

# Category H – NIJ JOINTLY FUNDED PROJECTS

VIOLENCE & VICTIMIZATION RESEARCH DIVISION'S  
COMPENDIUM OF RESEARCH ON VIOLENCE AGAINST WOMEN

1993-2009

**CATEGORY H: NIJ JOINTLY FUNDED PROJECTS.....1H**

1995-IJ-CX-A019:	<i>When Domestic Violence and Custody Disputes Coincide: Effective Court Response.....</i>	<i>1H</i>
1995-IJ-CX-A025:	<i>Family Violence and Courts: Exploring Testimony on the Battered Women's Syndrome .....</i>	<i>1H</i>
1995-IJ-CX-A032:	<i>Reducing Injuries to Women in Domestic Assault .....</i>	<i>2H</i>
1995-IJ-CX-A037:	<i>Joint NIJ HHS Domestic Violence Studies.....</i>	<i>3H</i>
1997-IJ-CX-A088:	<i>Interagency Research Program on Violence Against Women .....</i>	<i>3H</i>
1999-WT-VX-0002:	<i>Next Millennium Conference: Ending Domestic Violence.....</i>	<i>6H</i>

## Category H: NIJ JOINTLY FUNDED PROJECTS

<b>1995-IJ-CX-A019:</b>	<b>When Domestic Violence and Custody Disputes Coincide: Effective Court Response</b>
<b>Amount:</b>	<b>\$70,556</b>
<b>PI:</b>	<b>Janice Munsterman</b>
<b>Monitor:</b>	<b>Bernard Auchter</b>
<b>Status:</b>	<b>Completed</b>

This grant is a supplement to a State Justice Institute grant made to the National Center for State Courts. As courts are often the last, and sometimes the only protection available to families enmeshed in domestic violence, their failure to deal effectively with perpetrators and victims can exacerbate the problem. This is particularly the case for courts that order victims to share custody with abusive partners, or that do not consider the abusiveness of one parent in deciding to address these issues. This project involves the conduct of intensive research in three sites to determine the extent of the co-occurrence of custody cases and domestic violence, the availability of administrative mechanisms to identify custody cases involving domestic violence, the methods of disposition that result in the least need for future court interventions, and the feasibility of using mediation under court supervision to settle custody cases involving domestic violence.

**Product: NCJ# 169016**

**Domestic Violence and Custody Disputes: A Resource Handbook for Judges and Court Managers (1997) – S. Keilitz, C. Davis, C. Flango, V. Garcia, A. Jones, M. Peterson, D. Spinozza**

The study involved a survey of approximately 150 courts with domestic relations jurisdiction; follow-up surveys on case screening, mediation, guardians *ad litem*, and expert witnesses; and a field study in Baltimore, Maryland, Las Vegas, Nevada, and Louisville, Kentucky. The handbook provides judges and court managers a guide to resources for: 1) determining when domestic violence is occurring between parties to a dispute over child custody or visitation; 2) coordinating the management of custody and visitation disputes involving domestic violence to maximize the safety and efficiency of court processes; and 3) using resources to ensure that resolution to custody and visitation disputes effectively address the best interest of the child and the safety of domestic victims. In the study, 124 courts estimated the proportion of custody and visitation disputes that involve domestic violence: 57 percent of these courts estimated the proportion to be less than one-quarter of the caseload, about 37 percent placed the proportion between a quarter and a half, and 6 percent estimated that over half the custody caseload involved domestic violence. The differences among the sites in rates of DV in the custody caseload illustrated that there was great variation in the sources and the quality of the measurement data. Sources of data from Las Vegas included case files from their Family Mediation and Assessment Center to which judges frequently referred to in custody disputes, Baltimore staff had access only to court case files, and Louisville had the least amount of evidence of domestic violence in the case files as staff had to run a cross-check of the data system for civil protection orders with each of the names of the women in the study sample. Chapters address case management of custody disputes, the use of mediation, and decision-making in custody and visitation, with recommendations for practice. Recommendations include placing limits on overnight visitations and requiring a bond from the batterer to ensure the child's safe return.

<b>1995-IJ-CX-A025:</b>	<b>Family Violence and Courts: Exploring Testimony on the Battered Women's Syndrome</b>
<b>Amount:</b>	<b>\$18,791</b>
<b>PI:</b>	<b>Sandra Thurston</b>
<b>Monitor:</b>	<b>Virginia Baldau</b>
<b>Status:</b>	<b>Completed</b>

This grant is a supplement to a State Justice Institute grant, "Family Violence and the Courts: Exploring Expert Testimony on Battered Women" made to the Women Judges' Fund for Justice. This was to support additional work required for Report on Batter Women's Syndrome as mandated in the Violent Crime Control and Law Enforcement Act of 1994.

**Product: NCJ# 160972**

**Validity and Use of Evidence Concerning Battering and Its Effects in Criminal Trials: Report Responding to Section 40507 of the Violence Against Women Act (1996) – US Department of Justice, Office of Justice Programs & US Department of Health and Human Services, National Institute of Mental Health**

Section 40507 of the Violence Against Women Act requires that three issues be addressed concerning battered women. Medical and psychological testimony on the validity of battered women's syndrome as a psychological condition must be addressed during trial, compilation of Federal, State, and tribal court cases in which evidence of battered women's syndrome was offered in criminal trials; and the assessment of Federal, State, and tribal judges, prosecutors, and defense attorneys on effects that evidence of battered women's syndrome may have in criminal trials. Three separate reports in the NIJ publication consider the validity of the battered women's syndrome in criminal cases, expert testimony on battering and its effects in criminal cases, and the impact of evidence concerning battering and its effects in criminal trials involving battered women. Information on the validity and use of evidence related to battering in criminal trials is also included. A significant conclusion of all three reports is that the term "battered women's syndrome" is no longer a useful or appropriate term, as it implies a single effect or set of effects that characterizes the responses of all battered women which is a position or understanding that is unsupported by research and clinical experience.

<b>1995-IJ-CX-A032:</b>	<b>Reducing Injuries to Women in Domestic Assault</b>
<b>Amount:</b>	<b>\$25,000</b>
<b>PI:</b>	<b>Joel Garner, Jeffrey Fagan, Christopher Maxwell</b>
<b>Monitor:</b>	<b>Bernard Auchter</b>
<b>Status:</b>	<b>Completed</b>

NIJ provided partial support for this grant, which was funded by the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, and the Harry Frank Guggenheim Foundation. Using data from field experiments and program evaluations, the research estimates the effects of legal and social interventions on reducing the salience of injury risk factors and the prevention of repeat injuries. The research uses four existing, archived data sources: 1) the National Crime Victims Survey (NCVS); 2) the 1985 National Family Violence Survey (NFVS); 3) the National Family Violence Evaluation Project (NFVE); and 4) the Spouse Assault Replication Program (SARP). The study analyzes each of these data files separately and reports on the nature of the injuries suffered, social services and medical treatments received, and the effectiveness of prevention control efforts. The supplemental research includes additional analyses of the two intervention datasets: the Spouse Assault Replication Program data, and the National Family Violence Evaluation Program data. The research seeks to determine the effects of legal and social interventions on reducing the recurrence of injury. Whereas, current research tests the effects of broadly defined treatments on subsequent injuries: arrest, shelter, and other legal and social interventions, the supplemental research will examine the effects of disaggregated and combined treatments, and attempt to isolate specific attributes of treatments and interventions that can reduce the re-incidence and severity of injury following intervention.

**Product: NCJ# 188199**

**Reducing Injuries to Women in Domestic Assaults – J. Fagan, J. Garner, C. Maxwell**

In regard to risks of injury in domestic assault, the researchers found four domains of risk that were identified in multivariate models estimated from the national probability samples. First, analyses of the NCVS illustrated that the social position of women places them at risk for both victimization and injury. Women with low education, who are unmarried but have young children in the household, and who are racial minorities had significantly elevated risks of intimate partner assaults. Second, analyses of the NFVS demonstrated that women in couples where one or both members have extensive prior and current involvement in the other forms of violence had elevated risks of violence victimization. Third, marital discord was a risk factor for violence, although, it did not predict severe violence. Using the NFVS, marital discord was a significant predictor of the prevalence and frequency of intimate partner violence (a variable unmeasured in the NCVS). And finally, the fourth domain of risk was the stability and continuity of severe violence. Using the NFVE, the overall reduction in violence and injury was evident with the exception of a small population characterized by repeated prior call to the police for DV, and by abuse during pregnancy, a severe form of violence. In the analysis of effective interventions, using the SARP and NFVE, declines in the prevalence of violence and injury were substantial; however, there was an absence of effects to any single form of intervention, and evidence of escalation effects in cases where suspects were arrested.

**Additional NCJ Citations: 195076**

<b>1995-IJ-CX-A037:</b>	<b>Joint NIJ HHS Domestic Violence Studies</b>
<b>Amount:</b>	<b>\$50,000</b>
<b>PI:</b>	<b>Jerry Silverman</b>
<b>Monitor:</b>	<b>Virginia Baldau</b>
<b>Status:</b>	<b>Completed</b>

NIJ provided partial support for two studies conducted through the Office of the Assistant Secretary for Planning and Evaluation. The two studies were: 1) Domestic Violence Policy and Program Development and 2) Child Welfare and Domestic Violence.

<b>1997-IJ-CX-A088:</b>	<b>Interagency Research Program on Violence Against Women</b>
<b>Amount:</b>	<b>\$400,000</b>
<b>PI:</b>	<b>Donald Vereen</b>
<b>Monitor:</b>	<b>Bernard Auchter</b>
<b>Status:</b>	<b>Completed</b>

The following seven research projects were supported by the 1996 Interagency Consortium on Violence Against Women and Violence within the Family, which was comprised of nine federal offices, including NIJ, and coordinated by the Office of Behavioral and Social Sciences Research in the National Institutes of Health. For information regarding final products, contact the National Institute on Drug Abuse. Where applicable, NCJ numbers are listed for additional final reports.

<b>1R01DA011150-01</b>	
<b>PI:</b>	<b>Ernest Jouriles</b>
<b>Title:</b>	<b>Children of Battered Women: Reducing Risk for Abuse</b>

This intervention seeks to reduce risk for child maltreatment in families with young children whose mothers are departing from battered women’s shelters. It recognizes the family context contributing to aggressive behavior and will evaluate outcomes for both mothers (psychological distress, use of assistive services, substance abuse) and children (injuries and trauma symptoms). An important variable was whether the mother resides independently from her violent partner after leaving the shelter, an issue of considerable importance in guiding future programs for abused women.

<b>1R01DA011151-01</b>	
<b>PI:</b>	<b>Marsha E. Wolf</b>
<b>Title:</b>	<b>Protection of Women: Health and Justice Outcomes</b>

A cohort study evaluated the effectiveness of protection orders and a legal intervention to prevent future contact between women and their abusive partners, as a means of reducing subsequent violence and injury. This study includes data on injury, medical care, and hospitalization of abused women. A second phase was supported directly by NIJ (1999-WT-VX-0014).

**Product: NCJ# 200762**

**Resolution of Depression Among Victims of Intimate Partner Violence: Is Cessation of Violence Enough? (2003) – M. Kernic, V. Holt, J. Stoner, M. Wolf, F. Rivara**

The experience of intimate partner violence (IPV) places women at a higher risk for depression compared to the population of women in general. Previous research has indicated that even when these women leave the violent home, symptoms of depression do not necessarily abate. The authors interviewed 448 female victims of IPV who participated in Seattle, WA’s Women’s Wellness Study. Symptoms of depression were measured three times over a 2-year period after the women had left the violent home. Data were also collected on the occurrence of abuse after leaving the violent home, consistent with previous research that indicates battered women may continue to be victims of violence once they leave the abusive relationship. Results of statistical analyses revealed that, among those women who experienced psychological abuse only, cessation of abuse was correlated with a non-significant reduction in the likelihood of depression. Among the women with a history of physical or sexual abuse, coupled with psychological abuse, cessation of the physical abuse and sexual abuse was associated with a 27 percent decline

in depression. Cessation of both types of abuse was associated with a 35 percent decline in the likelihood of depression.

**1R03DA011152-01**  
**PI: Julia Perilla**  
**Title: Domestic Abuse Among Latinos: Description and Intervention**

Atlanta’s Latino immigrant community was studied, using descriptive methodology to explore patterns of abuse in the context of cultural values between couples with and without a legal history of domestic violence. An intervention for women and one for men are adapted for Atlanta’s immigrant Latino groups from successful models in California.

**1R03DA011154-01**  
**PI: Lorraine H. Malcoe**  
**Title: Understanding Partner Violence in Native American Women**

This research used a qualitative interview study and then a larger scale (n=431) cross-sectional questionnaire to determine the prevalence of partner violence among women of several Plains tribes. The qualitative component of the study indicated that increased risk of IPV may be associated with the partner’s heavy alcohol use, economic stressors and other chronic stressors including having to take care of small children. Protective factors included a strong social support network and having a partner that the woman considered her main confidant (this was never the case however, where there was severe violence). The quantitative results reveal that more than 80 percent of the women had experienced some sort of IPV in their lifetimes; 66 percent reported severe violence; and almost half said they had been beaten up. Three-quarters experienced some sort of injury (half reported severe injury); 9 percent reported pregnancy complications or miscarriage resulting from the violence; 22 percent reported experiencing severe violence within the past year.

**Product: NCJ# 199703**  
**Intimate Partner Violence and Injury in the Lives of Low Income Native American Women (2004) – L. Malcoe, B. Duran**

In Phase 1, semi-structured, in-depth qualitative interviews were conducted with 37 Native American women who had experienced physical or sexual intimate partner violence were compared with those who had no history of such violence. In phase 2, a cross-sectional survey of 431 Native American women assessed lifetime and past-year prevalence of intimate partner violence and related injury and tested etiological hypotheses generated in phase 1. The majority, 85.6 percent, of the women had a relationship with a man in the previous year, and most, 89 percent, were members of 1 of the 8 tribes located in western or southwestern Oklahoma. Physical or sexual intimate partner violence had been experienced by 82.7 percent of the women in their lifetimes. Two-thirds reported severe physical partner violence, and 25.1 percent reported severe sexual partner violence. More than one-third of women who reported severe physical partner violence also reported being threatened or physically forced to have sex with a partner, compared with 4.3 percent of women who reported no severe physical partner violence. No significant differences were found in rates of severe partner violence by family poverty level, participant’s education, employment status, tribal affiliation, or whether there was a telephone in the home. This study concludes that the rates of lifetime intimate partner violence found in this study suggest that at least some Native American women are at increased risk for physical and sexual partner violence. Lifetime rates in the sample are substantially higher than those observed among a nationally representative sample of U.S. women. Further, the results support the hypothesis that rates of intimate partner violence vary substantially among different populations of Native American women.

**Additional NCJ Citations: 199701, 199703**

**1R01DA011156-01**  
**PI: Jacquelyn C. Campbell**  
**Title: Risk Factors for Homicide in Violent Intimate Relationships**

Using police records, this project examined intimate partner homicide to identify substance abuse and other risk factors that might have preceded the homicide. Female controls are compared on these factors. An additional group was women who have been shot but survived the attack by an intimate partner. The Danger Assessment (DA)

Instrument, evaluated in this study, has potential to guide future interventions to prevent a fatal violent episode among those at high risk.

**Product: NCJ# 199710**

**Research Results From a National Study of Intimate Partner Femicide: The Danger Assessment Instrument (2004) – J. Campbell, J. Koziol-McLaine, D. Webster, C. Block, D. Campbell, M.A. Curry, F. Gary, J. McFarlane, C. Sachs, P. Sharps, Y. Ulrich, S. Wilt, J. Manganello**

A group of researchers in 12 cities across the country partnered with police departments, district attorney offices, domestic violence shelters, and medical examiners to conduct the study. A case control design compared information from interviews with proxy informants for females killed by an intimate partner (cases) with information from abused women (abused controls). Sampling quotas for cases and controls for each of the 12 cities in the study were determined by annual rates of intimate partner femicides. The study encompassed 220 femicide cases and 356 abused controls. In addition to administering the Danger Assessment (DA), the interview solicited information on demographic and relationship characteristics, including type, frequency, and severity of any violence; psychological abuse and harassment; alcohol and drug use; and weapon availability. Scales that measured partners' controlling behaviors and stalking were constructed based on factor analysis of the risk factor items. The study found that 15 of the 17 items of the DA distinguished intimate partner femicide victims from abused women. The factor with the strongest risk (highest odds ratio) was the use (or threatened use) of a weapon. Women who had been threatened with being killed were almost 15 times more likely to be among the femicide victims rather than among the abused controls. Perpetrator drug abuse and serious alcohol abuse also differentiated batterers who killed from those who did not, as did prior gun ownership. The two DA items that did not significantly differentiate intimate partner femicide victims from abused women pertained to suicidality.

**Additional NCJ Citations: 179872, 196546, 196547, 196647, 199701**

**Additional Publications: Campbell, J.C., Webster, D., Koziol-McLain, J., Block, C., Campbell, D., Curry, M.A., Gary, F., Glass, N., McFarlane, J., Sachs, C., Sharps, P., Ulrich, Y., Wilt, S.A., Manganello, J., Xu, X., Schollenberger, J., Frye, V., & Laughon, K. (2003). Risk factors for femicide in abusive relationships: Results from a multisite case control study. *American Journal of Public Health, 93*, 1089-1097.**

**1R01DA011157-01**

**PI:**

**Lourdes Linares**

**Title:**

**The Effects of Community Violence on Women and Children**

Dyad research (women and children) on family aggression related to maternal practices will be piloted by interviews and videotaped observations of mothers and young children in high-crime, multiethnic neighborhoods. The context of the community as a factor contributing to psychological symptoms, health problems, and childhood behavior problems will be assessed by structural analytical procedures. The strength of this study is in the potential to weigh the different contributions of individual and community influences on violence. To facilitate the research, the investigators secured cooperation of neighborhood groups and influential community leaders.

**Product: Linares, L.O., Groves, B.M., Greenberg, J., Bronfman, E., Augustyn, M., & Zuckerman, B. (1999). Restraining orders: A frequent marker of adverse maternal health. *Pediatrics, 104*, 249-257.**

Women with histories of interpersonal violence are poorly identified because of barriers in self-disclosure. This study identified differences on maternal health and child behavior between women who report filing a restraining order (RO) and those who do not among a nonreferred sample of women living in high-crime neighborhoods. Four types of violence were coded independently based on maternal narratives: 1) verbal harassment; 2) verbal threats or intimidation; 3) physical assault; and 4) destruction of property. One hundred sixty patients between 3.0 to 6.1 years who resided within five residential ZIP codes with a high rate of local crime in the City of Boston were drawn from a pediatric care clinic. Results indicated that: 1) Sixty-four (40 percent) of 160 mothers reported a history of filing a RO against a current boyfriend or husband (39%), ex-boyfriend or husband (44 percent), someone known (8 percent), or other (9 percent); 2) mothers in the RO group experienced higher current partner verbal aggression and physical violence, poorer health, and higher post-traumatic stress-related symptoms, compared with mothers in the non-RO group; and 3) more mothers in the RO group met partial lifetime Post-traumatic Stress Disorder diagnosis. From this study, among dyads residing in high-risk crime areas, the incidence of RO histories is substantive considering this was a nonshelter, nonreferred sample.

**Additional Publications: Linares, L.O., Heeren, T., Bronfman, E., Zuckerman, B., Augustyn, M., & Tronick, E. (2001). A mediational model for the impact of exposure to community violence on early child behavior problems. *Child Development, 72, 639-652.***

**1R01DA011158-01**

**PI: Heidi Resnick**  
**Title: Prevention of Post-Rape Psychopathology in Women**

This small grant studied the efficacy of a brief video-based preventive intervention used with rape victims during their first emergency room contact. This intervention is hypothesized to reduce risk of developing Post-traumatic Stress Disorder (PTSD), depression, substance abuse, and panic, and to increase the likelihood that victims make use of medical follow-up facilities. A major strength of a successful interventions is that the video could be made available nationwide, especially valuable to facilities without rape crisis counselors at the ER. The program showed the video to a random sample of rape victims while they were in the emergency room undergoing treatment and the women who viewed the video proved to have a significant decrease in anxiety by the end of the medical examination.

**Product:**

**Acierno, R., Resnick, H.S., Flood, A., & Holmes, A. (2003). An acute post-rape intervention to prevent substance use and abuse. *Addictive Behaviors, 28, 1701-1715.***

The trauma of rape is routinely associated with extreme acute distress. Such peri-event anxiety increases risk of developing psychopathology and substance use or abuse post-rape, with the degree of initial distress positively predicting future problems. Unfortunately, the nature of post-rape forensic evidence collection procedures may exacerbate initial distress, thereby potentiating post-rape negative emotional sequelae. Consequently, substance use may increase in an effort to ameliorate this distress. To address this, a two-part video intervention was developed for use acute post-rape time frames. Pilot study data with 124 victims indicated that the low-cost, easily administered intervention was effective in reducing risk of marijuana at 6 weeks. Nonstatistically significant trends also were evident for reduced marijuana use. Trends were also noted in favor of the intervention in the subgroup of women who were actively using substances pre-rape (among pre-rape alcohol users, 28 percent viewers versus 43 percent nonviewers met criteria for post-rape alcohol abuse; among pre-rape marijuana users, the rates of post-marijuana use were 17 percent versus 43 percent).

**Additional Publications: Kilpatrick, D.G., Resnick, H.S., & Acierno, R. (1997). Health impact of interpersonal violence: Implications for clinical practice and public policy. *Behavioral Medicine, 23, 79-85.***

**1999-WT-VX-0002: Next Millennium Conference: Ending Domestic Violence**  
**Amount: \$50,000**  
**PI: Vikii Coffey**  
**Monitor: Angela Moore Parmley**  
**Status: Completed**

This project will implement the Research Track for the "Next Millennium Conference Ending Domestic Violence". The Next Millennium Conference is a national conference on domestic violence scheduled, for August 29-September 1, 1999, in Chicago, IL. Conference attendance is estimated at 800-1,000 persons, representing a diversity of disciplines, ethnicities, and cultures. Presented as a working conference, Next Millennium will address current and futures issues which impact domestic violence advocacy, services, programs, research, and public policy. The overall purpose of the conference is to help set social action and research agendas and foster a collective vision for ending domestic violence. The requested funding from NIJ would complement funds committed for this conference by its sponsor, the Office of Community Services, Department of Health and Human Services. The conference is also being supported by the Centers for Disease Control and Prevention (CDC), OJP's Violence Against Women Office (name subsequently changed to the Office on Violence Against Women, OVW), and other public and private organizations and foundations.

**Product: NCJ# 184560**

**Next Millennium Conference: Ending Domestic Violence (1999) – V. Coffey**

Many of the presentations focus on research that is being done in the field of domestic violence. Issues discussed include collaboration between researchers and practitioners in developing the objectives and methods of research, so



as to ensure benefits for practice and safety for victim participants in the research. Confidentiality and ethics in domestic violence research are discussed by a number of panels. Another issue discussed is gaps in research on victimization and victim services for diverse ethnic and marginal groups who experience domestic abuse, such as lesbians, drug addicts, disabled persons, mentally ill persons, and women of color. One panel discusses the biases in research that obstruct the amount and effectiveness of research on domestic violence victims in such groups. The importance of taking into account cultural differences among domestic violence victims when conducting research is discussed as well. Evaluation, one aspect of research, is discussed by one panel. In addition to outlining the basic steps of evaluation research, panel members emphasize the importance of collaboration between researchers and practitioners in determining the objectives and methods of program evaluation.

**Additional NCJ Citations: 184561, 184562, 184563, 184564, 184565, 184567, 184568, 184569, 184570, 184571, 184572, 184573, 184574, 184575, 184576, 184577, 184578**

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For an index of all grants, go to <http://www.ncjrs.gov/pdffiles1/nij/223572-grants-index.pdf>.