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Characteristics of women who perpetrate intimate partner violence against their male partners

Georgia Zara¹, PhD, Delphine Theobald², PhD, David P. Farrington³, PhD

¹ Department of Psychology, University of Turin, Turin, Italy

² Department of Psychology, Kingston University, London, Penrhyn Road, Kingston-upon-Thames, KT1 2EE, UK

³ Institute of Criminology, Cambridge University, UK

Georgia Zara: <https://orcid.org/0000-0002-2379-0602>

Delphine Theobald: <https://orcid.org/0000-0003-3900-8141>

David P. Farrington: <http://orcid.org/0000-0003-1312-2325>

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Correspondence concerning this article should be addressed to:

Georgia Zara, Department of Psychology, University of Turin, Via Verdi 10, 10124 Turin (Italy).

E-mail: georgia.zara@unito.it

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In memory of Professor Anna Costanza Baldry

We want to dedicate this article to our esteemed colleague and friend *Anna Costanza Baldry*.

Anna Costanza Baldry was a well-known world-recognised scholar and she led important scientific projects on bullying, intimate partner violence, and femicide. In Italy, Anna made a great contribution to the protection of children, who unfortunately are the collateral victims of femicide; Anna called them “special orphans”. Though she worked mainly on female IPV victims, she recognised the complexity of IPV as a multidimensional phenomenon in which the relationship between men and women could not be disregarded as a key factor in couple violence. This is why we know that Anna would appreciate our investigation of the other side of the IPV coin.

Abstract

This study examined intimate partner violence as a form of violence that occurs within an intimate relationship. The main objective was to examine the extent to which women are involved in violence, both psychological and physical, against their male partners.

It used data collected as part of the Cambridge Study in Delinquent Development, a longitudinal study of men from age 8 to age 61. The sample included 212 women who were in close relationships with 212 men who participated in the study. The women completed the Conflict Tactics Scale and participated in an interview about their lifestyle and intimate relationships, when their partners were age 48.

Results show a significant correlation between perpetration and victimization of physical and psychological violence and suggest the critical role of relationship climate and quality of interaction between partners in exacerbating a gender symmetry of violence in which men and women end up perpetrating the same acts of violence against each other.

Interventions should implement programmes aimed at developing healthy relationships.

Key words: Intimate Partner Violence, problematic relationships, violence mutuality, gender symmetry.

Introduction

There is no current consensus on the exact definition of intimate partner violence (IPV), often also known as domestic violence or domestic abuse. The most specific definitions of IPV include some or all of the following features: threatened physical or sexual violence, economic violence, and emotional or psychological abuse perpetrated by a current or former intimate partner, in dating, cohabiting or marital relationships (Corvo, 2019; Neppl et al., 2019). This type of interpersonal violence can vary in type, severity, frequency and purpose (Klostermann & Fals-Stewart, 2006). IPV has become a huge problem for public health and the criminal justice system because it occurs in all age groups, regardless of socio-economic status, gender, and sexual orientation (Campbell, 2002; Shakoor et al., 2021).

There has been a great deal of debate about the prevalence and correlates of both psychological and physical violence in intimate partnerships. There are two basic arguments in the debate: (1) that there are gender differences (gender asymmetry) in this form of violence and (2) that this behavior is gender neutral (gender symmetry). Gender stereotypes are often based on power and acceptance of hegemonic male dominance (Scarduzo et al., 2017); they also specify differences in the roles of men and women in society and in how they are expected to behave. It follows that gender stereotypes will, no doubt, influence the social perceptions of perpetrators: if the perpetrator is a man it is not infrequent that his behavior is associated with *being passionate* (Shields, 2007); if the perpetrator is a woman then the frequent association is with *emotionality* because women are seen as less in control of their emotions and as exaggerating their display (Shields & Crowley, 1996). One thing that is clear is that IPV is a very complex issue that is embedded in the inequalities between men and women and in gender norms at a societal level (Anderson, 2005) that render violence not as an individual behavior but as an outcome of interpersonal practices.

The foundation to the debate is whether women are seen centrally as the main victims of IPV (Dobash & Dobash, 1979, 2004; Dobash et al. 1992) and whether there are gender differences between perpetration and victimization. Dobash et al. (1979), for example, argue that women are victims of dominant males in a highly patriarchal society, based on power and control. According to this perspective, Anderson (2005) advocates that there is no such phenomenon as gender neutral violence, not even when gender is reduced to a simplification of what men and women do. De Coster et al. (2021) argue that even gendered structural arrangements, power imbalances, and cultural meanings of gender, shape opportunities for using violence to achieve control in intimate relationships. In other words, cultural contexts, social structures and roles, and types and consequences of IPV vary by gender.

This feminist view generally does not focus on the association between IPV and male psychopathology, while other researchers suggest that men and women can be both perpetrators and victims (Magdol et al., 1997; Straus et al., 1980; Theobald et al., 2016b), suggesting that socio-psychological factors are at play in both and that the mutual involvement of both men and women in IPV does not make this violence any more acceptable or justifiable. On the contrary, analyzing situations in which both partners resort to certain forms of violence to gain control over the other illustrates the crucial role that the relational climate can have in exacerbating the tone, nature and quality of the interactions (Ahmadabadi et al. 2021; Zara et al., 2020, 2021).

For instance, findings from the Dunedin prospective longitudinal study conducted by Ehrensaft and colleagues (2004) showed that common couple abuse in a community sample was characterized primarily by woman-to-man abuse and involved mostly less severe consequences. In most cases these forms of abuse did not result in official interventions. Unexpectedly their findings showed that clinical forms of abuse that require medical

attention, legal support and police intervention or seeking a shelter involved abuse practiced by both men and women.

These findings were in line with those from community surveys on women's perpetration (see Moffitt et al., 2001) that often report less severe outcomes because violence perpetrated by women rarely leads to serious injuries and to court cases. On the other hand, clinically significant abuse involves primarily mutual abuse and is more likely to be characterized by injuries and use of weapons, although women are often those needing medical treatment for injury. However, when women do not submit passively to an abusive relationship and contribute to it by both attacking their partner and defending themselves this may increase the likelihood that their male partners will retaliate and escalate the violence to injurious (Straus, 1990b, 1998) or lethal levels (Gino et al., 2019).

In a recent study conducted by Ahmadabadi et al. (2021) males and females were compared using a comprehensive self-report measure of IPV. Both males and females were perpetrators and victims. Unexpectedly findings show that males were more often the victims of IPV in the current relationship, whereas women reported to having been victims of various forms of physical (e.g. being pushed, shaken), verbal (e.g. being insulted) and psychological (being belittled) violence in previous relationships. Though there was a disproportional tendency for relationships involving higher proportions of IPV to lead to a mutual breakdown, men remained more often in an abusive relationship compared with women. It seems that women and men react differently to partner violence; the former are socially encouraged to manifest fear and to seek help (Douglas & Hines, 2011), while the latter are more likely to deny and also to be socially discouraged to disclose any experience of being abused (Felson & Cares, 2005).

Men, women and IPV

While the societal acceptance of a gender inequality contributes to conditions where women face major challenges to their development because of limited opportunities for leadership in almost every sector of society such as political, educational, and scientific (Nussbaum, 2001), it is unlikely that the gender gap solely can explain everything relating to all forms of intimate partner violence. As research shows (Ehrensaft et al., 2004), the risk of partner abuse is likely to be increased additively and independently by other conditions such as stability of aggression (Krueger et al., 1998), history of conduct disorders (Brooks Holliday et al., 2017), personality characteristics (Krueger et al., 1994), and assortative mating between individuals (Galbaud du Fort et al., 1998).

These arguments are based to a great extent on results from very different samples (for reviews, see Archer, 2000, 2002; Johnson & Ferraro, 2000). However, results from observational studies and meta-analyses are concordant in suggesting that both men and women can act as perpetrators and victims of IPV (Archer, 2000; Capaldi et al., 2012; Carney et al., 2007; Dutton, 2006; Jennings et al., 2017; Lussier et al., 2009; Straus, 2011; Theobald & Farrington, 2012). It is likely that the most serious acts of physical violence are more often perpetrated by men against their female partners, but this does not necessarily mean that the men only initiated the violence.

Studies suggest (Ahmadabadi et al. 2021; Swan et al., 2008) that women can contribute to the perpetration of psychological abuse, and minor acts of violence such as pushing, or throwing objects, might, for instance, instigate a reaction from their male partners where the woman may be injured as a result. The psychological abuse which is more often reported in surveys is less likely to be considered a crime regardless of prevalence, although it can often be an antecedent to physical abuse¹.

Prevalence is the most usual measurement used, because policy makers often prefer a single, simple gauge of the extent of IPV, which is easy to comprehend and evaluate. By its

very nature, IPV is very complex and the measurements used will impact on the extent to which males are considered to be the main perpetrators. For example, prevalence will show less gender asymmetry than the number of incidents, and this may be one of the reasons why inconsistencies between samples occur.

It must also be remembered that isolated events, in comparison to continued and pervasive IPV of whatever type, might distinguish those perpetrators at the severe end of the continuum (Burelomova et al., 2018). Therefore, although prevalence rates have the advantage of simplicity and clarity, the number of incidents or frequency would probably be a better measure of the extent of IPV as it is with other crimes, if comparisons are to be made. Women, for example, are more likely than men to be the victims of repeated incidents (Straus, 1996).

The inconsistency in findings is dependent on the type of samples examined, variations in measurement and also to some extent the ability of the measurement tool to determine the contextual issues surrounding this form of violence. This was evident in two studies (Langley et al., 1997; Magdol et al., 1997), both using the same data from a New Zealand birth cohort of young adults, where interviewers used different probes and obtained contradictory results. Whilst Langley and colleagues (1997) found four times as many women as men reporting having been assaulted by a partner at least once in the last year, Magdol and colleagues (1997) found perpetration of 21.8% for males and 37.2% for females.

In another study conducted in England, Theobald et al. (2016b) also found that more women than men perpetrated both dating violence (36.4% versus 21.7%) and cohabiting violence (39.6% versus 21.4%).

This inconsistency happens when different conceptualizations of a violent act can be made by men and women. Some men, for example, view partner violence by females as ineffective and non-threatening (Hamberger & Guse, 2002). Although women may be seen as

victims because of the impact of aggression from male partners, there is the possibility that injury could be the outcome of joint violence (where women may often come off worse).

Focusing only on one extreme of the spectrum of IPV does not allow taking into account *victimness* (i.e. the condition of being a victim) and *victim exposure* (i.e. the amount of contact and/or vulnerability to threats and harmful events experienced by the victim), which must be established and not assumed (for a detailed analysis of these dimensions within the forensic victimology literature see Turvey, 2014, who refers to *victimity*).

Is there room for mutuality of IPV?

Johnson and Ferraro (2000) term this form of violence *situational couple violence*. Results from surveys support this viewpoint, namely that men and women are equally capable of IPV, with both psychological and physical violence (Magdol et al., 1997; Stets & Straus, 1990; Straus et al., 1980). What seems to differ significantly is the frequency and the pervasiveness of IPV, the types of violent accidents involved, and the extent of physical traumas, with men acting violently more frequently and on various occasions, while women act violently more indirectly and in more private settings. Stets and Strauss (1990), for example, found that 49% of disclosers of violence agreed that the behavior was mutual. Similar findings with regards to mutuality have been found by others (Chan, 2011; Neal & Edwards, 2016, 2017).

The mutuality of IPV is not by all means a way of dismissing the higher risk for women, in comparison with men, to be victimised into a pattern of violence that often escalates into intimate partner femicide (Zara & Gino, 2018; Zara et al., 2021). Rather the opposite: mutuality of IPV poses a significantly higher risk for women who may try to protect themselves by acting violently, with the consequential effect that they are less likely to ask for help or less likely to be helped (Gino et al., 2019).

The fact that women can be both perpetrators and victims of IPV makes the situation extremely difficult. It also requires different prevention strategies and interventions (Lysova, 2016) that also stem from the changing narrative of gender inequality because, according to De Coster et al. (2021), motivations, meanings, and outcomes of IPV are “gendered even in circumstances where men and women engage in violence against intimates at similar rates” (p. 288).

Interdisciplinary IPV studies emphasise the interactive, relational and mutually dynamic nature of IPV, beyond the prior understanding of IPV as a phenomenon with a strict gender dichotomy (for a review see Anderson, 2005; Babcock et al., 2003; Collins, 2008; Downs, 1996; Hamby, 2009; Lysova, 2016).

Studies strongly suggest that representing women’s experiences of IPV by their victimisation at the hands of male partners is reductionist (Downs, 1996; Hester, 2012; Jewkes, 2002). According to Abramsky and colleagues (2011), the application of the *relationship approach* to violence against women clearly showed the benefits of examining situational and individual characteristics and experiences of both victims and perpetrators.

However, in all types of study, it is not always easy to assess who was the instigator of the violence, whether the woman was responding in self-defence and whether perceptions of what acts constitute abuse may be different for men and women (Scarduzo et al., 2021). As stated previously, there may be differential reporting by men of victimisation as it is not associated with a masculine image and role expectancy (Taylor et al., 2021). Also, both men and women may report less severe forms of physical violence but may be less prepared to declare more severe acts. Furthermore, psychological abuse is less likely to be recognised as a form of violence by both men and women, independently of them being either the perpetrators or the victims.

Increasingly, however, rates of male victimisation, as reported in government surveys, can be as high as 1 in 12 (Office of National Statistics [ONS], 2016). It is important to note that this may represent an underestimation of the experiences of males as, for example, there may be issues of non-disclosure because of a sentiment of shame and the stigma (Taylor et al., 2021) associated with being deemed unmanly (Morgan et al., 2016). For males and females, however, regardless of the confidentiality and anonymity associated with such surveys, the most victimised may systematically exclude themselves from this form of survey and any other voluntary community sample, resulting in differences between survey data and clinical, forensic or refuge samples.

There is a dearth of research on the factors and motivators for female perpetration of IPV. Those who have investigated this suggest that women are often motivated by their emotions (e.g. jealousy and retaliation), whilst self-defence and coercive control have also been implicated (Bair-Merritt et al., 2010). Capaldi and colleagues (2012), in their systematic review, found that the correlates of IPV were similar for men and women (e.g. unemployment, low income, financial stress, exposure to violence in the family of origin, involvement with aggressive peers and antisocial behavior, being separated from a partner, and low relationship satisfaction with high conflict). Drugs and alcohol have also been identified as well as mental health issues such as depression (Costa et al., 2015). In a more recent systematic review, Laskey (2016) investigated the characteristics of female IPV perpetrators and suggested that high levels of trauma, emotional dysregulation, substance misuse, unstable mood, attachment issues and interpersonal dependency were highly prevalent.

There is little doubt that forms of violence occur in all strata of society, but there seems to be a higher frequency in lower socio-economic groups, often based on income, educational level and unemployment (Ono, 1998; Straus et al., 1980). These are settings

where individuals can have high levels of financial stress (Riggs et al., 2000; Straus, 1990b). When an individual becomes stressed, and he or she may become highly frustrated, violence may well be the outcome. This sequence of events may be acceptable for some individuals for a host of reasons. However, violence is only one of a number of possible responses to stress, and this will depend on a number of individual, situational and contextual factors. Individuals respond in different ways; some 'stonewall', while others exit from the situation, and this may depend on their level of communication skills, coping skills, and problem-solving skills.

Currently, there is a dearth of information with regard to the risk factors for IPV perpetration by women. Many of the factors that are associated with men's perpetration may be similar for women, for example, childhood abuse and antisocial attitudes, anger and aggression (Eatough et al., 2008; Leisring, 2013). Substance misuse, previous violence against intimate partners and employment issues have also been implicated (Stewart et al., 2014). Attitudes to and active involvement in antisocial behavior, both inside and outside the home, may distinguish between those at the severe end and those who engage in violence generally (Laskey, 2016).

However, it should be noted that, whilst men and women who perpetrate IPV may have some similarities, there are also differences, which may be gender specific (Mackay et al., 2018). Some have suggested that the prime motivation for women to perpetrate IPV is a form of self-defence to a real or a perceived threat, but this has not been fully explained (Miller, 2001). Other scholars have found that women who perpetrate IPV, but experience no victimisation by their partner, express high levels of anxiety and depression and symptoms of post-traumatic stress disorder (Conradi et al., 2009).

The Present Study

Much of the research on risk factors for women perpetrators has been based on criminal justice samples, and there is a dearth of information regarding those women who perpetrate IPV in the community.

The current study aims to add to the limited literature on women involved in violence against their male partners using data from the Cambridge Study in Delinquent Development (CSDD) (Farrington, 2019; Farrington et al., 2006), a prospective longitudinal study which has followed a group of males from age 8 through to age 61, were used (Farrington et al., 2021). At age 48, interviews with the female partners of the CSDD men were carried out by professional psychologists, who met the women in their home. Female partners were asked to complete the Conflict Tactics Scale (CTS) (Straus, 1979) and to take part in a face-to-face interview using a schedule, which included variables regarding the climate of their relationship with the CSDD men, their own problem behavior and life-style, and their knowledge of their partner on these variables. Differences in factors (life-style and problem behaviors) between women who perpetrated violence and those who did not were explored. Also explored was whether the knowledge of the male partner's life-style and problem behaviors differed between those women who perpetrated violence and those who did not.

The key questions are:

1. To what extent do women in the CSDD perpetrate violence, both psychological and physical, against their male partners?
2. Is there evidence of gender symmetry or asymmetry?
3. What factors are associated with women's perpetration of IPV?
4. Are these factors similar to or different from those of their male partners?

Method

Participants

The CSDD is a prospective longitudinal survey which involved 411 London males who were age 8 in 1961, when the study began. The CSDD has been carried out for over 60 years. Most of the CSDD men were Caucasian and from a working-class background, and left school by age 16 (61%); their father's employment was mainly unskilled and semi-skilled manual work in 93.7% of cases, which was higher than the national average at that time of 78.3%. Interviews with the men carried out at age 48 focused on information about their relationships and involved 365 (92.6%) of the 394 men who were still alive (Farrington et al., 2006). The men were asked if their partner, wife, or, in the event of having no partner, another person who knew them well, could be interviewed: 289 men were living with partners and 254 of these partners were interviewed (88%). Of these, 20 interviewees were excluded because they were not the man's female partner ($n = 20$).

For the purpose of this study, the women involved were 212 (out of 234 = 91%) who (according to their report) were in a serious relationship with the CSDD men and completed the CTS section. The other 22 women were excluded because they were separated ($n = 2$) or because they did not complete the CTS section ($n = 20$).

Where consent was given, the structured interview with the partner included questions about the relationship climate with the CSDD man, any conflict within the relationship in the last 5 years, measured by questions from the CTS (Straus, 1979), and about the woman's own problem behaviors and the woman's knowledge of the CSDD man's problem behaviors.

The 212 women involved in the study were on average 44.98 years old ($SD = 6.1$). Their average age at the time when they met the CSDD man and coupled with him was 24 ($SD = 8.7$). If they were married, the marriage had lasted on average just over 16 years ($SD = 10.6$). On average, they lived together for almost 3 years before they got married. If separated, they were separated for less than 2 months.

These women left school, on average, when aged 15.97 ($SD = 1.16$). While 61.6% ($n = 131$) had a basic education qualification, only 9.4% ($n = 20$) had a higher national diploma. 81.6% ($n = 173$) had a main job.

The survey received ethical approval from the Ethics Committee of the Institute of Psychiatry, King's College London.

Measures

The CTS (Straus, 1979) is a measure of IPV and was used in interviewing the female partners in the age 48 interview (see Theobald & Farrington, 2012). Although we acknowledge that the CTS has limitations (Archer, 1999) it is considered to be a reliable and valid instrument to measure IPV across different populations (Straus, 1990a).

The CTS format allows the interviewer to ask questions about the occurrence of IPV in the last 5 years. The CTS includes 16 reciprocal questions on psychological abuse (e.g. Have you cursed or sworn at him? Has he cursed or sworn at you?), minor acts of violence (e.g. Have you pushed or grabbed him? Has he pushed or grabbed you?), and serious acts of violence (e.g. Have you kicked or bitten or punched him? Has he kicked or bitten or punched you?). For the scale users' instructions, for each item, answers were provided on a 3-point Likert-type scale ranging from 0 = no, not true; 1 = sometime true; 2 = yes, very true. Internal reliability for CTS violence by the woman (Cronbach's Alpha $\alpha = .66$) and by her partner (Cronbach's Alpha $\alpha = .75$) was moderately high.

All items were then coded as dichotomous scores (0 = absent; 1 = present) (for details see Analytical Strategy section).

The Interview Schedule

The Interview Schedule combined different topics which included questions related to the woman's life. According to the focus of this study, the items that were included in the present analysis are based solely on self-reported data collected from the female partners of

the CSDD men, and they include: 8 questions regarding the age and length of the relationship with the male partner (e.g. age when they became a couple; length of marriage); 11 questions on the relationship climate (e.g. support each other in difficulty) which were dichotomised (0 = not true; 1 = yes true); 16 reciprocal questions from the CTS (see paragraph above for a description); 27 questions on the women's own problem behaviors and life-style (e.g. being fired from work; difficulty staying faithful) and 27 reciprocal questions on the same problem behaviors and life-style of men according to the woman's knowledge of it (e.g. he was fired from work; he had difficulty in staying faithful). All variables were dichotomised (0 = it never occurred; 1 = it occurred at least once).

Analytical Strategy

Given the nature of the data collected, variables were dichotomized. Despite some controversies regarding over-artificial categorization versus continuous variables, some supportive work on employing dichotomization is available (Agresti, 2007, 2019).

According to Farrington and Loeber (2000), dichotomization is useful because it produces meaningful findings that are easily understood and communicated to policy makers and practitioners. Individuals are rather more interesting than variables: the dichotomization of explanatory variables encourages the identification of those individuals who are directly influenced by several risk factors, and who may specifically benefit from specialised prevention efforts (Farrington & Loeber, 2000). Furthermore, dichotomization also makes it possible to compare the predictive strengths of variables, to equalise the sensitivity of their measurement, and to better understand which findings can be translated into practice.

The odds ratio (OR) is the best measure of strength of association between dichotomous variables, and it was chosen for this study. It is easily understandable as the increase in the odds (risk) of an outcome associated with the presence of the risk factor under examination.

First, the CTS items were compared to investigate the prevalence of their occurrence in CSDD men's perpetration and victimization, according to the women's accounts. This makes it possible to explore the presence of possible gender symmetry or asymmetry. Moreover, the accounts of relationship climate from female partners of the CSDD men were explored, comparing those women who perpetrated IPV versus those who did not.

Second, CTS items were summed in order to have a general CTS score of men's perpetration and victimisation. A further distinction of the violence was made to identify psychological IPV and physical IPV.

Third, the strength of the relationship of the problem behaviors and life-style of the women who self-reported IPV was compared with that of women who did not report IPV.

Fourth, women's behavior problems and life-style were explored along with their knowledge of the same problem behavior and life-style of their male partners.

Odds ratios and 95% confidence intervals (CIs) were computed to investigate these aspects.

Results

The aim of this study was to investigate which factors were likely to be related to perpetration of IPV by women in the community.

In order to explore this, women were asked whether they had ever perpetrated any of the CTS violence items. Women were also asked to give their accounts of the type of the relationship they had with their partners. Table 1 shows the findings from the CTS questionnaire completed by female partners.

To what extent do women in the CSDD perpetrate violence against their male partners?

Scores on women's perpetration against male partners were calculated: on their own account, 88.2% of women perpetrated CTS violence. 87.7% of women admitted perpetrating psychological violence, and in 33% of the cases they perpetrated physical violence.

It was not possible to explore whether this emerged out of a form of retaliation against the violence they endured by their male partner. However, these preliminary findings suggest some symmetry between CTS violence perpetrated by women according to their own account, and CTS violence perpetrated by their male partners according to the women's own account. In total, 78.8% of the women reported that their male partner had committed acts of CTS violence by their partner towards them. Specifically, 78.8% of women reported acts of psychological violence, and 24.5% reported acts of physical violence (see Table 1).

Is there evidence of gender symmetry or asymmetry?

TABLE 1 HERE

Not surprisingly, the total scores on CTS scales were highly correlated (Spearman's $\rho = .561, p < .001$), which show the high co-occurrence of both male perpetration and male victimisation within the same couple, according to the woman's account. The scores on psychological violence were also significantly correlated (Spearman's $\rho = .580, p < .001$). This was true also for physical violence (Spearman's $\rho = .532, p < .001$) (see Table 1).

Taking these findings into consideration, the relational climate was explored. Table 2 summarizes how the women involved in the study, who perpetrated psychological and physical violence, described the relational climate shared with their male partners, in comparison with those who did not perpetrate IPV.

While no significant differences were identified in how women who perpetrated psychological violence described the climate of the relationship with their male partners, in comparison with those women who did not, some differences emerged when looking at physical violence. For instance, it was significantly more likely for women who did not perpetrate physical violence to report that in their relationship it was easy to express their own opinion, to discuss problems in a constructive way, in comparison with those women who perpetrated physical violence.

Moreover, their partner was more likely to be described as trustworthy by women who did not perpetrate physical violence than by those who perpetrated physical violence. No other significant differences were found in other aspects of their relationship. (See table 2 for a synthesis of the results).

TABLE 2 HERE

What factors are associated with women's perpetration of IPV?

Moving specifically to the third research question, table 3 reports the odds ratio and 95% CI in the analysis carried out to explore the extent to which women's problem behaviors and life-style differed between women who perpetrated IPV and women who did not. For instance, the odds of being fired from work were almost three times greater for those who perpetrated physical violence (OR: 2.79; 95% CI = 1.05-7.43, $p = .03$). As expected, drinking and drug problems were more likely to be associated with physical violence. The only behavior that was significantly associated with psychological violence by women was lying or tricking people to get what they wanted. The odds of lying or tricking people were almost four times higher for a woman who perpetrated psychological violence than for a woman who was not psychologically violent (OR: 3.55; 95% CI = 1.18-10.73, $p = .01$).

TABLE 3 HERE

Are these factors similar to or different from those of their male partners?

Women's accounts of their own and their partner's problem behaviors and life-style were examined. Table 4 shows the proportion of women involved in certain behaviors and having a certain life-style, compared with the proportion of men involved in the same behaviors according to the women's knowledge of them.

Findings show that, when a woman was involved in a certain problem behavior, it was likely that her male partner manifested the same behavior. For instance, in 32 cases the woman admitted having problems in paying debts, and in 11 of these cases (34.4%) the man

also failed to pay his debts. In 179 cases the woman did not fail in paying her debts, but in 4 cases (2.2%) the man failed. This was measured by the OR = 22.92 (95% CI = 6.69-78.45; $p = .001$), which was highly significant and showed that the probability of the man failing to pay his debts was much greater when the woman failed to pay her debts too. As shown in Table 4, the larger the OR, the more concordance between female and male behavior problems. Regarding the problem of leaving one's own partner without warning, in 18 cases the woman had left, and in 2 of these cases (11.1%) the man had also left. In 190 cases the woman had not left, but in 2 of these cases (1.1%) the man had left; therefore, the probability of the man leaving his partner without warning was much greater when the woman left. Hence, there was concordance between the woman's and man's problem behavior; this was measured by the OR = 11.75 (95% CI = 1.55-89.05; $p = .04$) which was highly significant.

Drinking and drug abuse seemed to have influenced the life-style of the women and their male partners. For instance, in 46 cases the woman reported taking drugs, and in 16 cases (34.8%) the man had also used drugs. On the other hand, in 163 cases the woman had not used any drugs, but in 14 of these cases (8.6%) the man did. Therefore the probability of the man using drugs was much greater when the woman used drugs as well (OR: 5.68: 95% CI = 2.51-12.86; $p = .001$). Other antisocial behaviors such as making money illegally, or ever being in jail or neglecting family and social obligations, because of drinking or drugs, showed a significant concordance between the female and male behavior (see Table 4 for details).

TABLE 4 HERE

Discussion

IPV is a major public health problem with serious implications for individuals, families and society. The aim of this research was to explore the intimate partner violence as a form of violence that occurs within the intimate space of a relationship, and not outside it.

While women are most likely to be at greater risk of systematic violence, serious injury and death (Zara et al., 2021), international studies are raising attention to the importance of looking at the nature and quality of the relationship between men and woman who can be both perpetrators and victims of couple violence.

The level of correlation between perpetration and victimization of physical and psychological violence found in this research suggests that IPV does not occur outside the relationship climate, and that it is the type and quality of interaction between partners that seem, to a certain extent, to contribute to the escalation of violence and its reciprocity.

Specifically, the findings from the CTS questionnaire completed by the female partners suggest that both men and women in the CSDD committed both psychological and physical violence, highlighting the gender symmetry found in other community samples (Ahmadabadi et al., 2021; Magdol et al., 1997; Straus et al., 1980).

One factor that is commonly associated with IPV is dysfunctional interpersonal interactions with others and this might include an inability to effectively express and modulate emotions. While it was not possible to investigate whether women's violence resulted from some form of retaliation for violence perpetrated on them by their partners, it was more likely that when the "relationship climate" is based on trust between partners, women were less likely to report experiences of violence suffered or perpetrated. It is therefore important to explore in further studies the hypothesis of bidirectionality of violence, which also takes into account the effects of male violence on female partner behavior and *vice versa*.

According to our results, women who perpetrated physical violence, compared with those who did not, reported that their partner was untrustworthy. This may indicate that women who do not feel secure and respected in their relationship may resort to violence to re-establish a sort of control over their life (Caldwell et al., 2009; Zara et al., 2020). Moreover,

women who committed violent acts reported that it was not easy for them to express their opinions to their partners. This seems to suggest that the 'relationship climate' was characterized by a lack of effective communication, with both partners having difficulty with verbal expression and resorting to psychological and physical abuse. It is important to note that individuals who have antisocial lifestyles and poor problem-solving skills, and who live in a dysfunctional relationship and communicate poorly, may be ill-equipped to deal with the inevitable frustrations that arise in relationships.

Our findings also suggest that there are differences between the women who admit CTS violence and those who do not. Women who perpetrated both psychological and physical violence were more likely to have a life style characterized by debts, lying and tricking people to get what they wanted. This lying and trickery possibly suggests the probability that some manipulative traits are behind coercive and violent behavior (Bair-Merritt et al., 2010). There was also evidence that indicated problems with alcohol and drug misuse by these women. Alcohol and drugs are implicated in the perpetration of IPV and violence in general in both men and women (Capaldi et al., 2012; Theobald et al., 2016b).

When considering the possible similarities and differences between the men and the women in the CSDD who perpetrated violence, we were only able to show this using proportions of individuals who demonstrated specific behaviors, as reported by the women only.

Consistent with other studies (see Theobald & Farrington, 2012; Theobald et al., 2016a), these findings also show that women who perpetrated IPV shared many of the same characteristics as their male partner, including similar motives and psychosocial factors (e.g. prior aggression, substance use, relationship style, etc.). In addition, their male partner exhibited antisocial tendencies and was more likely to engage in behaviors that did not inspire trust, such as drug and alcohol abuse, petty crime, and violence outside the home.

These findings suggest (see Table 4) that women's problem behaviors and lifestyles were exacerbated in the relationship context, where gender symmetry likely played an important role. However, more specific data are needed to analyze whether the women's behaviors and lifestyles emerged as a result of what they experienced over the course of the relationship with their male partners, who exhibited similar problematic behaviors. For example, drinking caused problems in the relationship for both the men and the women, as did making money illegally.

Women who perpetrate IPV against their male partners may mostly do so as a form of retaliation against an abusive spouse or partner or may use violence in self-defence (Asmus, 2004). Some women may act to protect their children (Stewart et al., 2014). However, there may also be a small number of women who perpetrate IPV against their partners without themselves being abused (Dixon et al., 2020). No doubt all of these differential IPV responses call for specific and further scientific and governmental attention because they constitute serious threats to interpersonal, family and individual health (Bair-Merritt et al., 2014; Campbell, 2002).

Effective prevention of IPV must be informed and led by scientific evidence. Findings with regard to women who perpetrate intimate violence can inform services, both within and outside the criminal justice system, about which differential needs should be detected to mitigate the risk of being a victim and a perpetrator of IPV. For the most part, previous studies have investigated incarcerated female offenders of IPV, but we have shown that women in the community are not dissimilar.

The fact that the prevalence of women who perpetrate IPV is small should not stop research from exploring why some women found themselves in a relationship in which violence seems to be the means to relate to their male partners. As Moffitt and colleagues (2001) put it "the argument that women's abuse perpetration in the community is too trivial

to research could prove to be tantamount to arguing that smoking in the community is too trivial to research and scientists should focus on cases of lung cancer [...]” (Moffitt et al., 2001, p. 68, also cited in Carney et al., 2007, p. 110).

Interventions should be developed to address the needs of these women and explore the multidimensional condition of victimness that influences the life of many women and families, rather than basing interventions on factors that may be wholly associated with male perpetrators.

Limitations

The CSDD has many strengths but we acknowledge some limitations in the present study. First it is related to the instrument used to assess intimate violence. The CTS, whilst being widely used for measuring the prevalence of both perpetration and victimisation of IPV (Archer, 1999) has some limitations. As suggested in other studies (Ahmadabadi et al., 2021; Lehrner & Allen, 2014) the CTS does not measure motivations or consequences of violence but rather acts of violence. It relies heavily on the frequencies of violence and does not take into account the contextual factors such as chronicity of abuse and fear of the victim and may, therefore, not be a true reflection of the differential lived experiences. There is also reliance on the self-report of the women on their own behavior and that of their partner. This might suggest the possibility of ‘effect after meaning’ where the recollections of past events or behaviors are made based on what is known today.

Moreover, this study does not allow exploring further the intensity and types of violence endured by women involved in a relationship with the CSDD men, beyond that described by the CTS scale.

Furthermore, it would have been important to explore the sequential path of intimate violence so as to establish whether women’s violence was acted out as a form of retaliation

against violence perpetrated by their partners. This was not possible to investigate given the type of data available.

Further perspectives

The perpetration of violence can lead to negative physical and mental health outcomes across the lifespan (Theobald et al. 2016a). This is why intervention should lead to implementing programmes based on the development of healthy relationships, both in the home and in the community. Future research should also further distinguish what factors are specific to women who perpetrate IPV, in order that intervention programmes should fit the needs of this group. Models based on a typology of IPV perpetrators may well be more applicable to intervention programmes for this group in both the criminal justice system and community programmes.

The developmental hypothesis of *assortative mating* of men and women (Carbone-Lopez & Kruttschnitt, 2010), who select or are selected by each other into what becomes a «relational clamp», could contribute to deepen our understanding of the origins of abusive relationships. This is certainly an area that deserves further exploration. In line with other research (Ehrensaft et al., 2004; Moffitt et al., 2001), we have found signs of violence mutuality and this should deserve attention in further investigations.

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Endnote

¹ Psychological abuse is often a precursor to physical violence and some studies have found strong correlations between the two forms of abuse: .74 for perpetration and .78 for victimisation in Magdol and colleagues (1997).

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Table 1 – Conflict Tactic Scales (CTS)

Women's reports on CTS reciprocal questions (<i>n</i> = 212)						Test
Last 5 years	<i>n</i>	%	Last 5 years	<i>n</i>	%	Spearman Correlation (rho)
Psychological violence by women	186	87.7	Psychological violence by men	167	78.8	.580**
You cursed or swore at him	179	84.4	He cursed or sworn at you	160	75.5	
You ordered him around	113	53.3	He ordered you around	93	44.1	
You insulted or shamed your partner	32	15.1	He insulted or shamed you	40	18.9	
Physical violence by women	70	33.0	Physical violence by men	52	24.5	.532**
You pushed, grabbed, or shoved your partner	45	21.2	He pushed, grabbed, or shoved you	39	18.4	
You slapped your partner	29	13.7	He slapped you	17	8.0	
You shook your partner	5	2.4	He shook you	8	3.8	
You threw an object at your partner	32	15.1	He threw an object at you	14	6.6	
You injured through conflict	7	3.3	He injured you through conflict	2	0.9	
You kicked, bit, or hit your partner	13	6.1	He kicked, bit, or hit you	9	4.2	
You hit or tried to hit your partner with something	11	5.2	He hit or tried to hit you with something	5	2.4	
You physically twisted your partner's arm	--	--	He physically twisted your arm	1	0.5	
You threw or tried to throw your partner bodily	--	--	He threw or tried to throw you bodily	4	1.9	
You beat your partner up	1	0.5	He beat you up	2	0.9	
You choked or strangled your partner	1	0.5	He choked or strangled you	4	1.9	
You threatened your partner with a knife or gun	2	0.9	He threatened you with a knife or gun	2	0.9	
You used a knife or gun on your partner	--	--	He used a knife or gun on you	--	--	
Total CTS Score by women	187	88.2	Total CTS Score by men	167	78.8	.561**
Nr. of CTS acts committed						
	<u>M</u>	<i>SD</i>		<u>M</u>	<i>SD</i>	Paired Sample t-test (<i>df</i> = 211)
By women	2.22	1.66	By men	1.89	(1.81)	-3.13**

Note: ** $p < .001$

Table 2 - Relationship Climate

How women described their relationships with their partners	Women who perpetrated psychological violence					Women who perpetrated physical violence				
	No (<i>n</i> = 26)		Yes (<i>n</i> = 186)		Odds Ratio	No (<i>n</i> = 142)		Yes (<i>n</i> = 70)		Odds Ratio
	<i>n</i>	%	<i>n</i>	%		<i>n</i>	%	<i>n</i>	%	
Support each other in difficulty	25	96.2	183	98.4	2.44	139	97.9	69	98.6	1.49
Easy to express each other's opinions	24	92.3	164	88.2	.621	132	93.0	56	80.0	.303**
Stable relationship	25	96.2	174	93.5	.580	135	95.1	65	92.9	.674
Discuss problems and comfortable with solutions	23	92.0	161	86.6	.560	128	90.8	56	80.0	.406*
Partner is honest and truthful	25	96.2	160	86.5	.256	130	92.2	55	78.6	.310**
Partner is trustworthy	25	96.2	170	91.4	.425	136	95.8	60	85.7	.265**
We feel close to each other	24	92.3	173	93.0	1.11	135	95.1	62	88.6	.402 [†]
Count on partner for help	25	96.2	181	97.3	1.45	140	98.6	67	95.7	.319
Partner is sincere in his promises	25	96.2	170	91.9	.453	134	94.4	61	88.4	.455
Partner not reliable with problems	25	96.2	179	96.2	1.02	139	97.9	66	94.3	.356
Partner makes me feel loved	25	96.2	169	90.9	.398	132	93.0	62	88.6	.587

Note: Percentages exclude missing values.

[†]*p* < .10; * *p* < .05; ** *p* < .01; *** *p* < .001.

Table 3 – Behaviour Problems of Women who Perpetrated Violence versus Women who did not

Behaviour Problems	Psychological Violence					Physical Violence				
	No (<i>n</i> = 26)		Yes (<i>n</i> = 186)		Odds Ratio	No (<i>n</i> = 142)		Yes (<i>n</i> = 70)		Odds Ratio
	<i>n</i>	%	<i>n</i>	%		<i>n</i>	%	<i>n</i>	%	
Been fired from work	1	3.8	17	9.1	2.52	8	5.6	10	14.3	2.79**
Failed to pay debts	1	3.8	32	17.2	5.19**	14	9.9	18	25.7	3.17**
Left partner with no warning	1	3.8	17	9.1	2.52	8	5.6	10	14.3	2.79*
Difficulty staying faithful	1	3.8	12	6.5	1.72	7	4.9	6	8.6	1.81
Lied or tricked people to get what you want	4	15.4	73	39.2	3.55**	45	31.7	32	45.7	1.82*
Used a weapon	1	3.8	5	2.7	.874	2	1.4	3	4.3	3.13
Been in jail	1	3.8	5	2.7	.874	1	0.7	4	5.7	8.55*
Made money illegally	1	3.8	6	3.2	.874	2	1.4	4	5.7	4.24 [†]
Drunk too much	21	80.8	171	91.9	2.71 [†]	127	89.4	65	92.9	1.54
Took drugs	2	7.7	45	24.	3.83*	27	19.0	20	28.6	1.70 [†]
Been a normal drinker/user	24	96.0	160	87.4	.290	126	90.6	58	84.1	.544
Friends think you drink/use normally	25	96.2	166	90.7	1.15 [†]	133	95.7	58	84.1	.238**
Anyone complained about your drinking/using	2	8.0	16	8.7	1.10	11	7.9	7	10.1	1.31
Drinking/using created problems with partner	2	8.0	25	13.7	1.82	13	9.4	14	20.3	2.47*
Drinking/drug use ever created problems	1	4.0	10	5.5	1.39	3	2.2	8	11.6	5.95**
Neglected obligations through drinking/drugs	1	4.0	5	2.7	.674	2	1.4	5	5.8	4.13 [†]
Got in trouble through drinking/drugs	1	4.0	3	1.6	.400	2	1.4	2	2.9	2.05
Felt guilty about drinking/drugs	2	8.0	33	18.	2.53	16	11.5	19	27.5	2.92**
Spent too much on alcohol/drugs	2	8.0	24	13.1	1.74	13	9.4	13	18.8	2.25*
Able to stop drinking/drugs at will	24	96.9	172	94.5	.717	131	94.9	66	95.7	1.18
Drinking/drugs ever caused injuries	1	3.8	17	9.1	2.52	8	5.6	10	14.3	2.79*
Seen anyone for drink/drug problems	1	4.0	18	9.8	2.62	9	6.	10	14.5	2.45*
Attended drinking/drug meeting	1	4.0	7	3.8	.955	2	1.4	6	8.7	6.52**

In hospital with drinking/drugs	1	4.0	8	4.4	1.10	5	3.6	4	5.8	1.65
Arrested for drunk/drug driving	1	4.0	1	0.5	.132	1	0.7	1	1.4	2.03
Arrested for other drinking offences	1	4.0	1	0.5	.132	1	0.7	1	1.4	2.03
Problem occurred in the past five years	1	4.0	12	6.6	1.68	8	5.8	5	7.2	1.28

Note: Percentages exclude missing values.

The problem behaviour of ‘using force to steal’ was not included in the table because no woman reported it either for herself or for her male partner.

† $p < .10$; * $p < .05$; ** $p < .01$; *** $p < .001$.

Table 4 – Man’s Problem Behaviours versus Woman’s Problem Behaviours

% man problem behaviours /woman problem behaviours (A)			% man problem behaviours /woman not problem behaviours (B)			Odds Ratio
In the whole life time	<i>n</i>	%	In the past 5 years	<i>n</i>	%	A/B
Been fired from work (<i>n</i> = 18)	1	5.6	He was fired from work (<i>n</i> = 192)	5	2.6	2.20
Failed to pay debts (<i>n</i> = 32)	11	34.4	He failed to pay debts (<i>n</i> = 179)	4	2.2	22.92***
Left partner without warning (<i>n</i> = 18)	2	11.1	He left partner without warning (<i>n</i> = 190)	2	1.1	11.75*
Difficulty in staying faithful (<i>n</i> = 12)	1	8.3	He had difficulty in staying faithful (<i>n</i> = 192)	7	3.6	2.40
Lied or tricked people to get what you want (<i>n</i> = 73)	18	24.7	Lied or tricked people to get what he wants (<i>n</i> = 129)	7	5.4	5.70***
Used a weapon (<i>n</i> = 5)	1	20.0	He used a weapon (<i>n</i> = 206)	3	1.5	16.92*
Been in jail (<i>n</i> = 5)	2	40.0	He ever been in jail (<i>n</i> = 206)	1	0.5	136.67***
Made money (<i>n</i> = 6)	2	33.3	He made money illegally (<i>n</i> = 204)	4	2.0	25.00**
Drunk too much (<i>n</i> = 192)	122	63.5	He drinks too much (<i>n</i> = 20)	11	55.0	1.43
Taken drugs (<i>n</i> = 46)	16	34.8	Use drugs (<i>n</i> = 163)	14	8.6	5.68***
Been a normal drinker/drug user (<i>n</i> = 180)	146	81.1	He feels he is a normal drinker/drug user (<i>n</i> = 23)	14	60.9	2.76*
Friends think you drink/drug use normally (<i>n</i> = 186)	156	83.9	Friends think he is a normal drinker/drug user (<i>n</i> = 16)	10	62.5	3.12*
Anyone complained about your drinking/using (<i>n</i> = 18)	9	50.0	Close relative complained about his drinking/drugs (<i>n</i> = 187)	58	31.0	2.22†
Drinking/drug use created problems with partner (<i>n</i> = 26)	6	23.1	Drinking/drug use caused problems with family (<i>n</i> = 176)	22	12.5	2.10
Drinking/drug use ever created problems (<i>n</i> = 11)	3	27.3	His drinking/drugs created problems (<i>n</i> = 192)	33	17.2	1.81
Neglected obligations through drinking/drugs (<i>n</i> = 6)	2	33.3	Has he neglected obligations (<i>n</i> = 198)	11	5.6	8.50*
Got in trouble through drinking/drugs (<i>n</i> = 4)	1	25.0	Trouble at work through his drinking/drugs (<i>n</i> = 199)	4	2.0	16.25
Felt guilty about drinking/drugs (<i>n</i> = 31)	9	29.0	Feel guilty about drinking/drugs (<i>n</i> = 163)	23	14.1	2.49*
Spent too much on alcohol/drugs (<i>n</i> = 26)	15	57.7	He spent too much on alcohol/drugs (<i>n</i> = 179)	45	25.1	4.06**
Able to stop drinking/using drugs at will (<i>n</i> = 192)	174	90.6	Stop drinking/using drugs at his will (<i>n</i> = 10)	8	80.0	2.42
Drinking/drugs ever caused injuries (<i>n</i> = 18)	7	38.9	Drinking/drug use caused him injuries (<i>n</i> = 191)	25	13.1	4.23**
Seen anyone for drink/drug problems (<i>n</i> = 19)	1	5.3	Sought help with drinking/drugs using (<i>n</i> = 183)	6	3.3	1.64

Attended drinking/drug meeting ($n = 8$)	1	12.5	Received treatment for drinking/drugs ($n = 195$)	2	1.0	13.79 [†]
In hospital with drinking/drugs ($n = 9$)	1	11.1	Hospitalised for drinking/drugs ($n = 194$)	14	7.2	1.61
Arrested for drunk/drug driving ($n = 2$)	1	50.0	Arrested for driving with alcohol/drugs ($n = 200$)	25	12.5	7.00
Arrested for other drinking offences ($n = 2$)	1	50.0	Arrested under the influence of alcohol/drugs ($n = 199$)	19	9.5	9.47

Note: Percentages exclude missing values.

The problem behaviour of ‘using force to steal’ was not included in the table because no woman reported it either for herself or for her male partner.

[†] $p < .10$; * $p < .05$; ** $p < .01$; *** $p < .001$.