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Children's Exposure to Partner Violence in Homes Where Men Seek Help for Partner Violence Victimization

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Abstract

In the last several decades, the field of family violence has paid increasing attention to children's exposure to partner violence (CEPV). Most of this research has focused on the children of women seeking help for partner violence (PV) victimization. In this paper we examine exposure to PV among children of men who sought help for PV victimization ($n=408$), as compared with children of men in a population-based sample ($n=666$). We examined children's exposure to psychological, physical, and sexual PV and also examined CEPV that is perpetrated by women, men, or both partners. The results show that CEPV is higher among children of helpseeking men than among children of men from the population-based sample, and that most of that PV is perpetrated by the female partner. We did not find differences in CEPV based in child age or gender. We discuss implications for the field of family violence professionals.

Keywords

Domestic violence; childhood; abuse; help-seeking

Research shows that as many as 15.5 million children in the United States live in households where partner violence (PV) between parents or parents and an intimate partner is present (McDonald, Jouriles, Ramisetty-Mikler, Caetano, & Green, 2006). In the last several decades, there has been a significant increase in the attention paid to children's exposure to PV (CEPV). Research has found that such children are more likely to experience both externalizing (Kalil, 2003) and internalizing behavioral health problems (Clements, Oxtoby, & Ogle, 2008), but the majority of research on CEPV has been conducted on samples of battered women's children (Heugten & Wilson, 2008). The field of PV is moving toward a more gender-inclusive approach to understanding PV victimization and perpetration (Archer, 2000; Cook, 2009; Hines & Douglas, 2010a; Hines & Douglas, 2010e; Straus, 2009; Tsui, Cheung, & Leung, 2010), which has highlighted the lack of research on CEPV in households where men report severe levels of PV victimization. The purpose of this paper is to provide information on the prevalence of children's exposure to PV in a comparative

study of men: those who have sought help for PV victimization and a non-clinical, population-based sample.

Emerging Literature and Definitions of CEPV

The literature on PV has increasingly paid attention to the experiences of children who live in homes where PV is present and especially where parent victims seek help (Evans & Shaw, 1993; Fritz & Kerner, 1992; Hilberman & Munson, 1977; Hughes, 1982; Hughes & Barad, 1982; Peled & Edelson, 1999; Siegel, 1999; Wolfe, Jaffe, Wilson, & Zak, 1985). A key component of understanding CEPV is establishing definitions and being able to determine the rates at which it occurs so that providers and decision/policy-makers can better serve and allocate resources to address the needs of children who are exposed to PV. Initial discussions concerning CEPV moved from “children who witness” PV (Groves, 1999; Straus, 1992) to “children who are exposed” to PV (Holden, 2003). This switch in terminology acknowledged that children’s experiences with PV may encompass a range of experiences, including hearing PV, seeing it, being directly involved in PV, and hearing about/seeing the aftermath. We use both the terms “witness” and “exposure to” in this paper in order to be consistent with the literature. As a first step toward addressing the knowledge gap concerning CEPV in homes with severe levels of male PV victimization and where these men have sought help, we measured the extent to which children heard or saw PV in their households.

Prevalence Rates Among Population-Based and Helpseeking Samples

National estimates show that each year, 29.4% of children live in homes where male or female-perpetrated PV is present and 13.3% live in homes where severe forms of physical PV are present, including kicking, biting, beating up, burning/scalding, choked, or threatening with a knife or gun (McDonald & Grych, 2006). This research does not indicate to what extent children are exposed to this PV, however. Research using child self-reports (or proxies for young children) has found that on an annual basis, 6.2% of U.S. children are exposed to physical PV (Finkelhor, Turner, Ormrod, & Hamby, 2009). A national study of adolescents found that 8.9% of participants witnessed some form of physical PV, with 2.2–2.4% having witnessed a parent choke or beat-up another parent (Zinzow et al., 2009). There is also evidence that female children witness more PV than male children, as do older children (Hamby, Finkelhor, Turner, & Ormrod, 2011).

Research on children’s exposure to partner violence in helpseeking samples primarily focuses on samples of battered women; but most of this research does not report the prevalence of CEPV. Estimates from the few studies that include this information range from 80–98% for children’s exposure to physical PV (Bø Vatnar & Bjørkly, 2011; Kruttschnitt & Dornfeld, 1992; Spilsbury et al., 2008). Children’s exposure to psychological PV in homes where women have sought help for PV victimization is also high, ranging from 82% in the past year (Kruttschnitt & Dornfeld, 1992) to 90% as a lifetime estimate (Bø Vatnar & Bjørkly, 2011). Children’s exposure to sexual PV is rarely examined; one study found that 30% of children of battered women witness sexual aggression (Bø Vatnar & Bjørkly, 2011).

No research has focused on CEPV in instances where men have sustained severe levels of PV or sought help for PV victimization. In fact, the majority of male PV victims report that their experiences with PV victimization are not taken seriously by the police and that they are turned away from domestic violence hotlines and agencies (Cook, 2009; Douglas & Hines, 2011; Hines, Brown, & Dunning, 2007; Tsui et al., 2010). By extension, if men's victimization is not taken seriously or recognized, CEPV could be denied or unrecognized, and thus, children could go without needed treatment. The analyses conducted in this paper provide an initial estimate of prevalence of CEPV in situations where men report severe forms of PV victimization and seek help, which we hope will lead to services for children who are in need of them.

Another issue concerning CEPV is considering different combinations of parental perpetration in heterosexual relationships: witnessing male-to-female, female-to-male, and bidirectional PV (i.e., both males and females) (Hamby et al., 2011; Moretti, Obsuth, Odgers, & Reebye, 2006); the field of family violence is increasingly examining different patterns of perpetration and victimization within the same relationship (Hindin & Gultiano, 2006; Hines & Douglas, 2011; Langhinrichsen-Rohling, Selwyn, & Rohling, 2012; Straus, 1999, 2004; Straus & Winstok, 2013). Thus, in order to capture the greatest extent of CEPV, we will explore these same combinations of witnessing perpetration and victimization in our analyses of both a sample of male victims who sought help and a population-based sample of men.

A final issue in CEPV concerns children's exposure by gender and age. A population-based study found that female children witness more PV than male children, as do older children (Hamby et al., 2011), but this has been inadequately explored among children of helpseeking PV victims (Clements et al., 2008); thus, we will also explore potential gender differences in CEPV. With some exceptions (Bø Vatnar & Bjørkly, 2011; Kruttschnitt & Dornfeld, 1992; Litrownik, Newton, Hunter, English, & Everson, 2003) research on CEPV focuses on children's exposure to physical PV only (Groves, 1999; Heugten & Wilson, 2008; Hindin & Gultiano, 2006; Spilsbury et al., 2008; Wolfe et al., 1985); we will examine children's exposure to psychological, physical, and sexual PV.

Present Study and Hypotheses

The family violence literature lacks information on rates of CEPV in households where fathers sustain PV and seek help. The purpose of this paper is threefold. We will focus on CEPV in instances where men have been physically assaulted by their female partners and sought help for their victimization; rates of children's exposure reported by this male victim sample will be compared with rates of children's exposure according to men from a population-based sample; these analyses will help to establish if there are differences in exposure for children whose fathers seek help for PV victimization, as compared to children of men in the general population. We will investigate prevalence and differences in exposure to three forms of PV: physical, psychological, and sexual. Also, to be consistent with the emerging literature on PV, we will report on children's exposure in four different patterns: (1) exposure by either partner/parent, (2) perpetration by female partner (mother), (3)

perpetration by male partner (father), and (4) perpetration by both partners (mother and father).

1. We will first examine children's exposure to female-to-male PV. We hypothesize that children's exposure to female-to-male PV will be higher in the helpseeking than population-based sample. This hypothesis is supported by research which shows that children from helpseeking samples of battered women have higher rates of male-to-female exposure to PV than children in the general population (Finkelhor et al., 2009; Kruttschnitt & Dornfeld, 1992; Spilsbury et al., 2008). Additionally, our previous research on men who seek help for PV victimization shows that men report higher levels of victimization than men from the general population (Hines & Douglas, 2010e), which means that there are more opportunities for children to witness PV.
2. We will also examine children's exposure to male-to-female PV and bidirectional PV for both the helpseeking and population samples. Previous research shows that there is greater use of PV among helpseekers in comparison to population-based samples, regardless of gender (Giles-Sims, 1983; Hines & Douglas, 2010a; Hines & Douglas, 2010e; Howells & Rosenbaum, 2008; McDonald, Jouriles, & Tart, 2009; Saunders, 1988), thus we hypothesize that children from the helpseeking sample will be exposed to more male-to-female and bidirectional PV because both are likely to be more prevalent in their households.
3. Finally, we will compare children's exposure based on their gender and age. Previous work in this area among children whose parents have sought help for PV victimization has been limited and the results are not clear (Clements et al., 2008). Thus, this particular area of inquiry is exploratory in nature and we propose no specific hypotheses.

Method

Participants and Procedures

Two separate samples of male participants were recruited for this study: a helpseeking sample of physical PV victims and a population-based sample. For both samples, the men had to speak English, live in the U.S., and be between the ages of 18 and 59 to be eligible; they also had to have been involved in an intimate relationship with a woman lasting at least one month in their lifetimes. We did not include men over the age of 59 because in some states men experiencing PV victimization would also be experiencing elder abuse, which would make it necessary for us to report to adult protective services. In order to do so, we would need to collect identifying information, which would make it impossible for our study participants to participate anonymously. To be eligible for the helpseeking sample, the men had to have sustained a physical assault from a female partner at some point in their relationship because it is a form of PV that is observable and less subject to individual interpretation. They had to have sought assistance for their partner's violence from at least one of the following sources: medical doctor or dentist, domestic violence agency, domestic violence hotline, the Internet, a lawyer, the police, a clergy member, a family member, a friend, or a mental health therapist.

We recruited the helpseeking sample of men ($n = 611$) from a variety of sources. We posted advertisements on our research webpage and on webpages of agencies that specialize in male victims of PV, the physical and mental health of men and minority men, fathers' issues, and divorced men's issues. We also sent announcements to a database of professionals and individuals who signed up to be on our e-mail list through our research webpage, created in 2008. The advertisement stated that we were conducting "a study on men who experienced aggression from their girlfriends, wives, or female partners." The ad then provided a link to the anonymous online questionnaire. Men who did not meet the eligibility requirements were thanked for their time and were redirected to an "exit page" of the survey. Of the helpseeking men, 67.7% ($n=408$) reported having minor children and were retained for the present analysis. Demographics of the men in the helpseeking sample who have children are displayed in Table 1. Because the study was anonymous, we did not offer compensation.

Data from a population-based sample of men ($n = 1,601$) were collected by the Internet survey research firm, Knowledge Networks (KN). Knowledge Networks provides the only Internet research panel of about 43,000 adults that is representative of the U.S. population, selecting participants through random digit dial methodology and mailing addressed-based sampling to reach cell-phone only populations. Of those who are invited, about 56% are enrolled. Those who do not have Internet access are sent an Internet appliance (a laptop or a netbook) and are provided with Internet access by KN. Panelists are enrolled in a points program, which they could trade in for cash prizes and rewards, as in incentive for participation.

To increase the likelihood of the panel members' participation, KN provided extra incentives and sent three reminder emails during the month of data collection. The recruitment email was sent to male panel members, ages of 18 and 59; it informed them about a study, supported by the National Institutes of Health (NIH), on how well men and women get along and men's health. Of the 3,536 men who were invited to participate, 2,174 (61.5%) entered the survey; 90% of them consented to participate, and of those who consented, 82.5% were eligible. Of this sample, 41.6% ($n=666$) had minor children and were retained for the present analyses. Demographic information on for this sample can also be found in Table 1.

The methods for this study were approved by the boards of ethics at our institutions of higher education. All participants were apprised of their rights as study participants. All of the men in the helpseeking sample participated anonymously. Participants in the population-based sample participated confidentially and were protected with a Certificate of Confidentiality obtained from the NIH. Steps were taken to ensure all participants' safety: At the completion of the survey, the participants were given information about obtaining help for PV victimization or psychological distress and on how to delete the history on their Internet web browser.

Measures

Demographic information—We asked men for demographic information about both themselves and their partners, including age, race/ethnicity, personal annual income, and years of education. We also asked about the current status of their relationship, the length of their relationship with their partners, how long ago the relationship ended (if applicable),

and how many minor children were involved in that relationship, if any. We provide this information for descriptive purposes of understanding the sample. These variables are not included in the inferential analyses for the present paper. Men also provided basic demographic information about their children, including gender, age, how the children were related to them and their female partner (i.e., biological child, adoptive child, partner's biological child, and partner's adoptive child), and with whom the children primarily reside. The age variable was categorized into five groups: 0–1, 2–5, 6–9, 10–13, and 14–17, which has been previously used in research concerning children's exposure to PV (Finkelhor et al., 2009); this allowed us to examine differences between younger and older children.

Revised Conflict Tactics Scales (CTS2)—We used the *CTS2* (Straus, Hamby, Boney-McCoy, & Sugarman, 1996) to measure whether the men sustained and/or perpetrated psychological, physical, and sexual aggression, and injuries from their abusive partners. The items used for this study included eight items assessing psychological aggression (e.g., swearing, shouting, threatening to hit or throw something at partner, calling partner fat or ugly), 12 items assessing physical aggression (e.g., slapping, beating up), six items assessing injuries (e.g., having a small cut or bruise, broken bone, passing out), and six items assessing sexual aggression (e.g., insisting on, threatening, or using force to have sex when the partner did not want to). For each of these scales, the behaviors are noted as minor or severe, or in the case of sexual aggression, coercion and force. Consistent with previous research on male victims (e.g., Hines & Douglas, 2010a; Hines & Douglas, 2010e; Hines & Douglas, 2011), we supplemented the *CTS2* with nine items on controlling behaviors from the Psychological Maltreatment of Women Inventory (PMWI) (Tolman, 1995).

Participants responded to items depicting each conflict tactic by indicating the number of times these tactics were used by both them and their partners in the previous year and whether they and their partners *ever* engaged in that behavior during their relationship. We coded each subscale to indicate whether any of the behaviors *ever* happened during the course of the relationship. Reliability for the current samples ranged from .69 (perpetration of severe psychological aggression) to .94 (victimization from physical aggression). Table 1 displays the percentage of men in each sample who perpetrated and/or were victimized by each form of aggression, in addition to the percent of couples who were bidirectionally aggressive with each other. We included this information to show the level of violence in the children's homes; it was not part of the inferential analyses conducted for this paper.

Children's Exposure to Partner Violence—We adapted the Short Form of the *CTS-2* (Straus & Douglas, 2004) to assess CEPV; we asked participants to report on their eldest minor child's exposure to different acts of PV, which has been used in other research on fathers and their children (Douglas, 2003; Hines & Douglas, 2010a). We used six paired questions from the Short Form to assess children's exposure to their mothers' and fathers' use of (1) minor and (2) severe psychological PV, (3) minor and (4) severe physical PV, and (5) minor and (6) severe sexual PV. Questions are purposely double-barreled to assess for the greatest extent of PV possible in a single question; for example, "I pushed, shoved, or slapped my partner" and "My partner pushed, shoved, or slapped me." Each item had a five-point response option: 0=this never happened, 1=my child never heard or saw this, 2=child

heard, 3=child saw, or 4=child heard and saw. For the purposes of this paper and to create cell sizes large enough for chi-square analyses, the responses were combined so that: 0=never happened/child wasn't exposed, 1= child heard and/or saw. The CEPV variables were also used to create dichotomous variables which captured children's exposure to PV that was perpetrated by both parents (i.e., bidirectionally) for each type of PV. In the end, we report on CEPV that was perpetrated by mothers, fathers, both parents, and then children's exposure to *any* of the PV for which we assessed.

Analyses

Chi-square analyses were used to test sample, gender, and age differences in exposure PV. Because of multiple tests of hypothesis, a Bonferroni correction was used to interpret the p-values. There were 21 chi-square analyses used to test hypotheses 1 and 2, and 27 chi-square analyses used to test hypothesis 3; thus, the adjusted alpha level is .002.

Results

Children's Exposure to PV

The prevalence rates of CEPV are displayed in Table 2. In comparison to children of men from the population-based sample, children of men from the helpseeking sample were exposed to significantly higher levels of PV: 2.2 times as much psychological PV, 20.9 times as much physical PV, and 12 times as much sexual PV. Table 2 displays the different PV acts to which children could have been exposed, by perpetrator type: (1) female-to-male, (2) male-to-female, and (3) perpetration by both partners; this information is displayed for both samples.

Sample Differences in Exposure to Female-to-Male PV—In addition to being exposed to higher levels of PV overall, children's exposure to female-to-male PV was significantly higher among the helpseeking sample of men than among children of men from the population-based sample for all types of PV. Children whose fathers sought help for PV victimization were not only exposed to higher rates of female-to-male PV, but higher rates of severe levels of PV of all types. Children of male helpseekers were exposed to 37.07 times as much severe psychological PV, 33.08 times as much severe physical PV, and 7.20 times as much severe sexual PV. These findings are consistent with our hypothesis.

Sample Differences in Exposure to Other Combinations of Perpetration and Victimization—Next we examined potential sample differences in male-to-female perpetration and bidirectional PV. With regard to exposure to male-to-female perpetrated PV, children of male helpseekers were exposed to significantly higher levels of minor psychological PV and minor physical PV. There were no sample differences in exposure to severe psychological, physical PV, or any type of sexual PV. This is only partially consistent with our hypothesis that children of men from the helpseeking sample would be exposed to higher levels of all types of male-perpetrated PV, in comparison to children of men from the population-based sample.

With regard to bidirectional PV, children of male helpseekers were exposed to higher rates of bidirectional minor psychological PV and minor physical PV; there were no sample differences in any other type of PV exposure. These findings only partially supported our hypothesis that children of fathers who sought help for PV victimization would be exposed to higher rates of bidirectional PV in comparison to children of men from a population-based sample.

CEPV by Gender and Age

We conducted chi-square analyses by gender and age for only the helpseeking sample to determine if boys or girls or children of particular age groups might be exposed to higher levels of PV. We used the helpseeking sample only because the prevalence rates of CEPV were too low in the population-based sample for statistical reliability; these prevalence rates are noted in Table 3. We found no significant gender or age differences in CEPV. Those results are also displayed in Table 3.

Discussion

The purpose of this paper was to examine CEPV among children from two different samples of fathers: men who sought help for PV victimization and a population-based sample of men. The results showed that children who live in homes where men seek help for PV victimization witness significantly more PV than children from the general population. Specifically, they witness more minor psychological aggression and physical assault in all gender combinations of perpetration and victimization. They also witness higher levels of female-to-male PV in the more severe kinds of abuse: severe psychological aggression, severe physical assault, and both minor and severe sexual aggression. This study is among the first to report on children's exposure to several different types of PV. Most of the literature on CEPV among samples where a parent sought help focuses on children's exposure to physical PV or does not specify the exact type of PV to which the children were exposed (Grych, Jouriles, Swank, McDonald, & Norwood, 2000; Howells & Rosenbaum, 2008; Spilsbury et al., 2008). The findings have important implications for professionals in the field working with men who seek help for PV victimization and who also have children.

Children's Exposure to Partner Violence from the Helpseeking Sample of Men

This is the first study to report CEPV in a helpseeking sample of men. Our hypotheses were that children of men in the helpseeking sample would be exposed to higher levels of PV than children of men in the population-based sample. On the whole, they were exposed to higher levels of psychological, physical, and sexual PV. We expected that these children's exposure would be higher for all forms of victimization and perpetration between their parents, but this was not entirely supported. Children of the helpseeking men were exposed to higher levels of female-to-male PV than children of men from the population-based sample in all instances, which was consistent with our first hypothesis. Children of men from the helpseeking sample were exposed to higher levels of male-to-female PV and bidirectional PV only with regard to minor psychological aggression and minor physical assault; for all other forms of male-to-female PV and bidirectional PV, there was no difference in exposure between the two samples. This partially supported our second hypothesis, which was that

children from the helpseeking sample of men would be exposed to more male-to-female and bidirectional PV.

Our findings for CEPV among the male helpseeking sample are somewhat lower than other estimates concerning CEPV in instances where mothers have sought help for male-to-female PV victimization. Research on helpseeking battered women have found that 82–90% of children are exposed to psychological aggression (Bø Vatnar & Bjørkly, 2011; Kruttschnitt & Dornfeld, 1992), which is consistent with children of the helpseeking men in our sample at 91.8%. Children's exposure to physical and sexual PV have been shown to be somewhat higher among samples of battered women. Exposure to physical PV has been estimated to be about 80–98% (Bø Vatnar & Bjørkly, 2011; Kruttschnitt & Dornfeld, 1992; Spilsbury et al., 2008), compared to 62.6% of the children of the male helpseekers in our study. Exposure to sexual PV among children of battered women is estimated at 30% (Bø Vatnar & Bjørkly, 2011), compared to 7.2% of the children of the male helpseekers in this study. These differences in exposure to physical and sexual PV may be due to actual differences in exposure or differences in mothers' and fathers' reports or perceptions of how much PV their children witness. Future research should replicate similar methods to provide a stable estimate of CEPV in homes where men seek help for PV victimization. Further, these results show that CEPV among men seek help for PV, is not insignificant and may be an important part of working with victimized men in the field and getting them the help that they need.

Children's Exposure to Partner Violence from the Population-Based Sample of Men

Our results show that in the population-based sample of men, children's exposure to psychological aggression is not uncommon: 42.2% of children were exposed to parental psychological aggression. The vast majority of this exposure was in the form of minor psychological aggression – insulting, name-calling and swearing. Fewer children of men from the population-based sample were exposed to physical PV (3.0%) and sexual PV (0.6%). Even though these prevalence rates are low, multiplied across a nation, they can have a significant impact. For example, although only four children of men in the population-based sample were exposed to sexual aggression between their parents, on a national level, this would mean that about 4.4 million children (U.S. Census Bureau, 2013) would be exposed to sexual aggression between parents. To our knowledge, this is the first population-based estimate of children witnessing sexual aggression between parents that includes force or rape.

As compared with other community or population-based estimates of CEPV, we found that when reported by mothers, 50% of children in the community were exposed to psychological aggression (Kruttschnitt & Dornfeld, 1992), compared with 42.2% of the children in our population-based sample of men. The children of the men in our population-based sample reported lower rates of children's exposure to physical PV; for example, they reported that only 3.0% of their children were exposed to this form of PV during the course of the relationship on which they reported, compared with some other studies showing 6.2% in a national past-year self-report estimate (Hamby et al., 2011), 8.9% in a national estimate of life-time self-reported exposure of adolescents (Zinzow et al., 2009), and 28% in reports from mothers concerning lifetime exposure among their children (Kruttschnitt & Dornfeld,

1992). The differences between our findings and research showing higher findings could be due to the reporter of the information; research shows that children may more accurately report on their own experiences, as opposed to a parent or another proxy (Grych et al., 2000; Kruttschnitt & Dornfeld, 1992; Litrownik et al., 2003), which may explain why our results show lower prevalence rates.

Child Gender and Age

We did not find any differences in CEPV by gender or age among our helpseeking sample, unlike population-based studies (Finkelhor et al., 2009; Hamby et al., 2011). The role of gender and age in CEPV continues to be one that deserves more attention (Clements et al., 2008; Spilsbury et al., 2008), especially among samples of children whose parents seek help. We recommend that this be the focus of future research.

Limitations

This study is not without limitations. First, like most studies of PV, this study is based on self-report measures. Research shows that the typical pattern when self-reporting is to under-report of one's own use of undesirable behavior, but not one's partner's undesirable behavior (Woodin, Sotskova, & O'Leary, 2013), which could potentially mean that the men reported that their children were exposed to more PV that was perpetrated by their female partners than by the men themselves. At the same time, under-reporting is typically more common, as victims tend to feel embarrassed or humiliated by being abused and the tendency to embellish is likely more related to one's own personality traits (Follingstad & Rogers, 2013).

This study focuses on straight relationships and does not capture CEPV to couples in same-sex relationships. This study also has limitations that are shared with other research on CEPV: it is based on a single report of one parent, it is cross-sectional, and the information is collected retrospectively (Clements et al., 2008). Further, we asked men to describe their children's exposure to PV in the intimate relationship that was the focus of their reporting; the timeframe and lengths of those relationships vary among participants. Further, we did not collect information on when the violence started and when the children were born. If the children had not been born when the violence took place, then the children would be scored as not having been exposed to the violence, which could potentially erroneously inflate the denominator of our equations, thus underestimating the extent to which children are exposed to PV. Nevertheless, this is the first study to examine the extent of CEPV in a sample where men have sought help for PV victimization; it is a starting place for new research and offers a point of comparison for future research.

We used a modified version of the *CTS2*-Short Form to assess CEPV; the Short Form has been found to under-capture the full extent of PV in relationships (Straus & Douglas, 2004) and thus, could under-capture the extent of CEPV as well, which may explain some of our lower-than-expected CEPV rates in the population-based sample. Future research may consider using an adapted version of the full *CTS2*, although that has the limitation of requiring additional time from the participant. This is the first study that has exclusively had men report on their children's exposure to PV. Men may underreport how much PV their children witness. Research has rarely gathered child-based information from fathers because

there is concern that fathers are not engaged enough with their children to be accurate assessors or reporters of their children's behaviors and concerns. For example, previous research has shown that fathers may not always rate their children's behavior as accurately as mothers (Achenbach & Rescorla, n.d.), yet several studies show that fathers are as reliable and sometimes more reliable reporters than mothers (Phares, 1997; Van Hasselt, Ammerman, Hersen, & Reigel, 1991). Increasingly, researchers are calling to include fathers as informants of their children's well-being (Phares, Fields, Kamboukos, & Lopez, 2005), which is what we did in this study. Additional research on male victims of PV and using men as reporters about their children needs to be conducted in order to confirm our findings.

Conclusion

The results of this study show that the majority of children who have fathers who seek help for PV victimization have been exposed to the many forms of violence that may exist in the intimate relationship. These findings have important implications for the field of family violence; they speak to the importance of providers and first responders taking men's reports of PV victimization seriously because children may be present in the relationship, as they were in two-thirds of the relationships reported on by the helpseeking men in our study. Having children can also make one more likely to seek help from a particular resource; our previous research shows that men who seek help for PV victimization from a domestic violence agency or mental health clinician are more likely to have children or to have children who have witnessed some form of PV (Douglas, Hines, & McCarthy, 2012).

The results also show that children in both the helpseeking and population-based samples are exposed to PV that is perpetrated in a number of different combinations: by males, females, and both partners. Men's PV victimization is often unrecognized or denied (Douglas & Hines, 2011), but children who are exposed to PV may need treatment to help them process the violence that they have witnessed. We recommend that providers and responders who assist men reporting PV victimization screen for the presence of children in the home or relationship and make referrals to appropriate services to meet those children's needs.

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References

- Achenbach, T.M.; Rescorla, L.A. Manual for the ASEBA school-age forms & profiles: An integrated systems of multi-informant assessment. (n.d.) Retrieved from <http://www.aseba.org/research/ASEBA%20Reliability%20and%20Validity-School%20Age.pdf>
- Archer J. Sex differences in aggression between heterosexual couples: A meta-analytic review. *Psychological Bulletin*. 2000; 126:651–680. [PubMed: 10989615]
- Bø Vatnar SK, Bjørkly S. Victim of and Witness to Violence: An Interactional Perspective on Mothers' Perceptions of Children Exposed to Intimate Partner Violence. [Article]. *Violence & Victims*. 2011; 26(6):830–852. 10.1891/0886-6708.26.6.830 [PubMed: 22288099]

- Clements CM, Oxtoby C, Ogle RL. Methodological issues in assessing psychological adjustment in child witnesses of intimate partner violence. *Trauma, Violence & Abuse*. 2008; 9(2):114–127.
- Cook, PW. *Abused men: The hidden side of domestic violence*. 2. Westport, CT: Praeger; 2009.
- Douglas EM. The effect of a presumption for joint legal custody on father involvement in divorced families. *The Journal of Divorce & Remarriage*. 2003; 40(3/4):1–10.
- Douglas EM, Hines DA. The helpseeking experiences of men who sustain intimate partner violence: An overlooked population and implications for practice. *Journal of Family Violence*. 2011; 26(6):473–485. [PubMed: 21935262]
- Douglas EM, Hines DA, McCarthy SC. Men Who Sustain Female-to-Male Partner Violence: Factors Associated With Where They Seek Help and How They Rate Those Resources. *Violence and Victims*. 2012; 27(6):871–894.10.1891/0886-6708.27.6.871 [PubMed: 23393951]
- Evans D, Shaw W. A Social Group Work Model for Latency-Aged Children from Violent Homes. [Article]. *Social Work with Groups*. 1993; 16(1/2):97–116.
- Finkelhor D, Turner H, Ormrod R, Hamby SL. Violence, Abuse, and Crime Exposure in a National Sample of Children and Youth. *Pediatrics*. 2009; 124(5):1411–1423.10.1542/peds.2009-0467 [PubMed: 19805459]
- Fritz BS, Kerner R. *Domestic Violence & Its Effect on Children*. United States. 1992
- Giles-Sims, J. *Wife battering: A systems theory approach*. New York: Guilford Press; 1983.
- Groves BM. Mental health services for children who witness domestic violence. *The Future of Children*. 1999; 9(3):122–132.10.2307/1602786 [PubMed: 10778005]
- Grych JH, Jouriles EN, Swank PR, McDonald R, Norwood WD. Patterns of adjustment among children of battered women. *Journal of Consulting and Clinical Psychology*. 2000; 68(1):84–94.10.1037/0022-006x.68.1.84 [PubMed: 10710843]
- Hamby, S.; Finkelhor, D.; Turner, HA.; Ormrod, R. *Juvenile Justice Bulletin*. Washington, D.C.: Office of Juvenile Justice & Delinquency Prevention; 2011. Children's exposure to intimate partner violence and other family violence.
- Heugten, Kv; Wilson, E. Witnessing intimate partner violence: Review of the literature on coping in young persons. *Social Work Review*. 2008; 20(3):52–62.
- Hilberman E, Munson K. Sixty battered women. *Victimology*. 1977; 2(3–4):460–470.
- Hindin MJ, Gultiano S. Associations Between Witnessing Parental Domestic Violence and Experiencing Depressive Symptoms in Filipino Adolescents. *American Journal of Public Health*. 2006; 96(4):660–663. [PubMed: 16507722]
- Hines, D.; Brown, J.; Dunning, E. *Journal of Family Violence*. Vol. 22. Springer Science & Business Media B.V.; 2007. Characteristics of Callers to the Domestic Abuse Helpline for Men; p. 773-773.
- Hines DA, Douglas EM. A Closer Look at Men Who Sustain Intimate Terrorism by Women. *Partner Abuse*. 2010a; 3(1):286–313. [PubMed: 20686677]
- Hines DA, Douglas EM. Intimate Terrorism by Women Towards Men: Does it Exist? *Journal of Aggression, Conflict, and Peace Research*. 2010e; 2(3):36–56.
- Hines DA, Douglas EM. Understanding the use of violence among men who sustain intimate terrorism. *Partner Abuse*. 2011; 2(3):259–283. [PubMed: 21841962]
- Holden GW. Children Exposed to Domestic Violence and Child Abuse: Terminology and Taxonomy. [Article]. *Clinical Child & Family Psychology Review*. 2003; 6(3):151–160. [PubMed: 14620576]
- Howells NL, Rosenbaum A. Effects of perpetrator and victim gender on negative outcomes of family violence. *Journal of Family Violence*. 2008; 23(3):203–209.10.1007/s10896-007-9144-5
- Hughes HM. Brief interventions with children in a battered women's shelter: A model preventive program. *Family Relations: An Interdisciplinary Journal of Applied Family Studies*. 1982; 31(4):495–502.10.2307/583924
- Hughes HM, Barad SJ. Changes in the psychological functioning of children in a battered women's shelter: A pilot study. *Victimology*. 1982; 7(1–4):60–68.
- Kalil A. Domestic Violence and Children's Behavior in Low-Income Families. *Journal of Emotional Abuse*. 2003; 3(1/2):75–101.

- Kruttschnitt C, Dornfeld M. Will they tell? Assessing preadolescents' reports of family violence. *Journal of Research in Crime and Delinquency*. 1992; 29(2):136–147.10.1177/0022427892029002002
- Langhinrichsen-Rohling J, Selwyn C, Rohling ML. Rates of Bidirectional Versus Unidirectional Intimate Partner Violence Across Samples, Sexual Orientations, and Race/Ethnicities: A Comprehensive Review. *Partner Abuse*. 2012; 3(2):199–230.10.1891/1946-6560.3.2.199
- Litrownik AJ, Newton R, Hunter WM, English D, Everson MD. Exposure to family violence in young at-risk children: A longitudinal look at the effects of victimization and witnessed physical and psychological aggression. *Journal of Family Violence*. 2003; 18(1):59–73.
- McDonald R, Grych JH. Young children's appraisals of interparental conflict: Measurement and links with adjustment problems. *Journal of Family Psychology*. 2006; 20(1):88–99.10.1037/0893-3200.20.1.88 [PubMed: 16569093]
- McDonald R, Jouriles EN, Ramisetty-Mikler S, Caetano R, Green CE. Estimating the number of American children living in partner-violent families. *Journal of Family Psychology*. 2006; 20(1):137–142. [PubMed: 16569098]
- McDonald R, Jouriles EN, Tart CD. Children's adjustment problems in families characterized by men's severe violence toward women: Does other family violence matter? *Child Abuse & Neglect*. 2009; 33:94–101. [PubMed: 19303141]
- Moretti MM, Obsuth I, Odgers CL, Reebye P. Exposure to Maternal vs. Paternal Partner Violence, PTSD, and Aggression in Adolescent Girls and Boys. *Aggressive Behavior*. 2006; 32(4):385–395.
- Peled E, Edelson JL. Barriers to children's domestic violence counseling: a qualitative study. *Families in Society: The Journal of Contemporary Social Services*. 1999; 80(6):578–586.
- Phares V. Accuracy of informants: do parents think that mother knows best? *Journal Of Abnormal Child Psychology*. 1997; 25(2):165–171. [PubMed: 9109033]
- Phares V, Fields S, Kamboukos D, Lopez E. Still looking for Poppa. *American Psychologist*. 2005; 60(7):735–736. [PubMed: 16221013]
- Saunders, DG. Wife abuse, husband abuse, or mutual combat?: A feminist perspective on the empirical findings. In: Yllö, K.; Bograd, M., editors. *Feminist perspectives on wife abuse*. Thousand Oaks, CA US: Sage Publications, Inc; 1988. p. 90-113.
- Siegel RM, H TD. Screening for Domestic Violence in the Community Pediatric Setting. [Article]. *Pediatrics*. 1999; 104(4):874. [PubMed: 10506228]
- Spilsbury JC, Kahana S, Drotar D, Creedon R, Flannery DJ, Friedman S. Profiles of Behavioral Problems in Children Who Witness Domestic Violence. *Violence & Victims*. 2008; 23(1):3–17. [PubMed: 18396578]
- Straus, MA. Children as witnesses to marital violence: A risk factor for lifelong problems among a nationally representative sample of American men and women. In: Schwartz, DF., editor. *Children and violence: Report of the twenty-third Ross Roundtable on Critical Approaches to Common Pediatric Problems*. Columbus, Ohio: Ross Laboratories; 1992. p. 98-108.
- Straus, MA. The controversy over domestic violence by women: A methodological, theoretical, and sociology of science analysis. In: Arriaga, XB.; Oskamp, S., editors. *Violence in intimate relationships*. Thousand Oaks, CA US: Sage Publications, Inc; 1999. p. 17-44.
- Straus MA. Prevalence of violence against dating partners by male and female university students worldwide. *Violence Against Women*. 2004; 10(7):790–811.10.1177/1077801204265552
- Straus, MA. Gender symmetry in partner violence: Evidence and implications for prevention and treatment. In: Whitaker, DJ.; Lutzker, JR., editors. *Preventing partner violence: Research and evidence-based intervention strategies*. Washington, DC US: American Psychological Association; 2009. p. 245-271.
- Straus MA, Douglas EM. A Short Form of the Revised Conflict Tactics Scales: Preliminary Psychometric Data and Typologies for Severity and Mutuality. *Violence and Victims*. 2004; 19(5):507–520. [PubMed: 15844722]
- Straus MA, Hamby SL, Boney-McCoy S, Sugarman D. The Revised Conflict Tactics Scales (CTS-2): Development and preliminary psychometric data. *Journal of Family Issues*. 1996; 17:283–316.
- Straus, MA.; Winstok, Z. Gender differences in the relation of dyadic types of partner violence to depression among university students in 15 Nations; Paper presented at the Society for the Study

- of Social Problems Annual Meeting; New York. 2013. <http://pubpages.unh.edu/~mas2/DT-PE%2004ppt%20%20Dating%20Violence%20%20Depression%20SSSP%202013%206.pptx>
- Tolman, RM. Psychological Maltreatment of Women Inventory. 1995. Retrieved October 15, 2007, from <http://www-personal.umich.edu/~rtolman/pmwif.htm>
- Tsui V, Cheung M, Leung P. Help-seeking among male victims of partner abuse: Men's hard times. *Journal of Community Psychology*. 2010; 38(6):769–780.
- U.S. Census Bureau. Annual estimates of the resident population for selected age groups by sex for the United States, States, Counties, and Puerto Rico Commonwealth and Municipalities: April 1, 2010–July 1, 2012. 2013. Retrieved January 22, 2014, from http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=PEP_2012_PEPAGESEX&prodType=table
- Van Hasselt VB, Ammerman RT, Hersen M, Reigel DH. Assessment of social skills and problem behaviors in young children with spina bifida. *Journal of Developmental and Physical Disabilities*. 1991; 3(1):69–80.
- Wolfe DA, Jaffe P, Wilson SK, Zak L. Children of battered women: The relation of child behavior to family violence and maternal stress. *Journal of Consulting and Clinical Psychology*. 1985; 53(5): 657–665.10.1037/0022-006x.53.5.657 [PubMed: 4056181]
- Woodin EM, Sotskova A, O'Leary KD. Intimate partner violence assessment in an historical context: Divergent approaches and opportunities for progress. *Sex Roles*. 2013:1–11.
- Zinzow HM, Ruggiero KJ, Resnick H, Saunders B, Kilpatrick D, Smith D. Prevalence and mental health correlates of witnessed parental and community violence in a national sample of adolescents. *Journal of Child Psychology and Psychiatry*. 2009; 50(4):441–450. [PubMed: 19220624]

Table 1

Demographic Characteristics of Men and Children in Two Samples

	Population-Based Sample (<i>n</i> = 666) % or <i>M</i> (<i>SD</i>)	Helpseeking Sample (<i>n</i> = 408) % or <i>M</i> (<i>SD</i>)	χ^2 or <i>t</i>	<i>p</i>
<i>Male Participant Demographic Characteristics</i>				
Age	39.73 (8.82)	44.36 (8.00)	8.71	<.001
White	77.63	75.98	0.39	.534
Black/African American	9.16	4.90	6.58	.010
Hispanic/Latino	13.81	5.39	18.91	<.001
Asian	1.05	4.66	13.93	.014
Native American	1.05	2.70	4.15	.041
Income (in thousands) ¹	5.38 (2.60)	5.03 (2.77)	2.09	.037
Educational Status ²	42.19	58.40	24.74	<.001
<i>Female Partner Demographic Characteristics</i>				
Age	37.64 (8.31)	40.81 (8.21)	6.11	<.001
White	78.08	66.18	18.43	<.001
Black/African American	6.91	4.90	1.76	.184
Hispanic/Latina	11.26	11.03	0.01	.91
Asian	2.85	7.35	11.77	.001
Native American	1.65	0.98	0.83	.363
Income (in thousands) ¹	3.13 (2.40)	3.99 (2.93)	5.13	<.001
Educational Status ²	45.00	43.01	.38	.540
<i>Relationship Demographics</i>				
Currently in a Relationship	96.6	24.8	596.18	<.001
Relationship Length (months)	163.23 (88.86)	122.77 (84.01)	7.49	<.001
Time since relationship ended (months)	1.3 (10.12)	42.5 (41.96)	24.22	<.001
# of Minors involved in Relationship	1.9 (0.96)	1.7 (0.83)	4.22	<.001
<i>Victimization from CTS2 Scales (% Ever)</i>				
Severe Psychological Aggression	24.3	95.8	514.97	<.001
Controlling Behaviors	18.9	94.3	571.57	<.001
Physical Aggression	23.6	100.0	580.14	<.001
• Severe Physical Aggression	9.0	85.1	618.70	<.001
Sexual Aggression	11.3	48.1	179.26	<.001
Injuries	5.7	72.3	522.48	<.001
<i>Perpetration of CTS2 Scales (% Ever)</i>				
Severe Psychological Aggression	20.5	34.5	25.73	<.001
Controlling Behaviors	16.5	38.3	64.13	<.001
Physical Aggression	17.2	48.1	102.55	<.001
• Severe Physical Aggression	5.7	14.1	21.85	<.001

	Population-Based Sample (<i>n</i> = 666) % or <i>M</i> (<i>SD</i>)	Helpseeking Sample (<i>n</i> = 408) % or <i>M</i> (<i>SD</i>)	χ^2 or <i>t</i>	<i>p</i>
Sexual Aggression	21.4	14.6	7.46	.006
Injuries	5.4	21.1	61.55	<.001
<i>Both Partners-Bidirectional CTS2 Scales (% Ever)</i>				
Severe Psychological Aggression	15.6	33.7	47.43	<.001
Controlling Behaviors	11.2	36.3	96.13	<.001
Physical Aggression	14.7	46.1	124.44	<.001
Sexual Aggression	9.0	9.1	0.00	.986
Injuries	3.8	19.6	71.82	<.001
<i>Demographics of the Oldest Minor Child</i>				
Age	9.46 (5.40)	9.90 (4.92)	1.31	.190
Gender—Male	49.9	50.0	0.00	.962
Biological Child of Male Participant	87.7	92.9	7.44	.006
Biological Child of Female Partner	26.0	44.6	39.48	<.001
Adopted Child of Male Participant	4.5	1.5	7.21	.007
Adopted Child of Female Partner	1.2	0.49	1.39	.238 ^a
Child lives Primarily with Male Participant	92.3	29.5	467.12	<.001

¹Income: Where 3=\$35,000–44,999; 4=\$45,000–54,999; and 5=\$55,000–64,999

²Educational Status: Percent with college education or higher

Table 2

Children's Exposure to Partner Violence by Sample Type of Men

	Sample Type		χ^2	p^b
Type of Children's Exposure	Population-based % (n=666)	Helpseeking % (n=375)		
Psychological Aggression				
Any Exposure to Psychological Aggression	42.2	91.8	232.83	<.001
<i>Psychological Aggression-Minor: Insulted, Swore, Shouted</i>				
Any Exposure	41.9	90.8	229.01	<.001
Female Partner-to-Male Participant	38.4	90.9	261.57	<.001
Male Participant-to-Female Partner	39.9	56.5	25.89	<.001
Both Partners-Bidirectional, Any Exposure	36.4	56.6	38.18	<.001
<i>Psychological Aggression-Severe: Destroyed Something Belonging to Partner/Threatened Partner/Threatened to Hit Partner</i>				
Any Exposure	2.5	51.7	347.71	<.001
Female Partner-to-Male Participant	1.4	51.9	377.63	<.001
Male Participant-to-Female Partner	1.7	2.5	0.76	.383
Both Partners-Bidirectional, Any Exposure	0.6	2.5	<i>a</i>	<i>a</i>
Physical Assault				
Any Exposure to Physical Violence	3.0	62.6	439.03	<.001
<i>Physical Assault-Minor: Pushed, Shoved, Slapped Partner</i>				
Any Exposure	3.1	61.8	435.52	<.001
Female Partner-to-Male Participant	2.6	60.7	437.27	<.001
Male Participant-to-Female Partner	2.6	8.3	17.08	<.001
Both Partners-Bidirectional, Any Exposure	2.2	7.8	18.10	<.001
<i>Physical Assault-Severe: Punches, Kicked, Beat-up Partner</i>				
Any Exposure	1.2	39.6	265.96	<.001
Female Partner-to-Male Participant	1.2	39.7	267.08	<.001
Male Participant-to-Female Partner	0.8	1.9	2.72	.099
Both Partners-Bidirectional, Any Exposure	0.8	1.7	1.66	.197
Sexual Aggression				
Any Exposure Sexual Aggression	0.6	7.2	34.71	<.001
<i>Sexual Aggression-Minor: Insisted on Sex when Partner Did Not Want To (No Force Used)</i>				
Any Exposure	0.6	4.1	1.21	.271
Female Partner-to-Male Participant	0.6	4.1	15.77	<.001
Male Participant-to-Female Partner	0.6	0.3	0.55	.459
Both Partners-Bidirectional, Any Exposure	0.5	0.6	0.04	.845
<i>Sexual Aggression-Severe: Used Force to Make Partner Have Sex</i>				
Any Exposure	0.5	3.9	0.54	.462
Female Partner-to-Male Participant	0.5	3.6	14.64	<.001
Male Participant-to-Female Partner	0.5	0.8	0.53	.469
Both Partners-Bidirectional, Any Exposure	0.6	0.3	0.54	.461

^aCell sizes are too small to meet standards for statistical reliability.

^bDue to multiple tests of hypotheses, a Bonferonni correction was used to interpret the p-values. With 21 chi-square analyses, the adjusted alpha level is .002. Only p-values less than .002 are considered significant.

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Table 3

Exposure to Partner Violence by Children Whose Fathers Seek Help for Victimization, by Child Age and Gender ($n=353$)

Type of Exposure	Child Age % Exposed to PV				Child Gender % Exposed to PV			
	0-1 Yr $n=15$	2-5 Yrs $n=65$	6-9 Yrs $n=82$	10-13 Yrs $n=100$	14-17 Yrs $n=95$	χ^2	p^b	
Psychological Aggression								
Exposure to Any Type of Psychological Aggression from Either Partner	80.0	88.7	90.0	92.7	96.8	7.33	.119	3.28 .070
<i>Psychological Aggression-Minor: Insulted, Swore, Shouted</i>								
Any Exposure from Either Partner	80.0	87.5	90.0	91.0	95.8	5.91	.206	3.19 .074
Female Partner-to-Male Participant	80.0	87.7	90.0	91.0	95.9	6.02	.198	3.24 .072
Male Participant-to-Female Partner	66.7	42.2	58.5	58.0	62.1	7.41	.116	0.03 .955
Both Partners-Bidirectional, Any Exposure	66.7	42.2	58.8	58.0	62.1	7.44	.115	0.00 .959
<i>Psychological Aggression-Severe: Destroyed Something Belonging to Partner/Threatened Partner/Threatened to Hit Partner</i>								
Any Exposure from Either Partner	40.0	47.6	43.9	59.4	55.7	6.11	.191	1.77 .183
Female Partner-to-Male Participant	40.0	47.6	43.9	60.2	55.7	6.67	.154	1.76 .185
Male Participant-to-Female Partner	0.0	1.5	2.4	2.0	4.1	1.75	.781	0.07 .795
Both Partners-Bidirectional, Any Exposure	0.0	1.6	2.4	2.1	4.1	1.68	.794	0.09 .769
Physical Assault								
Exposure to Any Type of Physical Violence from Either Partner	53.3	65.6	56.1	64.6	65.6	2.82	.589	0.03 .854
<i>Physical Assault-Minor: Pushed, Shoved, Slapped Partner</i>								
Any Exposure from Either Partner	53.3	65.6	53.7	64.3	64.9	3.82	.431	0.02 .904
Female Partner-to-Male Participant	53.3	64.6	53.7	62.0	63.9	2.96	.565	0.00 .950
Male Participant-to-Female Partner	6.7	6.3	11.0	7.1	9.3	1.44	.837	2.30 .129
Both Partners-Bidirectional, Any Exposure	6.7	6.3	11.0	6.1	8.2	1.79	.775	1.79 .181
<i>Physical Assault-Severe: Punches, Kicked, Beat-up Partner</i>								
Any Exposure from Either Partner	33.3	47.7	34.1	40.8	38.5	3.15	.533	2.22 .136
Female Partner-to-Male Participant	33.3	47.7	34.1	41.4	38.1	3.266	.514	2.98 .084
Male Participant-to-Female Partner	0.0	1.5	0.0	2.0	4.2	4.43	.351	0.76 .383

Type of Exposure	Child Age % Exposed to PV					Child Gender % Exposed to PV					
	0-1 Yr n=15	2-5 Yrs n=65	6-9 Yrs n=82	10-13 Yrs n=100	14-17 Yrs n=95	χ^2	p ^b	Female n=181	Male n=171	χ^2	p ^b
Both Partners-Bidirectional, Any Exposure	0.0	1.5	0.0	2.0	3.1	2.95	.567	1.1	1.7	0.24	.625
Sexual Aggression											
Exposure to Any Type of Sexual Aggression from Either Partner	20.0	6.3	6.1	8.0	6.4	4.03	.402	7.2	6.5	0.07	.792
Sexual Aggression-Minor: Insisted on Sex when Partner Did Not Want To (No Force Used)											
Any Exposure, From Either Partner	6.7	6.2	1.2	5.0	4.2	2.86	.581	4.4	3.5	0.18	.670
Female Partner-to-Male Participant	6.7	6.2	1.2	5.0	4.2	2.86	.581	4.4	3.5	0.18	.670
Male Participant-to-Female Partner	0.0	1.5	0.0	0.0	0.0	4.54	.338	0.5	0.0	0.95	.329
Both Partners-Bidirectional, Any Exposure	0.0	1.6	0.0	0.0	0.0	4.59	.332	0.5	0.0	0.94	.332
Sexual Aggression-Severe: Used Force to Make Partner Have Sex											
Any Exposure, From Either Partner	13.3	3.1	4.9	3.0	3.2	4.22	.377	3.3	4.1	0.14	.707
Female Partner-to-Male Participant	13.3	1.5	4.9	3.0	3.2	5.37	.251	2.8	4.1	0.46	.498
Male Participant-to-Female Partner	6.7	1.5	0.0	0.0	1.0	a	a	0.5	0.6	0.00	.971
Both Partners-Bidirectional, Any Exposure	6.7	0.0	0.0	0.0	1.1	11.85	.019 ^a	0.0	0.6	1.06	.304

^aCell sizes are too small to meet standards for statistical reliability.

^bDue to multiple tests of hypotheses, a Bonferroni correction was used to interpret the p-values. With 27 chi-square analyses for each test of hypothesis, the adjusted alpha level is .002. Only p-values less than .002 are considered significant.