

2017

# Intimate partner violence: Early adverse experiences in male offenders

Maria B. Alcivar-Zuniga  
*Iowa State University*

Follow this and additional works at: <https://lib.dr.iastate.edu/etd>

 Part of the [Gender and Sexuality Commons](#), [Public Health Education and Promotion Commons](#), and the [Women's Studies Commons](#)

---

## Recommended Citation

Alcivar-Zuniga, Maria B., "Intimate partner violence: Early adverse experiences in male offenders" (2017). *Graduate Theses and Dissertations*. 15483.  
<https://lib.dr.iastate.edu/etd/15483>

This Thesis is brought to you for free and open access by the Iowa State University Capstones, Theses and Dissertations at Iowa State University Digital Repository. It has been accepted for inclusion in Graduate Theses and Dissertations by an authorized administrator of Iowa State University Digital Repository. For more information, please contact [digirep@iastate.edu](mailto:digirep@iastate.edu).

**Intimate partner violence: Early adverse experiences in male offenders**

by

**Maria Belen Alcivar-Zuñiga**

A thesis submitted to the graduate faculty  
in partial fulfillment of the requirements for the degree of  
**MASTER OF SCIENCE**

Major: Family and Consumer Sciences (Human Development and Family Studies)

Program of Study Committee:

Amie Zarling, Co-Major Professor

Janet Melby, Co-Major Professor

Megan Gilligan

Tera Jordan

Iowa State University

Ames, Iowa

2017

Copyright © Maria Belen Alcivar-Zuñiga, 2017. All rights reserved.

## TABLES OF CONTENTS

	Page
ACKNOWLEDGEMENTS .....	iv
ABSTRACT .....	v
CHAPTER ONE INTRODUCTION .....	1
Ethical Considerations.....	4
Transparency of Researcher .....	4
CHAPTER TWO .....	6
LITERATURE REVIEW .....	6
Theoretical Framework .....	7
Adverse Childhood Experiences .....	9
Family History of Criminality.....	11
Disrupted Relationship with Parents .....	13
Youth Misbehavior.....	15
CHAPTER THREE .....	18
METHODOLOGY .....	18
Sample.....	19
Data Analysis .....	20
Trustworthiness .....	21
CHAPTER FOUR.....	23
RESULTS .....	23
Youth Misbehavior.....	27
CHAPTER FIVE .....	29
Implication .....	32
Limitations .....	33
Conclusion.....	34
REFERENCES .....	35
APPENDIX A: IRB EXEMPTION .....	45
APPENDIX B: DATA ANALYSIS SPIRAL .....	46
Figure B1.....	46
APPENDIX C: CODING OUTLINE .....	47
Table C1.....	47

APPENDIX D: CHARATERISTICS OF SAMPLE .....	49
Table D1 .....	49
APPENDIX E: FREQUENCY TABLES .....	50
Table E1 .....	50
Table E2 .....	50

## ACKNOWLEDGEMENTS

I would like to thank my co-major professors, Dr. Zarling and Dr. Melby, as well as other committee members, Dr. Gilligan and Dr. Jordan, for their support and guidance throughout the process of this research study.

Moreover, I would also like to thank my colleagues, mentors and friends in the department of Human Development and Family Studies and in the School of Education at Iowa State University for their inspiration in helping me finish my Master's degree. Additionally, I would like to thank LUCHA, the group of people I call my village, for being the family away from family, and the safe space in this institution.

Most importantly, I want to thank my mother Hilda, and my brother Johnny, for giving me the courage and love to pursuit dreams.

## ABSTRACT

Adverse childhood experiences (ACEs) significantly impact social, behavioral and health problems over the lifetime. Research has found that early exposure to adverse experiences are linked to subsequent long term outcomes such as intimate partner violence (IPV). However, there is relatively limited qualitative research on the early experiences in the lives of intimate partner perpetrators. Therefore, through a life-course theoretical lens, this study aims to understand early lived experiences of IPV perpetrators. A content analysis was performed on interviews with 112 men convicted for domestic violence. From this analysis three interconnected themes emerged: (1) family history of criminality, (2) disrupted relationships with parents, and (3) youth misbehavior. Understanding the early life histories of men who have been arrested for domestic assault is crucial as it helps to recognize context potentially influencing their current situation. The results highlight the need to critically investigate the early lives of perpetrators of IPV for prevention and intervention purposes.

## CHAPTER ONE INTRODUCTION

For the purpose of this study intimate partner violence (IPV) and domestic violence (DV) will be used interchangeably. DV is a public health concern in the United States and worldwide with serious consequences for families and communities. There are many variations on the meaning of DV, but according to the Center of Disease Control and Prevention (CDC, 2016), it refers to different intensity levels of physical and psychological harm inflicted upon an intimate partner. Given DV's short and long-term impact on mental and physical health (Breiding, Black, & Ryan, 2008; Plichta, 2004) and the pervasiveness of violence in intimate relationships, studies have explored why people perpetrate IPV. Research outcomes on IPV perpetration contain a long list of risk factors including young age, low socioeconomic status, unemployment status, education, mental health problems, substance abuse, and childhood trauma (i.e., child abuse or parental violence) (Capaldi, Knoble, Shortt, & Kim, 2012; Cunradi, Caetano, & Schafer, 2002; Eriksson & Mazerolle, 2015; Shorey, Febres, Brasfield, & Stuart, 2001). Moreover, Adverse Childhood Experiences (ACEs) are linked with an increased risk of IPV victimization and perpetration among men and women (Whitfield, Charles, Anda, Robert, Dube, & Felitti, 2003). The relationship between childhood adversity and both male and female IPV perpetration in later adult life is well documented (Bowles, Dehard, & Webb, 2012; Fagan, 2001; Gil-González, Vives-Cases, Ruiz, Carrasco-Portiño, & Álvarez-Dardet, 2008; Reavis, Looman, Franco, & Rojas, 2013; Roberts, Mclaughlin, Conron, & Koenen, 2011; Whitfield et al., 2003).

There is evidence that both males and females engage in IPV, however research has shown that females engage at higher rates than males (Archer, 2000; Caetano, Vaeth, & Ramisetty-Mikler, 2008; Capaldi et al., 2012). Nonetheless, male IPV causes more injury and death compared to female IPV (Archer, 2000; Capaldi et al., 2012; Center of Disease Control

and Prevention, 2014). Due to these findings, greater attention on discourse, policy, and services for IPV prevention and intervention with perpetrators is needed. Currently, the criminal justice system has become the main provider of intervention programs for perpetrators of DV, known as Batter's Intervention Programs (BIPs) (Tolman, 2001). A great deal of research has looked at IPV male perpetrators via BIPs, however, the majority of this research centers on quantitative constructs (Eriksson & Mazerolle, 2015; Lee, Walters, Hall, & Basile, 2013; Schmidt et al., 2007; Shorey et al., 2001;). As a result, this research has several shortcomings including limited information regarding personal experiences and early exposures to adversity (Peralta, Tuttle, & Steele, 2010). Very few studies (Peraltra et al., 2010; Watt & Scrandis, 2013; Worley, Walsh, & Lewis, 2004) have analyzed the lives of perpetrators of IPV using qualitative methods, and no studies utilize information on IPV offenders collected by community correctional employees. With this in mind, qualitative inquiry is important because it provides an opportunity to analyze and develop a better understanding about experiences of males convicted of IPV.

In this study, I attempted to provide deeper understanding on IPV male perpetrators lived experiences. To do so, we must move past measures and scales and instead investigate the life trajectories of perpetrators to find early childhood patterns and spaces of adversity. Early life experiences and environments could provide contextual explanations for outcomes in later life, thus it may be relevant to examine reports of early exposure to adversity in males convicted of domestic assault. This paper deepens this literature by critically analyzing the intake information collected by correctional staff about the lived experiences of men convicted of domestic assault. Utilizing this data, I sought to extend the research on the relationship between ACEs and IPV perpetration in two ways. First, I critically analyze the reported lived experiences of males convicted of domestic assault, which allowed me to identify whether adverse childhood

experiences emerged in the data. This approach extends the work by Worley et al. (2004), which explores the early parenting experiences of male perpetrators of IPV. Second, I contribute to interpretivist inquiry in the field of ACEs and IPV male perpetrators. Such methods are essential because of the current lack of men's narratives in IPV scholarship (Peralta et al., 2010) and the importance of how IPV male perpetrators construct and make meaning about their past experiences during early life.

I analyzed the content of intake interviews of 112 men as reported by case workers from the Iowa Department of Corrections (DOC). Utilizing content analysis procedures, this study examined exposures to adversity in men convicted of domestic assault against their female intimate partners using the perspectives of a third party reporter, that of case workers from the Iowa Department of Corrections. The study was grounded in the perspective that violence perpetrated as an adult must be contextualized within a life narrative that ties together difficult and troubled childhood and adult IPV perpetration, and addressing these adverse experiences must become an essential part of the response to domestic violence perpetration.

The following question guides this paper: How do case workers from the Iowa Department of Corrections describe the early adverse lived experiences of men convicted for domestic assault?

### Ethical Considerations

This study is exempt from IRB approval as described in Appendix C. Participants identity is protected with anonymity and the use of pseudonyms. Other possible identifiable information will be subject to strict vetting and excluded from the report if needed.

### Transparency of Researcher

Because of my Master's level training in qualitative techniques, I'm aware of the importance of positionality, which means it is imperative to disclose and understand the lens in which the results are interpreted (Tracy, 2010). My position as a researcher on the topic of male intimate partner violence perpetrators comes from personal and professional experience. My mother is a survivor of DV and it greatly influenced my research interest in academia as well as professional work. I have worked as an advocate for survivors of domestic violence for three years at a non-for-profit organization in central Iowa. The clients that I work with, many times, don't want to end the relationship with the violence perpetrator. As advocates, all we can do is provide as much resources and support for their decisions. Hence, in such instances, I've wondered about existing programs targeting perpetrators of IPV and found no community outreach programs for referrals. The only existing program is within the criminal justice system, which means individuals must be convicted for domestic assault to attend.

Moreover, I also identify as a Latina, first generation immigrant and first generation college student. During my first year as a graduate student, at Iowa State University, I was invested in research about Latina survivors of IPV. As a research assistant, I created a culturally-specific-model for the staff in the Iowa Department of Human Services who work with Latina survivors of DV. My experience as an advocate and researcher allows me to gain a better understanding of the needs, help-seeking behaviors, physical and health impacts, and legal systems involved in the lives of DV survivors. With this background, exclusively from a

survivor's perspective, I wanted to understand more about the reasons, causes and possible "behind the scene" lived experiences and risk factors that influence perpetrators of violence.

## CHAPTER TWO LITERATURE REVIEW

Scholars from diverse academic fields and theoretical backgrounds are expanding our understanding of the phenomenon of intimate partner violence. Demographic characteristics (i.e., age, race, employment, financial status, educational level), psychological (i.e., stress) and behavioral (i.e., substance abuse) factors seem to be correlated with the likelihood to engage in IPV (Caetano et al., 2005; Caetano, Ramisetty-Mikler, & Harris, 2010; Caetano et al., 2008; Lussier, Farrington, & Moffitt, 2009; Perilla, 1999; Shorey et al., 2011; Sweeten, Piquero, & Steinberg, 2013). Personal experiences such as family history and attitudes towards women are typically included (Perilla, 1999; Straus, 2004). The prevalence and type of IPV may differ, depending on the intersection of personal, behavioral and contextual characteristics. For example, Caetano et al. (2005) reported that IPV “prevalence, incidence, and recurrence” rates among minority couples were higher than that of their White couple counterparts. However, other studies have found that regardless of race/ethnicity, environmental and economic contexts influence violence (Perilla, 1999; Van Wyk et al., 2003). Thus, surrounding contextual experiences may be contributing to the prevalence and development of IPV (Van Wyk et al., 2003).

This evidence suggests that IPV is a complex phenomenon with multiple determinants in which several theoretical perspectives can be applied. For example, Urie Bronfenbrenner’s Bio-Ecological Systems Theory considers multiple factors that function at different, yet interconnected systems of an individual’s life (Carlson, 1984). The Bio-Ecological lens considers natural characteristics (i.e., genetics, physical & mental abilities) in conjunction to the environment or context in which the individual lives (i.e., culture, government, location, time) (Rosa & Tudge, 2013). Nonetheless, the family unit is, usually, the first system that influences a

child's development into adulthood (Newman & Newman, 2016; Shonkoff et al., 2012). The model claims that such influences could encompass patterns of positive or negative experiences that transmit generationally (Cox & Paley, 2003). IPV literature recognizes the above as the 'cycle of violence' or intergenerational transmission of violence. To date, research has not explored IPV perpetrators' descriptions on their early life experiences shaping their later adult life. However, experiencing child abuse or witnessing interparental violence as a child are found to be significant predictors of IPV perpetration in adulthood (Eriksson & Mazerolle, 2015). Furthermore, Social Learning Theory suggests that individuals learn to model or imitate through direct experiences and observations of aggressive behaviors in the environment (Bandura, 1978). Thus, there is a good possibility that perpetrators of IPV learned aggressive behaviors from family members or those most closely involved in their childhood. Similarly, reviewing exposures to adversity, will help us understand transmission of violence, behavioral and developmental outcomes of this population.

#### Theoretical Framework

The Life Course Perspective is the main theoretical framework informing the current study. Life-course perspective posits that early family interaction patterns create blueprints for later living (Elder, 1998). A key concept of the life-course theory is the notion of linked lives, where individual trajectories and social relationships are reciprocal experiences linked through family networks (Elder, 1998). Family histories of criminality and substance abuse may have contributed to or been the product of more aggressive, coercive, or controlling home environments. If these interaction styles persist across early life, they may be reinforced and carried on into later life. They may select into or create environments as adults that are familiar and congruent with this childhood history, characterized by unstable, inconsistent, and volatile relationships and behaviors (Caspi, Bem, & Elder, 1987). Characteristics of the adverse factors

listed above, such as inter-family violence and parental substance abuse, abandonment or maltreatment, school dropout, and early onset of substance use, have been associated with the lives of DV perpetrators throughout research (Edwards, Holden, Felitti, & Anda, 2003; Eriksson & Mazerolle, 2015; Lussier et al., 2009; Peralta et al., 2010; Whitfield et al., 2003). Therefore, the life-course framework allows for exploring IPV perpetrators' early socialization, childhood development, and interactions within the family system—which fall under the broad umbrella of “adverse childhood experiences.”

Similarly, cumulative inequality theory considers how positive and negative experiences early in life shape later life outcomes through a multilevel approach (Ferraro & Shippee, 2009). Inequality, within this concept, is structurally induced as opposed to simply the result of individual choices (Ferraro & Shippee, 2009). This framework also views inequality as accumulating over the life course and within various macro and micro level systems. For example, at the micro level, interactions with individuals during childhood and at the macro level, environmental systems throughout the life course can generate inequality. Additionally, the experiences in the micro system (i.e., with immediate family members) may spill over to other systems (i.e., school and criminal justice system). Thus, childhood conditions are key in understanding the onset of adversity, the accumulation of inequality across human development, and consequences in later adult life (Ferraro & Shippee, 2009; Schafer, Ferraro, & Mustillo, 2011).

On the other hand, this theory posits that the accumulation of advantages (opportunities) and disadvantages (risks) do not solely determine life outcomes. In fact, the theory contextualizes other factors that may influence an individual's life trajectories; the resources available to people and individual human agency (Ferraro & Shippee, 2009; Ferraro et al., 2011).

In other words, although cumulative inequality theory prioritizes structural exposures to risks or opportunities, human agency and resource accessibility are key to individuals' response to early adversity (Schafer et al., 2011). Hence, life trajectories are shaped differently by individual's accumulation of adversity, access to resources, and human agency (Ferraro & Shippee, 2009; Schafer et al., 2011). To better understand early life experiences and potential childhood disadvantages of IPV perpetrators through a life-course theoretical lens, this study will focus on factors related to family history of criminality, disrupted relationships with parents, and youth misbehavior.

#### Adverse Childhood Experiences

In general, research on Adverse Childhood Experiences (ACEs) has highlighted the connection between negative life experiences and negative long-term outcomes in later adult life (Anda et al., 2006; Edwards et al., 2003; Felitti et al., 1998; Shonkoff et al., 2011; Whitfield et al., 2003). A compiled list of the characteristics of ACEs include: physical abuse and neglect, emotional abuse and neglect, sexual abuse, inter-family violence, substance misuse within household, parent separation or divorce, parental death, incarcerated household member, economic hardship, neighborhood violence, and racism (Substance Abuse and Mental Health Services Administration, 2016; Child Trends, 2013). The significant influence of ACEs on social, behavioral and health problems over the lifetime is well known. For example, psychological or emotional abuse in a child's family environment influences their adult mental health (Edwards et al., 2003). Additionally, a study of 9,508 adults that completed both a standardized medical assessment and a questionnaire on ACEs found that the higher number of ACEs exposed to, the greater health risk for substance abuse, depression, and suicide (Felitti et al., 1998). In this same study, over half of the respondents reported to have, minimum, one ACE and a quarter of the participants reported to have two or more ACEs (Felitti et al., 1998). Other

studies have also described the “graded relationship” between ACE exposures and negative outcomes (Anda et al., 2006; Gjelsvik, Dumont, Nunn, & Rosen, 2013).

Children living in homes where violence is present are at a higher risk of intentionally being abused or of being accidental casualties (Gil-Gonzalez et al., 2008). Accidental or intentional abuse can cause physical harm to a child, but also potential psychological trauma. Exposure to violence as a child, by observation or as a direct victim, increase in intensity with age (*Child Trends*, 2016). Building on this type of evidence, research has found that experiencing child abuse or witnessing violence in the home is also related to negative health outcomes such as psychological, physical, and behavioral problems (Felitti et al., 1998; Lussier et al., 2009; Shorey et al., 2001).

Another area evaluated is intergenerational transmission of IPV victimization and perpetration. In other words, there is existing evidence that people who witnessing or experience abuse in the home are at a higher risk of IPV perpetration or victimization in later life (Erikson & Mazerolle, 2015; Gil-Gonzales, 2008; Singh et al., 2014; Whitfield et al., 2003). A nationally represented study on IPV prevalence and health service usage with men that batter found that 2 out of 3 males also experienced childhood family violence (Singh et al., 2014). Erikson and Mazerolle (2015) specifically investigated the differences between experiencing child abuse and witnessing interparental violence as a child. They found that those who reported experiencing a combination of child abuse and interparental violence were 4 times as likely to report IPV perpetration compared to people who had no exposure to violence as a child (Erikson & Mazerolle, 2015). Finally, a systematically review of IPV literature between 1995 and 2004 found that, after meeting inclusion criteria, there is an association between experiences of violence as a child and occurrence of IPV in later adult life (Gil-Gonzales, 2008). Therefore, the

purpose in this study is to understanding childhood ACE exposures of men who inflicted violence towards their female intimate partner.

#### Family History of Criminality

Children's first social network is the family system (Newman & Newman, 2016; Shonkoff et al., 2012). Therefore, children's environments and trajectories are greatly influenced by family histories (Newman & Newman, 2016). The phrase criminogenic families is used to describe family environments encompassing economic strain, substance abuse, domestic violence, and poor parenting (Lussier et al., 2009). Separately, a qualitative research study with a sample from a department of correction's program, reported that all participants grew up with some type of childhood trauma or family issues (Watt & Scrandis, 2013). Childhood trauma or family issues were categorized as living in a single parent household, witnessing violence between parents, and experiencing victimization by a family member(s). These factors were reported as potentially having considerable influence in developmental and behavioral outcomes of male perpetrators of DV (Watt & Scrandis, 2013). Another adverse condition is a household member's incarceration, which has been recently investigated as "collateral damage to children" (Gjelsvik et al., 2013). Accordingly, given the concept of linked lives, family history of criminality will influence children in meaningful ways.

Other environmental influences in the lives of children are related to parental alcohol and drug abuse. Caetano, et al. (2008) reported that, in a longitudinal study of 1,136 heterosexual couples, men who had alcohol abuse problems were at a higher risk of DV victimization. Research using a nationally representative sample found that increased risk of both moderate (threw something at partner; pushed, shoved, or grabbed; and/or slapped) and severe (kicked, bit, hit, beat up, tried to hit with object, choked, burned, scalded, forced sex, threatened with a knife or gun, and/or used a knife or gun) IPV was associated with male and female alcohol-related

problems. That said, parental alcohol abuse could intensify the violence presented in the family system. The connection between ACEs and family substance abuse issues have also been noted within national data. In fact, drug and alcohol issues in the family and inter-family violence are the top five most common adverse childhood experiences in the United States (Sacks, Murphey & Moore, 2014).

Regarding inter-family violence, it is important to consider what it means to be exposed to domestic violence as a child. A 2015 social policy report defined children's exposure to domestic violence as "children[s] who see and/or hear violent acts, are present for the aftermath (e.g., seeing bruises on a mother's [or father's] body, moving to a shelter), or live in a house where domestic violence occurs, regardless of whether they see and/or hear the violence" (Fernandes-Alcantara, 2015). Research has found specific relationships between different types of childhood exposures to violence (physical abuse, sexual abuse, witnessing father-to-mother violence) and the subsequent risk of IPV victimization and perpetration in adulthood (Whitfield et al., 2003). For example, the above study found sexual abuse was predictive of adult IPV perpetration (men) and victimization (women), and the same gender-specific results were reported for experiencing physical violence (using two questions from the Conflict Tactic Scale; see Whitfield et al., 2003). This study used a sample from a clinical setting and the data was collected using surveys and medical histories of patients. Therefore, children's exposure to different types of violence in the home have long-term impacts and outcomes later in adult life.

On the issue of family member incarceration, a study utilizing a national cross-sectional phone-survey conducted in the United States found that children who experienced the incarceration of a household member had negative consequences later in adult life (Gjelsvik et al., 2013). In this same study, it was reported that exposure to household member's incarceration

was “much more prevalent among Black (15%) and Hispanic (11%) adults than among White adults (5%).” This is not surprising since research has demonstrated the stark rise in the mass incarceration of people belonging to communities of color within the past decade (Alexander, 2010). Thus, household member incarceration, substance abuse, and inter-family violence are contextual family problems that set the transitions and outcomes in the lives of children which may contribute to a trajectory of violence.

#### Disrupted Relationship with Parents

For this study, characteristics of disrupted parent-child relationships will include parental (or parental-figure) abandonment, death, neglect, and child abuse. In this case, child abuse includes verbal, physical and or emotional maltreatment. All the above behaviors, within family relationships, are recognized as ACEs factors (Felitti et al., 1998; Shonkoff et al., 2012). Due to parents being the primary caregivers of children, disrupted relationships in the parent-child dyad have emotional, mental and physical health consequences. To understand the frequency with which child maltreatment occurs, the Children’s Bureau creates an annual child abuse report with data submitted voluntarily by child welfare agencies around the United States. For the 2014 federal fiscal year, this report found that “the greatest percentages of children suffered from neglect (75%) and physical abuse (17%)” (U.S. Department of Health & Human Services, 2016). In addition, this national report states that 78% of all child abuse cases were from parents of the victims.

*The Lifelong Effects of Early Childhood Adversity and Toxic Stress* (Shonkoff et al., 2012) makes the case for the adult-child relationships to have a moderating role in the level of stress for children who experience some type of adversity. Through an ecobiodevelopmental (EBD) framework, circumstances, such as the death of a family member, can create tolerable or toxic stress in children who either have supportive adults or not. Shonkoff et al. found that,

toxic stress can result from strong, frequent, or prolonged activation of the body's stress response systems in the absence of buffering protection of a supportive, adult relationship. The risk factors studied in the Adverse Childhood Experiences Study include examples of multiple stressors (e.g., child abuse or neglect, parental substance abuse and maternal depression) that are capable of inducing a toxic stress response. (2012, p. e236)

Thus, immediate family networks such as parents have a central role since they are one of the first adults present in their children's lives. This is important to recognize because even when a child experiences great adversity, such as the death of a parent, the support that the child receives from adults may be a key to overcoming toxic reactive effects.

Worley et al. (2004) examined parenting experiences in the lives of men identified as perpetrators of DV and reported that all the participants experienced neglect and rejection. Recruitment was purposeful from a psycho-educational cognitive-behavioral group for preventing future IPV. The participants were seven men involved in heterosexual relationships (Worley et al., 2004). With the use of the Adult Attachment Interview (AAI), researchers analyzed the participants' own use of specific adjectives to describe parenting experiences while focusing on explicit instances where "individual's attachment system was activated" in the context of stressors (e.g., danger or loss). The researchers relayed that all participants felt that their parents "were unable to provide comfort and protection... in times of distress, which is suggestive of parental unavailability to the participants needs" (Worley et al., 2004). The results indicate that the men were exposed to stressful situations and were not able to find supportive resources (i.e. parents) throughout this time. This empirical work can provide theoretical guidance when assessing for early disrupted relationships with parents in the current study.

### Youth Misbehavior

Recklessness, defiance, anger, impulsiveness, and dishonesty are behavioral characteristics of antisocial responses of adolescents (Lussier et al., 2008; Shorey et al., 2011). The antisocial behaviors listed are some of the outcomes of child-environment interactions. The *Children's Exposure to Violence Report* (2016) indicated that children exposed to violence are more likely to exhibit aggression and conduct problems. A longitudinal study of 365 eight-year-old boys (age at first contact) found an association between a criminogenic family (i.e., low SES of family of origin, parental violence, inadequate parenting, and antisocial modeling) and IPV through the development of antisocial behavior (Lussier et al., 2009). In a longitudinal study, aggression to female partners in young adult men was found to be associated with experiencing dysfunctional parenting (i.e., poor monitoring and poor discipline) (Capaldi & Clark, 1998). More specifically, Capaldi and Clark (1998) used a sample of young at-risk men from the Oregon Youth Study and found the link between parenting factors and later IPV was mediated by adolescent antisocial behavior. Hence, criminogenic environments such as low SES and specific parenting practices are risks for developing antisocial behaviors and perpetrating IPV in later life.

It is widely accepted that children who encounter early adverse experiences are more likely to engage in unhealthy and risky behaviors, as a way of coping (Anda et al., 2006; Shonkoff et al., 2011). Anda et al. (2006) distinguished patterns of risky behavior frequently related to trauma or stress, predominantly as a witness or victim of IPV. In this study, individuals who reported 4 or more ACEs had higher risks for engaging in smoking, alcoholism, illicit drug use, and injected drug use (Anda et al. 2006). Likewise, Dube et al., (2003) report that people who experienced 5 or more ACEs were 7- to 10-fold more likely to use illicit drugs when compared to people who reported experiencing no ACEs. Additionally, people in this study were

more likely to initiate drug use during mid-adolescence for each ACE category (Dube et al., 2003). In a sample from a correctional batterer's intervention program (BIPs) in an urban Midwestern city, participants reported normalization of family violence, in addition to alcohol use. The authors determined that the respondents' early exposure to adverse events were linked to using alcohol at an early age (Peralta et al., 2010). Lastly, a study found that feelings such as sadness or loneliness motivated adolescents to early onset of alcohol use (Rothman, Bernstein & Strunin, 2010). The adolescents in the study above described increased stress and alcohol usage following specific events, such as parent-child separation due to death and incarceration, witnessing people being shot, police brutality or parental negligence (Rothman et al., 2010).

Aside from family settings, misbehavior as a child or adolescent will likely manifest itself in school environments. The consequences of youth misbehavior could potentially have a dramatic effect on their life trajectories. Watt and Scrandis (2013) reported that having difficulties in school and mental health issues led participants to drop-out of school, start abusing substances prematurely, and subsequent legal issues. ACEs are also negative associated with academic performances over time, with poorest outcomes from children exposed to IPV (Kiesel, Piescher & Edleson, 2016). School settings have the potential to be a place for identifying ACEs and apply informed interventions for behavioral and psychological problems.

The overlapping body of research presented in this literature review supports centering the current study on understanding the multiple realities of men convicted of domestic assault. Prior qualitative studies on perpetrators of IPV included some type of ACE characteristic in their study, for example early exposure to violence and alcohol abuse (Peraltra et al., 2010), exposure to DV (Watt & Scrandis, 2013), and parental neglect (Worley et al., 2004). In the studies listed above, participants were men recruited from correctional groups, and with some history of

violence towards a female intimate partner. Participants' information about early adversity experiences was collected through in-person interviews. However, these studies had a very small sample size. Only one of the studies uses a mixed method design (Peralta et al., 2010). Two of the three qualitative studies used samples from the United States (Peralta et al., 2010; Watt & Scrandis, 2013), and the remaining study used a sample of men from the United Kingdom (Worley et al., 2004). None of the studies utilized information from case workers, group facilitator, or correctional staff. The current study aims to understand male perpetrators differently from the above in two ways: 1) it investigates how perpetrators report and make meaning of exposures to family history of criminology, disrupted relationships with parents, and instances of youth misbehaviors in much larger sample size and 2) it examines the intake interview information collected by staff (i.e., correctional employees) in the Iowa Department of Corrections.

## CHAPTER THREE METHODOLOGY

### **Data**

The data were collected from the Iowa Department of Corrections (DOC) database called Iowa Corrections Offender Network (ICON). The initial data were from standard intake interviews from community correctional employees of the DOC. The randomly retrieved intake interviews were from convicted men who enter the BIP between the years 2012 and 2015. ICON labels these intake interviews as generic notes. Each generic note is comprised of 14 sections. These sections were listed as participants' "criminal history, employment, education, financial, marital/relationship, family, housing, hobbies/recreation, companions/social networks, substance abuse, emotional/personal, attitude/orientation, goals, and areas of concerns." The reports varied in breadth of information within each section. All the sections were carefully analyzed and coded for early adverse experiences.

A total of 112 interview reports were collected from ICON. The data retrieved from ICON were of men convicted of domestic assault against an intimate partner of the opposite sex. The intake interviews took place in multiple correctional offices located within Iowa's 5th Judicial District. Interviews were conducted by thirteen community corrections employees. The intake forms were electronically uploaded to the ICON server. This electronic server is a statewide database used by the DOC to collect and organize data. With the approval of the DOC and the Iowa State University's Institutional Review Board, the intake interviews were retrieved from ICON and de-identified at the DOC main office location. The sample was restricted to men in heterosexual intimate relationships, who completed or planned to complete the Iowa Domestic Abuse Program (IDAP) after being convicted of domestic assault, in conjunction to completing an intake interview or initial generic note recorded by a DOC case manager.

### Sample

The convenience sample consisted of completed intake forms of 113 adult men. A total of 112 interviews were included in the analysis; one intake-interview was excluded after noting it was a same-sex relationship. The demographics of the men from the intake forms are described as follows (see Table 1): all were male; 62 % (N=70) were White, 20% (N=23) were Black, 14% (N=15) were Latino-Hispanic, and less than 1% (N=4) identified as Asian. Most men were not married (65%). Ages ranged from 18-61 years with a mean age of 38.89. Twenty-six percent of men had some high school or completed high school, 19% had completed their GED and only 7% had some college or finished college. Out of the 112 men, only 6 men informed that they had never consumed drugs or alcohol. One was a naturalized citizen, eight men were U.S. residents (green card holders), 4 men were undocumented, and all others were born in a territory of the United States.

### Procedure

Reports were randomly selected from a list of men convicted of domestic assaults and who participated in intake interviews between the years 2012 and 2015. Furthermore, I, the primary investigator, was permitted temporary access to ICON to search, retrieve, and print intake forms and collect demographic information, which I hand-wrote on the printed intake forms for each of the participants. The demographic information that was hand written included race-ethnicity, date of birth, and residential status (citizen or not), and country of origin (if not born in U.S soil/territory). The intake interviews were then examined for any identifiable information. Identifiable information was redacted using a black permanent marker. All of this took place at the main office location of the DOC. Next, the printed intake interviews were taken to a computer lab at Iowa State University, scanned, and uploaded into a computer software, MaxQDA 12. MaxQDA 12 is a qualitative and mixed-methods data analytical software.

Utilizing a constructivist framework, this study centers in the understanding of experiences of early adversity shared among perpetrators of IPV. The data were collected through a phenomenological lens incorporating in-depth intake interviews by correctional employees with men convicted for domestic assault (Creswell, 2013). The content of the interviews reported by correctional employees were analyzed for “essential themes” to develop a deeper understanding on what experiences are revealed by perpetrators of IPV and how they make meaning of adversity in their early life (Creswell, 2013). Overall, each intake-interview included a wide-range of descriptive information on various aspects of their past and present life (see Research Design section). Hsieh and Shannon (2005) defined qualitative content analysis as “a research method for the subjective interpretation of the content of text data through the systematic classification process of coding and identifying themes or patterns.” Thus, a content analysis was useful to find patterns in the data and reflect on overarching themes to help interpret the essence of the phenomenon (Hsieh & Shannon, 2005; Creswell, 2013).

#### Data Analysis

All data analysis took place using MaxQDA analytical software. First, the data were organized and restructured appropriately (in the case that content from intake-forms were displaced due to scanning and uploading into MaxQDA). After this initial process, the data were read multiple times in order to make sense of all the documents (Creswell, 2013). Next, each intake interview was read individually, thoroughly scanned and coded for descriptions of early exposures to adversity. This process is described by Saldaña (2013) as the first cycle of coding. Hence, in the first cycle, I coded entire paragraphs, sentences or few words that explained the respondent’s versions of early adverse experiences (i.e., father drug use, mother incarceration, violence in the home) (Saldaña, 2013). The next step, according to Saldaña (2013), is the second cycle of coding, which looks for patterns and associations between codes (from the first cycle) to

combine and examine to form overarching themes. The steps took place simultaneously to each other, while constantly reflecting to make sure I was staying true to the content of the data. As displayed in Appendix A, the process of collecting, analyzing, and reporting on data are interconnected (Creswell, 2013).

During this process, themes were identified. These themes were also carefully reviewed multiple times to make sure they accurately encompassed the realities of the participants. I found three essential themes related to early adverse experiences including:

Theme #1: Family history of criminality including substance abuse, violence, and incarceration.

Theme #2: Disrupted relationships with parent figures which included abandonment, neglect, child abuse, and foster homes.

Theme #3: Youth misbehavior which included case workers' reports about participant experiences with juvenile delinquency, substance abuse, and behavioral problems.

For a detailed explanation of the three essential themes, sample of texts, and rules for distinguishing coding schemes see Appendix B. Finally, the three themes are analyzed to understand the way participants' construct their lived realities and make meaning of adverse experiences across IPV perpetrators (Creswell, 2013).

#### Trustworthiness

In addition to my positionality statement listed in Chapter 1, I wanted to ensure trustworthiness in this research study by using several tools. First, the dataset collected was uploaded into an appropriate analytical software (MAXQDA) which aided me in cycling through the data more than one time. Cycling the data multiple times helped confirm credibility in that the findings were composed of accurate descriptions from the data (Guba & Lincoln, 1985). Also, the findings firmly derived from the textual reports of male perpetrators of domestic

assault created by correctional employees. Furthermore, it is imperative to point out that a main theoretical framework guided this research project (life course perspective) and aided in interpreting accurately the findings. Thus, the work was grounded on existing research and theories. Nonetheless, this study presented different avenues in which male perpetrators of IPV may be understood (Parker, 2004). Besides, the entire content analysis was dependent on the breadth of information provided in data (i.e., DOC intake interviews) and its organization process. In this case, the raw data are stored in MaxQDA software and tracked with a clear “audit trail” that would make it possible for other researchers to make parallel observations (Guba & Lincoln, 2005). In addition, the coding scheme that was developed is provided in the appendixes (Hsieh & Shannon, 2005).

All the above allows for applicability of this research into other contexts in the criminal justice system’s work with perpetrators of IPV. Lincoln and Guba (1985) explain that transferability is the ability to apply similar methodologies and criterion into different situations. For example, the current study can be applicable in other departments of corrections around the nation, with various population samples of perpetrators, and with other forms of qualitative methods (interviews, focus groups, case study, etc.). There is sufficient information describing the data and methodology in the present study that allows for comparison in future studies (Lincoln & Guba, 1985). These strategies implemented throughout the research process increased the trustworthiness of the project.

## CHAPTER FOUR RESULTS

This study analyzed the Department of Corrections (DOC) data of 112 men who were convicted of domestic assault in Iowa Judicial District 5, to contextualize their lives and attend to childhood exposure to adverse events. Based on the data collected by the DOC's case workers, participants reported three types of lived experiences: family history of criminality, disrupted relationships with parents, and youth misbehavior. Of all intake interviews, 39.3% (n=44) contained information about a family history of criminality and disrupted relationships with parents during early life. Of these, half (n= 22) indicated a history of family criminology and 38.6% (n=17) described disrupted parental relationships. On the other hand, youth misbehavior was mentioned in 78.6% (n=88) intake interviews. Of these, 71.6% (n=63) reported one or more accounts of youth misbehavior among the incarcerated men, (38% contained one account, 28% reported two accounts, and 9% reported three or more accounts). See Appendix E for more information.

Family history of criminality. Exposure to criminal behaviors, violence and incarceration from members of the family unit and/or extended family (e.g., uncles and cousins) was reported in the intake interviews. The reports of correctional employees included information about the perpetrators' parents having a criminal record and/or substance abuse issues, and there were occurrences of extended family members having a criminal history as well. Information on family criminality was not always reported in detail. Eight correctional workers gave brief accounts on parental criminal behavior. For example, according to a correctional employee, Michael, a 51-year-old Non-Hispanic White male, said “ ‘my father never molested me but put me through hell’ ” and “ ‘my mother was murdered when I was 9 years old... she had a drug

problem.’ ” On the contrary, other transcripts had detailed examples of early experiences of domestic violence, parental incarceration and substance abuse, and neglect:

Robert (Non-Hispanic-Black, 24) reports father is currently serving life in prison for killing [Robert’s] mother. Robert reports his father killed his mother in front of him when he was 10 years old. Robert reports that growing up he was tossed around from family member to family member because no one wanted him. (At the time of the intake Robert had serious alcohol and drug problems.)

Also,

Jordan (Non-Hispanic-White, 61): Admits his father was emotionally abusive towards his wife. Father was an alcoholic when Jordan was growing up. His father left when Jordan was in 3<sup>rd</sup> grade but returned when he was in the 9<sup>th</sup> grade. Jordan [also] stated that after his father passed away he started looking for an excuse to drink; admits getting addicted to pain medication.

Additionally, Christopher, a 35-year-old Non-Hispanic Black male reported not “meeting his biological father until the age of 13,” and currently knows “very little about him.” The intake-interview follows with detail information:

“[Christopher] states his father was a pimp and impregnated his mother when she was 15 and his father was 30-years-old. [Christopher] states that his father has a criminal history, including domestic abuse and substance abuse related convictions. He does not have a relationship with his stepfather [either]. Christopher indicates [stepfather] has a criminal record, which also include domestic abuse and substance abuse related convictions.

When asked about [his] childhood, client stated, ‘Violence and drugs.’”

These experiences with adversity were in relation to witnessing interparental violence, which in one case was deadly, and parental substance abuse as a child. In the case of Robert, it seems like his family network tried to help, but left him feeling neglected.

Disrupted relationships with parents or parental figures. This section covered experiences of abandonment, death, and child abuse by biological parents, step-parents or other parental figures. One significant experience with foster homes was also included in the frequency results (see Appendix E). Only a handful of participants reported death of a father as a disrupted relationship (n=4). One correctional employee reported the age at the time of fathers' death as early as 3 years old. There were reports of men's relationships with their fathers as "non-existent" due to negative experiences, abandonment and/or death. Due to the lack of father presence, correctional workers described mothers as the main parental figures for the men. Some intake-interview reports also included information about the men's negative experiences with their mothers. For example, Richard, a Non-Hispanic White 24-year-old, reported that his "father is not in the picture." The correctional employee also stated, "Richard talks with his mother several times a week. However, Richard reports his relationships with his mother is violent and tumultuous at best. Richard describes the relationship with his mother as 'not normal.'"

Furthermore, Wesley, a 29-year-old Non-Hispanic-White, reported that "his father passed away when he was a child, 'It was bad while growing up', his mother wasn't around and if she was, she was 'verbally abusive.'" Other reports contained more detailed information such as,

Jonathan (Non-Hispanic-Black, 29) reported his father passed away. He reported the relationship with his mother, is nonexistent. Jonathan stated that his mother abandoned him when he was 2 years old and he didn't talk with her until he was 37. Jonathan stated

they do not speak as of now. Reported suffering from depression and PTSD due to witnessing his father's shooting [murder].

Moreover,

Luis (Latino, 43) became emotional when talking about his family. Reports not being real close with his mother. States he was treated badly by his mom and grandfather/father and was treated like an animal. He reports being molested from ages 5 to 10 by an uncle and a cousin and has never told anyone about it. When asked how it stopped at age 10, he states because that's when they moved to the city and his uncle and cousin didn't have easy access to him. The client became angry when talking about his grandfather being his father and has trouble dealing with the fact that his mom was molested by her own father and never reported it. States his mom also had a daughter due to the molestation. Client states he never received any kind of therapy/counseling until 8 months ago.

Furthermore, the following is a detailed report of a man who had "no contact" with his biological father but stated growing up with a stepfather:

Jerry (Non-Hispanic-White, 36): Reports he has no contact with his biological father; indicates he has no knowledge of his biological father and they have no contact. Jerry states he has never had a close relationship with his stepfather and is unaware if he has a criminal, mental, or substance abuse history. Jerry describes his childhood as growing up "poor and bored." He had a good relationship with his mother, but his stepfather worked a lot and had no interest in children.

Interestingly enough, his stepfather was described as working a lot, but Jerry conveyed "he completed the 8<sup>th</sup> grade before dropping out to begin working." Another non-supportive father-child dyad stated by a case worker: "[my father] left me when I was young. [He] called me

names like fag and sissy boy.” Fewer positive relationships with fathers were reported than negative relationships. Extended family was mentioned by very few participants, too. For example, one participant reported he “does not have a ‘next closest relationship’ in his family because they are all on drugs and in/out of prison.”

Youth misbehavior. Over half of the case workers sampled reported some type of behavioral issue among the men in their childhoods or adolescence such as juvenile delinquency, substance abuse, school related misbehavior, and self-inflicted harm. If the actions took place before the age of 21, I considered it part of the youth misbehavior coding scheme although by law cases were considered adult criminal history since they were over the age 18. Men experienced as many as two or three school expulsions, suspensions, and fights. Two men explained, “I was arrested at age 15 for running away, spent 1 or 2 weeks in jail for this offense,” and ‘I was arrested at age 14 for arson and 5<sup>th</sup> degree theft...at age 17 for intimidation with a dangerous weapon and charges of serious assaults at age 21.’ ” Two other men also reported exposure to gangs, some reports stated: “affiliated with the 17<sup>th</sup> street gang, but not currently involved” and “former member of the Triña gang.” A man reported being arrested as early as 12 years of age for possession of marijuana and stealing. Not only were their criminalized conduct noted, but also patterns of school misconduct,

Christopher: Did not complete the 12<sup>th</sup> grade, admit to being suspended in school for fighting. Indicated he had poor attendance in school and didn’t like anyone in a position of authority. I was diagnosed with anger problems in school and attended special education classes.

Some of the consequences for misbehavior in school were in-school suspensions or 1 or 2 days of out-of-school suspensions. However, there were many reports of severe outcomes for fighting

in school and for these acts of misbehaviors they were either expelled and/or arrested. Some men reported being expelled multiple times from different schools.

Many of the men who lived through adverse childhood experiences also disclosed substance misuse as teenagers, and in one occasion as early as age 5. For example, one participant who reported coming from a family with criminal history described his underage alcohol intake as “drinking history peaked at the age of 17.” Another man who reported witnessing family violence while growing up was reported as saying that “his drug history peaked at age 20. A session of using drugs roughly considered of using cocaine and pot.” All but two intake-interviews reported current and/or previous substance use. The majority of the men also stated having no current concerns about their drug or alcohol usage, normalizing their substance misuse.

## CHAPTER FIVE DISCUSSION

The research explored adverse lived experiences in relation to family history of criminality, disrupted relationships with parents, and youth misbehaviors in 112 men convicted for domestic assault. The conditions listed above were explored. It was found that most of the men had negative experiences with early socialization that derived from family interactions. The childhood experiences of many men in the sample contained environments of violence, tribulation and abuse or neglect, according to correctional employees. Consistent with a life course perspective (Elder, 1998), young people who grow up in physically violent and troubled families are likely to learn similar interaction styles. Previous research has established the relationship between ACEs and negative outcomes. Men who experience great adversity earlier in life in family contexts are likely to engage in antisocial behaviors and negative interactions with intimate partners in later adult life (Anda et al., 2006; Erikson & Mazerolle, 2015; Gil-Gonzalez et al., 2008; Gjelsvik et al., 2013; Whitfield et al., 2003).

The present research increased our knowledge about the role of childhood experiences in two ways: 1) It provided critical in-depth information on early life experiences within family settings and 2) exposed how these adverse experiences coincide with each other. Research suggest that “most people will have at least one childhood adversity, but facing a second or third adversity may lead to a greater sense of affliction” (Schafer et al., 2011). The results in the current study indicated that over half of the IPV perpetrators (n=63) experienced at least one account of youth misbehavior. Additionally, many studies have reported ACEs as individual risk factors for later adult intimate partner violence (IPV) perpetration, but the current study contributes to knowledge regarding childhood experiences of violence from family networks and societal contexts. Results showed that there are opportunities to identify ACEs in primary

environments of children. Thus, this study furthers the understanding of ACEs of male perpetrators of IPV within primary environmental (i.e., family and school) contexts.

Results also provided strong support that adverse events within family contexts are associated with negative behavioral outcomes such as alcohol and drug use. In the case of Luis (see results section), he also admitted to using alcohol due to “never [feeling] loved or wanted by his family.” This finding resonates with previous studies that suggest a relationship between exposures to verbal, emotional, physical, and household dysfunctions and increased health risk behaviors (Felitti et al., 1998). Using a sample of 9,508 adults, Felitti et al. (1998) found that participants who experienced four or more ACEs had higher health risk for alcoholism. Additionally, I showed evidence of early onset of substance abuse and misbehavior issues (see youth misbehavior results). Research on 8,613 adults investigated the connection between illicit drug use and ACEs and found that each ACE category increased the likelihood for early drug use initiation 2-to 4-fold (Dube et al., 2003).

The adoption of unhealthy behaviors at a young age by children who experience adversity is more likely due to coping with stress than social reasons (Rothman et al., 2010; Shonkoff et al., 2011). Similarly, exhibiting risky behaviors increase the likelihood to fail at school, become involved in gangs and violent crime, be incarcerated, and become parents at a young age (Shonkoff et al., 2011). Considering Shonkoff et al.’s (2001) deductions, the Bio-Ecological framework theorizes that core interpersonal relationships such as those within the family system are interrelated with school environments, which transforms in many cases onto societal issues and the legal system. Childhood adversity is likely to be “clustered within homes” (Schafer et al., 2011) and spill over into other systems throughout their human and social development. Furthermore, Dynamic Systems theory suggest that a person’s development is

subject to the interaction of many internal and external processes, within various systems, which produce actions “adapted to the constraints and affordance of the environment” (Newman & Newman, 2016).

The data reported a variety of exposures to early adversity within the family environments. These early adverse events could be interpreted as explanatory factors for the creation of new trajectories in the lives of children. Based on the data presented here, perpetrator’s early socialization and childhood development are influenced by family interactions and continuous reciprocal experiences with family members. Case workers notes of interviews with incarcerated males mainly reported that mothers and fathers of male perpetrators were incarcerated, had been in trouble with the law, abused substances, physically abused each other, and or had abused the men when they were younger. Male perpetrators made meanings of the above adverse events in ways that described the events happening concurrently. Therefore, due to parental substance abuse issues and trouble with the law, parents were less likely to provide stability and support needed for a healthy development of children (Shonkoff et al., 2011).

Certainly, the presence of adversity was expected based on previous literature. The results unveil details that validate how later outcomes as adults are created by the lack of attention in addressing adversity earlier in life. Because childhood is a pivotal period of development and socialization processes, structural conditions and support systems are mechanisms that matter substantially during this time (Schafer et al., 2011). On the other hand, social learning theory would say that male perpetrators of DV learned to model negative behaviors through directly experiencing or observing them during early life. This could be true based on the results of the current study, since experiences of interparental violence and child abuse were described in detail. Nonetheless, there are systemic issues present early in childhood that create difficulties

for individuals to experience healthy developmental transitions over time. The life course perspective allows for the understanding of how the family system provides space for exposures to risks earlier in life, followed by accumulation of inequality in developmental trajectories, which may lead to negative outcomes demonstrated in later adult life.

The prevalence of youth misbehavior in the school system (and in general) raises questions about identifying and screening for ACEs because more than half of the reports provided information on some type of misbehavior. In the stories shared with correctional employees, the men reported negative consequences for their misbehavior as children. There were no accounts of the schools assessing or attending to the needs of the students ‘in trouble’, instead they were suspended, expelled, or arrested. Pushing children out of school and creating environments that are not welcoming set up children for failure in other ways (Raible & Irizarry, 2010), which many times trigger the involvement of the legal system. More information is needed regarding the way family and school systems address childhood traumas. Is the school setting the ideal location to screen, identify, and help address ACEs to prevent or intervene the intergenerational transmission of violence? Finally, the criminal justice system, and to a greater degree the juvenile system, are ideal settings for programing that screens for and address ACEs as well.

#### Implication

Comprehensively capturing family member interactions and parenting behaviors, in general, is difficult. However, based on the findings of this study, incorporating parents and their roles in family or child preventive services must be considered, not just in children’s behavioral programs but also IPV prevention programming and outreach. Research must tackle the complexity of parenting influences on childhood experiences contextualizing their ability to access supportive resources (i.e., financial, mental health, substance abuse, etc.). Research must

also extend beyond observing abuse and neglect in the family unit to investigating how supportive roles differ from non-supportive ones within ACEs in the early lives of IPV perpetrators. As we can see through these interviews recorded by case worker, the quality of parental involvement and violent family environments needs more investigating in samples of IPV perpetrators for proper family outreach intervention services.

Moreover, it is important to include school environments as key spaces to identify and screen for ACEs. There is a need in schools for effective policy and programs that address family violence by going beyond calling child welfare agencies. Additionally, such interventions should consider the ways children are being ‘treated’ for their traumas as opposed to punished for behaviors that were developed largely by the influence of environmental factors, particularly those exposed to in family settings. Likewise, if the juvenile system is involved, there is a need for offenders who exhibit violence to have access to programs that evaluate and address treatment for ACEs (either by referrals or in housed programs).

#### Limitations

There are some limitations to this study. First, with these data, I cannot make any causal association between ACEs and IPV perpetration as an adult. However, I connected IPV empirical research and theory that have been associated with variables similar to the factors and accounts shared in the narratives of the men in this sample. Second, participants self-reported information about their personal lives to case workers, which may cause response bias. Third, case workers may have varied in the depth of their interview questions. However, all used the same interview form. Third, this study focused on early experiences of adversity. By default, descriptions were retrospectively and may not fully encompass all the realities of the past events. Nonetheless, the purpose of this study was to learn from those directly experiencing IPV. Thus, the way IPV male perpetrators made meaning of their reality is central to this study. There is also

lack of variability in the sample. All are men who reside in the same judicial district area in Iowa and most of the data are from White men who were convicted of domestic assault. Hence these data and findings may not generalize to other contexts. Finally, we know that men in heterosexual relationships are not the sole perpetrators of IPV. Similar methodologies undertaken here, with variation in gender and sexual orientation, would be useful to enhance our understanding of early experiences with adversity and its long-term outcomes.

### Conclusion

IPV is complex and multiple components need to be considered to address perpetration of violence at a fundamental level. We took a closer look at the early life histories of male perpetrators of IPV and found adverse childhood experiences to be crucial in understanding more about this group. The overlapping themes of ACEs contributed to explain contextual family factors that influence how IPV male perpetrators arrived at their current situation. The results of the study confirmed that several early experiences with adversity relate to IPV perpetrators as suggested by a life course perspective. This was revealed through emerging themes found in case worker interviews with incarcerated men that detailed men's family history of criminology, disrupted parental relationships, and youth misbehavior. All of these factors were linked to early life experiences with adversity. It was clear that family environments and dynamics played an important role in the lives of these IPV male perpetrators. This is particularly crucial because family systems are our first source of life experiences that can have long-lasting effects.

## REFERENCES

- Alexander, M. (2010). *The New Jim Crow: Mass Incarceration in the Age of Colorblindness*. New Press.
- Anda, R. (2010). Adverse Childhood Experiences: Connecting a Developmental Lens to the Health of Society. [www.iowaaces360.org/uploads/1/0/9/2/10925571/dr.\\_robert\\_anda\\_presentaon.pdf](http://www.iowaaces360.org/uploads/1/0/9/2/10925571/dr._robert_anda_presentaon.pdf).
- Anda, R., Felitti, F., Bremner, V., Walker, J., Whitfield, D., Perry, B., Dube, S.H., & Giles, W. (2006). The enduring effects of abuse and related adverse experiences in childhood. *European Archives of Psychiatry and Clinical Neuroscience*, 256(3), 174-186.
- Archer, J., & Eisenberg, & Nancy. (2000). Sex differences in aggression between heterosexual partners: A meta-analytic review. *Psychological Bulletin*, 126(5), 651-680.
- Babcock, J. C., Green, C. E., & Robie, C. (2004). Does batterers' treatment work? A meta-analytic review of domestic violence treatment. *Clinical Psychology Review*, 23(8), 1023-1053.
- Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T.,... Stevens, M.R. (2011). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. Retrieved from: [https://www.cdc.gov/violenceprevention/pdf/nisvs\\_report2010-a.pdf](https://www.cdc.gov/violenceprevention/pdf/nisvs_report2010-a.pdf)

- Bowles, M., DeHart, A., & Webb, D. (2012). Family influences on female offenders' substance use: The role of adverse childhood events among incarcerated women. *Journal of Family Violence, 27*(7), 681-686.
- Breiding, B., & Ryan. (2008). Chronic disease and health risk behaviors associated with intimate partner violence—18 U.S. States/Territories, 2005. *Annals of Epidemiology, 18*(7), 538-544.
- Caetano, R., Field, C. A., Ramisetty-Mikler, S., & McGrath, C. (2005). The 5-Year Course of Intimate Partner Violence among White, Black, and Hispanic Couples in the United States. *Journal of Interpersonal Violence, 20*(9), 1039-1057
- Caetano, R., Ramisetty-Mikler, S., & Harris, T. R. (2010). Neighborhood characteristics as predictors of male to female and female to male partner violence. *Journal of Interpersonal Violence, 25*(11), 1986-2009.
- Caetano, R., Vaeth, P., & Ramisetty-Mikler, S. (2008). Intimate partner violence victim and perpetrator characteristics among couples in the United States. *Journal of Family Violence, 23*(6), 507-518. <http://dx.doi.org/10.1007/s10896-008-9178-3>
- Capaldi, D., Clark, S.(1998). Prospective family predictors of aggression toward female partners for at-risk young men. *Developmental Psychology, 34*(6), 1175-1188.

Capaldi, D., Knoble, N., Shortt, J., & Kim, H. (2012). A systematic review of risk factors for intimate partner violence. *Partner Abuse, 3*(2), 231-280.

Caspi, A., Bem, D.J., Elder, G.H. (1987). Moving against the world: life-course patterns of explosive children. *Developmental Psychology, 23*(2), 308-13.

Carlson, B. (1984). Causes and maintenance of domestic violence: An ecological analysis. *Social Service Review, 58*(4), 569-587.

Center of Disease Control and Prevention. (2016). *Intimate partner violence surveillance* (pp. 1-7). Atlanta, Georgia: National Center for Injury Prevention and Control.

Center of Disease Control and Prevent. (2014). *Understanding intimate partner violence. Fact sheet*. Retrieved from <https://www.cdc.gov/violenceprevention/pdf/ipv-factsheet.pdf>

Child Trends. (2016). *Children's exposure to violence: Indicators on children and youth*.

Retrieved from

[http://www.childtrends.org/wp-content/uploads/2016/05/118\\_Exposure\\_to\\_Violence.pdf](http://www.childtrends.org/wp-content/uploads/2016/05/118_Exposure_to_Violence.pdf)

Cox, M. J., & Paley, B. (2003). Understanding families as systems. *Current Directions in Psychological Science, 12*(5), 193-196.

- Creswell, J. W. (2010). *Qualitative Inquiry and Research Design: Choosing among Five Approaches*. (3<sup>rd</sup> ed.). Thousand Oaks: SAGE Publications.
- Cunradi C.B., Caetano R., Schafer J. (2000). Socioeconomic predictors of intimate partner violence among White, Black, and Hispanic couples in the United States. *Journal of Family Violence*. 17(4):377–389.
- Cutrona, C. E., Wallace, G., & Wesner, K. A. (2006). Neighborhood characteristics and depression: An examination of stress processes. *Current Directions in Psychological Science*, 15(4), 188–192. <http://doi.org/10.1111/j.1467-8721.2006.00433.x>
- Dube, S., Felitti, V., Dong, M., Chapman, D., Giles, W., & Anda, R. (2003). Childhood abuse, neglect, and household dysfunction and the risk of illicit drug use: The adverse childhood experiences study. *Pediatrics*, 111(3), 564-572.
- Edwards, V. J., Holden, G. W., Felitti, V., & Anda, R. (2003). Relationship between multiple forms of childhood maltreatment and adult mental health in community respondents: Results from the adverse childhood experiences study. *American Journal of Psychiatry*, 160(8), 1453.
- Elder, Glen H., Jr. (1998). The life course as developmental theory. *Children Development*, 69(1), 1-12.

Eriksson, L., & Mazerolle, P. (2015). A cycle of violence? Examining family-of-origin violence, attitudes, and intimate partner violence perpetration. *Journal of Interpersonal Violence*, 30(6), 945-64.

Felitti, V., Anda, R., Nordenberg, D., Williamson, D.F., Spitz, A., Edwards, V., . . . Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The adverse childhood experiences (ACE) study. *American Journal of Preventive Medicine*, 14(4), 245-258.

Fernandes-Alcantara, A. L. (2014, February 25). *Family Violence Prevention and Services Act (FVPSA): Background and Funding*. [Congressional Research Service Report prepared for members and committees of congress]. Congressional Research Service, [www.crs.gov](http://www.crs.gov).

Gil-González, D., Vives-Cases, C., Ruiz, M., Carrasco-Portiño, M., & Álvarez-Dardet, C. (2008). Childhood experiences of violence in perpetrators as a risk factor of intimate partner violence: A systematic review. *Journal of Public Health*, 30(1), 14-22.

Gjelsvik, A., Dumont, D. M., Nunn, A., & Rosen, D. L. (2013). Adverse childhood events: Incarceration of household members and health-related quality of life in adulthood. *Journal of Health Care for the Poor and Underserved*, 25(3), 1169- 1182.

- Hsieh, H., & Shannon, S. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research, 15*(9), 1277-88.
- Lee, R., Walters, D., Hall, M., & Basile, L. (2013). Behavioral and attitudinal factors differentiating male intimate partner violence perpetrators with and without a history of childhood family violence. *Journal of Family Violence, 28*(1), 85-94.
- Lussier, P., Farrington, D. P., & Moffitt, T. E. (2009). Is the antisocial child father of the abusive man? A 40-year prospective longitudinal study on the developmental antecedents of intimate partner violence. *Criminology, 47*(3), 741.
- Max, W., Rice D.P., Finkelstein, E., Bardwell, R.A., & Leadbetter, S. (2004). The economic toll of intimate partner violence against women in the United States. *Violence Victims, 19*(3):259–72
- Mederos, F., & Perilla, J. (2005). Community connections: Men, gender and violence. Available at [www.melissainstitute.org](http://www.melissainstitute.org).
- Peralta, R., Tuttle, L., & Steele, J. (2010). At the intersection of interpersonal violence, masculinity, and alcohol use: The experiences of heterosexual male perpetrators of intimate partner violence. *Violence Against Women, 16*(4), 387-409.

- Perilla, J. L. (1999) Domestic Violence as a Human Rights Issue: The Case of Immigrant Latinos. *Hispanic Journal of Behavioral Sciences*. Vol 21. No.2. pp. 107-133
- Plichta, S. (2004). Intimate partner violence and physical health consequences: Policy and practice implications. *Journal of Interpersonal Violence*, 19(11), 1296-1323.  
<http://dx.doi.org/10.1177/0886260504269685>
- Reavis, J., Looman, J., Franco, K., & Rojas, B. (2013). Adverse childhood experiences and adult criminality: How long must we live before we possess our own lives? *The Permanente Journal*, 17(2), 44-48.
- Roberts, A.L., McLaughlin, K. A., Conron, K.J., & Koenen, K.C. (2011). Adulthood stressors, history of childhood adversity, and risk of perpetration of intimate partner violence. *American Journal of Preventive Medicine*, 40(2), 128-138.
- Rosa, E.M. & Tudge, J. (2013). Urie Bronfenbrenner's theory of human development: Its evolution from ecology to bioecology. *Journal of Family Theory Review*, 5, 243-258.  
Doi: 10.1111/fjtr.12022
- Rothman, E., Bernstein, J., & Strunin, L. (2010). Why might adverse childhood experiences lead to underage drinking among US youth? Findings from an emergency department-based qualitative pilot study. *Substance Use & Misuse*, 45(13), 2281-90.

Schmidt, M., Kolodinsky, J., Carsten, G., Schmidt, F., Larson, M., & MacLachlan, C. (2007).

Short term change in attitude and motivating factors to change abusive behavior of male batterers after participating in a group intervention program based on the pro-feminist and cognitive-behavioral approach. *Journal of Family Violence*, 22(2), 91-100.

Shorey, R. C., Brasfield, H., Febres, J., & Stuart, G. L. (2011). The Association between

Impulsivity, Trait Anger, and the Perpetration of Intimate Partner and General Violence among Women Arrested for Domestic Violence. *Journal of Interpersonal Violence*, 26(13), 2681-2697.

Shonkoff, J. P., Siegel, B. S., Garner, A. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... David,

L. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, 129(1), E232.

Shorey, R., Febres, J., Brasfield, H., & Stuart, G. (2012). The Prevalence of Mental Health

Problems in Men Arrested for Domestic Violence. *Journal of Family Violence*, 27(8), 741-748. doi:10.1007/s10896-012-9463-z

Singh, V., Tolman, R., Walton, M., Chermack, S., & Cunningham, R. (2014). Characteristics of

men who perpetrate intimate partner violence. *Journal of the American Board of Family Medicine*, 27(5), 661-8.

- Straus, M. A. (2004). Prevalence of violence against dating partners by male and female university students worldwide. *Violence Against Women*, 10(7), 790-811.
- Substance Abuse and Mental Health Services Administration. (2016). *Adverse Childhood Experiences*. Retrieved from <http://www.samhsa.gov/capt/practicing-effective-prevention/prevention-behavioral-health/adverse-childhood-experiences>
- Sweeten, G., Piquero, A. R., & Steinberg, L. (2013). Age and the Explanation of Crime, Revisited. *Journal of Youth and Adolescence*, 42(6), 921-938.
- Tracy, S. J. (2010). Qualitative quality: Eight “big-tent” criteria for excellent qualitative research. *Qualitative inquiry*, 16(10), 837-851
- U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2016). *Child maltreatment 2014*. Retrieved from <http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/child-maltreatment>
- Van Wyk, J. A., Benson, M.L., Fox, G.L., & Demaris, A. (2003). Detangling individual-, partner-, and community-level correlates of partner violence. *Crime & Delinquency*, 49.3 (2003): 412-438.

Watt, M., & Scrandis, D. (2013). Traumatic childhood exposures in the lives of male perpetrators of female intimate partner violence. *Journal of Interpersonal Violence, 28*(14), 2813-30.

Whitfield, C. L., Anda, R., Dube, S., & Felitti, V. J. (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), 166-187

Worley, K., Walsh, S., & Lewis, K. (2004). An examination of parenting experiences in male perpetrators of domestic violence: A qualitative study. *Psychology and Psychotherapy-Theory Research and Practice, 77*, 35-54.

Xue, Y., Leventhal, T., Brooks-Gunn, J., & Earls, F. (2005). Neighborhood residence and mental health problems of 5- to 11-year-olds. *Archives of General Psychiatry, 62*(5), 554.  
<http://dx.doi.org/10.1001/archpsyc.62.5.554>

Zhang, Y., & Wildemuth, B.M. (2009). Qualitative analysis of content. In A. Editor, B. Wildemuth (Ed.). *Applications of Social Research Methods to Questions in Information and Library*. Portland: Book News.

## APPENDIX A: IRB EXEMPTION

**IOWA STATE UNIVERSITY**  
OF SCIENCE AND TECHNOLOGY

Institutional Review Board  
Office for Responsible Research  
Vice President for Research  
2420 Lincoln Way, Suite 202  
Ames, Iowa 50014  
515 294-4566

**Date:** 8/25/2016  
**To:** Maria Alcivar  
0034 MacKay  
**CC:** Dr. Amie Zarling  
1358 Palmer Building  
**From:** Office for Responsible Research  
**Title:** Identifying Risk Factors for violence in court mandated Domestic Violence offenders  
**IRB ID:** 16-119  
**Study Review Date:** 8/25/2016

The project referenced above has been declared exempt from the requirements of the human subject protections regulations as described in 45 CFR 46.101(b) because it meets the following federal requirements for exemption:

- (4) Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified directly or through identifiers linked to the subjects.

The determination of exemption means that:

- **You do not need to submit an application for annual continuing review.**
- **You must carry out the research as described in the IRB application.** Review by IRB staff is required prior to implementing modifications that may change the exempt status of the research. In general, review is required for any modifications to the research procedures (e.g., method of data collection, nature or scope of information to be collected, changes in confidentiality measures, etc.), modifications that result in the inclusion of participants from vulnerable populations, and/or any change that may increase the risk or discomfort to participants. Changes to key personnel must also be approved. The purpose of review is to determine if the project still meets the federal criteria for exemption.

Non-exempt research is subject to many regulatory requirements that must be addressed prior to implementation of the study. Conducting non-exempt research without IRB review and approval may constitute non-compliance with federal regulations and/or academic misconduct according to ISU policy.

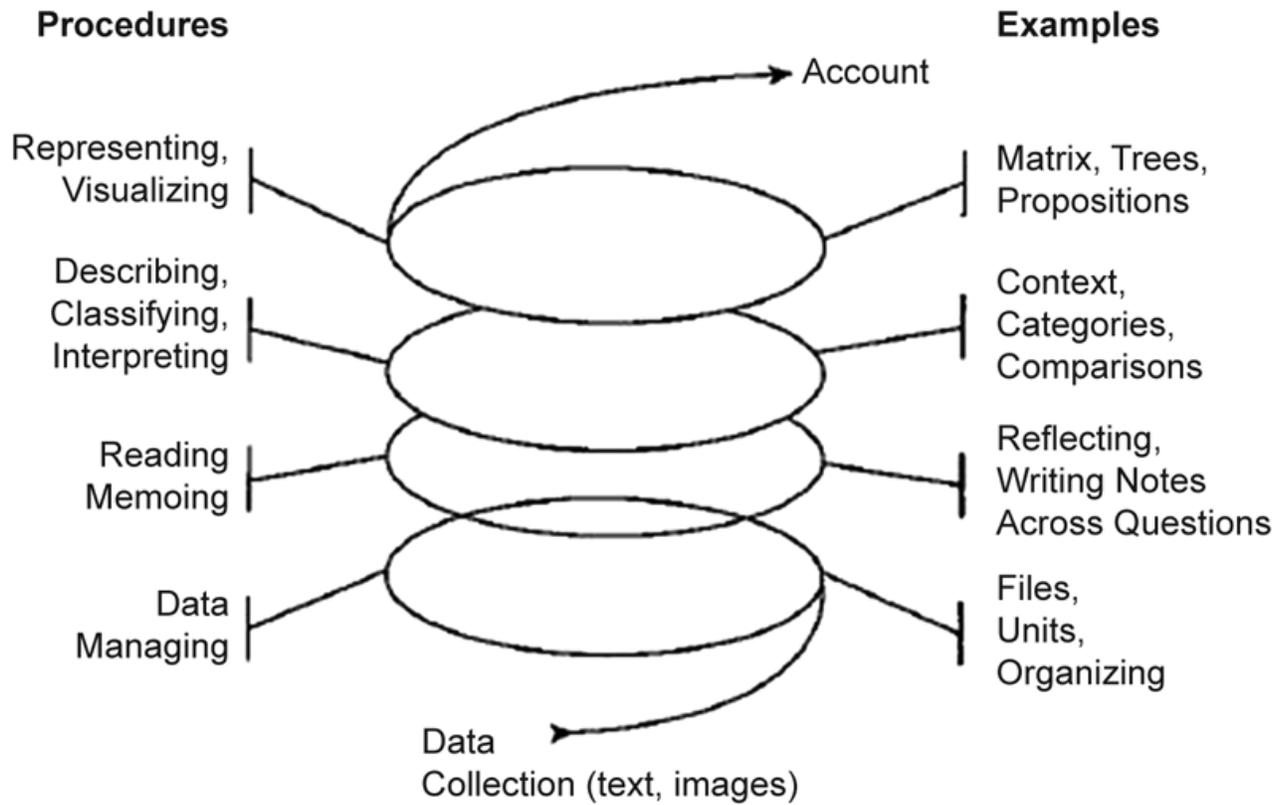
**Detailed information about requirements for submission of modifications can be found on the Exempt Study Modification Form.** A Personnel Change Form may be submitted when the only modification involves changes in study staff. If it is determined that exemption is no longer warranted, then an Application for Approval of Research Involving Humans Form will need to be submitted and approved before proceeding with data collection.

Please note that you must submit all research involving human participants for review. **Only the IRB or designees may make the determination of exemption**, even if you conduct a study in the future that is exactly like this study.

Please be aware that **approval from other entities may also be needed.** For example, access to data from private records (e.g. student, medical, or employment records, etc.) that are protected by FERPA, HIPAA, or other confidentiality policies requires permission from the holders of those records. Similarly, for research conducted in institutions other than ISU (e.g., schools, other colleges or universities, medical facilities, companies, etc.), investigators must obtain permission from the institution(s) as required by their policies. **An IRB determination of exemption in no way implies or guarantees that permission from these other entities will be granted.**

## APPENDIX B: DATA ANALYSIS SPIRAL

Figure B1.



**Source:** Creswell (2007)

*Note.* From "Qualitative inquiry & research design: Choosing among five approaches" by John W. Creswell. (2nd ed.). Thousand Oaks: Sage Publications.

47  
 APPENDIX C: CODING OUTLINE  
 Table C1.

*Coding Outline*

Theme	Description	Examples	Coding Guidelines
1. Family history of criminality	Family, equivalent to nuclear or extended family (e.g., cousins), involvement with any type of  - substance use, misuse, or abuse - inter-family violence - family member incarceration	“Maurice relayed his mother has a criminal record and substance abuse issues although is unsure of any mental health issues”  “Joes father has a criminal history, including domestic abuse”  “Reported criminal history within his family”  “he does come from a criminal family”	-Violence present in the family, except for child abuse inflicted on participant; if so see Theme #3 -Participant’s use of substances is coded under theme #3  -If any or all aspects of the definition are present or if an overall general description or statement is reported about growing up with family history of criminality or crime (see example section)
2. Disrupted relationship with parents	Biological parent(s), step-parent(s), guardian(s), parental-figure(s) are included in the meaning of this theme. Disrupted relationship with one of the above mean  -abandonment or neglect - death -child abuse (verbal, emotional or physical) -foster home	“Rob reports he’s never had much of a relationship with his biological father who is also incarcerated”  “he has no contact with his father and has never had a close relationship with his stepfather”  “Simon states both parents abandoned him when he was young and he spent most of his childhood as a ward of the state”  “it was bad while growing up as his	-If any or all aspects of the definition are present in addition to broad statements about having no contact with parent (see example section). -In terms of coding child abuse, it will be specifically in relation to the parent-son dyad.

		mother wasn't around and if she was she was verbally abusive"	
3. Youth misbehavior	<p>Any type of maladaptive conduct as a 21-year-old or younger which includes,</p> <ul style="list-style-type: none"> <li>-juvenile delinquency or criminal history</li> <li>-substance use, misuse, or abuse</li> <li>-school misbehavior</li> <li>-school dropout or expulsion</li> <li>-fights</li> <li>-self-inflicted harm</li> </ul>	<p>"his drug history peeked at age 20"</p> <p>"Stated his highest level of education he received is the 8<sup>th</sup> grade and stated he dropped out then"</p> <p>"arrested under the age of sixteen for fighting, theft, and drugs"</p> <p>"Joel states being arrested under the age of sixteen for theft"</p> <p>"Admits being suspended for 3 days for fighting"</p>	<p>If the reports broadcast maladaptive or misbehavior issues as child or during their youth stage (middle childhood and adolescence)</p>

## APPENDIX D: CHARACTERISTICS OF SAMPLE

Table D1.

*Characteristics of Study Sample (N= 112)*

Self-Reported Characteristics	n	%
Race/Ethnicity		
White-Caucasian	70	62
African American	23	20
Latinx/Hispanic	16	14
AAPI <sup>a</sup>	4	1
Age		
≤ 35	50	44
> 35	63	56
Education		
Some/Finish High School	30	26
GED	21	19
College	8	7
Other <sup>b</sup>	11	10
Missing	43	38
Relationship Status		
Married	38	33
Non-married	72	65
Missing	3	2
Self-reported Substance Use/Abuse		
Drugs	6	5
Alcohol	19	17
Both	50	45
Treatment	28	25
None	6	5
Missing	4	3

*Note.* <sup>a</sup> Asian-American Pacific Islander. <sup>b</sup> No education or having “some” education mentioned but not clear to what level

## APPENDIX E: FREQUENCY TABLES

Table E1.

*Frequency of Major Themes Related to ACE*

Characteristics <sup>1</sup> Accounts <sup>3</sup>	N <sup>2</sup>	% Total (N=112)	% Early Life (N=44)
<b>Early Family History of Criminality</b>			
Parental Substance Abuse	9	8.0	20.5
Domestic Violence	7	6.2	15.9
Parental Incarceration	6	5.4	13.6
Subtotal	22		
<b>Early Disrupted Relationships with Parents</b>			
Abuse	5	4.5	11.4
Abandoned/Neglect	6	5.4	13.6
Parental Death/Murder	5	4.5	11.3
Foster Home	1	0.9	2.3
Subtotal	17		
Positive Early Family Experiences	5	4.5	11.4
Events not Specific to Early Family Life	68	60.7	--
Total	112	100	100

*Notes.* <sup>1</sup> Characteristics are the types of Adverse Childhood Experiences (ACE) categorized into two themes. <sup>2</sup> N= population size. % Total = percentage of characteristics listed in the population size. <sup>3</sup> % Early Life Accounts = percentage of characteristic listed by only those reporting on early life experiences.

Table E2.

*Frequency of Youth Misbehavior*

Number of accounts of youth misbehaviors	N	% Total	% of Early Life Accounts
0	25	22.3	28.4
1	30	26.8	34.1
2	25	22.3	28.4
3	7	6.2	8.0
4	1	0.9	1.1
Not Reported	24	21.4	--
Total	112	100	100

*Note.* % Total = percentage of misbehaviors in the population size. <sup>3</sup> % Early Life Accounts = percentage of misbehaviors by only those reporting misbehaviors.