

HEBREW UNION COLLEGE - JEWISH INSTITUTE OF RELIGION
California School

in cooperation with

UNIVERSITY OF SOUTHERN CALIFORNIA
School of Social Work

ALL IN THE FAMILY:
A STUDY OF INTRA-FAMILIAL
VIOLENCE IN THE LOS ANGELES
JEWISH COMMUNITY

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fulfillment of the requirements
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DEDICATION

This study is dedicated to all those who have or who will be touched by the problem of family violence.

INTRODUCTION

Family violence is a major social problem in America today. Studies have shown that intra-familial violence exists across all socio-economic, racial and ethnic boundaries. All family members may be involved in the violent behavior patterns.

Each year in the United States, 15,000 children under the age of fifteen die from non-accidental injuries and 19,000,000 are hurt severely enough to require medical care, or to be restricted from their usual activities. In 1975, over 72,000 cases of battered children were reported in Los Angeles, Riverside, and Orange Counties.

In 1969, the FBI reported that one quarter of all murders occurred within the family, and one half of these were spousal killings. Eleven percent of all aggravated assaults are reported to be between husband and wife. According to an Israeli parliamentary committee, violence in the family affects from 5 to 10 percent of the population of women and their children in Israel. Although there is generally a low rate of reporting of spousal violence, a recent study has shown that the actual rate of violence may be between 50 and 60 percent in the United States.

Child abuse and spousal abuse cannot be seen as separate issues, however. Each part of the family system is influenced and in turn influences the other parts. Just as parental conflict may be acted out in the physical abuse of the child, so the marital couple's violence may well be perpetuated over generations. Though the family is assigned the role of perpetuator and inculcator of social mores and values, what exists is often in marked contrast to the idealized picture of the family as "a center of solidarity and love."

"The semi-sacred nature of the family has prevented an objective analysis of the exact nature of intra-familial violence. To begin with, there is the tendency... to deny or avoid consideration of widespread occurrence of violence between family members in what are considered to be "normal facilities."

This is the myth of family consensus and harmony,¹ a myth which is probably the one in which American society most firmly believes, and which gives rise to the assumption that only abnormal families engage in violence, leading in turn to the prevalent pattern of considering violent families as outcasts and to strong social sanctions against the admission that violence occurs in "normal" families.

Jews have, in general, strongly subscribed to this myth, particularly in regard to their own community, and may have believed in the myth of the norm of non-violent

families more than other peoples. Prior to our study, research has revealed very little Jewish intra-familial violence. In their 1968 study,² Helfer and Kempe state that only 2 percent of the child abuse cases in New York were Jewish.

Our own interest in this topic was prompted by personal contact with Jewish victims of family violence. Both of us have worked with such clients and have been touched by their suffering and sense of being alone. After seeing numerous incidents of abuse, we began to question our supervisors and other professionals as to their knowledge about the existence of the problem. The responses were mixed. Clinicians acknowledged the problem exists but felt it occurs at a lower than usual rate within the Jewish community, while educators frequently denied its existence altogether. Although Judy Ravitz, a worker at the Los Angeles Rape Crisis Hotline, told us that preliminary investigations she had conducted confirmed the existence of Jewish wife battering, we also heard from professionals that several battered women, on turning to rabbis for help, had encountered denials that their problem could exist.

In the Spring of 1979, we conducted a small pilot study on family violence with a major Jewish Women's organization. Amazingly, more than 12 percent of the

300 respondents know of incidents of child and spousal abuse. With this support for our intuitive belief about the problem's existence, we decided to undertake a more comprehensive study. The result was a more detailed project, to study the existence, incidence, and parameters of physical family violence in the synagogue-affiliated Jewish community of Los Angeles. The study has been limited to the investigation of physical family violence because psychological abuse and cruelty are much more difficult to quantify.

For the purpose of this study, the following conceptual definition of violence was used:

"Intentional use of physical force on another person." This physical force may be used for a variety of purposes, including, 1) causing pain and injury as ends in themselves (what might be called "expressive violence."); 2) the use of pain or injury or physical restraint as punishment, to induce the other person to carry out some act (what might be called "instrumental violence"). In addition to considering whether violence is either instrumental or expressive (or some combination of them), for some purposes it is also important to take into account whether or not the violence under consideration is "legitimate" according to the rules of society in which it takes place (such as spanking a child in most societies or shooting an enemy soldier in time of war) or "illegitimate" (such as spanking a disobedient wife in contemporary society or shooting a soldier of one's own country.)³

It is important to note that this all-encompassing

definition includes both expressive and instrumental violence. These two components were included in the operationalized definition used in this study. This is a modification of the definitions used by Richard Gelles, a well known sociologist who has done extensive research in the field of family violence. Included are:

1. one individual hitting, striking, battering, assaulting, burning, or throwing an object at another;
2. one family member pushing, slapping, punching, kicking, knifing, shooting, or throwing an object at another family member;
3. forced sexual activity; and
4. forced social isolation;

Spanking of a child was not included in the definition of family violence and such cases were not included in the findings.

The following hypotheses were investigated:

1. Violence is not absent in synagogue-affiliated families.
2. Whatever violence occurs, is not exposed to synagogue professionals by the families in which it occurs.
3. Rabbis have some knowledge of the problem of Jewish family violence.

4. Jews do not believe that family violence is a problem in the Jewish community.

Rabbis were included in this study because of their unique role in Jewish life--and their potential for help.

There were three parts to the study: (1) interviews with rabbis, (2) interviews with other Jewish human service professionals, and (3) a survey of 209 Los Angeles synagogue-affiliated Jews.

The chapters that follow explore the problem of physical family violence from two perspectives: generic social work literature, and Jewish legal and literary writings.

FOOTNOTES

1. Susanne Steinmetz, Murray Straus, Violence in the Family, (New York: Harper and Row, Inc., 1974) p. 7.
2. Ray E. Helfer and Henry C. Kempe, The Battered Child, Chicago: University of Chicago Press, 1968) P. 31.
3. Steinmetz and Straus, Violence in the Family, p. 5.

CHILD ABUSE - HISTORICAL, SOCIOLOGICAL, LEGAL
AND TREATMENT PERSPECTIVES

"A six week old infant was admitted to the hospital because of swelling of the right thigh of four days' duration. The mother stated to the examining physician that the child had fallen from its crib and struck its right leg on the floor. X-ray examination revealed complete fracture thru the mid-shaft of the right femur with posterior displacement of the distal fragment. The patient was in Bryant's traction for two weeks and was discharged in good condition after application of a hip specu.

"A few weeks later the child was admitted to another hospital with multiple contusions and abrasions. Investigation by the social service department indicated that the father had thrown the child on the floor, shattering the cast and inflicting serious head trauma resulting in bilateral subdural hematomas. The child was recently seen in the pediatric clinic where multiple signs of intracranial damage were noted. The child is now blind and mentally retarded."¹

Child abuse is a major social issue today. In 1975, as we've said, over 72,000 cases of battered children were reported in Los Angeles, Riverside, and Orange Counties, but many more cases were probably not reported to the authorities due to lack of knowledge by professionals and fear of the law on the part of the parents and the professionals alike. To be able to take the proper steps to help the abused child and the family, people who work with children need to know the characteristics of such a child. The 10 percent mortality rate

for battered children is higher than the mortality rate for all childhood illnesses.²

A battered child may be defined as one who sustains nonaccidental physical injury (or injuries) as a result of acts (or omissions) on the part of his or her parents or guardians. Injuries include physical abuse and corporal punishment, emotional abuse, emotional deprivation, physical neglect, inadequate supervision, and sexual abuse and exploitation.³ This section addresses primarily physical and sexual child abuse.

Historical Facts

Child abuse is not a new phenomenon. It was first recognized by Tardieu in France in the 1860's. He diagnosed abused children as those with repeatedly broken limbs and children who were physically neglected. In the United States, the first child protective services were developed in the 1800's. In 1814, the Orphan Society of Philadelphia was founded to "rescue from ignorance, idleness and vice unprotected and helpless children and to provide for them, that support and instruction which may eventually render them valuable members of the community."⁴

Under the Poor Law which was operating in the early 1800's, troubled children were sent to live in almshouses where they were supported by the general public. In 1821

New York State passed a law authorizing magistrates to send neglected children to almshouses. However, thirty-six years later, in 1857, New York decided that almshouses were not desirable for children. Instead, four types of institutions for children were established: colleges, orphanages, houses of refuge and institutions for the handicapped.

The 1880's were years of a child welfare movement with the first federal intervention in the protection of children. The case of Mary Ellen in 1874 and 1875 led to the establishment of the New York Society for the Prevention of Cruelty to Children (SPCC). This society helped to pass Anti-Cruelty laws to protect children (New York, 1881).

The case of Mary Ellen was the turning point in child protective legislation because of the formation of an agency to deal specifically with abuse and neglect. Mary Ellen, a 12-year-old circus performer, was beaten with rawhide, cut with scissors by her guardian and never shown physical affection or love by her natural mother. At the time this case came to public attention, the only laws that applied to protection of a child were the SPCA (Society for the Prevention of Cruelty to Animals) laws. Prosecuted under these statutes and found guilty of felonious assault, her guardian was sentenced to one year's imprisonment at hard labor. Mary Ellen

was sent to the Sheltering Arms Asylum. The case set a precedent for prosecuting in subsequent child abuse cases.

The SPCC was the first agency founded to deal specifically with child abuse and neglect. Abused and neglected minors were removed from their families and placed in foster care homes. The subsequent New York Anti-Cruelty Act stated that the parents or guardians of a child would be imprisoned in either the state prison or county jail if they deserted a child under the age of six, if they willfully withheld food, clothing, shelter, or medical attendance, or if they endangered the minor's life, health, or morals.

Between the years 1875 and 1920, the "arm of the Law" principle, in which private agencies were given public funds to care for the child, was debated. Prior to this time, child abuse victims had been cared for by private or volunteer agencies. The Juvenile Court system and state agencies to care for children grew out of the debates.

In 1946, Dr. John Caffey presented the first modern diagnosis of child abuse. He noticed certain types of broken limbs in children who had been abused. In 1962, the battered child syndrome was identified by Kempe and his associates.⁵ In 1970, after numerous other researchers had conducted studies on working with abuse

victims and their parents ^{6,7,8} published the only national abuse study and presented a comprehensive definition of physical child abuse.

SOCIOLOGICAL FACTS

Most contemporary societies condone physical punishment of children by people in position of responsibility and authority. Studies show that between 84 and 97 percent of all parents in the United States and England use physical punishment, while in Germany, 60 percent of the parents beat their children.⁹

The writers differentiate, however, between discipline and abuse: the parent who disciplines has the child's welfare and best interests in mind; the abuser is self-indulgent.¹⁰ Parents abuse for social, psychological, and biological causes. It is important to note that, because of ex post facto data collection (as regards, for instance, the child's characteristics), an emphasis on case studies, a lack of control groups, and a lack of an adequate theory of child abuse, the information presented on the characteristics of abusive parents must be questioned as to its overall validity and reliability. Many of the traits of abusive parents can be found among non-abusing ones. A combination of characteristics, however, may be found in an abusing

parent, while a non-abusing parent is more likely to have no more than one or two of the traits.

Characteristics of Families of Abuse

Parents who abuse their children come from all economic levels, all ethnic groups and all religions. Cases from the lower socioeconomic groups tend to be over-reported because people in the higher social strata are likely to use private physicians and counselors who may not report the abuse, while people who use public services are more likely to come to the attention of the police and welfare authorities.

Kempe et al¹¹ (1962) found a high incidence of divorce, separation and unstable marriages, as well as minor criminal offenses in their sample of child abusers.¹² On the other hand, Steele and Pollock (1968) described baby batterers as representing a "random cross-section of the general population."¹³

An abused child tends to be young and is usually, the youngest or only child in the family. The occurrence of child abuse is most likely between the ages of three months to three years. During this period, a child is most vulnerable to abuse, battering, or murder because she or he is most defenseless, most dependent on parents or caretakers, and least capable of meaning-

ful social interaction. In 1964, Scholessner,¹⁴ in a study of eighty-five cases found that 70 percent were under three years of age and 32 percent were under six months. However, Gil (1970)¹⁵ found that over 75 percent of his sample were over two years of age and nearly 50 percent were over six years. Nearly 20 percent were teenagers.

Both boys and girls are abused, but boys seem to be abused more frequently in early childhood, while girls tend to be the victims during the teen years. In a study of a selected sample of abused children known to Chicago hospitals, Kroger found that 57 percent were boys.¹⁶ Gil also found slightly more battered boys than girls; among the children whose injuries were fatal, 53 percent were boys, 39 percent girls. However, when the different age groups were combined, Gil (1970) found that, although boys outnumbered girls in every age group below twelve, they were outnumbered by girls among the teenage victims of child abuse. Gil states:

Girls tend to be viewed as more conforming than boys throughout childhood, and physical force tends to be used less frequently in rearing them. However, during stages of sexual maturation, parental anxieties concerning their daughters' heterosexual relationships lead to increasing restrictions, intensified conflicts and increasing use of physical force in asserting parental control. With respect to boys the pattern seems different. Physical force

tends to be used more readily throughout childhood to assure conformity. During adolescence, however, as physical strength of boys increases and often matches or even surpasses their parents' strength, the use of physical force in disciplining boys tend to diminish.¹⁷

The parents of battered children tend to be young and are often emotionally immature. Lukianowicz (1971) found the mean age of mothers to be twenty-one years with a range of eighteen to thirty-four years. Among fathers, the mean was twenty-four years with a range of nineteen to thirty-five years.¹⁸

Very few studies record the religious background of battered children. Gil (1970) did show, however, that the religious distribution corresponded closely to the religious distribution in the United States. Protestants and other non-Roman Catholic Christians comprised 62 percent of the abused children, 26 percent were Roman Catholics, 1 percent Jewish, 2 percent other religions, and 10 percent were of unknown affiliations.¹⁹ In The Battered Child by Helfer and Kemps,²⁰ Jewish child abuse is reported to 2 percent of the abuse cases in a 1967 New York study.

The Jewish population in the United States is not 1 percent of the total but rather 2.7 percent. In New York city, the Jewish population is over 20 percent of the total. Why the discrepancy in the number of cases

reported? A licensed family and child practitioner at the Family Stress unit of Northridge Child Guidance Clinic, reports that 15 to 20 percent of their clients were identified as Jewish.²¹ This high percentage of Jewish cases in a counseling center may reflect the fact that Jews are more likely to seek help from therapists rather than from public agencies.

CHILD ABUSE SYNDROME:

Methods and Types of Physical Abuse

Children have been found to be abused in almost every conceivable manner: (1) hitting them with any available object; (2) cutting them with knives or broken bottles; (3) giving them or exposing them to drugs and/or noxious fumes and substances; (4) throwing them down stairs or against a wall; (5) burning them with liquids or cigarettes; (6) placing their limbs against steaming pipes or over an open flame; (7) being dumped with anger or rage verbally; or (8) being victims of psychological games.

The child abuse syndrome includes three elements: (1) a potentially abusive parent; (2) a special child; and (3) a crisis situation.²² Child abuse is a family problem. Each member in the family suffers through direct or indirect involvement in the abusive acts.

Abusive families may not meet the tasks necessary for the growth of its members.

The three main psychological tasks which a family must complete for healthy functioning of its members are: (1) emotional separation versus interdependence or connectedness; (2) closeness or intimacy versus distance; and (3) self-autonomy versus other responsibility. In the abusive family, parents may not make possible the connectedness or basic trust necessary for the healthy growth of a child or they may create an unnatural symbiotic relationship because they have the need to have their own emotional needs met by depending on the child.

Situational abuse, behavior-patterned abuse, and chronic abuse are the three types of abuse patterns.²³ Situational abuse is a simple, one time only occurrence. Behavior-patterned abuse involves the parents' use of scapegoating, role reversal, or the failure-to-thrive syndrome. In scapegoating, the parent blames the child for negative feelings and/or situations through the use of projection. Role reversal abuse occurs when parents believe that they are bad and expect the child to be good to prove that they are all right as parents or people. The failure-to-thrive syndrome results from the parents' emphasis on satisfying themselves while

ignoring the child. The most severe pattern is referred to as chronic abuse. When such abuse is found, the child may need to be removed from the house because of future dangers of irreversible harm. Chronically abusive parents are immature and insecure emotionally and might go so far as to kill a child in order to be personally safe. Death of the child is the motivation for the abuse and many such parents are psychotic. This parent's life is a pattern of reacting to and blaming authority for their misery. Fortunately, few abuse cases are this severe.

Indicators of Child Abuse

The following is a compilation of the major physical and emotional indicators of child maltreatment, in both the abused child and the abusing parent.

An abused child has the following features: (1) is described as "different or bad" by the parents; (2) has an unexplained injury; (3) is usually fearful of the outside world particularly of his or her parents; expects others to be hostile and critical; (4) shows evidence of repeated skin injuries or fractures; (5) is kept confined, as in a crib or playpen (or cage), for long periods of time; (6) often cries (7) does indeed seem "different" in physical or emotional makeup

and has low self-esteem; (8) takes over the role of parent and tries to be protective or otherwise take care of the parents' needs, never really experiencing childhood; (9) is notably destructive and aggressive and shows little response to limits or controls; (10) is notably passive and withdrawn and shows inappropriate peer relationships and minimal response to praise; (11) has an impaired ability for enjoyment; (12) is compulsive; (13) shows precocious behavior; and (14) has school learning problems.

An abusive parent shows the following characteristics: (1) presents contradictory information regarding the history of repeated injury; (2) is reluctant to give information; (3) has delayed unduly in bringing the child for care; (4) refuses consent for further diagnostic studies; (5) "hospital shops"; (6) shows loss of control, or fear of losing control; poor control of aggressive impulses; (7) seems to be very much alone and to have no one to call upon when the stresses get to be overwhelming; (8) has unrealistic expectations of the child--sees the child as inadequate; (9) reacts inappropriately to the severity of the child's condition showing either over or under reaction; (10) cannot be located; (11) presents a history of family discord or of personal problems, such as alcoholism, drug addiction,

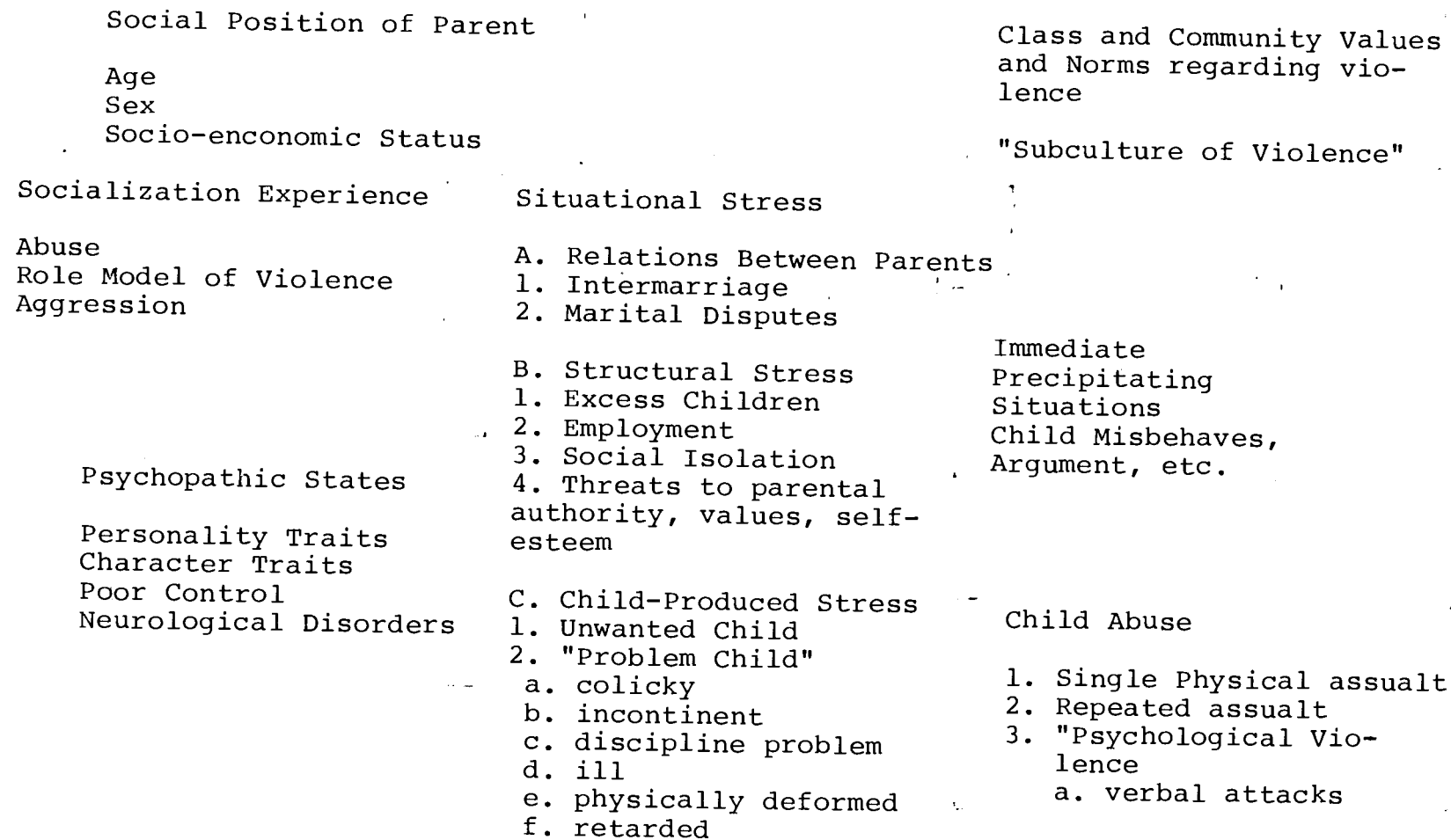
abuse or neglect as a child, psychosis, psychopathology, or borderline intelligence; (12) ignores the child's crying or reacts with extreme impatience; (13) discourages social contact; (14) is unable to open up and share problems with an interested listener and appears to trust nobody; (15) is very dependent; and (16) has low self-esteem;^{24, 25, 26, 27}

A single one of the above characteristics of an abused child or of an abusing parent does not necessarily mean abuse. However, two or more of the factors constitute an indication for further exploration into the parent-child interaction.

Causes of Child Abuse

Several researchers in the field of child abuse have proposed models or theories explaining the causes of the abusive situation. Richard J. Gelles,²⁸ proposed a social psychological model of the causes of child abuse (Fig.1). Situational stress factors include problems between parents, structural stress within the family, and stresses produced by the child. Parental problems include unstable marriage, divorce, separation, unwanted pregnancy, and minor criminal offenses.²⁹ Familial stress includes excess children, lack of support from extended family, high mobility, social iso-

FIGURE 1 GELLES SOCIAL-PSYCHOLOGICAL MODEL OF CAUSES OF CHILD ABUSE



	Conception	Mate Little Help	Separation, divorce
Wanted & Unwanted	Pregnancy		
		Selection of mate	
Wanted & Unwanted	Child	Selection of 'friends'	
		I'm no damn good	Inability to help others
Unrealistic Expectations		Isolation	Inability to use others
Role Reversal	Compliance	Trust not learned	

WORLD OF ABNORMAL
REARING CYCLE

CHILDHOOD MISSED

From: A Self Instructional
Program of Child Abuse
And Neglect, by Ray
E. Helfer, M.D.

lation, unemployment, threat to the parent's authority, values and self-esteem.^{30, 31} Defects in the character structure of the parent may cause him or her to give away to uncontrolled physical or verbal expression.³² Child produced stress items include being an unwanted child, a problem child, or a child who reminds the parent of something unpleasant.

Crisis situations may act as catalysts for abusive acts. These include: (1) the establishment of a marriage, which may involve an already pregnant woman, (2) an additional pregnancy or birth of a child, (3) the death of a loved one, (4) the loss of a job, (5) an arrest of a parent or child, (6) jealousy because of attention given to the child by the spouse, (7) criticism, (8) withdrawal of the spouse's support or rejection of any kind, or behavior of the infant which is perceived as being deliberately annoying or naughty or as constituting the infant's failure to meet the demands and the needs of the parent, or prolonged crying.³³ This crisis event places the family in a state of disequilibrium and over time, the family will try to regain its baseline functioning.³⁴ Families in poverty often remain in constant crisis, providing daily stimuli for abuse.

In addition to the characteristics of sex and age mentioned before, other conditions may be present in the

child or in her or his situation. If the child is not an only child, he or she is likely to come from a family with four or more children. The large number of children may be the concrete source of family stress. He or she may be an unwanted child, creating real financial strains or marital discord.³⁵ Many abused children are conceived premaritally and start life under a cloud of being unrewarding and unsatisfying. They are perceived as public reminders of sexual transgression or an unwanted burden.³⁶

The behavior or role of the child affects the abuse situation. Abused children often exhibit particular characteristics which make them more prone to abuse.³⁷ According to Martin,³⁸ most abused infants and young children function as retarded at the time abuse is identified. This retardation, however, improves with environmental improvement, supporting the hypothesis that some of the factors associated with the child considered to contribute to the abusive act, may well be the result of past abuse.

Abused children may be problem children' or difficult to love. They may be more dependent and demanding. As infants, these children may be colicky, incontinent, physically deformed, ill, or mentally retarded. Children who are colicky, irritable, or hypertonic are difficult to satisfy and comfort. The parents' sense of inadequacy

is exacerbated as they perceive this unresponsiveness as a rejection, reminiscent of experiences with their own parents.³⁹ Children with major physical defects and congenital anomalies, as well as psychotic, retarded, or brain-damaged youngsters, are poorly tolerated by narcissistic parents who regard them as "new editions" of their own defective self-images.

Abused children may be the product of a difficult pregnancy.⁴⁰ Pregnancies during which the mother was hospitalized, had severe emotional problems, concealed the pregnancy, refused antenatal care, or was refused termination, are considered difficult pregnancies. In these situations, the child may be a reminder of a past or present difficulty, or constitute a strain on the individual or the family. Illness in infancy is also a contributing factor to abuse. Frustrated and feeling helpless in connection with early sickness or separation, parents may have problems in establishing the mother-infant relationship, resulting in a lack of proper bonding and a lack of basic trust in the infant. In a study conducted in England in 1976, Lynch and Roberts⁴¹ studied fifty children brought to the hospital because of actual or threatened abuse and compared them to fifty control children. Five factors were significantly more common in the abused group than among the controls. (1) The

mother's age was under twenty at the birth of the first child. (2) There was evidence of emotional disturbance. (3) There had been a referral of the family to a hospital social worker. (4) The baby had been admitted to a special care baby unit. Finally, (5) Concern had been recorded over the mother's ability to care for the child. Thirty-five cases in the abused group had two or more of these factors as compared with only five of the control group. The fourth item, the baby's admission to the special care unit, prevents the automatic bonding between infant and parent that is not only essential for healthy growth in children, but to the parent's adjustment to the child. Twenty-one of the abused children had been admitted to the special care nursery, as compared with only five of the control babies.

Normal or "accidental" traits which are misperceived by or only attain special significance for abuse-prone parents include identification of the child with a hated person or situation, remarriage on the part of the parents, and subsequent regarding of the child by the step-parent as unwelcome and burdensome. In these situations, the stepchild is often treated by the step-parent as a sibling-rival who threatens the latter's dependency on the mate or is a convenient target for the step-parent's displaced hostility toward the spouse.⁴²

A young child who exhibits age-appropriate sexual

or aggressive behavior may be considered abnormal, evoking the parent's own unacceptable impulses. The parent's impulses are excluded from consciousness, but ascribed to the child by means of denial and projection. The child resists parental punishment, which aggravates the situation and leads to abusive acts.

Harold Martin in "Which Children Get Abused: High Risk Factors in the Child,"⁴³ lists six different facets of the child's role in the abuse syndrome: (1) attributes of the child's making him or her more difficult to care for or less capable of reinforcing good "mothering" on the part of parents (This factor was earlier alluded to as the "problem child".); (2) chance events affecting the mother child relationship (This includes pregnancy problems, stress in infancy, and a separation or negative change in the marital union with the child as the object of blame); (3) disruptions in the attachment (lack of basic trust formation), such as premature birth, distortions in early bonding behaviors, illness in a newborn, or the mother, and psychological stress on the mother. Premature babies are overrepresented among abused children, supporting the early-separation-leading-to-abuse premise; (4) the mismatch of the child and the parent's expectations for the child which the youngster cannot meet or the child may be the wrong sex.); (5) the

developmental level of the child; different developmental levels may place particular stress on parents; (6) the child may invite abuse; (In seriously disturbed children, a relationship may exist between physical abuse and self-mutilation.)

Justice, B. and Justice, R.⁴⁴ describe seven ways of conceptualizing the causes of child abuse. They are:

(1) the psychodynamic model, (2) the personality or character trait model, (3) the social learning model, (4) the family structure model, (5) the environmental stress model, (6) the social-psychological model, and (7) the mental illness model. Each model overlaps to some degree to take into account other factors that also play a part in producing child abuse.

The psychodynamic model addresses the mother's inability to nurture, a lack of trust in others, isolation, a nonsupportive marital relationship, and excessive expectations towards the child. A "special" child and a crisis are also necessary factors. However, no matter, how much environmental stress there is, those who express the psychodynamic model feel, the act of abuse will not occur unless the psychological potential is present.

The second model, the personality or character trait model, is similar to the first model, but those

who give this one primacy pay less attention to the factors which underlie the traits of the person who abuses. There is a greater inclination to describe the individual in terms of labels or imply that this is "just the way he or she is."

The third category, the social learning model, emphasises the failure of abusive persons to acquire the skills to function adequately in the home and society. Within this scheme parents are seen as using the only type of discipline they know--physical--which they learned as children. The social learning model leads to the formulation of "educational" intervention and treatment strategies of monitoring the specific behaviors of the parent and child that lead to abuse.

The family structure model addresses alliances, coalitions, enmeshments, and disengagements among family members. Different patterns in the family may result in child abuse: unplanned children, parental over-investment in a child, scapegoating of one family member. The disengagement of one parent may cause tremendous anger in the other parent causing the child to be the object of anger.

The environmental stress model, described by Gil, sees child abuse as a multidimensional problem and places heavy emphasis on stress as the cause. Gil claims that

if we were to eliminate environmental stresses, such as poverty, unemployment, and poor education, child abuse would disappear. This would not seem to hold true for cases of abuse found in the upper economic classes.

The sixth model, the social psychological model, is espoused by Gelles. He states that "frustration and stress are important variables associated with child abuse." These stresses combine with other factors, such as the influence of social class and community, the effects of "socialization experiences" to cause parents to act as role models for violence. Gelles believes that these experiences lead to psychological disorders that contribute to the potential for abuse. The final set of events necessary for actual abuse are "immediate precipitating situations."⁴⁵

Finally, the mental illness model, seems to have been developed partly as a response to the repulsiveness of child abuse--its unthinkable nature. In reality, only a small percentage of abusers are diagnosed as mentally ill. Mental retardation and organic brain disturbances have been suggested as the causes for abuse. Brain research indicates that the limbic system, which controls the visceral and physical expression of emotion, may be disturbed in some people who are excessively aggressive and show tendencies toward violence. Differences exist

between the female and the male abuser.⁴⁶ Female abusers tend to be free of neurotic anxiety, somatizing, self-doubts, depression and expressed insecurity. Their conflicts usually center around violence, aggression and authority figures. The abusing fathers are characterized as possessing somewhat paranoid ideation, obsessive-compulsive tendencies, and interpersonal difficulties.

Abusers tend to marry individuals who are not able to provide adequate emotional support. They find their marriages unsatisfying because of the lack of support, which then reinforces their feelings of worthlessness.⁴⁷ The non-abusing parent contributes to the situation in various manners.⁴⁸ He or she can be openly accepting or subtly abetting of the abusive acts, consciously or unconsciously. The non-abusing parent may show undue attention to the infant or child which causes the abusing spouse to have feelings of envy, anger or abandonment. Direct criticism which leads to feelings of inadequacy in the abusing parent, triggers aggressive acts. Behavior signifying rejection or desertion causes the same results. The infant or child in these cases, becomes the scapegoat for interparental conflicts.

The Parents Who Abuse

Fontana⁴⁹ lists six categories of abusing parents.

The first category includes emotionally immature parents or individuals afraid to grow up, of which there are four types. The first of these are the parents who resent the child's arrival. The child constitutes a reminder of their presumed adulthood and adult duties. The second are the parents who feel insecure and place the familial authority role on the child. Among these are depressed mothers who feel inadequate, helpless, and passive, and who see the child as a caretaker.⁵⁰ The infant or child's inability to meet his need for "role reversal" leads to frustration and to abusive acts.^{51 52} Third, the child fails to meet the parents' need for love and affection. Such parents state "He cries, he gives me nothing, the baby doesn't love me." Finally, for parents who are untrusting, isolated people, the child may become the hated parents or spouse which is actually the part of the self which the parent loathes: "He's just like me. I was a bad child. My mother had to beat me; I have to beat this child."

Fontana's next category is the neurotic or psychotic parent. Psychotic behavior is rare but neurosis has been found in 40 to 50 percent of abusive parents.⁵³ Such individuals are incapable of mothering or parenting because they may have received inadequate parenting themselves and as a result they resort to aggressive

and violent means of child rearing. They may feel somewhat righteous about their behavior. This method does not conflict with their own personal experiences.⁵⁴

The quality of motherliness-tenderness, awareness, consideration of the infant's needs, appropriate emotional interaction, and the ability to value a love object more than oneself, may be lacking in the neurotic or psychotic. This is not confined to the biological mother.^{55 56} In childhood, these individuals experienced a sense of intense pervasive, and continuous demand from their parents, with constant criticism. They felt unloved, unheard, and unfulfilled, with their own needs, desires, and capacities disregarded.⁵⁷ A lack of trust as a result of isolation from the real environment and from a lack of confidence in themselves and significant others, their inability to trust, share, and care for others, leads them to strike out at the nearest vulnerable being--the child. The child is seen as malicious or calculating and presumed to have the capacity for organized, purposeful behavior, which is at odds with the parent's needs (as stated by Helfer and Kempe in respect to the parent's own parenting). Mothers who cling dependently to their superegos, where all badness is denied and projected, expect their children to protect them from narcissistic mortification. In these

cases, one child who is bossy and provocative, is chosen as the embodiment of mother's projected badness.⁵⁸

The third category is comprised of parents who are mentally deficient or uninformed. These parents may have severe character disorders with schizoid features. The siblings are considered alike and reared like primitive, unsocialized beings, just as their parents are. Little remorse is felt for the abusive acts. Violence is considered normal and hence condoned within the family.^{59 60}

The fourth category consists of parents who are disciplinarians. These parents, who also show little remorse for their actions, see physical punishment as a legitimate method of child rearing. Any excuse justifies beating: to teach respect, to straighten out the child, to wallop the nonsense out of him or her, to punish an unaccepted act. These disciplinarians have their own standards and see themselves as godlike figures. Obeying their authority is foremost.⁶¹

Criminal and sadistic parents make up the fifth of Fontana's categories. These people, considered sociopaths, beat, torment, and kill for joy. They are impulsive individuals without concern for others.⁶² Their aggressive acts are unrelated to what the child does. Fortunately, this group comprises a small percentage (less than 10 percent) of the abusers but is increasing

due to societal pressures.

The final category in Fontana's list includes the parents who are addicts of either alcohol or drugs. Alcoholism distorts all family interactions. At times, overt neglect, at others, abuse occurs. Drug addicts more often neglect their children.

In "Child Maltreatment in the United States," Nagi⁶³ lists the most common characteristics of persons likely to abuse children. They are, in order of most to least common; the parent (1) had an unhappy childhood; (2) is mentally ill and emotionally disturbed; (3) is under emotional pressure; (4) lacks education or intelligence; (5) is young, immature; (6) is addicted to alcohol or drugs; (7) suffers marital problems; (8) is on a low economic level; (9) is under financial stress; (10) is in a one-parent family situation; (11) is violent, quick-tempered, mean; and (12) has no family or friends for support.

Merrill⁶⁴ found abusive families falling into one of three clusters:

1. The parents have continual and pervasive hostility and aggressiveness, that is sometimes focused and sometimes directed at the world in general.
2. Parents who have characteristics of rigidity, compulsiveness, lack of warmth, lack of

reasonableness and minimal pliability in thinking and belief. They show considerable rejection of the children. These parents feel self-righteous and defend their right to act as they had in abusing their child.

3. The third group shows strong feelings or passivity and dependence. Many are unassuming, reticent and very unaggressive. The parents often compete with the child for the love and attention of their spouses. Generally depressed, moody, unresponsive and unhappy, they are immature people.

Abuse is a product of a complex set of interactions. Friedrick and Boriskin use four-factor equations to help illustrate the problem. They are as follows:

- (a) Special child + special parent + crisis + cultural tolerance = abuse
- (b) Special child + normal parent + crisis + cultural tolerance = abuse
- (c) Special child + normal parent + cultural tolerance = abuse.⁶⁵

SEXUAL CHILD ABUSE

Sexual abuse of children ranges from verbal suggestion to forced intercourse by a parent. The primary

factor in this occurrence is the parent's failure to provide adequate care and protection of the child. Costin describes the characteristics of sexual abuse.⁶⁶ The perpetrator of sexual abuse is most frequently someone who is well known to the child--a family member, neighbor, or family friend. The fact of continuing sexual abuse is frequently known but ignored by other family members. Most child victims offer no resistance to the sexual practices, either because they have a close relationship to the abuser or because they feel guilty about the experience.

The major activities in the sexual abuse of children are the exhibiting of sex organs, genital fondling, mouth-genital contact and attempted penetration without force. These instances most often go unreported because there tend to be a few physical indications and no medical treatment appears necessary. If physical force and penetration do occur, the child may sustain physical injury, such as a sex organ injury or rupture, general body injury, venereal disease, vulvitis or pregnancy.⁶⁷ The physical indicators of sexual abuse include: difficulty in walking or sitting; torn, stained or bloody underclothing; pain or itching in the genital area; bruises or bleeding of external genitalia; vaginal or anal areas; venereal disease.

Behavioral indicators of sexual abuse include these: (1) the child appears withdrawn; (2) engages in fantasy; (3) shows unusually infantile behavior, or even appears retarded; (4) the abused child has poor peer relationships; (5) the child is unwilling to participate in physical activities; (6) the child engages in delinquent acts or runs away; (7) the child displays bizarre, sophisticated, or unusual sexual knowledge or behavior; (8) the child states he or she has been sexually assaulted by a caretaker (relative, friend, etc.)⁶⁸

LEGAL ASPECTS

Child abuse laws are more extensive than laws concerning other types of family violence. Unlike spousal abuse, in connection with which there exist no system for reporting, specified groups of professionals--such as physicians, social workers, therapists, and school personnel--are required to report suspected incidents of child abuse.⁶⁹ Prosecution of the two offenses also differs; California has much more stringent regulations regarding child abuse.

On January 31, 1974, the United States Congress passed the "Child Abuse Preventive and Treatment Act", Public Law 93-247, to provide financial assistance for a demonstration program for the prevention, identifica-

tion, and treatment of child abuse and neglect, to establish a National Center on Child Abuse and Neglect, and for other purposes. The legislation had four purposes:

1. To encourage complete reporting of suspected child abuse and neglect cases by all persons who have contact with young children.
2. To encourage therapeutic and treatment-oriented approach to child abuse and neglect, rather than a punitive approach.
3. To encourage uniformity in terms and concepts and to encourage communication and cooperation among states.
4. To enable each state to meet the requirements of Public Law 93-247.⁷⁰

The Federal act was to serve as a guideline for state child abuse laws. All fifty states, as well as Washington, D.C., Puerto Rico and the Virgin Islands now have statutes requiring that physical abuse of children be reported to a state agency.⁷¹

Legally, a child is defined as anyone under eighteen years of age. "Abuse" is any physical or mental injury inflicted on a child other than by accidental means, or an injury at variance with the history given of it.⁷²

"Neglect" is the failure to provide, or refusal to provide when financially able, by those legally responsible for the care and maintenance of the child, the proper or necessary support, education as required by law, or medical, surgical, or any other care.⁷³

Sexual abuse is also to be reported. In California,

the persons mandated to report child abuse do so.

If a parent of a minor child willfully omits, without lawful excuse, to furnish necessary clothing, food, shelter or medical assistance, or other remedial care for the child, is guilty of a misdemeanor punishable by a fine not exceeding \$1,000, or by imprisonment in the county jail not exceeding one year, or by both such fine and imprisonment.⁷⁴

Any person, who under circumstances or conditions likely to produce great bodily harm or death, willfully causes or permits any child to suffer, or inflicts the child unjustifiable physical pain or mental suffering, or having the care of custody of any child, willfully causes or permits the person or health of the child to be placed in such situation that its person or health is endangered, is punishable by imprisonment in the county jail not exceeding one year, or in state prison.⁷⁵

IMPLICATIONS FOR TREATMENT

Intervention approaches to physical child abuse and sexual abuse include: (1) medical examinations and treatment and assessment of developmental problems, (2) foster care, (3) residential treatment, (4) adoption, (5) homemaker services, (6) the assignment of parent aides, (7) individual, relationship and family counseling, (8) parent groups, (9) children's groups, (10) therapeutic nursery schools, (11) parenting education, and (12) self help groups for the abusers.⁷⁶

The choice of treatment is determined in part by the severity of the problem and the potential danger to the child.

Immediate medical evaluations are needed when any of the following conditions are present in the child: (1) any type of fracture, (2) head injuries, (3) serious infections, (4) serious burns, (5) severe bruising, (6) sexual abuse, (7) failure-to-thrive, and (8) unattended medical problems, such as high fever or difficulty in breathing.⁷⁷ Children who have been abused or neglected for an extensive period of time may have had inadequate medical care in the past. These medical problems may include: (1) inadequate immunization, (2) hearing deficits, (3) anemia, (4) inadequate growth or nutrition, (5) infection, (6) poor dental health, (7) visual difficulties, and (8) congenital anomalies.⁷⁸

Following the immediate diagnosis of a child's maltreatment, a worker needs to determine whether the child should be removed from the home. Children may be placed in foster care for a few days or on a permanent basis. Permanent out-of-home care, foster homes and residential treatment facilities should be used only when it has been thoroughly determined by workers and the court that the child cannot be cared for adequately at home. All alternative supportive services should be tried to preserve the natural family. Taking a child from his or her natural parents may traumatize the child and hence the "least detrimental available alternative" which "minimizes disruptions of continuing relationships

between a psychological parent and the child" should be chosen.⁷⁹ The decision of removing a child in his or her natural home is based upon the treatability of the family: its willingness to change.⁸⁰

With outside help and support, the parent's home is usually the best environment for the abused child and the abusive parent.

Two types of residential treatment exist for helping the abused. The first is designed to treat the abused child who is seriously disturbed or retarded. The second type of residential care is one in which the entire family is moved into a therapeutic environment. This approach is new to the United States but has been used effectively in Europe for several years.⁸¹

Homemaker services and parent aides are usually provided by the county or private agencies to restrain and assist abusive parents. Homemakers are especially helpful with home management and child care. Parent aides are volunteer paraprofessionals who act like parents to abusive parents.⁸²

Psychological treatment can be approached from many different modalities. Individual, family and group counseling may be used separately or in any combination with a given family.

The goals of all therapeutic modes in work with abusive families include: (1) stopping the abusive

behavior, (2) learning to handle and express feelings constructively on the part of all family members, (3) improved patterns of communication, (4) the development of a comfortable relationship between the parent(s) and the child or children, (6) improved parenting skills and the setting of realistic expectations of the child(ren), (7) increasing the parent's awareness of internal conflicts and dynamics, (8) setting consistent limits so that the children can form a basis for reality testing.⁸³

Group counseling, self-help and professional help for abusive parents serve several specific purposes: (1) to show members that they are not alone in their abusive behavior, (2) to provide an opportunity to discuss parenting issues, (3) to enable parents to search their own background for bad parenting experiences, (4) to decrease their isolation, (5) to improve their communication skills, and (6) to explore everyday types of problems and suggest solutions. If the group is professional, a male and a female leader, working jointly can demonstrate a healthy interpersonal relationship. Therapy should be very concrete to overcome the parent's suspiciousness, hostility, and resistance. Concrete "giving" by the counselor is needed to gain trust. Denial should be confronted in an ego-supportive manner by supporting the client but also by producing

a sufficiently high level of anxiety to produce changes. Parents often totally deny the abuse of their children. It may not be important for them to ever admit to the worker that they abused their children. What is important is that they are willing to make some changes in their parenting skills and in their view of themselves. Abuse is a symptom of other problems. Some parents are very dependent and need the therapist to act like a parent, providing warmth, security and direction. The counselor must be aware of this transference and countertransference and be willing to set firm but gentle limits. One of the problems in the parent-child relationship may be a lack of acceptance of the parenting role on the part of the parent; there may be a sibling-like relationship between the parent and the child. Workers also must be aware of the possibility of sibling rivalry during therapy between the parent and the child for the affection or attention of the therapist.

The parents should be educated in normal child development, so that their expectations for a child's behavior will be more appropriate. This is sometimes done in mother-infant play groups or in family or group therapy.

If the children are young (under the age of nine) play therapy may be used as part of the treatment. The

child is encouraged to express feelings by using dolls, play houses, art materials, etc. Some children are very depressed and need to be involved in more activities, starting with those in which they are interested with the gradual addition of others.

Children who are anxious need greater limit setting, caring, and dealing with feelings in a positive, safe, verbal manner. As therapy begins, the child may be confused by the different values being presented and by a conflict of loyalties between the needed and loved parent and the therapist. Children are often reluctant to discuss any abusive acts because of fear or a sense of loyalty to their parents.

Psychological improvement between the parent and child falls into six areas:

1. The parent sees the child as an individual, rather than as an extension of the parent or representing anyone or anything else.
2. The parent enjoys the child.
3. The parents' expectations of the child are age-appropriate.
4. The parent is able to tolerate the child's negative behavior.
5. The parent can allow the child to re-

ceive emotional "goodies" from people outside the family. The relationship is less symbiotic and the family has more extensive contacts in the community.

6. The parent is comfortable about expressing positive effect directly to the child.⁸⁴

Psychological improvements in the parents include:

- (1) decreased isolation; (2) increased pleasure in life;
- (3) increased self-esteem; (4) the ability to use life-lines; (5) improved handling of stresses and crisis;
- (6) more realistic self-expectation; (7) alternative ways of dealing with anger; (8) fewer pathological interpersonal relationships; and (9) utilization of therapy and treatment.⁸⁵

Therapy with abusive families is similar to therapy with other families or individuals. Persistence and the ability to see all sides of the abusive parent, pleasant and unpleasant, are necessary for successful treatment. Workers must confront and deal with their own feelings regarding family violence before they can help violent families objectively and effectively. Success at one simple task is important to the abusing parent who may seldom have felt success at anything. Long hard work will help these families stay together and grow.

Child abuse is a family problem and must be treated accordingly. Psychological factors, social factors, and the constellation of the individual family, all contribute to the abusive act. People who abuse their children are often viewed by social workers and other human service professionals as "bad" people, when in reality they are probably frustrated, ignorant, or lonely.

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SPOUSAL ABUSE
HISTORICAL, SOCIOLOGICAL, LEGAL AND TREATMENT PERSPECTIVES

Violence between spouses is not a new phenomenon. Such popular jokes or folk sayings as "When did you stop beating your wife?" or "A woman, a horse and a hickory tree. The more you beat them the better they be," have existed as long as marriage itself. English Common Law gave husbands the right to "chastise" their wives. In 1824, the United States Supreme Court acknowledged the husband's right to beat his wife. John Stuart Mill, in 1869, stated:

"From the earliest twilight of human society every woman...was found in a state of bondage to some man...How vast is the number of men, in any great country, who are little higher than brutes, and...this never prevents them from being able, through the laws of marriage to obtain a victim...The vilest malefactor has some wretched woman tied to him, against whom he can commit any atrocity except killing her--and even that he can do without too much danger of legal penalty."¹

American law, based on English Common Law, has a tradition permissive of wife battering. Before 1887, it was legally the husband's right to beat his wife. In 1924 for example, the court in Mississippi held that some "moderate form of chastisement...should be allowed in order to enforce the salutary restraint of domestic discipline." This ruling also sought to protect the husband from his wife's attempts to prosecute him.²

In 1874, the Supreme Court of the United States made it illegal for a man to beat his wife. The decision added, however, "if no permanent injury has been inflicted nor malice nor dangerous violence shown by the husband it is better to draw the curtains, shut out public gaze and leave the parties to forgive and forget." As recently as 1975 judges still attempted to make out-of-court informal settlements in situations of wife abuse because they considered it a better way to deal with "these matters".

In Christian tradition as well as in biblical sources, women were considered property, to be used by the men to whom they belonged, first their fathers, then their husbands. An example from the book of Judges (Chapter 19-20) describes a man turning over his concubine/wife to a mob who rapes her until she dies. This is done in order to protect a stranger who is a guest from being sodomized. After he finds that she is dead, he "divided her, limb by limb, into twelve pieces and sent her throughout all the borders of Israel."³

The male image of God which, according to Christian tradition implies that women are inferior to men, and the creation myth, which shows women to be the source of evil in the world in both Christian and Jewish traditions provide some justification for control of women by men. This serves as a basis for the British

and American legal system.

Even though the laws have changed and it is no longer legal for men to beat their wives, many still do so and "folkways" permitting such action still prevail. Gayford gave the following account in his 1975 book:

"He hit me with his fists, feet, and bottles, smashing me to the floor; then he started to kick, sometimes with repeated blows to the face and other parts of the body. He has kicked me in the ribs and broken them, he has tried to strangle me and banged my head against the floor. During my marriage of nearly four years I have received constant bruises all over my body, this has been more so during pregnancy. I have received black eyes, cut lips, and a swollen nose. Most of my bruises have been to the scalp where they don't show. On one occasion I had bruises to the throat and abdomen and was unable to speak; on admission to the hospital I was found to have multiple injuries and broken ribs."⁴

Not all incidents and descriptions are as dramatic, but all deserve the same attention and understanding. The following is a survey of social work and professional literature regarding spousal abuse.

DEFINITION

Many definitions have been offered for spousal assault as well as for woman or wife battering. Flynn defined spousal assault as "the act of physical attack by one spouse on another; pushing, slapping, punching, kicking, knifing, shooting or throwing an object with the intent to do bodily harm."⁵ He further states: "The

readings and data collected...clearly indicated that while both men and women are assaulters and victims, the overwhelming conclusion must be reached that the primary and prevailing problem is wife assault or wife beating."⁶

Tidmarsh defines violence in marriage as "serious or repeated physical injury of one partner to the other."⁷ Moore uses the following definitions of woman battering: "deliberate, severe, and repeated physical injury...with the minimal injury being severe bruising."⁸

Fleming gives the most inclusive definition of spousal abuse, the definition to be used in this study. This definition does not deal with degree of violence, but only with its existence. She also includes restraint from, or forcing into activity as part of her definition.

The term "battered women" refers to adult women who have been intentionally physically abused in ways that caused pain or injury or who were forced into involuntary action or who were restrained by force from voluntary action by adult men with whom they have or had established relationships, usually involving sexual intimacy, whether or not within a legally married state.

Battering is a willful assault on another to cause, or attempt to, harm, with or without provocation, i.e., onesided aggressive acts that may or may not be defended against (sado-masochistic practices for mutual sexual enjoyment are excluded). The term "battered" does not include non-physical types of abuse, such as intimidation, harassment, threats, or other forms of psychological coercion unless they occur in conjunction with physical force or injury. Although these are undeniably damaging, painful and injurious, the scope of

this phenomenon, is being restricted to bodily injury.⁹

Fleming's definition, then, also includes marital rape, defined as "forced sexual relations between husband and wife."¹⁰

Incident of Abuse

The actual number of people involved in or subjected to spousal abuse is not known, due to the difficulty of gathering accurate statistics. Police reports are ambiguous, spousal violence being categorized sometimes as a civil and sometimes as a criminal complaint. Many attacks are not reported. Those reports that are made, often show only the age and sex of the assailant, but do not reflect the relationship between the victim and assaulter.

Family agencies and mental health clinics generally do not keep records regarding spousal abuse. They are more likely to make reference to a client's sadomasochistic relationship or masochistic tendencies.¹¹ Ball notes, however, that in case records which mention violence, 49 percent involve violence within the marital relationship.¹²

Nationally, family disturbance is one of the most frequent reasons for police intervention. In 1968, Barnes¹³ estimated that more police calls involve family

conflict than do calls for all criminal incidents, including murder, rape, non-family assault, robberies and muggings. Schluyer reports that of all assaults recorded in 1974, in two Michigan counties, assaults against wives comprised 43 percent and 40 percent respectively.¹⁴

Flynn states that in his catchment area, approximately 10 percent of the families experience conjugal violence. He states that, in nonfatal assaults, the victim is almost always female. Men and women appear, however, to be equally likely to kill each other.¹⁵

Both Levinger and O'Brien¹⁶ studied the incidence of violence reported by divorcing couples. O'Brien states that 17 percent of the couples studied spontaneously mentioned violence as a major complaint.

Lunde¹⁷ reported in 1975 that approximately 40 percent of homicides in the United States involve one spouse killing the other.

The most thorough studies of conjugal violence have been conducted by Gelles and Straus. In a study published in 1977¹⁸, Straus stated that 3.8 percent of his 2,143 respondents reported at least one incident of severe violence in the past year. The average number of severe incidents per year for the sample was 2.4. Twenty eight percent of the couples included in his study also

reported at least one incident of violence during the duration of their marriage, with 5.4 percent of the respondents reporting severe beatings. Straus further stresses that it is likely that these figures are lower than the actual incidence because of the stigma and shame involved in discussing this matter.

Gelles¹⁹ studied a sample of forty identified violent families which were matched with forty neighbor families who had never reported violence. Over 50 percent of the eighty families (forty-four) reported at least one incident of violence in the past year, with twenty-one (or 26 percent of the total) involved in violence on a regular basis (from six times per year to everyday). Of the neighbor families, who had never officially reported any incidents of violence, 37 percent told of at least one incident of violence during the preceding year while 12 percent were involved in violence on a regular basis. Gelles also found that men were slightly more likely to hit than women and do so with much greater frequency. Carlson found in a 1977 study²⁰ that of the women who turned to the National Organization of Women for services as a result of abuse, 25 percent of the women had been assaulted once in the preceding year. Fifty percent had been assaulted three to eight times; 14 percent had been assaulted monthly;

and 11 percent more often than once a month.

It is important to note that in both the Gelles and Straus studies, the incidence of violence on the part of men and women is almost equal. This must be contrasted, however, with the frequency and outcome of the assault. Men are likely to hit with greater frequency and are much more likely to cause harm short of death. Women, it appears, are more likely to become violent, and even murder in self defense.²¹ Steinmetz²² reports that, while women are almost as likely to strike out as are men, the men are more likely to do severe damage, probably because of their greater physical strength. This superiority may be levelled by the greater use of weapons by women, which is probably the reason women are at least likely to kill their spouses as men are to kill women.

Though Jewish women are rarely seen in official statistics in the United States, regarding wife battering, informal studies conducted in Israel indicate that Jewish wife battering does occur. One such report states that between 5 and 10 percent of Israeli women are involved in abusive marriages²³. Another informal poll, conducted by a shelter director, places the figure near 20 percent.²⁴

Though these studies show a fairly wide variation in the incidence of spousal violence, they strongly

show this to be a major social problem. Even Straus,²⁵ relatively low figure of 3.8 percent yields an estimated national figure of 1.8 million women who are severely beaten by their husbands. On the basis of Gelles' study,²⁶ 60 percent of the married couples use violence as a method of marital interaction. From this information, it is not possible to ascertain whether spousal violence is increasing or decreasing. It can only be stated that spousal abuse is a phenomenon of large proportion, needing further research and intervention.

Frequency And Types of Assault

Flynn reports, in his 1977 study of spousal assault in Kalamazoo, Michigan, that wife battering usually occurs at home, most frequently at night and during the weekend. Frequencies range from daily to twice a year. The assault usually involves more than a slap; weapons were often used and the women feared for their lives.

In Carlson's study of women who sought help from NOW,²⁸ 25 percent of the 71 respondents had only been assaulted once or twice in the previous year; 50 percent had been assaulted three to eight times; 14 percent had been assaulted monthly; and 11 percent had been assaulted more frequently than once a month. 50 percent of the cases reported involved the use of a weapon; 60 percent of these were household objects, such as a shoe, an

electric sander or a hockey stick. Twenty-five percent of the weapons were guns, 16 percent were knives.

Straus,²⁹ describes a "conflict tactics scale" which was used to gather information regarding spousal abuse. The list of items committed by one spouse on the other include: (1) threw things at the spouse, (2) pushed, grabbed, shoved the spouse, (3) slapped the spouse, (4) kicked or hit with fist, (5) hit or tried to hit with something, (6) beat up spouse, (7) threatened with a knife or gun, or (8) used knife or gun.

In his study of violence between spouses, Gelles lists various types of violence used. Eighteen husbands reported pushing or shoving their wives; one wife did this to her husband. Twenty-two husbands threw objects, eleven wives did so. Thirty-two husbands and twenty wives slapped, hit with the open hand, scratched or grabbed their spouse. Twenty-five husbands and nine wives punched or kicked. Four husbands pushed down their wives. Three husbands and four wives hit with a hard object, nine husbands choked their wives. One wife threatened her husband with a knife. Three husbands threatened their wife with a gun.³⁰

Pregnancy was frequently associated with battering. Gelles³¹ reports that of the forty-four cases of violence in his sample, ten wives reported being beaten while pregnant. Winn³² reports that abused women who

have been repeatedly kicked and beaten during pregnancy often bear children who are mentally retarded, blind or subject to epileptic fits. In one study city, four out of twenty women suffered miscarriages as a result of battering.

Gayford³⁸ reports that the injuries in wife battering are usually to the soft tissue especially of the face, with black eyes the most common. Sites of bruising were most usually in the area of the eyes and jaw, but many occurred above the hairline and were not visible.

In her description of the cycle of battering, Walker³⁴ discusses three phases of battering: (1) the tension building phase, (2) the acute phase, and (3) idealization. She also states that the assaults usually tend to escalate throughout the relationship. During this repeated cycle, the likelihood increases that the woman might be killed.

Characteristics of the Abused Woman

There are two principal ways in which the abused woman is described in the literature. The first is based on the psychoanalytic view of women as having highly masochistic tendencies. The second is drawn from the feminist perspective and uses a more sociological

framework.

Schultz³⁵ gives the following description of battered women: They are basically sadomasochistic, in that they enjoy being abused and have a need to be abused. The problem of battering, therefore, is difficult to eradicate, as its roots lie deep in the psyche of the woman. Battered women are described as instigating assaults through antagonistic verbal behavior (for example, nagging or insults). The underlying assumption of Schultz's view is that if women refrained from verbal abuse, they would not be battered.

Schultz describes these women as "very masculine, outspoken, and domineering," (i.e. castrating). They are also said to have a tendency "to exploit and profit from their husband's passivity and dependency."

Deutsch³⁶ gives a more detailed description of the widely accepted theory of female masochism. Masochism is one of three characteristics Freud attributes to women. Deutsch describes the instinctual development of the female in terms of a biological process. Similar developmental patterns, she feels, can be seen in most cultures. She points out that the women's attraction to suffering is incomparably stronger than that of men even though this is consciously rejected. Unconsciously, as this desire for suffering exists, the health of the woman depends on how she assimilates and utilizes her

feminine masochism. Deutsch states that the battered woman goes beyond normal female masochism, and therefore, shows a pathological character, through boundaries between the normal and the pathological are fluid. Deutsch explains that all attempts to help the battered woman are bound to fail because even when freed from external financial dependence, she seeks to be subjugated again by brutal, unreliable and weak men.

The feminist-oriented literature regards the psychoanalytic model as one which blames the victim for the injury. Schuyler³⁷ states that:

"although many post-Freudian clinicians have found this (masochism) explanation satisfactory it fails to address other social variables that might account for a woman's decision to tolerate being abused."

She feels that it is the changing social status of women which permits the recognition of wife-battering as a problem.

The literature with a sociological, rather than a psychoanalytic, base locates the causes of battering in the cultural framework. Fleming³⁸ details the woman's role in society as a basis for understanding the reasons the woman tolerates abuse. She cites Metzger's comments to the effect that women have internalized the societal view, that they are the property of men and to be subordinate to them. Battering, thus, is seen by them as their just due. Consequently, battered women

view themselves as having failed in their primary roles of wife, mate and mother, and as being responsible for being beaten.

The sociologically-oriented literature states that the battered woman's behavior and psychological pattern are situationally-induced rather than resulting from deficits of personality.³⁹ Cooper describes ways the impact of these situations may manifest itself: The woman is emotionally and financially dependent and has a lack of knowledge of day-to-day living skills. She maintains a negative self-image, which is reinforced by each battering incident. She may often hold traditional values and feel that in terms of her own and her children's interests, it is better to stay married than to suffer the stigma of divorce. She maintains a high level of anger, which is usually internalized, leading to passivity, panic, guilt and intense fear. The suppressed feelings may manifest themselves in nightmares, psychosomatic disorder and fear of insanity. Shame and embarrassment not only prevent the women from seeking help, but also cause them to be isolated, to lack social supports, or even contact with neighbors.⁴¹

Prescott and Letko reported that 82 percent of the women in their study were fearful after the most recent battering episode; 90 percent reported anger. Seventy-five percent reported depression; 68 percent reported

feeling trapped; 58 percent felt helpless. Twenty-six percent felt "guilty", 33 percent "humiliated". A quarter of the respondents recounted feeling either "inadequate, unworthy, or unattractive", as a result of marital violence. Seventy-three percent of the respondents experienced a decrease in the quality of their sexual relationships. Nearly three-fourths indicated that the violence had led to a general distrust of men and a fear of remarriage. Surprisingly, 84 percent of the women who responded could pinpoint at least one positive outcome of the violence. In most of these cases it was being able to establish new relationships by reaching out or seeking others that was seen as a positive result. As these women began to find new sources of approval, they were more able to leave the abusive marriages.

Characteristics of the Abuser

Faulk⁴² studied 23 men who were in custody for assaulting their wives. A minority of the cases were men with immature and aggressive personalities. Most were apparently stable people who had been under prolonged stress or individuals suffering from a psychotic process. At the time of the wife battering, nine of the twenty-three exhibited no psychiatric abnormality,

but five showed depression; one dementia; three delusional jealousy; one post-head injury syndrome; two anxiety state and two personality disorder. The men were also categorized dynamically as (a) husbands who were dependent and passive (nine), (b) dependent and suspicious (four), (c) violent and bullying (one), (d) dominating (five), and (e) stable and affectionate (four).

Straus⁴³ agrees only with part of the above statements. He feels that wife battering is a socioculturally-based phenomenon and that only two to three percent of the batterers are psychotic.

Eisenberg and Michlow⁴⁴ found that neither batterer nor their victims fell into any particular age group, occupational category, educational achievement level, physical size, duration of marriage or family size. In this study, 25 percent of the assailants were unemployed, 50 percent earned middle incomes, the remaining 25 percent were white collar professionals.

Certain personality characteristics have been found to be associated with battering. Del Martin⁴⁵ describes the men as angry, resentful, suspicious, competitive, moody and tense. They tend to feel helpless, fearful, inadequate, insecure, jealous, and frustrated. Many are also alcoholics. This information was gathered from descriptions given by the battered women.

In his discussion of family violence, Goode⁴⁶ states

that men who command limited social, psychological and verbal resources are more likely to use physical force.

Gelles⁴⁷ has found that many battering men have been battered or observed battering in their family of origin.

Fleming⁴⁸ states that batterers are not necessarily psychotic, but may show a personality or a character disorder, using extensive projection. She states that though alcohol or substance abuse may appear to be the cause of violence, in actuality the abused substance only serves as a release which permits the expression of aggression. She observed four personality types among abusers: the controller, the defender, the approval-seeker, and the incorporator. She also lists eleven common characteristics of abusers: heavy drinking or drug use, abuse during courtship, extreme jealousy and the need to keep the woman isolated, a history of having been abused as a child or of having witnessed abuse of the mother by the father, an inability to tolerate frustration, a violent temper, often sparked by little things, cruelty to animals associated with great enjoyment of hunting for the sake of killing animals or abuse of pets, preoccupation with weapons, a poor self image, insecurity about their own masculinity, a pattern of blaming others, particularly their wife, for problems, acceptance of violence as an appropriate problem-solving method, and

unemployment or a high level of job dissatisfaction. She also found that abusers tend to have very stereotypical views of male-female roles.

Socio-Cultural Aspects

Recently, a large body of literature has emerged on the sociocultural basis of spousal violence. Murray Straus^{49 50} contends in several of his articles that violence between spouses is tolerated because of cultural norms which validate violence. He cites the National Commission on the Causes and Prevention of Violence⁵¹ which found that one out of every four Americans agreed that it is acceptable for a man to hit his wife. Referring to the learning model of Bandura, he states that the pervasively high level of violence in American society leads to more violence in the home. Sexism, and the inferior role to which woman are assigned, he feels, play a role in wife battering. The male-dominated, hierarchical structure of the general society acts as a model of power-distribution for the family and supports the use of violence to maintain the status quo.

Gelles⁵² describes a number of socio-cultural factors that play a role in marital violence. He finds that if a woman's educational or occupational status is higher than that of her husband, there is greater

likelihood of violence. That is, if there is a departure from the cultural norms of masculine and feminine behavior, there is a greater tendency toward violence. Men who fall into the under-employed bracket, who work at low level, low paying jobs, Gelles found, are more likely to be violent than either adequately paid or unemployed men. He feels, therefore, that families who experience more structural stress are more likely to become violent. He outlines five propositions which form the basis for the social structural theory of violence:

- (1) Violence is a response to particular structural and situational stimuli.
- (2) Stress is differentially distributed in social structures.
- (3) Exposure to and experience with violence as a child teaches the child that violence is a response to structural and situational stimuli.
- (4) Individuals in different social positions are differentially exposed, as children, to situations in which they may "learn" violence and, as an adult, to structural and situational stimuli to which violence is a response.
- (5) Individuals are likely to use violence to-

wards family members differentially as a result of learning experiences and structural casual factors that lead to violence.

Flynn⁵³ and Straus and Steinmentz⁵⁴ refute the notions which tends to support the prevalence of higher levels of violence among those of lower socioeconomic backgrounds. Flynn's study of violent families produced a sample of people of generally higher educational and economic levels, leading him to conclude that the problem runs the range of socioeconomic indicators. Steinmetz and Straus describe the view of abuse as a lower class phenomenon as "the class myth". In a study of college students⁵⁵ regarding violence between their parents in the previous years, there were as many differences within each socioeconomic bracket with regard to abusive incidents as there were among different class levels. Steinmetz and Straus state that violence shows up more regularly among lower income groups because they are more likely to become involved with social control agencies such as the police which keep records of such incidents. Higher socioeconomic groups use private resources which do not keep records, and they therefore do not appear in official statistics. This may help to explain the relative absence of Jewish cases in public agency and police statistics.

Legal Aspects

The legal basis for reporting of spousal abuse are not as clear as those of child abuse. Three states--California, Oregon and New York--have laws under which a battered wife may file a charge. In the remaining forty-seven states, charges of wife battering fall into the category of assault and are filed accordingly. If assault or battering charges are filed, a batterer may be forced into mandatory counselling by the court, if convicted.

Hospitals and physicians are required, under California law, to report the name, address, type of assault, nature, and extent of injury of each victim of a violent crime that comes to their attention.⁵⁶

Spousal abuse should be reported to the police under the requirement of this law, but the report does not result in the prosecution of the offender because it is not a formal police report.

Family members may be reluctant to report incidents of spousal abuse for fear of retribution, since the current law does not provide for the protection of abused individuals once the case has reached the courts.

The new California domestic violence act, Senate Bill 9, recently passed by the State legislature, goes into effect July 1980. It will provide such protection

against retribution by the prosecuted party.

The new laws provisions are outlined below:

The existing law until July 1, 1980 authorizes a court to grant a temporary restraining order (TRO), with or without notice, to restrain any person, upon a showing of reasonable proof of past acts of violence arising within a marital or other domestic relationship. This order is to assure a period of separation, which, however, does not exceed thirty days.

The new law will be a Domestic Violence Prevention Act, which will: permit family or household members to file for TRO's to prevent domestic violence where violence may or may not have already occurred; permit the court to restrain any party from molesting, abusing, threatening, sexually assaulting or doing any such acts to specifically named family members; permit the court to order the abusive party to leave the dwelling if that party assaults or threatens to assault other household members; expand the court's authority to issue further orders relating to custody and visitation, monetary compensation of victims for costs incurred due to domestic violence, medical or psychiatric treatment of either party or toward legal fees to the prevailing party; extend the length of the TRO's from 30 days to 90 days, while allowing the court authority to renew such orders;

ensure the delivery of the TRO to the local law enforcement agency; require law enforcement agencies to keep files of TRO's files in cases of domestic violence.

If the temporary restraining order is violated, the abuser is guilty of a misdemeanor and may be sentenced to up to six months incarceration and a 500 dollar fine, in addition to any sentence handed down for the actual behavior. The advantage of obtaining a temporary restraining order is that the police are required by law to respond. This is not the case with reports of domestic violence to which police may hesitate to respond. There is good reason, however, for this reticence and hesitancy. As many as 51 percent of the deaths of on-duty officers occur during responses to domestic dispute calls.

In the instance of sexual abuse or wife rape, the wife may file rape charges against her husband while she is still living with him in only three states -- Oregon, California and Nebraska. In Michigan and six other states, rape charges may be filed if the couple is separated or divorce,

Implications for Social Work

Nichols, Gelles, Straus, Steinmetz⁵⁸ and many others stress the importance of sociological and epidemiological

research of spousal abuse as a vital necessity to dispel myths and to help adequately define the problem. Descriptive research can help social workers recognize and deal with the phenomenon with a more solid knowledge base.

Many factors, however, militate against the change in the workers' attitudes. One of the major difficulties has been workers' belief in the importance of the family, and its maintenance at any cost. Nichols⁵⁹ outlines the way in which psychological explanations of behavior (as opposed to a more integrated psychosocial model) are used to the detriment of a battered woman. She also states that workers fear appearing to be allied too strongly with the feminist movement. Issues of violence stimulate feelings of fear, anger and frustration on the part of the worker, which, when not explored by the worker openly, reinforce the woman's lack of self-esteem.

Many methods have been suggested for work with clients involved in situations of spousal abuse. Ball⁶⁰ outlines casework intervention techniques for working with issues of violence. Responding to the client's urgency with early and additional appointments is necessary. The worker should recognize the client's distress with empathy and thereby lessen the client's alienation. The mobilization of cognitive resources is a way to

prevent further occurrences. By helping the client predict what he or she fears will happen, ways to avoid this situation can be explored. The worker should be accessible during a period when the client is extremely upset. Ball also recommends working with the client to develop and utilize support systems. The client's feelings and actions which contribute to the violence are to be explored, so that the dynamics which precipitate violence can be better understood and controlled. Plans for the client's future needs to be explored.

Elbow⁶¹ discusses four types of men who are abusive and ways to help the woman who is battered in each syndrome. She stresses the importance of the worker's not appearing to be too negative in his or her attitude toward the abuser, as the woman is often very protective of him. Her ambivalence must be recognized.

The worker should help the woman find ways to avoid the abuse. Three options are available to the battered woman: she can leave, she can stay and hope that her husband will change or she can stay and relinquish hope for change. The intervention process must allow the woman to explore all options and make her own decision. Continued counseling to build self-esteem may lead women who choose either of the two latter options to be able to plan for and eventually carry out intentions to leave the situation. Elbow describes three indicators

of readiness to leave: planning, investment in the self as a person and coming to grips with the reality of her situation. A woman must be allowed to move through these stages at her own pace, regardless of the frustration of the worker.

Fleming⁶² outlines many options that should be made available to battered women and abusive men. Individual counseling should be offered which does not blame the woman for the violence. Support groups for battered women should be made available both for women who decide to leave an abusive home and those who choose to stay. Assertiveness training is an important option.

Men should also have counseling options, according to Fleming.⁶³ Work should be geared toward goal-setting and contracting aimed at the elimination of violent behavior. Support groups for battered men are an option.

Saunders⁶⁴ recommends both counseling the man and the couple, with a strong emphasis on the use of contracting. He recommends an approach which involves asking direct questions concerning potential danger to the woman and the children and setting up aversive contingencies if the man becomes abusive. He also suggests working with the abuser to help him recognize the physiological "warning" signs that signal an imminent loss of control. This will hopefully increase his ability to disengage before he becomes violent.

Family treatment is also recommended for the women, men, and children who are involved in abusive situations.⁶⁵

Options other than treatment should be made available to battered women. Fleming and Martin^{66 67} strongly support the establishment of battered women's shelters. They state that the reason many women stay in abusive homes is that they have nowhere else to go. Enough shelters will eliminate this impediment. Gelles⁶⁸ and Scott⁶⁹ call the establishment of hotlines for both battering men and women in order to meet their immediate -- often emergency -- needs.

Flynn⁷⁰ recommends the development of a resource service which would coordinate existing resources, mount a community education campaign about the problem of family violence and would reach out to victims and assaulters in order to offer services to them. Fleming⁷¹ also recommends the establishment of a coalition to deal with all aspects of the problem in a coordinated way.

SUMMARY

Cultural norms and general societal attitudes about violence cause and maintain the problem of spousal abuse. The traditional roles to which women have been socialized have caused women, until recently, to accept the violence done to them.

As these norms and values have begun to change,

there has been attention given to these problems.
Spousal violence does not exist in a vacuum, however.
It is only one component of the larger pattern of
family violence.

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FAMILY VIOLENCE - A SYSTEMS APPROACH

Recently, a body of sociological literature has developed which sees child abuse and spousal abuse as growing from a common source. In their book, Violence in the Family, Straus and Steinmetz¹ explore the social setting of the family that allows it to be a place where conflict and physical violence are a regular part of the interaction. They outline the idealized socially-sanctioned view of the family as the seat of harmony and love, a view which tends to obscure the existence of violence. They stipulate that conflict is fundamental to a hierarchical society. As the family has traditionally been hierarchical and patriarchal, violence, they feel, is fundamental to the family. They conclude that, though myths to the contrary are maintained, violence in the family is not at all abnormal. They support their view with statistics, including findings from the National Commission on Causes and Prevention of Violence to the effect that approximately one-third of the population is spanked frequently as children, and one in five men approve of the slapping of a wife's face.

Gelles and Straus² list twelve factors which contribute to the family's special vulnerability to violence: (1) the large amount of "time at risk" in terms of number of hours the family spends together (2) the broad range of activities and interests that the family

engages in, leaving many opportunities for failure to meet expectations, (3) the intensity of emotional involvement of the family members with one another which makes disappointments more painful, (4) activities which impinge on those of other family members, leading to conflict, (5) the fact that family members, have the right to exert influence over another, (6) differences in sex and age which make the family an arena for culture conflicts, such as "the battle of the sexes" or "generational conflict", (7) the fact that roles within the family, culturally, are ascribed according to biological rather than interest and competence-related basis. This is particularly true of the sexist structure of the family), (8) family privacy which insulates the family from both social controls and assistance, (9) involuntary membership, both due to birth and to other social, physical and legal aspects which often eliminate the potential of conflict resolution by leaving the situation, (10) high levels of stress because of the very nature of family relationships and developmental crisis, (11) normative approval, culturally, for the use of violence within the family in ways that would not be tolerated outside of the family, (12) socialization into violence and its generalization into new and similar situations. The use of violence by those who love is learned by children and later incorporated into the behavior of

adults.

The fact that this transmission of violence through the generations occur, has been documented in many studies. Gelles³ reports that many in his sample who were abusive towards their spouses, were also exposed to conjugal violence as children and had been frequent victims of parental violence (50 percent of abusive spouses had observed violence between their parents, while only 30 percent who were not abusive had observed such violence). Carlson⁴ also reports this observation in her study. She found that one-third of her victims of wife battering and one half of the batterers had observed violence between their parents. Helfer and Kempe⁵ states that abused children are likely to become abusive adults. Gelles⁶ states that violent techniques are passed on from one generation to the next, in a sense suggesting that family violence is the product of the learning of a script for violent family interaction including the justifications for the use of violence. A tendency to approve the use of violence as a result of having witnessed or experienced violence as a child has been documented.

In addition to the generational linkages for violence, many types of violence exist, often in the same family. Physical punishment of children is used by at

least 90 percent of parents, even through the end of high school.

Almost as common as physical punishment of children is violence between siblings. Straus states that almost two thirds of the sample studied had hit or been hit by a brother or sister during the year they were seniors in high school. He concludes that this is further indication of the fact that violence which is considered reprehensible outside the family is acceptable inside the family.⁷

Basic to this conceptualization of family violence is the understanding of the family as an interrelated and interdependent system. Not only is the family internally interrelated, it is also influenced by exyernal social and cultural forces. One system cannot be separated from the other, just as different types of violence within the family cannot be isolated from others. Gelles⁸ has developed a framework which summarizes this (fig.1).

It is important to note that while there is documentation in studies of the existence and causation of intrafamilial violence, the general populace denies its existence in normative families. Steinmetz and Straus⁹ outline social myths which permit this: (1) the myth of family consensus and harmony, (2) the class myth, (3) the sex-link myth, (4) the cathartic-release myth. These

CAUSAL FACTORS IN FAMILY VIOLENCE⁸

Social Position

STRUCTURAL STRESS

Education
Occupation
Income
Age
Sex

Unemployment
Sporadic employment
Financial problems
Health problems

SOCIAL

ISOLATION

V

I

O

L

OFFENDERS IDENTITY

FAMILY STRUCTURE

Vulnerable
self-concept
Low Self-esteem

Role relationships
Unwanted children
Pregnancy
Religious differences

Situational
Factors

E

N

FAMILY OR ORIENTATION

SOCIALIZATION

Position in
social structure

Exposure experience
with violence

NORMS OF VALUES
REGARDING
VIOLENCE

COMMUN-
ITY &
VALUES
ABOUT
SUB-CUL-
TURE OF
VIOLENCE

C

E

Family structure

Role models of violence
Self devaluing experience

myths in effect, deny the existence of family violence, or justify it, as in the catharsis notion of violence, as not really being violent. These attitudes cause families who do experience violence, either to deny that the family is violent or to feel too much shame and stigma about its existence. If it is assumed that only abnormal families engage in violence, then violent families can be dealt with as outcasts with strong social sanction against the admission of the use of violence by "normal" families. The stigma attached to admission of the use of violence in families tends to decrease the likelihood of public admission of the problem. The lack of admission and discussion of the problem by batterers, their victims, and the community allows society to maintain its myth that the problem does not exist. This vicious cycle, reinforcing the isolation of the violent families and their ostracism reinforces the cyclical nature of family violence itself.

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A JEWISH PERSPECTIVE ON FAMILY VIOLENCE

Traditional Jewish sources offer an important perspective with regard to physical violence in the Jewish family. Two central areas of concern emerge regarding the Jewish family from the rabbinic literature. One encompasses the roles and responsibilities of the marriage partners contained in part, in the codification of Jewish marriage law. The second concerns the relationship and responsibilities between parents and children.

There are certain traditional expectations regarding the marital couple. It is assumed in Jewish law that there are to be mutual respect and caring between the partners. It is also expected that each partner's physical, sexual and psychological needs are to be met in the context of the marriage. Indications of this are found throughout the Talmud, for instance:

A man must love his wife as himself and must honor her more than himself.

If their wife is small: Stoop and whisper to her.¹

Linzer, a modern Jewish sociologist, describes Jewish marriage law as raising the relationship between the man and the woman to a level of holiness or "Kiddushin." Furthermore, this sanctification is more than a mere contract but embodies an entire philosophy and way of life.²

Because marriage is to be on the highest level of

sanctification, a vehicle is provided for the dissolution of any marriage which does not fulfill these goals.

Physical violence is one of the grounds for divorce.³

The Rabbinic literature sites actual cases of wife beating which led to divorce.

Response by the German Rabbis, particularly Rabbi Meir of Rothenburg, also refer to such spousal abuse:

A. often beats his wife. She begged him to promise not to beat her anymore, but he refused to make any such promise. Even when she appeared in the synagogue to demand that A. pay the debts she had contracted in order to pay for her sustenance (probably during a period of separation), A. stubbornly refused to promise that in the future he would refrain from beating her.

Answer: A. must pay for his wife's sustenance since by his action he has shown that he had not decided to desist from his shameful practice. One deserves greater punishment for striking his wife than for striking another person, for he is enjoined to respect her. Far be it from a Jew to do such a thing. Had a similar case come before us, we would hasten to excommunicate him. Thus, R. Paltoi Gaon rules that a husband who constantly quarrels with his wife must remove the causes of such quarrels if possible, or divorce her and pay her the Ketubah: how much more must a husband be punished, who not only quarrels but actually beats his wife.⁴

The Shulchan Aruch also addresses this issue:

If a husband is habitually cruel to her, this is grounds for divorce. According to the Rama, ' A man who beats his wife commits a sin, as though he has beaten his neighbor; and if he persists in this conduct, the court may castigate him and place him under

oath to discontinue this conduct; if he refuses to obey the order of the court, they will compel him to divorce his wife at once (though some are of the opinion that he should be warned once or twice), because it is not customary or proper for Jews to beat their wives it is a custom of the heathen.⁵

Zborowski and Herzog refer to a characteristic response to any cases of violence between husband and wife in the shtetl: Any man who would beat his wife had to be of the "prost" or common type, else he would be

"too thoroughly imbued with respect for the sanctity of the home and with abhorrence for every form of physical violence except the pious punishment of children."⁶

As stated earlier, the second area of traditional concern is the relationship between the parent and the child. One of the values reflected in the rabbinic literature is that the parents have a responsibility to provide for and care for their children. This includes both physical and psychological needs. The family plays a crucial role as the training ground for a new generation. Just as the parents are required to feed, clothe, and shelter their children, so they are responsible for educating them morally and vocationally.

Examples of this can be found throughout rabbinic literature:

A father has an obligation to support his children to a certain age.⁷

Standards of maintenance must be determined by

actual needs of the child not by the parent's financial status.^{8 9}

The education of the child is the responsibility of the father.¹⁰

And, who so fails to teach his son a trade teaches him robbery.¹¹

With regard to discipline, an important aspect of child rearing, a distinction is made between appropriate discipline and excessive punishment.

Rabbinic literature states, on the one hand, "He who rebukes not his son, sends him into delinquency."¹²

While on the other hand,

If you must strike a child, strike it with the string of a shoe; in other words, a light stroke which can do no harm.¹³

Other examples from Rabbinic literature show how parents were restricted in their behavior toward their children:

"A man is forbidden to place a burdensome yoke upon his children and to be too exacting with them...so that he should not thereby cause them to stumble. He should rather overlook their shortcomings and forgive them."¹⁴

"One is forbidden to beat his grownup son. Maturity is not determined by age, but by emotional development."¹⁵

Rabbinic tradition even went so far as to state specifically that children should not be treated as property:

"Whosoever, though starving, sells either a

sacred scroll or his daughter will never see blessing in the world."¹⁶

In actual practice, however, excessive physical punishment of children may have been quite common, as is suggested by sociological studies of shtetl life:

Resorting to physical methods, forbidden between adults, is correct toward children, for this is the method that children, the unlettered, the unenlightened can understand.¹⁷

Just as the parents have obligations to their children, the children have duties to perform for their parents. These are specifically oriented around the Biblical commandment to "Honor thy Father and thy Mother."¹⁸ The Bible further states "He who curses father or mother, his lamp shall be put out in utter darkness."¹⁹ The rabbis further expanded upon the children's obligations with respect to their parents.

They should cheerfully submit not only to inconvenience and financial loss, but even to personal indignities at the hands of their parents, sooner than do anything in the way of disrespect. Children should fear their parents as if they were God, and not show anger publicly toward their parents but can seek legal redress for any damages they cause. Parents should be provided with food, drink and clothing. If the father asks who caused the child to do something which angers him, the child should not implicate the mother.²⁰

Needless to say, a child is prohibited from striking a parent. The child must endure punishments at the hand of the parent, out of respect. The parent, however, has a responsibility not to provoke the child to the point of violence. Donin, a modern Orthodox rabbi, explains: "By striking a grown child, one may invite him to strike back and to thereby violate a serious biblical injunction against striking a parent."²¹

Although Jews have always considered peace, or non-violence, an important value, the Jewish people has known much violence in its history. The violence the Jewish people suffered in the form of pogroms, expulsions and the Holocaust, surely influenced the interactions among the Jews themselves. Jewish literature, which describes the Jewish experience, repeatedly reflects this stress-induced violence. One example of this can be found in Lester Goldberg's short story "Decline and Fall" in which the main character, Ben, lashes out at anyone who angers him. His anger, is intensified by his recollection of the experience of Jewish oppression.

Ben leaned over and tried to raise his window. Let a bit of spring inside. Everything looked different through the unaccustomed bus window. He jammed the side clips down with both hands and heaved and strained and finally, in skips and hops, tore the window open. The bus stopped at Winfield Circle and Ben watched a man, smoking a cigar, pushing a rotary mower across his lawn at the busiest corner of the

circle. The man was barefoot and Ben wondered how he'd manage if the mower caught his tentoes simultaneously and chopped them off. Could he live? How about five toes? Or two toes?²²

The author also implies forced sexual relations between Ben and his wife, Ruth

That night he insisted on a late-late show. Ruth complied. He wasn't sure she was even fully awake. Then she said, sleepily, when do I get a night off?

Bang-bang-bang.²³

Albert, the father in Henry Roth's novel Call It Sleep, is another example of a Jew whose rage, fed by the oppression of his people in Europe and his frustration as an immigrant in the United States, culminates in his violently lashing out at his son.

"You won't answer!" The voice that snarled was the voice of the clothes hanger biting like flame into his flesh. "A curse on your vicious heart! Wild beast! Here, then! Here! Here! Now I'll tame you! I've a free hand now! I warn you! I warned you! Would you heed!

The chopping strokes of the clothes hanger flayed his wrists, his hands, his back, his breast. There was always a place for it to land no matter where he ducked or writhed or groveled. He screamed, screamed, and still the blows fell.

"Please papa! Please! No more! No more! Darling papa! Darling papa!" He knew that in another moment he would thrust his head beneath that rain of blows. Anguish! Anguish! He must escape!

"Now bawl!" the voice raged. "Now scream!
But I pleaded with you! Pled as I would
with death! You were stubborn were you!
Silent were you! Secret--"

The door was thrown open. With a wild cry,
his mother rushed in, flung herself between
them.

"Mama!" he screamed, clutching at her dress.
"Mama!" "Oh God!" she cried in terror
and swooped him into her arms.
"Stop! Stop! Albert! What have you done to
him!"
"Let him go!" he snarled. "Let him go I tell
you!"
"Mama!" David clung to her frenziedly.
"Don't let him! Don't let him!"
With that she screamed hoarsely, trying to
snatch the clothes hanger from him.
"With that to strike a child. Woe to you!
Heart of stone! How could you!"
"I haven't struck him before!" The voice
strangled. "What I did, he deserved! You've
been protecting him from me long enough!
It's been coming to him for a long time!"
"Your only son!" she wailed, pressing David
convulsively to her. "Your only son!"
"Don't tell me that! I don't want to
hear it! He's no son of mine! Would that
he were dead at my feet!"²⁴

Another example in Call It Sleep, is typical of
violent family interactions. Unlike the other incidents,
it took place in the shtetl in Europe. Genya, the
mother, describes to her sister her interaction with
their father following the ending of her relationship
with a non-Jewish man. The incident begins with verbal
abuse and ends in physical violence.

"Father was standing before the counter with my gentle Genya, he said--you know how biting-ly he could sneer--is gall a spicy drink? How does it taste? Does one smack the lips after it? I didn't answer. All I could do was weep. Weep! So! He was like a mother gone insane. Weep! Ah! He rubbed his paunch as though he were eating a delicacy. Ah! It does my heart great good! Don't torment me, father, I said. I've suffered enough! Ha! he said as if he were shocked. Are you suffering? Miserable, pitiful little child! I kept quiet then and let him have his way. You call that suffering, he cried, Why? Because he held you under him like dung in the privy and drops you now? That was father's way!" A deep sigh interrupted her.

"I know," said Aunt Bertha vindictively. "May his tongue also fall out."

"He kept on. Like screws into my breast his words. Torment more than I could bear. I tried to run past him to the door. He seized me and slapped me across the cheeks."

Her voice had become strangely throaty now, dull, labored.

Then nothing mattered. Suddenly nothing mattered. I can't tell you how, but all pain seemed to end. I shrank. I felt smaller suddenly than the meanest creature crawling on earth. Oh, humble, empty! His words fell on me now as on the empty air. And where will you go? he screamed. Esau's filth. He has a new one! He has a new one! A rich one! Kicked you out, has he not? crying out, "They'll hear you!" And he would answer, "let them hear me, shall I not howl with a heart on fire. I'm bursting I tell you! I'm strangling! And then he plucked off his black skullcap and threw it in my face and stamped with his feet like a child in convulsions. Ach! It was frightful."

Anzia Yezierska's *Bread Givers*, another novel depicting Jewish life in the U.S. in the early twentieth century, describes several incidents of both physical and verbal violence. Two excerpts are given here:

Sol snatched the soap out of Benny's hand giving him such a push with his elbow that he went sprawling on the floor. At this, big Dave kicked them out of his way, and spread himself before the whole sink. He began splashing water on his face, humming a song from the street.

Bessie put her hand to her ears, adding her shriek to the noise. "Oi, oi, oi! Every morning I'm yelling at them 'Wash yourself two at a time.' But they all rush together like wild animals. In our house we also had only one sink, but we did not kill each other to be first."²⁶

Wild shrieks jerked us out of ourselves to street around us. A little boy who ran madly into the middle of the street for his rolling marble was caught in the crowding traffic. Mr. Seelig and I rushed over in one breath and dragged him almost from under the wheels of a racing truck.

Before we could get to the curb, a woman, weeping and laughing hysterically, snatched the child from us.

"Gazlin! Murderer! How you blacken me my days!" she cried, shaking and cuffing him. "Tateniu! Only to get rid of this devil once for all.!" It was some moments before we could rescue the child from the animal fury of the mother."²⁷

In summary, family violence seems to have existed and been recognized throughout Jewish history. This, however, does not imply approval of such action. There are strong legal and social sanctions against the use of excessive physical force within the family. There are no clear delineations, however, between what is considered excessive and what is considered acceptable in the use of force.

Because of these strong sanctions, it may be very difficult for Jews, both in the past and in the present, to accept or admit the existence of Jewish family violence. Indeed, it is more comfortable to deny its existence than to admit, not only to the Jewish community, but also to the general non-Jewish community, that Jews may also act in this "shameful" manner. The importance and centrality of the Jewish family is very much threatened by the idea of family violence. It is deemed better to maintain the blind myth of family love and harmony than to accept the existence of intrafamilial violence, which threatens it.

An imperical study, described in the following chapters, dispells the myths about the non-violent Jewish home.

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METHODOLOGY

The media have increased public awareness of family violence. The stereotypical view, however, continues to be that spousal and child abuse occurs almost exclusively in lower income disadvantaged ethnic minority families. Violence is not supposed to exist in Jewish families. However, contacts with professionals and the researcher's personal experience from their work with clients, suggest that the phenomenon of family violence does exist in the Jewish community.

It is the purpose of this study to explore the incidence and parameters of physical violence among the members of Jewish families.

The following four hypotheses were investigated:

- 1) Physical violence is not absent in synagogue-affiliated families.
- 2) Violent families do not reveal to synagogue professionals the violence that occurs.
- 3) Rabbis have some knowledge of the problem of Jewish family violence.
- 4) Jews do not believe that family violence is a problem in the Jewish community.

The conceptual definition of violence used was:

"Intentional use of physical force on another person.. This physical force can be used for a variety of purposes, including (1) to cause pain and injury as an end in itself what might be called "expressive violence"); (2) the use of pain or injury of physical restraint as a punishment to induce the other person to carry out some act (what might be called "instrumental violence"). In addition to considering whether violence is either instrumental or

expressive (or some combination of them), for some purposes it is also important to take into account whether or not the violence under consideration is "legitimate" according to the rules of the society in which it takes place (such as spanking a child in most societies or shooting an enemy soldier in time of war) or "illegitimate" (such as spanking a disobedient wife in contemporary society or shooting a soldier of one's own country).¹

The operational definition used in this study is a modification of the definition used by Richard Gelles, a well known researcher of family violence: 1) one individual hitting, striking, battering, assaulting, burning, or throwing an object at another, 2) one family member pushing, slapping, punching, kicking, knifing, shooting, or throwing an object at another family member, 3) one family member forcing another to engage in sexual activity against his or her will or forcing a family member to be alone or kept away from social contact outside of their immediate family.²

These hypotheses were investigated from several perspectives-that of rabbis, that of other human service professions, and that of members of congregations. Rabbis and human service professionals were interviewed, while data was collected from congregants by questionnaire.

This multifaceted approach was used for several reasons. First, because of the sensitive and emotionally charged nature of this topic, there was concern that

the congregants might not provide enough information. Secondly, the combination of survey and interview methods provides a broader and more accurate picture of the issue, eliminating some of the weaknesses of either method.³

In order to have a large enough sample to make any statements concerning violence in the Jewish community at large, the survey method was selected. The use of self administered questionnaire made it possible to reach larger numbers of people in all three branches of Judaism, in different age groups, in various geographic locations, and in a variety of socioeconomic classifications. The questionnaire format was appropriate since Jews, as a group, are generally English-speaking and literate. Moreover, many respondents are more likely to be frank about sensitive issues when they are granted the anonymity of a questionnaire.⁴ Another advantage of using the survey format was that it served to expose a large number of Jews to the issue of family violence. Furthermore, as funds and time were extremely limited, the quantity of information which could be obtained in relation to the cost was greater than it would have been had the interview method been used.

On the other hand, the interview approach was deemed most advantageous in gathering information from the rabbis and other professionals. The interview is useful in exploratory studies to develop or test new or

subhypotheses or test hypotheses for viability. It is also the most flexible means of obtaining data. As the sample of professionals and rabbis was small, this more time-consuming method allowed for probing in greater depth.

Interviews with Rabbis

Initial contact was made with rabbis by a letter. (Appendix A). The purpose of this letter was to introduce the study and to enlist the rabbis and his congregation's assistance. During a follow-up telephone conversation with the rabbis, an appointment date was established. At this time it was explained that this study was about ways in which Jews handle family problems. There were three main rationales for not informing the rabbis about the topic of the study initially: (1) to reduce the likelihood that the rabbis might refuse to discuss the issue, (2) to avoid the bias the rabbis might develop if they were given a prolonged period of time to dwell on the topic, and (3) to use the face-to-face contact in the more personal setting of the interview, to allay the rabbi's fears concerning the involvement of their congregants in the study. The initial vagueness was not considered unethical or deceptive because the true purpose of the study was explained at the time of the interview.

The rabbis were interviewed briefly by one of the researchers regarding their knowledge of, contact with, and response of Jewish intra-familial violence. A semi-structured interview (Appendix B) of 30 to 45 minutes was conducted in the respective rabbis' offices. The length of the interviews was kept to a minimum as only limited information was solicited. The purpose of these interviews was to test the hypothesis concerning the rabbis' knowledge of Jewish family violence. The questions were aimed at obtaining the following information: (1) special characteristics of the congregation, demographic features, congregational and rabbinic concerns, (2) the rabbis' perception of his role and his use of professional time, and (3) the rabbis' involvement with the issue of Jewish family violence: (a) whether such problems come to his attention (b) whether he considers it a problem in the Jewish community (c) his knowledge of how to recognize family violence (d) how he has dealt with it and how he feels it should be dealt with (e) his perceptions of the abusers and the victims and (f) whether he feels he needs more training in this area.

Various issues related to the use of the interview technique were raised. Being sensitive to the need to assure confidentiality, the interviews were not tape recorded, but were recorded through written notes. This

was also done to maintain an informal and relaxed atmosphere. Although discrepancies in power between the female student interviewers and the male rabbis were noted in the areas of age, sex, denomination and occupational status, these seemed to have little impact on the openness and willingness of the rabbis to participate. In some cases, the rabbis' attitude at the outset of the interview was patronizing. As a result of the ongoing discussion, however, the rabbis seemed to respond to the serious and professional intent of the interviewer and to react with equal seriousness. Though it is clear that face-to-face interviews may inhibit the discussion of sensitive issues, the rabbis were found to be frank and cooperative. While they were very open to discussing this topic, however, it was apparent that the majority of them had not considered the issue in detail. It was necessary, therefore, to follow up the initial inquiries with probe questions. These more specific and direct questions generally prompted recall of applicable information. The questions also caused the rabbis to think further about issues of family violence and perhaps to be more cognizant of it in the future.

Interviews with Jewish Human Service Professionals

In order to explore the existence of Jewish family violence further, informal contacts by telephone and in-

person were made with the following types of human service professionals:

1. Hot-line workers
2. Hospital emergency personnel
3. Police
4. Physicians
5. Family crisis shelter personnel
6. Psychiatrists
7. Therapists
8. Social Workers

With these individuals the researchers explored in an unstructured manner their knowledge of and contact with Jewish family violence. Case descriptions were requested and information regarding the number of such cases that had been encountered was elicited. An attempt was made to ascertain what percentage of the workers' or the agency's caseload was composed of cases of Jewish family violence.

The content of these contacts, it was hoped, would serve to validate the first hypothesis, that violence is not absent in synagogue-affiliated families. There was concern that the congregants might not be willing to share information regarding family violence due to the sensitive nature of the topic. Since the human services workers were sharing professional rather than personal experiences they were expected to be more will-

ing to reveal relevant material.

QUESTIONNAIRE

(Appendices D-1 and D-2)

The questionnaire administered to congregants consisted of four sections:

I. Demographic data, i.e., age, sex, marital status, education, occupation, income, religion, country of origin, size of family of origin, house size, employment record, mobility and synagogue affiliation.

II. Description of incidents, i.e., violence done to respondent, by the respondent's family and in other Jewish families known by respondent. In addition, information regarding the frequency of instances of violence and what the respondents did in response to the violence was solicited.

III. Reporting of incidents. Respondents were asked to whom they spoke concerning the incidents--to family members, friends, therapists, physicians, rabbis, cantors, secular school personnel, hotline workers, police, co-workers, Jewish educators, lawyers.

IV. Attitudes regarding family violence--whether the respondents considered it a problem in general and within the Jewish community.

Section II in the original questionnaire (Appendix D-1) consisted of checklist. Because congregants did not respond to this extremely detailed format, (perhaps because it was too threatening). The questionnaire was

changed to a more open-ended style (Appendix D-2). Congregants were much more responsive to this form of the questionnaire. Approximately forty of the first form and 169 of the second form were completed.

The purpose of Section I was to provide information that could be correlated with the other three sections. This was to test how Jewish familial violence compared with violence in the non-Jewish population. Some examples of the correlations are: income and violence, marital status and violence and family stability and violence.

The questions in the second section were geared to: (1) test the hypothesis that family violence is not absent in synagogue-affiliated families and (2) get data on our operational and conceptual definitions of violence.

Sections III and IV were formulated to test two hypotheses--that violent families do not reveal to synagogue professionals the violence that occurs and that Jews do not believe that family violence is a problem in the Jewish community.

S A M P L E

In order to explore the prevalence and parameters of Jewish family violence, a sample of nine congregations and their rabbis were selected, three each from the

Reform, Conservative and Orthodox movements. An attempt was made to check for the effect of denomination by dividing the nine congregations into three sub-samples, each of which was matched for size of congregation. Additionally, each movement was represented by a small (under 250 families), medium (350-450 families) and large (500 or more families) congregation. The congregations represented a broad socioeconomic and geographic cross-section of the Los Angeles Jewish community. Size, socioeconomic, and geographic factors were considered to assure randomness of sample and to eliminate differences within a denominational movement.

Two of the original nine rabbis selected were unwilling to participate in the study. Alternate and comparable congregations were chosen. A third selection was made following the refusal of one of the alternate rabbis to be involved in the study. A Jewish day school was substituted for one synagogue youth group, so that only eight rabbis were interviewed.

Organized groups within each congregation served as the sample pool for the survey segment of the study. Groups included were: sisterhoods, brotherhoods or men's clubs, and youth groups or religious school classes. One exception was the administration of the questionnaire to congregants in attendance at a Friday evening service. This was necessary because earlier meetings of regular

groups in that synagogue had been cancelled due to bad weather. Each of the synagogue organizations is designed to involve a different segment of the congregational membership. The following excerpts from the Reform Movement are examples of the goals and purposes of such organizations. Sisterhoods, for women, have the following purposes:

The objectives of this organization shall be to foster and further the highest ideals of Judaism as expressed through the synagogue, to promote closer fellowship among its members, and, in cooperation with the congregation, be a mentor for religious, social and educational activities.⁵

The group for men, Brotherhoods or Men's Clubs, have similar objectives: (1) fellowship, (2) adult education (3) service to the temple, and (4) service to the community.⁶

For adolescents, ages 12-18, Temple Youth Groups offer "...varied programs in the area of worship, study, service to community and congregation, leadership training, and artistic endeavor... Their activities range from serious Jewish study to purely social events, from volunteer work with underprivileged children to Jewish art festivals, from creative worship services to projects to aid a variety of causes, both at home and abroad."⁷

Administration of the Questionnaire

Names and telephone numbers of contact-persons

for each of the various groups were received from the rabbis. Telephone contact was made with each in order to arrange a date for the administration of the questionnaire to their group. It was explained that the rabbi had provided their name as the contact person for their group. The purpose of the call was to gain access to a group meeting in order to administer a questionnaire on how Jews deal with family problems. It was explained that the process involved a five minute presentation and approximately twenty minutes to complete the questionnaire.

Oral Presentation to Groups

A formalized oral presentation (Appendices C-1 and C-2) was delivered by one of the researchers to each of the fourteen groups, prior to the distribution of the questionnaire. Initially, there were three purposes for this presentation:

1. To present the problem of family violence as a legitimate issue.
2. To give "permission" to the respondents to discuss issues of family violence by telling them that Jewish cases of family violence were known to exist.
3. To give instructions for the completion of the questionnaire.

In revised oral presentation a fourth component was added: (4) to emphasize the importance and possible

future impact of this study.

The original oral presentation (C-1) was strictly informational. The additions in the later presentation (C-2) were for the purpose of motivating respondents on an emotional level. The current lack of programs to deal with the problem of family violence in the Jewish community were stressed. It was explained that only through their honesty and cooperation could the community be made aware of the seriousness of the problem and be forced to respond.

To ensure confidentiality and privacy, the respondents were asked to seat themselves so that they were not directly next to anyone else, in alternating seats or scattered throughout the room. Many groups did not follow these instructions, either because of a lack of concern or because the room was too small to allow this to happen.

The questionnaires were then distributed and the respondents completed them in an average of twenty minutes. The questionnaires were deposited in empty boxes to further ensure confidentiality. After all of the congregants has completed the questionnaire, the researcher in attendance answered any questions of the respondents.

Distribution of Resource Sheets

A family crisis resource list (Appendix E) was given to the leader of the group or to individual group members. It was hoped that this might provide some avenues of dealing with any family violence problems which may have risen into greater consciousness as a result of participation in the study. This list is a compilation of available resources for the reporting of incidents, crisis intervention, counseling and shelters in the greater Los Angeles area.

Analysis

The questionnaire was coded and processed by computer (Appendix F). All items were given separate numbers. Each question that dealt with episodes of violence was coded separately so that more than one incident could be recorded. When an incomplete description of what occurred in a violent incident was given, it was coded as "hitting" or "spanking", depending upon the material provided.

For the purpose of computer runs, the following items were collapsed into two or three categories:

(1) income, (2) age, (3) education, (4) marital status, (5) number of times the family moved, (6) number of years of synagogue membership, and (7) number of rooms in the home.

For occupational status, six categories were de-

veloped into which all of the responses fit. The categories were: (1) professional, (i.e. doctor, teacher, accountant, professor, nurse, pharmacist, rabbi, administrator) (2) homemaker, (3) semi-skilled (i.e. clerk, barber, child care worker, salesperson, truck driver), (4) white collar, (i.e. secretary, real estate agent, insurance salesperson, small business owner, contractor), (5) student, (6) retired.

All frequencies were collected, that is totals across all questionnaires were summed for each item. The following correlations were tested:

1. Abuse done to self and abuse done by self with:

- a. age
- b. income
- c. level of education
- d. size of home
- e. family size
- f. denomination
- g. country of origin
- h. number of moves
- i. abuse among other family members
- j. belief in existence of problem of family violence in the general community
- k. belief in the existence of the problem of family violence in the Jewish community
- l. belief that synagogue professionals should be involved in helping with the problems
- m. abuse done to self and abuse done by self were correlated with each other

2. All of the preceding correlations (a through m) were further correlated by age, dichotomized between those over 18 and those under 18.

3. Sibling violence (totals derived by adding

up all incidents involving siblings) was correlated with all of the variables listed under (1).

Anecdotal material extracted from the questionnaires, was used to illustrate significant correlations and findings.

The limitations of this study fall into five categories : (1) the sensitive nature of its subject (2) the parameters, (3) those arising from methodological problems, (4) time and money, and (5) those related to problems of coding.

The Sensitive Nature of the Subject

The discussion of physical family violence may be very threatening because of the stigma and shame attached to being an abuse or a victim. Some victims might also have feared that the abuser would discover the fact that they had shared information regarding him or her and as a result, become abusive. A sense of shame may have caused some respondents to feel discomfort while answering the questionnaire, particularly since their peers were sitting close by. Data may have been lost as a result of congregants' refusal to complete the questionnaire. Other information may have been lost because some congregants might have felt inhibited about writing out detailed descriptions of incidents of violence, and as a result, have under-reported incidents.

Parameters

This study primarily surveyed violence in synagogue affiliated families who live in metropolitan Los Angeles. This study may, therefore, not be applicable to non-affiliated Jews or to Jews living outside of Los Angeles. A further limitation may be the preponderance of females in the sample--131 women as compared to 74 men. These factors may cause the respondents not to be fully representative of the population from which they were drawn. Because of constraints of time and money, only one meeting of each group was sampled. Since many meetings were not attended by the majority of the group members, a somewhat biased sample may have been drawn.

Methodological Problems

The principle method used in this study was the survey. A number of errors were made in the construction of the questionnaire:

1. The following pertinent demographic data was not requested:
 - a. Spouse's occupation
 - b. number of people in the family
of current residence
 - c. marital status of the parents of
minors
 - d. family composition

- e. length of marriage
- 2. No request was made for full descriptions of violent episodes, although most respondents supplied this information unsolicited.
- 3. There was no question regarding the relationship with other families known to the respondents who engaged in violent behavior.

Since three rabbis refused to participate in this study, the sample may have been biased in the direction of including the more socially oriented rabbis, and may have yielded somewhat unrepresentative responses.

Time and Money

Because of financial and time limitations it was not possible to conduct in-depth interviews with rabbis and with congregants who reported instances of abuse. Only a limited number of congregational groups were contacted and only those members in attendance at one meeting filled out questionnaires. It was not possible to compute some desired correlations because of limitations in computer time. Due to these factors the scope of the study had to be somewhat curtailed.

Coding

After the questionnaire had been designed and completed by the congregants, it was discovered that the format used was not conducive to determine at what point in a participant's life a violent act occurred. It was also difficult to correlate the types of violence used with other variables. Interval scales were not used as extensively in data collection as they may have been. Therefore, many of the more sensitive statistical measures could not be used. By the same token, the small sample may have reduced the significance of statistical data in any event.

It is important to note, however, that in spite of these shortcomings, this study did succeed in testing the hypotheses and does provide a solid basis for further research. It is hoped that these limitations can be overcome in later studies, to further increase understanding of the problem of Jewish family violence.

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HELPING THE PROFESSIONALS
PERSPECTIVE ON FAMILY VIOLENCE

Some people turn to helping agencies and crisis-intervention institutions for help with problems of family violence. In order to determine whether Jews also seek such help to deal with violence in their families, a sample of professionals in organizational settings, as well as in private practice, was interviewed.

The professional sources of potential assistance contacted fall into the following categories:

1. Facilities providing crisis-intervention
 - a. hotlines
 - b. hospital-emergency rooms
 - c. police
2. Physicians in private practice
3. Family crisis shelters
4. Mental health professionals
 - a. Psychiatrists
 - b. Social workers, agency affiliated and
in private practice
 - c. Therapists other than (a) and (b)
5. Jewish Press
6. Rabbis

Crisis Intervention

The worker at the Rape Crisis Center was able to describe only twenty-one cases of Jewish women who reported violence in their homes during the six month period. This represents a small percentage of the total number of women who contacted the line and appears to be under representative of the proportion of Jews in the population. All twenty-one women clearly identified themselves as members of synagogues or of other Jewish organizations. All of the women were over forty years of age and all had children. None were employed, but most had an education of at least college level.

None of the women reported experiencing violence in their childhood. They had not been battered as children, nor do they remember their mothers being battered. They say that their own children are not aware of the battering that goes on in their home. This makes it very difficult for them to recognize that what they are experiencing is violence.

These women seem to have a variety of personality and relationship difficulties. They appear to have difficulty trusting others. Although some are associated with women's organizations, they do not have sharing and supportive relationships with other women; many feel very isolated. Most were extremely hesitant to

contact Jewish sources for fear of the harm it might do to their husband's standing in the community. Socio-economically, all were upper-middle or upper-class. Their husbands were either surgeons, attorneys or other high-income, high-status professionals.

In addition to hot lines, emergency rooms can identify Jewish family violence cases. Of seven hospitals contacted for information, all but one identified Jewish family violence cases.

Few cases of child abuse were reported. Although the religion of patients is rarely requested, these hospitals were in predominantly Jewish areas. This might result in one of two consequences: (1) A large number of Jewish cases, whose identity, as Jews, was not determined, or (2) Jewish victims who go elsewhere for fear of being recognized. It should be noted, nevertheless, that a few cases were reported.

The hospitals did report cases of Jewish wife battering. One emergency room worker stated that the incidence of wife battering in the Jewish community was equal to that of the general population (approximately 20 percent). Differences, however, emerge in the types of abuse seen and in the behavior of the women and their families.

The act of violence generally involves the hand i.e., hitting, pushing, and throwing of the victim, with

very infrequent use of objects. The injuries tend to be in non-visible (or generally covered) parts of the body-- the breasts, stomach, buttocks. Several instances of back injuries were reported.

Unlike non-Jewish cases, the hospital workers reported, the women often came to the emergency room accompanied by their husbands. Though the hospital personnel suspected that they had private physicians, the women refused to give the doctor's name. Hospitals seldom saw the same woman twice.

Police

Two police divisions were contacted. One officer reported that Jewish child abuse does occur; it is, however, not often reported by Jews themselves, but rather by schools (including Jewish day schools). He felt it important to note that Jews tend to go to any length to avoid involving their children with law enforcement agencies or the police, and that they would go to any length to avoid reporting incidents to the police.

This pattern of not reporting to the police also holds true with regard to wife battering. Few of the cases described by the police were self-reported; it was rather the neighbors who called the police. Even this was a relatively rare occurrence.

Physicians in Private Practice

Two physicians, an internist and a pediatrician, both serving a mainly Jewish population were interviewed.

The internist described several cases which appeared to involve wife battering, but were never identified as such. For example, a woman with facial contusions and black eyes stated, "I fell down the stairs."

The pediatrician reported that he had few cases of child abuse in his practice, but was able to describe one. This case was not from the most unexpected family situation wealthy, charming and sophisticated parents. A boy came in with black eyes and bruises; although the mother admitted striking the child, the doctor decided not to report the case but rather to work with the family. The family went into therapy and the doctor felt that the abuse had stopped when the child's teacher reported the family to protective services. The mother was picked up, but released under the supervision of a psychiatrist.

Family Crisis Shelters

Although few Jewish battered women and their children seek refuge in shelters in the United States, Israeli women are using this resource in increasing numbers. Despite the fact that the two shelters in Israel—one in Haifa and one in Herzlia—are filled to capacity, they only serve a fraction of the people in need. Of

shelters users, 70 percent return to their husband, while 30 percent continue to live apart from their husbands, usually without receiving a divorce.¹

In New York, two shelter projects geared particularly to Jewish women, are currently being developed. The Hartman Ym-YMHA in Far Rockaway, New York, is currently awaiting government funding to establish a shelter for Orthodox women. The National Jewish Resource Center in conjunction with Jewish organizations in Rockland County, is establishing a range of services, including "abuse centers", to help abusive and violent families. In Baltimore, National Council of Jewish Women is partially funding the work of a non-demoninational shelter, in the hope of serving abused Jewish women.²

Mental Health Professionals

Jews are more likely to turn to mental health professionals in times of crisis. Various mental health professionals, psychiatrists, social workers in community agencies, residential treatment, and private practice and a Marriage, Family and Child Counselor were contacted concerning their knowledge of the problem of violence in the Jewish family.

All ten psychiatrists had seen Jewish women who had been battered. The profile of the battered woman they described includes low self esteem and a dependent personality. They mentioned that these women were unlikely

to leave abusive home and families. They confirmed that the women were socio-economically upper-middle and upper class and that they were very active in the Jewish community. (In part, of course, this picture is a consequence of their being able to afford psychiatric services.

The workers in private practice had seen a variety of cases involving Jewish family violence. One considered the incidence to be at least 20 percent of her caseload, excluding sibling violence. If sibling violence were included, she thought the incidence would be as high as 50 percent. The MFC stated that none of the Jewish cases had been referred to her by Protective Services, but that they were all self-referred. The following are vignettes from the practice of private therapists:

1. A family consisting of mother and two children started work with a therapist. The 12 1/2 year old daughter had been caught shoplifting. The son, 14, was not acting out. The parents were divorced, but the father, an attorney, provided support for the family. The mother, who had been abused by her ex-husband, was afraid that if she hit one of the children, she would not be able to stop.
2. A retarded ten year old girl and her eight year old sister were physically abused by their social worker mother. The father not, Jewish, did not try to stop the abuse.
3. One case described by a private practitioner involved a woman who had been battered as a child by her father and who sought counseling because she saw herself as a potential batterer

of her own child.

Workers in Jewish agencies also identify numerous cases of family violence. It is nearly impossible, however, to make a definite statement regarding the statistical incidence of violence in the agency caseload. This is because agencies do not keep separate data of cases involving violence.

A review of the cases presented by agency workers, revealed that violence exists in all kinds of Jewish families, ranging from those of famous entertainers, attorneys, and physicians, to those of families on public assistance, including long term schizophrenics and substance abusers. The following examples illustrate this range:

1. The husband, a hairstylist, kicked his wife and hit his daughter. They came to a second Jewish agency, having had earlier contact with another agency for abuse of the two older sons.
2. Agencies also reported instances of incest. One agency worker referred to his work with a mother whose ten year old daughter had been sexually abused by her father. The father is currently serving a prison sentence for this connection.
3. A worker in a residential treatment agency recounted a case of a latency age boy who was sexually abused by his mother. The agency currently has in placement two girls who have been sexually abused.
4. A mental health clinic was able to describe several cases. The first was that of an Orthodox family in which a high school age

boy was abusive to his mother, hitting, pushing, kicking, etc. The father was also living at home.

5. A second case involved a Conservative rabbi in a small Pennsylvania town. He repeatedly slapped his wife. Although she was never hospitalized, the marks of his violence were visible.

According to a residential worker, a profile of the Jewish family in which children are abused shows this pattern.

(1) The parents have extremely unreasonable expectations that their children work out their own problems; (2) The parents are increasingly caught up in middle and upper-class pressures; (3) The family will do anything to avoid contact with the legal system, including sending the children to boarding school or placing them in residential treatment; (4) The father may be extremely abusive, both verbally and physically, but when the child strikes back, he or she is identified as violent; (5) The mother is often the "all-round" victim in the family. The father abuses the mother, and the children, as it were, taking their clue from him, act out against her as well; (6) Parental substance abuse may lead to abusive action. Some parents even started their children on drugs; (7) Jews are less likely to use instruments in their violent actions. Several cases of poisoning and burning, however, were reported.

A phenomenon which emerged from work with Holocaust survivors and their children is the prevalence of violence in these families. As a result of a range of dynamics, including rage, identification with the oppressor, an incomplete mourning process, the survivor may either express the anger directly or transmit it to his or her children to be expressed for the survivor. Children of survivors often exhibit self-destructive behavior. The free-floating anger in the family seems to result in an atmosphere of constant fear.

The primary type of family violence seen is child abuse rather than spousal abuse. Grandparents abuse their grandchildren physically. Fathers are more likely to be abusive than are mothers; Holocaust survivors seem to have a high divorce rate. Hand slapping, pushing, and shoving are the usual types of violence.

A worker, involved in a family violence court in New York City, reported that 25 percent of the cases seen were Jewish. These cases included people from all walks of life-- doctors, lawyers, some "famous" people -- and covered the entire range of mental health status of families. Much abuse was due to total mental breakdown (decomposition) and among older couples, abuse was associated with long-term sadomasochistic relationships. Some of the families responded violently to the high level of tension in their lives without showing any other

overt severe psychological disorders. One recurrent pattern was that of a family with a schizophrenic, infantilized son, allied with the mother and a paranoid daughter who was allied with the father. The violence occurred among the children who were acting out the parental conflicts. At the same time, there was a consensus that infidelity, which played a major role in family violence in the general population, did not appear to be a major factor in Jewish family violence.

Rabbis

Rabbis ordained to meet the spiritual needs of the Jewish people represent a concerned religious community.³ As the societal structure has changed, so has the rabbis' role in counseling.⁴ In addition to the rabbi's role as a community spokesperson, the new role of rabbi includes that of pastor/counselor.⁵

Clergy play a major role in national mental health; one report shows that 42 percent of emotionally troubled persons seek out a minister for help first. Of these, 65 percent reported satisfaction with the help they receive.⁶

As leaders of a flock, rabbis also focus on a larger population. They know the characteristics of their congregation. Their continuous relationship with a specific group of people, makes assessment and action on problems faster and easier.⁷

In their counseling relationships, the rabbis' primary focus is on short-term help. The rabbi's role is to refer the congregant to other sources of help if they need more indepth or prolonged therapy (FN Caplan, p. 22). Because of the rabbis' joint role as religious leader and counselor, it is important to include their thinking and experience in this study.

Eight out of the nine rabbis selected for this study were interviewed with regard to their knowledge of and experience with Jewish family violence. The ninth rabbi appeared reluctant to be involved and was therefore not interviewed. All interviews were conducted with a semi-structured interview guide. (Appendix B).

All of the rabbis saw counseling as a part of their rabbinic role. Four stated that they spend 5 to 10 percent of their time counseling congregants: two spent 10 to 15 percent of their time this way; one spend 20 percent and one as much as 50 percent. All of the rabbis did both marital and family counseling. All said that they did not do long-term therapy with congregants, and that they would make a referral if the situation warranted it. Referrals were made primarily to private therapists and secondarily to Jewish Family Service.

When asked whether family violence is a problem in the Jewish community, six responded affirmatively, one said "No" and one said he did not know. Specific respon-

ses included: (1) Yes, anything a non-Jewish neighbor would do, a Jew would do. A Jew who sees the uniqueness of being Jewish wouldn't do such things. (2) Yes, but Jews have a better record than the general population. (3) It might be, but I would be very surprised if there was anything like that going on in my congregation.

All rabbis reported knowledge of at least one case of Jewish family violence. Five knew of both child abuse and spousal abuse, one knew only of child abuse, and two only of wife abuse. The majority reported, however, that they did not know of cases of unexplained marks on children or adults, or of unusual punishment. Two mentioned husbands who isolated their wives. One referred to cases of "marks on children", having been observed in the synagogue nursery school. In total, twenty-four cases of family violence were reported by the eight rabbis of the congregations included in this study. The following are a few illustrations from the rabbis' experiences:

Child Abuse

A girl of ten was beaten by her parents. Both of her parents were professional. The family was very wealthy. The mother threatened the father with a knife. The mother was prosecuted for child abuse, but was released. The rabbi, who had been working with the family on an on-going basis, finally threatened to release what he knew about the family to the press. The family left the congregation (Reform).

Two cases of sexual abuse of girls were reported

in one congregation. Both were from financially comfortable families. (Reform)

Spousal Abuse

A forty year old temple employee was married to a Jewish man who beat her repeatedly. She divorced him and remarried--to a non-Jew, "who has never laid a hand on her". (Conservative).

An Orthodox couple, the husband a rabbi, the wife very active in the Jewish community were going through divorce proceedings, mainly because of the psychological abuse of the wife. She had also reported physical abuse by her husband of both her and the children. When the Bet Din completed the proceedings, the husband became so violently enraged that to protect themselves and the wife, the rabbis locked themselves in the house and called the police.

When asked, what a rabbi should do if given information about family violence in the congregation, seven said they would involve themselves and one stated he "didn't like to be intrusive." One rabbi said "never shy away from problems, but provide help for the family." All who said they would involve themselves said they would talk to the family and check it out.

When asked whether they would contact the authorities, protective services or police, opinions were evenly divided between those who said they would and those who wouldn't. Three rabbis had actually made such contact.

The rabbis were asked to describe what might be a "typical" abusive family or the circumstances that would

create an abusive family. Five said that there were no specific fathers that would make abusive families noticeably different from non-abusive families. Three rabbis mentioned possible differences: (1) The family would most likely be lower middle-class, first-generation immigrant Jews; (2) they would be of the lower economic classes and/or unemployed; and (3) they would be religiously more rigid.

The response to a question regarding their interest in a training program was evenly divided. Four rabbis said they were interested, four were not. Of those who were not interested, one expected to retire soon, one was currently under the supervision of a psychologist, one did not think family violence occurred in his congregation, and one "wasn't convinced that it was a problem and other things have greater priority."

Some comments by rabbis are worthy of being quoted: (1) "A truly observant Jew is not truly observant if he beats his wife." (2) "Battered women would not necessarily go to their rabbis, because of their fear that their image will be shattered in the congregation and it will affect their relationship with the rabbi."

In summary, all of the human service professionals interviewed had some knowledge of and exposure to Jewish family violence. Some individuals held stereotypical views of who was more likely to be involved in violent

family interactions, while others understood that family violence exists among all segments of the Jewish population. The following chapter describes responses of Jewish congregants to a questionnaire regarding their knowledge of specific instances of family violence and of their opinions regarding it. Just as professionals had knowledge of and exposure to this issue, so the congregants were aware of and involved with family violence.

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The Congregant's Speak

To get some impressions regarding the existence, prevalence, parameters, and nature of physical violence in Jewish families, a sample of the members of nine congregations in metropolitan Los Angeles were asked to complete a questionnaire concerning their experience and knowledge of Jewish family violence. Five sisterhoods, three brotherhoods, five youth groups, members in attendance at a Shabbat service, and two classes in a Jewish Day School served as the respondents. The fourteen groups completed a total of 209 questionnaires. Thirty-four individuals were from Orthodox, 101 from Conservative, and seventy-four from Reform groups. The sample included more females, (131) than males (74). Ages range from eleven to eighty-one, including seventy-two respondents between the ages of eleven and eighteen, members of youth groups. There was a significant difference between the ages of Orthodox, Conservative, and Reform groups, with the Orthodox tending to be the oldest. ($F=10.468$, $p.0001$).

The bulk of the adult sample is married (119 married, two divorced, ten widowed, and five no response). Most of the adults had some college or higher education (thirty-five high school or less, fifty-two some college, and forty-eight college graduate or more). Almost two

thirds of the adult respondents were employed (seventy-nine employed thirty-seven not employed, and nineteen did not respond). Most of the spouses are also employed (sixty-seven employed and twenty-four not employed). The majority of the adult respondents and the parents of those children who listed their parents' occupation were largely in professional (forty-seven percent white collar) occupations. The remaining included fifteen homemakers, thirty-one semi-skilled, and nine retired; sixty-three did not respond. The mean income of the sample is \$37,950, with the mode between twenty and thirty thousand and the median income being \$31,090. As many as 13 percent reported incomes of over sixty thousand dollars, while seventy-seven respondents mostly young people, did not answer this question. There was no significant difference in income among the denominational groups. (F-2.87, P0.06).

Almost the entire sample (200) stated they were born Jewish. Only three were not born Jewish. All but one respondent was currently Jewish; the two respondents who were not born Jewish, had converted. Sixty percent of the respondents reported that their spouse was born Jewish. One respondent's spouse was listed as not born Jewish but currently Jewish, indicating a conversion.

Most of the sample is American born; 80 percent were born in the United States, 10 percent were not born in

the United States and 10 percent did not respond. Of those not born in the United States, sixteen were born in Europe and eight were born elsewhere--in Canada, South America and the Middle East. However, a large portion of the sample consisted of first generation Americans. Forty-one percent reported that their mothers had not been born in the United States and forty-four percent that their fathers had not. Most of the parents not born in the United States were born in Eastern Europe.

The size of families of origin varied from two people to seventeen people with a mean of 4.995 people. There is a significant difference among the denominations with regard to the size of the family of origin with the Orthodox coming from the largest and the Reform group from the smallest families of origin. ($F=3.974$, $p. 02$).

Currently, respondents live in homes ranging in size from two to fifteen rooms with the median being 7.048. There is a significant difference with regard to house size among the denominations, with Reform having the largest number of rooms and Orthodox having the smallest. ($F=6.576$, $p 001$).

Forty-four percent of the sample reported no move during the past ten years. Of the 56 percent who did move 28 percent moved once, 26 percent moved between two and four times, and seven percent moved five or

more times. There was no significant difference among the denominations with regard to the number of moves.

Presence of Violence -
Prevalence and Parameters

The responses strongly support the first hypothesis, that violence is not absent among synagogue-affiliated families.

For the purposes of this study, violence was defined to include hitting, slapping, punching, pushing, throwing an object that may do harm, kicking, assaulting, burning, knifing, shooting, forced social isolation and being forced to engage in sexual activity. The "normal" spanking or "grounding" of a child were not included in the frequency counts or other statistics.

One hundred and eighteen people (59 percent) reported having been struck by a family member, while only eighty-two (41 percent) stated they had not been struck. Among those who reported having been struck, there was no significant difference with regard to marital status, country of origin, gender, or denominational affiliation. It would appear that violence cuts across all boundaries of the affiliated Jewish community.

There was, however, a significant difference in income between those who reported having been subject to and those who did not. Those with higher incomes today were more likely to report having been struck at some time in their lives. (F-4.124, p .04). This is at variance with the usually cited statistics to the effect

that there is more violence in lower socio-economic families. Those who responded "Yes" to "Has anyone in your family ever physically struck out against you?" currently also live in large homes (7.33 rooms) than those who responded "No" to the same question, (6.66 rooms) $F=4.143$, $p .04$) suggesting a positive correlation of violence with income.

Those who responded "Yes" to the same question were younger than the mean age of 38. ($F=31.03$, $p .0001$). This may indicate that:

1. there is more violence today than there had been previously,
2. that younger people are more willing to report family violence,
3. because the respondents are younger, they can more clearly recall the incidents and are, therefore, better able to report them.

Finally, those who responded "Yes" to "Has anyone in your family ever physically struck out against you?" had moved more often in the last ten years (1.64 moves) than those who responded "No" to the same question (.96 moves). ($F=5.676$, $p .01$). This supports the findings in the general literature that violent families are less rooted and connected with social networks than are the non-violent families.

In response to the question "Have you ever physically struck out against a member of your family? 112 (56 percent) responded "Yes" and eighty-eight (44 percent) "No". Those who responded affirmatively came from significantly larger families than those who responded negatively. ($X^2=10.2281$, $df=2$, Kramers V=.419, $p .006$). None of the other demographic variables--gender, education, marital status, country of origin of the family, and demoninational affiliation--showed any difference between those who responded negatively and those who did positively to this question. It appears, thus, that with the exception of family size, there are no demographic differences between those who strike out at family members and those who do not.

Unlike the response on violence perpetuated by the respondents, or done to the respondents, with regard to violence committed by other family members to members of the family other than the respondent, the positive and negative responses were equal. Half (96) reported such experience while the other half (97) did not. In keeping with the earlier findings, younger respondents were the ones who were more likely to respond affirmatively to this question. ($F=4.891$, $p .02$). Again, there were no other demographic differences that significantly separated affirmative respondents from negative ones.

When asked, "Do you know of any other Jewish families where the members have physically struck out against each other?" seventy-nine (42 percent) said "Yes" and 108 (58 percent "No". This response was surprising, since it had been expected that respondents would more readily provide information regarding non-family members because it was less threatening.

The issues of social isolation and forced sexual activity were separated from the general physical violence questions. Twelve cases of social isolation (6 percent of those responding to this question) were reported. Most of the cases involved parents isolating children. One case, however, of a husband isolating a wife, was reported.

Four cases of forced sexual activity were described. One case involved a father and a daughter, two a step-father and two sisters and one case consisted of both parents and a son.

Two important findings emerged from a general view of the questionnaire responses. First, when violence committed on the individual was correlated with violence committed by the individual, a very high association existed ($\chi^2=33.09$, $p .001$).

Have you ever physically
struck out against a member
of your family?

	YES	NO	
Has anyone in your family ever physically struck out against you?	Yes	31	116
	No	56	81
	110	87	197

Second, when violence committed by the respondent was correlated with violence by other family members to each other, an equally high association emerged ($\chi^2=29.989$ p .001).

Have you ever physically
struck out against a member
of your family?

	YES	NO	
Has a member of your family (other than you) ever physi- cally struck out at another member of your family, aside from yourself?	Yes	23	94
	No	63	97
	105	86	191

These two results taken together strongly support the findings of Straus, Carlson, Steinmetz and others who indicate that there are families in which violence is endemic and that modeling plays a major role in family violence.¹

These two findings, which are mutually reinforcing, tend to indicate that Jews are subject to the same dynamics with regard to the familial patterns and perpetuation of violence as non-Jews.

Fifty-six cases of striking beyond spanking inflicted by parents on children were reported as having been experienced by the respondents and thirty cases were reported as having been inflicted by the respondent. Additionally twenty-seven cases reported such striking among members of the respondent's family. In other Jewish families known to the respondent, thirty-five cases of parents striking children beyond spanking, were reported. The frequencies of striking ranged from once to constantly with the majority falling in the categories "a few times" and "often".

The following cases were chosen because of their completeness and representativeness of their comments. They are examples of the child abuse found in the study.

A sixty-year old Conservative Jewish man stated that he physically struck out at his infant son. "After realizing the futility of same the hitting -- I stopped." In response to the question of who was most helpful to him in this situation, the respondent stated, "Physician made us realize that our son was colic (sick) and it was no fault of his."

This is a classic example of the prevalent existence of child abuse during the first three years of a

child's life. The child's inability to express him or herself and the parent's frustration over the constant crying often leads to abuse.

Child abuse can often be brutal as shown by the following case described by a young Orthodox woman.

A father kicked his pre-adolescent son across the gym floor because the child did not come out of the gym on time. She comments, "I was afraid to speak about it to the parents-- I tried to have a talk with the child."

Another case showing brutality and the use of an instrument in the abuse was reported by a fifteen year old Conservative girl. "I was over my friend's house and her father hit her with a broomstick and his hand. It was really sad."

The following case illustrates how one child in a family can be singled out as the target of abuse. A forty-seven year old Conservative man wrote,

"As a child, we had a neighbor who constantly beat up his daughter (oldest of two daughters in the family). The beatings were constant."

One element of abuse is the forced isolation of the abused party. A fifty-six year old Orthodox woman described the following:

In a friend's family a retarded boy was never allowed out of the house by his parents. This happened constantly. The respondent said, "There was nothing I could do. They were not close friends."

Another form of child abuse is incest or the sexual abuse of children. As stated earlier, four cases were

reported in the study. Two cases came from the questionnaire of a sixteen year old Conservative girl. She wrote, "This was done to me and my sister by ex stepdad." She wrote this in response to the question regarding forced sexual activity within the family.

Twenty-two cases of spousal abuse were reported. Twenty cases involving husbands striking their wife and two were cases of wives striking their husband. Most of the reported spousal abuse was described as occurring in other Jewish families. It is not likely that these cases were duplications of each other, because the responses were from all groups with only one or two occurring in each group. Although most of the cases of spousal abuse were reported as having occurred outside of the respondent's family, it is possible that some of these cases are in actuality self-reports, since it is often easier to say "I have a friend who has a problem..." than to admit to having a problem oneself, particularly if one's peers are looking over one's shoulder.

The following case of spousal abuse inflicted on her was reported by a thirty-four year old Reform Jewish woman. Both her father and her ex-husband often struck her. When her father did so, she "got upset". She divorced her ex-husband and has since remarried.

A forty-six year old synagogue professional reported that he has struck his wife a few times. When asked

what he did about it, he stated "I apologized". He also reported knowing of other cases of husbands striking their wife in the Jewish community.

As two cases of wives striking their husbands were reported, an example of this is included. A fifty year old Conservative man stated his wife struck out against him a few times. In response to what he did about it, he replied, "I restrained her." Studies have shown that women do strike out against their husbands. The result, however, is usually a more brutal attack by the husband in response.

Sibling violence comprised a large proportion of the violence, reported. A total of 129 incidents were reported. The incidents ranged from "sibling squabbles" to "an older brother pushing me (younger brother) out of a moving car." Although the majority of the cases would not be considered abusive because most children fight with one another, several cases may definitely be described as abusive or part of a violent pattern within an abusive family.

High correlations emerged between reports of sibling violence and violent behavior shown to and by the respondent.

(1) Those who said "Yes" to "Has anyone in your family ever physically struck out against you?" reported more cases of sibling violence than those who said "No"

to the same question. ($F=59.810$, $p .001$).

(2) Those who responded "Yes" to "Have you ever physically struck out against a member of your family?" also reported more cases of sibling violence than those who said "No" to the same question. ($F=43.01$, $p .001$).

(3) Those who said "Yes" to "Has a member of your family (other than you) ever physically struck out at another member of your family, aside from yourself?" reported more cases of sibling violence than those who said "No" to the same question. ($F=16.509$, $p .001$).

These findings have several possible explanations:

(1) If respondents reported any type of family violence, they were likely to report sibling violence (since violence among siblings seems to be most common). (2) If respondents were aware of and willing to report any family violence, they were more likely to be aware of and report sibling violence. (3) A large percentage of the study sample was composed of people under eighteen years of age, and those individuals are more likely to report it. (4) It is also possible that the correlation of sibling violence with violence done by and to other family members reflects family patterns. Societal norms and modeling of parental behavior by children coupled with family values may also be contributing factors. The dynamics which foster violent behavior between two sub-units of the family, often are mirrored

in the other sub-units; thus, the hitting of children by parents may cause the children to hit one another.

Violence becomes an acceptable form of problem solving for all family members. Indeed, within such a family, violence may be seen as the only available problem solving technique.

This study addresses most aspects of family violence. The preceding sections discussed child abuse, spousal abuse and sibling violence. A fairly large portion of the sample shows evidence of extensive involvement of entire families in violent patterns of behavior, often across generational lines and among many members of the family of origin. This is in keeping with findings regarding the correlations between being hit and witnessing violence among other family members and resorting to violence oneself.

The following are excerpts from questionnaires which illustrate family violence as a transmitted phenomenon.

A Reform Jewish woman, 39 reports that her father, sister and mother struck her. She recounts that she cried and felt angry and hit her sister back. She in turn has struck her daughter and her husband. Her daughters also strike each other. Her sister often strikes her children to whom the respondent gives emotional support. Her sister has been socially isolated

by her family. This woman reports an income of \$60,000-\$70,000.

A Conservative Jewish man, 55, reports being struck by his mother and grandmother. He in turn struck his wife and daughters. The respondent's son strikes his mother, the respondent's wife. When asked whether violence is a problem in the Jewish community the respondent replied "No". This case reflects the passing on of hostility towards women from father to son (complete denial and the taking of violent behavior for granted.)

A Conservative woman, 50, reports about her violent family of origin. Her father and brother struck both her and her mother. She struck both her brother and her mother. She recounts, "After I struck out at them I usually cried and then attempted to show them by hugging and kissing that I really loved them and was sorry for what I did." When the other family members struck one another, she "ran away from the scene and cried and hid from them until it was quiet." This suggests children in violent families often feel fear, and describes what may have been a situation in which her being fearful of being caught in the middle, of being struck herself. When asked whether she thought family violence was a problem in the Jewish community, she replied that she was "unsure".

A Conservative Jewish girl, 14, shows how the experiencing and witnessing of violence may cause it to become acceptable behavior. She reports being hit by her brothers, having hit her brothers, and witnessing her brothers striking each other. She then recounts how her cousin strikes out at her mother and states she did "nothing, just left the room. It wasn't anything, just my cousin was rude or something."

The fact that violence committed on a child will, in turn, be reenacted by that individual, is illustrated in the case of a twenty-two year old Conservative man. He describes his mother and father "slapping, hitting and pushing me." He then reports slapping, hitting and pushing his sister. He also describes "Hitting and slapping of sister by mother and father." The parallel of violent methods among family members is a repeated phenomenon in the sample.

Aside from cases that show how violence is transmitted within the violent family, there are cases that illustrate the pervasive quality of violence and fear in families in which violence is used. A twenty-four year old Conservative Jewish man describes his family of origin. He was often struck by his father, struck a few times by his mother and brother. He "fought back with his brother and mother or he left the room. Once he left home because of beatings by father." He also states

that his father struck his mother at which time he "stepped in more often than not to protect his mother."

A very remarkable case of the fear and narrowing of a person's frame of reference and connection with the outside world as a result of violence is displayed in the following case:

A forty-nine year old Reform Jew who describes herself as "housewife, mother, maid, slave, pillar of strength" states "My husband freaks out if I yell. I stopped hitting my kids when I realized through therapy twelve years ago that I was hurting them with my frustrations. Only about two rages since then caused me to get physical with my children. I often fantasize my husband's death, usually through natural causes or an accident, but sometimes by my violence." This is a very common process among abused women. This woman then goes on to describe abuse at the hands of her husband. She states that she is socially isolated "by my husband's need to be with me whenever he is home, but he is aided in isolating me by my own insecurities, my feeling that all people who care live where we used to live, and by my need for his approval. (I don't like his reaction when I'm not there when he wants me)." She describes what sounds like a classic example of wife abuse, the isolating of the woman and repeatedly affirming her sole role of being a provider of emotional needs. The woman must be there at

her husband's whim. Though she does not describe her husband's behavior when she is not there for him, one gets the sense that it must be very frightening.

This woman also states that help was gotten for the family at a social service agency, but added, "I was afraid my husband would not continue if I said too much." She also states, "My husband had therapy for about five years, but stopped when it got too threatening. He learned a great deal intellectually and applies it in business." (Note: husband has been unemployed for five years). She also states she spoke to a rabbi "partially, but not in depth."

When asked whether family violence was a problem in the Jewish community she first replied, "No" and then corrected herself to, "I don't know". In response to the request to describe cases of Jewish family violence, she said "I truly do not know of any."

Jewish Violence and Reporting

The second hypothesis, that violent families do not take their problems to synagogue professionals, was explored by the question of whether respondents had discussed violent incidents with anyone. Of those who reported incidents of family violence, sixty-seven stated that they had spoken to someone, while fifty-six had

not. Eighty-six people did not answer this question, either because they reported no incidents of violence or they chose not to complete the questionnaire. Those who responded affirmatively often reported speaking to more than one person.

Respondents most frequently spoke to other family members concerning family violence (fifty-three). Thirty individuals stated that they had spoken to a friend and eighteen to private therapists. The following is the remainder of the list of people who respondent's spoke, in order of frequency: Secular School personnel (7) Physician (6) Rabbi (5) Jewish Educator (4) Cantor (3) Social Service Agency (2) Co-worker (1) Hotline worker. None of the respondents reported having spoken to a mental health agency or the police.

The respondents overwhelmingly kept the knowledge of violent incidents within their circle of intimates-- among family members and friends. The low number of individuals who reported official contacts is keeping with the low percentage of Jews that appear in official family violence statistics-- which are primarily drawn from police records and public agency reports. Nobody in our sample reported contacting the police. If this response is representative of the reporting of the Jewish synagogue-affiliated population of Los Angeles

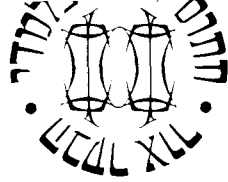
one can expect the official statistics to be considerably lower than the actual incidence of Jewish family violence.

When deciding to seek help outside the respondent's intimate circle, synagogue professionals were infrequently selected. The reasons why only ten people reported seeking help from synagogue professionals is not immediately available in this study. One may speculate, however, that there is stigma and shame felt by congregants in exposing themselves within the Jewish community, especially to authority figures such as rabbis. Respondents felt strongly, however, about the importance of the synagogue professionals' role in helping with this problem. Almost all, 83 percent, stated that they felt that synagogue professionals should be involved in trying to help with the problem of family violence, while only 17 percent felt that they should not be involved. Thirty-seven did not respond to the question.

A few selected comments show the feelings of the respondents regarding the involvement of synagogue professionals.

Yes -- because I feel that they have a lot (sic) experience and can help.

Absolutely. These people are "public servants". As a teacher I direct for help to agencies and advise within the realm of my knowledge whenever necessary and possible. I not only think they should be involved and made



HEBREW UNION COLLEGE—JEWISH INSTITUTE OF RELIGION

Cincinnati • New York • Los Angeles • Jerusalem

January 7, 1980

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(213) 749-3424

Dear Rabbi

You and your congregation have been selected as one of the synagogues to help provide information for a study of some serious problems facing Jewish families today.

We are conducting this study in conjunction with our work at the University of Southern California, School of Social Work, and the Hebrew Union College, School of Jewish Communal Service.

We would like to arrange to speak with, and distribute questionnaires to, groups of your congregants.

We will be in touch with you within the next week, to arrange a mutually convenient appointment.

Should you wish to contact us, please write to us at:

Hebrew Union College
School of Jewish Communal Service
3077 University Avenue
Los Angeles, CA 90007

Or phone us at:

(213) 368-9632

We are looking forward to working with you.

Sincerely,

Betsy Giller

Ellen Goldsmith

available, I believe the Jewish community should be advised through Jewish magazines, newspapers, temples, etc. that such help is available readily.

Yes -- We all need somebody to look to when we have problems; what better than a religious leader?

Yes -- "By people sharing their problems and seeking guidance our professionals are helpful."

Many people stipulated, however, that synagogue professionals should not be involved without proper training:

"If they are qualified, and the people involved are willing to ask assistance."

Jewish professionals are not, merely by their position, trained or capable in this area. They could do more harm than good if untrained and without true professional back-up.

There were a few comments which expressed the feeling that synagogue professionals should not be involved at all:

(No) Because they are not qualified to help with these problems; they can only listen. True I went to my relative when I was hit or bothered -- but none of the cases were ever serious -- just minor things.

(No) It's not their business.

An attempt was made to explore general attitudes toward family violence in the general community and in

the Jewish community. The overwhelming majority of respondents thought that family violence was a problem in the general community (62 percent Yes; 38 percent No). The opposite was true with regard to family violence in the Jewish community. Only 39 percent felt violence was a problem in the Jewish community, while 61 percent felt it was not. This seems to reflect the respondents' notion of Jews as different from non-Jews with regard to family violence. The following quotations are illustrative:

"Jews love."

"Jews are usually pretty level-headed about this."

"Jews don't like violence; Jews are very calm people."

"No. The Jewish people have more respect for each other."

"No, Jewish families have a strong bond."

"Possibly, but to a lesser degree, possibly depending upon education, religious education, financial stress, etc."

"Because the people in this area are relatively brought up well."

"It is frowned upon."

Others seem to feel that if there is violence in

the Jewish community, it is the result of assimilation and of moving away from Jewish tradition:

Yes, it is a problem since we've become so secularized and Americanized.

(No, I feel in the ultra-religious Jewish community of which I am a member there is little or practically no family violence problem.)

No, I think that within the Jewish world (I'm only familiar with the Orthodox Jewish world) violence is virtually non-existent.

(It appears that due to family deterioration there is more violence and frustration.)

In general, those who feel that family violence is a problem in the Jewish community expressed the feeling that family violence is a human problem and:

"Jews are people, too."

"Since we are part of the community, what affects the community as a whole, good or bad, eventually affects us, too."

"Yes, Jewish people are not exempt from these kinds of problems."

"No more or less than in any other group."

In summary, the following general findings emerged from the questionnaire responses: First, like other groups in the general population, Jews experience family

violence, including child abuse, spousal abuse, sibling violence, and violence involving all the sub-systems within the family. This family violence exists across denominations, income, educational, and geographic lines. Though younger people report more violence, all age groups report some. More than half of all respondents reported at least one incident of violence.

Second, families experiencing violence are not turning to synagogue professionals for help. Instead they are keeping knowledge of family violence within the circle of their family and friends. They feel, however, that synagogue professionals should be available to help with the problem of family violence.

Although the respondents recognize the existence of family violence in the general community and may report violence in their own families, they do not acknowledge it in the Jewish community.

F O O T N O T E S •

1. Jennifer Baker Fleming, Stopping Wife Abuse (Garden City, New York: Anchor Press/Doubleday, 1979), p. 273.

TOWARDS AN UNDERSTANDING AND ELIMINATION
OF JEWISH FAMILY VIOLENCE - RECOMMENDATIONS
FOR COMMUNITY ACTION AND AREAS FOR FURTHER
STUDY

The family is one of the basic units of society and insures the perpetuation of culture and transmission of values and mores. Within each culture an idealized conception of the family has evolved. The contrast between these ideals of what should be and the realities of what actually exists in family life is an ongoing source of tension in both American and Jewish culture. Family violence is also affected by this tension. It exists in both communities yet is excluded from the framework of acceptable behavior of the family.

The Jew in American society functions with three sets of "shoulds" regarding the family, each of which contribute to the existence of and difficulty in acknowledging Jewish family violence. First, there is the American value system and its contrast to the realities of daily American family life. Secondly, there is the discrepancy between the Jewish value system and what actually occurs within the Jewish family. Thirdly, there is the tension between how Jews want non-Jews to view them and the reality of life in Jewish families and in the Jewish community.

The myths about the American family are well re-

flected in the popular American culture. The best known example of this ideal is the "Father Knows Best" family, where everyone loves one another, listen warmly and caringly to one another. Most importantly, no serious conflict ever arises. This is in stark contrast to the turmoil and travail of present day life. This myth is what Steinmetz and Straus refer to as "the myth of family consensus and harmony", which encourages the view that family violence is non-normative and deviant, and therefore can be disregarded as being a major societal problem.

The Jewish tradition is also replete with notions of harmony and love between family members. The rabbinic conception of marriage as an expression of holiness "kiddushin", demonstrates the high level of expectation that the marital couple must contend with. In reality, however, marriage is fraught with tension which the couple must resolve peacefully, within the sometimes ambiguous boundaries of Jewish tradition.

There is also a similar expectation that parents will provide for the emotional, physical, material and educational needs of children while also disciplining them. This they must do without resorting to any unacceptable behavior, including excessive use of physical force (the dimensions of which are never clearly defined).

These Jewish values regarding marriage and child-rearing are most succinctly expressed in the terms "Shalom Bayit" or "peace in the home". Violation of these idealized "shoulds" has such stigma attached to it, that reaching out for help to treat problems such as family violence is rarely even considered within the Jewish community. The desire not to challenge the myth of the Jewish family's immunity to such problems, leads family members to deny what goes on in their families. They continue to deny the abusive behavior even when they recognize the acts as being harmful or even dangerous. Most families, therefore, do not seek help, while the few who do, are often ignored because of the community's need to maintain its idealized vision of the Jewish family.

The phrase, "A shonde for the Goyim" or "It's a shame for the non-Jews to know" expresses the third tension. It is difficult for Jews to acknowledge serious problems such as family violence, and to seek help in solving them outside the Jewish community. Many Jews would like to believe that Jewish families are different from other families. There is shame in acknowledging to ourselves or to non-Jews that we may suffer from the same problems and may need help. All three of these tensions can be implicated in explaining why it has been so difficult to acknowledge the exis-

tence of family violence in the Jewish community, and to provide help for those involved in this problem. Even in this study, many respondents who reported incidents of violence, still believe that violence is not a problem in the Jewish community, while acknowledging its existence in the non-Jewish world. Just as the myth of family harmony and the ideal of "shalom bayit" would predict, those who suffer with these problems are isolated from the community and see themselves as unique, "bad" and alone. This study shows, however, that this is not true. Violence exists in the Jewish family, and individuals in the community are aware of it.

In contrast to what might have been expected, a great deal of information regarding Jewish family violence was exposed by each group contacted.

All professionals who participated in the study knew of cases of Jewish family violence. Almost all of the rabbis interviewed reported some knowledge of the problem. The congregants revealed a great deal of information regarding family violence. Every synagogue produced cases of family violence.

A total of twenty-two spousal abuse and 118 child abuse cases were revealed. Four cases of sexual abuse and eleven cases of social isolation were also reported.

One hundred and twenty-nine incidents of siblings striking one another were discussed. The abuse ranged

from sibling squabbles to an incident of an older brother pushing his younger brother out of a moving car.

These findings are consistent with all of the general literature surveyed. Although Jews were under represented in earlier studies, our findings indicate that the high level of violence which exists in the general community also occurs in the Jewish community. This incorporates the entire range of family violence, including sibling violence, spousal abuse, and child abuse.

The findings also indicate that violence is not a phenomenon confined to any one segment of the Jewish community. No difference was found in the amount of violence reported by the different denominations. With one exception, none of the other demographic data revealed any differences between those who were involved in the violence, and those who were not. These variables include sex, level of education, marital status, and country of origin of the family. This is consistent with all of the family violence literature which states that violence exists across all social boundaries. It is interesting to note that the only demographic information which showed a difference was income. In contrast to the myth that violence is a phenomenon of the lower socio-economic class, it was found that those respondents with higher incomes were

more likely to be involved with intrafamilial violence.

Repeatedly in the literature, family violence has been shown to be phenomenon transmitted from generation to generation. Child abusers were often abused children and wife batterers were often both abused children and witnesses to the battering of their mothers by their fathers. This was strongly validated by findings in this study. When violence done to the respondent was correlated with violence done by him or her, a very high association was shown. Second, when violence done by the respondent was correlated with violence done by other family members to one another, an equally high association emerged. These two findings strongly indicate that Jews, like non-Jews, transmit family violence from one generation to the next. The family is not, therefore, the seat of harmony and "shalom bayit" traditional values say that it should be. Instead it may be a training ground for the perpetuation of violence in the home.

In light of the gravity and extent of the problem, it is important to note to whom those suffering from family violence turned for help. The vast majority of those who did turn to anybody for help reported talking to other family members and friends, keeping the knowledge of family violence within their circle of intimates. The next most frequently consulted group

were private therapists. Only four respondents reported having spoken to a rabbi, four to a Jewish educator and two to a cantor. This finding strongly supports the hypothesis that violent Jewish families do not reveal their situation to synagogue professionals. The reason for this cannot be ascertained from this study, though fear, shame and stigma most probably play major roles. One would have to assume that shame regarding deviance from accepted Jewish cultural modes of behavior, in conjunction with fear of condemnation and censure from those in the community who act as gatekeepers, would mitigate against help being sought from those inside the Jewish community. There may also be doubts as to whether these people understand the problem well enough to be able to help.

It is interesting to note that none of the respondents reported having spoken to public agencies, including the police. This explains the absence or the low percentage of Jews that appear in official family violence statistics. This may also be reflective of a discomfort with revealing Jewish "failings" to the non-Jewish world. Though few people reported turning to synagogue professionals for help with the problems of family violence, the overwhelming majority felt that synagogue professionals should be involved in trying to

help with this problem. There seems to be a discrepancy between behavior and attitude regarding the role of the synagogue professionals. This is further complicated by the fact that the rabbis interviewed saw themselves as available and willing to help with this problem, but congregants did not utilize this resource.

The tensions discussed earlier, therefore, lead to four major results. American society is only now beginning to recognize that the family can be a violent and dangerous place. Jews continue to hold fast to their ideals of what should be, leading to the denial of the existence of a problem which is of major proportion. Those who suffer from their involvement with these problems are therefore made to feel that they have failed and remain isolated with their problems because they are ashamed of their deviance. They feel they cannot turn to their own community, because of shame and fear of rejection but at the same time, cannot go outside the community because of the stigma and the desire to prevent shame from coming to the Jews.

These results have serious implications for individuals experiencing family violence and for the Jewish community as a whole. They serve as the basis for many of the recommendations in the following two areas:

- (1) Needed policy changes and programs
- (2) Areas for further research

Policy Changes and Programs

These suggestions are based on the three levels of prevention--primary, secondary and tertiary. If any of them are to be implemented, there must be a greater recognition of the problem of Jewish family violence by the organized Jewish community, including Jewish Federations, their agencies and the synagogue and rabbinic communities. This recognition needs to be supported by changes in policy so that funding is made available for programs that deal with this problem. Policy changes must go from recognition of the phenomenon to education and open discussion of the problem. Only once the area is exposed and understood can new intervention strategies be developed beyond the primary level.

For the primary prevention of family violence in the Los Angeles Jewish community, the following programs are suggested:

- (1) Family life education for young families, in particular for those considering marriage and parenthood. This would involve parenting classes and premarital counseling by rabbis and social workers. The purpose of these programs is to strengthen family life and to provide more realistic expectations of family functioning. This will provide a more ade-

quate and constructive framework in which to deal with family tensions and frustrations without resorting to violence.

- (2) Community networking -- a system of Havurot, groupings of up to ten families who act as a Jewish extended family. This program has several advantages: (a) it reduces the isolation of the nuclear family; (b) it provides needed support during periods of stress; and (c) it allows for formal and informal education.
- (3) Education for the Jewish community at large regarding the existence and prevalence of Jewish family violence. Furthermore, there is a need to communicate to the lay community the necessity of programs to help those experience this problem.

Primary prevention also involves educating the professional community:

- (4) Education and training of Jewish professionals i.e. social workers, rabbis, cantors, educators, and center workers, as to the parameters of the problem. This would include information on how to recognize a potential or current abuser or victim, and how to make appropriate interventions and referrals. A

goal of this training is to build an internal network within the Jewish community that is responsive to issues of family violence. This interdisciplinary network should lead to early recognition of the problem and will allow for intervention at many levels.

These educational measures are the most important steps to take regarding family violence in the Jewish community because of the current lack of recognition of the problem. Until now, shame and denial have blinded and blocked the community's awareness of and response to the problem. We need to acknowledge that violence does exist before we are willing to support corrective programs. The stigma of being abused or of being abusive needs to be reduced before individuals can seek help. Professionals should also know how to handle family violence problems before they are confronted with them. Rabbis, educators, and social workers must help those who are suffering from abuse by making the proper referrals or by making positive therapeutic interventions.

Once the awareness of the lay and professional communities has been increased, the following secondary preventative programs can be introduced:

- (1) A hotline for abused women and children as well for the abusing spouse or parent.

This could be easily added to the present National Jewish Council of Women's hotline with additional training for the workers. A similar program would work with the Federation hotline for teenagers which is run in conjunction with Jewish Family Service.

(2) Create a joint counseling program for abusive families using Jewish Family Service, Jewish Big Brother, Vista Del Mar and Cedars Sinai Hospital. Each of these agencies now serve violent families, but not in coordination with one another. With joint programming and some possible support from the Jewish Centers, the families could be better served.

(3) Create family crisis centers or drop-in centers for "cooling down" periods. This will allow families to break the cycle of violence, by allowing members to remove themselves from the potentially abusive situation. The advantage of this is the protection of the victim from the abuser and the protection of the abuser from his or her own impulses. This is less stigmatizing than the upheaval caused by moving into a shelter. These could be established in Jewish community centers along the lines of "teen drop-in" centers.

(4) Homemaker services to provide respite relief and parenting models for abusive families. Homemaker services are particularly essential for highrisk families.

Some violent families already seek help from Jewish counseling agencies. Unfortunately, too many workers are not aware of the existence of family violence or are reluctant to explore it even in situations where it already exists. As a result, they do not provide enough of the needed services such as those listed above. Some of the required support services, of course, do not exist as yet. This is not only a result of lineworker's lack of intervention, but a direct product of the community's reluctance to recognize and give priority to the problem and to provide needed services.

For cases of abuse needing more drastic measures, tertiary treatment, some degree of institutional or out-of-home care may be needed. These include:

(1) Legal services for those who suffer from spousal abuse.

These could be offered through Jewish Legal Aid-Bet Zedek. All of the services should be made available to anyone who needs them regardless of income. It must be recognized that battered women rarely have ac-

cess to their husbands' income, no matter how high.

(2) Shelters for abused spouses and their children. No questions concerning money or social status should be used as criteria for entering since battered wealthy women need the services as much as the poorer women. These shelters should provide counseling as well as practical services for the entire family, in a Jewish environment. It is possible that these services could be provided out of volunteers' homes rather than in an institutional setting to reduce costs and stigma.

Areas for Further Research

Many questions and issues have been raised by both the findings and limitations of this study. These questions can be divided into three areas for further research:

- (1) Scope and parameters of the problem in the community.
 - (2) Questions raised by the limitations of this study.
 - (3) The role of the Jewish synagogue professional
- (1) Scope and parameters of the problem (demogra-

phic investigations)

(a) An expansion of the current study to include a broader sample of the Jewish community.

i.e. affiliated and unaffiliated Jews

(b) An in-depth comparison of denominational differences with regard to family violence.

(c) A systematic study of Jewish sibling violence.

(2) Questions raised by the limitations of this study. Due to errors in the construction of the questionnaire, and the restricted computer time, certain information was not elicited. These include:

(a) Types of violent methods employed by Jewish family violence.

(b) Precipitating causes of violent episodes.

(c) Specific information on the intergenerational transmission of family violence.

(d) A comparison of the rabbi's knowledge of the problem and the incidence of violence within congregation.

All four of these appear to require an in-depth interview methodology rather than the questionnaire survey.

(3) The role of the Jewish synagogue professional.

(a) Research as to why violent families are not turning to synagogue professionals for

help.

(b) An investigation into the formal training of rabbis as counselors. This is particularly relevant to their work with families.

Jewish family violence exists in larger numbers than generally thought. The magnitude of this problem prevents further denial of its existence. Jews, and particularly Jewish communal workers, have an obligation to face this problem and to help those who are suffering alone under this burden. Recognition and concern are not adequate, though. Concrete action needs to be taken. These recommendations are a beginning. The longer we wait to take action, the greater the likelihood that abuse will be perpetuated to yet another generation.

APPENDIX B

RABBINIC INTERVIEWS

1. Tell me something about your congregation? Any unique features? Size? Composition of membership?
2. How do you spend your time? What percent of time is spent in counseling? a) Marital counseling, b) Family, c) Children. Do you make referrals? To whom and for what problems?
3. We are studying the problem of family violence. Have any such cases come to your attention: Wife battering? Child abuse?
 - a) Have you ever seen unusual marks on women or children, or injuries that are explained with unsatisfactory explanations?
 - b) What would you do (have you done) if someone told you that violence was occurring in another family in the congregation (what should a rabbi do in this situation?).
 - c) Is this a problem in the Jewish community? Who do you think are most likely to have these problems?
4. Would you be (have you been) surprised to find something like this in your congregation?
5. If help were available in dealing with violent families, would you want that assistance? (Training,

support systems, etc.).

APPENDIX C

C-1

PRESENTATION TO CONGREGATIONAL GROUPS

My name is . I'm a Masters Degree Student at Hebrew Union College and University of Southern California in Social Work and Jewish Communal Service. My partner and I are doing a study about the ways in which people cope with family problems and stress. We have found, as have other helping professionals, that one way many people deal with these difficulties is to strike out at other family members. Child abuse and spousal abuse are known to exist in all ethnic, with all people, all religions, with rich and poor, religious, and economic groups. We know that Jews also physically strike out at other family members because both we and other Jewish helping professionals have worked with families who cope in this way. We know of cases of Jewish family violence that haven't been dealt with by professionals because they feel that violence didn't exist. We need to get honest and positive responses from you so that we can help to get better programs for Jewish family violence.

What I would like to ask you to do in a few moments is to fill out this questionnaire. The first two pages ask for general information regarding your vital statistics and the following pages ask you to outline your exposure to this kind of behavior. All of your responses

are totally anonymous and are handled with total confidentiality. Even the synagogue's name will never appear anywhere. (Jokingly) Even we don't know who you are. Leave questionnaires face down.

Pass out questionnaires.

Before beginning-- in the section of the questionnaire that asks about specific things that either happened to you, to other family members, or to acquaintances, we do not want names, but just the relationship of the people involved-- such as:

Done to Mother By Son

or

Done to Me By Father

Furthermore, if at any point you want to explain a response and there isn't enough space allowed, please feel free to use the back of the page.

Also, the list of resources on the last page of the questionnaire is for your information. Please feel free to take this page with you.

When you are finished, please place your questionnaire face down, in one of the boxes placed .

Does anyone have any questions before we get started? If you have any questions or comments, I'll be available after people are finished.

Thank you (for your cooperation).

C-2

My name is . I'm a Masters Degree Student at Hebrew Union College and University of Southern California in Jewish Communal Service and Social Work. My partner and I are doing a study about the ways in which people cope with family problems and stress. We have found, as have other helping professionals, that one way many people deal with these difficulties is to strike out at other family members. Child abuse and spousal abuse are known to exist among all peoples - all religions, ethnicities, with rich people as well as poor ones. We know that Jews also physically strike out at family members because both we and other Jewish helping professionals have worked with families who cope in this way. We also know of cases of Jewish family violence which have not been dealt with by professionals because they felt that violence did not exist among Jews. What we are asking of you is full and honest responses so that programs can be developed for violent Jewish families. We ask only that you share what you know so we can share that information with the rest of the Jewish community, to educate and help.

What I'd like to ask you to do, in a few minutes, is to fill out this questionnaire. The first two pages ask for general information regarding your vital statistics and the following pages ask you to outline your exposure to this kind of behavior. All of your respons-

es are totally anonymous and are handled with total confidentiality. Even the synagogue names will never appear anywhere. (Jokingly) Even we don't know who you are.

(pass out questionnaires)

(before beginning)

In the section of the questionnaire that asks about specific things that either happened to you, to other family members, or acquaintances, we do not want names, but just the relationships between the people involved - such as:

Done to Mother by Son

or

Done to Me by Father

If at any point you want to explain a response, and there isn't enough space allowed, please feel free to use the back of the page.

Also the list of resources that will be distributed at the end of this meeting is for your information. Please feel free to take this with you.

When you are finished, please place your questionnaire face down, in one of the two boxes placed .

Does anyone have any questions before we get started?

If you have any questions or comments, I'll be available after people are finished.

Thank you, again, for your assistance.

APPENDIX D
QUESTIONNAIRES

APPENDIX D-1

This questionnaire is designed to find out how families deal with some of the problems facing them. We recognize that in the life of every family there are problems at some time or other. What are described on the following pages are ways that many people, including Jews, use to deal with situations that arise in their families.

We recognize that many of the things mentioned in this questionnaire may be done in fun, playfully, or casually. We are concerned only with those instances in which these things are done to hurt, to punish, or to force other people to do something against their will.

In answering the following questions, please refer to yourself, at any time in your life, your spouse, your children, your parents, your in-laws, other members of your family, and of the Jewish community.

If not enough space is provided for a full answer, please feel free to use the back of the page to complete your answer.

Please fill in the appropriate information:

Your: Sex _____ Age _____
Spouse's: Sex _____ Age _____
Children's: Sex _____ Age _____ Sex _____ Age _____
Sex _____ Age _____
Sex _____ Age _____

Current Marital Status:

- ☒ Married
☒ Divorced
☒ Widowed
☒ Separated
☒ Never been married
☒ Other, please specify _____

Check highest level of education completed:

- ☒ High school graduate or less
☒ Some college
☒ College Graduate
☒ Some graduate school
☒ Master's degree
☒ Ph.D. or some professional degree beyond Master's
☒ Other, please specify _____

Are you currently employed?

Self: ☒ YES ☒ No Spouse: ☒ YES ☒ NO
(If you are a child, Mother: ☒ YES ☒ NO Father: ☒ YES ☒ NO)

What is your current occupation? (if child, parents' occupations)

Please check approximate family annual income:

- | | |
|---|---|
| <input checked="" type="checkbox"/> 0-9,999 | <input checked="" type="checkbox"/> 80,000-89,000 |
| <input checked="" type="checkbox"/> 10,000-19,999 | <input checked="" type="checkbox"/> 90,000-99,000 |
| <input checked="" type="checkbox"/> 20,000-29,999 | <input checked="" type="checkbox"/> 100,000 and above |
| <input checked="" type="checkbox"/> 30,000-39,999 | <input checked="" type="checkbox"/> Don't know |
| <input checked="" type="checkbox"/> 40,000-49,999 | |
| <input checked="" type="checkbox"/> 50,000-59,999 | |
| <input checked="" type="checkbox"/> 60,000-69,999 | |
| <input checked="" type="checkbox"/> 70,000-79,999 | |

Please fill in the chart below, using yes and no, where appropriate: Country of Origin

	Born Jewish	Currently Jewish	Born in U.S.	Country of Origin
Yourself				
Your spouse				
Your mother				
Your Father				
Mother's mother				
Mother's Father				
Father's mother				
Father's father				
Siblings				

In the family in which you grew up, how many people were there? _____
(If you are a child now, how many are in your current family?)

How many rooms are there in your home? _____

Was the head of your household, when you were growing up, steadily employed?
☒ YES ☒ NO

How many times have you moved in the last 10 years? _____

Are you now a member of a synagogue ☒ YES ☒ NO
How long have you been a synagogue member? _____

WHERE "DONE TO" AND "BY" APPEAR, PLEASE STATE THE RELATIONSHIP BETWEEN THE PEOPLE INVOLVED, i.e., Done to: Mother By: Son, or Done to: Me By: Husband

EXT TO EACH CHECKED RESPONSE, PLEASE WRITE: O, IF THIS OCCURED ONCE
F, IF THIS OCCURED A FEW TIMES
OF, IF THIS OCCURED OFTEN
C, IF THIS OCCURED CONSTANTLY

THIS HAS BEEN DONE TO YOU BY A MEMBER OF YOUR FAMILY:

☐ HITTING
Done to: _____ By: _____

☐ SLAPPING
Done to: _____ By: _____

☐ PUNCHING
Done to: _____ By: _____

☐ PUSHING, SHOIVING
Done to: _____ By: _____

☐ KICKING
Done to: _____ By: _____

☐ BURNING
Done to: _____ By: _____

Comments:

☐ FORCED TO BE ALONE, KEPT AWAY FROM PEOPLE EXCEPT IMMEDIATE FAMILY
Done to: _____ By: _____

☐ THROWING AN OBJECT AT YOU WHICH COULD DO HARM
Done to: _____ By: _____

☐ KNIFING
Done to: _____ By: _____

☐ SHOOTING, THREATENING WITH A GUN
Done to: _____ By: _____

☐ PHYSICALLY ASSAULTING
Done to: _____ By: _____

☐ FORCING TO ENGAGE IN SEXUAL ACTIVITY
Done to: _____ By: _____

I HAVE DONE THIS TO A MEMBER OF YOUR FAMILY:

☐ HITTING
Done to: _____ By: _____

☐ SLAPPING
Done to: _____ By: _____

☐ PUNCHING
Done to: _____ By: _____

☐ PUSHING, SHOIVING
Done to: _____ By: _____

☐ KICKING
Done to: _____ By: _____

☐ BURNING
Done to: _____ By: _____

Comments:

☐ FORCED TO BE ALONE, KEPT AWAY FROM PEOPLE EXCEPT IMMEDIATE FAMILY
Done to: _____ By: _____

☐ THROWING AN OBJECT THAT COULD DO HARM
Done to: _____ By: _____

☐ KNIFING
Done to: _____ By: _____

☐ PHYSICALLY ASSAULTING
Done to: _____ By: _____

☐ FORCING TO ENGAGE IN SEXUAL ACTIVITY
Done to: _____ By: _____

☐ SHOOTING, THREATENING WITH A GUN
Done to: _____ By: _____

if occurred once; F, if occurred a few times; OF, if occurred often;
if occurred constantly

4

HAS BEEN DONE TO SOMEONE ELSE IN YOUR FAMILY BY ANOTHER FAMILY MEMBER:

☐ HITTING
Done to: _____ By: _____

☐ FORCED TO BE ALONE, KEPT AWAY
FROM PEOPLE EXCEPT IMMEDIATE FAMILY
Done to: _____ By: _____

☐ SLAPPING
Done to: _____ By: _____

☐ THROWING AN OBJECT THAT COULD
DO HARM
Done to: _____ By: _____

☐ PUNCHING
Done to: _____ By: _____

☐ KNIFING
Done to: _____ By: _____

☐ PUSHING, SHOIVING
Done to: _____ By: _____

☐ SHOOTING, THREATENING WITH A GUN
Done to: _____ By: _____

☐ BURNING
Done to: _____ By: _____

☐ PHYSICALLY ASSAULTING
Done to: _____ By: _____

Comments: _____

☐ FORCING TO ENGAGE IN SEXUAL
ACTIVITY
Done to: _____ By: _____

YOU KNOW OF OTHER JEWISH FAMILIES WHERE THIS HAS HAPPENED:

☐ HITTING
Done to: _____ By: _____

☐ FORCED TO BE ALONE, KEPT AWAY
FROM PEOPLE EXCEPT IMMEDIATE FAMILY
Done to: _____ By: _____

☐ SLAPPING
Done to: _____ By: _____

☐ THROWING AN OBJECT THAT COULD
DO HARM
Done to: _____ By: _____

☐ PUNCHING
Done to: _____ By: _____

☐ KNIFING
Done to: _____ By: _____

☐ PUSHING, SHOIVING
Done to: _____ By: _____

☐ SHOOTING, THREATENING WITH A GUN
Done to: _____ By: _____

☐ KICKING
Done to: _____ By: _____

☐ PHYSICALLY ASSAULTING
Done to: _____ By: _____

☐ BURNING
Done to: _____ By: _____

☐ FORCING TO ENGAGE IN SEXUAL
ACTIVITY
Done to: _____ BY: _____

Comments: _____

any of the items discussed on the previous pages occurred within your family, have they been discussed with anyone?

YES ☒ NO

YES, please check all of the following who have been told:

- ☒ OTHER FAMILY MEMBERS (please specify) _____
- ☒ SECULAR SCHOOL PERSONNEL (teacher, counselor, principal, etc.)
- ☒ HOTLINE WORKER
- ☒ POLICE
- ☒ RABBI
- ☒ SOCIAL SERVICE AGENCY (Jewish Family Service, etc.)
- ☒ PHYSICIAN
- ☒ FRIEND
- ☒ CANTOR
- ☒ PRIVATE THERAPIST OR COUNSELLOR
- ☒ MENTAL HEALTH CLINIC
- ☒ CO-WORKER AT JOB
- ☒ JEWISH EDUCATOR
- ☒ LAWYER
- ☒ OTHER, PLEASE SPECIFY _____

THE ABOVE LIST, PLEASE CIRCLE THE PERSON WHO WAS MOST HELPFUL. IN THE SPACE BELOW, DESCRIBE WHAT MADE IT POSSIBLE TO TALK TO THAT PERSON

WERE ANY OF THE PEOPLE YOU WENT TO FOR HELP JEWISH?

☒ YES _____ (Please place the letter from the above list on the line)
☒ NO
☒ DON'T KNOW

IN GENERAL, DO YOU THINK FAMILY VIOLENCE IS A PROBLEM? ☒ YES ☒ NO
(please explain your answer)

DO YOU THINK FAMILY VIOLENCE IS A PROBLEM IN THE JEWISH COMMUNITY?
☒ YES ☒ NO (please explain your answer)

DO YOU THINK THAT THE SYNAGOGUE AND JEWISH PROFESSIONALS (RABBI, CANTOR, JEWISH EDUCATOR) SHOULD BE INVOLVED IN TRYING TO HELP WITH THE PROBLEM OF FAMILY VIOLENCE? ☒ YES ☒ NO (please explain your answer)

THERE ARE ANY CASES OF JEWISH FAMILY VIOLENCE THAT YOU ARE WILLING TO DESCRIBE, PLEASE DO SO ON THE BACK OF THIS PAGE.

APPENDIX D - 2

This questionnaire is designed to find out how families deal with some of the problems facing them. We recognize that in the life of every family there are problems at some time or other. What are described on the following pages are ways that many people, including Jews, use to deal with situations that arise in their families.

We recognize that many of the things mentioned in this questionnaire may be done in fun, playfully, or casually. We are concerned only with those instances in which these things are done to hurt, to punish, or to force other people to do something against their will.

In answering the following questions, please refer to yourself, at any time in your life, your spouse, your children, your parents, your in-laws, other members of your family, and of the Jewish community.

If not enough space is provided for a full answer, please feel free to use the back of the page to complete your answer.

Please fill in the appropriate information:

Your: Sex _____ Age _____
Spouse's: Sex _____ Age _____
Children's: Sex _____ Age _____ Sex _____ Age _____
Sex _____ Age _____
Sex _____ Age _____

Current Marital Status:

- ☒ Married
☒ Divorced
☒ Widowed
☒ Separated
☒ Never been married
☒ Other, please specify _____

Check highest level of education completed:

- ☒ High school graduate or less
☒ Some college
☒ College Graduate
☒ Some graduate school
☒ Master's degree
☒ Ph.D. or some professional degree beyond Master's
☒ Other, please specify _____

Are you currently employed?

Self: ☒ YES ☒ No Spouse: ☒ YES ☒ NO
(If you are a child, Mother: ☒ YES ☒ NO Father: ☒ YES ☒ NO)

What is your current occupation? (if child, parents' occupations)

Please check approximate family annual income:

- | | |
|---|---|
| <input checked="" type="checkbox"/> 0-9,999 | <input checked="" type="checkbox"/> 80,000-89,000 |
| <input checked="" type="checkbox"/> 10,000-19,999 | <input checked="" type="checkbox"/> 90,000-99,000 |
| <input checked="" type="checkbox"/> 20,000-29,999 | <input checked="" type="checkbox"/> 100,000 and above |
| <input checked="" type="checkbox"/> 30,000-39,999 | <input checked="" type="checkbox"/> Don't know |
| <input checked="" type="checkbox"/> 40,000-49,999 | |
| <input checked="" type="checkbox"/> 50,000-59,999 | |
| <input checked="" type="checkbox"/> 60,000-69,999 | |
| <input checked="" type="checkbox"/> 70,000-79,999 | |

Please fill in the chart below, using yes and no, where appropriate: Country of Origin

	Born Jewish	Currently Jewish	Born in U.S.	Country of Origin
Yourself				
Your spouse				
Your mother				
Your Father				
Mother's mother				
Mother's Father				
Father's mother				
Father's father				
Siblings				

in the family in which you grew up, how many people were there? _____
(If you are a child now, how many are in your current family?)

How many rooms are there in your home? _____

Was the head of your household, when you were growing up, steadily employed?
☒ YES ☒ NO

How many times have you moved in the last 10 years? _____

Are you now a member of a synagogue ☒ YES ☒ NO
How long have you been a synagogue member? _____

1. Has anyone in your family ever physically struck out against you? (hitting, slapping, kicking, etc.)

YES

NO

a. If yes, who did this to you?

b. Next to each response above (in (a)), please indicate how often this occurred, using:

O - Once
F - A few times
OF - Often
C - Constantly

c. What did you do about this situation?

2. Have you ever physically struck out against a member of your family?

YES

NO

a. If yes, who did you do this to?

b. Next to each response above, (in (a)), please indicate how often this occurred, using:

O - Once
F - A few times
OF - Often
C - Constantly

c. What did you do about this situation?

3. Has a member of your family (other than you) ever physically struck out at another member of your family, aside from yourself ?

YES

NO

a. If yes, who did this, and to whom?

b. Next to each response above (in (a)), please indicate how often this occurred, using:

O - Once
F - A few times
OF - Often
C - Constantly

c. What did you do about this situation?

4. Do you know of any other Jewish families where the members have physically struck out against each other?

YES

NO

a. If yes, who did this, and to whom?

b. Next to each response above, (in (a)), please indicate how often this occurred, using:

O - Once
F - A few Times
OF - Often
C - Constantly

c. What did you do about this situation?

5. Do you know of any Jewish families, including yours, where members have been forced by the people in the family to be alone or were kept away from social contact outside of their immediate family?

YES

NO

a. If yes, who did this and to whom?

b. Next to each response above, (in (a)), please indicate how often this occurred, using:

O - Once
F - A few times
OF - Often
C - Constantly

c. What did you do about this situation?

6. Do you know of any Jewish families, including yours, where members have been forced to engage in sexual activity by other family members?

YES

NO

a. If yes, who did this and to whom?

b. Next to each response above, (in (a)), please indicate how often this occurred, using:

O - Once
F - A few times
OF - Often
C - Constantly

c. What did you do about this situation?

any of the items discussed on the previous pages occurred within your family, have they been discussed with anyone?

YES ☒ NO

YES, please check all of the following who have been told:

- ☒ OTHER FAMILY MEMBERS (please specify) _____
- ☒ **SECULAR** SCHOOL PERSONNEL (teacher, counselor, principal, etc.)
- ☒ HOTLINE WORKER
- ☒ POLICE
- ☒ RABBI
- ☒ SOCIAL SERVICE AGENCY (Jewish Family Service, etc.)
- ☒ PHYSICIAN
- ☒ FRIEND
- ☒ CANTOR
- ☒ PRIVATE THERAPIST OR COUNSELLOR
- ☒ MENTAL HEALTH CLINIC
- ☒ CO-WORKER AT JOB
- ☒ JEWISH EDUCATOR
- ☒ LAWYER
- ☒ OTHER, PLEASE SPECIFY _____

THE ABOVE LIST, PLEASE CIRCLE THE PERSON WHO WAS MOST HELPFUL. IN THE SPACE BELOW, DESCRIBE WHAT MADE IT POSSIBLE TO TALK TO THAT PERSON

WERE ANY OF THE PEOPLE YOU WENT TO FOR HELP JEWISH?

YES _____

NO

DON'T KNOW

(Please place the letter from the above list on the line)

GENERAL, DO YOU THINK FAMILY VIOLENCE IS A PROBLEM? ☒ YES ☒ NO
(please explain your answer)

DO YOU THINK FAMILY VIOLENCE IS A PROBLEM IN THE JEWISH COMMUNITY?
YES ☒ NO. (please explain your answer)

DO YOU THINK THAT THE SYNAGOGUE AND JEWISH PROFESSIONALS (RABBI, CANTOR, JEWISH EDUCATOR) SHOULD BE INVOLVED IN TRYING TO HELP WITH THE PROBLEM OF FAMILY VIOLENCE? ☒ YES ☒ NO (please explain your answer)

THERE ARE ANY CASES OF JEWISH FAMILY VIOLENCE THAT YOU ARE WILLING TO DESCRIBE, PLEASE DO SO ON THE BACK OF THIS PAGE.

APPENDIX E

FAMILY CRISIS RESOURCE LIST

Child Abuse Reports	Zenith 2-1234
(Ask operator for assistance)	
Cedars-Sinai Warm Line	855-3500
Child Abuse Listening Line	828-2255
Parents Anonymous	(800) 352-0386
Cedars-Sinai Rape Crisis Hotline	855-3506
Women's Shelter-Long Beach YMCA	dial Her-Home
Women's Shelter-Santa Monica	399-9228
Women's Shelter-San Pedro	547-9343
Women's and Children's Shelter (Whittier)	696-2441
Haven House-Pasadena	681-2626
Phoenix House-Glendale	242-1106
Fairfax Information and Referral Service Team (F.I.R.S.T.)	653-9311

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