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Gender Differences in Self-reports of Intimate Partner Violence: A Review

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### **Abstract**

Past studies on intimate partner violence (IPV) have revealed mixed findings about its prevalence across gender. Some support gender symmetry in IPV, such that that men and women are equally likely to perpetrate IPV; others show evidence of gender asymmetry, such that men are far more likely to be perpetrators in a violent intimate relationship. This paper reviews the literature on gender symmetry in IPV. Explanations have been suggested for the discrepancy in past findings, including gender differences in reporting styles. Most studies have pointed to a possibility of under-reporting in both men's and women's self-reports of IPV, although the patterns of under-reporting vary. Factors affecting the reporting patterns across gender, the limitations of existing studies and suggestions for future research on gender differences in IPV reporting are also discussed.

**Keywords:** reporting; under-reporting; gender symmetry; intimate partner violence

## 1. Introduction

Research on intimate partner violence (IPV) often attempts to determine whether there are gender differences in the prevalence, frequency, and severity of violence against intimate partners. To date, researchers have not arrived at a consensus, and the question of whether the prevalence of IPV varies as a function of gender is under dispute. Past research has led to two main conclusions (Archer, 2000). Some studies show that men perpetrate more partner violence than women (Dobash & Dobash, 1988; Jacobson & Gottman, 1998), whereas others show that women are as violent as men and that most violent acts are actually mutual and bidirectional (i.e., both partners are violent). These findings, therefore, have supported a gender-symmetric theory of the prevalence of IPV (Straus, 1990; Vivian & Langhinrichsen-Rohling, 1994).

In a review of IPV literature, Archer (2000) has noted two possible explanations for the mixed and inconclusive findings for gender symmetry or asymmetry in the IPV prevalence. One of them is the failure of existing measures (e.g., the Conflict Tactics Scales; CTS) to assess the context, motives, causes, and consequences of IPV (Dutton, 1994). And the ignorance of these factors may favor the finding of gender symmetry in violence prevalence. Another is the disparity in the samples used in different studies. In particular, the use of representative or community samples may result in very different results from using clinical samples (Johnson, 1995). In general, most IPV cases revealed in surveys were minor,

infrequent, and mutual, whereas most officially reported cases involved severe violence against women that required medical attention (Straus, 1997).

Apart from the two reasons for the discrepancy in previous findings on IPV prevalence as suggested by Archer (2000), gender differences in the reporting or disclosure of violence may serve as another possible explanation. The most common assessment method in past studies is self-report, which relies heavily on the integrity of the respondents. However, reporting biases are primarily inevitable. Men and women often exhibit different styles of disclosure; and researchers generally agree that gender can affect an individual's reporting of violence, which in turn influence the research findings and conclusions (Caetano, Field, Ramisetty-Mikler, & Lipsky, 2009; Caetano, Schafer, Field, & Nelson, 2002; Dobash & Dobash, 2004).

The present review attempts to provide an update for the evidence supporting gender symmetry and gender asymmetry in IPV prevalence respectively, and evaluate the gender differences in violence reporting as shown in IPV literature. Prior reviews or meta-analyses on gender issues on IPV are often not up-to-date (e.g., Archer, 2000, 2002) or intentionally conducted as informal narrative reviews (e.g., Fiebert, 1997, 2009). A thorough, systematic review of the IPV prevalence across gender can help professionals to better understand IPV and facilitate more effective allocation of resources to combat the problem. The present paper also explores the factors which potentially lead to the different violence reporting styles

across gender.

## **2. Methods**

### **2.1 Search Strategy**

The PsycInfo (focusing on psychological research), Medline (focusing on biomedical and life sciences research), Social Services Abstracts (focusing on social work and social policy), and Sociological Abstracts (focusing on social structure and social problems) databases were searched using combinations of the terms “intimate partner violence”, “spousal violence”, “domestic violence”, “prevalence”, “gender symmetry”, “gender asymmetry”, “gender difference”, and “gender” for publications relevant to IPV prevalence across gender during 1998 to May 2010. The choice of this time period was to avoid duplication with prior reviews (Archer, 2000, 2002).

For the difference in IPV reporting across gender, the above four databases were searched using mixtures of the terms “intimate partner violence”, “spousal violence”, “domestic violence”, “prevalence”, “gender”, “reporting”, and “agreement” for relevant publications during 1980 to May 2010.

Judgments about the eligibility of studies for the present review were made by a researcher trained in psychology and then by the author. When there was doubt about the eligibility, the author and the researcher read and discussed the paper until consensus reached.

## 2.2 Inclusion and Exclusion Criteria

For studies of gender symmetry or asymmetry in IPV prevalence, they were included if they met *all* of the following criteria: (1) it was an empirical study or a meta-analytical study; (2) it primarily concerned gender differences in the prevalence of IPV; and (3) it was published between 1998 and May 2010.

For studies of gender differences in IPV reporting, they had to meet *all* of the following criteria: (1) it was an empirical study, or a meta-analytical study; (2) it primarily concerned gender differences in the reporting of IPV; (3) it compared reporting of IPV across gender with the use of matched couple data, i.e. the data of which partners of the same couple were paired up; and (4) it was published between 1980 and May 2010.

On the other hand, studies were excluded if they met *any* of the following criteria: (1) it did not compare the IPV rates across gender, and (2) it was not in English language.

## 2.3 Examples of excluded studies

Some studies were close to meeting the inclusion criteria but were excluded eventually. Most of them did not meet *all* of the inclusion criteria. Some were neither an empirical study nor a meta-analysis that compares IPV prevalence across gender (criterion 1). For example, Hamberger (2005) reviewed research on IPV using a model which incorporates the differences in motivations and impacts of IPV across gender. In a few other studies, gender differences in the self-reported IPV were explored. However, they did not use couple

data which allow the comparison of self-reported IPV incidence between partners. For example, McFarlane, Willson, Malecha, and Lemmey (2000) compared the severity of IPV reported by gender using a sample of 90 men and 10 women who intended to file charges of assault.

### **3. Results**

A total of 258 titles were obtained from the database search results after removing duplicates. After applying the inclusion and exclusion criteria, two meta-analytical studies and 21 empirical studies remained for review in the present paper.

#### **3.1 Gender differences in the prevalence of IPV**

Two meta-analytical and 13 empirical studies focused on gender differences in IPV. Table 1 summarizes the findings of the meta-analyses and table 2 summarizes the methodologies and results of the empirical studies.

[Tables 1 and 2 about here]

##### **3.1.1 Findings of meta-analytical studies**

Findings of meta-analyses generally support the claim that minor IPV was mutual in community samples, and more severe IPV was more likely to be perpetrated by men. Archer (2000) investigated gender differences in physical violence against heterosexual partners. The analysis covered 82 studies published from 1976 to June 1997 results show that the number of violent acts and the frequency of perpetrating violence were greater among women than



men ( $d = -.05$ ), while the likelihood of inflicting an injury to partners were greater among men than women ( $d = .15$ ). In all samples of the studies analyzed, 62% of injured victims were women.

In a more recent meta-analysis, Archer (2002) reviewed 58 studies published from 1976 to 1998 to investigate the gender differences in the use of various types of IPV. The author used odds ratios (ORs) to indicate the effect size of the gender difference: an OR smaller than 1.0 indicated a greater likelihood of female than male perpetration while an OR greater than 1.0 indicated the reverse. Findings show that men were more likely to beat up, choke or strangle their partners (ORs range from 1.21 to 2.65). Women, on the other hand, were more likely to throw something at their partner, slap, kick, bite, punch, or hit with an object (ORs range from 0.43 to 0.78).

### **3.1.2 Findings of empirical studies**

Six empirical studies reviewed in the present paper have provided evidence supporting gender symmetry in IPV prevalence. Of these six studies, all were cross-sectional studies using the Conflict Tactics Scales (CTS and CTS2) or their modified versions to capture IPV incidence; four used convenience samples (e.g., samples recruited in colleges or universities); one used clinical sample; and one used representative community sample.

Using convenience samples of university students, Straus (Straus, 2004, 2008) and colleagues (Straus & Ramirez, 2007) conducted studies using the Conflict Tactics Scale (CTS)

and its revised version (CTS2) and consistently found that the rates of IPV perpetration by women and by men were roughly equal. The authors noted that most reported IPV cases were bidirectional, rather than men-only or women-only (Straus, 2008). Across the 32 nations involved in Straus's (2008) study, most reported a rate of bidirectional violence exceeding 50%. Overall, about 70% of all assaults and 60% of severe assaults were bidirectional, 10% were men-only, and about 16% to 25% were women-only, implying that a majority of IPV cases involved mutual violence.

Consistent with this view, Kessler, Molnar, Feurer, and Appelbaum (2001) used data from the National Family Violence Surveys, which consisted of 1,738 men and 1,799 women aged 15 to 54 years in the U.S. They reported that about half of the self-reported physical IPV cases were bidirectional, one fourth were men-only, and one fourth were women-only.

When looking at the likelihood of IPV at different severity levels, Cercone, Beach, and Arias (2005) found an interaction of gender and violence severity. The authors recruited a convenience sample of 414 college students (189 men) in the U.S., with a mean age of 19 years. Among all respondents, 36% of men and 39% of women reported perpetration of minor physical assault, while 86% of men and 89% of women admitted perpetration of minor psychological assault. At severe levels, 7% of men versus 15% of women perpetrated physical violence, while 30% of men and 27% of women perpetrated psychological violence.

The authors then concluded that men and women are equally likely to perpetrate both minor and severe IPV.

Teten, Sherman, and Han (2009) found similar results in clinical samples. They interviewed 184 couples wherein the male partners were diagnosed with mental disorders and seeking relationship therapy at a family therapy clinic in the U.S. Overall, 44% respondents reported no violence in their relationship, 26% regarded their violence as mutual, and 30% reported that only one of the partners perpetrated IPV. In the one-sided violent relationships, 56% perpetrators were men and 44% were women. The authors then concluded that men and women were as likely to be perpetrators of IPV.

Of the 13 studies reviewed, three revealed mixed findings although results were generally more favorable to gender symmetry in IPV. The three studies used a cross-sectional design and employed CTS or CTS2 to measure IPV.

In the study of Muñoz-Rivas, Graña Gómez, O'Leary, and Lozano (2007) which used a sample of 1,886 university students in Spain (mean age = 21), women and men expressed similar levels of aggression in most types of verbal, dominant, and jealous behaviors. However, women were significantly more likely than men to commit acts such as insulting their partner, saying something to upset their partner, threatening to break up with their partner, and being jealous of another person (58% versus 43%, 83% versus 77%, 45% versus 39%, and 72% versus 64%, respectively).

Similar findings were obtained in Robertson and Murachver's (2007) evaluation of 172 New Zealanders. Although no gender differences were found in the rates of most types of IPV (except for the perpetration of minor physical assault, which was higher among women), women were more likely to report themselves being the perpetrator while men were more likely to report being the victim in one-sided violent relationships.

Allen, Swan, and Raghavan (2009) interviewed 232 Hispanic college students (92 men) in the U.S. and found comparable numbers of men and women being perpetrators of IPV. However, when taking into account the context of the violent incidence, men tended to initiate violence while women often perpetrated violence in response to the violent acts by their male partners. Findings in this study have revealed a gender symmetry in the prevalence of IPV, but a gender asymmetry in the motivation of such violence.

Four studies reviewed in the present paper found gender asymmetry in the prevalence of IPV and, in particular, women were more likely to be victims of the violent incidence. Three of them were cross-sectional studies and the remaining one was a longitudinal study. Two used national representative samples, one used a convenience sample, and one used a combination of clinical and convenience sample. Of these four studies, only one used modified CTS while others used different measures to assess IPV.

Rennison and Welchans (2000) conducted a longitudinal study using data from the U.S. National Crime Victimization Survey (NCVS). The authors included all cases of lethal

and nonlethal offenses, such as homicide, physical assault, sexual assault, and robbery, and found that about 876,340 cases (85%) of victimization in 1998 were men's violence against women. The rate of female victimization was five times higher than that of male victimization (767 versus 146 cases per 100,000 persons, respectively). In particular, 84% of physical assaults, 72% of homicides, and 100% of sexual assaults were against women.

In another national survey study, Tjaden and Thoennes (2000) examined data from the U.S. National Violence against Women Survey, which interviewed 8,000 women and 8,000 men, and found that 25% of women versus 8% of men reported being physically and/or sexually assaulted by their current or former partners in their lifetime. Together with the finding that significantly fewer men living with women reported being victims of IPV than men cohabiting with men did (7.5% and 15%, respectively), the authors concluded that IPV is primarily committed by men.

Further supporting evidence for gender asymmetry comes from Rice et al. (2001) who used a combination of clinical sample and convenience sample recruited from a newspaper. A total of 1,307 men and 418 women of which 53% received previous treatments for alcohol problems participated (mean age = 40). Using the Addiction Severity Index, the authors revealed that women are more likely than men to report IPV victimization (77% versus 54%), and a greater proportion of women had experienced both physical and sexual violence (31% versus 6%).

Weston, Temple, and Marshall (2005) conducted another cross-sectional study using a sample of 445 U.S. women who experienced both perpetration and victimization of IPV. The authors used the Severity of Violence Against Women Scale, the Severity of Violence Against Men Scale, and the Subtle and Overt Psychological Abuse Scale to capture IPV experience, and found that the primary perpetrators in more than 50% of the mutually violence relationships were men. Only 11% of the primary perpetrators were women, and 35% partners of the violent relationships were comparably violent.

### **3.2 Gender difference in the reporting of IPV**

Table 3 shows that eight studies comparing the reporting of IPV across gender fulfilled the inclusion criteria for review. Seven of them used CTS or its modified version. Four compared the self-reports of IPV between spouses using Kappa's coefficients and revealed low to moderate inter-spousal agreement in those reports (Kappa's coefficients ranged from .00 to .56) (Caetano, et al., 2009; Caetano et al., 2002; Chan et al., 2010; Edleson & Brygger, 1986). Six compared the self-reports with couple data and generally found different reporting patterns across gender.

[Table 3 about here]

Dobash and Dobash (2004) conducted a study using a convenience sample of 95 couples drawn from cases dealt in two courts in England. They found that men were more willing to report men-to-women IPV at a minor level, but the willingness of reporting

decreased as the severity of IPV increased. In contrast, women were more likely to report severe and very severe men-to-women IPV, but the likelihood of reporting decreased as the severity of IPV decreased.

Similar findings were revealed by Stets and Straus (1990) who used a subsample of 5,248 coupled data drawn from the 1985 National Family Violence Resurvey in the U.S. The authors found a tendency for men to under-report their own violence. The rate of severe men-to-women IPV as reported by men was only 25% of that reported by women. Also consistent with Dobash and Dobash (2004), women were less likely than men to report minor men-to-women IPV.

Using a multistage area probability sample of 1,635 couples in the U.S., Caetano et al. (2002) compared the reports of IPV between partners as measured by 11 items adapted from the CTS. Findings show that men tended to under-report their experience of both perpetration and victimization of IPV. In their study, women, when compared with men, were more willing to admit their perpetration of IPV.

Edleson and Brygger (1986) employed a clinical sample of 29 couples of which the male partners were identified wife batterers. Here men were less likely to report men-to-women IPV and threats of IPV, while women were more likely to do so. The authors also found that when a particular violent behavior was reported, there was almost always a discrepancy between men's and women's reports. Agreement existed primarily when there

was no violence. For example, in the case of slapping wives, 66% of the 29 couples interviewed had different frequencies reported by the husband and by the wife (for 41% of the couples the wife reported a higher frequency, while for 15% of the couples the husband reported a higher frequency).

Szinovacz (1983) compared men's and women's self-reports of IPV with couple data in a convenience sample of 103 couples in the U.S. In his study, couple data counted when either of the partners had reported an incidence of IPV. The author found that the rate of IPV derived from couple data was 50% higher than that reported by men, and 20% higher than that reported by women, implying that both men and women under-reported.

Using a similar procedure, Szinovacz and Egley (1995) conducted another study using a sample of 2,044 U.S. couples aged 18 to 75 years. Using six self-constructed questions to assess physical violence, the authors found that men under-reported 60% men-to-women IPV and 65% women-to-men IPV as compared to the rates obtained from couple data. Similarly, women under-reported 50% of men-to-women IPV and 55% of women-to-men IPV. Findings also showed that the disagreement in injuries caused by IPV was even higher: women under-reported 43% of their own and 54% of their partner's injuries while men under-reported 93% of their own and over-reported 16% of their partner's injuries.

Chan et al. (2010) conducted a population survey study in Hong Kong and found results that were different from those of past research. In their study, 1,870 couples were



interviewed individually about their own IPV perpetration and victimization using the CTS2. Among the self-reports of the 1,870 couples, the percentages of interspousal agreement for different types of IPV ranged from 88% to 95%. The kappa coefficients of the chance-corrected agreement ranged from .40 to .50, representing a fair agreement between men and women's reports. Overall, the authors concluded that there was no apparent under-reporting of violence by male respondents.

## **4. Discussion**

### **4.1 Gender symmetry or gender asymmetry?**

The present review examines 13 empirical studies and two meta-analyses on gender symmetry in IPV. Although the findings of these studies have not provided conclusive evidence for a convincing conclusion, they generally support the claim that men and women may exhibit similar rates of IPV when no contexts, motivations, and consequences are considered. However, when taking into account the severity, motives, and impacts of the IPV incidence, findings may be more favorable for a gender asymmetry that men often initiate and perpetrate more severe IPV which lead to more severe consequences or injuries.

As mentioned in section 1 of the present review, the difference in the likelihood of reporting across gender may be one explanation for the mixed and inconclusive findings in past studies. And, indeed, the present review shows that the interspousal agreement on IPV experience is generally low to moderate, and men and women tend to have different patterns

of reporting, which may result in very different prevalence of IPV across studies which used divergent samples and methodologies.

Obtaining reliable and accurate results is one essential step in the arrival of the conclusion on whether IPV is gender symmetric or not. The understanding of gender-specific patterns of reporting of IPV would facilitate the design of future studies. Previous research has attempted to identify possible factors which affect the reporting of IPV and, in turn, the apparent prevalence of IPV. These factors are discussed in the following section.

## **4.2 Factors affecting the reporting of IPV**

### **4.2.1 General factors**

Numerous factors have been found to shape the gender-specific reporting pattern of IPV. General reasons that may lead to under-reporting of perpetration and victimization include social desirability (Arias & Beach, 1987; Rosenbaum & Langhinrichsen-Rohling, 2006), and shame and guilt (Knapp & Kirk, 2003). Respondents who feel a high need for social desirability have a stronger desire to be viewed positively and are more likely to under-report IPV incidents. In fact, Arias and Beach (1987) found that people with high social desirability are less willing to report physical violence perpetration. The tendency to under-report, in general, may be even greater when information is collected via in-person interviews. Face-to-face reporting of socially undesirable IPV behaviors may evoke shame, guilt, and embarrassment, which possibly lower the likelihood of disclosure of such violence

(Felson & Paré, 2005; Knapp & Kirk, 2003).

#### 4.2.2 Gender-specific factors

Gender-specific factors affecting men's reporting of their own (men-to-women) violence may include: (a) *Blaming*: the tendency to blame their partner for provoking the violence so that they can deny or minimize their own hostile and violent behaviors (Chan, 2009; Jin, Eagle, & Keat, 2008); (b) *Need expression*: reporting as a narrative strategy to communicate their needs and distresses experienced during violence with the interviewers (Chan, 2009); (c) *Fear of consequences*: the recognition that IPV is a crime (Straus & Kaufman-Kantor, 1994) and the fear of resulting court action (Edleson & Brygger, 1986); and (d) *Avoidance*: the desire to avoid facing the legal consequence of their own violence (Edleson & Brygger, 1986).

By contrast, women who under-report their partner's (men-to-women) IPV may be influenced by: (a) *Excusing*: the tendency to discount, downplay, or excuse their partner's violent acts (Kimmel, 2002); (2) *Normalizing as an expression of love*: the higher likelihood to forgive their partner and normalize IPV with the reasoning that their partner really loves them (Kimmel, 2002); (3) *Dependence*: the tendency to under-report partner violence when women are more dependent on their abusive husband, for example, when they have dependent children or when they believe in their husband's responsibility to provide (Szinovacz & Egley, 1995); and (4) *Self-blaming*: the tendency to shift attention by blaming

themselves and the need to make themselves better partners (Giles, 2004).

#### **4.2.3 Cultural-specific factors**

Culture-specific factors may be an obstacle that increases the resistance of perpetrators to report their violence. Within Chinese culture, the concept of “face” is a dominant influence on the disclosure of socially undesirable behaviors. Face has been explained as “prestige; dignity; honor; respect; status” (Carr, 1993) that can be gained or lost during social interactions and is related to a set of personality constructs including self-esteem, social desirability, and interpersonal relationships (Chou, 1996). It is believed that face plays a particularly important role in Chinese people’s social interaction (Ho, 1976; Hu, 1944), although face is not exclusive to China (Goffman, 1955). Ho (1980) regards face as a construct that significantly influences social interactions, particularly when considering the attainment of status in society as a result of meeting social expectations. As “losing face” is extremely undesirable, the avoidance of face-losing situations has shaped the behaviors of Chinese people (Eberhard, 1967), especially when immoral acts are involved.

Gender may interact with the concept of face to affect the behaviors of Chinese people. Men have been found to have a higher “acquisitive face orientation” than women because they tend to feel greater pressure to present themselves as capable (Li, 1999).

Chinese men may be more aware of their need to avoid losing face and thus view disclosure of personal problems and socially undesirable behaviors as a sign of weakness and shame.

Since IPV is a socially unacceptable behavior, admitting perpetration would probably evoke shame and embarrassment (Felson & Paré, 2005) and, in turn, induce a sense of losing face or social standing. In order to prevent placing themselves in such an undesirable situation, perpetrators may refrain from disclosing the violence. Indeed, Chan (2009) investigated the effect of face protection on the disclosure of IPV, and found that Chinese male perpetrators tended to minimize violence and present a positive, nonaggressive image of themselves so as to gain recognition and appreciation, as well as to save face in front of the interviewers.

The concept of “machismo” is another example of cultural-specific factors that may affect the reporting of IPV among Latin people. Machismo can be defined as values and behaviors associated with masculinity, invulnerability, and bravery (Whitaker & Reese, 2007). In violence literature, it is also known as exaggerated hyper-masculinity expressed in terms of aggressiveness (Mosher, 1991). Under the influence of machismo, Latin men are supposed to be forceful, commanding, and decisive. They tend to believe that women have the obligation of serving and being available for them and their jealous control or guarding of their spouse and even perpetration of physical and sexual violence may be rationalized (Moreira, Galvão, Melo, & de Azevedo, 2008). As men are thought to be the head of households who are in control of their family, wife battering may be not perceived as a serious behavior that needs to report. Therefore, machismo may be an obstacle for people to report IPV.

#### **4.2.4 Methodological issues**

Apart from the characteristics of perpetrators and victims, data collection method is also affecting the reporting of IPV. In particular, Szinovacz and Egley (1995) have noted two main sources of errors: random measurement errors and systematic measurement errors. Random measurement error is related to the ambiguity of the content of questionnaire or scale items. For instance, when given an item regarding more than one IPV behavior (e.g., hitting/throwing things at the other), one spouse may answer with reference to only one of the behaviors (hitting), while the other may refer to both (hitting and throwing). On the other hand, systematic response bias may stem from the inability to control for the impression management strategies of the interviewees, which can include social desirability (as mentioned in the previous section). Systematic response bias is more influential in face-to-face interviews where respondents may deny or fail to report existing IPV (Dutton & Hemphill, 1992). Failure to control for this confounding bias is a major obstacle to studying the actual prevalence of IPV.

The type of sampling used in IPV studies may be another methodological issue in the accuracy of reporting (Ruiz-Perez, Plazaola-Castano, & Vives-Cases, 2007). According to Ruiz-Perez and colleagues, some limitations come from convenience sampling methods whereby victims are recruited from clinical settings. The responses of abused spouses may be greatly affected by the trauma caused by the violent relationship they have with the

perpetrating partner. In turn, the biased memory influenced by the trauma may lead to errors in IPV reporting.

When focusing on the impact of methodology on women's reporting, past studies have highlighted several influential factors. Ellsberg, Heise, Pena, Agurto, and Winkvist (2001) have pointed out that the interview settings and the interviewers' characteristics may greatly affect women's likelihood to disclose IPV. Studies have shown that women are more likely to under-report when the interviewer is a man (Sorenson, Stein, Siegel, Golding, & Burnam, 1987), when someone else (other than the interviewer) is present (Walby & Myhill, 2001), and when perceived privacy is low (Ellsberg et al., 2001).

#### **4.3 Limitations of existing studies and suggestions for future research**

Existing studies have primarily used retrospective cross-sectional designs. Since the real prevalence of IPV is almost impossible to determine, no strong conclusion is possible on which gender tends to under-report (or which is more reliable) when disagreement exists between spouses. When disagreement is present, there is always a possibility that one spouse over-reported the experience of IPV rather than the other under-reported; or, to make the case even more complicated, there is the possibility that one spouse in a couple over-reported while the other under-reported. A longitudinal prospective design allowing researchers to track the occurrence of IPV over time may help solve the problem.

Reliance on the Conflict Tactics Scales as the measure for IPV may be another

confounding factor. Some researchers have argued that CTS may have flaws that cause it to produce results that support gender symmetry in the prevalence of IPV (Giles, 2004; Kimmel, 2002; Straton, 1994). The most controversial methodological issue in CTS may be its failure to capture the intent, circumstances, or consequences of the violent acts (Giles, 2004; Kimmel, 2002; Straton, 1994). For example, a woman pushing a man in self-defense and a man pushing a woman down the stairs intentionally would both gain a score on the CTS. Indeed, the motives of perpetrating IPV can be very different between men and women. For example, men's use of coercive tactics, including the perpetration of IPV, may stem from their motives to retain their partners (McKibbin, et al., 2007; Shackelford, Goetz, Buss, Euler, & Hoier, 2005). Future studies should employ other violence measures, which incorporate the contexts, motives, and impacts of IPV, to test for the agreement in inter-spousal reports and see if the findings support gender symmetry or asymmetry.

#### **4.4 Conclusion**

This review has examined the existing studies on the prevalence and reporting styles of IPV across gender. To date, findings on gender symmetry of IPV are mixed. However, they generally support the claim that the apparent prevalence of IPV is gender symmetric when no contexts, motives, and consequences are considered. Differences in reporting styles across gender can be one of the explanations for the mixed findings. Past findings have pointed to some gender-specific reporting patterns of IPV—that men tend to under-report



their own IPV perpetration while women are more likely to under-report their IPV victimization. General, gender-specific, culture-specific, and methodological factors associated with the differences in reporting styles have been examined, and it was found that most past findings point to a tendency for men to under-report. It is suggested that future studies can make use of longitudinal designs as well as measures other than CTS to assess IPV.

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