Chapter 12
Intimate Partner Violence in the United States

Chelsea M. Spencer

12.1 Introduction to the Author

I am a research assistant professor in the couple and family therapy program at Kansas State University. I have lived my life in the state of Kansas in the United States (US). While working on my Ph.D., I was advised and mentored by Dr. Sandra Stith. I worked with Dr. Stith on many different projects related to prevention and intervention of intimate partner violence (IPV). Since receiving my Ph.D., I have continued this work. My research has primarily focused on risk assessment for physical IPV and intimate partner homicide, as well as sexual violence. I believe that my work on risk assessment can aid helping professionals, such as therapists, in assessing for potential violence or highlighting areas of intervention when violence or IPV is present. My goal is to help survivors of violence heal, as well as to prevent IPV and sexual violence. Additionally, I am a licensed marriage and family therapist. I primarily work with individuals who have experienced trauma, with a portion of my work focusing on helping victims of IPV and sexual violence heal. When I was working on my Ph.D., I led a support groups at the local women's shelter, which was an experience that helped increase my passion for the work that I do aimed to prevent or intervene in cases of IPV.

C. M. Spencer (✉)
Kansas State University, Manhattan, KS, USA
e-mail: cspencer@ksu.edu

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12.2 United States (US) Overview

Approximately 325 million people live in the United States. The majority of people living in the United States identify as non-Hispanic White (60.1% in 2019), followed by Hispanic or Latino (18.5%), Black or African American (13.4%), Asian (5.9%), two or more races (2.8%), Native American/Alaska Natives (1.3%), and Native Hawaiians/Pacific Islanders (0.2%). As of 2019, approximately 65% of the population identified as Christian (43% Protestant, 20% Catholic, 2% Mormon), and 26% identified as nonreligious, with others identified with other faiths, such as Judaism, Buddhism, or Islam (Pew Research Center, 2019). Approximately 57 million individuals reside in rural areas, and approximately 270 million individuals reside in urban areas.

The United States has a rich and diverse economy with a GDP of 20 trillion dollars; however, income inequality has increased significantly since the 1970s. Despite the wealth of the United States, in 2019, approximately 34 million people lived in poverty, which is approximately 10.5% of the population (Semega et al., 2020). It is important to note that the threshold to be considered living in poverty in 2020 is $12,760 for a single individual or $26,200 for a family of four (Federal Register, 2020).

The United States is a representative democracy. Currently, the United States faces many difficulties and challenges regarding the political climate of the country. The United States is divided on many political issues and remains divided into two primary political parties: Republicans (conservative) and Democrats (liberal). There are widely differing worldviews among citizens of the United States, making it difficult to summarize values and ideologies for the entire population. However, the dominant culture in the United States is highly individualistic, upholds patriarchal values, and places importance on individual success, competition, and achievement.

12.3 Intimate Partner Violence in the United States

Approximately one in four women and one in seven men in the US report experiencing physical IPV in their lifetimes (Breiding et al., 2014). IPV victimization has been linked to negative mental and physical health outcomes (Campbell et al., 2002; Spencer et al., 2017). In the early 1970s, the battered women's movement in the United States began advocating for resources for abused women, and since this time, access to domestic violence hotlines and shelters has increased throughout the United States (Dugan et al., 2003). The battered women's movement sought to change aspects of the US culture that contributed to the abuse of women, including traditional gender roles/beliefs, economic inequalities between men and women, and the criminal justice system that did not hold perpetrators of IPV accountable. This movement paved the way for the progress made on the quest to end IPV and provide resources and supports for victims of IPV.

Due to the hard work that took place in the 1970s and 1980s, legislative gains were made for women and victims of IPV in the 1990s. In 1990, stalking was first identified as a crime in California, and other states followed, with 49 states having anti-stalking laws as of 1996 (National Institute of Justice, 1996). Additionally, in 1990, Concurrent Resolution 172 was passed by Congress, where judges were required to determine if there has been IPV in the relationship when determining child custody. In 1994, IPV was deemed a national crime due to the passing of the Violence Against Women Act. The 1994 Violence Against Women Act also provided funding for victim services and led to the creation of the Office on Violence Against Women, which is located in the Department of Justice. The Violence Against Women Act was reauthorized by the government in 2000, 2005, and 2013. However, the Violence Against Women Act expired in September of 2018, although it was given an extension until February of 2019. However, as of 2020, the Violence Against Women Act remains expired and has not been reauthorized. However, funding to shelters from the Act has been authorized since the act expired.

12.4 Challenges and Issues in IPV Services in the United States

A growing body of research has focused on understanding risk markers for IPV perpetration and victimization (Spencer et al., 2019, 2020). Although research has sought to further understand factors associated with IPV, there has been limited funding for randomized control trials for interventions to reduce rates of IPV in the United States. In the United States, the most common interventions for IPV include shelter or victim services for women and batterer intervention programs (BIPs) for men (Holmgren et al., 2015). Typically, BIPs are group interventions for male perpetrators of IPV that focus on cognitive awareness of power and control tactics (Johnson & Kanzler, 1993). Although BIPs are mandated in most US states, research on the effectiveness of these programs continues to be discouraging. The current mandated treatment of IPV in the United States may be ineffective in truly reducing rates of recidivism, leading this to be one of the current issues in the United States with regard to IPV (Babcock et al., 2004; Arias et al., 2013). There has been a lack of funding to examine possible treatment modalities other than BIPs. Evidence suggests that a “one size fits all” approach of mandated BIPs does not show promising results. It may be useful to research different types of interventions or combinations of other interventions along with attending a BIP, such as individual therapy, couples’ treatment (if the couple has decided to stay together and the violence is not severe or used to dominate and control the partner), or addictions counseling.

Another issue, which is especially important in the United States, is the constitutional right of US citizens to have access to firearms. A recent meta-analytic study found that if an abuser has direct access to a firearm (e.g., having a gun in the home), it increases the likelihood of an intimate partner homicide by over 1000% (Spencer

& Stith, 2020). According to 18 U.S.C. § 922(g) (9), an individual who has been convicted of a misdemeanor level crime of domestic violence is prohibited from possessing, shipping, transporting, or receiving ammunition or firearms. However, since many cases of IPV are not being prosecuted and many firearms in the United States are not registered, access to firearms leads to an increased likelihood of an intimate partner homicide. In addition to a lack of prosecution in IPV cases, there is a "boyfriend loophole" in the current legislation where a perpetrator who is not married to, does not live with, or does not have children with the victim can forego surrendering their firearms. There is a provision in the 2019 Violence Against Women Act to combat/close the "boyfriend loophole." However, this act has not been reauthorized as of 2020.

Currently, gun violence research in the United States is substantially underfunded and understudied, even though the United States has the highest rate of gun-related deaths among industrialized countries, with more than 30,000 gun-related deaths annually (Stark & Shah 2017). Increased funding for ways to reduce gun violence, especially intimate partner homicide, and also increased funding for randomized control trials for interventions designed to decrease IPV recidivism rates are of special importance in the United States. Gun control is a current political issue in the United States, and it is important to reduce abusers' access to firearms.

Another challenge noted in the United States, which may also be relevant to other countries as well, is reducing barriers for victims of IPV to receive formal services to help end the violence and aid in their healing process. A systematic review focusing on barriers to formal help seeking for adult victims of IPV in the United States found that the most frequently cited barriers included a lack of awareness of resources, lack of accessibility to resources (e.g., living in a rural location, not speaking English), fear of negative consequences, immigration status, lack of personal resources, and personal barriers (e.g., embarrassment or self-blame for the abuse; Robinson et al., 2020). Several of these barriers could be addressed in the United States to help victims of IPV receive needed resources.

12.5 Cultural Considerations

When examining barriers and challenges related to IPV services, it is imperative to take culture and aspects of one's identity into consideration. When looking at the intersection between race and gender, in the United States, Black and Native American/Alaskan Native women are disproportionately impacted by IPV compared to White women. For example, 56% of Native American/Alaskan Native women and 40.9% of Black women have experienced physical IPV victimization in their lifetime, compared to 31.7% of White women (Black et al., 2011; Rosay, 2016). Additionally, Black and Native American/Alaskan Native women face additional barriers in regard to reporting IPV or seeking services/resources. Native American/Alaskan Native women may experience a lack of response from law enforcement and a lack of services and interventions specifically targeted to Native

American/Alaskan Native populations, and there may be cultural considerations that reduce the likelihood of reporting IPV (Crossland et al., 2013; Hamby, 2008; Ned-Sunnyboy, 2008). For Black women, there may be a distrust of law enforcement, a need to preserve/protect the family unity, as well as systemic barriers that include a lack of viable resources or knowledge of potential resources (Kelly et al., 2020). Culturally informed services and resources are necessary. Although it may not be possible, building trust between law enforcement and victims of IPV who are racial minorities is a key challenge to overcome in order to protect victims of IPV.

Another key consideration when looking at ways to combat IPV in the United States is sexual orientation. It has been noted that "domestic violence programs and shelters are often unprepared to deal with victims of same-sex IPV" (Carvalho et al., 2011, p. 502). There is a lack of shelters and resources for male victims of IPV, whether or not they are in same-sex relationships. Additionally, women in same-sex relationships also experience a lack of safe survivor spaces (e.g., support groups, shelters) because there may be a fear that their perpetrator could infiltrate the seemingly safe survivor spaces (Harden et al., 2020). Additionally, individuals in same-sex relationships face additional barriers to access resources or report IPV. Some examples of unique barriers include fear being "outed" by their abuser or through the process of reporting, fear of how law enforcement will react/if they will take it seriously, and fear of contributing to heterosexism (Harden et al., 2020; Robinson et al., 2020). Increasing safety for individuals in same-sex relationships when reporting IPV or seeking resources is a challenge that needs to be addressed in the United States.

Although this section highlights cultural challenges related to racial/ethnic minorities and individuals in same-sex relationships, there are additional cultural and demographic factors that need to be considered in regard to preventing and intervening in cases of IPV. These include, but are not limited to, citizenship status, religious background, gender identity, socioeconomic status, ability status, and language. These aspects of identity may create additional barriers for victims to come forward to report IPV or to seek resources/services after experiencing IPV. Creating resources that take into account multifaceted identities, and how there may be systemic barriers present, is needed.

12.6 Conclusion

Just as in the rest of the world, IPV is a serious issue in the United States. The battered women's movement of the 1970s paved the way for anti-domestic violence legislation, but there is still considerable work to be done in the United States to prevent and intervene in cases of IPV. In the United States, future consideration should be paid to testing intervention strategies beyond BIPs or in conjunction to BIPs. Additionally, ensuring that 18 U.S.C. § 922(g) (9) is followed in order to remove access to guns from perpetrators of IPV (whether they are married to or dating the victim) to aid in decreasing the likelihood of an intimate partner homicide is

needed. Currently there are barriers for victims of IPV to receive services, and working to eliminate those barriers is a necessary move forward. Due to the diversity of the United States, cultural considerations such as race/ethnicity, immigration status, and sexual orientation, among other aspects of identity, need to be considered when providing services and resources to victims of IPV. Finally, at the time this book chapter was written in 2020, the Violence Against Women Act remains expired and has not been reauthorized. Future reauthorization of this act could also aid in helping victims of IPV in the United States.

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