

## **Emotive responses and female-perpetrated Intimate Partner Violence (IPV)**

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### **ABSTRACT**

This qualitative analysis examines the emotions of eight women who perform physical aggression in violent intimate relationships. The study applies a sociological theory of emotions to assess their attitudes and motivations for IPV perpetration. A micro-level (e.g. individual emotive responses) and macro-level (e.g. exposure to violent cultures) analysis are included in the theoretical framework. The study includes a review of literature on motivations for women's aggression including emotive factors, empirical classification, and research methods applied. The reported emotive responses reflect participants' perspectives of their past and present experiences of violence. Using interview data, this study describes participants' emotion-driven motivations for IPV perpetration alongside multiple socio-cultural contexts. The explored contexts of external motivations include child abuse, cultures of violence, and the availability of social support. These external motivations provide a deeper understanding of how full ranges of emotional dynamics in relationships shape women's violent experiences and outcomes for treatment. To conclude, intervention strategies are recommended to enhance the design of programs addressing women's IPV perpetration.

Keywords: female-perpetrated intimate partner violence, emotive responses, sociology of emotion, child abuse, cultures of violence, social support, motivations, intervention

## **EMOTIVE RESPONSES AND FEMALE-PERPETRATED INTIMATE PARTNER VIOLENCE (IPV)**

In recent years, an increasing number of studies explaining why women use intimate partner violence (IPV) have appeared in the literature (Williams, Ghandour, & Kub 2008, Swan, Gambone, Fields, Sullivan, & Snow 2005). Initially, studies measured frequency of female-perpetrated IPV over a specified time, later reporting that women used as much or more physical IPV as men (Archer 2000). Mandatory arrest policies and corresponding increases in women's arrests for domestic violence offenses have expanded in-depth conversations about why women use IPV (Stuart et al. 2006a, Kernsmith 2005). Currently, IPV research is challenged by inconsistent findings about the similarities between men and women's motivations for IPV perpetration.

Women's motivations for IPV have been commonly assessed as masculine phenomena in the course of relationship conflict or patterns of domination and control (Johnson 2006, McNeely & Robinson-Simpson 1987). For example, Michael Johnson's typology claims to offer a gender neutral analysis of aggression and control. In contrast, other IPV researchers report that women are more likely than men to have multiple concurrent motivations when they perpetrate IPV. They argue that women's motivations entail long developmental histories that often precede the violent adult relationship (Bair-Merritt, Blackstone, & Feudtner 2006). Although research has made significant progress correlating external influences of IPV and women's mental health outcomes, few studies associate individual sentiment, long-term socio-cultural factors, and women's motivations to use IPV. This study applies the sociological theory of emotions to explore women's sentiment during IPV and their long-term exposure to violence using the sociological theory of emotion.

### **SOCIOLOGY OF EMOTION THEORY**

Emotions are positive or negative coordinated sets of discrete and consistent responses to internal and external events. Emotions are shaped by physiology, perceptions, language, and social experiences. As described in this study, more complex emotive responses can arise from cultural conditioning (Fox 2008). The study of emotion provides a unique framework for evaluating rational thought processes. A number of other disciplines such as neurology, psychology, anthropology, and political science also examine multidimensional constructs of emotion. Studies examine emotions in relation to physiological-experimental (e.g. heart rate), cognitive (e.g. interpretations), attitudinal (e.g. values), and regulatory (e.g. coping mechanism) constructs (Brody 1985, p.104). Sociologists study behavioral displays of emotions as an essential component of social interaction. Savani, Morris, Naidu, Kumar, and Berlia (2011) argue that patterns of social interaction reflect cultural orientations and other subjective cognitive structures.

Sociology of emotion is an interactionist perspective that examines expressions of emotions in informal and formal contexts, which shape how emotions are communicated, formed, experienced, and interpreted. Feelings are the subjective representations of the emotional state once it has occurred in a particular context. The cause of feelings and portrayal of emotions cannot be separated from the world of relationships and social interaction (Bandes 2009, p. 5). Sociology of emotion theory acknowledges that individuals are conditioned differently

depending upon the various structural contexts and based upon the relative normative behavioral expectations, otherwise known as feeling rules.

Feeling rules guide how we manage our emotions. These rules are conditioned and managed by situational conditions. They can also be negotiated privately with another individual or established publicly via specific social expectations (Hochschild 1983, p.119). Feeling rules also differ by social class and sex. Feeling rules induce specific expectations that influence how individuals handle disagreements or conflict. Thus, the cultural context of feeling rules impacts how individuals react or respond to others as emotions are expressed. Various contexts may also influence how an individual controls or reacts to their own behavior. In this study, the relationship between individual personalities and the institutional context (broader socio-cultural context of violence) links emotions (motivations) and social interaction (IPV perpetration).

Sociology of emotion theory extends prior work by Durkheim<sup>1</sup> (social integration), Blumer<sup>2</sup> (symbolic interactionism), Goffman<sup>3</sup> (impression management), Mead<sup>4</sup> (behaviorism), and Collins<sup>5</sup> (interactional markets). However, Hochschild<sup>6</sup> is the founder of sociology of emotion theory. She examined outward signs of emotive responses, social structural contexts, and the inner emotional self. Hochschild's outlook on emotive behavior has offered practical insight on situational norms and their influence on emotion management. Hochschild's work considers how ongoing socialization and interaction modify, shape, and manage definitions of emotions. Thus, social influences are likely to permeate an individual's choices to respond emotionally in specific contexts. Shifting from Hochschild's organizational analysis, current analysis examines socio-cultural emotive trends as motivations for IPV perpetration during intimate adult relationships.

## **SOCIOLOGICAL THEORY OF EMOTIONS AND IPV**

A large body of contemporary sociological research has developed key associations between IPV and women's emotive responses. The present study explores a full range of emotions expressed among a population of women who performed IPV (Bandes 2009). Sociology of emotion theory explains three measures of participants' feelings. First, they may consider what they want to feel, which may prompt motivation. Second, the participant may evaluate what they should feel, which is prompted by feeling rules.<sup>7</sup> Third, they are also likely to

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<sup>1</sup> Durkheim links social integration and suicide offering a relationship between structure and internal personality traits (Durkheim 1897/1963).

<sup>2</sup> Through free will and interaction, individuals negotiate and interpret meaning (Blumer 1980).

<sup>3</sup> An individual's capacity to act on feeling is based on the occasion. The actor passively conforms to social patterns of appropriate conduct, coherent, embellished, and well-articulated (Goffman 1959, p. 75).

<sup>4</sup> For Mead, mental experience is actualized during socialization in a symbolic environment, which behavior and inner experiences are traced back to biosocial causes (Baldwin 1985, p. 265)

<sup>5</sup> Micro-situations are subject to interactional markets that motivate and set the rational trajectory of an individual's behavior. Emotional, symbolic, and value-oriented behavior is determined by a social mechanism (Collins 1993).

<sup>6</sup> When emotion work is managed by the employer expectations, employees are estranged from their own feelings. Emotion work can be cognitive (e.g. thought processes), bodily (e.g. physical symptoms) and expressive (e.g. gestures and inner feelings) (Hochschild 1979).

<sup>7</sup> Feeling rules are socially shared ideologies of a specific society and the roles assigned to a particular group that guide how an individual is expected to feel or not feel in a given situation. These rules are engendered by personal interpretations of broad social values or structural expectations across culture, social class, and gender. These rules influence personality (Hochschild 1979).

consider what they should try to feel, which encompasses emotion work.<sup>8</sup> For instance, in this study, the participants connect their expressed emotions during IPV with how they interacted in a similar past experience. Some assessed what they wanted to feel or considered how they should have tried to feel about the violence in their relationships. The sociology of emotion framework describes how these women either acted violently to fulfill past emotive requirements, or responded violently when their partners failed to meet their expectations via some specific type of emotional exchange.

The sociology of emotion method considers that emotive expression is subject to culturally specific rules, norms, and gendered stereotypes (Dave, Pekkala, Allen, & Cummins 2006). The specific norms expressed during conversations with each study participant provide scripts for the corresponding “feeling rules”. Narratives of women’s experiences also explain how past social factors induced their feelings about physical aggression during their adult relationship. The reported emotions are therefore triggered by feeling rules that are formed during a previously significant cultural experience (Collins 1975, p. 59). Some female-perpetrators also used these feeling rules to construct “self”. As proposed in Hochschild (1977), the rules and relative expectations situated in socio-structural contexts may influence or predict reactions, produce guidelines that suppress their emotions, or stimulate criteria to revoke their inner feelings about the stimulus.

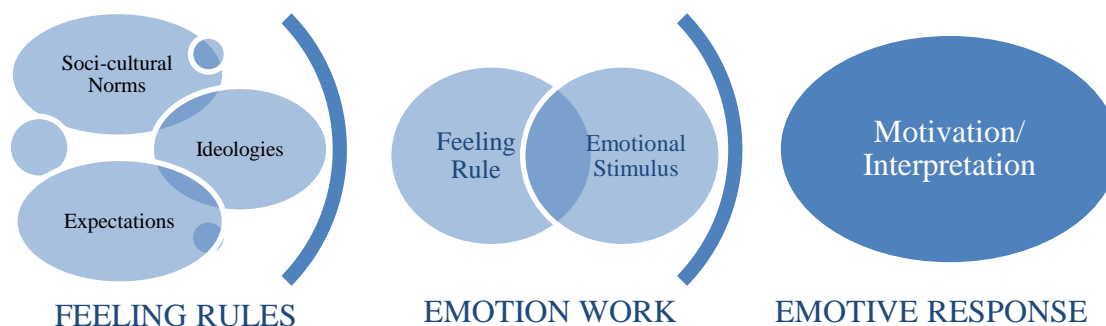


Figure 1.0: Emotion Work

<sup>8</sup> Emotion work occurs when individuals make a conscious effort to manage or change the degree, quality, or appropriateness of their emotions to accommodate specific structural expectations (Hochschild 1979). Cognitive, bodily, and expressive emotion work are three techniques of evocation or suppression of emotion (Stets & Turner 2007, p.125).

This figure illustrates the emergence of emotion work, from acknowledgement of feeling rules and emotive stimulus integration, to interpretation and emotive responses during IPV.

Sociology of emotion is a behavioral model that predicts a reciprocal relationship between micro interaction levels (e.g. individual emotive responses) and macro-level socio-structural conditions (e.g. exposure to violent cultures). More specifically, the micro-level method centers women's' emotion-driven experiences. By exploring how female-perpetrators "show" emotions, the micro-level method explains how participants assign meaning to violent situations. The theoretical model also offers a lens to assess and manage each participant's interpretation of self, which is an issue that is in the design of individual-focused intervention strategies that are presented alongside the analysis of emotions.

This study investigates violent gestures and current events surrounding micro-level interpretations of IPV but it also associates a macro-level interpretation of historical prevailing factors that explain how women in abusive relationships display their emotions. The macro-level dimension associates women's aggressive sentiments and their relative previous cultural experiences. This open-ended social inquiry provides the missing link between a participant's personal troubles and broader public aspects of IPV (Bendelow & Williams 2002, p. xiii). Hochschild's model focuses on "exo-system social structures" such as workplace (Hochschild 1998, p. 6). In contrast, the current sociology of emotion model centers social contexts that shape women's motivations to use aggression. The analysis also embraces reasons why participants express emotions, define their aggression, and approach or correspond with their feelings (p. 5). In tandem with other studies, violent behavior is linked with histories of childhood victimization, victimization, and levels of social support (Dowd, Leisring, & Rosenbaum 2005). Participant's portrayal of emotive behavior emerges from both past expectations and new social influences. As predicted, several emotive responses reported shadowed emotional stimuli introduced early on (Hochschild 1979, p. 552).

Although participant perspectives were directly associated with the theoretical framework, there are limitations in the sociology of emotions model. First, micro and macro-level interpretations do not exist in a vacuum. There are risks involved when importing women's experiences into any one structured social context. Attitudes about criminalization, victimization, community, and family can be influenced by practical or symbolic experiences other than a specific socio-structural event. Second, feeling rules vary across cultures, class, status, and gender, and they have a direct impact on how women interact with others (Hochschild 1977, p.7). In particular, aggression has been in part branded as a racialized and masculine expression. As indicated in Hamlett (2011), expression of negative emotions are strongly discouraged or repressed among White adolescent females. Yet, when examined across racial and ethnic groups, findings show that African American girls are more likely to be encouraged by their parents to be aggressive, firm, and emotionally resilient (Blake, Lease, Olejnik, & Turner 2010).

Third, the analysis may not be gender neutral. It is common of IPV studies to construe emotional and physical violence as a masculine phenomenon or as violent controlling aggression. For example, Taylor and Novaco (2005) offer a male-gendered analysis of anger reporting that it is a masculine expression, which labels the emotion. They also offer feeling rules for public space, noting that men show more situational anger outside of the home. Other IPV studies predict gender differences in cognition, temperament, and social behavior (Costa, Terracciano, & McCrae 2001). Nonetheless, the goal of this study is to explore how these social conditions reflect and shape only women's emotional commitments.

## MOTIVATIONS FOR FEMALE-PERPETRATED IPV

Motives are underlying psychological processes that drive thinking, feeling, and behavior (Fiske 2004). The motive is the goal or desire of action that relates closely to an individual's acceptance of conditions. Motives spawn incitement or incentives that stimulate emotions or imagination. Motivations explain how sentiment influences conduct. In particular, motivations for IPV provide a deeper understanding of how individuals evaluate and define violent experiences. Emotive responses are often modeled through learned behavior from other individuals, experiences, and institutions. Motives entail emotive responses that spawn from direct action during IPV, and from the psychological processes that impel violent behavior (Caldwell, Swan, Allen, Sullivan, & Snow 2009).

This study explores the expression of strongly felt negative emotions to explain use of aggression during IPV. Other studies have investigated emotive expressions during IPV that include but are not limited to powerlessness, self-defense, needing attention, jealousy, retaliation, anger, coercive control, and tough guise. Although they are mentioned, current IPV studies focus less on other feelings such as humiliation, envy, shame, guilt, and disappointment. Researchers have argued that too often, emotive responses are grouped with other emotions, emotions are a challenge to measure, or they have unique contributions that are difficult to untangle (Archer & Graham-Kevan 2003). For example, one study may associate women's desire for attention with feelings of powerlessness but another may classify desire for attention as anger (Thomas 2005). Furthermore, women performing more severe perpetration are more likely to report multiple emotive responses (Weston, Marshall, & Coker 2007).

Among the emotive factors assessed in research, anger is a compounded analytical concept that some theories apply to explain women's IPV; nearly 40% of women who are arrested for IPV report anger or uncontrollable anger as the motivation to hit their partners (Stuart et al. 2006b, Babcock, Miller, & Siard 2003). In a more in-depth analysis of women's emotive responses, high frequencies of jealousy and tough guise<sup>9</sup> were admitted by women who hit their partners (Caldwell et al. 2009). Coercive control over the partner has also been cited but more so, to explain IPV among women who feel both low fear and high anger (Hamberger & Guse 2005). Studies also confirm that a partner's unfavorable conduct may prompt women's impulsive and controlling conduct. Even with the use of control, some women are unlikely to demonstrate authority successfully but use control to gain autonomy (Howard-Bostic 2011). Nonetheless, retaliation using self-protection and resistance is most cited as a primary motivation since women's IPV is typically acted in response to perceived threats or in defense of an attack (Seamans, Rubin, & Stabb 2007, Swan & Snow 2006). Stuart et al. (2006b) argue that women retaliate against their partners to avert injury or to avoid internalizing images of themselves as victims.

Emotive motivations of female-perpetrated IPV help to interpret how women rationalize their violent behavior but emotions can also expose women's experiences of victimization. Thus, most studies use either proactive or reactive empirical classifications to explain women's motives for IPV. Motives such as anger, retaliation, and control are proactive since they are often initiated with a goal to threaten or dominate someone else (Dodge & Coie 1987). On the other hand, a reactive models show two patterns of behavior, defending oneself and goal-oriented

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<sup>9</sup> Tough guise is a socially constructed emotion-free act of masculinity that involves normative physical and attitudinal expectations for power, control, and violence (Katz 1999).

violence. Reactive and proactive classifications offer a general reason why women hit but may not fully explain their motives for IPV.

A variety of methods are used to measure women's motivations for IPV. For example, Miller and Meloy (2006) use criminal records to examine aggression types as the specific motivations for IPV. The categories include generally violent (reactive), defensive behavior (resistance), and frustration responses (last resort). Others have used open coding (Downs, Rindels, & Atkinson 2007), analyses of categories drawn from interview text (Olson & Lloyd 2005), thematic interpretations from content analyses (Seamans et al. 2007), and detailed questionnaires to measure women's motivations for IPV (Archer & Graham-Kevan 2003). In addition, O'Leary and Slep (2006) use a modified Conflict Tactics Scale, which incorporates closed and open-ended questions about motivations.

Rather than using a conflict scale, Howard-Bostic (2011) explains variations of women's motivations using Michael Johnson's control typologies of situational couple violence (relationship conflict), intimate terrorism (coercive control), violent resistance (self-defense), and mutual violent combat (mutual control) (Johnson 2008). More recently, contemporary IPV studies recognize that women's emotion-driven motivations do not fit into one analytical box. Instead, emotions vary depending on an intersection of immediate and broader contexts of IPV (Howard-Bostic 2011).

## WOMEN'S EMOTIVE RESPONSES AND IPV

This analysis of socio-cultural contexts of IPV displays emotive responses of *eight* women who perpetrate IPV after experiencing variations of child abuse, cultural violence, or formal social support. The author introduces pseudonyms to make women's recounted experiences confidential but "visible" in the literature. Aaliyah Kanter, Brittany Jones, Veronica Holmes, Debra Smith, Susie Jordan, Saridy Wilkins, Sasha Davis, and Sarah Jenkins are the study participants (see *Table 1*. Participant Characteristics). This model also considers women's concurrent perpetration of multiple types of IPV (self-defense, situational, mutual, or coercive IPV) throughout the duration of one intimate relationship.

PARTICIPANTS	AGE	RACE/ ETHNICITY	STATE	COUPLE STATUS	IPV TYPES
Brittany Jones	23	African-American	MD	Dating and non-cohabiting	Self-defense
Susie Jordan	47	African-American	VA	Married	Self-defense, Situational
Aaliyah Kanter	26	Caucasian	WV	Dating and co-habiting	Self-defense, Mutual
Sarah Jenkins	31	African-American	VA	Dating and co-habiting	Situational
Veronica Holmes	41	Caucasian	WV	Dating and co-habiting	Situational
Debra Smith	52	African-American	MS	Married	Situational, Mutual
Sasha Davis	24	Mixed-Race	WV	Married	Mutual, Coercive
Saridy Wilkins	32	Americo-	MD	Dating and co-habiting	Coercive

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*Table 1.* Participant Characteristics. This table illustrates participants' demographic data, relationship status, and IPV types perpetrated.

Although the sample size is relatively small, the goal of the study is to offer an in-depth, women-centered analysis of distinct variations of IPV perpetration. The case examples in the analysis are derived from focused interviews to demonstrate rich interpretations of how external motivations and contextualized feeling rules intersect to condition how women perceive their violent experiences<sup>10</sup> (Koss et al. 1994). To capture the emotive responses during interviews, each participant shared answers to the following questions:

1. What was the relationship like when you first became involved with X?
2. What was the relationship like before the first instance of violence in your relationship?
3. When did the violence first occur?
4. What happened right before the first instance of violence?
5. Can you describe what X did?
6. Will you please describe what you did?
7. What made you decide to hit X?
8. Were you or your partner hurt?
9. What happened afterwards?
10. What was the relationship like after this event?
11. Were there other times when your relationship turned violent?
12. Will you please describe another instance?
13. What was the most recent incidence like?
14. Have you requested or received support?
15. Do your feelings about IPV remind you of any past circumstances?

Using responses to the questions above, this analysis explores the following situational, cultural, and historical contexts of female-perpetrated IPV that are interrelated or occur simultaneously: (1) *six* participants (Susie, Aaliyah, Veronica, Debra, Brittany, and Susie) were abused during their childhood, (2) *one* (Saridy) experienced community violence, (3) *three* (Saridy, Debra, and Susan) were exposed to gendered cultures of violence, (4) *seven* (Susie, Sarah, Brittany, Sasha, Veronica, Susie, and Sarah) sought after social support, and (5) *two* (Susie and Sarah) contacted local authorities for help. Table 2 associates participants' unique experiences of IPV perpetration, victimization, the broader context, and participants' emotive responses during IPV (see *Table 2. IPV Perpetration and Emotive Responses*).

PARTICIPANT	IPV TYPE	PERPETRATION	VICTIMIZATION	BROADER CONTEXT	EMOTIONS
Brittany Jones	self-defense	scratch, kick	slap, punch, kick, verbal abuse	child abuse, counseling	afraid, ashamed

<sup>10</sup> Participant pseudonyms are organized on table 1 by the types (self-defense, situational, mutual, or coercive IPV types) and severity of IPV perpetrated. Thus, Brittany's reactive self-defense is listed as the first experience of IPV. The most severe experience performed by Saridy, which is proactive emotional, psychological, and physically aggressive IPV, is listed at the end of the table.



					cooperative, depressed, embarrassed, guilty, helpless passive, uncomfortable
Susie Jordan	self-defense, situational	hit with weapon	punch, throw objects	child abuse, violent culture, counseling,	anxious, confident, frustrated, independent, insecure, intimidated, irritated, jealous threatened, secure
Aaliyah Kanter	self-defense, mutual	verbal abuse, push, punch, choke, restrain	verbal abuse, push, kick, punch, suffocate, deny food	child abuse, family support	anxious, distressed, frustrated, intimidated
Sarah Jenkins	situational	punch, throw objects	punch, throw objects	counseling services	stressed, frustrated, dissatisfied
Veronica Holmes	situational	punch, gunshot	verbal abuse, push, shove, kick, throw objects	child abuse, counseling	abandoned, afraid, depressed, ashamed, frustrated, guilty, hopeless
Debra Smith	situational, mutual	punch, throw objects	punch, throw objects, verbal abuse	child abuse, violent culture, family support	anxious, disappointed, frustrated, guilty, humiliated
Sasha Davis	mutual, coercive	verbal abuse, slap, punch, stab, kick, throw objects, break objects	punch, restrain, break objects	counseling, family support	disgusted, hostile, humiliated, responsible, unproductive
Saridy Wilkins	coercive	slap, hit with objects, verbal abuse	slap	community violence, violent culture	alienated, angry, callous disrespected, frustrated, begudging

*Table 2.* IPV and Emotive Responses. This table illustrates participants' full experiences of IPV and emotions alongside their previous exposure(s) to violence.

## ANALYSIS

Beliefs, attitudes, and personalities are shaped by learned experiences within the context of wider social relations and culture. A cycle begins when newly displayed behavior aligns with a cultural meaning. Then, developmental change occurs as an individual processes structured contextual feeling rules. Human participation in activities that require cognitive and

communicative functions may condition individuals to use functions in ways that nurture them (Vygotsky 1986, p. 6). Ultimately, socio-cultural contexts can shape and influence how individuals feel and respond to forthcoming situations.

IPV is a multi-dimensional phenomenon that is influenced by the immediate context and broader context of social relations. The immediate context constructs meaning of how aggression is negotiated during individual-level interaction. It deals with specific words, images, people, and ideas that arise at the moment of, leading to, or immediately following IPV. The broader socio-cultural context highlights key factors that reflect the perpetrator's culture, history, and development of aggression. Knowledge of the socio-cultural context of IPV enhances the evaluation of women's vulnerability to abuse, use of aggression, and feelings about seeking or receiving help (Lindhorst and Tajima 2008). The meaning of IPV exists in the representations built by those who experience IPV.

Each participant shared detailed perceptions of their feelings during physically violent aggression or when they were victimized. They also described alleged conflict, disputes, and the emotive relationship dynamics that encouraged their IPV perpetration. However, as participants described their overall feelings about violence, additional causes of IPV began to materialize. Although emotive responses and motivations varied from one participant to the next, each participant's experiences *reflected past conditions* in some way. During the interviews, some participants connected IPV with past emotive responses for the first time while others clearly identified rules and expectations from their pasts that they believed were determinants of their performance of IPV. This analysis highlights both women's previous victimization and their feelings about social support during and after their experiences of IPV. The eight examples experiences demonstrate how family, community, and cultural interpretations of violence can influence women's IPV perpetration. It's been proven that all women are not interested in social support but this study acknowledges that availability of appropriate social networks and intervention strategies are a significant factor in decreasing future violent incidents.

## DISCUSSION

The sociological analysis of emotions explains how feeling rules in structured socio-cultural contexts condition participants' emotive responses and triggering their feelings about carrying out violent behavior. Table 3 illustrates 35 feelings that have influenced women's IPV perpetration<sup>11</sup>. It also shows 24 feeling rules in the socio-cultural contexts of child abuse/family violence, community violence, gendered violence, and professional social support, which are associated with participants' reported feelings during IPV (see *Table 3. Socio-cultural Contexts of IPV and Emotions*).

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<sup>11</sup> Participants display 35 feelings that best represent their emotive responses during IPV. They report feeling abandoned, afraid, alienated, angry, anxious, ashamed, begrudged, callous, confident, cooperative, depressed, disappointed, disgusted, disrespected, dissatisfied, distressed, embarrassed, frustrated, guilty, helpless, hopeless, hostile, humiliated, independent, insecure, intimidated, irritated, jealous, passive, responsible, secure, stressed, threatened, uncomfortable, and unproductive.

SOCIO-CULTURAL CONTEXTS		Child Abuse Family Violence	Community Violence	Gendered Violence	Professional Support Services
FEELING RULES		anxious, distressed, intimidated, angry	angry, helpless, untrustworthy, weak	Ignored, passive defeated, dishonored dependent, depressed distressed, guilty, insecure, jealous, persistent	ashamed, confused desperate, embarrassed, hopeless
PARTICIPANTS	IPV TYPES	EMOTIVE RESPONSES BY CONTEXT			
<b>Brittany Jones</b>	self-defense	depressed afraid, guilty helpless, passive, shame	n/a	n/a	cooperative, embarrassed, guilty, uncomfortable
<b>Susie Jordan</b>	self-defense, situational	anxious, intimidated, jealous	n/a	frustrated, irritated insecure, threatened	confident independent secure
<b>Aaliyah Kanter</b>	self-defense, mutual	anxious, distress, frustrated, intimidated	n/a	n/a	n/a
<b>Sarah Jenkins</b>	situational	n/a	n/a	n/a	dissatisfied, frustrated, stressed
<b>Veronica Holmes</b>	situational	Afraid, ashamed, depressed, guilty	n/a	n/a	abandoned, hopeless, frustrated
<b>Debra Smith</b>	situational, mutual	anxious, frustrated, guilty	n/a	disappointed, guilty, humiliated	n/a
<b>Sasha Davis</b>	mutual, coercive	n/a	n/a	n/a	disgusted, hostile humiliated, responsible, unproductive
<b>Saridy Wilkins</b>	coercive	n/a	alienated angry frustrated disrespected	begrudging callous	n/a

*Table 3.* Socio-cultural Contexts of IPV and Emotions. This table illustrates IPV types and emotive responses performed and contexts of previous exposure to violence.

## EMOTIONS AND CHILD ABUSE

According to Simmons, Wurtele, and Durham (2008), types of aggression, frequency, and the degree of childhood abuse directly influences women's emotive responses during IPV. In tandem, Stuart et al. (2006b) suggest that it is not uncommon for previously victimized women to protect themselves using retaliation. Other studies also confirm that prior abuse is contributed to or is related to women's emotive responses during their current situations (Caldwell et al.

2009, Swan & Snow 2006, Babcock et al. 2003). On the other hand, Johnson (2008) introduces the intimate terrorism, mutual violent combat, and violent resistance models, which only explore use of aggression and control during IPV. Three of the four models in his control typology fail to consider situational and broader contexts of violence. Since there is no consistent evidence to suggest that previous victimization causes current victimization, the significance of incorporating this socio-cultural factor is a focus of considerable disagreement.

Swan and Snow (2006) predict that higher levels of childhood trauma lead to a greater propensity of female-perpetrated violence. However, in the current study, child abuse affects the participants in a variety of ways. Alongside their current IPV perpetration, five participants have also undergone life course experiences of childhood abuse. Among these women, four experienced child abuse or witnessed domestic violence (Susie, Aaliyah, Veronica, and Debra), and two were molested (Brittany and Susie). These samples demonstrate a need to incorporate women's previous experiences of victimization in the study of IPV perpetration. Although emotive responses vary depending upon how these women manage and interpret their experiences, the findings impact types of interventions that might be considered among women who also have participated in multiple forms of violence overtime.

Each of the violent experiences triggered warning signs for imminent future exploitation. There are mental health outcomes that relate directly to participants' emotive responses during their later experiences of IPV. For example, posttraumatic stress disorder (PTSD) is the most common diagnosis by mental health professionals for battered women. The extent, severity, and type of abuse of these participants are the result of PTSD (Hughes and Jones 2000). Feeling rules or socially shared behaviors such as anger, depression, shame, guilt, and anxiety are commonly reported among people who struggle with PTSD or a history of trauma.

Jacobson and Gottman (1998) also express the impacts of violence and PTSD. However, they suggest that frequency of violent acts experienced may not motivate fear among participants who experience various degrees of PTSD. Similar responses to violence have much to do with how couples processed intimidating behaviors (that incite anxiety) or physical violence (that provokes anger). For example, Aaliyah's childhood victimization was positively associated with expressions of distress (motivating rage). Aaliyah experienced child abuse by her stepfather between the ages of thirteen and sixteen. She described the abuse as severe corporal punishment for dating outside of her race, which angered her. Over time, she adjusted to physical abuse such as breaking weapons over her back, being punched, kicked in her private areas, and having a fork thrown and stuck in her skin. Although she internalized frequency and severity of victimization as normal, Aaliyah became more sensitive about subject matters that triggered the beatings. Other studies consider similar symptoms of psychopathology as an emotional outcome of family violence. Findings in Chester, Robin, and Koss (1994) propose similar feeling rules such as distress, intimidation, and anxiety, which are often experienced during family violence.

Gorman-Smith and Tolan (1998) argue that children who are frequent victims of physical punishment are likely to hit a spouse as an adult (p. 102). Similarly, when Aaliyah approached frustrating situations in her adult relationship, she responded to conflict by using extreme, uncontrollable physical violence and retaliation. Aaliyah contended that she was not a violent or hostile woman and spent much time describing feelings of distress. Nevertheless, feeling anxious or uneasy about her relationships, Aaliyah used short-sighted interpretations of situations and quickly replicated her stepfather's behavior in her own adult relationship. Given her prior experiences of child abuse, Aaliyah feels *anxious, intimidated, distressed, and frustrated*.

In another case, a participant suffered abuse but also reported witnessing multiple accounts of brutality acted against her mother. Debra experienced multiple incidents of child abuse after her mother separated from her biological father. Between the ages of five and twelve, Debra, her mother, and siblings were abused by her mother's dating partners. However, according to Debra, it was her mother's victimization by her father that shaped her feelings about violence during her adulthood. Debra reported vivid memories of abuse: "he [Debra's father] picked her [mother] up and broke her leg and she [mom] had to move us away... she talked to us about how not to let men take advantage of us or mistreat us". Debra explained how, as an adult, her sister was actually beaten brutally by an intimate partner but Debra refused to be abused again. Debra expressed feelings of guilt regarding her past experiences. She reported feeling frustrated and purposefully less tolerant (by way of anxiety) of abuse than other women she knew. Following Debra's childhood accounts of, and contact with violence, she recalled feeling *guilty*, *frustrated*, and *anxious* when placed in similar situations in the future.

Susie also exhibited violent behavior that reflected prior feelings about victimization. She reported being molested and abused. Susie attributed her violent responses to past abuse enacted by her father who was also an alcoholic. Susie was unable to reason without considering these traumatic situations. They often replayed in her head during daydreams, nightmares, and daily decision making. She felt slated and threatened/intimidated for life. Susie said, "when my boyfriend beat me, I wasn't really shocked because you just expect people to do bad things... he's a man and he's getting high so it kind of made sense to me... addictions and violence go together." However, Susie's perceptions of domestic violence were more traumatizing and psychologically damaging than her previous experiences of child abuse. The negative emotions were magnified and tremendously powerful in that anxiety led to unusual suspicion and doubting of the moral characters of others. Susie reported being more jealous as a result of her prior victimization, which influenced her own IPV perpetration. Given her comprehensive experiences of childhood victimization, Susie felt *intimidated*, *anxious*, and *jealous*, and these emotive responses impelled her to provoke and initiate sporadic episodes of IPV.

On the other hand, childhood victimization also shows negative associations between frequency and severity and women's perpetration of IPV. The interview dialogues with Brittany and Veronica showed striking similarities. Their previous experiences of child abuse influenced gradual increases in depression and fear regarding psychological, verbal, and physical abuse. Both women reported having an emotional imbalance since they were unable to cope with life effectively. Similar findings on expressions of fear and violent resistance are present in Archer and Graham-Kevan (2003). Brittany and Veronica also received limited support from their family members. Since childhood, family members denied, ignored, or overlooked their abuse. The women disclosed how their expressions of negative emotions such as shame and guilt debilitated their lives; these negative emotions triggered sequences of psychologically unhealthy behaviors such as self-blame and low self-esteem.

A slight twist from the experiences of Aaliyah and Debra's more controlling demeanors, Brittany and Veronica reported being attracted to men who behaved as disciplinarians. Their childhood experiences of victimization induced passive responses and their restricted performances of IPV. Brittany and Veronica also reported forgiving violence during their search for emotional attachment. In particular, Brittany confessed that she had been searching for love since her early childhood. Hence, long-term abusive situations reoccurred since she was irritated far less than other participants who conveyed similar forms of exploitation. Saunders (1986)

posits that cooperative, reserved, or obedient responses to violent abuse are as signs of battered women's entrapment.

Victims of battered women's syndrome, like Brittany, normally express "learned helplessness," which explains a victim's inability to guard against violence (Dutton 1993). Brittany's boyfriend punched, choked, stomped, kicked, and threw her, but she did not retaliate. Brittany reported having no control of her partner but a great deal of self-control as she purposefully ignored most opportunities to retaliate and managed her own conduct to prevent future episodes of violence. She only hit him one time, after he told her he did not love her and referred to her using unkind names. According to Lempert (1996), women surviving life-threatening abuse often perform this type of passivity as an adaptive strategy of survival, resistance, and strength building (p. 281). Given the frequency and severity of child abuse experienced by Brittany, she felt *depressed, afraid, ashamed, guilty, helpless, and passive* regarding physical violence. These emotive responses prompted Brittany's use of self-control to regulate the frequency and severity of IPV.

Veronica reported multiple accounts of physical assault. She was raped by teen-aged adolescent boys and was also molested by two male relatives earlier in her childhood. It appeared as if Veronica accepted abuse and the relative emotive responses as routine functions, often concealing or internalizing the acts of mistreatment. Veronica was more likely than other participants to suppress negative emotions about physical violence but expressed a no-nonsense attitude about verbal and psychological episodes. Veronica showed extreme psychological distress during verbally abusive encounters and insisted that she was immune to physical violence, actually preferring hitting over verbal abuse. Veronica said, "The verbal abuse is what hurt me more than the physical abuse". Relative studies find that psychological abuse may be as damaging as physical violence (Alvi, Schwartz, DeKeseredy, & Bachaus 2005). Given the consistency of abuse overtime, Veronica's was *depressed, afraid, and ashamed*. Those emotive responses coupled with feeling guilty about her past experiences shaped Veronica's violent responses to verbal abuse.

Findings in Bhatt (1998) complement this socio-cultural examination of childhood victimization. Bhatt argues that abusive lifestyles spawn emotional consequences for everyone in the household, which is graphically illustrated by Debra. Similar among each participant who experienced childhood victimization was evidence that previous violence can impact self-esteem. All five women showed low levels of trust and high self-concept, which was apparent in their exaggerations of long-term negative sentiment, attitudes, opinions, and cognitions presented about themselves during interaction with others overtime. Susie said, "Abuse kills you as far as trusting men completely or to a certain extent. It changes you as an individual." Susie also reported that she would remain emotionally unavailable until she achieved trust and co-dependence. These participants were constantly on guard, fearful, or they expected rejection. Snow and Anderson (1995) associate how individuals construct and negotiate their identities by conforming to the rules at work (identity work) with their long-term emotive responses. Childhood emotive responses reflect ways that individuals maintain their social and personal identities overtime. IPV studies should further examine how previously violent relationships shape women's identity formation.

The awareness and understanding of the relationship between women's past and present experiences is critical for determining a successful intervention plan. During the interviews, some participants were already aware of this relationship. For instance, Aaliyah, Debra, and Susie continuously compared their current violent experiences to past socio-cultural experiences

of victimization. However, Debra and Aaliyah were unapologetic about their violent actions whereas Susie was ashamed of her behavior. Nevertheless, all three women were hyper-vigilant to cues of potential violence, which often resulted in an exaggerated, startled response. Their acts resembled the fight reaction of the “fight or flight” response, which is the human body’s primitive, automatic, inborn response that prepares the body to fight against or run from perceived attack, harm or threat to our survival (Mitchell and Anglin 2009).

Among participants who experienced childhood victimization, it is important to note that IPV was perpetrated differently but there were distinct emotive responses that reflected socio-cultural feeling rules regarding the context of previous victimization. Like Bair-Merritt et al. (2010), IPV studies have “chosen” not to include data on previous childhood experiences of victimization because they are unable to measure the association. However, such findings should not be ignored because they add depth to the understanding of women’s motivation to perpetrate IPV.

## **VIOLENT CULTURES**

Violence is often a reflection of basic values that shape the norms of family life, conflict resolution, and other daily practices. Three participants witnessed cultural patterns of violence prior to their adult experiences of IPV. The cultural environment plays an important role in IPV because knowledge, beliefs, customs, and habits concerning violence can be learned and shared by members of cultural groups. Although Saridy also experienced a culture of ethnicity-targeted community violence, three participants (Saridy, Debra, and Susan) were exposed to gendered cultures of violence. These women encountered violent social networks that regarded physical aggression as a routine response to conflict, and reported observing violence enacted toward other women. Like Ooms (2006), this study takes into account historical and cultural differences, but does so with recognition that not all IPV is performed in the same ways (p. 5).

While Saridy, Debra, and Susan’s exposure to violence was broad and encompassing, their IPV often included use of weapons and physical objects. These participants were more controlling and physically aggressive, and initiated IPV more frequently than any of the other participants in this study. They were also more likely to cause severe harm to their partners. IPV demonstrated by Saridy, Debra, and Susan can be explained using the mutual violent combat or intimate terrorism models of Johnson’s control typology. Among the models in Johnson’s typology, these two adopt patriarchal traditions as the broader contextual motive for physical aggression and ignore situational contexts of violent experiences. In contrast, this sociology of emotions model explains how macro-level behavioral constructs can influence women’s perpetration of coercive, controlling physical aggression.

For example, Saridy’s family resided in an upscale home that was situated in close proximity to city schools and an impoverished African-American neighborhood. It is in this setting that she reported previous experiences of ethnic discrimination and community violence. As a result, Saridy directed feelings of anger and frustration toward people of “other” ethnicities and men who disrespected or alienated her, whom she was convinced, were all abusive. Saridy said, “I developed anger toward racial groups other than the West Indian people and those from the Islands who were the only people in our neighborhood who were kind to me.” She confessed that on a daily basis, she and her siblings were chased home and beaten up by Black children primarily because her family looked and spoke differently. Saridy also reported that, “They [Black children] said we ate blood pies and smelled funny... yelled different cultural names, and

they would beat us up or jump us.” As Saridy grew older, her behavior much resembled the conduct of an anti-social intimate terrorist abuser, which entails emotional, psychological, and controlling abuse and feelings of alienation, anger, frustration, and disrespect. Farver and Garcia (2000) examined how children’s perceptions of neighborhood violence and safety are related to their socio-emotional functioning. They uncovered normative feelings among at-risk youth such as a loss of control (weak), distrust (of authorities), helplessness, and anger.

Like community violence, gender ideologies are also highly complex socio-cultural constructions. Although no society has a definitive feminine ideology, feeling rules still exist. As noted in Yodanis (2004), gender ideology often functions as a lens through which inequalities in relationships are viewed. It is not uncommon for women’s behaviors to manifest from the ideology of male dominance (MacMillian and Gartner 1999). However, according to matriarchal ideologies, social organization is determined through the female or by a woman. Like patriarchal principles, they can also influence women’s feelings about IPV. In contrast, patriarchal or masculine principles position women as the “second sex”, a term coined by Simone de Beauvoir denoting women as being weaker and less capable beings that are under the domination of men.

The meaning of femininity is subject to patriarchal or matriarchal feeling rules that drive the division of labor (feelings about submission), gender roles (emotive responses to nature versus nurture role playing), and types of acceptable communication exhibited by women (feelings about authoritative versus passive conduct) (De Beauvoir 1949/2012). For example, individuals who report using less autonomous forms of communication often feel less enthusiastic, distracted, less desirable, helplessness, and defiant (Patrick, Skinner, & Connell 1993). Common emotions portrayed in response to male dominance include feeling defeated, insecure, depressed, guilty, jealous, distressed, and degraded (O’Connor, Berry, Weiss, & Gilbert 2002). Feeling rules with respect to nature over nurture temperament include novelty seeking, harm avoidance, reward dependence, and persistence (McCrae et al. 2000).

For example, Saridy’s cultural environment and value systems as a member of a Liberian tribe played a significant role in her perpetration of spousal violence. Expectations in her adult relationship entailed specific rules that were linked to historical interpretations of men’s power and women’s submission. Saridy reported that, “It was normal [historically] for men [wealthy slave-owners] to tie them [women] up and do all kinds of crazy crap all depending on the degree of what they [women] do.” Thus, women’s expressions of power and authority in the future were responses to years of victimization. IPV symbolized the basic values that shaped Saridy’s gendered emotive responses. The norms of family life, methods of conflict resolution, and her other daily practices were influenced by feelings about women’s submission and their right to freedom. These emotions were transferred from one generation of women to the next.

Henceforth, Saridy’s knowledge, beliefs, customs, and habits concerning violence were socially learned and shared by members of her cultural group. Saridy said, “All of them [Liberian women] are very verbally and mentally and physically abusive... we all get that from that tribe.” She believed that a culture of violence trained the new generation of Liberian women to react and respond negatively towards men. Accordingly, Saridy attributed the premeditations or instinctive and physically aggressive responses to the historically violent coercive conduct directed toward Liberian women in the past. She refused to assume blame for her own violent behavior, and to regain power, she deconstructed what it meant to be a woman. Saridy was defensive (vengeful or resentful) and acted out tough guise (callous). Following most mistakes or regarding a number of flaws, Saridy disciplined as if she were a slave-owner by striking her



partner or revoking his privileges. To her, violent aggression was a normal product of rational choice.

Saridy's constructions of gender were closely tied to her tribal beliefs. Those beliefs were shaped by a cultural movement to retaliation against men in response to the oppression of Liberian women. Saridy was groomed accordingly to be a main breadwinner and disciplinarian. As a child, young girls were trained to display more intelligence than all of their peers. Although Saridy was no longer a resident of the tribal community in her adult years, she prized the matriarchal division of labor that was affirmed among women in her tribe. In fact, Saridy embraced her assumed authority and believed her partner was privileged to date her. Typically, studies find that men who lack access to economic resources, as compared to their wives, reassert their control through a variety of emotional abuse tactics (Kaukinen 2004). Nonetheless, gender roles in Saridy's relationship did not conform to normative feminine interpretations. Saridy still felt as if it were fair for any woman to chastise, humiliate, or discipline any man. In their home, she imposed an exact replica of the tribal feeling rules. Saridy's partner was in no position to criticize, judge, or comment about matters of their family.

Previous studies also indicate similar patterns of coercion that are direct and conditional effects of employment and other status-driven characteristics (MacMillan & Gartner 1999). Saridy positioned her partner as a member of the second sex, feminizing his role at home, work, and in their family, which also placed him at risk of spousal abuse. Saridy also reported threatening to leave countless times throughout the duration of their relationship, displaying her perceived ability to control the relationship at will. Given the patterns of violence that stem from Saridy's community, culturally violent experiences, and gendered interpretation of violence, her emotive displays of *anger*, *frustration*, *vengeance*, *coercive control*, and *tough guise* encouraged multiple abrupt initiations of controlling psychologically and emotionally-driven IPV.

Debra's IPV perpetration was embedded in conflict regarding feelings about her husband's exaggerated masculine gender roles. Debra had not internalized more traditionally gendered social and normative feeling rules. Still, Debra did not disregard the legitimacy of traditional values. She said: "Their [Black men residing in the South] lifestyle is just living for the weekend, partying on the weekends and different things like that. Their sense of values really is more so the woman being at home." Both family incomes barely met family needs but Debra understood that she could not control her husband's access to funds for weekend play. Financial contributions were also an important means for her husband's construction of traditional masculinity (Tichenor 1999). Although her husband spent money earned, his IPV perpetration was motivated by discontent with Debra's increasingly high share of relative income. While her husband was unable to overlook stereotypes and was alleged to have fantasized his own renditions of her day, Debra successfully ignored sexual harassment in the workplace. As learned from her mother, Debra never quit her job. Instead, she disregarded the relative feeling rules in her workplace environment. On the job, Debra withstood unsolicited and unwanted verbal or physical sexual behaviors and nonsexual, demeaning, and discriminatory behaviors because she claimed that it was what she had to do to feed her husband and son (Goldenhar et al. 1998, p. 21). However, she refused to experience coercive IPV to learn a lesson about her presumed macho display of femininity as a worker in a male-dominated occupation.

Atkinson, Greenstein, and Monahan Lang (2005) also explain husbands' traditional gender ideologies as they pertain to relative resources in employment, education, and income (p. 1139). Debra diverged away from a more traditional feminine role in an effort to keep her family financially stable. She felt guilty that her husband's masculine identity was threatened because of

her employment in the field of construction. Debra perpetrated IPV because her husband was supposedly jealous, controlling, destructive, and disrespectful. He usually hit her first but her retaliation was far more forceful. She was disappointed with and humiliated by her partner's violent responses to her work ethic, employment choices, and professional relationships with other men at work. Given her previous experiences of child abuse, exposure to parental abuse, and refusal to submit to masculine authority, Debra's emotive displays of *humiliation*, *guilt*, *frustration*, *anxiety*, and *disappointment* encouraged her to initiate coercive situational violence.

Susie had been socialized to adhere to traditional nuclear family standards and performance outcomes, which meant the woman was designated as the nurturer, and the man, as the provider (Silverstein and Auerbach 1999). However, Susan intended to exert power and control. Her first acts of hostility occurred when Susie's husband ignored his responsibilities. Instantaneously, she became irritated and argumentative, issued verbal attacks, and threatened to leave the relationship. Susie's patterns of behavior were no longer normal. More frustrated than ever, she quickly abandoned her previous submissive personality. Prior to the violent shifts in her partner's behavior, Susie anticipated that her husband would remain loyal to his "fixed" social roles and caretaking responsibilities. Susie controlled the situation by leaving the relationship when she felt insecure about her husband's ability to meet gendered expectations for child development, finances, and the relationship. She stated, "If he cannot make the rules, he will not participate." Given her comprehensive experiences of psychological abuse, childhood victimization, and her traditionally gendered expectations, Susie's emotive displays of *threats*, *anxiety*, *irritation*, *jealousy*, *frustration*, and *insecurity* encouraged her to provoke and initiate periodic episodes of IPV.

Saridy, Debra, and Susan used IPV and situational control to respond to conflict. Throughout their lives, acts of interpersonal violence, emotional, or psychological abuse were committed by their relatives, individuals who were not intimately related, or both. As witnesses, and at other times as victims, they experienced violence in a community setting, which conditioned their feelings regarding how they should use violence in their adult relationships.

## **SOCIAL SUPPORT**

Domestic violence agencies typically provide some combination of the services such as crisis hotlines, counseling, advocacy, and emergency shelters (Bennett et al. 2004). Although individuals may report having access to informal and formal networks, studies should also consider the amount, type, source, and quality of social support received (Tan et al. 1995). Quality social support can influence women's psychological health and well-being. It is crucial that we assess whether or how specific types of support aid women who perpetrate IPV. To assess participants' experiences with social support and social networks, they were asked to describe any requests or sources of treatment that were available during or following occurrences of IPV. While two participants (Susie and Sarah) sought assistance through counseling services, two others (Brittany and Sasha) were court-ordered to attend counseling. In an emergency situation, one participant (Veronica) reported using shelter services. Two participants (Susie and Sarah) sought out additional assistance, each reaching out to a domestic violence support agency for help. As an intervention to control their partners, two women (Susie and Sarah) contacted local authorities for help.

First, Susie attempted to file an order of protection when her husband flipped a desk and kicked their chairs over but in her jurisdiction, you could only file an order after an occurrence of

physical assault. Next, she called a hotline for crisis intervention, safety planning, information, and referrals once she planned to leave her marriage. After she left her husband, Susie attended individual sessions voluntarily. Most counseling services programs are designed to provide opportunities to address the impact of violence on the lives of those experiencing IPV. These services are typically offered on an individual basis or in group settings. Susie sought out counseling to grasp an understanding of what being a victim of domestic violence meant to her. As discovered in this study, Susie admitted to feeling insecure about both herself and her role in events leading to IPV. Alongside her other emotive responses, Susie entered counseling feeling frustrated and threatened by the subject matter. Susie believed counseling would be helpful, but encouraging herself to attend was challenging. However, Susie is not alone. Alongside feelings about IPV that batterers or victims carry, there are also normative responses regarding counseling that deter participation. For example, an individual may feel hopeless, desperate, confused, or reluctant to communicate with a stranger. Beck et al. (1990) relate hopelessness to negative expectations about the future and loss of motivation, which both may lead to depression, suicide, or murder. As already demonstrated by Brittany and Veronica, women who perpetrate IPV or who are victimized may also be embarrassed, ashamed, or feel hopeless with regards to their situations and futures.

The common thread across most counseling programs is their exploration of battering from the perspectives of power, control, and gender inequality (Bennett et al. 2004). An effective resource was available to treat Susie as an abused or battered woman. Since Susie attributed her husband's violence to drug addiction, she wanted to learn about the life of an addict. During the sessions, Susie attempted to rebuild her self-concept (confidence), trust (security), and identity (independence). Susie said: "When I went through counseling after that situation [domestic violence], I learned that the addicted person and the person that they're married to are addicted to behaviors, the ups and downs, the ebbs and flows of the addiction." During the counseling session, they focused heavily on the immediate context of her experiences of IPV.

However, the standards for addressing her needs as a female perpetrator were in need of development. For example, Susie's sessions failed to address the emotive responses that led to her violent IPV perpetration. Her experiences were addressed using a battered women intervention strategy. The set of counseling sessions were directed toward her victimization as opposed to her initiation of IPV. The counseling session also failed to assess her unique emotive responses that motivated her to exercise more severe forms of IPV such as launching objects at her partner's head with intentions of causing an injury. Sociology of emotion provides cues about her insecurities, levels of frustration, and symptoms of anxiety. This information is critical with regards to an effective intervention program to address future IPV perpetration.

On one occasion, Sarah contacted the police to arrest her parent after being choked in their vehicle. However, his mouth was bleeding as a result of her resistance and she had no visible injuries. The police refused to arrest her partner because the police claimed that they both attacked each other. Prior to this, Sarah also contacted a free counseling service offered through her place of employment. However, when the counselor learned that Sarah's daughter was involved in the dispute, the service provider deviated from their confidentiality policy in attempt to process child abuse claim. Although she was devastated, Sarah continued to seek out help because she was in search of a solution. Sarah and the father of her children paid to attend a physical aggression treatment program, which is another form of private counseling. During the sessions, she was embarrassed and stressed about recounting each strikingly similar occurrence of IPV. Sarah said: "I let him come back under the presumption that he was going to get this

counseling. We started going to a private counselor in our neighborhood for a couple weeks. It was like these sessions where you just sit and you talk, and you're spilling out all your things and it's like, oh well you need to get out of this relationship... Well, I know that. Help me figure out the unobvious." As mentioned in Heyman and Schlee (2003), physical aggression couples treatment programs hold each partner accountable for recognizing cycles of dysfunctional interaction.

In these programs, each partner has to learn to respond with de-escalation strategies. Sarah noted that the counselor wanted each partner to blame the other for their problems rather than helping them to understand why they were responding violently. Sarah felt *dissatisfied* with her own behavior and wanted to identify a solution but she was unwilling to accept the circumstances that led to her abuse. She also became frustrated because the counselors encouraged her to leave her boyfriend. Sarah's goal was to repair the relationship between herself and the father of her child. However, the counseling sessions failed to meet her expectations. Following our interview, Sarah better understood the circumstances surrounding her victimization. By exploring Sarah's emotive responses, our interview allowed her true feelings to surface. Sarah referred to the interview as a breakthrough because she needed to assess her own feelings about IPV and to better understand the boyfriend's drug addiction as opposed to attempting to replenish her love for him.

Sasha was court-ordered by Child and Family Services (CFS) to attend anger management and child safety counseling sessions following her IPV perpetration. Following her arrest, she participated in non-violence programs, took drug tests, and attended counseling sessions that labeled her as, "a psychological deficient problem child." She postponed attending college, and could only pursue local employment opportunities. Sasha was also pressured by CFS to grant her mother custody of her daughter. She felt like the counseling services were ruining her life but she would not blame her partner for his episode of IT violence because she believed it was her fault. Sasha said, "The system is so caught on one track. It's wrong for a man to hit you, but at the same time, what happened? What was the reason?" She was disgusted that both of them were arrested after she'd attacked her partner. In her eyes, they lost custody of their daughter because her boyfriend was arrested for no reason. Furthermore, Sasha claimed that she understood the purpose of the sessions, but refused to alter her aggressive responses. She claimed that she was always hostile for a reason and there was no intervention in place to address her IPV perpetration. Sasha feels *disgusted*, *humiliated*, and *unproductive* as a result of violent acts that she feels *responsible* for committing. She continues to approach perceived unacceptable circumstances using *hostility* as a behavior choice.

Brittany was court-ordered to attend anger management counseling following an altercation with her mother. Her counseling had nothing to do with experiences of domestic violence. It was during counseling with her mother that she associated similarities in relationship choices between her mother and herself. Brittany reported that her mother had also settled for less, dating a married man for 10 years. However, Brittany was too embarrassed to disclose being molested by her cousin or to share graphic details about relationship violence. She felt uncomfortable sharing the occurrences around her mother. She also didn't want to get anyone in trouble since she believed the violent occurrences were her fault. In addition, she did not disclose her depression. They also failed to address her comfort level in situations where she is brutally victimized. Her emotive responses are significant with regards to how an intervention model can address her cooperative, reserved, or obedient responses to violent abuse.

Veronica was the only participant who used shelter services, which offer safe refuge for women and their children. Bennett et al. (2004) argue that shelter services are more helpful for battered women than traditional counseling services, and are likely to reduce the frequency and intensity of new violence. It is not uncommon for homeless mothers to experience mental anguish, a loss of dignity, depression, and feelings of personal insecurity. Veronica showed signs of depression, and was very fearful for the safety and wellness of her children. She needed to flee to the shelter to keep them safe but Veronica's circumstances did not fit the criteria of the program. She said, "They said if I did not change my [work] hours, we were not going to be able to stay there anymore. But, when you first sign the papers, you state if you have a job, and that's why they have a pass code for the door. I got angry and aggravated... I said, 'You mean to tell me that I come here to get away from a man who abused me and abused my children, but we're getting kicked out because my job goes past 9 o'clock so I can provide for them... So, you're just pushing me back to the man that abused me?'" After Veronica returned home, her boyfriend frustrated her again and she lost control. Without any hesitation, she shot a gun at him. Veronica confirmed that, aside from the shelter, a weapon was the next viable alternative to subdue her victimization.

Social networks encourage women to use particular coping strategies in dealing with domestic violence (Mitchell and Hodson 1983). Types of coping also influence the likelihood of obtaining additional support. In addition, it is well-documented that greater levels of IPV are associated with non-supportive responses. However, aside from putting the onus on women seeking support, programs should offer additional interventions that better serve the needs of female-perpetrators of IPV. These interventions should support men and women who initiate IPV or retaliate against a violent partner (Bennett et al. 2004).

## RECOMMENDATIONS

Experiences of IPV are distinct across race, class, and gender and a web of complementary emotive factors may explain why women are physically aggressive. However, theoretical understandings of women's motivations for IPV are lacking and the design of effective screening and relevant intervention programs are flawed as well (Bair-Merritt et al. 2010). Since this study confirms that women are likely to perpetrate several types of IPV and experience various types of victimization simultaneously, this study relies on women's emotive responses during IPV to predict various prevention strategies. Self-protective and proactive treatment models are directly associated with specific emotive behavior and both treatment types offer relative strategies that address women's victimization and IPV perpetration. Researchers and practitioners should consider the following *self-protective* (plan-based counseling, open expression therapy, imaging conferences, and one-on-one psychotherapy sessions) and *proactive IPV intervention strategies* (crisis intervention workshops, emotion awareness counseling, and a forgiveness program). These recommendations should be applied using similar protocol and the self-preventive and proactive intervention options are interchangeable depending upon the emotive responses involved and the level of risk to the client.

Self-protective IPV intervention strategies address reactive or self-defense-oriented physical aggression that is performed in response to provocation. First, to address *intimidation* or *silent abuse* and to target feelings of low morale or mental abuse, "plan-based counseling" can be designed and implemented to: (1) establish an environment for healthy communication; (2) devise a plan to address the root causes of IPV and to prevent or reduce abuse; (3) create a clear

and concise list of expectations and consequences of abuse; and (4) offer awareness about various intimidation tactics and their effects on women's mental health. Plan-based counseling can prevent inflictions of self-harm, avert addictive behavior, limit withdrawal from society, and reduce suicidal thoughts. The goal of this self-protective intervention strategy is to teach the client to better handle intimidation, bullying, and excessive criticism.

Second, to confront *shame*, *trust*, or *passive behavior* and to target the negative psychological effects of humiliation, "open expression therapy" can be designed and implemented to: (1) introduce healthy and objective perspectives of situations that provoke intense feelings of shame; (2) use problem solving exercises to develop a guide for do's and don'ts in future relationships; (3) dialogue about the process of a trusting relationship using actual shared content; and (4) provide communication skills training to enhance task initiation, devise methods of stress relief, improve excuse aversion tactics, and to develop problem solving techniques. Open expression therapy can prevent anxiety and depression while also working to heal a shame-based identity among abused, victimized, or harassed clients. The goal of this self-protective intervention strategy is to help clients understand the causes of trauma, to encourage their healing, and to generate a fundamental release of blame.

Third, to address *helpless* or *hopeless* frames of mind and to target feelings of depression, "imaging conferences" can be designed and implemented to: (1) identify unwanted behaviors and to integrate positive outcomes of negative behaviors; (2) complete activities about exercising behavioral control; (3) institute a health plan that enhances pleasant activities and opportunities for achievement; (4) complete a future awareness imaging workshop and a "back casting activity" in order to vision a path, steps, and a reverse timeline of distinctive choices; and (5) produce an action plan using the imaging work (Gidley 2001). Imaging conferences can prevent complaining, worrying, downheartedness, self-isolation, suicide, and murder. The goal of this self-protective intervention strategy is to develop appreciation for the present, encourage new activities, and to change the client's outlook on the future.

Fourth, to address *dependency* or *anxiety* and to target feelings of anxiety, a lack of self-confidence, and the need of constant reassurance, "one-on-one psychotherapy sessions" can be designed and implemented to: (1) examine the client's faulty cognitions and related emotions; (2) focus on solutions to specific life problems; (3) provide assertiveness training to build expressive skills and develop new ways of thinking, behaving, and reacting; (4) establish a daily journal to aid in everyday decision making; and (5) provide sample role play exercises to teach and practice social skills. One-on-one psychotherapy sessions can prevent pessimism, self-doubt, and difficulty expressing disagreement with others. The goal of this self-protective intervention strategy is to help clients acknowledge their abilities and assets, and to promote their autonomy.

In contrast to the four self-defense treatments, the following proactive IPV intervention strategies address instrumental, goal-directed aggression that is enacted to achieve an objective beyond IPV. First, to address *trauma* or *tension* and to target troublesome feelings and disturbing memories, "crisis intervention workshops" can be designed and implemented to: (1) facilitate a client's recovery through cognitive therapy, which limits distorted thinking and adjusts a client's responses to situations that trigger anxiety; (2) establish a stress diary that lists negative thoughts and aligns them with positive, believable thoughts; (3) provide role play interventions to show a variety of physical relaxation methods and meditation techniques; and (4) use a weekly planning technique to enhance the client's time and skill management. Crisis intervention workshops can prevent nightmares, pessimism about the future, emotional numbness, or jumpiness. The goal of

this proactive intervention strategy is to identify tactics for stress management and limit antisocial thinking and behavior.

Second, to address *anger* or *jealousy* and to target feelings of insecurity, resentment, and frustration, “emotion awareness counseling” can be designed and implemented to: (1) offer communication workshops on expressing emotions without hurting others; (2) provide focused group sessions on learning to compromise, adjusting nonverbal communication, managing verbal as opposed to using physical responses, and detecting challenging viewpoints; (3) facilitate conflict resolution training to better interpreting relationships and learn new ways to resolve conflict; (4) role play to develop assertive skills that replace aggressive behavior; and (5) participate in an active listening workshop to establish empathy and summarize workshop content. Emotion awareness counseling can prevent use of physical aggression, limit arguments, and reduce anxiety. The goal of this proactive intervention strategy is to help the client bond with peers, develop communication skills, and better manage their anger.

Last, to address *guilt* or *confusion* and to target feelings of vulnerability and wrathful behavior, “a forgiveness program” can be designed and implemented to: (1) use counseling to uncover the client’s history and current life problems; (2) use treatment and a healing process to interpret the role of guilt during crisis situations; (3) conduct a process-based intervention to identify hurtful behaviors, make choices to forgive, and explain the justification for forgiveness; (4) conduct mock meetings that emphasize reconciliation and apologies for their use of hurtful behavior; and (5) learn about verbal and nonverbal techniques for addressing challenges. A forgiveness program can reduce unconscious guilt and decrease alienation. The goal of this proactive intervention strategy is to increase the client’s greater openness to change and their ability to surrender the dominant role.

## CONCLUSION

The eight experiences portrayed in this study show the significance of including the broader context of IPV in any analysis of women’s motivations for IPV perpetration. This study demonstrates how both internal situational factors and external socio-cultural factors influence how women think and feel about IPV perpetration. Ultimately, since additional motivations have been uncovered, relative intervention strategies should also be reshaped to better support women who perpetrate IPV. Understanding the batterer’s or victim’s emotive responses can help a researcher to better evaluate an individual’s vulnerability to abuse, uses of control, and barriers for seeking and receiving help (Lindhorst and Tajima 2008). Using findings from the sociological analyses of emotions, which investigating emotive responses via situational and broader contextual experiences, I examined women’s emotions to determine future IPV intervention strategies. Researchers, practitioners, and authorities should reexamine the services available to female perpetrators of IPV and consider intervention models that examine women’s emotions over time and prior involvement in delinquency.

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