Aggression and Violence in Romantic Relationships

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Abstract

Romantic partners do not always abide by expectations for loving relationships. Because romantic involvements often satisfy needs for connection, security, and intimacy, it becomes deeply painful when partners become aggressive. This chapter reviews existing theory and research on the causes, nature, and consequences of partner aggression, and critically examines existing theoretical frameworks and assumptions about typologies and gender differences. We discuss the relational context of partner aggression, such as the role of dependence, commitment, and cognitive processes that may lead individuals to justify remaining in an aggressive relationship. Individuals may fail to recognize the harm caused by verbal and emotional aggression. Finally, we discuss the efficacy of efforts to reduce partner aggression, and conclude by suggesting that a greater understanding of partner aggression may empower individuals to make effective relationship choices that address their needs.
Aggression and Violence in Romantic Relationships

Romantic relationships provide deeply meaningful interactions and experiences. People establish such relationships with aspirations and expectations of having a partner who will be caring and satisfy relational needs. Unfortunately, most relationships undergo moments in which partners fall short of each other’s aspirations and expectations. Other chapters in this handbook have described troubled relationships involving dishonesty (Knapp & Levine, this volume), infidelity (Buunk, Dijkstra & Massar, this volume), or personal stressors (Cutrona, Bodenmann, Randall, Clavé, & Johnson, this volume), which often cause relational distress. We suggest that partner aggression is uniquely personal and painful. Being directly harmed, devalued, dehumanized, dominated, or controlled by a partner elicits significant and persistent concerns that eventually cause personal distress. We begin by defining partner aggression, followed by a summary and critique of influential perspectives on causes of partner aggression. We then discuss how and why relationships provide a unique context for aggression, worthy of study independently from a general aggression framework. We also discuss intervention efforts to prevent and reduce aggression in relationships.

Conceptualizing Partner Aggression

Our chapter focuses on romantic relationships rather than on general contexts of interpersonal aggression (e.g., bullying among peers). “Partner aggression” and “intimate partner violence (IPV)” often are used interchangeably to capture harmful behavior towards a partner who does not desire such behavior. We will use partner aggression to include all forms of aggression, and reserve the term “intimate partner violence” for the use of physical force or physical acts that are directed at a partner and cause physical pain or injury (e.g., slapping, punching; see Murray, 1999, for a justification of this conceptualization).
Throughout the chapter, we adopt a broad definition of partner aggression consistent with Richardson’s (2014) general conceptualization of interpersonal aggression. Partner aggression involves unwanted acts – direct and overt or indirect and subtle – that are likely to harm a partner, including physical force, verbal abuse (e.g., insulting or denigrating a partner), threats, fear-inducing behavior, sexual coercion, and manipulative behavior enacted with hurtful intentions (e.g., using the silent treatment). Also included is behavior designed to dominate or to control a partner, such as disrupting a partner’s employment, monitoring text messages/emails, controlling contact with others, or limiting access to money and basic resources (i.e., acts frequently categorized as emotional or emotional aggression).

Our broad definition of partner aggression emphasizes that harmful and unwanted partner behavior are not limited to physical and verbal acts (Richardson, 2014). Although physically aggressive behavior is readily interpreted as “aggression” and is often assumed to cause greater harm than non-physical aggression (e.g., Capezza & Arriaga, 2008), non-physical aggression nonetheless is harmful (e.g., Jordan, Campbell, & Follingstad, 2010). Psychological aggression predicts greater long-term psychological pain than does physical aggression (Arias & Pape, 1999; Lawrence, Yoon, Langer, & Ro, 2009). People who experience psychological aggression develop deep-seated feelings of unworthiness that outlast the pain or fear that occurs from physical partner violence (Follingstad, Rutledge, Berg, Hause, & Polek, 1990). However, because psychological forms of aggression do not leave physical marks, people affected by psychological aggression may struggle to understand and to recognize how their relationship causes them distress (Arriaga & Schkeryantz, 2015; Follingstad et al., 1990). This is concerning because of the soaring rates of non-physical forms of aggression among college and non-clinical marital samples (Hines & Saudino, 2003; Taft et al., 2006).
What Causes Partner Aggression to Occur?

We summarize two highly influential frameworks for understanding causes of partner aggression: I3 theory (Slotter & Finkel, 2011) and Johnson’s typology (Johnson, 2006). We refer readers to other sources for a review of additional approaches (Finkel & Eckhardt, 2013; Bartholomew, Cobb & Dutton, 2014), or for discussion of the negative consequences of partner aggression (e.g., Jordan et al., 2010). For each framework, we describe the basic tenets and provide a critique, which suggests ways to improve our theoretical models of partner aggression.

Johnson’s Typology

Johnson (1995; 2006) suggested that there are distinctly different forms of partner violence including intimate terrorism, violent resistance, and situational couple violence. His typological framework is noteworthy because it organizes seemingly conflicting data on the characteristics and prevalence of partner aggression, identifies different causes and consequences, and suggests policy implications and interventions that fit each type of partner aggression (Johnson & Ferraro, 2000).

Johnson first proposed his framework to integrate contentiously divided perspectives over the existence and prevalence of gendered patterns in couple violence (Johnson, 1995). The feminist perspective contended that couple violence is rooted in patriarchal norms that govern relationships and afford men the right to control their wives (Dobash & Dobash, 1979). This perspective focused on the controlling and violent partner behavior that characterized the experiences of women in shelters and implicated a need to change patriarchal beliefs. The family violence perspective, on the other hand, was primarily concerned with a gender-neutral pattern involving violence that was less severe or intensive, less controlling, but much more pervasive in American households (Straus, 1999). Johnson reconciled these differing perspectives by
suggesting that they each occur and correspond to distinct phenomena: intimate terrorism/violent resistance and situational couple violence.

**Intimate Terrorism and Violent Resistance.** Johnson classified the type of violence that was the focus of feminist research as intimate terrorism. Such violence involves severe, frequent, one-sided violence (i.e., primarily by one partner, generally the male) enacted to exert power/control within a relationship and that escalates over time (Graham-Kevan & Archer, 2003). Colloquially, it is what most likely comes to mind when the term “domestic abuse” is used, and includes coercion and threats, emotional abuse, economic abuse, intimidation, isolation, and male privilege (cf. Pence & Paymar, 1993). The major controversy that Johnson attempted to resolve concerned inconsistent gender patterns (Johnson & Ferraro, 2000). Large-scale survey studies suggested gender symmetry in violence perpetration, whereas police/crime statistics and shelter samples suggested that men were more likely than women to perpetrate fear- and injury-inducing behavior. Johnson adopted feminist perspectives suggesting that intimate terrorism reflects patriarchal norms that tolerate male figures “owning” and controlling their wives (Dobash & Dobash, 1979).

Clinical research revealed that perpetrators who were extremely violent, controlling, and who escalated their violence – those fitting the description of intimate terrorists – frequently exhibited personality disorders (Holtzworth-Munroe, Meehan, Herron, Rehman, & Stuart, 2000; Jacobson & Gottman, 1998). Some types fit with a pattern of borderline personality disorder (Dutton, Bodnarchuk, Kropp, Hart, & Ogloff, 1997), as reflected by seeking control out of fear of losing a partner and excessive dependency or jealousy. Others fit with traits of antisocial personality disorder, as reflected by generally hostile and violent behavior across different contexts, reduced emotional reactivity, and a lack of connection to a relationship partner.
(Holtzworth-Munroe et al., 2000). Both types exhibit poor social skills, impulsivity, and accepting attitudes towards the use of violence (Holtzworth-Munroe et al., 2000).

Violent resistance is the term Johnson used to describe victims of intimate terrorism who eventually respond in kind (Johnson & Ferraro, 2000). Thus, intimate terrorism and violent resistance are theorized to be two sides of violent relationship. Although most victims of intimate terrorism will reciprocate violence at some point, their own violent responses increase the risk of their being further victimized and injured by their partner (Dasgupta, 2002). Victims may use violent resistance to escape their abusive partner, and there are documented cases of victims who resort to killing their abusive partner (Browne, 1986; Roberts, 1996; Walker, 1989). As with intimate terrorism, violent resistance is hypothesized to follow a gendered pattern whereby women may be more likely to use violence in self-defense.

**Situational couple violence.** Johnson proposed the term situational couple violence to classify partner aggression that was the focus of family violence research. Situational couple violence is an extension of relational conflict or angry dyadic interactions; it occurs when typical couple conflicts “get out of hand” and occasionally escalate to violence (Johnson, 2006; Johnson & Ferraro, 2000). Situational couple violence is common, varies in severity, covaries with the escalation of verbal aggression, and may originate with one or both partners lacking adequate problem-solving skills to work through a conflict in nonaggressive ways.

Several characteristics differentiate situational couple violence (SCV) and intimate terrorism (IT; Johnson, 2006). SCV is thought to occur almost exclusively during conflict or negatively-valenced interactions in which dysfunctional communication patterns cause heightened distress and one or both partners lash out. SCV varies in frequency across couples; some couples may regularly strike out and others may experience singular instances of
aggression. In contrast, IT is thought to reflect a generalized pattern of dehumanizing a partner beyond the context of conflict interactions through pervasive and intentional controlling behaviors, which function to deprive and terrorize a victim (e.g., controlling contact with others, withholding money or other resources). Unlike intimate terrorism and violent resistance, SCV is not theorized to follow a clear gendered pattern (Johnson, 2006).

I^3 Theory

Finkel proposed I^3 (2007) as a meta-theory to synthesize a myriad of factors that combine to cause violence perpetration (Finkel & Eckhardt, 2013; Slotter & Finkel, 2011). I^3 postulates that intimate partner violence occurs as a result of one or more of three fundamental processes: instigation, impellance, and inhibition (hence the name “I^3”). *Instigation* factors are discrete events or circumstances that trigger an urge to aggress. Some triggers are inherent to a relationship, such as an argument with a partner, a partner’s attempt to exert control, the belief that a partner has been unfaithful, or verbal abuse. Other triggers originate outside the romantic context, such as being rejected by peers or being agitated in family interactions (Slotter & Finkel, 2011).

*Impellance* factors create a readiness to respond aggressively to an instigating event, which may include cultural norms, dispositional anger, or other personality characteristics that elevate propensities towards aggression (Slotter & Finkel, 2011). Impellance factors also include chronic relational tendencies, such as jealousy, relational insecurity, or dissatisfaction with power (Holtzworth-Munroe, Stuart, & Hutchinson, 1997), and even momentary psychological states that increase aggressive tendencies, such as feeling psychologically depleted or being under the influence of alcohol or other substances. *Inhibition* factors override the urge to aggress, and as such, they operate in opposition to impellance factors. Examples include cultural
disapproval of intimate partner violence (Archer, 2006), high dispositional self-control (Finkel, DeWall, Slotter, Oaten, & Foshee, 2009), and relationship commitment (Slotter et al., 2012).

In addition to identifying the processes underlying intimate partner violence, another crucial feature of I3 theory is the interplay between specific processes that cause aggression. The meta-theory suggests that IPV is most likely when an instigating event occurs to an individual whose urge to aggress exceeds counteracting forces (i.e., impellance overrides inhibition). Recently described as the Perfect Storm Theory, aggression is most likely to occur when instigation and impellance are strong and inhibition is weak (Finkel et al., 2012).

**Critique**

We elected to discuss these two frameworks because they possess several desirable properties: They integrate many factors that likely cause aggression, and take into account how factors combine into specific patterns of partner aggression, they are flexible in accounting for different situations in which aggression occurs, and they have spawned new and innovative research. We discuss these frameworks in terms of their convergence in describing partner aggression, and identify gaps that remain in understanding causes of partner aggression.

**How well does each framework account for various manifestations of partner aggression?** Johnson’s (2006) framework is noteworthy in the extent to which it describes different forms of partner aggression (e.g., controlling behavior), specifies the contexts in which aggression might occur (i.e., beyond conflict situations), and differentiates underlying motives (e.g., exerting generalized control and power over a partner, versus controlling the outcome of a specific dispute). A main idea of Johnson’s analysis is that situational couple violence involves motives, behaviors, and contexts that often are different from those characterizing intimate
terrorism and violent resistance. Because of their different signature patterns, Johnson suggest that they call for distinct interventions.

A key challenge is to understand better the causes of violence that fits the signature pattern of intimate terrorism. Although for decades it was assumed that this pattern was uniquely male-perpetrated, the idea that patriarchal beliefs uniquely cause intimate terrorist behavior has been criticized (as we discuss below). To better understand intimate terrorism, we need better methods and measures for assessing holistic patterns that may transcend a specific behavior or act. Intimate terrorism may not involve a uniform set of behaviors (see Kirkwood, 1993). Intimate terrorists, for example, gradually gain sole dominion over their partner’s self-concept, weaken their partner’s sense of autonomy, monitor their partner’s text or email communication; isolate the partner from others, and manipulate their partner’s self-views through seemingly innocuous comments (e.g., how the partner looks, what the partner is doing). Conventional self-report measures that tally discrete and specific behaviors are unlikely to capture patterns that fit with intimate terrorism.

A second challenge is to account for the context of and motives for aggressive actions. Johnson’s (2006) distinctions suggest that the same behavior can have vastly different motives and consequences depending on how and when it is delivered (Cercone, Beach, & Arias, 2005). Self-report measures may not be adequate for tapping a person’s involvement in shameful situations, and respondents may not recall specific behaviors or interpret specific moments as being examples of aggressive behavior (cf. Burrus & Cobb, 2011). These challenges call for creation of methods and measures that capture patterns and contexts beyond what is currently available.
In contrast to Johnson’s typology, I^3 was developed with more of a focus on predicting perpetration of physical aggression (Finkel & Eckhardt, 2013, Footnote 1). Although this would seem to be a limited scope, I^3 can be readily adapted to account for a broader bandwidth of partner aggression (e.g., intensely emotionally manipulative and psychologically abusive behavior of highly controlling partners). Disputes and conflicts that presage situational couple violence could be modelled as instigators that cause couples to resort to verbal or physical aggression. Social norms favoring aggression would be another instigator. Such instigators might cause conflict aggression, but not more generalized aggression beyond couples’ conflict interactions. In contrast, abiding by societal norms might function as an inhibitor that curbs excessive or pervasive violence in a relationship (cf. Finkel & Eckhardt, 2013, Footnote 2).

**How well does each framework fit existing data?** Since it first appeared in 1995, Johnson’s typology has received empirical scrutiny and has been at the center of two controversies. The first is a contentiously debated controversy concerning whether violence perpetration follows gendered patterns; the second and related controversy concerns whether partner aggression falls along a single continuum or whether violent individuals fall into discrete types. Finkel’s I^3 theory was developed relatively recently and increasingly is gaining empirical support for major claims derived from this framework (e.g., Finkel et al., 2009; Finkel et al., 2012; Slotter et al., 2012). Of importance, this framework prompts for expansion of simple main effect models to include theoretically meaningful moderation effects.

**Gender differences?** Originally Johnson conceptualized intimate terrorism and violent resistance as gendered patterns; he suggested that they stem from patriarchal norms that condone male dominance over women, violence against female victims, and male subjugation of women. Several studies have revealed that intimate terrorism is not gender-specific. Johnson has adapted
his framework to retain the core concept of intimate terrorism as invoking relational power
dynamics, while conceding that these dynamics may not be gender-specific (Johnson, 2006).

In 2000, a meta-analysis revealed that women were slightly more likely than men to
report engaging in physical aggression against their heterosexual partner, and did so with greater
frequency (Archer, 2000). However, there was evidence that the type of sample moderated this
effect. In normative samples, including student and community individuals (e.g., 85% of the 81
included samples; see Archer, 2000, Table 6), women perpetrated more physical aggression than
men but the effects were small. This pattern also occurred in three homeless samples (4% of the
samples). However, as predicted by Johnson’s (1995) original statements, samples of individuals
who sought help for relational problems (marital treatment, battered women shelter; 11% of the
samples) revealed greater perpetrated of physical aggression by men than women. However,
more recent meta-analyses that capture dominating and controlling behavior (a hallmark of
intimate terrorism) have not yielded a consistent gender pattern (Bates, Graham-Kevan, &
Archer, 2014; Graham-Kevan & Archer, 2003). In light of these findings, it may be warranted to
conclude that different patterns of violence exist, but they do not vary in gender patterns.

We suggest several caveats and considerations. First, some but not all intimate terrorism
may be caused by belief systems based on power-asymmetries, which may or may not rely on
patriarchal beliefs. Patriarchal beliefs do not cause most aggressive behavior in the US, but may
contribute to violence against women in other nations (Garcia-Moreno, Heise, Jansen, Ellsberg,
& Watts, 2005). Second, more attention could be focused on men who experience pervasive
subjugation and violent tactics by their female partner. Men typically do not seek medical care or
support from law enforcement, and may feel ashamed about their victimization. They may be
less willing to report occurrences in studies using many of the standard forms of data collection.
Moreover, intimate terrorism was based on shelter samples and criminal statistics, which likely omit men. This makes it challenging to study male victims of intimate terrorism and to sample men who fit the characteristics of individuals seeking refuge from their partner’s IPV.

Third, with respect to the personal impact of partner aggression, on average women are injured more than men from physical aggression, although the effect sizes are relatively small (Archer, 2000). Women also report experiencing more fear (Cercone et al., 2005). Although cultural norms may inhibit men from reporting fear (Langhinrichsen-Rohling, 2010), victims exhibit gender differences in stress responses, which are unlikely to be subject to reporting biases. For example, women differ in the dysregulation in cortisol levels based on their partner violence status whereas men do not reveal this violence-based difference in cortisol, which could suggest that women have a more pronounced physiological response to partner violence relative to men (Kim et al., 2015). Women’s fear and sense of danger may also vary more depending on the severity of violence than is the case for men (Ansara & Hindin, 2011).

In sum, women may be as likely as men to exhibit highly controlling behavior beyond conflict situations (e.g., Bates et al., 2014) and to exhibit stalking behavior (Langhinrichsen-Rohling, 2006), behaviors that are more characteristic of intimate terrorism than situational couple violence. Patriarchal beliefs do not consistently underlie aggressive behavior in the US, but may very well contribute to violence against women in other nations (Garcia-Moreno et al., 2005). It is commonly assumed that male-to-female violence is harsher than is female-to-male violence without carefully scrutinizing this assumption (Sorenson & Taylor, 2005). Physiological data, however, do suggest that women may be more impacted than men by the same violent act. We applaud recent efforts to critically test for gender patterns in intimate terrorism (see Bates et al., 2014, who examined control, fear, injury, and pervasiveness beyond conflict situations), and
Encourage others to adopt rigorous sampling methods beyond shelter samples, and creative measurement strategies beyond self-report, to build a definitive science on the role of gender in intimate violent dynamics.

**Differentiating among manifestations of aggression: Typologies or continuum?** In addition to mixed findings regarding gendered perpetration, Johnson’s typological approach has been scrutinized with respect to whether existing studies reveal aggression clusters or types/typologies. Although several studies have not replicated Johnson’s typology exactly as it was proposed (see Bates et al., 2014), several studies provide evidence that not all perpetrators are alike (Babcock, Miller, & Siard, 2010; Foshee et al., 2007); they may differ in the pervasiveness of their control tactics (Graham-Kevan & Archer, 2008) and personality tendencies (Holtzworth-Munroe et al., 2000). Increasingly, studies suggest that partner aggression cannot adequately be understood in terms of a single underlying dimension and it is best conceptualized by considering various dimensions or even “types” (Ansara & Hindin, 2011; Bates et al., 2014; Graham-Kevan & Archer, 2003, 2008; Wigman, Graham-Kevan, & Archer, 2008). Recently scholars have integrated several theoretical frameworks to make a case for examining dyadic patterns of aggression (Capaldi & Kim, 2007; Langhinrichsen-Rohling, 2010), although they disagree on the validity of typologies. The exact classifications and dimensions continue to be debated. Most scholars, however, would agree, as Johnson proposed, that there are different signature or dyadic patterns that characterize partner aggression.

**Summary**

Johnson’s typology and Finkel’s I³ framework provide coherence to the myriad of factors that may cause partner aggression. These models may be useful in tailoring interventions to address specific types of violence, as we discuss in a later section. Equally important is an
understanding of how people manage partner aggression when it does occur, which could inform efforts to provide effective support and resources. There have been important advances in identifying signature patterns of partner aggression. In addition to continuing that work, new research should inform how aggression pattern unfold across time (i.e., developmental trajectories) and unique consequences associated with specific patterns of aggression (Arriaga & Capezza, 2005; Capaldi & Kim, 2007; Langhinrichsen-Rohling, 2010).

The Relational Context of Aggression

Partner aggression shares some similarities with aggression in other interpersonal contexts (e.g., peer aggression, workplace aggression). Regardless of context, interpersonal aggression may manifest in physical acts, and acts that are psychologically, emotionally, or relationally manipulative. As with other interpersonal aggression, partner aggression strains relationships (Carroll et al., 2010). Being the target of aggression causes personal distress, fear, and injury (Ansara & Hinden, 2011; Arriaga & Schkeryantz, 2015; Cercone et al., 2005).

Aggression from a romantic partner in particular is likely to be more painful than aggression outside of a romantic involvement. For example, whereas being insulted or belittled by a stranger may be surprising and disturbing, being insulted or belittled by an intimate partner is likely to cause more pronounced pain and self-doubt. Aggressive behavior by a romantic partner creates a fundamental paradox (Arriaga & Capezza, 2011): The person who should be an important source of intimacy, security, and love, instead is being hurtful.

Our discussion of the relational context of aggression first suggests that people may feel trapped in aggressive relationships. Even people who are not financially dependent, however, may still be dependent and feel committed toward a partner, which can have personal costs. We
review research showing that committed individuals often deny or downplay aggression, which may cause their partner’s aggression to go unnoticed and cause a person “invisible” harm.

Dependence and Commitment

What does it mean to feel compelled to continue a relationship? Relational dependence has been described as a specific psychological state in which one relies on a partner to satisfy basic needs and one experiences any or all of the following (Rusbult, Martz, & Agnew, 1998): feeling satisfied with a relationship, perceiving that other options to the current relationship are less viable or desirable, or being bound to a partner through shared resources and experiences that would be diminished if a relationship ends (e.g., shared possessions, friends, memories, or even future plans; see Goodfriend & Agnew, 2008). Dependence reflects the reasons for remaining with a current partner (Thibaut & Kelley, 1959), including being drawn toward a relationship or having barriers that prevent leaving (Levinger, 1965). Subjectively, people probably do not consciously do a mental “accounting” of such reasons, but rather they “feel” a certain level of commitment. Commitment, therefore, involves the subjective motivation to continue a relationship and the immediate intention to persist, feeling attached to a partner, and thoughts about a future that involves one’s partner (Arriaga & Agnew, 2001).

It is often assumed that individuals remain with a violent partner because they are economically dependent, or because they fear that leaving might cause the partner to become more violent (Mullen, Pathe, & Purcell, 2000; Rusbult & Martz, 1995; Strube, 1988; Tjaden & Thoennes, 1998). A study by Rusbult and Martz (1995) revealed evidence of economic dependence. In this study, shelter women were more likely to return to an abusive partner to the extent that they were unemployed, had a relatively lower income or education level, did not have cash on hand or access to funds, did not have transportation, or were married. These conditions
kept them trapped in a violent relationship. Although the study was done with women, men also may feel trapped to the extent that they lack alternatives to their relationship or feel invested.

What people struggle to understand is why individuals who are not contractually or economically bound to their partner remain committed. Indeed, college students often persist in aggressive dating relationships because of their dependence (e.g., concern over feeling lost without a partner, being used to being together; Tan, Arriaga, & Agnew, 2016). Why do people remain committed to relationships in which they experience abuse, when they could choose to leave? This is a question that comes up repeatedly (especially to the first author when she teaches this subject). We address this question by describing why people remain with abusive partners and then reviewing mechanisms by which this occurs.

**Why do people stay with abusive partners?** Relationships satisfy intimacy and connection needs. This may cause people to continue a hurtful relationship rather than confront the prospect of not being in a relationship. Leaving an abusive relationship can be an extended and difficult process (Kirkwood, 1993). Highly abusive partners repeatedly belittle their victims, convincing them that they are unworthy and will not attain a better partner. Thus, partners cause victims to feel demeaned and doubtful – essentially, victims lose their sense of self – which weakens their resolve to leave. When partners exert pervasive control over a victim, a victim becomes increasingly reliant on that partner for social interaction and self-validation (or devaluation). Once individuals form a close bond, they may ignore signs of a dysfunctional relationship (Arriaga & Capezza, 2011) and fear what might loom in the future if their relationship were to end (Spielmann et al., 2013).

People stay in aggressive relationships when they firmly believe that being *in* the current relationship is better than being *out* of the relationship, as suggested by a recent study (Arriaga,
Capezza, Goodfriend, Rayl, & Sands, 2013). Individuals who were in a relationship with an aggressive partner were asked how happy they would feel if their relationship were to end; following that assessment, they reported their current happiness every two weeks, including assessments after their relationship ended. All individuals overestimated how unhappy they would feel once their relationship ended, but this overestimation gap was magnified among certain individuals: (1) highly committed individuals dramatically inflated their predictions of unhappiness if the relationship were to end – they were not as badly off as they had predicted; and (2) individuals in highly aggressive relationships were much happier after their relationship ended than they expected. These findings suggest that for many people, a known path – even one involving aggression – is perceived to be better than an unknown path.

**How do people regulate partner aggression?** What do individuals do when they are not inclined to end their relationship – when they remain committed because of fear, anxiety and doubt, or other reasons that factor into feeling dependent (Tan et al., 2016)? As we discussed above, many individuals remain motivated to continue in their relationship. Such a motivation may cause people to dismiss new information that does not align with continuing their current course (Starzyk, Fabrigar, Soryal, & Fanning, 2009).

How do committed individuals justify continuing their current course with an aggressive partner? A growing body of research reveals mechanisms by which individuals manage their perceptions of partner aggression. One study, for example, examined how committed individuals reinterpreted unequivocally physically abusive behavior by their partner as merely “joking around” (Arriaga, 2002). Individuals were asked to report about their partner’s specific acts of verbal and physical abuse, first in conflict situations and then in joking situations. Reports of conflict abuse and joking abuse were strongly correlated among highly committed individuals,
but not among less committed individuals. This suggests that committed individuals either encode aggressive behavior, even being beaten up, as reflecting merely joking behavior; or they encode aggressive behavior as aggressive, but reinterpret the negative meaning of such behavior in order to justify it. Either way, these perceptions function to justify continuing a relationship.

Committed individuals change their standards for what is acceptable. In a recent longitudinal study (Arriaga et al., 2016, Study 2) of individuals who had never experienced partner aggression, those whose relationships became aggressive during the study became more tolerant of aggressive behavior, but only if they were highly committed. Less committed individuals also were in relationships that became aggressive but they did not become more tolerant of aggression. This provides direct evidence that committed individuals prospectively adjust their standards for acceptable behavior to justify continuing their relationship (i.e., a shift in comparison level; Thibaut & Kelley, 1959), even if it means enduring aggression.

Through such mechanisms, committed individuals persist in aggressive relationships. For example, relative to less committed individuals, highly committed individuals are not as likely to blame their partners for psychologically abusive (Mills & Malley-Morrison, 1998), and they make excuses for partner violence, which may reduce their intentions to leave (Katz et al., 1995). Moreover, when women in shelters, for example, forgive their partner – a behavior strongly predicted by commitment (Rusbult, Agnew, & Arriaga, 2012) – they are more likely to return to an abusive partner (Gordon, Burton, & Porters, 2004).

There are limits to what individuals will tolerate. Most individuals judge severe acts of partner aggression (e.g., threats, destroying belongings) to be unacceptable and their judgments are not affected by commitment or the onset of partner aggression (Arriaga et al., 2016). The exception is among people who have experienced severe aggression: They are more likely than
others to report accepting attitudes toward severely aggressive behavior (Arriaga et al., 2016, Study 1). Thus, with time and experience, aggressive behavior can become the new “normal.”

**Invisible Harm**

Commitment has its costs. Committed individuals deny aggression, downplay its relevance, or shift their threshold for ending an abusive relationship, as described above. These mechanisms for regulating partner aggression are consequential: As individuals downplay the significance of their partner’s abuse, they may not recognize the deleterious effects of persisting in an abusive relationship. Individuals also may downplay their partner’s aggression because being in an aggressive relationship is stigmatizing. As individuals downplay or deny their partner’s aggression, they may also experience “invisible” harm, or personal harm that is occurring beyond a person’s awareness.

People do not want to be associated with partner aggression. In a recent randomized experiment (Arriaga, Capezza, & Daly, 2015, Study 3), individuals who reported partner aggression in their current relationship were asked to read and to imagine a scenario that described an interaction in which a person insults, devalues, and belittles their partner. Participants were prompted to imagine the scenario as occurring in either their own relationship or in a stranger’s relationship. Participants who imagined aggression by their own partner were less likely to judge the behavior as unacceptable than were participants who imagined the exact same aggressive behavior in a stranger’s relationship. Simply being associated with an aggressive partner can cause people to downplay the negative impact of aggression.

Denying and downplaying partner aggression – either because of strong commitment, shame, or a combination of these factors – sets into motion a self-reinforcing cycle of depending on a partner, being brought down by a partner’s abuse, and feeling less strong and more
dependent (Kirkwood, 1993). What makes partner aggression unique and particularly nefarious, relative to other aggression contexts (e.g., workplace aggression), is that people do not expect their partners to harm them and cause distress, and therefore they may not take notice when their relationship is causing them personal distress. A recent longitudinal study examined partner aggression and personal harm among college students, most of whom were not married and therefore could more easily end a harmful relationship. Individuals who had more aggressive partners were more likely to show signs of psychological distress, even after taking into account whether they were aggressive back toward their partner (Arriaga & Schkeryantz, 2015; cf. Lawrence et al., 2009). Of importance, the individuals who had the more aggressive partners and who showed signs of psychological distress did not necessarily identify their relationship as a source of stress (Arriaga & Schkeryantz, 2015, Study 2). This suggests that the harm they were experiencing from their partner was occurring beyond their awareness.

Strong commitment thus may protect a relationship but may also affect judgements of events that cause personal harm. Non-physical forms of aggression are particularly concerning because they are extremely common (Cercone et al., 2005; Hines & Saudino, 2003; Lawrence et al., 2009; Taft et al., 2006), and yet they are widely perceived as being less harmful than physical aggression despite growing evidence that psychological aggression has more lasting harm (Arias & Pape, 1999; Capezza & Arriaga, 2008; Follingstad et al., 1990).

**Summary**

Most chronically and severely aggressive relationships eventually end (Johnson, 2006). However, “undoing” a stable relationship, even if it is dissatisfying or harmful, is fraught with uncertainty and ambivalence and there are barriers to leaving (e.g., a long history together, habits and routines, uncertainty about life without a partner). The reviewed findings highlight that
relationship processes may shape how partners manage aggression in their relationships. Most people do not perceive an initial aggressive act as a reason to end their relationship. Single acts – especially for common forms of aggression – fail to signal a need to revise commitment. And strong commitment, in turn, predicts denying and downplaying aggression, which causes people to persist in their aggressive relationship. Thus, individuals in aggressive relationships may not detect the point a partner’s aggressive behavior crosses a threshold into unacceptable behavior. Aggression takes on special meaning when it occurs in a romantic relationship because it seems to depart from the promise a relationship once held and fundamentally violates expectations for what a relationship should be.

**Efforts to Reduce Partner Aggression**

Over the last four decades, there have been considerable efforts to reduce partner aggression. Primary intervention efforts have aimed to prevent the onset of partner aggression; for example, the enactment of the Violence Against Women Act (VAWA) in 1994 in the US spawned research and education efforts aimed at changing norms that might support partner aggression. This Act also strengthened secondary intervention efforts, such as providing resources for individuals who have been victimized by partner aggression. Clinical psychologists have been at the forefront of developing interventions for individuals who are aggressive. We review selected treatment approaches and discuss large-scale efforts in the US to make partner aggression undesirable and unacceptable.

**Individual-Focused Approaches to Treating Perpetrators of Severe Aggression**

Historically, IPV treatments have been based on the Duluth model of intervention (Pence & Paymar, 1993) and gender-based conceptualizations of IPV. The Duluth model was a multi-disciplinary response to IPV developed by emergency responders, people involved in the
investigation and prosecution of accused abusers, and community organizations that provided services to female victims of abuse. The model was first implemented in 1981 in Duluth, Iowa, and was based on feminist or patriarchal perspectives on the causes of IPV (see Barner & Carney, 2011). Interventions targeted women in shelters and others who exhibited characteristics of “intimate terrorism” (i.e., extreme violence and pervasive control, tactics aimed at keeping a person in a perpetual state of fear and dependence).

Because the Duluth model was founded on the idea that violence is perpetrated by men as a manifestation of patriarchal beliefs, treatment efforts have targeted men (e.g., men in court-ordered anger management programs) with the goal of instilling egalitarian beliefs about relationships and addressing the use of violence to control and dominate women (Pence & Paymar, 1993). One challenge of this approach is that the Duluth model assumes that IPV uniformly involves male to female violence. As we described above, partner aggression may include several signature patterns, and not all patterns may be treated effectively with the same approach. An additional challenge is that perpetrators of extreme violence may exhibit personality disorders, which may not be amenable to intervention in group treatment settings (Holtzworth-Munroe et al., 2000).

Treatment efforts stemming from the Duluth model have also focused on addressing the negative outcomes for female victims, which has had mixed effects. These treatment efforts were founded on a gendered model of IPV, and many women (and men) may find the patriarchal paradigm to be out of step with their experience. Consequently, treatment goals have been expanded beyond addressing focused patriarchal patterns. In a recent study (Miller, Howell, & Graham-Bermann, 2014), women who experienced frequent IPV in the previous year were assigned to either a Mom’s Empowerment Group that included advocacy, access to services, and
mental health intervention, or to a comparison group. Although all women experienced declines in victimization over 6-8 months, there were stronger effects for women in the treatment group.

The biggest challenge with adopting Duluth treatment approaches is that they fail to address the dominant bidirectional pattern of IPV and gender similarity in factors predicting aggression (e.g., Bartholomew et al., 2015; Dutton & Corvo, 2006; Ehrensaft, Moffit, & Caspi, 2004), and they largely ignore female perpetration and male victimization. The approach may also encourage treatment group leaders to adopt confrontational and punitive positions with regards to men’s violent behavior (Dutton & Corvo, 2006). In short, Duluth treatment approaches address unilateral male-to-female violence, which has relatively low prevalence rates in the US population and may not provide a good fit for aggressive patterns that are more prevalent.

In recent years, psychologists have incorporated cognitive behavioral treatment (CBT) strategies into interventions based on Duluth model principles or developed stand-alone CBT men’s groups (Connors, Mills, & Gray, 2013). Recent meta-analyses and reviews reveal relatively small treatment effects for these models, ranging from Cohen’s $d = .09$ to $d = .34$ in all batter treatment programs, $.12$ for cognitive-behavioral groups, and $.16$ for randomized controlled trials (Feder & Wilson, 2005; Murphy & Eckhardt, 2005). Moreover, these models have not been successful in curbing the high attrition rates that characterize treatment programs (40–50%; e.g., Gondolf, 2000). Recent interventions have focused on gender-neutral approaches designed to foster effective emotion regulation, typically targeting individuals or groups of individuals. For example, recent group interventions based on either acceptance and commitment therapy (Zarling, Lawrence, & Marchman, 2015) or dialectical behavior therapy (Cavanaugh, Solomon, & Gelles, 2011) show promise.
Conjoint Approaches and Couples Therapy

An alternative major approach to reducing partner aggression is to deliver conjoint (couple) interventions that focus on dyadic and situational triggers of IPV and generally fall under the umbrella of cognitive-behavioral approaches. Couple interventions aim to reduce violence by educating couples about causes and consequences of violence, improving anger management (e.g., implementing time-out techniques), fostering effective communication and problem solving skills to replace violent efforts to resolve conflict, and enhancing intimacy (e.g., LaTallaide et al., 2006). Conjoint treatments based on behavioral models of couple therapy may be particularly effective in treating situational couple violence as they target risk factors for violence on multiple levels: individual, dyadic, and situational. Clinicians, shelter staff, and researchers have cautioned against using conjoint approaches with couples who exhibit patterns that involve severe or frequent physical violence because of concerns that treatment might lead to more violence and increase the risk of injury (e.g., Bograd & Mederos, 1999; Campbell et al., 2003). Indeed, a study conducted in medical care settings revealed that one of the reasons individuals in aggressive relationships do not seek help (shelter, medical, police, talking with someone) and keep violence confidential is because they fear negative relational consequences of help-seeking, although a more prominent reason was that the situation did not seem sufficiently severe (Fugate, Landis, Riordan, Naureckas, & Engle, 2005). When there are safety concerns, approaches other than conjoint may be warranted, in particular the emerging individual-group models based on acceptance of emotions, mindfulness, or development of effective emotion regulation strategies. Given that for many couples presenting in therapy, violence arises in the context of a relationship characterized by dysfunctional problem-solving skills and aggressive interaction patterns, conjoint treatment may be particularly effective.
There are now a handful of published experimental and quasi-experimental studies of couples treatment focused on reducing IPV (e.g., Brannen & Rubin, 1996; Dunford, 2000; LaTallaide, Epstein & Werlinich, 2006; O’Leary, Heyman, & Neidig, 1999; Stith, Rosen, McCollum, & Thomsen, 2004), improving distressed relationships (e.g., Simpson, Gattis, Atkins, & Christensen, 2008), or reducing IPV in the context of treatment for alcohol abuse (e.g., Fals-Stewart & Clinton-Sherr, 2009; or during pregnancy (Van Parys, Verhamme, Temmerman, & Verstaelen, 2014). Couples who have undergone such treatment efforts do not exhibit the pattern of perpetrator retribution and victim fear that can occur during treatment of severely aggressive individuals (O’Leary et al., 1999). Moreover, many couples report satisfaction with the treatment approach (Gottman et al., 2002). Although effect sizes are not reported in these studies, conjoint treatments seem to be at least as effective in reducing violence as gender-specific treatments (Brannen & Rubin, 2006; O’Leary et al, 1999) and CBT men’s groups (Dunford, 2000), have an advantage when alcohol use is also a factor (Brannen & Rubin, 1996), and generate greater increases in marital satisfaction (O’Leary et al., 1999). In addition to reducing violence, couples who complete these programs report greater relationship satisfaction and improved communication (e.g., O’Leary et al., 1999; Stith et al., 2004). Confidence in applying conjoint approaches is further strengthened by evidence that IPV declines after participation in alcohol treatment programs for couples (e.g., O’Farrell & Clements, 2012).

Going forward, important areas need to be addressed in research on IPV treatments. Current recommendations for conjoint treatment are generally based on clinical judgement rather than empirical data, with a general rule of thumb being if couples are experiencing severe, frequent or fear inducing violence, they should be referred to other appropriate individual or separate-partner group treatment, or gender separate sessions prior to beginning conjoint
treatment (e.g., Stith & McCollum, 2011). We need to discover the boundaries that define which couples can be safely and effectively treated in a dyadic context. There is also a need for true randomized control trials that include not just community volunteers, but also couples where one partner has been court mandated for treatment or who are experiencing the full range of IPV frequency and severity. Also needed are comparison of treatments to adequate control groups, head-to-head comparisons of treatments with different underlying intervention models, comparison of different treatment modes (i.e., individual, individual group, conjoint, and multi-couple group), assessment of both partners’ reports of violence given that partners do not always agree on their perceptions of violence severity or frequency (Burrus & Cobb, 2011), and intent-to-treat analyses, given the high attrition rates from IPV programs.

A greater focus on situational triggers and inhibiting factors should also be considered when developing and refining IPV programs (cf. Slotter & Finkel, 2011). Not every impulse to respond to partners with violence converts to overt behavior. Current treatments commonly assess factors that predict an urge to express anger physically and triggers of violent behavior, but have not fully assessed inhibiting factors that prevent people from acting on their aggressive urges. Efforts to capitalize on knowledge of such factors can be used to create contexts that inhibit violence in at-risk couples and to set the stage for effective conflict resolution.

**Norm-based Interventions**

The Violence Against Women Act created funding to develop norm-based interventions that were focused on primary prevention (i.e., preventing IPV from occurring) and secondary prevention (i.e., intervening to end already-occurring IPV). Several researchers focused on violent relationships among adolescents and young adults, given evidence for assortative mating on violence risk factors in young adults (e.g., Ehrensaft et al., 2004), high rates of IPV in these
groups, and the potential role of early relationship patterns to predict behavior in future long term partnerships (see also Bartholomew et al., 2015).

Recent papers have reviewed prevention and intervention efforts (e.g., Cornelius & Resseguie, 2007). For example, the Safe Dates program provides primary and secondary prevention of dating violence, and educates adolescents about acceptable versus unacceptable behavior toward a romantic partner (Foshee et al., 1996). Results are encouraging in terms of reductions of violence perpetration and victimization over four years (Foshee et al., 2004). Another example is the Dialectical Psychoeducational workshop (Cavanaugh et al., 2011), which is effective at reducing anger and impulses to act physically in a pilot study of at risk young adults. These education programs are important given that most adolescents do not seek help once they do experience dating violence (Ashley & Foshee, 2005).

Other programs focus on the broader context defined by generally-shared norms. For example, the Green Dot program (https://www.livethegreendot.com/index.html) provides training to educate college students (with recent extensions to high school students; Cook-Craig et al., 2014) about acceptable versus acceptable behavior – essentially setting norms for healthy romantic or sexual interactions – and widely dispersing symbols (e.g., a green dot) to increase the salience of program ideas (i.e., priming methods). Of importance, the program promotes an inclusive philosophy that everyone is responsible for preventing violence and focuses on what bystanders can do when they observe aggressive behavior (i.e., strategies to redirect or address an aggressive incident involving others; see Coker et al., 2011).

Conclusions

People have been interested in aggressive and violent relationships for several reasons. There is wide interest in the topic because it violates expectations: We expect partners to provide
benefits and protection from harm, and yet aggressive and violent behavior involves resorting to
direct harm when there would seem to be alternative actions. Scholars also have been interested
resolving several issues. One concerns whether violent behavior follows gender patterns.
Another concerns the validity of conceptualizing and treating violent behavior in terms of
different types, or instead assuming that all forms of violence vary along a single continuum. Yet
another unresolved issue concerns the precise nature of violence across different cultures. There
are insufficient data to make firm conclusions regarding these issues.

What seems to be less disputed is that targets of aggressive behavior experience
unhappiness and distress. Yet people may not be aware of the effects that their aggressive
relationship has on them, which suggests that even harmful relationships may continue to satisfy
some needs. We therefore conclude that relationships are not “good” or “bad.” Rather, they
provide key functions and feature prominently in our lives. As people learn more about how
relationships function and affect them, they may become more able and willing to direct
relationships in ways that address their own personal short- and long-term needs.
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