Women, Violence with Intimates, and Substance Abuse: Relevant Theory, Empirical Findings, and Recommendations for Future Research

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ABSTRACT

Evidence from the disparate domains of anthropology, criminology, psychology, and sociology indicates that women are involved in many of the same acts of aggression and violence as men, and that substance use may play an important role in these acts. Yet little is known of the pathways between violence and drugs for women. The aims of this paper are threefold: 1) To review and integrate existing literature addressing female violence and substance abuse, presenting available epidemiology, theories, and research applicable to the study of this problem. 2) To examine the political and methodological obstacles to conducting systematic research on female aggressiveness. 3) To offer recommendations for future epidemiological, preventive, and therapeutic research efforts in this vital yet grossly understudied area.
INTRODUCTION

For women, the strong association between violence and substance abuse has been empirically demonstrated in recent years (1-5). Recently, most research studies of female drug abusers that address the topic of trauma and violence have focused on the problem of female victimization. Less well characterized is the extent to which women can be directly aggressive and violent, particularly in relation to their intimates: friends, relatives, members of their social networks, partners, and even their own children.

Despite evidence from the disparate domains of anthropology, criminology, psychology, and sociology that women are involved in many of the same acts of aggression and violence as men, violent female drug abusers (in Western societies) who display this type of behavior are relatively unpopular subjects for research. Yet the facts remain that women carry and use weapons; join gangs and fight to protect fellow gang members; are physically violent with their partners, family members, and friends; abuse their children psychologically and physically; and assault and kill. However, because of the relative lack of attention paid to the topic, information about the epidemiology and consequences of female aggression and the role of alcohol and drug abuse in violent involvements is scanty. Few empirical studies of these issues have been done with solid research methodology, leaving the problems undefined and preventive interventions nearly nonexistent.

Because the victims of female violent encounters are predominantly known to the female perpetrator (6, 7), we will review the problem of intimate violence primarily within the domestic domain (i.e., partners and children of female perpetrators). Although violence among convicted female criminals has been studied to a relatively greater extent, the focus for this review will remain interpersonal violence that occurs within the home, where in most cases the woman exhibiting violence has not been convicted of a crime. We will define aggression as behavior intended to, or having the perceived intention of, inflicting harm or injury, either physical or psychological (8, 9), and violence as “an act carried out with the intention of, or perceived intention of, physically [our emphasis] hurting another person” (10, p. 554).

Thus, the aims of this review are threefold: 1) To review and integrate the existing literature addressing the issue of female substance abuse, aggression, and violence, presenting available epidemiology, theories, and research applicable to the understanding of the problem. 2) To define relevant questions for research on the subject, as they may differ from the study of men, and to examine the obstacles, political and methodological, to conducting systematic research on this
METHODS

Women as Perpetrators of Intimate Violence

A dearth exists of reliable data on women as perpetrators of violent acts, and information on female violence within the family setting is even scarcer. We found no reliable statistics on perpetrators of child abuse (either physical or sexual) by gender and/or specific parental relationship from any governmental agency or study.

Most of the hard facts on women as perpetrators of violence are criminal-justice statistics. These figures provide imprecise estimates of the prevalence of female violence, since they tally only arrest rates and incarceration numbers. None of these are inclusive of women sent to mental institutions, nor do they acknowledge all the unreported instances of female violence. They also lack detail and do not provide for gender-by-race breakdowns at a national level, and their categories of offenses are not specific enough to provide a clear, multidimensional view of female criminal behavior.

However, criminal-justice statistics do show general upward trends in women's violent actions toward intimates. Of the total population of women in state prisons (39,917), about one-third were incarcerated for violent crimes. The 1991 Uniform Crime Reports of the Department of Justice (11) show that the total arrests of women for "offenses against family and children" between 1982 and 1991 went up by 196.1%. For men in the same years, the increase was 62.8%. According to current Federal Bureau of Investigation (FBI) homicide rates, 14% of homicide offenders are women. However, whereas women kill strangers at a rate one-twentieth of the rate at which men do so, wives kill their male partners at a rate that is about half (12, 13) the rate at which men do so.

Another upward trend in the incidence of female crime is in drug-abuse violations. The total number of women in state and federal prisons increased by 256% from 1980 to 1990 (14). In these same years, there was an 89.2% increase in drug-abuse violations for women and a 50.5% growth in such violations for men. In state prisons, the most common reason among women for being incarcerated was a drug conviction (about one third, as compared with one-fifth for male inmates). Moreover, women were also more likely to be under the influence of drugs when they committed their criminal acts (36.3%, vs. 30.6% for men) (14).
The subject of marital violence and female-to-partner aggression has been researched empirically. In the National Family Violence Surveys (15–17), which interviewed national samples of about 8,000 couples, researchers found that the rates for female-to-male assault by wives is nearly equal to the rates for male-to-female assault by husbands (124 per 1,000 couples report female-to-male assault and 122 of 1,000 couples report male-to-female assault). This research evidence supports the assertion that women can be aggressive and violent in relation to their partners. Despite some methodological questions about the interpretation of these statistics, and others like them (18), it appears that female-to-partner aggression and violence may be considered a significant issue in couples who engage in violent dynamics. Research has documented that the use of substances by the woman can precipitate partner abuse (19) and can lead to more serious victimization of wives by husbands (20). However, there is little information currently available on female alcohol or drug use and the subsequent perpetration of violent acts.

An important distinction has been made about the consequences of violence in considering female acts of aggression and violence in partner relationships (21, 22). Clearly, the likelihood that a violent woman will cause the same level of physical injury to her partner as her partner will to her is low, unless weapons are being used. Current measures of female partner violence (the most commonly used being the Conflict Tactics Scale (CTS) [23]) often do not adequately take into account that the meaning and context of violent acts may be very different for women than for men, and may result in significantly less impact and injury. An exception is in the special case of severely abused women who eventually perpetrate severe violence on their partners, for which researchers (24–26) have identified a pattern of significant psychological, physical, and sexual abuse and humiliation from which the woman is defending herself and as a result of which she actually perceives herself to be at risk of being killed with no other options for action.

However, because family violence can be intergenerational, and because there is evidence that women who are abusive in partner relationships may suffer more severe victimization than men (the theory that violence begets violence, and that any form of physical retaliation authorizes escalation to more severe forms of violence), female partner violence needs to be identified and further characterized. Furthermore, the dangers of minimizing and disregarding female aggression (despite very real and political concerns about the misuse, misinterpretation, and distortion of information on this topic) include maintaining women in a passive role in which they are destined to be viewed as victims rather than as active participants in their own lives.
Taken together, these data suggest that although women still do not commit criminally accountable acts to the same extent as do men, the growth rates of violent behavior and drug abuse among women are soaring toward or above those of men. Not only must more detailed, accurate statistics about this be compiled, but future studies must also address the question of whether these rates are a reflection of societal changes in attitude toward women by the judicial system (i.e., less lenient treatment by judges and police officers), societal changes in the perception of child disciplining and the “discovery” of child abuse, increased drug abuse, shifts in family structure and economic relationships, and/or the development of a new female role.

Theories of Female Aggression and Violence

Early studies of female crime portrayed the perpetrating women as social deviants and biological aberrations (27). They paid little attention to the complex nature of the subject, viewing it in a limited capacity, without consideration of external societal factors and exclusively in terms of male aspects of criminality. Current theorists have given women and crime a “room of its own.” They view the subject with social, structural, economic, and gender considerations, examining the contexts surrounding the issue, offering multiple causal theories on female violence and differing approaches to its prevention.

The burgeoning interest in the previously neglected subject of women and crime followed the second wave of feminism in the 1970s, when women were moving into the mainstream. One of the first theories stemming from this change in women’s roles was Freda Adler’s “liberation” theory in her 1975 work *Sisters in Crime: The Rise of the New Female Criminal* (28). Her argument was based on the premise that the rise in female crime was due to the new freedoms, increased opportunities, and stresses and strains put on women, which caused them to react in ways in which only men had previously reacted. Adler (28) calls this converging of similar criminal behavior between the sexes the “masculinization” of female behavior.

The “deprivation” theory of gender and crime is similar to Adler’s liberation theory in that it also offers a gender-convergence hypothesis for crime. However, it addresses women with a low socioeconomic status, differing from Adler’s upper-income-level women, among whom liberation is most likely to occur. Modern deprivation theorists argue that the current increase in the criminality of women is the result of these young, single, minority women (who are often heads of their households) now being in an even more unfavorable position in the labor
market, but at the same time being increasingly "expected to function independently" (29).

Another perspective on female crime that considers women's changing role is the "power-control theory." Theorists such as Hagan et al. (30) examine the class dynamics of the family and the relative positions of the spouses. Central to their belief is that workplace power relationships translate into parental modes and influence patterns of delinquency in children at home. For example, in patriarchal families, sons are the delinquents and it is unlikely that daughters will become delinquent. However, in more egalitarian households, where wives work, daughters will take more risks and they too may become delinquent.

Current female violence studies and theories are delving further into the family, closely examining "spouse abuse" — a gender-neutral term used by "family-violence" researchers. These social scientists point out that violence affects all family relationships and that it does not originate in the relationship between husbands and wives. Rather, it is caused by various social structural factors (15, 31, 32). By using the Conflict Tactics Scale (23), family-violence researchers have tested their hypothesis that within the context of a couple, the woman may be just as violent as the man (17, 32). They also believe that minor violence by wives increases the probability of severe assaults by husbands (15, 33, 34). The impetus for these researchers to center their studies on female as well as male behavior is the prevention of cyclical violence in the family.

The focus by family-violence researchers on physical assaults by wives has provoked a strong reaction from social scientists who identify with the "feminist" tradition. Feminist researchers fear a backlash from findings that center on abuse by women, whom they argue are typically the victims rather than the perpetrators of violence that results in serious injury in intimate relationships. They contend that the cause of female violence is a reaction to male dominance and abuse, and that sexual oppression and economic dependence within the relationship are the critical determinants of women's violence against their partners (21).

Except for those of the feminist researchers who maintain the existence of a great differential between the sexes, all of the theories discussed above move toward neutralizing gender as a major factor in predicting criminal behavior. Empirical evidence in recent studies of Western societies, as well as in cross-cultural examinations, supports significant gender convergence in aggression between adult men and women, calling the rates of such violence more similar than different for the sexes (8, 9, 35, 36).

What are different, however, are the modes of expression of aggression and violence, the contexts in which they are used, and the purpose of the violence.
Women are more likely to express aggression verbally or indirectly; men are more likely to be physically violent. Women may use violence in intimate relationships more often in self-defense than do men. Women may experience more guilt related to overt expressions of aggression and impulsivity than do men.

Study of differences between female and male gangs has helped to further clarify the contextual nature of some of these differences. Campbell (37) has argued that women in gangs have adopted instrumental, means-to-an-end violence (typically more associated with masculine types of violence) as a consequence of witnessing their mothers’ victimization, as well as of being victims themselves. Campbell (37) argues that it is the female gang-member’s way of taking action and protecting herself and her children by adopting an aggressive stance. This contrasts with the expressive violence that is the type of violence more commonly associated with women, as in the case of a woman hitting a man who has betrayed her, to show him that he has hurt her. A quote from Ander’s film “Mi Vida Loca” (38), a documentary-style narrative depicting a female gang in Los Angeles, stresses the importance of making such distinctions rather than assuming that male and female aggression, even if similar in form, has the same origins or meaning. Thus, one of the female gang members in the film, describing the recent adoption of guns and knives into daily gang activities (which include drug dealing), states that “Women don’t use weapons to prove a point; women use weapons for love.”

**Social causation theory, drug abuse, and female violence.** Female violence and drug abuse cannot be considered without accounting for the situational/context variables in which they occur, such as socioeconomic status, effects of poverty, and lack of community resources, attention to the special differences of inner-city family structures (i.e., extended kinship networks as opposed to the traditional nuclear family structure), and racism. Yet violence in the lives of inner-city women has been underacknowledged and inadequately studied (1, 2).

Despite clinical knowledge of high rates of child abuse among the poor, and prevention efforts targeting poor families “at-risk,” few studies have addressed abuse and neglect with an emphasis on maternal aggression and violence. The reasons for this failure to fully specify the problem may be complicated, and may arise in part from concern about stigmatizing an already disenfranchised group. However, Dohrenwend et al. (39) reported empirical findings suggesting that the social-causation theory can be applied to understanding the robust association between substance abuse and low socioeconomic status. According to social-causation theory, the numerous stresses of poverty and disadvantage common to members of lower socioeconomic groups play an influential role in both the
development of depression and in substance-abuse problems. It is poverty and disadvantage, not ethnicity or race per se, that appear to be causal.

A few studies of violent female offenders have attempted to evaluate the impact of race and class, suggesting that lack of opportunities (i.e., unemployment rates) affects crime rates (40–42). Entry into criminal careers may also be more accessible to poorer women than to women of higher socioeconomic background who lack the opportunities or need for such careers. Some research on female criminality has suggested that African-American women may be more likely to commit violent crimes than Caucasian women (41, 43). However, it appears that careful accounting for socioeconomic status removes race as a predictor of violence (41).

What is clear is that the empirical study of female violence cannot be undertaken without attention to the significant role that environment (broadly, socioeconomic status, differing family structures, lack of educational and vocational opportunities, urban decline, and limited community resources) may have in contributing to behavioral outcomes. Further research efforts must anticipate and address the multidimensional factors that are interwoven with drug abuse and violence for women, with particular attention to special populations such as minorities and the economically disadvantaged in order to define the terrain with any validity, and to develop effective prevention/intervention strategies.

Pathways Between Drug Abuse and Violence

Not surprisingly, the pathways and temporal relationships between violent behavior and substance abuse are bidirectional, and cannot be well understood without accounting for this complexity (44). Violence can be a risk factor for substance abuse; similarly, substance abuse can be a risk factor for violence.

Becoming a substance abuser may greatly increase a woman’s likelihood of being a victim of trauma and violence (45, 46) as a consequence of the daily circumstances through which the female addict may need to obtain illicit drugs (i.e., becoming a drug dealer or a prostitute). Similarly, the lifestyle of a drug-abusing woman may increase her vulnerability to committing all kinds of violent acts, as with the use of particular drugs such as crack/cocaine, which can increase paranoia and aggression and have disinhibiting effects.

On the other hand, a number of separate research findings (47–50) have confirmed the strong relationship between histories of child abuse and later alcohol and/or illicit drug use. Similarly, exposures to trauma and violence in adulthood
may also be risk factors for the development of substance abuse (2). Another possible pathway to violence can be mediated by drug abuse. For example, a childhood history of trauma may serve as a predisposing factor to drug-abuse problems following exposures to violence in adulthood, whether as a victim or a perpetrator. Because the terrain of the adolescent female sex offender remains undefined, the extent to which child and adolescent experiences of perpetrating abuse may lead to substance-abuse problems remains unclear.

Clearly, beyond simple documentation of the onset of substance abuse, there is also a need to examine differences in shorter- and longer-term substance use and abuse; the amount of substance use necessary to perpetrate an act of violence; more specific knowledge of the abused substances that may be most highly implicated in triggering violent behavior for women; and gender differences in the mechanisms, contexts, and consequences of substance use on aggressive and violent behavior.

At present there has been scant study of the contextual and temporal association between substance abuse and the perpetration of violence. Moreover, relationships between victimization and perpetration for individual women (i.e., the woman with her own childhood history of victimization who becomes violent to her partner) and within families (i.e., the adult battered woman who becomes aggressive or violent with her own children) have been largely unexamined. Further, the role that substance abuse may play in these complex intrafamilial configurations of violence remains unknown.

Drug Abuse and Female Violence with Intimates

Although empirical literature in the social sciences, apart from criminology, has generally avoided direct examination of the violent female, of those who have undertaken the subject, the work of family-violence researchers studying domestic violence, spouse abuse, and child abuse has been most relevant to the issue of female aggression and violence. However, there is a paucity of studies that emphasize and investigate female violence as distinct from family or parental violence, and also of studies that focus directly on gender differences in the perpetration of abuse. This lack of emphasis is particularly interesting, given that most child-abuse-prevention programs target women “at risk” as the subjects of preventive intervention. Nonetheless, the literature discussed subsequently provides some background for the further study of drug-abusing women and violent behavior.
Although few studies have systematically examined the issue of maternal drug use and violence, evidence implicates drug use by mothers in many cases of child abuse, particularly in lower-income populations. Murphy et al. (51) reported that nearly 50% of the child-abusing parents in their study were identified as having substance-use problems. After alcohol, cocaine was the most frequently used substance for mothers in the sample. Significantly, these authors also noted that "substance abuse was just one of a number of serious problems in many of the families in our sample; poverty, lack of social supports, emotional problems, parental history of having been maltreated as a child, and inadequate education were also endemic" (51, p. 209).

In one study of violence and psychiatric disorders, those patients with substance-abuse disorders were more than twice as likely to commit violence as were schizophrenic patients (52). Further, the risk of violence increased with the number of disorders with which a patient was diagnosed. When alcohol has been considered, a curvilinear relationship between intensity of use and subsequent family violence has been documented. Coleman and Straus (53) reported that for both moderate and severe spousal and parent-to-child violence, the use of alcohol was significantly associated with an increasing frequency of physical abuse when compared with the absence of alcohol abuse, as long as alcohol abuse was not in the "almost always" frequency. In the case of heaviest alcohol use, the occurrence of violence actually declined. These findings appeared to be true for both the women and the men in the study.

Cocaine has also been found to be highly associated with the incidence of violence. Reports have linked use of crack/cocaine to increased paranoia and violent acts including murder and rape (54–56), high levels of delinquent activity (57), and violent death (58). Tardiff et al. (59) reported that 72% of 24–35-year-old female African-American victims of homicide were cocaine-positive. Although the circumstances surrounding their deaths were not documented, one may speculate that cocaine use by many of these women at least placed them in situations that were more violent. Given that violent behavior on the part of a woman may be a risk factor for being more severely victimized, it is reasonable to hypothesize that some of the cocaine-positive women who were victims of homicide had themselves been engaged in some type of violent behavior prior to death.

From the foregoing studies it appears that crack/cocaine is a drug that promotes violent behavior in both sexes. This is important to recognize, because in contrast to the case with alcohol, few gender differences have been found in the prevalence of crack/cocaine use among men and women of lower socioeconomic status, and because the use of this drug is currently of epidemic proportions (60).
Histories of Childhood Abuse and Female Violence

There is evidence that family violence can be intergenerational and also bidirectional (49, 61, 62). Despite some disputes over inadequate methodological rigor and the failure of studies to find comparison groups that reflect the general population (63), it appears that many women with histories of being abused as children may be more likely to abuse their own children (64). Thus, childhood victims may become perpetrators, and victims of spousal abuse may also perpetrate abuse on their children (62, 65, 66).

However, although perpetrators of child abuse are most often parents, reliable estimates of how many abused children are victimized by their mothers, and information about the conditions surrounding mothers’ violence toward their own children, have generally not been forthcoming despite years of research into child-abuse prevention. Murphy et al. (51) did recently examine this question, replicating and expanding the findings of Famularo et al. (67), who documented the high prevalence of histories of child maltreatment in a court sample of parents whose children had been identified as victims of child abuse. Along similar lines, O'Keefe (62) specifically studied maternal–child aggression in a sample of women residing in battered-women’s shelters, and found that 90% of the women directed some form of aggression toward their children. The types of aggressive behaviors most commonly used were slapping and spanking, although hitting with an object (such as a belt) was also frequently used. There is also evidence that gender differentials exist in the nature of mother–child aggression, such that mothers who experience partner aggression and violence may be more likely to direct aggression toward their sons than toward their daughters (61).

Similarly, in documented cases of murder in which a mother has killed a child, no information about the use of alcohol or other substances of abuse has been systematically reported. However, dissociative states have been noted after the event in women who have killed their children (68–70), suggesting that substance abuse may have contributed to the murder. Weisheit (70) has posited that the maternal child killer of the 1980s more closely resembled other female offenders than did maternal child killers in the 1950s and 1960s. Weisheit (70) characterized these child-killing mothers of the 1980s as younger, of lower socioeconomic status, and as being more “underregulated” than those of the earlier decades. According to Weisheit, “there was an insensitivity to the boundary separating proper from improper behavior in regard to the treatment of their (1980s mothers’) children. Some killed while administering excessively harsh punishment, while others killed as a result of neglect. In many cases the offender denied any intent to “seriously harm the child” (70, p. 444).
We report Weisheit’s study because of its implications for maternal abuse in a lower-income, younger, and more disadvantaged population. In this population, education in parenting may be limited, and the use of alcohol and drugs may amplify impulsive behavior when a woman is frustrated. Alcohol and drug use may also cause dissociation or disinhibition that can lead to serious violence toward children, which may ultimately result in death.

Political Considerations and Obstacles to Research on Female Drug Abuse and the Perpetration of Violence

When Suzanne Steinmetz released her academic paper on “The Battered Husband Syndrome” in 1977 (71), contending that “husband-beating constitutes a sizable proportion of marital violence,” she became caught in a cyclone of feminist politics and media exposure. She was accused, by four other scholars in a paper entitled “The Battered Data Syndrome,” of the ethical offense of molding her findings to her thesis. And although she became a minor celebrity, she was perceived as undermining the massive problem of wife abuse. Steinmetz eventually left the field (72).

The undertaking of an “unpopular” research topic, as Steinmetz and other scholars have done, can embody a fair amount of risk to one’s professional standing, especially at a time when violence against women is receiving top billing on academic agendas, feminist agendas, and in the media. Since reputation and ethics are two determinants of achieving credibility in the academic community, one politically incorrect decision could endanger an otherwise promising career.

Moreover, socially responsible researchers may weigh the usefulness of their potential findings against these findings’ impact, and decide not to undertake studies of violence among women. These researchers may be pragmatic in their view that studies and statistics are often distorted and abused to promote alternative agendas, even those of misogynists; their fear that they may cause more harm than good may make them decide not to pursue the topic of women’s violence. Furthermore, it appears to be common knowledge that violence is more rampant and problematic among men.

There is also the ethical dilemma and fear of targeting and stigmatizing disadvantaged groups. Much of the data collected on female drug abuse and violent crime points toward minority women of lower socioeconomic class as the majority of perpetrators. Thus, blaming the victim and its fallout criticism may once again be more of a burden than a scholar wants to bear.

Another reason why the topic of violence among women may be highly unpop-
ular is that it clashes with culturally accepted norms. It is much more comfortable to perceive women as passive and abused “victims,” who nonetheless maintain themselves as nurturing and protective mothers in the face of all adversity, than as perpetrators of violence—better than seeing the Madonna as “spoiled” and having lost her capacity to safeguard her children’s physical and emotional well-being, or even having become a major contributor to their victimization. Moreover, in the service of maintaining the sanctity and privacy of the family, as Western cultures do, family members legitimize violence. Because the magnitude of female violence in the home as a problem continues to be greatly downplayed, the subject may not appear worthy of examination.

For all of the foregoing reasons, the significant problem of violence among women continues to be underrecognized in much of the social-sciences research community. However, apart from the more subtle and political issues, another potential factor in deterring further study of such violence may be the difficulties involved in investigating it.

**Methodologic Issues**

A number of complexities in methodology, inherent in studying drug abuse and the perpetration of violence, might impede the execution of any well-designed research plan. To date, much of the research on female violence has been generated from ethnographic field studies, which often rely on very small sample sizes of incarcerated offenders who represent a very specific population with limited replicability and generalizability.

The issue of measurement has been cited as a particular problem for the study of female aggression in the context of family violence (73, 74). Margolin (73) and others (21, 74–76) have called for the development of measures of interpersonal violence that go beyond the directionality and frequency of violent behaviors, to assessing the severity of impact and injury, intentions of the attacker, and perceptions of the victim(s).

Another methodological problem that has been raised involves the reliability and selection of the informant. The individual selected as a study participant may strongly influence findings (74). In the event that information is gathered from both partners in a couple, discrepancies between reports need to be assessed. Decisions about which reports to use in the analysis of data need to be systematic and specified. Any positive finding of violence in either partner’s report should be used as a positive indicator for the existence of violence.

Self-reporting may not be the most valid source of information about violent
behavior, owing to the subject's withholding or distorting information that is self-perceived as being either humiliating or private. However, other sources of verification may not be found because of the hidden and/or secret nature of a problem. Alternatively, the subject may be unable to describe an act of violence owing to psychological barriers such as dissociation, or because of extensive substance abuse, which can strongly influence one's memory of events.

Many investigations will rely upon retrospective reports to ascertain information about previous acts of abuse. Questions about the validity of retrospective assessments by substance abusers abound, and are also relevant to inquiries about violence. Similarly, the validity of memories of abuse has been raised and clearly needs further study. The best solution to the problem of retrospective bias is to design and conduct prospective studies. Although it may not always be feasible, researchers should attempt to obtain permission from subjects to use as many sources of verification as possible. These may include multiple informants (partners and other close family members), records in the public domain (i.e., child-welfare agencies, community agencies, doctors, police reports, treatment facilities, etc.), and objective measures, such as visits to doctors or hospitalizations for injuries.

Because so much of the study of female violence has to date been generated from qualitative research, replicable research methodologies have less often been applied. Issues of selection bias, generalizability of samples to populations (external validity), and adequate study design, with the selection of appropriate comparison groups, all need to be taken into consideration if evidence from empirical research is to enter the more widely read clinical literature and ultimately affect decision-making about public policy (74).

Beyond this, there are ethical considerations related to conducting research on the female perpetration of violence, in terms of protecting research subjects and their children, as well as the research itself. Any mother who participates in a study that asks her about whether she engages in violent behavior toward her children is at risk for revealing information that could have grave ramifications both for herself and her children, because of the researcher's mandate to report instances of suspected child abuse and neglect. It is in such cases that careful and explicit informed consent is not only necessary but crucial. Clearly, women who have information that they fear could damage them may refuse to participate, thus creating a problem of selection bias. From the researcher's viewpoint, this can make it difficult to identify the antecedents of abuse without losing the very research subjects that one wants to study, and thus undermining the study design.

Investigating groups of women in custody, in the courts, or in treatment settings who have already been identified as physically or sexually abusive to their
children and/or others remains one way of avoiding some of these ethical research dilemmas. However, as has been mentioned, the selection of identified abusers may have limited generalizability. The use of indirect measures of potential for child abuse (i.e., Parent Dimensions Inventory [77] and Parental Punitiveness Scale [78]), which present subjects with hypothetical parenting situations and ask them to choose among a list of behavioral responses including mild-to-severe violent punishments, may be one way of ascertaining important information about potentially violent women without compromising their privacy or study participation. Miller and her colleagues (79) have undertaken another, broader and promising method for studying the problem of female violence toward children, in conducting retrospective studies with mothers whose children are now adults. By asking these mothers about past substance abuse, aggression, and violent behavior during specific periods of their children’s lives, researchers may be able to gain valuable information about abusive behavior and the factors associated with it in largely unidentified but abusive populations. Clearly, this type of study will also have to address the problems of bias inherent in retrospective reporting.

A further point is that the conduct of this kind of research, which asks many intensely personal questions and delves into areas that would normatively be untouched as a consequence of social restraints, may place the researcher in a greater position of responsibility vis-a-vis his/her subjects. Identifying histories of substance abuse and violence—opening the door to the home and its most private activities—may obligate the researcher to become involved with his or her subjects in a way that goes beyond the simple asking and answering of questions. This may require providing good referrals and/or even services for women identified as being in need as a consequence of research efforts, as well as for protecting women and their families. It may also involve the decision to act in a way that ultimately compromises the research but is the most humane course of action.

**Recommendations for Future Research**

From our review of the literature, it is clear that many questions about female violence and its relationships to drug abuse remain unanswered. We present a number of areas which currently require attention, with recognition that these raise but a few of the most relevant questions.

1) Epidemiology. There is currently very little reliable data, other than criminal violence statistics, on women as perpetrators of violent acts; information on female violence within the family setting is even more scarce. Future research
needs to take into account both broad samples and clinical populations, with comparisons between identified offenders, those in the community who may have the target problems but who have not been identified by social services or the criminal justice system, and those who do not have the problem.

2) Determinants. The relationship between female violence and alcohol and drug abuse needs further investigation. The role that different pathways of substance abuse, victimization, and perpetration play for individual women and within families will require close scrutiny. Because these pathways are bidirectional, path-analytic modeling strategies may be applied to clarify these complex relationships. Causal modeling statistical approaches should be applied to determine how substance abuse affects intrafamilial and intergenerational configurations of violence.

3) Context. Female violence and drug abuse cannot be considered without considering social context. More studies are needed to address aggression and violence among disadvantaged populations, with attention to the forces (such as acculturation, racism, poverty) that promote, and also may prevent, the cycles of drug abuse and violence. Likewise, investigations must take into consideration gender differences in the modes of expression and contexts in which aggression and violence are used, the purposes for the violence, and the ways that substance abuse may impact violent behavior.

4) Prevention. Another vital area of investigation includes research which aims to ascertain the protective factors that lead to resiliency for those who have been exposed to family violence and drug abuse. Studies which test primary prevention of a host of negative outcomes (or to improve parental competency) must include a family-systems approach that recognizes the intergenerational nature of both substance abuse and violent behavior. Systematic examinations of substance use and acts of abuse for women in these prevention programs need to be conducted. Similarly, the development of interventions at the community and school levels to increase awareness of female violence and its consequences, and to teach conflict-resolution skills at the family level is critical.

**CONCLUSION**

In conclusion, it is our hope that the present review will support and encourage researchers interested in women’s issues to study female aggression and violence, and its impact upon intimates and others. While there are complexities inherent in opening the door to these difficult social issues—which expose women and the family in ways that, fundamentally, society may wish to keep hidden—we
believe that such efforts will ultimately help to break down the barriers of viewing women as passive victims, and to aid in the development of interventions to stop the destructive cycles of intergenerational and intrafamilial drug abuse and violence. In their role as the primary caretakers of children, the special needs of women, even when they may not coincide with social perception, must be further examined and addressed if we are to change the nature of dysfunctional family systems that cannot support healthy development for all members of the family.

REFERENCES


