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Alcohol and intimate partner violence: key findings from the research

Andrea Finney

Violence between current and former partners is a considerable public health and criminal justice problem (Logan et al., 2001). Many incidents result in injury and contribute to physical and mental health problems, particularly for women victims. Alcohol is an important dimension in such violence. Many perpetrators have been drinking before committing an assault and many may be alcohol dependent. It is also common for victims to have alcohol 'problems'. This report presents key findings from published UK and international research on the relationship between alcohol and intimate partner violence. As sexual violence may be one factor in violence by intimate partners, this report relates to Findings No. 215 (Finney, 2003).

Key points

- The British Crime Survey indicated that 32% of incidents of intimate partner violence were committed when the perpetrator was under the influence of alcohol (Mirrlees-Black, 1999).
- Offender-only drinking is common in incidents of intimate partner violence, whilst victim-only drinking is rare (e.g. Martin and Bachman, 1997).
- Alcohol abuse is common among perpetrators and 'problem' drinking predicts intimate partner violence over time (O'Farrell, 1999; White and Chen, 2002).
- Heavy drinkers are at increased risk of intimate partner violence victimisation (Mirrlees-Black, 1999). Many women develop alcohol 'problems' following victimisation (Roberts et al., 1997).
- Alcohol is likely to contribute to intimate partner violence in a variety of ways. Levels of consumption relate to the likelihood and severity of violence. Alcohol appears to be particularly important in escalating existing conflict (Quigley and Leonard, 2000; White and Chen, 2002).

Intimate partner violence – physical violence between current and former intimate partners – affects the lives of many people. The 1996 British Crime Survey (BCS) module on intimate partner violence found just over 4% of both men and women experienced physical violence by a partner in 1995 in England and Wales (Mirrlees-Black, 1999). These findings are considered more accurate than other BCS sweeps as the module was completed by the respondent on to a laptop computer, according greater anonymity and confidentiality. This

module showed that almost one in four women and one in seven men have experienced physical violence by a partner in their lifetimes (Mirrlees-Black, 1999).

Other sweeps of the BCS report 'domestic violence', referring to physical violence between current and ex-partners and other family and household members. Findings relating to this definition of 'domestic violence', from the 2002/03 BCS (Povey and Allen, 2003) indicate:

- domestic violence accounts for almost one-fifth of all violent incidents and often has severe repercussions
- most (64%) incidents reported in the 2002/03 BCS resulted in physical injury
- 14% resulted in some form of medical attention
- many victims (45%) are repeat victims.

With three-quarters of domestic violence incidents occurring in or around the home (Allen et al., 2003), home is not always the safe place it is assumed to be (Galvani, 2003).

While men do experience partner violence, women are more frequently victimised and are more likely to experience severe violence. The 2002/03 BCS found the vast majority of domestic violence incidents (73%) were suffered by women (Povey and Allen, 2003) and the 1996 BCS found that women were more likely to be repeat victims of intimate partner violence than men. It also found partner violence against women is more likely to result in injury (Mirrlees-Black, 1999). Moreover, two women are killed each week in England and Wales by a current or former partner (Home Office, 2002). The 2001/02 BCS showed that assailants were more than three times more likely to be male than female (Allen et al., 2003).

This pattern, and greater propensity for under-reporting among some groups, may help explain the tendency for partner violence research to focus on male to female partner violence. This is therefore the focus of this review but findings on violence against males are presented where available. Some of the ways partner violence is explained in the theoretical literature (outlined below) illustrate the complexity of intimate partner violence causation. Alcohol adds another dimension to this. Nonetheless, it should be acknowledged that the involvement of alcohol neither increases nor diminishes an offender's legal culpability.

Numerous theories have been proposed to explain violence between intimates, many of which have found support in research:

- Negative emotions, such as hostility, anxiety and depression, have been related to perpetration of intimate partner violence by men and women (White and Chen, 2002 – US).
- Research has found violence against women is related to traditional gender role expectations and masculine ideologies (White and Chen, 2002 – US).
- Violence is more likely between partners experiencing relationship dissatisfaction (White and Chen, 2002 – US) and may be used to resolve conflict (Leonard and Senchak, 1996 – US).
- Witnessing or experiencing violence in childhood is a strong predictor of adult partner violence victimisation and perpetration (White and Chen, 2002 – US).

Key findings are presented here from national and international research on:

- prevalence of drinking by perpetrator and victim at the time of intimate partner violence
- the association of alcohol 'problems' with such violence
- characteristics and consequences of alcohol-related intimate partner violence
- the role of alcohol in such violence.

Key research recommendations are also identified. Research examples are from the UK unless indicated otherwise.

Prevalence of alcohol-related intimate partner violence

Research indicates there are strong links between intimate partner violence and both 'drinking in the event' and 'problem' drinking.

Drinking in the event

Drinking in the event refers to drinking at the time of the incident.

Numerous studies indicate a substantial proportion of *perpetrators* had drunk alcohol just before the incident:

- In the 1996 BCS, victims (both sexes) believed the assailant was under the influence of alcohol in 32% of intimate partner violence incidents (Mirrlees-Black, 1999).
- National US victimisation data indicated that 55% of intimate partner violence offenders (both sexes) had been drinking according to victim reports; a further 12% had 'taken alcohol or drugs' (Bureau of Justice Statistics, 1998 – US).
- Analysis of national US police incident data found one-quarter of intimate partner violence incidents (both sexes) involved drinking in the event by the offender (Greenfeld et al., 1998 – US).

Studies which report both *perpetrator* and *victim* 'drinking in the event' indicate that rates of drinking for victims are much lower than those for the offender:

- A national US survey of male to female partner violence found 22% of assailants had been drinking at the time of the incident, compared with 10% of victims (Kaufman Kantor and Straus, 1987 – US).
- A national US alcohol and family violence survey found 28% of offenders in cases of male-to-female partner violence had been drinking compared with 8% of victims (Kaufman Kantor and Asdigian, 1997 – US).
- Police data for one Canadian community revealed that in incidents of partner violence, 43% of offenders had been drinking compared with 16% of victims (Pernanen, 1991 – Canada).

'Problem' drinking

Research suggests a relationship exists between intimate partner violence perpetration and 'problem drinking', variously defined.

Perpetrators

Problem drinking is often found amongst those who commit intimate partner violence.

Prevalence of alcohol abuse problems among men with histories of intimate partner violence is high:

- In the study of 100 UK 'battered women', 52% of offending males were described as 'frequently drunk' and a further 22% as having 'episodes of heavy drinking with drunkenness' by victims (Gayford, 1975).
- In a US study of 915 injured women attending A&E, 65% of those injured by partners had partners with alcohol abuse problems compared with 26% of women injured in other ways (Kyriacou et al., 1999 – US).
- Reviews indicate that rates of alcohol abuse and dependence among perpetrators of domestic violence may be two to seven times higher than in the general population (Logan et al., 2001).

Equally, intimate partner violence is often found in those who 'problem drink'.

Intimate partner violence perpetration is prevalent among alcohol abusers and 'problem' drinking is a risk factor for intimate partner violence:

- Among 75 US male alcoholics undergoing alcohol treatment, 62% had committed husband to wife violence, according to wife reports, compared with 12% among a matched group of non-alcoholic males. Among perpetrators, frequency and severity of violence were significantly greater among alcoholics than non-alcoholics (O'Farrell et al., 1999 – US).
- Among 725 US co-habitees, 'problem' drinking significantly predicted perpetration of intimate partner violence in men and women, even after taking into account other risk factors, such as negative emotions, beliefs about appropriate gender roles and early life family violence (White and Chen, 2002 – US).
- US data for 541 newlyweds indicated pre-marriage alcohol dependence in men predicted violence in the first year of marriage, even after controlling for pre-marriage partner violence and socio-demographic factors (Leonard and Senchak, 1996 – US).

Victims

Alcohol abuse, however, is not confined to perpetrators of intimate partner violence.

Alcohol 'problems' are common among intimate partner violence victims:

- The 1996 BCS showed that men and women who drink 'heavily' are more likely to report partner violence victimisation than those who do not (Mirrlees-Black, 1999).
- Among 753 US women receiving welfare, those with recent experience of physical partner violence scored significantly higher on measures of alcohol dependence than women who had no experience of intimate partner violence (Tolman and Rosen, 2001).
- Among 242 men and women attending a major Australian emergency department, those with domestic violence injuries were more likely to have alcohol 'problems' than non-victim controls at the time they attended and over the previous five years (Roberts et al., 1997).

Characteristics and consequences of alcohol-related intimate partner violence

As with all areas of alcohol-related violence, the characteristics and consequences of alcohol-related intimate partner violence are complex. Violence can be seen to be more likely or more intense depending on the circumstances.

Studies have found the likelihood of violence increases with higher levels of alcohol consumption:

- Among 5,159 US couples surveyed, greater frequency and quantity of male drinking related to increased likelihood of male-to-female partner violence (Kaufman Kantor and Straus, 1987 – US).
- Among 915 injured US women attending emergency rooms, the higher the level of partner alcohol abuse, the higher the likelihood that injuries were caused in partner violence (Kyriacou et al., 1999 – US).
- Among 725 US males undergoing alcoholism treatment, the number of drinking days was positively related to frequency of male-to-female partner violence during the first and second years following treatment (O'Farrell et al., 1999 – US).

Research suggests intimate partner violence is more severe when alcohol is involved:

- A national US victim survey found a woman was one and a half times more likely to be injured if her partner had been drinking (Martin and Bachman, 1997 – US).
- Analysis of US incident-based data for 9,711 victims of male-to-female partner violence showed alcohol use in the event was associated with injury (Thompson et al., 1999 – US).
- Among 366 US couples interviewed one year after marriage, 'husband drinking' was over three times more likely in male-to-female physical aggression than verbal aggression. 'Husband drinking' was also more likely in incidents of severe violence compared with moderate physical violence (Leonard and Quigley, 1999 – US).

Situational characteristics

In contrast with violence between non-intimates, it is often only the offender who has been drinking in intimate partner violence, and victim-only drinking is rare (Martin and Bachman, 1997). A US general population survey found offender-only drinking in 14% of cases and victim-only drinking in 2%; both were drinking in 8% (Kaufman Kantor and Straus, 1987). Pernanen (1991 – Canada) concludes alcohol use is 'rather a one-sided affair' in incidents of intimate partner violence coming to police attention.

The relationship between alcohol and intimate partner violence can depend on the presence of other factors. *Partner drinking* is one such factor:

- Among 414 US couples, 'problematic' perpetrator drinking predicted male-to-female partner violence only when the victim was a light drinker, not when she was a heavy drinker (Quigley and Leonard, 2000 – US).
- Conversely 'problematic' victim drinking predicted victimisation only when the perpetrator was also a 'problem' drinker, a finding supported by Kyriacou et al. (1999 – US).
- In a study of 725 US co-habitees, White and Chen (2002 – US) found victimisation among women was predicted by a combination of their own and their partner's drinking habits but not 'victim drinking' alone.

The role of alcohol

Any behaviour committed in the context of alcohol consumption, violent or otherwise, results from interaction between factors relating to the individual, to the immediate environment and to the alcohol consumed. Research

indicates that alcohol is best seen as contributing to violent behaviour, rather than causing it (McCord, 1993). Further, the role of alcohol is likely to be multifaceted. Graham et al. (1998 – Canada) describe the alcohol-related factors which may relate directly or indirectly to violence as falling into four groups:

- 'cultural' factors, relating to how alcohol and its relation to violence are understood in society
- 'person' factors, relating to individuals' responses to, expectations and beliefs about alcohol
- 'pharmacological' factors relating to the psychopharmacological properties of alcohol
- 'context' factors, relating to the physical and social circumstances in which alcohol is consumed.

Numerous theories exist on how alcohol may directly or indirectly contribute to intimate partner violence and one or more may help explain any instance of such violence and its characteristics. Some of these are discussed below.

Psychopharmacology

One theory, supported by findings presented above, is that conflict escalates into violence more readily when alcohol has been consumed. Such escalation may be, at least in part, because alcohol is a psychopharmacological disinhibitor (Leonard and Quigley, 1999 – US). Laboratory studies demonstrate moderate doses of alcohol can increase aggressive responses (White and Chen, 2002 – US). Quigley and Leonard (2000) suggest that such findings are 'consistent with the position that alcohol exacerbates problems when conflict already exists'.

Additionally, intoxication may intensify negative emotions such as depression which are also associated with increased risk of intimate partner violence.

Context and relationship factors

Findings reported above suggest partner drinking mediates the relationship between personal alcohol misuse and violence. Disparate drinking patterns between partners may be a source of conflict. Heavy drinking is a potential source of relationship conflict, which itself increases risk of violence (Leonard and Quigley, 1999 – US). Relationship dissatisfaction is also an important contributor to partner violence, especially for male perpetrators (White and Chen, 2002 – US). Thus, problem drinking by men may lead to relationship conflicts which increase the risk of intimate partner violence (Leonard, 2001 – US).

However, research has yet to determine the direction of influence. For example, violence may lead to relationship conflict and in turn to problem drinking (White and Chen,

2002 – US). Further, in some instances alcohol and violence may be related only because other factors, such as conflict over a major life issue, are common to both (Leonard and Quigley, 1999 – US).

Beliefs, expectations and social norms

Societal and individual beliefs about the links between alcohol and violence may encourage a person to drink to find courage to commit violent behaviour. Potentially violent men may drink to provide themselves with an excuse for violent behaviour (Ollett, 1994) but McGregor (1990 – Australia) suggests intoxication is more likely to be invoked as a post-offence excuse. Social drinking norms may allow approval for violence against drunken victims (White and Chen, 2002 – US).

Victimisation as a contributor to alcohol misuse

Alcohol misuse among victims (especially women) is often regarded as a consequence of domestic violence, developing perhaps as a means of coping with severe and repeat abuse. Alcohol misuse or dependency may be one symptom of post-traumatic stress and psychiatric disorder resulting from victimisation experiences (Roberts et al., 1997 – Australia). Nonetheless, causes and effects of victim alcohol abuse in partner violence remain difficult to unravel.

Conclusions

Intimate partner violence is frequently committed by perpetrators who have been drinking or who have alcohol ‘problems’. Victims are less likely to have been drinking though many do also have alcohol ‘problems’, in some cases as a result of victimisation. Evidence suggests alcohol facilitates escalation of conflict into violence, perhaps through the disinhibitory pharmacological properties of alcohol on behaviour.

Excessive or disparate drinking patterns between partners may present a source of relationship conflict and alcohol seems indirectly related to intimate partner violence via relationship dissatisfaction. However, whilst alcohol appears to be a trigger for violence, it may also be a symptom of wider contextual problems, such as relationship difficulties, and victim drinking will be more important in some situations than others.

Research gaps and recommendations

There is a dearth of UK research on intimate partner violence relating to alcohol use. Extensive research needs to be undertaken to establish the true extent and causes of alcohol-related intimate partner violence.

In particular, sophisticated research is needed to establish ‘whether women’s drinking is causally related to victimisation’

(Leonard, 2001 – US). Further, a tendency for male under-reporting means little is known about the relationship between alcohol and male victimisation – sensitive approaches need to be developed to survey men. Equally, intimate partner violence among minority groups is also little understood. Research needs to be conducted on larger samples of minority groups to help potential cultural differences in alcohol-related intimate partner violence to be identified including that between same-sex partners.

Studies examining the timing of problem drinking and intimate partner violence onset are needed in order to provide early indicators for primary care workers – this could enable treatment to be appropriately targeted. Evaluations of treatment programmes, especially those addressing the dual problem of alcohol abuse and intimate partner violence perpetration, need to be conducted and disseminated to ensure good practice is shared. A systematic review of what is effective in treating intimate partner violence should be undertaken.

Specific recommendations:

- Research reports need to specify clearly: victim and offender genders; which participants alcohol relates to; alcohol-use definitions.
- Research needs to explore whether people who commit intimate partner violence also assault other people and, if so, what is the role of alcohol in other types of assault. This could help target treatment needs.
- The nature of the violence occurring needs to be explored and clearly reported: alcohol may be especially relevant in sexual assault within relationships.
- The relationship between problem drinking and acute intoxication in partner violence perpetration should be explored, in relation to variables associated with perpetrators, victims, relationships and circumstances.
- Research needs to determine whether alcohol problems develop in the context of existing partner violence and whether this relates to changes in the frequency, pattern or nature of violence.
- Intimate partner violence is generally not well reported, especially to the police. Police data also tend to underestimate alcohol-related intimate partner violence (perpetrator drinking is not consistently recorded and victim drinking is unlikely to be noted) and should be supported by data from other sources. Research needs to acknowledge that intimate partner violence itself is generally not well reported.
- Research needs to look in detail at how alcohol use relates to offending across different types of domestic violence offenders.

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