

# Intimate partner violence (ipv): causes and effects



## **Introduction**

Recent decades have witnessed the development of domestic violence around the world. Thousands of women decide to leave a abusive relationship annually. (Hilary 2010, P11). Some battered women especially wives will go back to their batterer to survive the happiness for their children however as the strength of violence increased they will leave again. Some will seek help from community service and rebuild a new life there with a long-term process (Hilary 2010, P11). Domestic violence has a huge impact on abused women's life in all perspectives. Abused women can receive physically injuries or traumatic psychological problems and social isolations (Anna, Lluisa, Purificacion, Maria Jesus, Maria lusa, 2013). In this essay, based on the case of Anne, four main aspects of intimate partner violence (IPV) will be discussed. Firstly, from a psychologically aspect, the external use of violence can come from internal psychologically disturbing issue of the batterer and it can influence their traits of personality and correlated to abusive behaviors. The abused women's personalities can be depress by the abusers. Secondly. From a social aspect, the abusive behaviors can originate from gender socialization which means men are the dominate control of the intimate relationship or correlated with social learning from their childhood experience. Thirdly, women that exposed to IPV tend to have poorer health condition generally especially chronic pain and for children who witness domestic violence are in higher risk of behavior and emotional problems. Last but not least, all perspective of abused women can be affected by IPV. For them, maintaining a good social connection with all the family members and having a reemployment can contribute significantly to healthier life style

## Main Body

When violence users in the domestic violence find themselves struggle to tolerate constantly disrupted object, there will occur internal and external self-solutions for them to cope with the strait (Joseph 2012). In the definition of defense mechanism from Anna Freud (1966), " Once a criticism is internalized, the offense is externalized." It means blaming is the pattern that used by the violence user as they see themselves as victims. When the abuse giver exceed his degree of tolerance of anxiety and meanwhile fail to comfort himself by other approaches, identification of aggressor is one way of defense (Joseph 2012) In Anne's case, her husband John, who is the violence user was exposed to financial issue, house moving and divergence of caring elderly and children, became anxious and angry then identified his wife as aggressor and take external action out as self defense. In John's organized sense, there are three essential factor: self-agency, which is a sense of being responsible for own behavior but not others' behavior. Self-affectivity, for the batterer, they can think of the disrupted object and anxiety as an inner experience or originate from the external environment. Domestic violence can be a form of external locus of control. Self-history, a connection between experiences in different time and make changes to remain the same(Joseph 2012).

For the abused victim, domestic violence can affect all level of psychological function. Change personality can be one of the symptoms. According to Larsen, the definition of personality is a unique concept of psychological traits and the individual organize mechanism with the interaction of the interpersonal, physical and social environment. In Anne's case, apparently <https://assignbuster.com/intimate-partner-violence-ipv-causes-and-effects/>

she is facing a failure in developing adaptive solution of difficult life task including her husband unsupportive interaction, thus her breaks the balance between the interpersonal environment and social environment and her interpersonal function is impaired. Currently finding had shown that abused female have identified personality like low self-esteem, self-blaming, shame, difficulty of trust and even depress. On the other hand, for those victims who have depress symptom can contributes to higher risks of being a abused victim in domestic violence. Regard of this, the symptom of depress influences on the victims' ability of seeking help from psychological therapies. However if their depress-related symptom is diagnosed, they can be effectively treated with series of psychopharmacological therapies including increasing social interaction and build up of trust.

Abusive behavior of the batterer can be originated and maintained form variable social cognitive process (Christopher, Rita, Luara, Amy, 2012). For example, for feminist theorists, social gender-related intimated partner violence (IPV) is a result of gender socialization process (Yllo, Straus, 1990). The abusive males can form an attitude toward gender relationship which is men are dominance over women and this promote the usage of domestic violence on the abused women as a reassurance of their control position in the close relationship (Christopher etl, 2012)Data largely support that males with men-dominance cognitive factor held high rates of anger arousal and greater generation of aggressive behavior(Beck, 1999). On the other hand, the abusive action can be associated with the batterers' similar abused experience of childhood. Here raised a confusing question. The current abuser should instead of reflecting on how they felt miserable to be

mistreated but managed to not implement such mistreatment on someone they love. As deMause's 'The history of Child Abuse'(1998) indicated, abuser need to live through a second own childhood experience and work with their anxieties and it is a constantly painful and lengthy process. Therefore, abuser act as the pain-producing person rather than deal with the negative feelings (Christopher etl, 2012). And the behavior of the pain-producing person is learnt by the abuser when he or she observe and commence social learning process. In Anne's case, John her husband, choose to talk it out and make complaint with Anne rather than actively resolve the problem can result from his childhood experience.

For the most of the abused women, abusive behavior is a developing process, their intimate partner including same-sex partner start with providing love and general caring then grow to restriction of their social life and even control their psychological thoughts. This type of restriction keep the abused women from regular interaction with their friends and cut the connection between the society and them. For example, Anne gave up her job for better family care while apparently her social world is shrinking. When abused women is depend only on their abuser for daily conversation. When the abused women are controlled by constantly criticism, the women begin to lose their personal integrity and lack of confidence to express their own ideas. Social-isolation and lose of self-worth is an essential factor in Anne's abused experience. Lost of jobs mean Anne provide inadequate financial support for the family member and she consider her care for the family is ineffectively. This interpersonal thought associate with controversial view of gender-role socialization that female is responsible for family care. Thus, her

guilty of failing in her task contributes to inequity between she and her intimate partner. Women in the IPV might find themselves disadvantaged compared to men including physically and socially. Besides that, structural context of religion and culture can also lead to disadvantage in different gender. Benson et al. (2004) found that race differences in domestic violence by men are significantly reduced with controls for neighborhood poverty,

In the past 20 years, findings suggest that females who experience IPV have worse overall health condition than females who have not experienced IPV (Bonomi, Glass, 2008). In 2005, the World Health Organization published a report about the domestic violence has significant effect on women's health globally (Garcia-Moreno, Heise, Jansen, Ellsberg, Watts, 2005). In Garcia-Moreno's (2005) report, 20-50% females claimed that domestic violence is one of the direct cause of their physical injury and cause lasting effect on their health. Chronic pain is another potential consequence of domestic violence. In Campbell's (2002) research, 48% of the abused women reported symptom of chronic pain. Studies find out that abused women complain abdominal pain, migraines (Golding, 1999) and back and neck pain more often than non-abused women. However this results were doubted as they are collected from the specific clinic and shelter where most the people go there with a diagnosed symptom of pain. A study based on community cases of abusive women in IPV (Janice, Bruce A., Christine 2011). 77% of the 84 abused females have pain and last constantly three months, 25% them were in mild pain group and 75% are in severe pain group. The data is similar with the findings from clinical and shelter. An interesting fact that 97% of the females are under 60 years old and 72% are under 50 (Janice et al., 2011).

Younger women sample demonstrate their chronic disease could influence their re-employment thus they will not be capable of providing themselves better health care (Janice et al., 2011).

Children that are exposed to domestic violence are in high risk for behavioral and psychological problems according to the duration and length they are exposed to intimate partner violence (Kitzmann et al., 2003). In 2005, a report shows that in Dutch 100,000 children are in families of domestic violence (Ministry of Justice, 2006). According to the clinical range of the Child Behavior Checklist (CBCL), compared to non-abused children, children from IPV families are 40% more likely to have behavioral issues (Kemic, et al., 2003). CBCL measures internalizing including fear and depression and externalizing like aggression. Witnessing intimate partner violence has significant effects on children and results in psychological issues including anxiety disorders for example posttraumatic stress disorder (PTSD) or impaired cognitive and social functioning (Robbie Rossman, 2001). Many reports in recent years have inhibited that, from a health perspective, exposure to IPV can as well lead to huge psychopathology among children (Kitzmann, Gaylord, Holt, & Kenny, 2003; Wolfe, Crooks, Lee, McIntyre-Smith, & Jaffe, 2003). For instance, different according to the severity and duration of IPV experience in childhood (Edleson, 1999; Grych & Fincham, 1993), at the same time children's insecurity of personal safety and individual power of control over things and people (Spilsbury et al., in press), have actually been associated to child psychopathology and show a trend of increasing. Study of Hughes shows that among younger children there have reported greater impairment compared to older children (Hughes, 1988; Tang, 1998). Besides that, other

studies discover that gender can be factor that influence the outcome of domestic violence which girls tend to be internalizing and boys are externalizing (Yates, Dodds, Alan Sroufe, & Egeland, 2003).

Domestic violence is appealing to influence every aspect of abused women's life including interpersonal and intrapersonal needs like the relationship with intimate partner and other family members and personal achievement.

Considering Maslow's theory of human need, women have not only their basic survival needs including a shelter and living material but also psychological and social needs. In this theory when women's basic living needs are satisfied, they then start to seek a sense of safety on whether they can express themselves free of fear, after that the sense of belonging is the main theme. Sense of belong can be built up by socially connection with others, for instance maintaining a good relationship with family, community and making contribution and being accepted by others all can be the pathway of sense of belonging. Confident and self-esteem will be reinforced. In the book " Rebuilding life after domestic violence " (Hilary, 2010).

Intimate partner play an important role in maintaining and rebuilding abused women's regular life and satisfied their physical psychological and social needs. In Anne's case she need to take care of his elderly mother and children. Her husband Joh n can be a resource of financial support for their daily spends. In many current study the mainstream service and justify system have not been adequate on the real need of the abused women. For example if the abused wife contact the police when his husband perform first physical violence on her, the following procedure is the husband can be



arrested and the family can end up to lost of poverty and homeless. On the other hand, the fear of this consequence will be a obstacle for abused women to speak up for their right. Thus they will fail to maintain their interpersonal health. As the responsibility of the society, there could be a flexible system of procedures which the battered women can receive help from the police if needed without reaching another extreme.

The abused women all have a same basic goal “ a new house and a new life for them and their family”. As the main care giver in the family, they settled the safety and happiness of the family members especially elderly and youth at a dominated position. In Anne’s case, she need to provide extra care for her mother who has a post history of MVA and her daughter who had asthma. Stabilize her mother and daughter’s symptoms and improve their quality of life can contribute to the balance of Anne’s social system.

When they fulfill their family responsibility, individual achievement and success will be considered as an important sign for returning back to normal social life. Employment is an important factor of health system for battered women. Not only they can reduce the financial stress of the daily living fees but also strengthen a sense of belongs and contribution to others.

Conclusion

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