Anger, hostility, and male perpetrators of intimate partner violence: A meta-analytic review

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Abstract

There has been significant interest in, and controversy about, whether anger and hostility problems are meaningfully related to male-to-female intimate partner violence (IPV). In this meta-analytic review, we empirically evaluated whether the constructs of anger and hostility discriminated between IPV perpetrators and nonviolent comparison males. Thirty-three studies reporting data from 28 independent samples were included for analysis. IPV perpetrators consistently reported moderately higher levels of anger and hostility than nonviolent men across assessment methods (i.e., self-report, observational, and spouse-specific). In prior reviews, relationship distress has been proposed as a moderating variable between relationship distress and IPV. In this review, IPV perpetrators also consistently reported moderately higher levels of anger and hostility than relationship-discordant nonviolent men. Additionally, comparisons of subtypes of IPV perpetrators found that men in moderate-high severity IPV subtypes reported higher levels of anger and hostility than low-moderate IPV subtypes. While the pattern of results in this review suggests that elevated anger and hostility are distinguishing characteristics of IPV perpetrators, empirically based conclusions regarding the functional and contextual relationship between anger, hostility, and IPV remain elusive. The implications and limitations suggested by this review are discussed in the context of emerging models of anger and IPV and treatment programs for abusive men.

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Attempts to understand the correlates and causes of intimate partner violence (IPV) have increasingly focused on the role of individual factors specific to the abusive male. Several reviews of this research have consistently concluded that in addition to childhood precursors, societal influences, and interpersonal contexts, male IPV perpetrators are characterized by problems related to psychopathology (Holtzworth-Munroe & Stuart, 1994; Kessler, Molnar, Feurer, & Appelbaum, 2001), cognitive distortions and deficiencies (Eckhardt & Dye, 2000), and social skills deficiencies (Anglin & Holtzworth-Munroe, 1997). While few, if any, researchers in this area would endorse a purely intrapersonal model of IPV, more careful consideration of the characteristics internal to the abuser may assist in the elucidation of etiological models of IPV and in the development of more targeted intervention programs for IPV than currently exist. The present review is focused on a particular internal characteristic of abusive males that would seem to have much potential as an aid to understanding IPV etiology, treatment, and prevention: anger arousal. In this paper, we focus on why anger might be relevant to IPV, discuss relevant etiological models that may explain how problematic anger may relate to IPV, and provide a quantitative review of the evidence regarding whether male IPV perpetrators can be distinguished from nonviolent men in terms of anger and hostility.

1.1. Setting the stage: why should disturbed anger relate to IPV?

On the surface, disturbed anger and hostility would appear to be obvious risk factors for partner violence; does it not follow that aggressive people also tend to be angry people? The scenario wherein an enraged husband explodes with verbal and physical aggression directed toward his spouse appears to have ample face validity and frequent representation in media reports of IPV incidents (Purdy & Nickle, 1981; Sonkin, Martin, & Walker, 1985; Walker, 1979). Clinically focused authors have long advocated the usage of anger deescalating treatments for men who abuse their partners (e.g., Deschner, McNeil, & Moore, 1986; Hamberger, 1997). Likewise, the accumulated data suggest that problems relating to anger arousal are at least moderately consistent in discriminating domestically violent from nonviolent males (Eckhardt, Barbour, & Stuart, 1997; Schumacher, Feldbau-Kohn, Slep, & Heyman, 2001). There are several problems, however, that seriously limit enthusiasm among both researchers and practitioners concerning the status of anger as a risk factor for IPV.

First, despite being a central feature of the human emotional experience, we know little about the anger construct relative to the accumulated knowledge concerning other negative emotions such as depression or anxiety. Anger is underresearched and infrequently defined in the general clinical research literature and in IPV research in particular (DiGiuseppe, Tafrate, & Eckhardt, 1994; Eckhardt et al., 1997; Eckhardt & Deffenbacher, 1995). Researchers in this area infrequently define their constructs, especially in terms of addressing conceptual distinctions between anger and hostility, resulting in a hodgepodge of loosely connected results that defy integration. Indeed, Berkowitz (1994) suggested that, “[a]ny really close and thorough examination of the psychological research into the origins of anger and emotional aggression must leave the thoughtful reader somewhat dissatisfied. The literature presents us with occasional inconsistencies and unexpected findings that most of the investigators seem not to have noticed...” (p. 35). In a review of two dozen studies examining anger and the perpetration of marital violence, Eckhardt et al. (1997) reported that there was substantial inconsistency in findings related to anger, hostility, and IPV due in part to researchers’ inconsistent attention to the basic theoretical and
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