

# Understanding Female Intimate Partner Violence Perpetration, Parenting Attitudes, and Batterer Intervention Program Completion

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**Objective:** The purpose of this study was to examine the impact of parenting attitudes and widely used indicators of intimate partner violence perpetration on program completion in a sample of women required to attend a 26-week batterer intervention program. **Methods:** This research used a nonequivalent, control-group design in a secondary analysis of 146 women. **Results:** Analysis showed that (a) logistic regression indicated a statistically significant model for predicting Adult-Adolescent Parenting Inventory (AAPI-2) scores using level of education and racial group; (b) logistic regression also demonstrated that treatment completion could be successfully predicted by Revised Conflict Tactics Scale (CTS2) Negotiation score and referral status (e.g., regular court, criminal domestic violence court, and pretrial intervention). **Conclusions:** These analyses illustrate characteristics of female batterers as they connect to parenting attitudes and offer initial evidence suggesting that women in treatment for intimate partner violence (IPV) perpetration display a host of negative parenting attitudes. Implications of these results were investigated and considered.

**KEYWORDS:** intimate partner violence; parenting attitudes; Revised Conflict Tactics Scales; female offenders

For the past 40 years, scholarship has focused on using feminist frameworks in conceptualizing domestic violence (later termed *intimate partner violence* or *IPV*).

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1 The feminist paradigm argues that incidents of intimate partner violence are phys-  
 2 ical expressions of hegemonic patriarchy (Dobash, Dobash, Wilson, & Daly, 1992).  
 3 Such a paradigm, however, provides little explanation for the perpetration of IPV  
 4 by female perpetrators in heterosexual relationships (see Ferreira & Buttell, 2014;  
 5 White & Dutton, 2013). Moreover, family violence scholars have used a broader un-  
 6 derstanding of violence, using demographic and psychosocial factors in addition to  
 7 gender to theorize intimate partner violence to explain it (see Cannon & Buttell,  
 8 2015; Ferreira & Buttell, 2014; Langhinrichsen-Rohling, 2010; Winstok, 2011). For  
 9 example, Ferreira and Buttell (2014) offer an alternative theoretical approach by  
 10 showing how a psychosocial model explains IPV for women in batterer intervention  
 11 programs (BIPs). BIPs represent one of the most popular treatment options for IPV  
 12 and as such are an important site for study.

13 Recently, scholarship has begun to investigate the intersections of parenting  
 14 and IPV (e.g., Appel & Holden, 1998; Herron & Holtzworth-Munroe, 2002; Margolin  
 15 & Gordis, 2003; Margolin, Gordis, & Oliver, 2004; O’Leary, Slep, & O’Leary, 2000;  
 16 Simmons, Lehmann, & Dia, 2010; Taylor, Guterma, Lee, & Rathouz, 2009). Taking  
 17 seriously a psychosocial approach that includes important cultural and social con-  
 18 texts (see Ferreira & Buttell, 2014), many female perpetrators are also mothers and  
 19 in addition to dealing with stressors associated with intimate relationships, employ-  
 20 ment, and the like, they must deal with added and particular stressors of parenthood  
 21 (e.g., Simmons et al., 2010; Taylor et al., 2009). A psychosocial model acknowledges  
 22 multiple social and cultural pathways, beyond only gender, to perpetration of inti-  
 23 mate partner violence (see Buttell & Starr, 2013). Given BIPs’ dominant role in IPV  
 24 treatment, it is important to ascertain factors that contribute or hinder program  
 25 completion. Furthermore, given the national average for BIP completion is 50% and  
 26 given it is the most widely used treatment intervention (see, e.g., Carney & Buttell,  
 27 2006; Ferreira & Buttell, 2014; U.S. Department of Justice, 2003), it is important to  
 28 determine what informs program completion.

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**INTIMATE PARTNER VIOLENCE: FEMALE OFFENDERS**

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 32 Recent scholarship has shown that women perpetrate intimate partner violence  
 33 at greater rates than previously thought and have found that women may perpe-  
 34 trate violence at similar rates to men (see Archer 2000; Desmarais, Reeves, Nicholls,  
 35 Telford, & Fiebert, 2012; Follingstad et al., 1991; White & Dutton, 2013; Williams,  
 36 Ghandour, & Kub, 2008). In their review of 111 articles that looked at prevalence  
 37 rates of female and male IPV perpetration, Desmarais and colleagues (2012) found  
 38 that the pooled prevalence of these studies suggested 1 in 4 women reported perpe-  
 39 trating physical violence in an intimate relationship, whereas 1 in 5 men reported  
 40 the same. In the past 15 years, there has been a significant increase in the reported  
 41 number of women who perpetrate IPV and to be sure, part of this increase is a result  
 42 of recently popularized mandatory arrests (Barner & Carney, 2011; Carney, Buttell,  
 43 & Dutton, 2007; Henning, Renauer, & Holdford, 2006). Furthermore, female offenders  
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- account for approximately 25% of incarcerated individuals (Ferraro & Moe, 2003; Mullings, Hartley, & Marquart, 2004). The increased awareness of bidirectionality in
- AQ2 IPV perpetration (e.g., Archer, 2000; Caetano et al., 2008; Straus, 2011) reveals limitations of the dominant feminist framework typically applied to IPV (see Dobash et al.,
- AQ2 1992; Pence & Paymar, 1993) and necessitates research that examines female perpetrators by using additional theoretical frameworks (see Buttell, Powers, & Wang, 2012; Ferreira & Buttell, 2014; Simmons et al., 2010). Not only does recent research show that women perpetrate IPV as often as men (see Desmarais et al., 2012), but also suggests that women use violence for different reasons than men (Archer, 2000;
- AQ2 Carney & Buttell, 2006; Graham-Kevan, 2009; Margolin & Gordis, 2003; Simmons et al., 2010; Swan & Snow, 2006). Swan and Snow (2006) stress the social and cultural context in which women perpetrate violence as important to understanding why women use violence in their intimate partnerships. For instance, they argue women might use violence in an intimate partnership for self-defense and defense of children as well as to exercise control, anger, or revenge, motivations more commonly associated with male perpetrators of IPV (see White & Dutton, 2013).
- The social and cultural context of female perpetrators seems to matter in their use of violence and/or aggression in navigating intimate relationships. For example, in their secondary analysis of 485 women mandated into a BIP, Buttell, Powers, and Wang (2012) found that race was not a significant predictor of program involvement; however, their findings did indicate significant differences in psychosocial variables between African American and White women. In particular, significant differences between White women and Black women in mental health treatment, experiences of sexual abuse as a child, illegal drug use, and alcohol use were discovered. These findings suggest that socioeconomic factors may impact the perpetration of IPV among women regardless of race.
- Such findings as these have led some scholars to identify problems with the “one-size fits all” BIPs (Almeida, Woods, Messineo, & Font, 1998; Gelles, 2001), which has been largely predicated on the feminist paradigm’s focus on the use of power and control to access the patriarchy as the driving force behind IPV and has been widely implemented through legislation across the United States (Buttell & Carney, 2006). This may explain why empirical evidence has shown an ineffectiveness of BIPs for female perpetrators (see Carney & Buttell, 2006; Carney et al., 2007). Such ineffectiveness has led researchers, using a broader framework for understanding IPV, to advocate for more culturally sensitive interventions, such as addressing differences in parenting attitudes as well as unique stressors associated with parenting (Gelles, 2001). BIPs may employ several tools to attempt to ensure child safety. For example, some BIPs may use a child safety plan—a plan the family can use to protect children during an instance of partner abuse (see, e.g., Welfare Case Management, 2004). BIPs may also work with Child Protective Services to ensure protection of children in the house from instances of IPV (see Goodmark, 2004). To ascertain whether parenting is a hindrance to BIPs’ effectiveness, we quantitatively analyzed a sample of 146 women in a BIP located in an urban area in the Southeast United States to test for factors

1 that predict BIP program completion. One understudied area that may contribute  
2 to BIP completion is parenting attitudes and by extension behaviors (see Burnette,  
3 Ferreira, & Buttell, 2015).

## 5 **PARENTING**

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7 Of the few studies that have investigated the relationship between IPV and parent-  
8 ing attitudes, most have focused on male perpetrators and female victims (Appel &  
9 Holden, 1998; Burnette et al., 2015; Ferreira, Lauve-Moon, & Cannon, 2015; Herron  
10 & Holtzworth-Munroe, 2002; O'Leary et al., 2000). Several studies have found that  
11 the relationship between IPV and parenting attitudes differs by gender (Margolin &  
12 Gordis, 2003; Simmons et al., 2010; Taylor et al., 2009). Many of these studies use the  
13 "spill over" theory—that IPV results in an increase in parental stress and increased  
14 use of physical discipline (Margolin, Gordis, & Oliver, 2004; Simmons et al., 2010)—to  
15 explain effects of IPV on parenting. For instance, Margolin and Gordis (2003) found  
16 that within a stressful economic and parenting context, female-to-male aggression  
17 was linked to a mother's potential for child abuse.

18 Because women most likely perpetrate IPV as often as men (see Archer, 2000;  
19 Desmarais et al., 2012; Williams et al., 2008) and because many of these women are  
20 or will become mothers (see for instance Casanueva, Martin, & Runyan, 2009), it  
21 is important to develop further understanding of the relationship between female  
22 offenders and parenting—what particular stressors they experience as mothers, and  
23 what protective factors may be present, and what, if any, impact this may have on  
24 BIP completion. For example, Simmons et al. (2010) found that women felt justified in  
25 using violence in their intimate partnerships when they experienced low feelings of  
26 effectiveness as parents and high feelings that their children's needs dominated their  
27 lives. This study further explores these dynamics between parenting and intimate  
28 partner violence of mandated female batterers in a BIP. By investigating parenting  
29 attitudes, we aim not only to account for an often overlooked, yet important aspect  
30 of women's lives, but also include other sociocultural variables in our analyses to  
31 further identify a range of factors that impact women and their use of violence. Thus,  
32 in keeping with previous research (e.g., Caetano, Ramisetty-Mikler, & Harris, 2010;  
33 Cunradi, Caetano, Clark, & Schafer, 2000; Ferreira et al., 2015; Lipsky, Caetano, &  
34 Roy-Byrne, 2009; Rennison & Planty, 2003), we incorporate sociocultural variables  
35 (e.g., educational attainment, relationship status, race) in our analyses.

## 37 **INTIMATE PARTNER VIOLENCE, CHILD ABUSE, AND** 38 **PARENTING ATTITUDES**

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40 The co-occurrence of IPV and physical child abuse is a well-documented and common  
41 social problem with implications for families and children (see Appel & Holden, 1998;  
42 MacDonnell, 2012), recent research has focused on the relationship between IPV and  
43 child maltreatment (Burnette et al., 2015; Herrenkohl, Sousa, Tajima, Herrenkohl,  
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AQ4 & Moylan, 2008; Margolin & Gordis, 2003; Renner & Slack, 2006; Simmons et al., 2010; Slep & O’Leary, 2005; Taylor, Hamvas, & Paris, 2011). For this article, we use the Centers for Disease Control and Prevention’s (CDC, 2014) definition of IPV, which consists of threats or acts of physical, sexual, psychological violence by a current or former intimate partner, and *child maltreatment*, which may incorporate *child abuse* (physical, sexual, and/or psychological abuse of child) and/or *child neglect* (e.g., failure to protect children from violence and/or failure to provide for basic physical, emotional, and/or medical needs of children). For instance, Holt, Buckley, and Whelan (2008) found that IPV and child abuse co-occurred in 45%–75% of reported incidents and that such children are at increased risk of experiencing emotional, physical, and sexual abuse. In this study we measure parenting attitudes as an indicator for parenting behaviors. And because IPV tends to impact the parenting attitudes and practices of men and women differently (Margolin & Gordis, 2003), this study aims to investigate the parenting attitudes of female perpetrators of IPV.

The purpose of this study is twofold. First, consistent with this psychosocial approach and given parenting attitudes are intimately connected with actual parenting behaviors (Simmons et al., 2010); this study, using the Adult-Adolescent Parenting Inventory (AAPI-2) and Revised Conflict Tactics Scale (CST2) examines whether parenting attitudes are associated with IPV perpetration for a group of women in a BIP. We hypothesize there will be a statistically significant association between negative negotiation skills in intimate relationships and high-risk parenting attitudes. Second, we investigate whether negative parenting attitudes (measured by the AAPI-2) are associated with BIP program completion. We hypothesize, then, that parenting attitudes, specifically high-risk parenting attitudes, are statistically significantly associated with BIP completion. We include demographic variables to ascertain what associations, if any, occur between sociocultural context, parenting attitudes, and intimate partner conflict negotiation. Using logistic binary regression on this unique dataset, we aim to further our understanding of the relationships between IPV and parenting attitudes as well as add to scholarship on treatment interventions for female perpetrators of IPV.

**METHOD**

**Data Collection**

This study used a posttest-only design with nonequivalent groups (Cook & Campbell, 1979) to perform a secondary analysis collected from the Domestic Abuse Center (DAC), a nonprofit agency in Columbia, South Carolina. The present sample included all women referred to the BIP between June 2013 and December 2013. Given their inclusion in the BIP, all women had perpetrated some form of IPV, making this sample ideal for this study.

Like many BIPs described in the literature, this BIP is cognitive-behavioral in orientation integrating confrontation, therapy, and educational components (see Buttell & Carney, 2005). The intervention program is a defined, concentrated 26-week group treatment setting that focuses primarily on anger management and skills development.

1 The intervention incorporates three phases: (a) orientation and intake interview  
2 (2 sessions), (b) psychoeducational classes (20 sessions), and (c) group therapy regard-  
3 ing program conclusion (4 sessions). Female-only groups consist of approximately  
4 15 batterers and meet once a week for 2 hr. In this group therapy, the events that  
5 surround the act of domestic violence (e.g., lead up, during, and after) are directly ad-  
6 dressed with clients to help make changes for themselves that will constructively affect  
7 their personal relationships.

8 As described earlier, clients completed the following assessment process in the first  
9 two intake sessions in which they administered the CTS2 (Straus, 1987; Straus, Hamby,  
10 Boney-McCoy, & Sugarman, 1996) and the AAPI-2 (Bavolek & Keene, 2010). This as-  
11 sessment is used to assist agency staff in producing a pretreatment profile of clients.  
12 Researchers obtained de-identified data to ensure client privacy and anonymity. This  
13 BIP, although not all BIPs do, offers some external resources for parents who seek them.

## 14 Measures

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16 The primary measures of this study were race, relationship status (*single, mar-*  
17 *ried, unmarried, divorced, separated*), educational level, employment status, referral  
18 source, CTS2 and AAPI-2 scores. Referral sources were dummy coded to capture the  
19 unique effect of each type of referral.  
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22 ***The Revised Conflict Tactics Scales.*** The CTS2 (Straus et al., 1996), the latest ver-  
23 sion of Conflict Tactics Scales (Straus, 1979, 1987), is a widely used self-report mea-  
24 sure of psychological and physical assaults and negotiation strategies in domestic  
25 relationships (see Fredman & Sherman, 2013). The CTS2 consistently shows sound  
26 psychometric properties, with internal consistency reliability ranging from .79 to .95  
27 (e.g., Straus, 1987; Straus et al., 1996). According to Straus (1987), the CTS2 was con-  
28 structed to gauge the range and frequency of tactics used in response to conflict in a  
29 personal relationship. The CTS2 is a thorough 39-item (78 questions), self-accounted  
30 inventory calculated to measure five scales: Negotiation (which includes emotional  
31 and cognitive subscales), Psychological Aggression, Physical Assault, Sexual Coer-  
32 cion, and Injury, each of which include minor and severe subscales. Negotiation in-  
33 corporates actions to work out conflict through dialogue; psychological aggression  
34 assesses nonverbal belligerent acts; physical assault incorporates physical violence;  
35 sexual coercion emphasizes pressuring a partner into undesired sexual activity; fi-  
36 nally, injury incorporates partner-caused bodily damage (Straus, 1987). Respondents  
37 rank each item for the scales mentioned earlier on a 7-point Likert scale (0 = *this*  
38 *has never happened before*; 1 = *once in the past year*; 2 = *twice in the past year*;  
39 3 = *3–5 times in the past year*; 4 = *6–10 times in the past year*; 5 = *11–20 times in the*  
40 *past year*; 6 = *more than 20 times in the past year*; and 7 = *not in the past year, but*  
41 *it has happen before*). To generate intelligible scores, values 1 and 2 were kept the  
42 same, and values 3 through 6 were recoded to their midpoints (3 = 4, 4 = 8, 5 = 15,  
43 6 = 25; see Straus, 1987). CTS2 reported scores are the mean and standard deviation  
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of chronicity scores, or how often the participant engaged in the behavior described by each scale over the course of a year (for more information on chronicity scores, see Carney, Buttell, & Muldoon, 2006).

**Adult-Adolescent Parenting Inventory.** To assess the parenting and child rearing attitudes of adult and adolescent parent and preparent populations, the AAPI-2 was used (see Bavolek & Keene, 2010; Valentino, Nuttall, Comas, Borkowski, & Akai, 2012). By assessing the level of agreement or disagreement with maladaptive parenting behaviors, the AAPI-2 is considered a corroborated and consistent inventory of parenting attitudes related to child abuse and neglect across the field (Bavolek & Keene, 2010). The AAPI-2 indicates high-, medium-, or low-risk parenting attitudes in relationship to child abuse and neglect based on responses from participants. To do this, the AAPI-2 uses five scales to evaluate parenting attitudes considered to be associated with cases of child abuse and neglect: (a) improper expectations of children, (b) parental deficiency of empathetic mindfulness toward children’s needs, (c) strong belief in the use of corporal punishment as a means of discipline, (d) parent–child role reversal, and (e) oppressing children’s power and independence (Bavolek & Keene, 2010). This measure is a reliable measure for parenting attitudes inventory (see, e.g., Connors et al., 2006; Kantor et al., 2004).

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**RESULTS**

**Sample**

The sample of 146 women contained 57.5% (*n* = 84) Whites, 33.6% (*n* = 49) African Americans, and 8.9% (*n* = 13) other (i.e., Latino/Hispanic, Asian, and American Indian). African American women had the highest program completion with 85.7% (*n* = 42) compared to program completion of White women of 72.9% (*n* = 61). Within the sample, none of the women tested within the low-risk category for the AAPI-2; however, nearly 40% (*n* = 59) fell in the medium-risk category and 60% (*n* = 87) within the high-risk group. Additional demographic characteristics of the sample are presented in Table 1.

The Cronbach’s alpha for the CTS2 score is greater than .75, acceptable value for reliability (see Straus, 2011). The Cronbach’s coefficient alpha of the AAPI-2 survey is *greater than* .65, indicating high internal consistency reliability. Factorial design analysis confirms that the five subscales of parenting constructs of the AAPI-2 show significant diagnostic and discriminatory validity (Connors, Whiteside-Mansell, Deere, Ledet, & Edwards, 2006).

**Intimate Partner Violence Perpetration and Demographics Associated With High- or Medium-Risk Parenting Attitudes**

To further investigate the differential impact of demographics and conflict tactics for female batterers in a community-based BIP, this study employed a logistic regression model to determine the association with high or medium-risk parenting attitudes. The model consisted of the best demographic and conflict tactic predictors

**TABLE 1. Demographic Characteristics**

Characteristic	Program Participants ( <i>N</i> = 111)		
	Completers % ( <i>n</i> )	Dropouts % ( <i>n</i> )	Total % ( <i>N</i> )
Client status	78.1 (114)	21.9 (32)	100.0 (146)
Race			
Caucasian	53.5 (61)	71.9 (23)	57.5 (84)
African American	36.8 (42)	21.9 (7)	33.6 (49)
Other	9.6 (11)	6.2 (2)	8.9 (13)
Age (years)	32.25 (114)	32.81 (32)	32.38 (146)
<i>SD</i>	10.05	9.29	10.93
Relationship status			
Single	36.0 (41)	28.1 (9)	34.2 (50)
Married	25.4 (29)	25.0 (8)	25.3 (37)
Unmarried partners	14.0 (16)	12.5 (4)	13.7 (20)
Divorced	7.0 (8)	15.6 (5)	8.9 (13)
Separated	15.8 (18)	15.6 (5)	15.8 (23)
Widowed	1.8 (2)	3.1 (1)	2.1 (3)
Children			
0	16.7 (19)	15.6 (5)	16.4 (24)
1	21.1 (24)	28.1 (9)	22.6 (33)
2	22.8 (26)	18.8 (6)	21.9 (32)
3	19.3 (22)	28.1 (9)	21.2 (31)
4	13.2 (15)	6.3 (2)	11.6 (17)
5	3.5 (4)	—	2.7 (4)
6	1.8 (2)	3.1 (1)	2.1 (3)
7	0.9 (1)	—	0.7 (1)
8	0.9 (1)	—	0.7 (1)
Education level			
<High school	22.8 (26)	31.3 (10)	24.7 (36)
High school graduate	23.7 (27)	25 (8)	24 (35)
Some college	33.3 (38)	28.1 (9)	32.2 (47)
Grad college	20.2 (23)	15.6 (5)	19.2 (28)
Employed			
Yes	64.9 (74)	50.0 (16)	61.6 (90)
No	35.1 (40)	50.0 (16)	38.4 (56)
Referral status			
CDV CT	11.4 (13)	15.6 (5)	12.3 (18)
Regular court	29.8 (34)	31.3 (10)	30.1 (44)
PTI	50.9 (58)	28.1 (9)	45.9 (67)
PPP	0.9 (1)	3.1 (1)	1.4 (2)
DSS	1.8 (2)	3.1 (1)	2.1 (3)
Other	5.3 (6)	18.8 (6)	8.2 (12)

*(Continued)*



**TABLE 1. Demographic Characteristics (Continued)**

Characteristic	Program Participants (N = 111)		
	Completers % (n)	Dropouts % (n)	Total % (N)
AAPI-2 risk category			
Low	—	—	—
Medium	41.2 (47)	37.5 (12)	40.4 (59)
High	58.8 (67)	62.5 (20)	59.6 (87)
AQ9 CTS scores			
Negotiation	24.32 (2.72)	22.75 (5.82)	22.13 (6.46)
Psychological aggression	20.50 (7.50)	19.78 (7.73)	14.93 (9.79)
Injury	9.69 (9.02)	8.21 (8.93)	4.02 (5.78)
Sexual coercion	6.36 (8.40)	5.31 (7.39)	2.26 (4.60)
	2.16 (6.77)	1.00 (4.45)	0.99 (4.21)
CTS2 total score <sup>a</sup>	38.72 (22.04)	34.31 (20.93)	22.22 (15.33)

*Note.* Table statistics include mean followed by (standard deviation). CDV = criminal domestic violence court; CT = ; PTI = pretrial intervention; PPP = ; DSS = ; AAPI-2 = Adult-Adolescent Parenting Inventory; CTS = Conflict Tactics Scale; CTS2 = Revised Conflict Tactics Scale.

<sup>a</sup>Total score for CTS2 includes psychological aggression, physical assault, injury, and sexual coercion.

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(i.e., age, education, children, race with African American as the reference category, CTS2 Negotiation, and CTS2 Total Score). For example, each CTS2 subscale was run in logistic models; however, results were not significant. Thus, these indicators represent the best combination of data resulting in statistically significant models. All assumptions of logistic regression were met. The estimated coefficients of the logistic regression model are presented in Table 2.

The full model tested against a constant-only model was statistically significant ( $\chi^2 = 22.147$ ;  $df = 11$ ;  $p < .05$ ). The model  $R^2$  shows that the model accounted for 19.0% of total variance. This suggests the series of predictors effectively distinguishes between those in the high-risk parenting attitude group and those in the medium-risk parenting attitude group. With an overall success rate of 67.1% and prediction rate of 80.5% for the high-risk AAPI-2 group and 47.5% for the medium-risk AAPI-2 group, respectively, prediction success for the cases employed in the model were moderate. Thus, the model was very good at predicting membership in the high-risk parenting attitude group and no better than a coin flip at predicting membership in the medium-risk parenting group. There are several possible reasons for this. First, most of the sample falls in the high-risk parenting group ( $N = 87$ ) and subsequently the larger case base makes the model a more accurate prediction. Second, the set of indicators that predict high-risk parenting are robust indicators of such risk. Third and related, the model is very good at predicting high-risk parenting. Because these variables, taken together, are good at predicting high-risk parenting, it stands to reason that

**TABLE 2. Logistic Regression Analysis of High-Risk and Medium-Risk Adult-Adolescent Parenting Inventory for Demographics and Conflict Tactics (Revised Conflict Tactics Scale)**

	<i>B</i>	<i>SE</i>	Wald	Sig.	Exp ( <i>B</i> )	95% CI for Exp ( <i>B</i> )		
						Lower	Upper	
Age	0.017	0.020	0.766	.381	1.017	0.979	1.057	
Education*	-0.437	0.182	5.745	.017	0.646	0.452	0.924	AQ11
Children	-0.032	0.114	0.077	.781	0.969	0.774	1.212	
Race*	0.812	0.406	4.000	.045	2.253	1.016	4.994	AQ11
CTS2 negotiation	-0.137	0.077	3.208	.073	0.872	0.750	1.013	
CTS2 total score	0.006	0.008	0.532	.466	1.006	0.990	1.023	
Constant	3.830	2.042	3.516	.061	46.043			

Note.  $N = 146$ ;  $df = 6$ .

\* $p < .05$ . \*\* $p < .01$ .

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there are important, significant relationships between intimate partner conflict negotiation and parenting attitudes. Although, the precise mechanisms are not captured (e.g., the CTS2 scores are not statistically significantly associated with parenting attitudes), there is evidence that supports what has been long assumed in the field: that those who perpetrate IPV are at a higher risk for abusive parenting. More research is necessary to further empirically support this finding and widely held assumption and to identify the precise mechanisms of the co-occurrence of IPV and child maltreatment.

Two of the predictive variables, level of education and race (dummy coded with African American was the reference category) were statistically significantly associated with AAPI high-risk parenting attitudes (see Table 2 for coefficient estimates). According to the model, for every one-unit increase in education, respondents were 48% less likely to be in the high-risk AAPI-2 category. African American perpetrators were almost 5 times as likely than all other races to be in the high- or medium-risk parenting attitude group.

Surprisingly, CTS2 scores (both negotiation and total score) were not statistically significant predictors of being in the high- and medium-risk parenting attitude group. This may be because of the use of these two scales, AAPI-2 and CTS2, and their lack of compatibility. This lack of statistically significant findings might be because of the small sample size. Future research should consider other measurements for negotiating conflict in intimate partnerships as well as other inventories to measure parenting attitudes and skills.

### Predictors of Batterer Intervention Program Completers and Noncompleters

A second binary logistic regression analysis was performed to investigate how well demographic variables, parenting risk categories, and conflict measurements predicted BIP completion (for list of variables used, see Table 3). All assumptions of logistic regression

**TABLE 3. Logistic Regression Analysis of Program Completion for Demographics, Parenting, and Conflict Tactics (Revised Conflict Tactics Scale)**

		<i>B</i>	<i>SE</i>	Wald	Sig.	Exp ( <i>B</i> )	95% CI for Exp ( <i>B</i> )	
							Lower	Upper
	Age	0.016	0.027	0.359	.549	1.016	0.964	1.071
	Relationship	-0.143	0.168	0.727	.394	0.867	0.624	1.204
	Education	0.161	0.252	0.411	.521	1.175	0.718	1.924
	Children	0.179	0.157	1.303	.254	1.196	0.880	1.626
	Employment	0.907	0.527	2.957	.085	2.476	0.881	6.957
	Race	0.443	0.565	0.613	.434	1.557	0.514	4.716
	AAPI-2	0.152	0.487	0.097	.755	1.164	0.448	3.027
AQ11	CTS2 Negotiation*	0.137	0.053	6.769	.009	1.146	1.034	1.271
	CTS2 total score	0.022	0.012	3.536	.060	1.022	0.999	1.046
AQ11	Referral regular*	2.148	0.813	6.988	.008	8.570	1.743	42.139
AQ11	Referral CDV*	1.894	0.926	4.184	.041	6.644	1.082	40.778
AQ11	Referral PTI***	2.849	0.807	12.457	.000	17.273	3.550	84.040
	Referral PPP	-0.940	1.705	0.304	.581	0.391	0.014	11.044
	Referral DSS	0.139	1.495	0.009	.926	1.150	0.061	21.523
	Constant	-6.426	2.144	8.983	.003	0.002		

*Note.* *N* = 146; *df* = 14. AAPI-2 = Adult-Adolescent Parenting Inventory; CTS2 = Revised Conflict Tactics Scales; CDV = criminal domestic violence court; PTI = pretrial intervention; PPP = ; DDS = .  
 \**p* < .05. \*\**p* < .01. \*\*\**p* < .001.

were met. The full model tested against a constant-only model was statistically significant ( $\chi^2 = 30.248$ ; *df* = 18; *p* < .05). The estimated coefficients of the logistic regression model are presented in Table 3. This model represents the best combination of predictors.<sup>1</sup> *R*<sup>2</sup> shows that the model accounted for 28.8% of the total variance, suggesting that these predictors efficaciously differentiate between those completing the BIP program and noncompleters. With an overall success rate of 83.6% and prediction rates of 95.6% for program completion as opposed to 40.6% for dropouts, model prediction success for cases was high. We interpret this finding to mean that the set of indicators used are very good at predicting program completion. Those who will complete the program have skills in negotiating with a partner and tend to be mandated to treatment by the courts. We suggest the discrepancy between the model's high success rate in predicting program completion and its low ability to predict dropouts is because of the set of indicators. Indicators used are not accurately capturing the demographics of those who dropout. More research is necessary to understand further who drops out of BIPs and why.

The model revealed four predictive variables, CTS2 Negotiation score, criminal domestic violence court (CDV) referral, referral by regular court, and referral by pretrial intervention (PTI) were statistically significant. Based on the model, for every one increase in level on the CTS2 Negotiation subscale, which measures how well a



1 person uses discussion to resolve conflict, there is a 1.167 times greater likelihood of  
 2 completing the 26-week BIP (for all Wald values, see Table 3). Referral sources were  
 3 dummy coded such that each named referral source was the referent category com-  
 4 pared to all other referral sources. Based on the model, referral by means of the CDV  
 5 results in 7.773 times greater likelihood to complete the 26-week BIP as compared to  
 6 other referral methods. Referral by means of regular court to the BIP program results  
 7 in 8.177 times greater likelihood to complete the 26-week BIP compared to all other  
 8 referral options, and a referral by means of PTI results in a 17.015 times greater  
 9 likelihood to complete the 26-week BIP than other referral options.

11 **DISCUSSION**

12 Findings are summarized here and further discussed in the following text. Results re-  
 13 vealed no statistically significant relationship between medium- and high-risk parent-  
 14 ing and IPV perpetration. African American women in the BIP were statistically more  
 15 likely than other races to fall in the medium- and high-risk parenting attitude cat-  
 16 egory. Women who scored higher on the CTS2 Negotiation subscale were more likely  
 17 to complete the BIP. Lastly, we found that referral type were statistically significant  
 18 predictors of program completion. As described in the introduction, we employ a psy-  
 19 chosocial framework for interpreting these results (see, e.g., Ferreira & Buttell, 2014).

21  
 22 **Parenting Attitudes and Demographics Associated With Intimate Partner**  
 23 **Violence Perpetration**

24 The findings of this study showed that all of the female perpetrators in this sample  
 25 demonstrated medium- or high-risk parenting attitudes. For this reason, we hypoth-  
 26 esized a strong correlation between high-risk parenting attitudes and IPV perpetra-  
 27 tion. However, the binary logistic regression model, which examined the extent to  
 28 which IPV measured by the CTS2 scores, was associated with medium- and high-risk  
 29 parenting attitudes, showed no statistically significant relationship between IPV and  
 30 parenting attitudes. This finding could be explained by a moderating variable that is  
 31 not captured in the model. For instance, a second parent may intervene on behalf of  
 32 children, therefore redirecting the violence of the IPV-perpetrating parent elsewhere.  
 33 However because of these inconclusive findings, further research should be conducted  
 34 to better understand the relationship between high-risk parenting attitudes and IPV  
 35 perpetration using an inventory that measures both sets of skills.

37  
 38 **Demographic and Parenting Attitude Predictors of Intimate Partner**  
 39 **Violence Perpetration**

40 Given our finding that African American female perpetrators are significantly more  
 41 likely to be in the medium- and high-risk parenting group than perpetrators of  
 42 other racial groups, we suggest the following stressors may play a significant role.  
 43  
 44



Some research proposes that the harsh realities of internalized and institutionalized racism faced by the African American community contribute to low self-esteem and the perpetration of violence (Conwill, 2010). Similarly, Hill (2001) finds that African American families experience a disproportionate amount of negative effects and stressors resulting from racial and economic inequality. In addition, increased levels of alcohol abuse and illegal drug use, unemployment, exposure to community violence, exposure to IPV within family of origin, living in impoverished neighborhoods, and economic distress are also found as risk factors of violence perpetration within the African American community (Caetano et al., 2000; Cunradi et al., 2000; Schafer et al., 2004; Williams, Oliver, & Pope, 2008). Further research suggests that African American mothers perceive corporal punishment as a common and acceptable method of parenting in their communities and further note that they would rather enforce strict consequences on their children than have law enforcement officers harshly penalize their children (Taylor et al., 2011). For instance, in light of the pervasive structural racism and inequality that exists in dominant U.S. culture, Hill (2001) describes the common occurrence of corporal punishment by African American parents as a mode of racial socialization that seeks to prepare African American children for the oppressive forces of racism they will most likely or inevitably face in society. These cultural variables that impact parenting attitudes and practices within the African American community offers valuable insight into our findings.

The finding that the more education, the less likely respondents will exhibit high-risk parenting attitudes differs from a study examining the relationship between parenting attitudes and IPV for male perpetrators, which suggests no significant relationship between education and high-risk parenting attitudes (Burnette et al., 2015). Given that socioeconomic stressors contribute to higher levels of family violence, one explanation of this finding may be that higher levels of education decrease the likelihood of experiencing increased levels of socioeconomic stressors and, therefore, decrease the likelihood of more violent parenting approaches. Additional empirical research examining why lower education levels contribute to an increased likelihood of having high-risk parenting attitudes should be conducted for more conclusive explanations.

**Predictors of Batterer Intervention Program Completers and Noncompleters**

The logistic model (see Table 3) showed that the more negotiation skills a partner has, the more likely they are to complete the treatment program. Put simply, women who were more likely to use discussion to resolve interpersonal conflicts were more likely to complete the program. Following the psychosocial model advocated by some (see Ferreira & Buttell, 2014) and given the cognitive-behavioral therapy approach of the group setting, it makes sense that participants who used discussion to navigate interpersonal conflict would be more likely to complete the program. No other conflict tactic scale—psychological aggression, physical aggression, injury, or sexual coercion—were statistically significant predictors of program completion.

1 Similar to other studies (e.g., Buttell, Wong, & Powers, 2011; DeHart, Kennerly, AQ2  
 2 Burke, & Follingstad, 1999), we found that referral sources were statistically signifi- AQ2  
 3 cant predictors of program completion. Our findings seem to confirm that the more  
 4 supervision and the greater the concrete legal consequences for program dropout,  
 5 the more likely clients are to complete the program. Referral from PTI resulted in  
 6 the greatest likelihood of completion. This makes sense given that PTIs monitor cli-  
 7 ents closely through case managers and provides a clear and positive legal incentive  
 8 (e.g., criminal charges are dismissed upon completion). Interestingly, for this sample,  
 9 having been referred by regular court resulted in a greater likelihood (8.177 times)  
 10 of completion than that of domestic violence court (7.773 times). This is surprising  
 11 given domestic violence court's specialty in domestic violence cases and its dedicated  
 12 resources to monitor mandated offenders in treatment programs, whereas summary  
 13 court usually receives less resources and provides less supervision in monitoring  
 14 its larger caseload than domestic violence court (see Buttell et al., 2011). This find-  
 15 ing may be explained by more severe and immediate consequences implemented by  
 16 regular courts.

17 Unsurprisingly, and similar to previous research (e.g., Buttell & Carney, 2004; AQ2  
 18 Buttell et al., 2011), demographic factors, such as age, children, and relationship sta-  
 19 tus, were not statistically significant predictors of program completion. Surprisingly,  
 20 race, education, and employment did not prove to be a statistically significant pre-  
 21 dictor of program completion. Previous studies suggest that the more educated and  
 22 greater access to economic means resulted in a greater likelihood to complete the  
 23 treatment program (Buttell et al., 2011). The absence of such a finding may be due in  
 24 part to the lack of variability across these demographics in our sample (see Table 1).  
 25 Parenting attitudes, as captured by the AAPI-2, also were not statistically significant  
 26 predictors of program completion. We interpret this finding to mean that parenting  
 27 attitudes do not differentiate whether women complete the treatment program or  
 28 not. However, other barriers associated with parenting, such as childcare, which is  
 29 not accounted for here, may impact whether or not a client completes the program.  
 30

### 31 **Limitations**

32  
 33 There are several limitations to this study. First, the sample used is not represen-  
 34 tative of general society but is informative of the experiences, attitudes, and moti-  
 35 vations of women in a BIP. Second, although widely used in the study of IPV (see,  
 36 e.g., Archer, 1999; Hines & Saudino, 2003; Straus, 1987), the CTS2 has been criti-  
 37 cized (see DeKeseredy & Schwartz, 1998; Straus, Gelles, & Smith, 1990) for its fail-  
 38 ure to capture adequately people's motivations for perpetrating IPV. Although we  
 39 find the evidence convincing that the CTS2 is an excellent scale for measuring how  
 40 people negotiate intimate partnerships, we have found that the use of CTS2 with the  
 41 AAPI-2 inventory is inadequate in explaining dynamics of parenting attitudes and  
 42 IPV in this sample. Last, although not all women in the sample were mothers at the  
 43 time data were collected (see Table 1), we argue it is informative to investigate these  
 44

women’s perspectives, given they may become mothers and have experiences with IPV, whereas keeping in mind their attitudes might change.

**CONCLUSION**

Although several studies exist that examine the relationships between IPV victims and parenting, few studies have investigated the relationships between female perpetrators and parenting. This research is a meaningful step in adding to this important area of research. Given that structural inequality and racism influences parenting approaches in the African American community, these macro issues should be considered and incorporated in curricula for both BIPs and parenting classes for parents with high-risk parenting attitudes. Furthermore, culturally focused interventions for both BIPs and parenting classes for high-risk parents should be researched and developed to better understand the culturally specific parenting strategies particular to parents of different races that may contribute to an increased likelihood of family violence. In this way, more effective interventions for parents with high-risk parenting attitudes may be developed on a microlevel as well. These findings illustrate the importance for batterer intervention groups to take into consideration motherhood, its stressors and motivations, in treating female offenders. Furthermore, this study demonstrates that referrals matter. More precisely, courts that offer greater supervision and exact consequences influence whether participants complete the program. Lastly, more work, both qualitative and quantitative, is necessary to identify and explain the specific mechanisms between women, IPV perpetration, and parenting.

**NOTE**

- 1. We acknowledge there are many variables in this model given the small sample size. We ran the model several times using various combinations of indicators, and this model was the best in terms of overall significance as well as the findings relevant to the stated purpose of this study. Results of less significant models are available upon request.

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