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# CONTROVERSIES IN BATTERER INTERVENTION PROGRAMS: DOING GOOD, WELL

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## ABSTRACT

One in four women has been a victim of domestic violence perpetrated by an intimate partner. Instead of holding the abusers accountable, many victims will be questioned and ostracized for not leaving an unhealthy relationship, which shifts the blame from the abuser to the victim. A variety of Batterer Intervention Programs are available to abusers, including anger management, therapy, and counseling. One such program is the Duluth Model, which focuses on the transformation of batterers through a social change framework. This research will examine the Duluth Model as it is being implemented in Ann Arbor, Michigan.

## INTRODUCTION

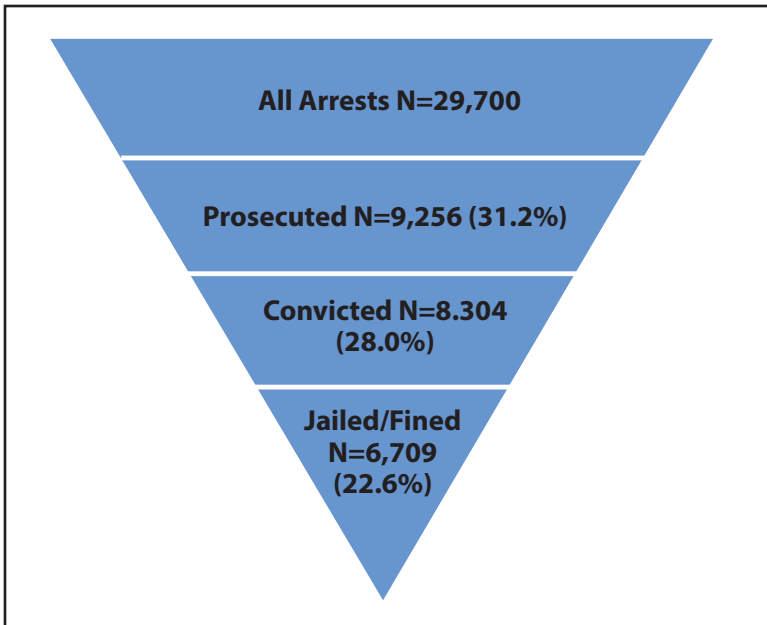
Domestic Violence (DV) and Intimate Partner Violence (IPV) are crimes that affect women and children across all cultures and countries, and are rooted in social and cultural attitudes and norms that privilege men over women and girls (World Health Organization, 2012). According to the World Health Organization (2012), DV and IPV may involve physical, sexual, reproductive, mental, and/or behavioral abuse. Physical abuse results in the victim experiencing bruising, burns, bites and fractures of bones or teeth, stabbing injuries and even death. Sexual and reproductive

abuse may result in “unintended/unwanted pregnancy, abortion/unsafe abortions, sexually transmitted infections, urinary tract infections,” while mental abuse may cause “depression, eating disorders, stress and anxiety disorders, self-harm, low self-esteem and suicide attempts.” Behavioral abuse may result in “harmful alcohol and substance use, multiple sexual partners, lower rates of contraceptive and condom use” by survivors (World Health Organization, 2012).

In addition to the trauma inflicted on women, the negative effects of exposure to intimate partner violence (IPV) may influence some externalized behaviors for men, which can result in a long cycle of violence. IPV is defined by the Centers for Disease Control and Prevention (2008) as “violence directed at a current or former partner that poses serious risks not only to the physical and psychological health of the victims, but also to their children’s adjustment.” It is estimated that between 3% and 16% of United States couples engage in IPV each year (Fagan & Wright, 2011). The consequences are staggering.

About 47% of boys exposed to IPV committed one or more violent crimes in the past year (Fagan & Wright, 2011). Wood and Sommers (2011) discuss a study that examined 115 children ranging from the ages of 6-11, and noted the gender differences in children exposed to IPV. The results of the study indicate that boys who witnessed IPV were more likely to engage in external violence, such as hitting or fighting. They further assert that boys displaying more externalized behavioral issues may find it more culturally appropriate to be aggressive toward their peers (Wood & Sommers, 2011).

Estimates suggest that 33% to 72% of DV cases go unreported. The reasons why women do not report DV and IPV incidents include “personal (embarrassment, fear of retaliation, economic dependency) and societal (imbalanced power relations for men and women in society, privacy of the family, victim blaming attitudes)” (Gracia, 2004, p.536). Even if reported, one study indicates that DV prosecution rates are as low as 10% in misdemeanor DV cases (Sloan, Platt, Chepke, & Blevins, 2013). **Figure 1.** compares the number of DV arrests in relation to



**Figure 1:** Domestic violence arrests and convictions in North Carolina (Sloan, Platt, Chepke, & Blevins, 2013).

conviction, imprisonment and fines in North Carolina in 2007 (Sloan, Platt, Chepke, & Blevins, 2013).

While nearly 30,000 DV arrests were made, fewer than 7,000, or 22.6% of batterers faced imprisonment or fines. Some of the factors contributing to the low prosecution rates are “the high burden of proof, the lack of availability of admissible evidence, and low participation of victims in the judicial process” (Sloan, Platt, Chepke, & Blevins, 2013).

Empirical evidence shows that sanctions against DV perpetrators do not deter them from continuing to batter their partners (Sloan, Platt, Chepke, & Blevins, 2013). Some studies have found that time spent in prison increases cognitive biases on violence, as well as contributing to the intensity of a batterer’s psychopathological symptoms (Montalvo, Echauri, Martinez, & Azcarate, 2012). This could make the perpetrator more dangerous. The question remains as to how to change batterers’ behavior, and how to hold them accountable for their actions.

## Why Men Batter

Violence inflicted on women has long been socially accepted in our society; this idea is passed through social and cultural norms (World Health Organization, 2009). The normalization of abuse against women has been structurally supported, and remains extremely harmful. According to Gosselin's *Heavy Hands* (2005), most violent acts against women occur in their homes. Gender norms and patriarchal beliefs maintain a culture that tolerates hurting women, because women are placed at a lower position than men in society. Despite women making up more than 50% of the population, "[m]en are traditional lawmakers and property owners who have excluded female participation and justified abuse in order to maintain power" (Gosselin, 2005, p. 81).

In addition to the lack of female representation in American government, reproductive rights are a constant battle, with many supporting the idea that women should not have control over their own body. Many men believe that women "perform" their gender roles through domestic duties, child responsibilities and marriage, making them less valuable than men and more vulnerable to abuse (Gosselin, 2005). Women are taught to be physically and sexually pleasing to men as well—rendering them more likely to be targets of sexual assault. Men are taught to be "self-reliant or aggressive" (Gosselin, 2005, p.76), behaviors that not only affect women, but strongly influence boys, who are socialized into believing they must seek strength, power, control and money—proof of one's "masculinity."

The media underplay the seriousness of DV by reporting about it in passive voices. Julia Penelope, a linguist, has discussed how news headlines such as, "Women allegedly raped," are far less powerful than, "Man raped women" (Katz, 2006). The first headlines remove accountability from the male perpetrator, by not even including him in the sentence, while the second headline reinforces the man's accountability for the problem. Easta, Holland & Judd (2015) conclude that the "news media can influence how social issues are perceived and responded to by various publics" (p.105). In his book *The Macho Paradox: Why Some Men Hurt Women and How All Men Can Help* (2006), Katz

asserts that men's violence against women is too often seen as a "women's issue," when it should be of great concern to men. Men tend to feel that women's problems have "nothing to do with them," when in reality, violence against women must be addressed by men (Katz, 2006). Katz also notes that the term "feminist" is often met with derision, and grouped with negative expressions such as "male-bashers," "man haters," and "Femi-Nazi." In order to move toward equality, we must be able to accept the term "feminist" as it is defined—a person who seeks equality between the sexes (Katz, 2006).

Performers in the music and film industries exert a great influence on how people think about men and women's roles in our society. People are conditioned to accept attitudes and behaviors that are harmful to women, without being aware of it. Katz examines the success of many popular recording artists who express misogynist ideas in their music, reinforcing in boys and men the belief that violent behavior against women is socially acceptable. Eminem is one such artist who, referring to a physical assault by a professional athlete against his fiancée, composed the following lyrics: "Bitch I'll punch Lana Del Rey right in the face twice / Like Ray Rice in broad daylight / In the plain sight of the elevator surveillance / 'Til her head is banging on the railing / Then celebrate with the Ravens" (*Shady XV*, 2014).

Equality between men and women should not take power away from men, but "rather...equalize it and share it between both genders" (Gosselin, 2005, p.81). When experiencing the sense that their power is threatened, some men resort to violence to re-establish dominance in the home. As long as gender inequality exists, high rates of intimate partner violence against women are likely to persist.

In spite of the influence of social structure and culture, men do have a choice. *Rational choice theory*, developed by Italian sociologist César Beccaria, explains an individual's decision to engage in criminal acts (Seigal, 2015), and may play a role in our understanding of domestic violence. Rational choice theory asserts that offenders measure the penalties of their abusive behavior (possible jail time, criminal sanctions, etc.)—which is

often not prosecuted to the fullest extent of the law—and choose to ignore the consequences (Gosselin, 2005). Batterers are often resistant to anger management courses, counseling, or other forms of intervention. Although some battering could be a result of a mental illness, only 10% of the population is estimated to be suffering from a mental illness. Even with that, the mentally ill population is considered to be the least violent. Battering is used strategically and in patterned behavior, which is why multiple perspectives must be employed to counter it.

### **The Duluth Model**

The Duluth Model, or the Domestic Violence Intervention Project, is the most prominent and best known Batterer Intervention Program (BIP) in the country (Gondolf, 2016). It was created in 1970 in Duluth, Minnesota as the first community-based response to domestic violence (DV). The Duluth Model's structure was developed using information taken from broad-based research, discussions with abused women, and by working with other criminal justice departments (Miller, 2016). Utilizing this research, the Duluth Model introduced the Power and Control Wheel (**Figure 3**, below), which forms the basis for batterer intervention and DV services (Miller, 2016).

The Duluth Model is founded on the feminist tenet that a patriarchal society confers privilege to men, including the belief that men are entitled to use physical power and psychological control to maintain that privilege (Pence & Paymar, 2011). In order to help perpetrators of DV comprehend their source of entitlement, the Duluth Model seeks to use “conceptual clarity, transformative counseling, peer-reeducation, and nonviolent communication” (Gondolf, 2016). The Duluth Model makes the victim's safety the top priority. Working with the cooperation of other agencies, risk assessments are “collected, analyzed and distributed,” in order for all assisting agencies to manage a DV case appropriately (Miller, 2016).

In DV cases, a great deal of pressure to provide evidence of abuse is placed on the victim, unless a police officer witnessed the crime, or there were serious injuries (Miller, 2016). Research shows that fearing retribution, victims of DV are often reluctant to testify against their abusers, though their testimony often

determines whether or not the perpetrator will be convicted of the crime. The Domestic Abuse Intervention Project (DAIP) worked to develop policies that could persecute offenders, with or without a victim's testimony (Gondolf, 2016). The Duluth Model adapts its process to respond to new research concerning DV, and uses information taken from victims' observations in designing its interventions.

### **The Duluth Model at Work: “Alternatives to Domestic Aggression”**

The Duluth Model framework is currently being put into practice at Catholic Social Services in Ann Arbor, Michigan, in a program called “Alternatives to Domestic Aggression” (ADA). Ninety percent (90%) or more of the batterers in the program are Court mandated (Alternative to Domestic Aggression, 2017). Victims' services are not provided in the same location, out of concern for victims' safety.

The batterer must pay a \$60.00 orientation fee and purchase a workbook with assignments they must complete in order to advance through the stages of the program. This workbook costs \$25.00, and each session they attend has a fee, depending on their income (\$25.00-\$75.00 per session). Batterers must pay their fees in order to receive credit with the Court for having participated in the program.

Batterers must attend 52 group sessions to complete the program. They are only allowed 9 absences, which can occur only at certain points in the program. Participants must adhere to the program's cancellation policy, and batterers are penalized for non-attendance, with 3 “aidas” (penalties) adding an additional required session to their plan. These “aidas” can also be received for not completing required assignments before a session, being tardy, not starting the group on time, cell phone ringing or other disruptions, and not arriving with the workbook and a pen. There are clearly stated consequences associated with not being accountable in this program.

The program is self-paced, with the batterer determining the speed with which he advances through each of four stages: *Discovery, Foundations, Tactics, and Options* (**Figure 2**).





**Figure 2:** Four stages of the Alternatives to Domestic Aggression Program, based on the Duluth Model. Photo Credit: Catholic Social Services (ADA).

### **The Discovery Stage**

According to the Catholic Social Services website (<http://csswashtenaw.org/ada>), batterer intervention begins with the *Discovery* stage, which is an assessment of whether the program is the best method to address the behavior of the batterer. The batterers must provide ten reasons why they should not be in the program, or ten specific things done in their lifetime that make them believe they do belong in the program. Participants must use the following formula as a model when formulating their reasons:

1. I (abusive act+ (important details, where, how, witnesses, etc.) + (consequences/impact to victim). (ADA)

There are several “monitoring rules” for this worksheet/exercise. Those include:

1. Were people’s first names used? Pronouns may be used in direct quotes.
2. Was the example specific to what he did and how he did it?
3. Is this example a reason to be in ADA?

4. No “Why’s” ~ “Because’s”
5. Do not use words like “called,” “told,” or “said” without descriptive adverbs
6. No breaking the same incident into separate examples
7. If some behavior occurred on multiple occasions it needs to be quantified in terms of length of time (e.g. for three weeks) or frequency (e.g. three times per week). (Catholic Social Services)

Potential participants must also admit that the incident of battery was not a single, isolated event, but instead part of a system of violent, strategic behavior.

### The Foundations Stage

The Foundations stage of the program focuses on the Power and Control Wheel (Figure 3), which provides batterers

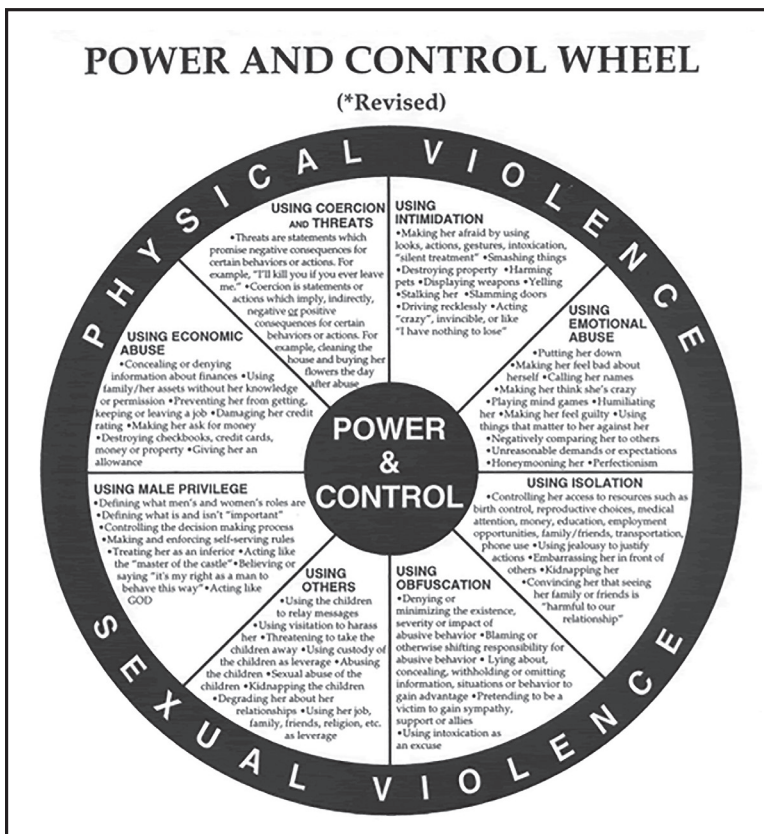


Figure 3: Power and Control Wheel (Catholic Social Services).

with the groundwork for finding alternatives to DV. The Power and Control Wheel documents the forms of abuse used by batterers to gain coercive control over their victims, taking into context ideas arising from typical gender roles and how batterers respond to them. Much of the wheel details emotional abuse, intimidation, coercion and threats, economic abuse, isolation and “gaslighting” (using false information to confuse the victim), with explanations of these behaviors.

### **The Tactics and Options Stages**

The *Tactics* stage allows batterers to explore and challenge the societal norms that reinforce their behavior. They begin to identify the individual core beliefs they used as justifications for their acts of violence. This stage is designed to lead batterers toward personal accountability for their behavior. The *Options* stage provides batterers with specific tools to help them make non-abusive choices in their personal relationships, and further challenges their earlier core beliefs. During this stage, batterers must complete eight mentoring sessions in which they teach other program participants, while reinforcing their own positive attitudes.

### **Community Efforts: How Can They Help?**

Batterer intervention programs are most effective when developed with a community effort. This would include working with the healthcare system, social service providers, the government, employers, the local media, clergy, education system and the justice system (Domestic Violence Institute of Michigan, 2017). Healthcare systems must “develop and utilize safe and effective methods for the identification of DV”, provide referral and educational services to women and children, “refrain from overly prescribing sedative drugs,” prepare to report results on DV cases and get special training for DV case handling (Domestic Violence Institute of Michigan, 2017). This would include being aware of any marks or injuries on victims during checkups, and asking questions about relationships at home, as well as providing other resources for the injured partner. Social service providers must shift their focus away from “keeping the family together at all costs” (Domestic Violence Institute of Michigan, 2017), and move toward keeping women and children safe. It is critical

that they help identify instances of DV, and deliver services that respond to the needs of battered women and children.

The government has a responsibility to “enact laws that define battering as criminal behavior,” give consequences to batterers, fund batterer intervention programs and violence-prevention education, “commute sentences of women who kill in self-defense,” and levy heavy taxes on weapons and pornography, to help with violence prevention (Domestic Violence Institute of Michigan, 2017). Katz writes that the pornography industry was created by men, for men, and it profits from misogynist images that have a negative impact on girls and women: “[porn] contributes significantly to a culture in which young girls are cast as the objects of adult men’s sexual desires and pathologies” (Katz, 2006, p.30).

The ADA also asserts that employers must advocate for battered employees, discourage stalking in the workplace, incentivize employment for batterers as long as they remain non-violent, and provide employment security to battered employees (Domestic Violence Institute of Michigan, 2017). In addition to this, the employer must enact a zero-tolerance policy against sexual harassment in the workplace, and have additional policies to assure that women who report sexual misconduct will face no retaliation (Domestic Violence Institute of Michigan, 2017).

The ADA recommends that the media should emphasize efforts to support non-violence, educate the public on the “dynamics and consequences of violence, not glorify it,” stop labeling DV as “love gone sour” or “a lovers’ quarrel,” and “stop portraying the batterer’s excuses and lies as if they were truths” (Domestic Violence Institute of Michigan, 2017). This reflects how words and sentence structures can contribute to a lack of self-accountability in batterers. The ADA also encourages the clergy to “speak out against DV from the pulpit,” include an assessment of DV in premarital and pastoral counseling, maintain a relationship with batterer intervention programs for referrals, “reject patriarchal social space,” and “oppose the use of biblical or theological justification for DV” (Domestic Violence Institute of Michigan, 2017). Worship centers are a place where socialization takes place, and should be used as part of the prevention effort.

In addition, the education system must educate teachers to be aware of the symptoms of DV in students, while teaching violence prevention, conflict resolution, and communication skills. Acknowledging gender bias in teaching materials, and teaching that “it is a civic duty of all citizens to oppose oppression” is also critical to curbing DV. Schools should help develop programs on how healthy relationships work, and provide resources to teach students about dating violence (Domestic Violence Institute of Michigan, 2017).

Finally, the ADA believes that the justice system plays a major role in promoting prevention, by disclosing statistics on DV, “[using] methods of intervention that do not rely on the victims’ involvement” (Domestic Violence Institute of Michigan, 2017), and having an equitable percentage of training devoted to handling DV cases, and providing protection orders that prioritize victims’ and children’s safety (Domestic Violence Institute of Michigan, 2017).

### **How Do Other Batterer Intervention Programs Compare?**

The Catholic Social Services Alternatives to Domestic Aggression Program (ADA) follows the framework of the Duluth Model, and has not been subject to a formal published evaluation. There have been evaluations of the Duluth Model, anger management and couples counseling, but not of the ADA itself.

Gondolf suggests that some of the programs that batterers are referred to are ineffective at getting at the core issue: “imbalances of power, control and entitlement” (Gondolf, 2016, p.xvii). Anger management training appears to be ineffective, yet is still in wide use. It does no justice to women, and often gives them a false sense of security. The root cause of wife-battering goes beyond just getting angry—if anger were the problem, the batterer would assault any person present, not just their partner. “There is a persistent bias against the mere notion of anger as a correlate of IPV among many professionals in the domestic violence field” (Norlander & Eckhardt, 2005, p.121). Anger management programs are a short-term fix, and “such programs not only may be ineffective treatments, but may actually put victims at risk for being the recipient of future violence” (Norlander, & Eckhardt,

2005, p.121). Anger management treatment also “fails to account for premeditation, diffuses responsibility... and fully misses the link to the larger issues of sexism and patriarchy” (Maiuro & Eberle, 2008, p. 144). The ADA asserts that couples’ therapy is equally “inappropriate, ineffective and unsafe,” because the batterer should demonstrate accountability before engaging in this type of therapy (Alternative to Domestic Aggression, 2017)

Claims about the ineffectiveness of other interventions come from several studies, including Dunford’s San Diego Navy Experiment, which concluded that batterer intervention programs are ineffective (Dunford, 2000). The study was designed to “evaluate the effectiveness of cognitive–behavioral interventions implemented in different treatment settings for men who batter” (Dunford, 2000, p.468). The study included had a control group, a men’s group, a “conjoint and a rigorous monitoring” group. Dunford stated that, “[d]ata analyses revealed no significant differences between the experimental groups over a variety of outcome measures” (Dunford, 2000, p.468). Gondolf responded to the findings, claiming that the study is not representative of the population because the sanctions used in the experiment (unemployment, no benefits for food, housing etc.) “[do] not exist in the civilian community” (Gondolf, 2012, p.52). The study placed the batterers in random groups, without taking their individual needs into consideration, which might have reduced the intervention’s effectiveness.

Every batterer is unique and requires specific services in order to change. An example of this would be a batterer who also has an alcohol addiction, in which case, an intervention program might include Alcoholics Anonymous support groups. Some cultural adaptations to the Duluth Model, specifically for Latinos and African American men, have been refined to respect their specific cultural values. The success of batterer intervention programs also requires a coordinated effort made by the entire community. Intervention programs work best when they continue to adapt to the needs of their participants. This could include substance abuse treatment, psychotherapy and counseling, and the development of a cultural perspective based on the users’ ethnicity.

## CONCLUSIONS

Violence against women is strongly influenced by cultural and social norms (World Health Organization, 2009). Interventions intended to re-educate batterers may take up to a year of dedicated treatment. In order to reach the goal of minimizing incidents of domestic and intimate partner violence against women, a consensus must be reached on what programs are worth adapting, and what programs are better left in the past. Rigorous evaluations require the perspectives of facilitators, participants and victims. In order for batterer intervention programs to be effective, they must focus on doing good, well. In order to achieve this, batterer intervention programs need careful and rigorous evaluation, because they all serve different populations.

## REFERENCES

- Catholic Social Services. *Alternatives to domestic aggression*. Retrieved from <http://csswashtenaw.org/ada>
- Catholic Social Services. *Do I have a reason to be in this program?* Retrieved from <http://csswashtenaw.org/wp-content/uploads/2016/01/Do-I-have-a-Reason-to-be-in-this-Program-EXAMPLES-1.pdf>
- Domestic Violence Institute of Michigan. (2017). *Coordinated community action model*. Retrieved from <http://csswashtenaw.org/wp-content/uploads/2013/07/Full-Version-of-CCAM1.pdf>
- Dunford, F. W. (2000). The San Diego Navy experiment: an assessment of interventions for men who assault their wives. *Journal of Consulting and Clinical Psychology, 68*(3), 468.
- Easteal, P., Holland, K., & Judd, K. (2015, February). Enduring themes and silences in media portrayals of violence against women. *Women's Studies International Forum 48*, 103-113.
- Fagan, A. A., & Wright, E. M. (2011). Gender differences in the effects of exposure to intimate partner violence on adolescent violence and drug use. *Child Abuse & Neglect 35*(7), 543-550. <http://dx.doi.org/10.1016/j.chiabu.2011.05.001>
- Fernández-Montalvo, J., Echaurren, J. A., Martínez, M., & Azcárate, J. M. (2012). Batterer men in prison and in court-referred treatment programmes: What is the difference? *The Spanish Journal of Psychology 15*(1), 315-22. Retrieved from <http://ezproxy.emich.edu/login?url=http://search.proquest.com/docview/964026770?accountid=10650>
- Gondolf, E. W., & Russell, D. (1986). *The case against anger control for batterers*. Retrieved from <https://www.biscmi.org/documents/Anger%20Control%20For%20Batterers.html>
- Gondolf, E. W. (2012). *The future of batterer programs: Reassessing evidence-based practice*. Boston: Northeastern University Press.

- Gondolf, E. W. (2016). *Gender-based perspectives on batterer programs*. Lanham: Lexington Books.
- Gosselin, D. K. (2005). *Heavy hands: An introduction to the crimes of family violence*. Upper Saddle River: Pearson Prentice Hall.
- Gracia, E. (2004). Unreported cases of domestic violence against women: towards an epidemiology of social silence, tolerance, and inhibition. *Journal of Epidemiology and Community Health*, 58(7), 536–537. <http://doi.org/10.1136/jech.2003.019604>
- Robinson, K. (2014, July 3). Intervention programs for abusive behavior. *The National Domestic Violence Hotline*. Retrieved from <http://www.thehotline.org/2014/07/intervention-programs-for-abusive-behavior/>
- Katz, J. (2006). *The macho paradox: Why some men hurt women and how all men can help*. Naperville, IL: Sourcebooks, Inc.
- Maiuro, R.D., & Eberle, J. (2008). State standards for domestic violence perpetrator treatment: Current status, trends, and recommendations. *Violence and Victims*, 23, 133-155.
- Miller, S. (2016). *The Duluth Model as an Organizing Method for Coordinating a Response to Domestic Violence* [PowerPoint Presentation].
- Norlander, B., & Eckhardt, C. (2005). Anger, hostility, and male perpetrators of intimate partner violence: A meta-analytic review. *Clinical Psychology Review*, 25(2), 119-152.
- Pence, E., & Paymar, M. (2011). *Creating a process of change for men who batter: The Duluth curriculum*. Duluth, MN: Domestic Abuse Intervention Programs.
- Siegel, L. J. (2015). *Criminology: The core*. Stamford, CT: Cengage Learning.
- Sloan, F. A., Platt, A. C., Chepke, L. M., & Blevins, C. E. (2013). Deterring domestic violence: Do criminal sanctions reduce repeat offenses?. *Journal of risk and uncertainty*, 46(1), 51-80.
- Wood, S. L. and Sommers, M. S. (2011), Consequences of intimate partner violence on child witnesses: A systematic review of the literature. *Journal of Child and Adolescent Psychiatric Nursing*, 24: 223–236. doi:10.1111/j.1744-6171.2011.00302.x
- Wooldredge, J. (2007). Convicting and incarcerating felony offenders of intimate assault and the odds of new assault charges. *Journal of Criminal Justice*, 35(4), 379-389.
- World Health Organization. (2009). *Changing cultural and social norms that support violence*. Retrieved from [http://www.who.int/violence\\_injury\\_prevention/violence/norms.pdf](http://www.who.int/violence_injury_prevention/violence/norms.pdf)
- World Health Organization. (2012). Understanding and addressing violence against women: Intimate partner violence. *World Health Organization*. Retrieved from [http://www.who.int/reproductivehealth/topics/violence/vaw\\_series/en/](http://www.who.int/reproductivehealth/topics/violence/vaw_series/en/).