while hiding their fear of trusting others. These individuals were most likely products of unreliable parenting, parental separation, rejection, pressure to inhibit feelings, and ridicule when seeking comfort. Therefore, emotional attachment, dependence, or any manifestations thereof, are defensively avoided. Finally, the detached personality depicts an individual who is extremely removed and distrustful of others, who may manifest severe anxiety, depression and/or anger if they were pushed into emotionally connecting. They arise

from traumatic familial setting characterized by emotional and physical abuse, separation and loss (Sable, 1997).

Chapter Summary

Researchers indicated that aggression is a socially learned and reinforced behavior that children develop from witnessing interparental violence. The more frequently a child is exposed to IPV, the more likely he is to develop, rehearse, and utilize aggressive reactions to solve conflicts with intimate others upon reaching adulthood. Furthermore, children are more likely reflect in their own behavioral repertoires attitudes and behaviors witnessed to repeatedly elicit desired results. Thus, children are indirectly rewarded for aggression, a trait that may likely resurface in adult intimate interactions (Eron et al., 1991; Wang et al., 2008).

Various studies showed that children who witness interparental abuse are more likely to manifest externalizing and internalizing behaviors as part of their daily behavioral repertoires (Adams, 2006; Carpenter & Stacks, 2009; Ward & Beech, 2006). Externalizing behaviors may include antisocial, destructive, or otherwise delinquent actions (i.e. tantrums, fights, vandalism, stealing, and etcetera), indicating a generally disturbed cluster of behaviors associated with children whom have been exposed to frequent IPV (Edleson, 1999; Fantuzzo & Mohr, 1999; Gewirtz & Edleson, 2007; Leschied et al., 2008; Owen et al., 2009). Contrastingly, internalizing behaviors include depression, anxiety, low self-esteem, inability to concentrate in school, as well as somatic disorders and illnesses (Fantuzzo & Mohr, 1999; Leschied et al., 2008; Owen et al., 2009; Silvern et al., 1995; Sternberg et al., 2006). Boys are more likely to exhibit externalizing behaviors, whereas girls are more likely to internalize (Edleson, 1999; Gewirtz &

Edleson, 2007; Jaffe et al., 1986; Wolfe et al., 1985). Aggression is a socially learned and reinforced behavior that children develop from witnessing interparental violence. The more frequently a child is exposed to IPV, the more likely he is to develop, rehearse, and utilize aggressive reactions to solve conflicts with intimate others upon reaching adulthood. Furthermore, children are more likely reflect in their own behavioral repertoires attitudes and behaviors witnessed to repeatedly elicit desired results. Thus, children are indirectly rewarded for aggression, a trait that may likely resurface in adult intimate interactions. In addition to learning of behavior, children exposed to frequent parental IPV more likely manifest gender specific modeling, in which they are more likely to identify and mimic the same sex parent, performing the correspondingly witnessed gender role dynamic—which in most scenarios, and relevant to this author's work, the male fulfilling the father's role as perpetrator of IPV, and female fulfilling the mother's role as IPV victim (Eron et al., 1991; Wang et al., 2008).

Witnessing parental IPV may significantly affect the child's attachment to one or both of the parents, which may be detrimental to the child's cognitive and emotional health (Barnett et al., 2005; Cole & Cole, 2001). Inconsistent or rejecting caregivers thwart healthy personality development and positive models of healthy interaction with others, which continue to affect the person as an adult (Sable, 1997). Childhood, and later adulthood, symptoms of anxiety, depression or anger, therefore, are responses to disruptions of personal bonds, which interfere with adequate functioning and fulfilling relationships with others (Sable, 1997).

Generally, men who perpetrate IPV may manifest many, of the following characteristics: (a) numerous attitudes of the devaluement of women (i.e. objectifying

and demeaning); (b) positive associations and general acceptance of abuse as a valid method to solve marital conflict; (c) evading responsibility for and minimizing actions (i.e. “could not have been that bad if nothing was broken”); (d) inability to manage anger, or express it appropriately; (e) power and control issues; (f) mistrust and jealousy; (g) a history of childhood exposure to interparental physical and emotional violence or threats of violence; (h) substance use and abuse; (i) high rate of unemployment, or intermittent employment; and (j) less than high school education (Tilley & Brackley, 2005). Moreover, male perpetrators of IPV with a history of witnessing parental violence have a higher tendency for impulsivity, aggression, and antisocial behavior, which may be genetically inherited, or significantly more likely to develop in response to a highly stress-inducing traumatic event (Holtzworth-Munroe & Stuart, 1994; Huesmann & Eron, 1992; Wang et al., 2008).

Furthermore, studies show that men who were socialized in a negative family environment, characterized by episodes of physical and emotional abuse (especially that directed towards the mother) are: (a) unable to effectively communicate their feelings, (b) find difficulty solving problems rationally and non-violently, (c) lack sympathy and empathy for their victims and others, and (d) are incognizant of the negative consequence precipitated by their violent actions (Adams, 2006; Barnett et al., 2005). According to Bowlby’s attachment theory, there are three IPV relevant adult patterns of attachment: (a) anxious-ambivalent or anxious attachment; (b) compulsive self-reliance; (c) emotional detachment. Anxiously attached individuals may exhibit some if not all of the following characteristics: (a) clinginess; (b) overdependence; (c) immaturity; (d) demanding nature; (e) hesitance to pursue new activities or relationships; (f) over-involvement with

past issues. Compulsively self-reliant perpetrators of IPV do not have confidence that the affectional figures will be available, therefore they deny any need for support and attachment, and maintain their self-sufficiency while hiding their fear of trusting others. These individuals were most likely products of unreliable parenting, parental separation, rejection, pressure to inhibit feelings, and ridicule when seeking comfort, therefore emotional attachment, dependence or manifestations thereof are defensively avoided. Finally, the detached personality depicts an individual who is extremely removed and distrustful of others, who may manifest severe anxiety, depression and/or anger if they were pushed into emotionally connecting. They arise from traumatic familial setting characterized by emotional and physical abuse, separation and loss (Sable, 1997).

Chapter 3

METHODOLOGY

Introduction

In this Capstone project, the author qualitatively meta-analyzed 44 studies relating to the intergenerational transmission of intimate partner violence (IPV). Initially, the author examined the available data to find a statistical significance correlating the effects of male specific childhood exposure to interparental IPV and adult perpetration of IPV in dating and/or marital relationships. However, there was no sufficient data to establish statistical relevance for a quantitative Capstone project. Instead, the author examined the various studies to find relevant results exploring the short- and long-term effects of male specific childhood exposure to IPV and adult perpetration of IPV.

Method

The author examined 44 studies exploring the topic of childhood exposure to IPV and adult perpetration of IPV and summarized her findings in two tables (found in the results section). The studies were selected from a group of articles found on the PsycINFO database on the Regis Library website, based on their availability and relevance to the topic. The author searched the PsycINFO database using the following key words: (a) childhood exposure to intimate partner violence; (b) witnessing intimate partner violence; (c) effects of intimate partner violence and children; (d) intergenerational transmission of intimate partner violence; (e) family origin of intimate partner violence; (f) family origin of dating violence; (g) witnessing violence in childhood and dating violence; (h) effects of intimate partner violence on male children;

(i) effects of witnessing violence towards mother; and other variations of the above key phrases. The author then read and analyzed each article, extracted the relevant information, and organized it into two tables containing the following: (a) citation of the study; (b) hypothesis; (c) sample size; and (d) results. Within the first table, the author alphabetically grouped the studies by last name of author, for ease of retrieval. In the second table, the author reorganized the articles by studies similar in hypothesis and outcome.

Chapter 4

RESULTS

Introduction

The following tables comprise the results chapter of the Capstone project. Studies analyzed are organized into two tables containing the following: (a) citation of the study; (b) hypothesis; (c) sample size; and (d) results. In the first table, the author alphabetically grouped the studies by last name of author, for ease of presentation and future retrieval, if the research was to be replicated. In the second table, the author juxtaposed the articles by studies similar in hypothesis and outcome, for ease of establishing a correlation.

Table 1: Alphabetized listing by first author summarizing study/article characteristics: Hypothesis, Sample, Results

Study	Citation	Hypothesis	Sample	Results
1	Abrahams, N., & Jewkes, R. (2005)	Correlation between male children witnessing abuse and engaging in IPV in adulthood	1,800 males (20-50+ yoa) from 3 municipalities in South Africa	Men who witnessed abuse were also abused, manifested increased use of drugs/alcohol, displayed antisocial behavior and perpetrated IPV in adulthood.
2	Adams, C. (2006)	Effects of witnessing family violence on children's development: Article analysis	N/A	Children who witness IPV manifested increased PTSD symptomology, low self-esteem, depression, externalizing and internalizing behaviors, low cognitive functioning and academic achievement.
3	Alexander, P., Moore, S., & Alexander, E. (1991)	Effects of witnessing parental IPV on perpetration of dating violence	152 male 228 female college students (mean age= 20 yoa)	Severe father-to-mother abuse correlated with aggressive male behavior in dating relationships and positive attitude/acceptance of IPV.
4	Carpenter, G., & Stacks, A. (2009)	Effects of exposure to IPV in early childhood on development	N/A	Chronic exposure to IPV increased stress hormones in children and correlated with various problems in cognitive functioning and psychological health.
5	Carr, J., & VanDeusen, K. (2002)	Family of origin violence and negative attitudes may predict perpetration of sexual and physical dating violence	99 male college students (mean age= 20)	Witnessing family of origin violence was a significant predictor of physical and dating violence.

Table 1: Continued

6	Doumas, D., Margolin, G., & John, R. (1994)	Correlation between family of origin abuse and marital aggression	90 male 91 female community sample	Exposure to aggressive behavior is predicative of aggressive across 3 generations for males (marital and parental in adulthood). For females, being exposed to interparental aggression increased risk for victimization.
7	Dube, S., Anda, R., Felitti, V., Edwards, V., & Williamson, D. (2002)	Correlation between witnessing IPV and adverse childhood experiences	17,421 persons from Health Appraisal Center (Kaiser Health)	Adverse childhood experiences, such as externalizing & internalizing behaviors, increased as the frequency of maternal battery increased.
8	Dutton, D. (1999)	Witnessing interparental IPV is a traumatic experience that may lead to later IPV	N/A	Traumatic stressors include witnessing maternal IPV, shaming and insecure parental attachment, and were likely to permeate as negative aggressive behavior in child's play and social interaction, with little parental supervision to alleviate stress and soothe.
9	Dutton, D. (2000)	Witnessing interparental IPV is a traumatic experience that may lead to later IPV	N/A	Male children who witnessed abuse manifested externalizing aggressive behavior and decreased secure/healthy attachment with parental figures.
10	Edleson, J. (1999)	Effects of childhood exposure to IPV	N/A	There are no causal conclusions that can be drawn, but there are correlations between witnessing abuse and behavioral/cognitive problems in childhood (externalizing & internalizing behaviors).

Table 1: Continued

11	El-Sheikh, M., Harger, J., & Whitson, S. (2001)	Higher levels of marital conflict may predict adjustment and health problems (externalizing & internalizing behaviors), buffered by vagal tone regulation	39 male 36 female children community sample	Children's level and frequency of exposure to verbal and physical parental IPV were strong predictors of children's physical health and behavior problems. Higher vagal tone had protective effects (not on severe/frequent episodes of IPV)
12	Eron, L., Huesmann, L., & Zelli, A. (1991)	Children learn aggressive behavior from parents, with the best predictor of later aggression being early aggression	535 persons 380 persons in two longitudinal study analyses	Parental behaviors were important in deterring their children's learning of aggressive behavior; aggressive punishment and rejection in childhood promoted aggression.
13	Fantuzzo, J., & Mohr, W. (1999)	Effects of exposure to IPV on children	N/A	Witnessing IPV is correlated with externalizing (i.e. aggressive actions), internalizing (i.e. depression, anxiety), impaired intellectual and academic functioning (i.e. inability to concentrate), low social competency, and chronic physical illnesses.
14	Fantuzzo, J., DePaola, L., Lambert, L., Martino, T., Anderson, G., & Sutton, S. (1991)	Childhood behavior problems due to witnessing IPV	23 mothers 84 children residing in a shelter	Correlation between witnessing interparental physical/verbal violence & extent of behavior problems in children—externalizing behaviors in boys

Table 1: Continued

15	Fergusson, D., & Horwood, L. (1998)	Varying exposure to inter-parental violence may be associated with increased risk of later adjustment problems	1,265 children Christchurch Health & Development Study (birth cohort)	There was a correlation between childhood exposure to abuse and mental health problems, substance abuse and juvenile crime—experiencing abuse, as well as family situation, also taken into account.
16	Fergusson, D., Boden, J., & Horwood, L. (2006)	Exposure to interparental violence in childhood predicts subsequent involvement in IPV and violent crime	1,265 children Christchurch Health & Development Study (birth cohort)	Weak associations between witnessing abuse and adult perpetration of IPV.
17	Gover, A., Kaukinen, C., & Fox, K. (2008)	Intergenerational transmission of abuse among college students—two studies	2,541 college students	Study #1: Victims of child abuse as well as those who witnessed interparental IPV perpetrated (males) and experienced (females) significantly higher rates of physical violence in dating relationships. Study #2: Participants who witnessed father-to-mother IPV were almost twice as likely to perpetrate (males) and experience (females) IPV in their dating relationships in comparison to those who did not witness interparental IPV.

Table 1: Continued

18	Huesmann, L., & Eron, L. (1992)	Correlation between child aggression and adult criminality	N/A	Aggression arises from cognitive scripts socially learned during childhood that are continuously rehearsed, eventually becoming automatic reactions in adulthood. The more aggressive the child, the better predictor of adult aggression.
19	Hughes, H. (1988)	Childhood behavior problems due to witnessing IPV	Shelter: 42 boys 55 girls (3-12 yoa) Comparison: 44 boys 39 girls (4-12 yoa)	Boys showed increase in externalizing behavior & girls showed increase in internalizing behavior in children who witnessed IPV and were also abused.
20	Hughes, H., & Luke, D. (1998)	Children who witness maternal battery are more likely to manifest behavioral problems	58 pairs of mother (20-50 yoa) and eldest child (6-12 yoa) residing in a shelter	Children were grouped in to clusters: “hanging in there” cluster manifested some anxiety; “high behavior problems” cluster displayed externalizing aggressive behaviors; “high general distress” cluster showed both behavioral and emotional problems with high externalizing and internalizing symptoms.

Table 1: Continued

21	Hughes, H., Parkinson, D., & Vargo, M. (1989)	Childhood exposure to IPV (witnessing and experiencing) correlates with behavioral and cognitive problems	37 families 44 children (witnessed only) 40 children (witnessed & experienced abuse) Control Group: 45 families 66 children	Witnessing children who were also abused had behavioral difficulties and performed at an inferior level to children not exposed to IPV or physical abuse in the control group.
22	Jaffe, P., Wolfe, D., Wilson, S., & Zak, L. (1986)	Gender differences in displaying externalizing & internalizing behaviors among children exposed to interparental IPV	IPV families: 36 boys 22 girls Non-IPV families: 33 boys 35 girls	Boys who witnessed interparental IPV displayed higher degrees of externalizing and internalizing behaviors, as well as exhibited a lower level of social competence. Girls experienced mostly internalizing symptoms.
23	Jankowski, M., Leitenberg, H., Henning, K., & Coffey, P. (1999)	Intergenerational transmission of abuse as a function of same-sex parent IPV, opposite sex parent IPV, or both parent IPV	602 male 974 female college students	Respondents who witnessed same-sex parent perpetrate marital violence were more likely to report having perpetrated IPV against a dating partner than those who witnessed opposite-sex parent perpetrate IPV.
24	Kinsfogel, K., & Grych, J. (2004)	Impact of parental conflict on adolescent dating attitudes	186 male 205 female students from public high schools (14-18 yoa)	Boys who witnessed higher levels of aggressive interparental conflict were more likely to perceive aggression as justifiable in dating relationships.

Table 1: Continued

25	Leschied, A., Chiodo, D., Nowicki, E., & Rodger, S. (2008)	Correlation between childhood exposure to IPV and adult perpetration of IPV—meta-analysis of 38 studies	N/A	Childhood exposure to IPV correlated with behavioral difficulties and conduct problems, emotional problems, lack of proper parental attachment and interaction, and predicted a risk for adult criminality.
26	Margolin, G., & Vickerman, K. (2007)	Witnessing interparental IPV correlates with PTSD symptoms in children and adolescents	N/A	Repeated exposure to traumatic stressors coupled with a lack of parental availability, trust, and soothing correlated with impairment in arousal and stress system and subsequent physiological and psychological distress.
27	Milletich, R., Kelley, M., Doane, A., & Pearson, M. (2010)	Exposure to interparental abuse during childhood and adult experiences of perpetration and victimization	183 male 475 female college students (mean age= 20 yoa)	Both male and female college students reported that women were more likely to perpetrate dating aggression, and that men were more likely to be victims of relationship aggression. High exposure to mother-to-father abuse correlated with the higher frequency of women reporting physical aggression perpetration toward male dating partners, whereas father-to-mother violence predicted greater frequency of physical aggression towards female partners.

Table 1: Continued

28	O'Keefe, M. (1998)	Witnessing interparental violence may translate into adult perpetration of abuse in dating relationships	1,012 students in public high schools Final sample (high levels of interpersonal abuse): 94 boys 138 girls	Childhood exposure to abuse may be one factor found in men who perpetrate IPV, but there are many factors that promote the transmission of IPV, such as low socioeconomic status, exposure to community violence, negative attitudes about females and gender roles, and positive attitudes about abuse in dating relationships.
29	Osofsky, J. (1999)	Witnessing interparental IPV has a negative impact on children	N/A	Children who were exposed to parental IPV manifested behavioral and psychological problems and received limited parental availability with low emotional responsiveness.
30	Rossman, B. (2001)	Children exposed to IPV are vulnerable to negative developmental effects	N/A	Children exposed to severe and repetitive IPV manifested symptoms of PTSD, behavioral/emotional problems, and cognitive/social impairments.
31	Seltzer, J., & Kalmuss, D. (1988)	Childhood exposure to interparental IPV may have a stronger effect on adult perpetration of violence than life strain, and life strain leads to IPV when coupled with childhood exposure to IPV	1,436 persons selected from the 1976 National Survey of Family Violence	Adults exposed to interparental IPV during childhood and experienced recent life strain were more likely to have perpetrated IPV in intimate relationships than those who were not exposed to abuse and/or have not experienced recent life strain.

Table 1: Continued

32	Silvern, L., Karyl, J., Waelde, L., & Hodges, W. (1995)	Men who abuse their intimate partners have a history of witnessing abuse as well as increased PTSD symptoms, depression and low self-esteem	263 male 287 female college students	In many cases, witnessing interparental IPV occurred concurrently with child abuse. In men, there was an increase of trauma-related symptoms due to being exposed to interparental violence.
33	Spaccarelli, S., Sandler, I., & Roosa, M. (1994)	IPV against mother as risk factor for child psychopathology	303 children (mean age= 10.5) 291 female caretakers 146 male caretakers	Child mental health problems (internalizing symptoms) were observed in girls; battered women mostly focused on own problems, in place of effective parenting.
34	Stagg, V., Wills, G., & Howell, M. (1989)	Impact of witnessing IPV on children	26 children (4-6 yoa) residing in a shelter	Children who were exposed to IPV manifested externalizing (males) and internalizing (females) symptoms.
35	Sternberg, K., Lamb, M., Guterman, E., & Abbott, C. (2006)	Effects of family violence on child behavior	61 boys 49 girls and parents recruited from a family service agency	Boys in the abused witness group, in which they witnessed as well as experienced abuse, had significantly more externalizing problems.
36	Straus, M. (2004)	Prevalence of dating violence worldwide	8,666 university students worldwide	IPV dating violence is the most prevalent type of violent crime and it is highly associated with positive attitudes towards abuse.
37	Straus, M., & Savage, S. (2005)	The greater neglectful behavior experienced as a child the higher probability of perpetrating dating violence	6,900 male and female college students worldwide	The results show that the more neglectful behavior experienced during childhood, the higher the rate of violence against a dating partner.

Table 1: Continued

38	Tilley, D., & Brackley, M. (2005)	Characteristics of male perpetrators of IPV	16 males from Batterers' Intervention and Prevention Program	General characteristics shared among perpetrating men were negative perceptions of women (i.e. objectifying), patriarchal/traditional gender roles, social incompetence, and childhood exposure to father-to-mother IPV.
39	Tschann, J., Pasch, L., Flores, E., VanOss Marin, B., Baisch, E., & Wibbelsman, C. (2009)	More frequent interparental conflict, negative behaviors during conflict, poor conflict resolution and interparental violence may predict greater adolescent violence perpetration and victimization	150 male and female high school students (16-20 yoa)	When parents argued more frequently, were verbally aggressive during conflict, or had poor conflict resolution, adolescents were more likely to be involved in dating violence.
40	Wang, M., Horne, S., Holdford, R., & Henning, K. (2008)	Intergenerational transmission of abuse: witnessing significantly contributes to adult perpetration of IPV in dating/marital relationships	492 males court mandated for treatment through Domestic Violence Assessment Center	Exposure to family of origin violence significantly predicted IPV in adult dating/marital relationships in generally offending group—though being physically abused and witnessing IPV, by comparison to witnessing only, may have played a more significant role in promoting IPV.
41	White, J., & Smith, P. (2004)	Men with childhood exposure to abuse (witnessing and experiencing) are more likely to be sexually and physically coercive towards women	835 male college students (18-20 yoa)	Childhood exposure to abuse (physical, sexual or witnessing) increased risk of sexual assault, though it was not the only factor that correlated with adult perpetration. Adolescent perpetration was also an important precursor to adult offending.

Table 1: Continued

42	Whitfield, C., Anda, R., Dube, S., & Felitti, V. (2003)	Witnessing interparental IPV correlates with adult perpetration of IPV	3,955 males 4,674 females selected from Kaiser Permanente Health Appraisal Center database	Men whose mothers had been battered had a higher risk of perpetration of IPV. As the number of violent childhood experiences increased, there was an increase in victimization in women and perpetration in men.
43	Wolf, K., & Foshee, V. (2003)	Role of anger expression style in mediating the relationship between witnessing interparental IPV and dating violence perpetration by adolescents	1,965 8th and 9th grade students	Adolescents exposed to family of origin violence learned anger expression styles which may lead to a heightened risk of adult perpetration of dating violence.
44	Wolfe, D., Jaffe, P., Wilson, S., & Zak, L. (1985)	Childhood behavior problems due to maternal stress/IPV	142 mothers 198 children (4-16 yoa)	Behavior problems & diminished social competence in children who witnessed maternal IPV

Table 2: Studies/articles grouped according to shared themes

Research Themes	Study Number
Childhood exposure to IPV—Adult Perpetration	1, 3, 5, 6, 8, 16, 17, 18, 23, 25, 27, 28, 31, 32, 37, 39, 40, 41, 42, and 43
Childhood exposure to IPV—Externalizing & Internalizing	2, 7, 9, 10, 13, 14, 19, 20, 22, 25, 30, 33, 34, 35, and 44
Childhood exposure to IPV—Cognitive/Emotional Impair.	2, 4, 8, 11, 12, 13, 15, 21, 23, 25, 26, 29, 30, 33, and 44
Childhood exposure to IPV—Positive IPV attitudes	3, 18, 24, 28, 36, and 38
Gender Specific Modeling—Identify with Same-Sex Parent	6, 9, 12, 17, 23, 27, and 42

Chapter 5

DISCUSSION

Discussion of Findings

Witnessing abuse as a child can be very traumatic and often manifests in various forms of psychopathology in adult life to include intimate partner violence (IPV). Many adults, who as children witnessed abuse, failed to develop the necessary social skills to interact non-violently with other humans, to include intimate partners. The author initially hypothesized that there exists a qualitative correlation between male children who witness adult males perpetrate violence against females in childhood and subsequent adult onset perpetration of violence against women. The author tested the hypothesis by reviewing literature and meta-analyzing 44 articles focusing on young adult males and their perpetration of dating violence, correlating with a possible history of maternal intimate partner violence and aggressive childhood behavior. After reviewing the articles the author arrived at the following conclusions:

1. Children who witnessed interparental IPV manifested increased internalizing and externalizing behaviors (Adams, 2006; Dube, Anda, Felitti, Edwards, & Williamson, 2002; Dutton, 2000; Edleson, 1999; Fantuzzo & Mohr, 1999; Fantuzzo, DePaola, Lambert, Martino, Anderson, & Sutton, 1991; Hughes, 1988; Hughes & Luke, 1998; Jaffe Wolfe, Wilson, & Zak, 1986; Leschied, Chiodo, Nowicki, & Rodger, 2008; Rossman, 2001; Spaccarelli, Sandler, & Roosa, 1994; Stagg, Wills, & Howell, 1989; Sternberg, Lamb, Guterman, & Abbott, 2006; Wolfe, Jaffe, Wilson, & Zak, 1985).

2. Children who witnessed interparental IPV manifested mild to severe forms of cognitive and emotional impairment that corresponded with the frequency and severity of the parental violence observed (Adams, 2006; Carpenter and Stacks, 2009; Dutton, 1999; El-Sheikh et al, 2001; Eron, Huesmann, & Zelli, 1991; Fantuzzo & Mohr, 1999; Fergusson & Horwood, 1998; Hughes, Parkinson, & Vargo, 1989; Jankowski Leitenberg, Henning, & Coffey, 1999; Leschied et al., 2008; Margolin & Vickerman, 2007; Osofsky, 1999; Rossman, 2001; Spaccarelli et al., 1994; Wolfe et al., 1985).

3. Men who witnessed parental IPV were more likely to perpetrate IPV in their dating or marital relationships (Abrahams & Jewkes, 2005; Alexander, Moore, & Alexander, 1991; Carr & VanDeusen, 2002; Doumas, Margolin, & John, 1994; Dutton, 1999; Fergusson, Boden, & Horwood, 2006; Gover, Kaukinen, & Fox, 2008; Huesmann & Eron, 1992; Jankowski et al., 1999; Leschied et al., 2008; Milletich, Kelley, Doane, & Pearson, 2010; O'Keefe, 1998; Seltzer & Kalmuss, 1988; Silvern, Karyl, Waelde, & Hodges, 1995; Straus & Savage, 2005; Tschann, Pasch, Flores, VanOss Marin, Baisch, & Wibbelsman, 2009; Wang, Horne, Holdford, & Henning, 2008; White & Smith, 2004; Whitfield, Anda, Dube, & Felitti, 2003; Wolf & Foshee, 2003).

4. Men who witnessed parental IPV were more likely to identify with the father/ male authority figure in abusive relationships and fulfill his role as the violent aggressor in dating/marital relationships (Doumas et al., 2002; Dutton, 2000; Eron et al., 1991; Gover et al., 2008; Jankowski et al., 1999; Milletich et al., 2010; Whitfield et al., 2003).

5. Men who perpetrated IPV were characterized by having more positive attitudes towards abuse (Alexander et al., 1991; Huesmann & Eron, 1992; Kinsfogel & Grych, 2004; O'Keefe, 1998; Straus, 2004; Tilley & Brackley, 2005).

The conclusions at which the author arrived were derived from correlational rather than causal relationships. There were no studies included that found a causes for adult perpetration of abuse, nor effects of witnessing abuse as a child. The relationships observed were merely correlational, and related various factors that increased the propensity for abusive adult behavior of child witnesses of domestic abuse. Overall, the factors associated with heightened susceptibility to male initiated IPV included: (a) childhood exposure to father-to-mother IPV; (b) child externalizing and internalizing behaviors; (c) cognitive and emotional impairments; and (d) positive attitudes towards abuse. The author deduces that more research needs to be conducted to better explore and understand the relationship between childhood exposure to and adult perpetration of IPV.

Limitations

The effectiveness of a meta-analysis greatly depends on the experimental validity and soundness of the research upon which it was founded. There were numerous limitations that may have affected the outcome of the meta-analysis, namely: (a) limited availability of peer reviewed journal articles and published books on the Regis University psychINFO database; (b) experimental diversity among the research projects exploring the correlation between childhood exposure to and adult perpetration of IPV; (c) dissimilarity in hypothesis, sample size and selection, experimental measures, and

procedures among various research experiments; and (d) with similarly conducted research experiments, arrival at competing conclusions, or no conclusion at all. The author hypothesizes that more similarly structured research projects need to be conducted to further expand the understanding of the etiology and correlations of IPV, and that great discretion needs to be utilized when attempting to interpret the findings of such studies.

General Discussion

Researchers believe that aggression is a socially learned and reinforced behavior that children develop from witnessing interparental violence. The more frequently a child is exposed to IPV, the more likely he is to develop, rehearse, and utilize aggressive reactions to solve conflicts with intimate others upon reaching adulthood. Furthermore, children are more likely reflect in their own behavioral repertoires attitudes and behaviors witnessed to repeatedly elicit desired results. Thus, children are indirectly rewarded for aggression, a trait that may likely resurface in adult intimate interactions (Eron et al., 1991; Wang et al., 2008).

Various studies indicated that children who witness interparental abuse are more likely to manifest externalizing and internalizing behaviors as part of their daily behavioral repertoires (Adams, 2006; Carpenter & Stacks, 2009; Ward & Beech, 2006). Externalizing behaviors may include antisocial, destructive, or otherwise delinquent actions (i.e. tantrums, fights, vandalism, stealing, etc.), indicating a generally disturbed cluster of behaviors associated with children whom have been exposed to frequent IPV (Edleson, 1999; Fantuzzo & Mohr, 1999; Gewirtz & Edleson, 2007; Leschied et al., 2008; Owen, Thompson, Shaffer, Jackson & Kaslow, 2009). Contrastingly, internalizing behaviors include depression, anxiety, low self-esteem, inability to concentrate in school,

as well as somatic disorders and illnesses (Fantuzzo & Mohr, 1999; Leschied et al., 2008; Owen et al., 2009; Silvern et al., 1995; Sternberg et al., 2006). Boys are more likely to exhibit externalizing behaviors, whereas girls are more likely to internalize (Edleson, 1999; Gewirtz & Edleson, 2007; Jaffe et al., 1986; Wolfe et al., 1985). Aggression is a socially learned and reinforced behavior that children develop from witnessing interparental violence. The more frequently a child is exposed to IPV, the more likely he is to develop, rehearse, and utilize aggressive reactions to solve conflicts with intimate others upon reaching adulthood. Furthermore, children are more likely reflect in their own behavioral repertoires attitudes and behaviors witnessed to repeatedly elicit desired results. Thus, children are indirectly rewarded for aggression, a trait that may likely resurface in adult intimate interactions. In addition to learning of behavior, children exposed to frequent parental IPV more likely manifest gender specific modeling, in which they are more likely to identify and mimic the same sex parent, performing the correspondingly witnessed gender role dynamic—which in most scenarios, and relevant to this author's work, the male fulfilling the father's role as perpetrator of IPV, and female fulfilling the mother's role as IPV victim (Eron et al., 1991; Wang et al., 2008).

Witnessing parental IPV may significantly affect the child's attachment to one or both of the parents, which may be detrimental to the child's cognitive and emotional health (Barnett, Miller-Perrin & Perrin, 2005; Cole & Cole, 2001). Inconsistent or rejecting caregivers thwart healthy personality development and positive models of healthy interaction with others, which continue to affect the person as an adult (Sable, 1997). Childhood, and later adulthood, symptoms of anxiety, depression or anger,

therefore, are responses to disruptions of personal bonds, which interfere with adequate functioning and fulfilling relationships with others (Sable, 1997).

Men who perpetrate IPV may manifest many, of the following characteristics: (a) numerous attitudes of the devaluement of women (i.e. objectifying and demeaning); (b) positive associations and general acceptance of abuse as a valid method to solve marital conflict; (c) evading responsibility for and minimizing actions (i.e. "could not have been that bad if nothing was broken"); (d) inability to manage anger, or express it appropriately; (e) power and control issues; (f) mistrust and jealousy; (g) a history of childhood exposure to interparental physical and emotional violence or threats of violence; (h) substance use and abuse; (i) high rate of unemployment, or intermittent employment; and (j) less than high school education (Tilley & Brackley, 2005). Moreover, male perpetrators of IPV with a history of witnessing parental violence have a higher tendency for impulsivity, aggression, and antisocial behavior, which may be genetically inherited, or significantly more likely to develop in response to a highly stress-inducing traumatic event (Holtzworth-Munroe & Stuart, 1994; Huesmann & Eron, 1992; Wang et al., 2008).

Furthermore, studies showed that men who were socialized in a negative family environment, characterized by episodes of physical and emotional abuse (especially that directed towards the mother) were: (a) unable to effectively communicate their feelings, (b) find difficulty solving problems rationally and non-violently, (c) lack sympathy and empathy for their victims and others, and (d) were incognizant of the negative consequence precipitated by their violent actions (Adams, 2006; Barnett et al., 2005). Entailed in Bowlby's attachment theory, there are three IPV relevant adult patterns of

attachment: (a) anxious-ambivalent or anxious attachment; (b) compulsive self-reliance; (c) emotional detachment. Anxiously attached individuals may exhibit some if not all of the following characteristics: (a) clinginess; (b) overdependence; (c) immaturity; (d) demanding nature; (e) hesitance to pursue new activities or relationships; (f) over-involvement with past issues. Compulsively self-reliant perpetrators of IPV do not have confidence that the affectional figures will be available, therefore they deny any need for support and attachment, and maintain their self-sufficiency while hiding their fear of trusting others. These individuals were most likely products of unreliable parenting, parental separation, rejection, pressure to inhibit feelings, and ridicule when seeking comfort, therefore emotional attachment, dependence or manifestations thereof are defensively avoided. Finally, the detached personality depicts an individual who is extremely removed and distrustful of others, who may manifest severe anxiety, depression and/or anger if they were pushed into emotionally connecting. They arise from traumatic familial setting characterized by emotional and physical abuse, separation and loss (Sable, 1997).

This research topic exhibits significant relevancy because it examines the consequences of childhood exposure to interparental abuse and its implications on the future of the family unit, and our society as a whole. The stronger the established correlation between exposure to interparental IPV in childhood and adult perpetration of IPV, the greater the likelihood of renewed social interest in programs directed at the prevention of such abusive behaviors and ideologies, in addition to a likely collaborative educational outreach efforts of proactive individuals championing healthy interaction among family members, which span conflict resolution, proper attachment, and cohesion.

REFERENCES

Abrahams, N., & Jewkes, R. (2005). Effects of South African Men's Having Witnessed Abuse of Their Mothers During Childhood on Their Levels of Violence in Adulthood. *American Journal of Public Health*, *95*(10), 1811-1816.

Adams, C. (2006). The Consequences of Witnessing Family Violence on Children and Implications for Family Counselors. *The Family Journal*, *14*(4), 334-341.

Alexander, P., Moore, S., & Alexander, E. (1991). What is transmitted in the intergenerational transmission of violence?. *Journal of Marriage & the Family*, *53*(3), 657-668.

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders: fourth edition-tr*. Washington, DC: American Psychiatric Association.

Bandura, A. (1973). *Aggression: a social learning analysis.* Englewood Cliffs, NJ: Prentice-Hall.

Barnett, O., Miller-Perrin, C.L., & Perrin, R.D. (2005). *Family violence across the lifespan.* Thousand Oaks, CA: Sage Publications, Inc.

Carpenter, G., & Stacks, A. (2009). Developmental effects of exposure to intimate partner violence in early childhood: A review of the literature. *Children and Youth Services Review*, *31*(8), 831-839.

Carr, J., & VanDeusen, K. (2002). The relationship between family of origin violence and dating violence in college men. *Journal of Interpersonal Violence*, *17*(6), 630-646.

Cole, M. and Cole, S. R. (2001). *The development of children.* New York, NY: Worth Publishers.

Craissati, J., McClurg, G., & Browne, K. (2002). The parental bonding experiences of sex offenders: A comparison between child molesters and rapists. *Child Abuse & Neglect*, *26*(9), 909-921.

Doumas, D., Margolin, G., & John, R. (1994). The intergenerational transmission of aggression across three generations. *Journal of Family Violence*, *9*(2), 157-175.

Dube, S., Anda, R., Felitti, V., Edwards, V., & Williamson, D. (2002). Exposure to abuse, neglect and household dysfunction among adults who witnessed intimate partner violence as children: Implications for health and social services. *Violence and Victims*, *17*(1), 3-18.

Dutton, D. (1999). Traumatic origins of intimate rage. *Aggression and Violent Behavior*, *4*(4), 431-447.

Dutton, D. (2000). Witnessing parental violence as a traumatic experience shaping the abusive personality. *Journal of Aggression, Maltreatment & Trauma*, *3*(1), 59-67.

Edleson, J. (1999). Children's witnessing of adult domestic violence. *Journal of Interpersonal Violence*, *14*(8), 839-870.

El-Sheikh, M., Harger, J., & Whitson, S. (2001). Exposure to parental conflict and children's adjustment and physical health: The moderating role of vagal tone. *Child Development*, 72, 1617-1636

Eron, L., Huesmann, L., & Zelli, A. (1991). The role of parental variables in the learning of aggression. *The development and treatment of childhood aggression* (pp. 169-188). Hillsdale, NJ England: Lawrence Erlbaum Associates, Inc.

Fantuzzo, J., & Mohr, W. (1999). Prevalence and effects of child exposure to domestic violence. *The Future of Children*, *9*(3), 21-32.

Fantuzzo, J., DePaola, L., Lambert, L., Martino, T., Anderson, G., & Sutton, S. (1991). Effects of interparental violence on the psychological adjustment and competencies of young children. *Journal of Consulting and Clinical Psychology*, *59*(2), 258-265.

Fergusson, D., & Horwood, L. (1998). Exposure to interparental violence in childhood and psychosocial adjustment in young adulthood. *Child Abuse & Neglect*, *22*(5), 339-357.

Fergusson, D., Boden, J., & Horwood, L. (2006). Examining the intergenerational transmission of violence in a New Zealand birth cohort. *Child Abuse & Neglect*, *30*(2), 89-108.

Foshee, V. Bauman, K. & Linder, G. (1999). Family violence and the perpetration of adolescent dating vileince: examining social learning and social control processes. *Journal of Marriage and the Family*. 61. 331-342.

Gewirtz, A., & Edleson, J. (2007). Young children's exposure to intimate partner violence: Towards a developmental risk and resilience framework for research and intervention. *Journal of Family Violence*, *22*(3), 151-163.

Gover, A., Kaukinen, C., & Fox, K. (2008). The relationship between violence in the family of origin and dating violence among college students. *Journal of Interpersonal Violence*, *23*(12), 1667-1693.

Holtzworth-Munroe, A., & Stuart, G. (1994). Typologies of male batterers: Three subtypes and the differences among them. *Psychological Bulletin*, *116*(3), 476-497.

Holtzworth-Munroe, A., Meehan, J., Herron, K., Rehman, U., & Stuart, G. (2000). Testing the Holtzworth-Munroe and Stuart batterer typology. *Journal of Consulting and Clinical Psychology*, *68*(6), 1000-1019.

Huesmann, L., & Eron, L. (1992). Childhood aggression and adult criminality. *Facts, frameworks, and forecasts* (pp. 137-156). New Brunswick, NJ US: Transaction Publishers.

Hughes, H. (1988). Psychological and behavioral correlates of family violence in child witnesses and victims. *American Journal of Orthopsychiatry*, *58*(1), 77-90.

Hughes, H., & Luke, D. (1998). Heterogeneity in adjustment among children of battered women. *Children exposed to marital violence: Theory, research, and applied issues* (pp. 185-221). Washington, DC US: American Psychological Association.

Hughes, H., Parkinson, D., & Vargo, M. (1989). Witnessing spouse abuse and experiencing physical abuse: A 'double whammy'?. *Journal of Family Violence*, *4*(2), 197-209.

Jaffe, P., Wolfe, D., Wilson, S., & Zak, L. (1986). Family violence and child adjustment: A comparative analysis of girls' and boys' behavioral symptoms. *The American Journal of Psychiatry*, *143*(1), 74-77.

Jankowski, M., Leitenberg, H., Henning, K., & Coffey, P. (1999). Intergenerational transmission of dating aggression as a function of witnessing only same sex parents vs. opposite sex parents vs. both parents as perpetrators of domestic violence. *Journal of Family Violence*, *14*(3), 267-279.

Kinsfogel, K., & Grych, J. (2004). Interparental Conflict and Adolescent Dating Relationships: Integrating Cognitive, Emotional, and Peer Influences. *Journal of Family Psychology*, *18*(3), 505-515.

Knutson, J., Lawrence, E., Taber, S., Bank, L., & DeGarmo, D. (2009). Assessing children's exposure to intimate partner violence. *Clinical Child and Family Psychology Review*, *12*(2), 157-173.

Leibman, F. (1992). Childhood abandonment/adult rage: The root of violent criminal acts. *American Journal of Forensic Psychology*, *10*(4), 57-64.

Leschied, A., Chiodo, D., Nowicki, E., & Rodger, S. (2008). Childhood predictors of adult criminality: A meta-analysis drawn from the prospective longitudinal

literature. *Canadian Journal of Criminology and Criminal Justice*, *50*(4), 435-467.

López, E., Pérez, S., Ochoa, G., & Ruiz, D. (2008). Adolescent aggression: Effects of gender and family and school environments. *Journal of Adolescence*, *31*(4), 433-450.

Margolin, G., & Vickerman, K. (2007). Posttraumatic stress in children and adolescents exposed to family violence: I. Overview and issues. *Professional Psychology: Research and Practice*, *38*(6), 613-619.

Milletich, R., Kelley, M., Doane, A., & Pearson, M. (2010). Exposure to interparental violence and childhood physical and emotional abuse as related to physical aggression in undergraduate dating relationships. *Journal of Family Violence*, *25*(7), 627-637.

O'Keefe, M. (1998). Factors mediating the link between witnessing interparental violence and dating violence. *Journal of Family Violence*, *13*(1), 39-57.

Osofsky, J. (1999). The impact of violence on children. *The Future of Children*, *9*(3), 33-49.

Owen, A., Thompson, M., Shaffer, A., Jackson, E., & Kaslow, N. (2009). Family variables that mediate the relation between intimate partner violence (IPV) and child adjustment. *Journal of Family Violence*, *24*(7), 433-445.

Roche, K., Ahmed, S., & Blum, R. (2008). Enduring consequences of parenting for risk behaviors from adolescence into early adulthood. *Social Science & Medicine*, *66*(9), 2023-2034.

Rossman, B. (2001). Longer term effects of children's exposure to domestic violence. *Domestic violence in the lives of children: The future of research, intervention, and social policy* (pp. 35-65). Washington, DC US: American Psychological Association.

Sable, P. (1997). Disorders of adult attachment. *Psychotherapy: Theory, Research, Practice, Training*, *34*(3), 286-296.

Seltzer, J., & Kalmuss, D. (1988). Socialization and stress explanations for spouse abuse. *Social Forces*, *67*(2), 473-491.

Silvern, L., Karyl, J., Waelde, L., & Hodges, W. (1995). Retrospective reports of parental partner abuse: Relationships to depression, trauma symptoms and self-esteem among college students. *Journal of Family Violence*, *10*(2), 177-202.

Simons, D., Wurtele, S., & Durham, R. (2008). Developmental experiences of child sexual abusers and rapists. *Child Abuse & Neglect*, *32*(5), 549-560.

Spaccarelli, S., Sandler, I., & Roosa, M. (1994). History of spouse violence against mother: Correlated risks and unique effects in child mental health. *Journal of Family Violence*, *9*(1), 79-98.

Stagg, V., Wills, G., & Howell, M. (1989). Psychopathology in early childhood witnesses of family violence. *Topics in Early Childhood Special Education*, *9*(2), 73-87.

Sternberg, K., Lamb, M., Guterman, E., & Abbott, C. (2006). Effects of early and later family violence on children's behavior problems and depression: A longitudinal, multi-informant perspective. *Child Abuse & Neglect*, *30*(3), 283-306.

Straus, M. (1979). Measuring intrafamily conflict and violence: The Conflict Tactics (CT) Scales. *Journal of Marriage & the Family*, *41*(1), 75-88.

Straus, M. (2004). Prevalence of violence against dating partners by male and female university students worldwide. *Violence Against Women*, *10*(7), 790-811.

Straus, M., & Savage, S. (2005). Neglectful Behavior by Parents in the Life History of University Students in 17 Countries and Its Relation to Violence Against Dating Partners. *Child Maltreatment*, *10*(2), 124-135.

Tilley, D., & Brackley, M. (2005). Men Who Batter Intimate Partners: A Grounded Theory Study Of The Development Of Male Violence In Intimate Partner Relationships. *Issues in Mental Health Nursing*, *26*(3), 281-297.

Tschann, J., Pasch, L., Flores, E., VanOss Marin, B., Baisch, E., & Wibbelsman, C. (2009). Nonviolent aspects of interparental conflict and dating violence among adolescents. *Journal of Family Issues*, *30*(3), 295-319.

Wang, M., Horne, S., Holdford, R., & Henning, K. (2008). Family of origin violence predictors of IPV by two types of male offenders. *Journal of Aggression, Maltreatment & Trauma*, *17*(2), 156-174.

Ward, T., & Beech, A. (2006). An integrated theory of sexual offending. *Aggression and Violent Behavior*, *11*(1), 44-63.

White, J., & Smith, P. (2004). Sexual assault perpetration and reperpetration: From adolescence to young adulthood. *Criminal Justice and Behavior*, *31*(2), 182-202.

Whitfield, C., Anda, R., Dube, S., & Felitti, V. (2003). Violent childhood experiences and the risk of intimate partner violence in adults: Assessment in a large health maintenance organization. *Journal of Interpersonal Violence*, *18*(2), 166-185.

Wolf, K., & Foshee, V. (2003). Family violence, anger expression styles, and adolescent dating violence. *Journal of Family Violence*, *18*(6), 309-316.

Wolfe, D., Jaffe, P., Wilson, S., & Zak, L. (1985). Children of battered women: The relation of child behavior to family violence and maternal stress. *Journal of Consulting and Clinical Psychology*, *53*(5), 657-665.