

# Gender-Based Violence

## Concepts, Methods, and Findings

NANCY FELIPE RUSSO AND ANGELA PIRLOTT

*Department of Psychology, Arizona State University, Arizona, USA*

**ABSTRACT:** The United Nations has identified gender-based violence against women as a global health and development issue, and a host of policies, public education, and action programs aimed at reducing gender-based violence have been undertaken around the world. This article highlights new conceptualizations, methodological issues, and selected research findings that can inform such activities. In addition to describing recent research findings that document relationships between gender, power, sexuality, and intimate violence cross-nationally, it identifies cultural factors, including linkages between sex and violence through media images that may increase women's risk for violence, and profiles a host of negative physical, mental, and behavioral health outcomes associated with victimization including unwanted pregnancy and abortion. More research is needed to identify the causes, dynamics, and outcomes of gender-based violence, including media effects, and to articulate how different forms of such violence vary in outcomes depending on cultural context.

**KEYWORDS:** gender-based violence; gender; intimate partner violence; domestic violence; reproduction; media effects

### INTRODUCTION

Women in Asia and the Middle East are killed in the name of honor. Girls in West Africa undergo genital mutilation in the name of custom. Migrant and refugee women in Western Europe are attacked for not accepting the social mores of their host community. Young girls in southern Africa are raped and infected with HIV/AIDS because the perpetrators believe that sex with virgins will cure them of their disease. And in the richest, most developed countries of the world, women are battered to death by their partners (Amnesty International, 2004, p. iii-iv).

The United Nations has identified gender-based violence against women as a global health and development issue, and a host of policies and public

Address for correspondence: Nancy Felipe Russo, Department of Psychology, Box 871104, ASU, Tempe, AZ 85287-1104. Voice: 480-965-0380; fax: 480-965-8544.  
e-mail: Nancy.russo@asu.edu

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education programs have been undertaken around the world that aim at reducing such gender-based violence (United Nations, 1989). This article highlights new conceptualizations, methodological issues, and research findings that can inform such activities, particularly with regard to intimate partner violence.

Our focus on gender-based violence against women is not to imply that women are never violent against men. The rates and forms of violence, including intimate partner violence, vary widely across cultures (Kishor & Johnson, 2004). In the United States, recent studies have reported that women and men commonly commit violent acts such as shoving, hitting, or throwing objects against each other, and have found little difference in prevalence rates for such acts by gender (Archer, 2000, 2002; Brush, 1990, 2005; Frieze, 2005; Frieze & Mettugh, 2005; Frieze & McHugh, 2005).

Gender shapes the meaning of violent acts differently for women and men, however, and that meaning varies widely depending on the situational and cultural context. For example, severity of specific physical acts will be rated differently depending on whether or not the perpetrator of the act is male or female (Marshall, 1992a, 1992b). A full understanding of gender-based violence requires going beyond a focus on sex differences in rates and ratings of specific acts to examine how various aspects of gender shape the predictors, dynamics, and outcomes of violence for both women and men.

Interdisciplinary research will make critical contributions to this examination for it must take place on multiple levels. Psychological meaning of acts and experiences for the perpetrator, victim, and outside observer will reflect the situational, structural, and cultural context. In particular, the cultural discourse that justifies gender differences in social and economic status, objectifies women, and sexualizes violence needs to be incorporated in the analysis of the dynamics of gender-based violence. We highlight some of the elements of gender-based violence that can differ for women and men, with our goal to encourage more complex, multilevel approaches in the study of how such violence is experienced in the lives of women and men.

Our focus here on gender-based violence against women should be taken as a reflection of the need to limit our scope and not as a dismissal of the importance of understanding how gender affects violence by and toward *both* women and men. Indeed, violence is an interpersonal behavior and both a stimulus as well as a consequence of interaction. A full understanding of gender's impact on violence against women requires considering women's behaviors toward their partners as well, including their violent behaviors.

### **THEORIZING GENDER AND ITS RELATION TO INTIMATE VIOLENCE**

Research that has examined gender differences in violence against women all too often equates gender with the categories of male and female. Gender thus is treated as a personal attribute of the individual (e.g., Archer, 2003). However,

theoretical conceptions of gender have evolved far beyond traditional “sex difference” models. Research findings based on such models have some usefulness but are not very informative with regard to understanding the dynamics of gender as currently conceptualized.

Today gender is theorized as a complex, multilevel cultural construct that determines the meanings of being female or male in a particular situational context (Anderson, 2005; Deaux & Major, 1987; Frable, 1997; Hamilton & Russo, 2006; Ridgeway & Smith-Lovin, 1999). In Western society, gender is typically organized around the social categories of male versus female and assigned at birth based on biological sex (which may be defined anatomically or genetically, depending on the situation). The cultural package that constitutes the meaning of one’s gender assignment to a category should not be confused with the category itself.

Gender can be thought of as a package of many interconnected elements—including gendered traits, emotions, values, expectations, norms, roles, environments, and institutions—that change and evolve within and across cultures and over time. Gender is also a “master” (or a meta-) status that determines social position in society, one that typically accords women with less power, privilege, and resources than men (Bourne & Russo, 1998).

Gender defines the appropriateness of behavioral, psychological, and social characteristics of males and females over the life cycle, and shapes the way we construe ourselves (Cross & Madsen, 1997). When doing so it interacts with other dimensions of social difference, and the dynamics of the various elements of gender may differ depending on one’s specific mix of social identities and roles. For example, in some contexts, being a good mother who devotes herself to her children is the role expectation for being a wife, and the roles are highly compatible. In contrast, in another context being a good wife may mean serving as a trophy for your husband’s success and sending children off to boarding school so that you can make your husband’s needs the priority in your life.

The need to appreciate the complex dynamics of social identity and difference led Russo and Vaz (2001) to argue that researchers need to develop a “diversity mindfulness” that appreciates the complex interplay of the intersections of gender and other dimensions of difference (p. 280). Age, ethnicity, race, sexual orientation, class, physical ability, and size are among the social dimensions associated with stigmatized identities that may elicit prejudice and discrimination, confer differential access to power and privilege, and converge with gender to magnify or diminish risk for experiencing violence.

Gender’s “rules” (i.e., expected behaviors, rewards, and sanctions for violating those expectations) change over the life cycle. Sometimes there is abrupt change as a result of discrete life events such as losing one’s virginity, getting married, having one’s first child, or starting a new job. Gender organizes women’s roles at home and work in ways that place extraordinary burdens on women while at the same time limiting their access to coping resources. The dramatic changes in women’s workforce status and participation that have occurred over the last five decades have not been accompanied by a concomitant

sharing of responsibilities in the family (Coltrane, 2000; Steil, 1997; Tichenor, 2005). Gendered inequalities at home and at work create gender differences in perceived entitlements and give different meanings to the resources women and men bring to their relationships. Although such inequalities are associated with risk and outcomes for experiencing violence, the relationship is complex (Steil, 1997; Tichenor, 2005).

Reducing gender-based violence will require new theories that articulate how various aspects of gender mediate and moderate the effects of social, psychological, and biological factors over the life cycle and influence the risk, experience, and outcomes of interpersonal violence between women and men. One thing that can be concluded at present, however, is that the predictors, meanings, and outcomes of gender-based violence are multifaceted and differ for women and men—as perpetrators and as victims.

### **GENDER-BASED VIOLENCE AGAINST WOMEN**

Gender-based violence against women has been defined as “any act that results in, or is likely to result in physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life” (United Nations, 1995, Platform for Action D.112). This definition, which emerged from the 1995 United Nations Conference on Women in Beijing, represents an international consensus on how to conceptualize the dynamics of gender-based violence and encompasses child sexual abuse, coercive sex, rape, stalking, and intimate partner violence.

The term “gender-based” is used because such violence is shaped by gender roles and status in society. Gender-based violence against women does not encompass every violent act a woman may happen to experience (being threatened by a weapon during a robbery, for example). A complex mix of gender-related cultural values, beliefs, norms, and social institutions implicitly and even explicitly have supported intimate partner violence and provided little recourse for its victims (Koss, Bailet, & Yuan, Herrera, & Lichter, 2003; Koss, Goodman, Browne, Fitzgerald, Keita, & Russo, 1994; Russo, 2006). In particular, gender roles and expectations, male entitlement, sexual objectification, and discrepancies in power and status have legitimized, rendered invisible, sexualized, and helped to perpetuate violence against women.

### **RECOGNIZING GENDER-BASED VIOLENCE AS A PROBLEM**

One of the ways that gender has differentially shaped the meaning of violent acts by women and men is by differentially conferring legitimacy on male violence against women. With legitimacy has come invisibility for the victims (Keller, 1996; Stark, Flitcraft & Frazier, 1979). Marriage as social institution

has come under particular scrutiny for providing men an entitlement to batter and rape their wives and providing legitimacy for their actions (Finklehor & Yllö, 1985; Russell, 1990; Stets & Strauss, 1992; Straus, Gelles, & Steinmetz, 1980). Ironically, it was not until the late 1980s that intimate violence became identified as the leading public health risk to adult women by the surgeon general of the United States (Koop, 1985). The invisibility of male violence against women is truly remarkable given its pervasiveness and profound health, social, and economic consequences.

With the rise of what has become a global women's movement, the legitimacy and invisibility of such violence became challenged. Today, male gender-based violence against women is globally recognized as a health, economic development, and human rights concern (Amnesty International, 2004; Herrera, Koss, Bailey, Yuan, & Lichter, 2006; Koss, Heise, & Russo, 1994; Krahe, Bieneck, & Möller, 2005; Russo, Koss, & Goodman, 1995; National Center for Injury Prevention and Control [NCIPC], 2003; United Nations General Assembly, 1993; World Health Organization, 2001). Yet, in many parts of the world, such violence continues to be viewed as a private matter and is implicitly—indeed, sometimes, explicitly—condoned.

Around the world, girls and women continue to experience gender-based violence over the life cycle in homes, schools, churches, workplaces, the streets and even therapeutic settings (Heise, Ellsberg, & Gottemoeller, 1999; Koss, Goodman, & Browne, 1994; Russo *et al.* 1995; Krahe *et al.* 2005; Shane & Ellsberg, 2002). A recent transnational review of population-based survey data found the lifetime proportion of women experiencing physical assault by an intimate partner to range from 10% to 69% (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002).

In the United States, the National Violence Against Women Survey estimated one out of five (22.1%) women to be physically assaulted in their lifetime, and one in 13 (7.7%) to be raped by an intimate partner. An estimated 1.3 million women experienced physical assault and more than 201,394 women had experienced rape at the hands of an intimate partner in the previous year (Tjaden & Thoennes, 2000). Intimate partner violence has been the most common source of injury to women in the ages of 15 to 44 years, more frequent than muggings, auto accidents, and cancer deaths combined (Dwyer, Smokowski, Bricout, & Wodarski, 1995). Physical assault against both married and unmarried women has been a widespread problem, crossing racial, sexual orientation, age, and socioeconomic lines (Koss, 1988; Stark & Flitcraft, 1988, 1996).

## NEW CONCEPTUALIZATIONS

Today researchers are discovering new ways to conceptualize, study, intervene, and prevent gender-based violence against women. The search for new conceptualizations has identified an array of methodological issues that have led to new challenges for researchers who seek to increase our understanding

of this complex phenomenon (Brush, Dutton, Green, Kaltman, Roesch *et al.*, 2006).

Feminist perspectives have qualitatively changed the way that researchers conceptualize, operationally define, and study multifaceted forms of gendered violence over the life cycle (Edwards, 1991; Marin & Russo, 1999). In particular, such perspectives have broadened the focus for research beyond the psychological characteristics of the individual perpetrator and/or victim, or on an investigation of family relationships (Yllö, 1988) and begun to reconceptualize rape and other forms of male violence as forms of power and control (Brownmiller, 1975; Dobash & Dobash, 1977; Medea & Thompson, 1974; Russell, 1975). Although recognizing physical differences may contribute to the dynamics of gender-based violence, in general this theorizing has emphasized the social construction of male violence, not the biology or pathology of the individual (Kelly, 1988; Koss *et al.*, 1994; McHugh, Frieze, & Browne, 1993).

There has been a shift from viewing different forms of male violence against women as separate entities toward viewing violence as a unitary phenomenon with diverse manifestations that vary depending on context (Koss *et al.*, 1994). Gender-based entitlements, power, objectification, and status are now recognized as playing critical roles in the dynamics of gender-based violence. Major institutions (including criminal justice, health, academic, scientific, military, athletic, and religious institutions) are seen as reinforcing patriarchal values that encourage and maintain those entitlements, foster gender-based violence, and encourage stigmatization of voices that challenge the status quo (Koss *et al.*, 1994; Marin & Russo, 1999).

While gender, power, and structural dimensions of violence are recognized as potent forces in the dynamics of gender-based violence, the emerging picture is recognized as increasingly complex (Frieze, 2005; Marin & Russo, 1999; McHugh & Frieze, 2005; McHugh, 2005). Theorizing about the relations of gender, power, and violence has gone far beyond a simplistic focus on direct effects of patriarchal values or sex role beliefs on rates of specific acts perpetrated by women and men. As theory has progressed, research, treatment, intervention, and public policy responses to theoretical advances have lagged behind (Dutton and Corvo [2006] critique approaches based on this simplistic focus; although their vision of feminist perspectives is limited of a particular radical perspective, their call for complex approaches is timely). New knowledge based on new, integrative methods that encompass interdisciplinary, biobehavioral perspectives is needed (e.g., Dutton, Green, Kaltman, Roesch *et al.*, 2006).

## METHODOLOGICAL ISSUES

Androcentric (i.e., male-centered) bias affects what becomes figure and what becomes ground in our perception, influences how we interpret what

we perceive and remember, and shapes our conceptions of what is normal versus unusual. As Edwards (1991) has observed, "There is no area where androcentric bias is more visible and systematic than male violence against women" (p. 14).

We focus here on gender-based intimate partner violence (IPV), which encompasses acts performed by an intimate partner that include physical, sexual, and emotional abuse, including physical assault, verbal abuse, forced intercourse, and other forms of sexual coercion as well as a variety of controlling behaviors aimed at restricting freedom of action (e.g., isolation from family and friends).

A variety of methodologies have been applied in the study of violence, both qualitative and quantitative, and there are a number of data sources that include national surveys that are used for research on gender-based violence (Hamby, 2005). The Conflict Tactics Scales (Straus, Hamby, & Warren, 2003) or variations thereof are arguably the most widely used of the behavioral checklists in surveys to assess incidence, prevalence, and nature of interpersonal violence. Hamby (2005) articulates the strengths and limitations of various data sources including those of behavioral checklists, which include underreporting, false-negative and false-positive problems, difficulties with referent periods, reporting load and respondent fatigue, overly brief or poorly worded questions, effects of social norms on reporting, and the distortions that can occur in the retrospective recall of events. The extent to which disclosure issues that differ for men and women affect reporting of various violent acts is unknown, but the possibility raises validity issues with regard to self-report checklists. Hamby suggests that with regard to sensitive material, audio computer-assisted self-interviews (audio-CASI) are "likely to be one avenue to progressing toward a gold standard of assessment" (Hamby, 2005, p. 739). She also identifies a number of methodologies that have been underutilized in research on gender-based violence but have documented effectiveness in research on other forms of relationship distress and stigmatized behavior including weekly calendar methods and electronic diary data collected through the internet or palm-sized computers.

In keeping with advances in cognitive science and the now recognized moderating role of appraisals in determining the relationship between stressors and mental health outcomes (Folkman & Moskowitz, 2004), it is important to go beyond simply focusing on the occurrence of acts and consider their meaning and context (DeKeseredy & Schwartz, 1998; Dutton, Burghardt, Perrin, Chrestman, & Halle, 1994). Violent acts may play a role in creating the meaning for other, apparently more benign behaviors that become threatening in a context of coercive control. New conceptualizations of the dynamic of violence and the role of coercive control in gender-based violence are other new frontiers for research (Dutton & Goodman, 2005).

Postmodern perspectives, which emphasize socially constructed meanings, are a source of new concepts and methods as well. McHugh, Livingston,

and Ford (2005), suggest that such perspectives encourage “multiple, varied, and even inconsistent views” of intimate violence (p. 332). Their analysis challenges researchers to recognize that there is a sociohistorical context for all research with potential to influence the research process in all its stages from selection of topic to interpretation and dissemination of results.

Challenges to researchers who seek to study IPV arise from methodological and ethical as well as conceptual issues (Desai & Saltzman, 2001; Ellsberg, Heise, Pena, Agurto, & Winkvist, 2001; Schwartz, 2000; White, Smith, Koss, & Figueredo, 2000). Confidentiality and safety of research participants must be preserved and referral information that identifies places to go for help made available to them. Interviewers require special training and sensitivity if they are to conduct interviews in the nonjudgmental and empathic way needed to obtain disclosure of violent events (Garcia-Moreno, Watts, Jansen, Ellsberg, & Heise, 2003; Kishor & Johnson, 2004; WHO, 2001, 2004).

Community-based survey research is being used to document the worldwide prevalence of violence against women (Kishor & Johnson, 2004). Not all dimensions of gender-based violence are typically measured in cross-national surveys, which share the problems of self-report surveys identified above (Hamby, 2005), and further must consider variations in cultural relevance and meaning of the specific behaviors studied. Qualitative research will be needed to illuminate the meanings of violence and coercive acts in the cultural contexts in which women experience them (WHO, 2001).

Researchers have begun to focus on ethnic populations to redress the lack of research on violence in the lives of ethnic minority women, which must overcome silencing around intimate violence issues found in ethnic communities (Sanchez-Hucles & Dutton, 1999; Sorenson, 1996; West, 1998). Researchers have investigated male-perpetrated violence in African American (Brice-Baker, 1994; Marsh, 1993; Russo, Denious, Keita, & Koss, 1997), Native American (Chester, Robin, Koss, & Goodman, 1994; Gutierrez, Russo, & Urbanski, 1994; Norton & Manson, 1995), Hispanic American (Perilla, Bakerman, & Norris, 1994; Sorensen & Telles, 1991; Ramos, Koss, & Russo, 1991), and Asian American populations (Song, 1996; see also Sanchez-Hucles & Dutton, 1999).

### **GENDER-BASED VIOLENCE, ENTITLEMENTS, AND SOCIAL CONTROL**

Researchers are beginning to study how IPV reflects assumptions of male entitlement and privilege and functions as a form of social control that maintains a subordinate social and political status for women (Koss, Goodman, *et al.*, 1994; Marin & Russo, 1999). Men who connect masculinity with being able to control and dominate their partners are more likely to be abusive



(Goodrum, Umberson, & Anderson, 2001). Gender-based violence may reflect the discrepancy between men's belief that they should be more powerful than their partners and the reality of their power. Men who perceive they are not as powerful as they "should be" may seek to redress the situation through use of physical dominance (Dutton, 1988). Research suggests that dissatisfaction with the level of power in dating relationships is correlated with violence for both women and men, but the predictors of using violence differ depending on the perpetrator's gender (Kaura & Allen, 2004).

The link between male intimate partner violence and a variety of socially controlling behaviors has been found cross-culturally. Kishor and Johnson (2004) found a strong link between intimate partner violence and husbands' controlling behaviors, specifically (1) becoming jealous or angry if the wife talks with another man, (2) frequently accusing her of being unfaithful, (3) not permitting her to meet girlfriends, (4) limiting her contact with her family, (5) insisting on knowing where she is all the time, and (6) not trusting her with money. The risk for violence directly increased with the number of controlling behaviors on the part of the husband across the diverse cultures studied (Kishor & Johnson, 2004). More needs to be known about the meanings of violence or threat of violence as it is used to control women in specific contexts.

Stigma and the associated emotion of shame combine to become a powerful form of social control. Gender-based violence is experienced as both stigmatizing and shameful (Buchbinder & Eisikovits, 2003; Eisikovits & Enosh, 1997). Shame has also been identified as a factor in inhibiting women from disclosing their experiences of violence to others and from seeking help (Giles-Sims, 1998). Shame may also moderate outcomes of violence. One study found that shame was a key predictor for the relation between psychological violence and PTSD (Street & Arias, 2001).

Although the relationship of stigma to psychological and interpersonal relationships has burgeoned in recent years, the dynamics of stigmatization, shame, power, and gender-based violence continues to be a neglected area of research. As Link and Phelan (2001) have emphasized, stigma depends on power—social, political, and economic—but even power dynamics *per se* is all too often overlooked in analyses of stigma. As they point out, "there is a tendency to focus on the attributes associated with those [stigmatizing] conditions rather than on power differences between people who have them and people who do not" (p. 375).

In particular, the relationship of gender role transgressions to various forms of stigma and its associated sanctions, which include rejection and social exclusion, need to be more fully understood. That knowledge can provide a foundation for building women's resistance to stigmatizing cultural messages. Research on the relationship of stigma to self-esteem suggests that the causal dynamics are complex. For example, there is a relationship between greater exposure to sexism, threat appraisals, and reductions in self-esteem among

pessimistic women that is not found among optimistic women (Kaiser, Major, & McCoy, 2004).

At the same time, research on how to foster social change that could reduce stigmatization as a force for the enforcement of gender role norms that support gender-based violence is needed. As Link and Phelan (2001) point out, intervening in the stigma process either requires (1) producing fundamental changes in beliefs and attitudes or (2) changing the power relations that enable dominant groups to act on those stigmatizing beliefs and attitudes. The potential for success of either approach will depend on knowledge of the interrelationships among entitlements, power, stigma, and gender-based violence.

### LINKS AMONG GENDER, POWER, AND SEXUALITY

Social structures themselves often reflect inequitable gender relationships that serve to maintain the legitimacy of male violence. Relationships between female workers and male employers, wives and husbands, female patients and male doctors, female athletes and male coaches, for example, share common structural and ideological features that place women in positions of subordination to men.

These inequities reinforce a patriarchal worldview in which women's subordination is normal, natural, and expected, and where powerful and competent women are stigmatized and disliked (Rudman, 1998; Rudman & Glick, 1999, 2001). Further, some studies in the United States have found that for some men (in particular men who are likely to sexually harass women), power and sexuality are linked such that women's subordination is associated with sexual attractiveness (Bargh, Raymond, Strack, & Pryor 1995; Pryor 1987; Pryor & Stoller, 1994). Although the dynamics of the linkages have yet to be fully understood, experimental research by Bargh et al. (1995) in which either power or sex was primed in male participants high in likelihood to sexually harass, suggests that priming power encourages thoughts of sexuality and not *vice versa*.

There has been a great deal of theoretical, methodological, and substantive work that has found sexual objectification to be a powerful influence on women's thoughts, feelings, and behaviors in Western culture (Frederickson & Roberts, 1997; McKinley, 1996; McKinley & Hyde, 1996; Tiggemann & Kuring, 2004). Although more knowledge is needed, some research suggests that sexualization of violence and objectification of women contribute to exposure to abusive experiences. Research examining the link between women's objectification experiences (OE), daily hassles, coercive sexual experiences, and depressive symptoms in college women found that the most important contributors to the effect of OE frequency were being called degrading, gender-stereotyped names, and being the target of offensive (sexualized) gestures

(Burnett, 1995). However, the tendency to rely on the opinions and evaluations of others moderated this relationship.

In developed societies in particular, the media are powerful cultural forces that model interactions between men and women. Insofar as the media provide models that perpetuate gendered inequalities, reinforce and perpetuate ideologies of male dominance (physical and sexual), sexualize violence, and objectify women, they provide mechanisms for gender to influence violence against women. Understanding the dynamics of gender-based violence can be informed by examining through a cultural lens how the media socializes, normalizes, and advocates such ideologies, leading to links between sex and power that operate beyond conscious awareness.

### MEDIA INFLUENCES

Mass media influence our perceptions, cognitions, and behaviors related to gender as well as violence through many channels including radio, television, movies, magazines, and the Internet. The impact of media exposure to sexual and violent content including pornographic content (Caputi, 2003; Jensen, 1995; Russell, 1980, 1988; Silbert & Pines, 1984; Sommers & Check, 1987) thus becomes of central concern for researchers who seek to understand the determinants of gender-based violence against women in technologically developed societies. Teenagers spend about half of their waking hours engaged in some form of media: an estimated 3 hours of watching television, 1.5 hours listening to music, less than 1 hour watching movies, three-fourths of an hour reading, and one-half hour on the computer per day (Brown, Steele, & Walsh-Childers, 2002). Researchers predict that by the time a 7-year old reaches 70 years, they will have spent 7–10 years of his or her life in front of a television (Roberts, 2000). By the age of 14 years, it is estimated that the average American child has viewed more than 8,000 murders and 100,000 other acts of violence on television alone (Huston, Donnerstein, Fairchild, Feshbach, Katz, Murray, Rubinstein, Wilcox, & Zuckerman, 1992). Although findings from correlational designs are problematic with regard to causality, effects of exposure to violence against and sexual degradation of women have been documented in experimental studies as well (Linz, Donnerstein, & Penrod, 1984; 1988; Mulac, Jansma, & Linz, 2002).

Media have been found to perpetuate rape myths by portraying sexual violence against women in television and movies congruent with such beliefs (Brinson, 1992). Rape myths include belief that: (a) the victim is promiscuous; (b) it is the victim's fault; (c) the victim wanted to be raped; (d) the victim lies about the rape (Burt, 1980); or (e) the rapist is psychologically or biologically unable to resist his sexual impulses (Groth, 1979). Television and movies tell the tale of rape such that "it is acceptable to rape and be raped in certain circumstances, especially when the victims and offenders fail to fit mythical profiles"

(Bufkin & Eschholz, 2000, p. 1338). Some evidence suggests that exposure to violent pornography in particular cannot only affect men (Demaré, Briere, & Lips, 1988; Donnerstein, 1980)—it can affect women's attitudes and fantasies about rape as well (Corne, Briere & Esses, 1992).

Media provide social learning tools for children and teens in developing their ideas about appropriate norms in different behaviors (Bryant & Zillman, 1994) including those related to sex and aggression. For example, 61% of teens aged 13–15 years have been found to depend on television and movies for sources of information about sex, STDs, drugs, alcohol, and violence (Kaiser Family Foundation, 1999); more than half report learning about pregnancy and birth control from television; and more than half of girls report learning about sex from magazines (Princeton Survey Research Associates, 1996). Communications researchers critique the media for failing to provide an accurate portrait of reality on these important matters (e.g., Huston, Wartella, & Donnerstein, 1998; Lowry & Shidler, 1993). Although it is recognized that media can play a powerful role in communicating values, setting norms, and establishing expectations for behavior, the full impact of media influences on gender-based violence has yet to be documented.

### **MUSIC—A NEW FRONTIER FOR RESEARCH IN UNDERSTANDING LINKS BETWEEN GENDER AND SEXUALIZED VIOLENCE AGAINST WOMEN**

The impact of new technology that substantially increases both audio and visual exposure to popular music in particular has yet to be fully felt, but even the current levels of such exposure have raised concerns due to the violent and sexual nature of its content. In a recent content analysis of six types of media, Pardun, L'Engle, and Brown (2005) found that music contained substantially more sexual content (40%) than movies (12%), television (11%), magazines (8%), Internet web sites (6%), or newspapers (1%). Furthermore, music was more likely to focus on sexual innuendos, sexual intercourse, divorce, and deteriorating relationships as compared to other forms of media.

Music reflects its larger social and political context, and mysogynism in popular music is not new—derogatory views of women have been expressed in many genres including rock, country, and the blues. In particular, rap music emerged in the 1970s as a vehicle for expressing ideas and emotions related to the experience of blacks in the United States. The dominance of misogynistic themes in rap did not emerge until the late 1980s but is now a constant theme with many popular artists including Ice T., N.W.A., and 2 Live Crew (Adams & Fuller, 2006).

Hip hop, rap, and heavy metal have been the target of most discussion due to their extremely violent and sexual nature (Greeson & Williams, 1986; Perry, 2003; St. Lawrence & Joyner, 1991). Violent themes are common with research

reporting from 15% to 50% of rap music videos as containing violent imagery (Gow, 1990; Greeson & Williams, 1986; Sherman & Dominick, 1986). In addition to normalizing antisocial behavior in general, rap lyrics promulgate themes of rape, torture, abuse, and other forms of degradation of women. Zimmerman (1992) found that in particular gangster rap music, which is becoming more "mainstream" in popular culture, portrays women as sex objects and victims of sexual violence. Similar concerns have been voiced about the content of heavy metal rock music (St. Lawrence & Joyner, 1991).

Research has documented the negative impact of sexual and violent music on attitudes toward women. Wester, Crown, Quatman, and Heesacker (1997) found that even brief exposure to sexually violent rap music in participants unfamiliar with the genre increased belief in adversarial sexual relationships. Heavy metal music has also been known to increase men's sex-role stereotyping and perceived entitlements including the view that "a woman should never contradict her husband in public," and negative attitudes regarding vocational, education, and intellectual roles of women (St. Lawrence & Joyner, 1991). Research by Barongan and Hall (1996) found that participants exposed to misogynous music were significantly more likely to act aggressively toward female confederates and to misperceive their reactions, concluding that "misogynous music facilitates sexually aggressive behavior and supports the relationship between cognitive distortions and sexual aggression" (p.195). Other research suggests that exposure to such music increases hostile and aggressive thoughts (Anderson, Carnagey, & Eubanks, 2003), and that long-term exposure to violent music can lead to more permanent hostility toward women (Anderson & Bushman, 2002).

The combination of visual imagery with lyrical messages makes music videos an especially potent source of information about social roles, consumerism, and culture (Sun & Lull, 1986). Music videos predominantly rely on themes of implicit sexuality, objectification, dominance, and implicit aggression (Vincent, Davis, & Boruszkowski, 1987). Males display dominant and aggressive behaviors while women behave in subservient and implicitly sexual ways. Women are also the recipients of implicit, explicit, and aggressive advances, and are portrayed as enjoying aggressive sex (Sommers-Flanagan, Sommers-Flanagan, & Davis, 1993).

Evidence suggests that the storylines shown in music videos shape consumer attitudes and schemas, particularly gender-role schemas. Frequent music video exposure is associated with holding more stereotypical sexual and gender role attitudes as well as stronger acceptance of women as sex objects and support of dating as a game (Ward, 2002; Ward, Hansbrough, & Walker, 2005). In addition, exposure to traditional imagery in music videos is associated with adversarial sexual beliefs (Kalof, 1999). Furthermore, research suggests that greater exposure to violent rap music videos is associated with greater acceptance of violence: participants viewing violent music videos were found more likely to accept the use of violence, report a higher likelihood to

use violence, and accept violence against women (Johnson, Jackson, & Gatto 1995).

As Adams and Fuller (2006) point out, the roots and impact of mysogynism in rap music must be understood in the history and context of racism in the United States, which includes racialized misogyny. Fully understanding the meanings and impact of exposure to such themes on women and men of diverse class and ethnicity will require consideration of this historical and situational context and multilevel approaches. Media influences have been found to shape perceptions, beliefs, attitudes, and behaviors that link power, sexuality, and violence against women. Given the rapid spread of new technology, opportunity for exposure to music containing messages of explicit sexualized violence against women will continue to increase dramatically. The concomitant need for more sophisticated understandings of how gender, race, and class intersect to mediate and moderate the meanings and outcomes of such exposure makes prevention activities in this area an urgent priority.

Mass media can be used to promote sexualized views of women, foster links between sexuality and subordination, and reinforce behaviors and practices that undermine gender-based violence. But it can also be used as a means to educate the public about the pervasiveness, multiple manifestations, causes, and consequences of such violence. There is now a growing body of interdisciplinary research on gender-based violence that is being applied in public education programs, reflected in criminal justice and health care systems, and influencing new laws and policies cross-nationally that provide models for designed evidence-based culturally-sensitive prevention and intervention programs (Heise et al. 1999; Jasinski & Williams, 1998; Koss et al., 2003; Koss, et al., 1994; Renzetti, Edleson, & Bergen, 2001; Russo, Koss, & Ramos, 2000; World Health Organization [WHO], 2002, 2004).

## OUTCOMES OF VIOLENCE

The destructive effects of male violence extend beyond the woman to her family and society. The negative physical and mental health effects have concomitant social and economic costs. In the United States alone, the costs of intimate violence are estimated to exceed \$5.8 billion each year. More than two-thirds of that cost (\$ 4.1 billion) goes for direct medical and mental health care service delivery (NCIPC, 2003).

Women who have been victimized suffer both immediate and long-range consequences to their physical and mental well-being, and these consequences are similar for multiple forms of victimization (Browne, 1997; Coker, Smith, King, & McKeown, 2000; Goodman, Koss & Russo., 1993; Heise et al., 1999; Herrera, et al., 2006; Koss & Heslet, 1992; Koss, et al., 2003; Krug et al., 2002; Resnick, Acierno, & Kilpatrick, 1997). Although many effects are immediately apparent following the violent episode(s), other effects may surface

as intermittent problems or may last for years (Goodman et al., 1993; Koss & Heslet, 1992; Koss et al. 1991). Depression and anxiety increase with ongoing violence (Sutherland, Bybee, & Sullivan, 1998) and decrease as violence diminishes or stops (Campbell & Sullivan, 1994). Revictimization complicates the understanding of outcomes (Beitchman et al., 1992). Women who experience child sexual abuse have higher risk for experiencing rape and other forms of victimization in adulthood (Resnick, Acierno, & Kilpatrick, 1997; Russo & Denious, 2001; Wyatt, Guthrie, & Notgrass, 1992; Koss, et al., 2003).

Indirect effects of partner violence can be far reaching. One of the major indirect consequences of gender-based violence is the effect on children who may witness or be involved in the abuse (for reviews, see Geffner, Jaffe, & Suderman, 2000; Holden, Geffner, & Jouriles, 1998; Koss et al., 2003). Violence against women and against children is highly correlated—if one is being abused, it is likely that the other is as well. Even when children are not abused themselves, witnessing partner violence may have far-reaching consequences. Male children who have witnessed a father batter a mother are more likely to use violence in their own adult lives than those from nonabusive homes (Straus, Gelles, & Steinmetz, 1980). In addition, partner violence in the home is predictive of children's general psychopathology (McCloskey *et al.*, 1995). Even sibling and parental warmth fail to buffer the negative effects of partner violence on children's mental health.

That violence has multiple biological, neurological, physiological, biological, behavioral, social, and economic consequences for women and their families is no longer in doubt. The focus now is on identifying the pathways between the various forms of IPV and its multiple outcomes that so complicate the development of effective prevention and treatment (Babcock, Green, & Robie, 2004). New integrative and interdisciplinary theoretical perspectives as well as multilevel methods that encompass biobehavioral and sociocultural perspectives are needed (e.g., Dutton *et al.*, 2006).

## VIOLENCE AND REPRODUCTIVE ISSUES

Reproductive consequences of intimate violence including childhood sexual abuse, rape, and partner violence, include high-risk sexual behavior and sexually transmitted diseases (Koss et al., 1991; Sturm, Carr, Luxenberg, Swoyer, & Cicero, 1990).

In particular, IPV and unwanted pregnancy would be expected to be linked for a variety of reasons (see Russo & Denious, 1998). Violent partners are more likely to demand unprotected sex and refuse to use a condom (Russo & Denious, 2001). Having a child also increases a women's dependency on her partner and, for him, it becomes an additional point of leverage to exercise control via threats to harm the child (Ptacek, 1997).

Indeed, unwanted pregnancy is highly correlated with exposure to intimate violence including childhood physical and sexual abuse, rape, and partner violence (Dietz, Spitz, Anda, Williamson, McMahon et al., 2000; Russo & Denious, 2001; Wyatt, Guthrie, & Notgrass, 1992). In the United States, among new mothers who reported that their husband or partner had “physically hurt” them during the 12 months before delivery, 70% also reported their pregnancy was unintended (Gazmararian et al. 1995). The positive association is strongest among unmarried women, reminding us that national surveys that focus solely on married women underestimate the prevalence of intimate partner violence in women’s lives (Gazmararian et al., 1995).

Cross-culturally, Kishor and Johnson (2004) found that in eight of nine countries studied, experiencing partner violence was linked with a higher likelihood of having an unwanted birth. The extent to which forced pregnancy might be used as a tactic to keep women from leaving a violent relationship is unknown. Also unknown is the level of contribution forced pregnancy may make to the persistence of high rates of unintended pregnancy around the globe (Russo, 2006).

A focus on pregnancy intendedness or wantedness among children born does not encompass what are arguably the most unwanted pregnancies, that is, those terminated by abortion. Differential access to abortion may contribute to differences in rates of unwanted pregnancies ending in births across countries, making cross-cultural comparisons problematic. Research on violence in the lives of women who have abortions confirms a strong link between violence and unintended and unwanted pregnancy. Women who report having an abortion are more likely to report experiencing childhood physical and/or sexual abuse, being a victim of rape (by someone other than the intimate partner), having a violent partner, and having a partner who refused to wear a condom (Russo & Denious, 2001).

Analyses of data from the National Comorbidity Survey comparing women who had an abortion versus delivery on their first pregnancy found a similar pattern of results with regard to experience of rape, molestation, child physical abuse, being held captive/kidnapped/threatened with a weapon, or being physically attacked: 39% of women in the abortion group experienced some type of violence compared to 26.8% of women in the birth group. In particular, women in the abortion group had significantly higher rates of rape (15.1% vs. 7.5%) and molestation (18.3% vs. 11.6%), respectively. Women who reported multiple abortions (an indicator of repeat unwanted pregnancy) were significantly more likely to be physically attacked (21.5%) than women who reported none (6.7%) or one (7.9%) abortion; 41% of women who had two or more abortions experienced some form of violence (Steinberg & Russo, 2007).

These findings have important implications for policy and practice in the context of the current sociopolitical context in which some researchers are seeking to prove that abortion has damaging health consequences to justify public policies restricting abortion access (Russo & Denious, 2005). Insofar as



such efforts encourage women who have histories of victimization or currently live in violent contexts to attribute their mental health problems to their abortion experience, such efforts may set back the progress that has been made in helping women focus on and deal with the consequences of experiencing such violence. It has even been suggested that a history of abortion may serve as a marker for identifying patients at risk for mental health problems (e.g., Cogle, Reardon, & Coleman, 2004).

But when experience of violence and other covariates are properly controlled, having an abortion is not found to have a significant effect on mental health outcomes, whether generalized anxiety disorder, social anxiety, or PTSD are measured. However, being raped, physically attacked, and held captive/threatened with a weapon continue to be independent predictors of mental health outcomes when pregnancy outcome and relevant covariates are controlled. These findings are congruent with the results of numerous studies, including longitudinal research, that support a causative role for victimization in the development of negative mental health outcomes as well as risk for unwanted pregnancy (e.g., Dietz, Spitz, & Anda, 2000).

Thus, emphasizing abortion as a marker or screening factor is inappropriate insofar as focusing on abortion distracts attention from factors that actually do increase risk for mental health problems. It is the violence in women's lives that is associated with unwanted pregnancy—violence that occurs and puts women at higher risk for mental health problems regardless of pregnancy outcome. It is important that clinicians explore the effects of violence in women's lives to avoid misattribution of the negative mental health outcomes of victimization to having an abortion (Rubin & Russo, 2004). To do otherwise may be to impede full understanding of the origins of women's mental health problems and prolong their psychological distress.

## CONCLUSION

Gender-based violence is a complex, multifaceted phenomenon that is experienced differently by women and men. As such, sophisticated approaches in theory and method are needed to conceptualize and study the factors that mediate and moderate the relation of gender to the experience of intimate violence. Such violence takes multiple forms, is rooted in patriarchal social structures and cultural roles of women and men, and is reinforced by media images. The psychological, social, and behavioral effects of such violence on women, men, families, and society are widespread and long lasting. Understanding, predicting, and preventing gender-based violence will require a complex and comprehensive approach that intervenes at individual, interpersonal, and structural levels and that is responsive to cultural difference.

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