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Intimate partner violence: short and long term consequences¹

Abstract

The work analyses the short and long-term consequences of intimate partner violence and the strategies that women have developed to get out of violence. A causal model is developed to analyse five different multivariate dimensions characterising intimate partner violence, based on the last and unique national representative population survey about violence against women. In a second step the stories of repeated violence will be analysed focusing on the strategies the victims have used to cope with violence. The most effective strategies will be contrasted with the less ones. Less effective strategies are associated with an increasing risk of the cycle of violence, that is those who have suffered violence as a child are likely to accept it enduring in their adult life.

The analysis of the physical, moral and psychological consequences, shows a mixed picture, linked to both the severity of the violence, and to the type of suffered violence; focusing on the history of violence, the various strategies to cope with it are closely linked to the framework of severity, to the characteristics and dynamics of the violence and to the specific history that each woman lives.

Keywords: intimate partner violence, history of violence, dynamics and consequences of violence, get out of violence, multivariate analysis, logit models.

Introduction

Intimate partner violence has many facets, often related each other: threat of physical violence, physical violence, sexual violence, psychological and/or economical violence and stalking. Sometimes intimate partner violence, also the one considered as very severe by most of people, is not recognised as such by the victim. Familial or social influences, self-esteem issues, the very nature of the relationship which constitutes an intimate relationship, perhaps the most intimate that the woman is able to have, can be among the main reasons of such misleading. Be the violence by partner recognised or not, also in the most severe cases the victim could speak to none about it, and could have great difficulties to get out of it.

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¹ The present work is the result of a joint collaboration of the authors. Opinion expressed are those of the authors and not necessarily represent the official position of the Institute the authors work for.

Available population data (ISTAT, 2008) show that the main violence against women is indeed domestic². Psychological violence and stalking from the former partner are often the background of a compromised framework of relationships.

Instead of being the place where women traditionally should feel more protected, and where there should be no need for defences, the family is the place where it is easier to implement mechanisms of power, and where wrong psychological, economic, physical and sexual relationships based on abuses can take shape and substance (UNICEF, 2000). Such sick relationships are unfortunately widespread and commonly accepted.

Due to such complicated relationships within the family, it is difficult for a woman victim of violence by the partner, to succeed in getting out of the violence.

Furthermore the family is the context of the intergenerational transmission of violence, suffered and acted. Within the family young girls see their mother battered, or are battered themselves, and learning the violent relationship as normal, they become potential victims once adult. In the family little boys see their mother battered by their father, or are battered themselves, and the risk they will be violent partners becomes real (Corazziari & Barletta, 2012). The family can welcome back a maltreated daughter who is running away from a violent situation, but at the same time it does not help her enough to get free from it, as in the name of the myth of a close family and the well-being of the sons, it urges the woman to come back to a nightmare life (Arcidiacono & Di Napoli, 2013).

Aim of the present work is a focus on the short and long term consequences of intimate partner violence and on the strategies women have developed to get out of it.

Consequences of intimate partner violence are both at macro and micro level (UNICEF, 2000). Violence against women has a social and economic cost in term of days lost at work, or of daily life, of medical care need to face injuries or psychological consequences. Intimate partner violence has strong individual costs for the victims who often struggle in finding a 'normal' life after violence. And it has also costs for sons, both direct victims by themselves or only witnesses of it.

In the present work we are not interested in the levels of violence, widely disseminated and discussed in other previous works (ISTAT, 2008; Musumeci, Signorelli, Arcidiacono & Aguglia, 2012; Arcidiacono & Di Napoli, 2013; Bramante, Filocamo & Mencacci, 2010). Instead we are interested in investigating the underlying structure of violence model, and possibilities to escape from it. Such structure is resistant to changes or improvements (Sartin, Hansen and Huss 2006; Payne, Wermeling 2009; Clark 2009). As outlined in many recent studies there is a lag between the individual and social consciousness (Ogburn 1966; Woodard 1934) about the problem and the reaction of the victims and of the whole society against violence, a reaction that could be translated in a measurable change of habits, manners, way of thinking, and finally ways of acting and living.

Considering Istat population data representative at national level, surveyed in 2006 about violence against women, the underlying structure of intimate partner violence will

² Such data can be considered unique due to their national representativeness, allowing to generalize research outcomes based on them. See for example "Italy Research Report" by Virgilio Maria, retrieved from: <http://lexop.org/produzioni.asp/>, p. 2.

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be investigated. Both the background of the woman and the consequences (short and long term) of the suffered violence by partner will be investigated, focusing on the difficulties found by the victims in recognising the violence and escaping from it.

Istat data about violence against women, being representative at national level, and being population data, that is not clinical nor only from shelters (that in fact exclude victims that remain in the silence), allow to investigate the complicate framework of violence, controlling for some relevant sources of variation such for example geographical variability of the phenomena.

The analysis of the physical, moral and psychological consequences, shows a composite framework, related both to the severity of the suffered violence and to the different type of it; the analysis shows also that the developed strategies are strictly related to the severity and the characteristics of the violence but also to individual features of the history each woman live.

Data and methods

The data

The Women's Safety Survey conducted in 2006, has allowed for the first time the estimation of the number of women victims of violence (ISTAT, 2008).

The screening technique was used in the questionnaire, that is a preliminary battery of questions describing events of victimization in which the victim can recognise her own experience. The term violence is never mentioned.

Only after having collected such data the interviewed woman was asked to give more deep information about the dynamic of the violence.

For the aim of the present study, ISTAT survey information about the physical, psychological and economical consequences of the suffered violence, the individual, familiar and social costs of the violence, also regarding children; the abilities to talk of the violence and report it to the police, or reason for not reporting; the possible risk and protective factors at an individual and social level; will be interconnected according to specific hypothesis and models about the inner structure of violence.

The research hypothesis

After a preliminary analysis of the main types of violence and their combinations, the dynamics and short term consequences of the last event of violence in terms of physical and psychological illnesses will be addressed. All the dynamics and gravity of the violence are considered affecting woman abilities to ask for help to get out of violence. This last occurrence will be related to long term consequences. The main hypothesis is that women able to get help, by reporting to the police or going to shelters or asking help to doctors or lawyers or relatives, experience better scenarios and possibility to solve their critical situations (Musumeci et al., 2012). Such scenarios will be measured in term of long term consequences of violence: current physical illnesses, psychological and/or behavioural problems, difficulties in relationships (Romito, De Marchi & Gerin; Woods, Hall, Campbell & Angott, 2008; Arcidiacono et al., 2013).

A particular focus will involve victims of repeated violence by partner (the *cycle of violence*), and the strategies victims have found to get out of violence, described according to their effectiveness and efficacy (Musumeci et al., 2012). Involvement of

institutions will be found related to more effectiveness and efficacy, together to the role of the presence of children in the history of violence and the relationship with the family the victim was born in (Traverso, 2013). Indeed it is very interesting the identity of the woman victim of violence considered in her role of mother by one side and of daughter on the other side.

The methods

The statistical analysis is based on the joint application of multiple correspondence analysis (MCA) to summarize the indicators characterising the different dimensions to be studied and the cluster analysis (CA) of the factors obtained by the MCA. The aim is to find informative partitions of the universe of interviewed women according to the analysed dimensions (Fraire & Rizzi, 2005). In the first part of the work a causal model will be evaluated relating the various dimensions of the intimate partner violence. Logit models will be used (Agresti, 2002) to describe different dependence levels among the studied dimensions, levels that are hypothesised in the following conceptual models.

The conceptual model

The causal model

In the first causal analysis, the dynamic of violence is summarised by 5 dimensions:

- 1) the type of violence (only threats, only physical, only sexual³, both physical and sexual)
- 2) perceived and objective severity of the last event reported in the interview. From the Istat data: objective severity is described by the short term consequences as type and severity of injuries, days lost at work or in ordinary life due to injuries or health problems related to the suffered violence; while the perceived severity is described by the victim's opinions about the event (if it is a crime, how much severe, if she felt her life in danger)
- 3) the context of the violence (if the author was drunk or doped, used a weapon, who started provoking degeneration in violence, the main actions acted by the woman to defend herself)
- 4) the victim spoke with someone about the violence (relatives, friends, police, lawyers, doctors); went to some shelters or asked for some psychological or psychiatric help with or without medicines
- 5) long term consequences in term of health illnesses (headache, stomach-ache, teeth-ache, heart problems, depression, memory/concentration problems) and difficulties in relationships (if she has relatives or friends she can count on, if she meet friends in her leisure time, go to cinema/theatres, makes sport, makes social-volunteering activities).

The causal model that will be evaluated is based on the following hypothesis:

- 1) The types of violence affect both the objective and perceived severity.

³ When identifying sexual violence, victims of only humiliating or not desired sexual intercourses has been dropped out from the total count of victims.

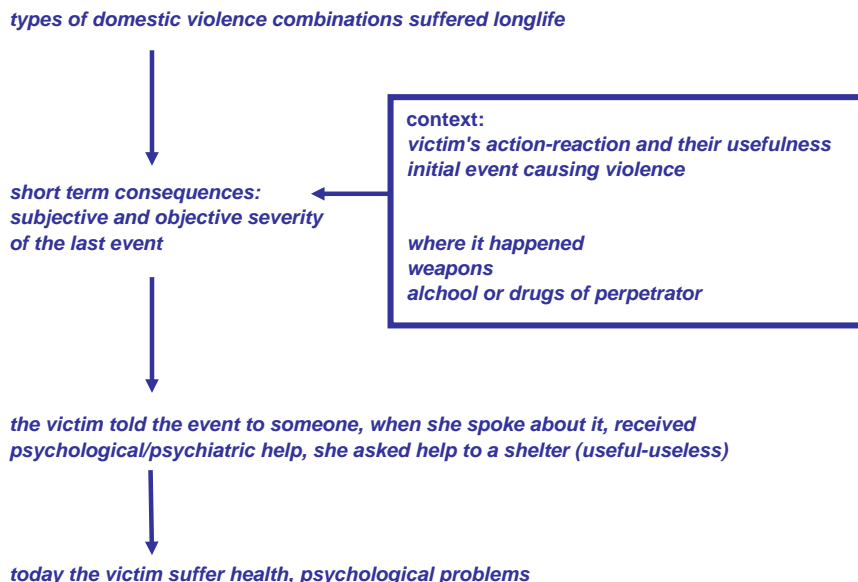
Both the objective and the subjective severity are asked referring to the last event. If the woman has suffered more than one events during her life, both the perceived and objective severity of the last one, not necessarily the most severe, could be affected by the whole experience of violence, especially if more severe than the last asked event (Musumeci et al., 2012). So the whole intimate partner violence types suffered in the relationship are considered, not only the last event ones reported in the deepening section.

The context⁴ of the last violence is hypothesised as affecting the severity, at least the objective one.

2) It is assumed that the severity of the event has an influence on the post reactions of the woman: if she spoke about it with someone, if she needed a psychological/psychiatric help with drugs or not, if she asked help to a shelter. The more the event was objectively severe, the more it is desirable she asked help to professional figures as doctors or lawyers, and she found help from closer friends and relatives. In case of severe injuries it is more likely that the victim received a specialised help as she could have needed medicines and medical care. Yet, the relation between severity and reaction of the victim is not always so linear. In some cases the subjective perception of severity can be the most important stimulus to look for a help.

3) If the woman succeeded in asking and obtaining help, long term consequences of violence (psychological-physical problems, depressions) (Woods et al., 2008) could be less frequent and severe, and the woman social life could be more satisfying and dynamic (Musumeci et al., 2012).

The following directed graph summarises the above hypothesis:



⁴ If the author was doped or drunk could have increased the risk and severity of the violence, provoking more injuries, so as eventual defending actions by the woman. The effectiveness of such actions or their possible exasperating effect on the partner could affect both how the victim perceive the event and the consequent injuries (respectively subjective and objective severity).

The “escaping from violence” model

The focus on the victims of repeated violence, that is involved in the *cycle of violence*, will be investigated in descriptive terms by MCA and CA applied to the MCA dimensions.

Three dimensions have been chosen to depict the history of violence: the gravity and its consequences in term of physical or psychological problems (Romiti et al., 2008; De Marchi et al., 2005; Woods et al., 2008) and on the relationship with own sons (Romito 2011; Traverso, 2013); the ability to ask for a help or to speak about the violence with someone; behaviours to leave the violent partner (Romito 2011, p.10). Each of these dimensions has been summarised by an MCA.

The reciprocal association among the underlined dimensions of the cycle of violence, and mainly their affecting the ability of the victim to escape or not from violence, will be explored applying a CA to the above dimension and the information about the ability of the woman to escape from violence (if she has definitely left the partner or not). Such exploring analysis is aimed at getting a preliminary indications about the inner structure of violence, to be confirmed in further analysis, especially when the new population data about violence in Italy will be available.

Results

Overall causal analysis of consequences of violence

Severity analysis: how the types of violence affect severity

The objective and subjective severity have been summarised each by one factor from the corresponding MCA. The two dimensions (objective and subjective severity) have been then analysed by a CA, classifying the objective severity in three groups of increasing gravity, and the subjective one in four groups of increasing perceived severity.

As regards objective severity:

1. the first group represents less severe situations. It is characterised by the highest percentage of victims of only threats (28% along their life) and by the fewest of women that suffered both sexual and physical violence. Very few of them had injuries in the most recent event, with no need for medical care, lost working or ordinary life days due to illness by violence; most of victims perceive the event as not so severe.

2. The second group represents a situation of medium objective severity. 92% of victims have suffered only physical violence with or without threats in the last episode, and more than 40% suffered both physical and sexual long-life violence. The last episode is characterised by some elements of objective gravity (95% of victims had injuries in the last event, 30% internal injuries; half of victims required medical care and lost day of ordinary life for health problems, 22% lost some day at work for the same reason), but victims seem not fully aware

of it: despite 96% consider the episode grave and 55% thought their life was in danger, only 61% consider it a crime.

3. The third group collect more grave situations, not enough perceived as such. 91% of victims in the group have suffered physical violence in the last episode; the percentage of victims of both physical and sexual violence during their life is the highest. All the victims have got injuries that for 98% have required medical care. In 30% of cases there were internal injuries, in 93% of cases fractures. 83% of victims had to recover due to injuries losing daily activities (48% lose some day at work). In spite of 99% of victims considering grave the event and 82% of them perceiving their own life in danger, only 57% consider the last episode as a crime. Maybe the group represent women resigned to their domestic situation.

Considering the subjective or perceived gravity:

1. the first group describes situations perceived as less serious. In fact victims had no injuries, 35% have suffered only threats long-life and 52% physical violence.

2. The second group too represents less severe situations perceived as grave, but not as a crime or a threat for the victim's life. 30% of victims have suffered only threats, 53% only physical violence. 20% suffered injuries, only 2% required medical care (mainly internal injuries 1,5% or fractures 1%). Only 3% of victims lost daily activities and 4% work days due to injuries.

3. The third group represents victims who consider serious the suffered event (99%), who feared for their lives (57%) and partly consider it a crime (44%). The percentage of only threats victims is high when compared with the other groups (about 16% both long-life and in the last episode of violence), but also the percentage of victims of both physical and sexual violence during then whole life is high (21%). In spite of having suffered only threats in the last episode it is conceivable that when evaluating the last event, victims be influenced by their past experience of violence, charging the last event with a compounded gravity summarising in someway the whole violence experienced at home during their life. 33% reported injuries (8% requiring medical care). Less than 10% have lost days of ordinary life or work due to illnesses related to the violence.

4. The last group represents women considering very severe what they have suffered, as they feared for their life, and consider the episode be a crime. Indeed their life experience is quite severe: 77% of victims have suffered physical violence in the last episode, and more than 44% suffered both physical and sexual violence along their life. 58% had injuries, 27% requiring medical care (12% had internal injuries and 9% fractures). The group has the highest percentage of victims that had to lose daily activities or working days due to illnesses by violence: 23% e 14% respectively. Women belonging to the group seem to be the most aware of what they have suffered.

From the above analysis the objective seriousness of the last episode seems to be more related to the intrinsic characteristics of it, while the subjective or perceived

gravity seems to be more affected by what the victim has suffered in the whole history of the relationship with the partner. That is why the two dimensions were studied separately. A logistic regression model applied to the two dimensions considering alternatively one as the response and the other as the explicative variable, confirm that they are two independent dimensions describing two complementary aspects of intimate partner violence gravity.

The first working hypothesis is that the types of violence (only threats, only physical, only sexual, both physical and sexual violence) affect both objective and subjective severity.

Logit models considering the two dimensions of severity as response and the types of violence (in the last episode and during the whole relationship) as the explicative variable, show that the types of violence of the most recent episode does not affect the objective gravity, while the types of violence the woman suffered during the whole life by the partner, clearly affect the subjective or perceived gravity, as it was underlined above.

More in dept: being victim of only threats increases the probability to belong to lower perceived severity clusters. Being victim of only physical violence or of both physical and sexual violence increases the probability to belong to clusters characterised by perceiving gravity as higher.

The context affects gravity

The context or dynamic of the last event is summarised by MCA by two dimensions: the first one describes on positive values more serious situations where a weapon was used, the police has been called (negative values regards non responses and cases of only threats in the last episode); the second dimension distinguishes more severe situations with the use of weapons, the partner was doped or drunk, the victim has called the police or asked for someone help (positive values), from less severe ones (negative values) characterised by no weapons where she has provoked the episode of violence in some way. Intermediate values regard woman reaction less involving the partner, as trying to run away, or on the contrary involving him entirely, trying to mediate, reasoning with him, holding him.

The CA of the two dimensions provided 4 groups differing each other according to the dynamic of the last event. When discussing these groups only the last event types of violence will be considered.

The first two groups are similar as regards the type of violence: more than 75% were victim of physical violence, about 13% of only threats. In both groups the partner was the starter of the violent event (about 75% of cases) and he was no doped nor drunk, violence was perpetrated mainly in the victim home. The main difference between the two groups is that in the first one few victims made something to react to the violence: mainly tried to run away (14%), at a lesser extent victims tried to make him reasoning, begging or supporting him, holding him. The victims' defending actions were mainly useless, maybe the event was not so severe.

In the second group the victims' actions express a more conflicting and aggressive situation, and they did not ask for help to others: they defended themselves, attacked

him unarmed (33%), tried to reason with him also begging him (41%). In the 74% of cases women declared their actions were useful to limit damages.

The third group represents more severe situations characterised mainly by only physical violence (85%), started mainly by the partner (88%) who was drunk or doped in 40% of cases and in 49% of cases had a weapon threatening the victim. Violence occurred at victim home in 54% of cases, (27% outdoor). Victims mainly tried to run away (51%), or to ask for some help (37% to others, 20% called the police), at a lesser extent they have tried to make him reasoning, begging or holding him, they have cried due to fear or pain (about 25%), few of the victims tried to attack him with a weapon (12%). In 68% of cases such actions were useful. The context and dynamic typical of this group is more grave and dangerous, and the main actions by the victims were devoted to find a help outside the family.

A residual group with very few cases represents more severe situations where he had a weapon and he started the violence, mainly physical violence.

From the above it emerges that when the event took place at the victim home she tried to reason with the perpetrator to make him stop, or she tried to run away, while if the event took place outdoor it was easier for the victim to ask for a help.

The analysis of the influence of the context and dynamic of the last event on the gravity of it⁵, controlling for the type of violence suffered during the life, shows that the first group (women only tried to run away), is related to less severe situation both objectively and subjectively. Belonging to clusters characterised by the fact he was drunk or doped and had a weapon, and the victim asked for a help outside the family, characterises more severe situations both objectively and perceived.

Gravity affects call and acceptance of help in the short time

Short term actions of the victims were the following: if she went to a shelter to get a help and if it was useful, if she needed psychological/psychiatric help, if she has spoken to someone about the violence after few time from it.

To obtain a synthetic indicator of the victim disclosure, a joint MCA and CA has been applied, identifying 4 groups differing for whom victims spoke to about violence and after how much time from the event.

The first two groups are similar about the type of violence suffered by the victims: about 75% suffered physical violence, more than 12% only threats, about 10% both physical and sexual violence.

The first group represents victims that have spoken to none about the suffered violence and did not report it to the police: most of them have spoken for the first time with the interviewer.

The second group represents victims that spoke only with relatives or friends (more than 50%), in 75% of cases soon after or after few days from the violent episode. Only 6% reported it to the police.

The third group victims spoke about the event to relatives (80%) or friends (64%) but also with colleagues (21%), medics (35%), most of them with lawyer or policemen (61%), and have spoken soon after or after few days (81%). 49% of cases reported the

⁵ Logit model with objective and perceived (subjective) severity as response.

episode to the police. In this group 82% of cases suffered physical violence only, only threats in 13 % of cases. Victims had experienced worst situations than the previous two groups.

The fourth group represents more critical and serious situations, as in 67% of cases victims reported the episode to the police, but also soon after they spoke of the event with first medical aid operators (52%), after few days with lawyers or policemen (81%), 57% with association giving aid to maltreated women, most of them with relatives (95%) or friends (81%), many spoke about the violent episode with a priest (38%).

A logit model has been applied modelling the actions/reactions of the woman as dependent on the two considered dimensions of gravity. Action/reaction of the victims is in term of victims disclosure, but also in term of asking for help to shelters, psychologists, medicinal. Objective gravity coefficient have not statistical significance. Considering the perceived gravity, less severe situations are associated with no need of psychological or medical aids, more satisfied victims if they went to ask help to shelters, but they have spoken less frequently about the last violent episode. More severe situations are instead associated with the need of psychological and/or medical care, with having spoken with first medical aid operators and overall with policemen or lawyers. When the aid of shelter was asked, victims were not much satisfied.

If the victim received help, positively affect long term consequences

Long term consequences are summarised by current presence of physical illnesses of various type, and by the woman relational skills as described by herself in term of currently meeting friends, making social and cultural activities (cinema, theatres, museum, dancing), if she makes sport, if she is involved in volunteering activities.

As long term consequences are described by a variety of different indicators, the same strategies as in the previous analysis has been applied: MCA to the above dimensions, followed by a CA to identify profiles of victims by different long term responses to violence. From the MCA it was considered the second dimension (the first one summarised mainly non responses), and it has been clustered in 6 groups.

The first one manifests the major inconveniences in terms of both social life and debilitating physical ailments. Friends are met sometimes or never by victims (49%), victims go never to cinema or theatre, do not make sport, nor volunteering or other social activities. 86% of cases have friends or relatives they can count on (the lowest percentage among the 6 groups). Physical illnesses are important: at least 90% of victims often suffer of head ache, stomach-ache, hearth problems, feel weak, sleepless, depress, have memory or concentrating problems and other type of illnesses.

The second group is similar to the first one as regards social life and activities. Similarly victims suffer the same physical illnesses of the first group, but at a lesser extent (about 70% of victims).

The third group still report few social life and a limited and limiting level of physical and psychological well-being. Only 15% of women often meet friends, do not live social activities (56% never go to the cinema or theatre, 75% never make sport), 94% of them have friends or relatives they can count on. 72% of cases often suffer headache, 50% stomach-ache, 63% hearth problems, weakness in 83% of cases, 62%

sleeplessness, depression 54% of cases, memory problems in 62% of cases and other illnesses in 66% of cases.

The fourth group is again characterised by few social activities (71% of victims never or hardly ever meet friends), go to cinema/theatres, make sport or volunteering or other activities, but they have relatives or friends they can count on (98%). More than 50% suffer headaches or weakness (71%). The overall situation in this group seems better than the previous ones.

The fifth group (CL6) has a more dynamic social life, meet often friends in 47% of cases, go to the cinema/theatre in 20% of cases, makes sport (34%), volunteering (13%), can count on relatives and friends (99%), reports less health problems.

The sixth group represents the better situations: 79% of victims meet friends regularly, go often to cinema/theatre (50% of cases), 63% make often sport, 24% make often volunteering, most of them have friends and relatives they can count on (99%). Few illnesses reported.

The causal analysis by logit modelling the influence of the ability of the woman to ask for a help on the long term consequences of violence, shows that victims belonging to groups depicting worst situations have had more problems in asking help, and if they went to shelters they were few satisfied. Victims not needing psychological or medical aids, today feel and live better, so as victims that have spoken to friends, lawyers, policemen and reported the violence to the police.

The history of violence

An history of violence is characterised by the fact the woman suffers repeated violence over time by her partner (cycle of violence). The cycle of violence victims represent a subgroups of the victims of the previous analysis.

Three dimensions have been chosen to depict the history of violence: the gravity and its consequences in term of physical or psychological problems and on the relationship with own sons (Musumeci et al, 2012; Traverso, 2013); the ability to ask for a help or to speak about the violence with someone (Musumeci et al., 2012; Arcidiacono et al., 2013); behaviours to leave the violent partner (Musumeci et al., 2012; Arcidiacono et al., 2013). Each of these dimensions has been summarised by an MCA whose outcomes have been further analysed by a CA, providing 5 groups particularly interesting.

1. From the MCA applied on the gravity dimension two factors have been extracted. The first one contrasts less serious situations (threats and mild physical violence, no injuries, violence perceived as “only something happened”), to more serious one (violent episodes causing injuries, often needing medical care, as internal injuries, cuts, bleedings, abortions and head injuries, requiring also psychological aids; days for daily activities and/or working days lost due to injuries from violence) through a continuum of increasing gravity. The second dimension indicates the presence or absence of children when violence happened, contrasting situations with no children to situations in which children witnessed violence, violence happened when the woman was pregnant, or also the children were victims themselves. The worst violence characterised by the most of gravity in terms of injuries is associated to the fact children are victims themselves.

2. MCA applied to variables describing the victims' ability to spoke about the suffered violence, shows two different factors: the first one indicates the relation between the victim and institutions (police, Judicial Authorities) the second one contrasts victims that are able to speak about the suffered violence and victims that choose the silence. In more details: the first factor contrasts victims not reporting and corresponding reasons why not reporting (as for example lack of trust in the police, the fear of not being believed, thinking to be able to solve by own self, not reporting due to fear for the safety of the children and their well-being) to victims reporting violence to the police and the Judicial Authorities, with corresponding satisfaction or lack of it. Reporting victims felt satisfied when the police actions provided the arrest of the author or protection for the victim, or there has been a trial provoking conviction of the violence author; they felt unsatisfied when the police made nothing or when, if there has been a trial, it is still in being. It is very important supporting the victim who decides to report authorities about the offender (Cucino, 2012).

The second factor contrasts silent victims with victims that have spoken with institutions as medics, shelters, lawyers, or also relatives.

3. The third and final MCA regards variables describing attempts to get out of violence. The first factor contrasts victims that did not leave the partner, even for a very short period, and victims that did not live with him (fiancé), with victims that were separated. The second factor contrasts separated victims that did not came back to live with the violent partner with victims that instead came back to live with him. It is interesting to note that women that left the partner and went to live in their original family usually came back to live with the violent partner, for the well-being of their children or because they loved him and they hoped he would have changed or due to economical reasons. On the contrary women who left the partner and went to live at friends or other relatives houses or made him go away from their home, did not come back to live with him. Due to information redundancy only the second factor was retained for the further cluster analysis.

The CA has been applied to the factors extracted in the above MCAs, corresponding to the three conceptual dimension of the cycle of violence, to investigate their reciprocal association. The CA has provided 5 groups, differing by the strategies victims have developed to cope with violence. Different strategies are to be read according to the gravity of the violence, to the violence consequences for the victim herself and her children, to the involvement of institutions.

Table 1. Clusters

1° group - 73,5%	Less severe violence by the actual or ex partner , psychological violence, threats, physical violence usually not really serious, sexual violence. The violence is endured, victims speak few about it, violence events started recently, most of them with no injuries, victims consider the last episode as something wrong or only something happened. Most of them has no children; when
Starting violence: the silence	

	they have, most of children did not witness violence and were not victims themselves. Lost of self esteem, desperation and anxiety are the most common consequences, jointly with sleeplessness and lack of appetite. These victims have often been battered by their parents and were witnesses of violence by their father against their mother. Few of them have tried to go away from the house where they live with the violent partner, but most of those who have tried, have come back. Mainly married or single victims.
2° group - 13,7% Young women victims by their ex-partner	More severe violence by the ex fiancé , physical and psychological violence. More frequently women from the North-West, single, younger. In some cases the author of violence was doped or drunk during the last violent episode, more than half of victims have felt their life in danger. A similar percentage consider the suffered violence as a crime, and the last episode is considered very severe. Violence is more serious with respect to the previous group but less severe than the following one. Part of victims reports the violence to the police but without signing the report, they speak to many people about violence, finally they have left the partner but as a consequence they have been victims of stalking. In their original family victims have been battered by their mother; the ex-partner has been battered too in his family, and he has been witness of violence by his father against his mother, as reported by the interviewed woman.
3° group - 4,3% In spite of gravity, only few wasteful attempts	Physical violence very serious by ex-husband or ex-fiancé partly by the actual husband , victims reported the event to the police but did not signed the report, in some cases there is an ongoing trial, or it was finished with no conviction. Victims have tried to go away from home, but usually they have come back. They were hosted in their family of origin. Some violence is older, others more recent, most of victims feared for their own life, in many cases weapons were involved in the violence, sometimes the author was doped or drunk. Injuries have been very serious, some victims were pregnant when there was violence, half of the cases lost working days or ordinary life days due to the violence and needed medical care to recover health. Psychological consequences are very serious, also regarding children management, and in terms of self-harm and even of desiring to commit suicide. Their children often witnessed violence and sometimes were battered themselves. The family of origin was often violent too.
4° group - 7,2% Aware Women	Psychological and physical violence very serious by ex-partner, followed by stalking . Notwithstanding violence be less serious than the previous group, victims feel higher gravity, and

	more frequently consider the last violent episode as a crime. They have spoken with lawyers, medics, shelter operators. They have reported the violence, the author was charged, in half of the cases he was convicted. Many victims are not satisfied about how their case was managed yet. Victims have often been victims also in their family of origin when they were children. Some of them have gone away from home and did not come back. Many live in the North-West.
5° group - 1,2% Older women: effective steps but in loneliness	Women with personal strategies to cope with violence, the older, now widows; sexual or physical violence, threats, psychological violence. They feared for their life and their children were involved in the violence. Heavy consequences. Victims reported to the police without signing the report, they went away from home without coming back, they were hosted by friends or relatives or the violent partner had to go away from home instead. Victims asked for a help to shelters. When they were child, they witnessed the violence by their father against their mother.

Women considered in the above analysis are victims of repeated violence from their partners (cycle of violence).

Victims of abuses more or less serious make different choices to cope with violence: some of them chooses the institutional alternative to report the violence to the police; others leave the partner; others do not find a solution. Different patterns, more or less advantageous and complex, always painful.

The first group in the analysis, that is also the most numerous, is characterised by patience and tolerance. It suggests a starting point characteristic of victims enduring less serious violence, that begin to react with less effective strategies. Such victims have also received messages to be tolerant by their family of origin: they have seen their mother battered and they have been battered too by both their father and mother.

Violence perpetuation

This is a useful interpretation (Baldry & Ferraro, 2008; Coumarelos & Allen, 1998; Cumings, Pepler & Moore, 1999; Dauvergne & Johnson, 2000) identifying in the intergenerational transmission of violence a basic problem. Violence suffered or witnessed by a man when he was a child should increase the risk that he could repeat the violent behaviour as a partner, at the same time violence suffered or witnessed by a woman when she was a child, should increase her risk to be victim of intimate partner violence by the partner (Corazziari & Barletta, 2012).

Data show both the passive model for the woman victim “I witness violence between my parents” and the active model “Also I am battered by my parents”, in some cases

mainly by the father but often mainly by the mother. Such models are interrelated and reinforced with and by the role the woman will embody as a mother.

In the 2° and 4° group victims have been battered mainly by their mother when they were children; such victims have found more clear and coherent strategies to get out of violence, indeed they did not choose tolerance.

The passive model starting from the witnessed violence (typical of groups 1, 3 and 5) makes women more enmeshed, submission to the partner is higher; in these cases the involvement of children is strategic in driving women reactions. For example in the first group women endure repeated abuses but violence is less severe and children are mainly excluded by it, on the contrary women belonging to the fifth group find personal strategies or strategies with some external help to get out of a strongly violent situation in which children are heavily involved (this group collect very few cases so it could be affected by strong statistical error).

Victims of the third group live a very violent situation in the family, but they are enmeshed in it, they try to get out of it, also children are involved as witness and often as victims themselves, but again for the well-being of children they decide to remain with the violent partner, playing again their mother behaviours of tolerance and submission. Their strategy backfires on themselves: if they take refuge in the family of origin where mother had been not able to stop the cycle of violence, they accept to start again to live with their violent husband, as they love him, they think he will change, and they think that coming back to him is the right thing to do for their children well-being.

Discussion

In both the above analysis (causal model and cycle of violence) intimate partner violence has been analysed in its various dimensions: gravity of the event, types of violence, dynamic of the event, actions/reactions of the victim, long term consequences.

In the first analysis all the victims of at least one type of intimate partner violence have been considered. In such analysis a causal model relating the different dimensions of violence has been evaluated by separated logit models. When an ordered temporal relation is clearly defined between two dimensions, the dependency is easily modelled considering the prior (over time) variable as the explicative and the succeeding one as the dependent one. That is the case for having spoken of the violent episode with someone, or aids needed to cope with violence, where these dimensions are later in time with respect to the gravity of the event. The same for the long term consequences with respect to the disclosure dimension and ask for help. In some cases time ordering is not available from the information, as in the case for example of types of violence, gravity and the context. In these cases the causal direction has been arbitrarily chosen considering gravity as dependent by the violence types and the context.

The second type of analysis is focused on a subgroup of the first, characterised by the repeating of violence over time by the same partner. This is the history of violence, with different characteristics, dynamics and consequences in the life of the woman with respect to isolated episodes. In spite of the analysed dimensions can look the same, the focus in the second analysis is on the possibility and ability of the victim to get out of violence. The analysis is descriptive, based on three MCAs followed by an overall CA to cluster units according to the extracted factors summarising the considered

dimensions of repeated violence. The analysis also involves information about violence witnessed or suffered as a child by the woman. This last information has been discussed as a risk factor of intimate partner violence (Baldry & Ferraro, 2008; Coumarelos & Allen, 1998; Cumings et al., 1999; Dauvergne & Johnson, 2000; Corazziari & Barletta, 2012).

From the above analysis the following considerations can be made.

Violence attracts violence

The possible violent context of the family of origin is associated with the level of violence that characterises the current history of abuses: women that have witnessed or directly suffered higher level of violence in their family of origin, face more serious and violent situation in the current family by their partner.

Studies on victims asking helps to shelters show that the perpetrator of violence increases his aggressiveness as the victim appears more submitted to him (Gainotti & Pallini, 2008). Also from the Istat outcomes it is evident that reaction of the victims against the violence are useful, with the only exception of when the victim try to defend herself without weapons and when she tries to get help by external people. If the victim defends herself with weapons is surely more effective, so as calling the police or trying to go away (ISTAT, 2008).

Being socialized to consider violence as normal

In both the main analysis in the paper, less serious violence are considered as normal or at most something wrong, but also the most serious ones are sometimes considered as something wrong but not a crime. In the second analysis (history of violence) it is clear that victims considering the suffered serious violence as something wrong but not a crime have more difficulties to get out of it. In fact if victims consider violent relationship as normal, where and how can they found the ability and strength to react against it? A right perception of the violence is very important and is to be taught. Condemning violence is part of a good process of socialization. Dangerousness of unclear and ambiguous relationships where violence is considered as something happened, is an outcome also of the study about victims of rape, based on the same ISTAT survey data of 2006 (Sabbadini & Muratore, 2007). Other studies underline the problematic related to a wrong socialization. People have to be educated to recognize violence as such (Chasteen, 2001; Weiss, 2003). For many years in the past, before feminism, the public and juridical attention was mainly or only on the rapist, victims were in the shadow, so as many consequences of violence, both social and individual.

The current situation is partially different, but violence interpretation are not the same among women, as can be seen from many studies: education, variety of cultural skills among women, belonging to different cohorts provide different interpretations of the reality, some of which aiding in getting out of violence, in making women more aware of themselves with higher self-esteem, while others hiding the problems that remains as such, unsolved. According to the authors opinion, educating to recognize and condemn violence should be the work that families, schools, peer group, media and most of all

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the political, should care most.

Tolerant messages about violence should be modified properly: for example the opinion that touching a young woman or a girl, with a sexual attitude when she does not want, be a normal experience in the growing up of younger... Or the opinion that the abuse of peer against the most weak be normal and results in an experience that make the weaker growing up better... All of those kinds of opinion should be revised.

All of the above misleading opinions with which people could be educated are correlated to the victim problem of recognizing rape or violence by their partner. The above are incoherent messages. In fact how much underestimating the meaning and consequences of some behaviors undermines a right relationships between genders and cause tolerance versus violent, or that could become violent, behaviors? The above are messages assuming the normality of the men sexual needs that have to be satisfied (sexual drive to be met regardless of with whom, how and of the will of the other involved person) and on the contrary the same messages assume that women willing is to be denied. A consequent message is that the woman is by definition a weak actor in the life, a sort of object for the other's wishes that likes to be conquered. Such message is easily reinforced in the intergenerational transmission of violence. Another consequence is also the scarcity of the female identity, so reinforcing the male world.

Dangerousness of the above messages is easily understood considering how much such opinions are rooted in the Italian society and families, in spite of the contact with the female emancipation. For example such roots are easily individuated in all of those cases of rapes where women still continue the relationship with the abuser fiancé (Sabbadini & Muratore, 2007).

Contacting Institutions helps

In both the above analysis it is clear the strategic importance to involve the institutions to be able to get out of violence. Not only the police or the judiciary, but also the services, both social and medical. We could say that it could be important for the victim to be able to see at the suffered violence with somebody else eyes, to be able to recognise it as such. Naturally the first steps to get out of solitude are confidences, but it is largely more effective to ask help to the authorities or to lawyers.

But in many situations victims remain alone, too alone, in a way that after having reported the suffered violence to the police they still remain or come back within the violent situation, with their partner. In fact they have no economical independence, they have no work, they have no places where to go to live. Only a well-conceived and joint cooperation among different services can be really effective and useful to really help the maltreated women (Arcidiacono & Di Napoli, 2013).

Conclusions

To properly cope with violence against women, to deeply understand its characteristics, its wideness, gravity, consequences on victims and their abilities to get out of it, in the present work we started from the very multiplicity of the types of perpetrated violence against women and from the different perceptions women have of it. Indeed each woman is a universe by herself, responding in personal ways, so it is not always possible to code such differing behaviours. Notwithstanding the statistical point

of view preferred in the present work focusing on the constant and common part of the phenomena, it is important to be aware of the intrinsic sensitiveness and subjectivity of the topic we are studying, and of its difficult definition.

The use of population data (ISTAT, 2008) allows some generalisation of the above results that can be appreciated also as they confirm many of known in the literature considerations about the structure, consequences and costs of intimate partner violence.

A complexity of situations emerges, from objective to subjective consequences, differing strategies undertaken to cope with violence and get out of it. From data only 33% of victims spoke about violence to someone. To speak about violence is certainly an important help to cope with violence or get out of its cycle, especially if the interlocutors are social services or the police or some professionals outside the family (Arcidiacono & Di Napoli, 2013). Gravity of the event seems to be the main spring to get out of silence and then of violence. Consequences affecting the woman quality of life are heavily serious (Romito et al., 2008; De Marchi et al., 2005): victims not speaking with someone and not acting effective strategies lose health but also self esteem, relational capabilities, get stressed, anxious, panic. Victims not speaking have to cope with the children suffering, and are not able to stop the intergenerational transmission of violence (Cummings et al., 1999; Dauvergne et al., 2000; Traverso, 2013).

An awareness campaign can help both in increasing victims awareness of violence, and social sensitiveness to the problem, in the hope to widen the capacity to shelter victims both in the family than outside, receiving their reporting of it (Campaign “Recognise violence”, 2006)⁶. Training of all the operators of the social and medical services, of the police, of judges and lawyers, and the coordinated work of all the actors in the field of helping maltreated women is essential to receive them, to make violence cases known and to help in solving them. Policy and legislative initiatives would be very useful to help the victims of violence, a *gender mainstreaming* and prevention policy by eliminating gender discrimination in various fields it is perpetrated (family, school, work, society) would be very useful, allowing to work in order to eliminate violence against women (Arcidiacono & Di Napoli, 2013).

References

- Agresti, Alan (2002). *Categorical Data Analysis*. New York: Wiley series in Probability and Statistics.
- Arcidiacono, Caterina & Di Napoli, Immacolata (2013). *Sono caduta dalle scale. I luoghi e gli attori della violenza di genere*. Milano: Franco Angeli.
- Baldry, C. Anna & Ferraro, Eugenio (2008). *Uomini che uccidono. Storie, moventi e investigazioni*. Torino: Centro Scientifico Editore.
- Bramante, Alessandra, Filocamo, Giovanni & Mencacci, Claudio (2010). *Donne e violenza domestica: diamo voce al silenzio. Raccomandazioni sulla violenza sulle*

⁶ For more information see: <http://www.sicurezzadonna.it/>.

donne (Intimate partner Violence) per operatori sanitari. Milano: O.N.D.A Osservatorio Nazionale sulla salute della Donna.

Campaign "Recognise violence" (2006). *Violence has many faces: Learn how to recognize them* (<http://www.riconoscilaviolenza.it/?op=amici/>).

Chasteen, L. Amy (2001). Constructing Rape: feminism, change and women's everyday understanding of sexual assault. *Sociological Spectrum*, 21 (2), 101-139.

Clark, Richard E. (2009) Resistance to Change: Unconscious Knowledge and the Challenge of Unlearning. In *Fostering change in Institutions, Environments and People*, cap. 5). Berliner D. C. & Kupermintz H. (Eds.) Taylor & Francis.

Corazziari, Isabella & Barletta, Roberta (2012). The intergenerational transmission of intimate partner violence: An analysis of data from the Italian "Women Safety Survey", *Interdisciplinary Journal of Family Studies*, XVII (1), 113-136.

Coumarelos, Christine & Allen, Jaqui (1998). *Predicting Violence Against Women: The 1996 women's safety survey*. Sidney: NSW Bureau of Crime Statistics and Research.

Cucino, Francesca (2012). Ruolo del difensore della persona offesa nei procedimenti per violenza domestica

(http://lexop.org/redazione/contenuti/documenti/doc_769/MICUCINO27022012e05032012.pdf).

Cummings, G. Joanne., Pepler, J. Debra & Moore, E. Timothy (1999). Behavior Problems in Children Exposed to Wife Abuse: Gender Differences. *Journal of Family Violence*, 14 (2), 133-156.

Dauvergne, Mia & Johnson, Holly (2000). Children witnessing family violence. *Juristat Canadian Centre for Justice Statistics, Statistics Canada (Catalogue 85-002-XPE)*, 21 (6), 1-13.

De Marchi, Margherita., Romito, Patrizia., Ciociano Bottaretto, Rosa., Tavi Michela & Molzan, Turan Janet (2005). Violenza domestica e salute mentale delle donne. Una ricerca sulle pazienti di Medicina Generale. *Società Italiana di Medicina Generale*, 4, 24-7.

Fraire, Mary & Rizzi, Alfredo (2005). Metodi esplorativi e inferenziali. Roma: Carocci.

Gainotti, M. Amann & Pallini, Susanna (2008). *La violenza domestica. Testimonianze, interventi e riflessioni*. Milano: Magi Edizioni Scientifiche.

ISTAT (2008). *La violenza contro le donne. Indagine multiscopo sulle famiglie "Sicurezza delle donne" anno 2006*. Roma: ISTAT.

Musumeci G., Signorelli M. S., Arcidiacono E. & Aguglia, Eugenio (2012). La violenza domestica: un problema di salute pubblica. *Psichiatria, Psicologia e Diritto*, 6, 45-52.

Ogburn, William F. (1966). *Social change: With respect to cultural and original nature*. Oxford England: Delta Books, 1966.

Payne Darrell, Wermeling Linda (2009). Domestic Violence and the Female Victim: The Real Reason Women Stay! *journal of multicultural gender and minority studies* Volume 3, Issue 1.

Romito, Patrizia (2011). *La violenza di genere su donne e minori. Un'introduzione*. Milano: Franco Angeli.

Romito, Patrizia., De Marchi, Margherita & Gerin, Daniela (2008). *Le conseguenze della violenza sulla salute delle donne*. Società Italiana di Medicina Generale, 3, 46-9.

Sabbadini, L. Laura & Muratore, M. Giuseppina (2007). La violenza contro le donne. In Ministero dell'Interno (Eds.), *La criminalità in Italia, Rapporto del Ministero dell'Interno* (pp. 132-158). Roma: Ministero dell'Interno.

Sartin, R. M, Hansen, D. J. and Huss, M. T. (2006). Domestic violence treatment response and recidivism: A review and implications for the study of family violence. *Aggression*

Recidivism. *Violent Behavior*, 11(5), 425-440.

Traverso, Gabriele (2013). Violenza assistita. Report for the formation Bar Association, April 3, 2013, Turin, Italy.

(<http://www.ordineavvocatorino.it/sites/default/files/documents/Formazione/VIOLENZA%20ASSISTITA%20CORSO%20TORINO%201.pdf/>)

UNICEF (2000). La violenza domestica contro le donne e le bambine. *Innocenti Digest*, 6, 1-30.

Weiss, Karen (2003). (Re) Defining Sexual Victimization. An exploratory analysis of Non – classifying Incidents reported to the National Crime Victimization Survey. Paper presented at the annual meeting of the American Sociological Association, Hilton San Francisco & Renaissance Parc 55 Hotel, San Francisco, CA.

Woodard, James W. (1934). "Critical Notes on the Culture Lag Concept". *Social Forces* 12.3 (Mar. 1934): 388-398.

Woods, Stephanie, Hall, J. Rosalie, Campbell, C. Jacquelyn & Angott, M. Danielle (2008). Physical health and Posttraumatic Stress Disorder symptoms in women experiencing Intimate Partner Violence. *Journal of Midwifery & Women Health*, 53 (6), 538-546.

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