



Violence and Exploitation against Women and Girls

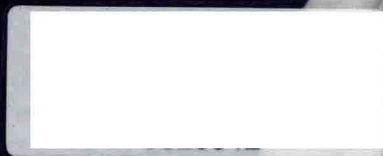
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**VIOLENCE AND EXPLOITATION
AGAINST WOMEN AND GIRLS**

*Edited by Florence L. Denmark, Herbert H. Krauss,
Esther Halpern, and Jeri A. Sechzer*

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**VIOLENCE AND EXPLOITATION
AGAINST WOMEN AND GIRLS**

Preface

The topic of this Annals, *Violence and Exploitation against Women and Girls* could not be more timely or pertinent to key issues affecting the health and welfare of women. The many distinguished contributions offer us an important international review of cross-national and cross-cultural research on the prevalence and prevention of violence against women and girls. The tremendous social, economic, and psychological costs of violence and abuse against women and girls are documented with examples from female genital mutilation, to domestic violence, to abuse of particularly vulnerable populations, such as disabled women and pregnant women. Articles on adolescent violence present cutting-edge research on so-called “sexual scoring,” where very young women are coerced by peers and older male adolescents to participate in group sexual activities and “cyberbullying” practices that involve at-risk online activities for young girls. Violence against women knows no age barriers, and other contributions to this volume document that even elderly women can be abused by their caretakers.

Modes of treatment and prevention are also key themes that are discussed across the various articles. Preventative efforts to decrease the incidence of violence against women and girls may include early education, changing sex role-stereotyped attitudes and behaviors, and working to achieve gender equality in terms of power differentials between men and women in relationships. Addressing how social institutions, such as popular media, film, and music, help to perpetuate sexual violence and harassment is still another key area of concern. Certainly efforts at the international level call for multifaceted interventions and legislation that would raise awareness in societies that still condone cultural practices that are destructive of women and exploit them. Thus other informative articles in the volume discuss United Nations (UN) measures to stop violence against women as well as the approach of the World Health Organization (WHO) in attempting to create a uniform database for reporting violence, defining violence, and devising a topology of violent acts.

Another theme that cuts across the articles in this volume is the important issue of cultural influence on domestic violence and the adoption of a culturally sensitive framework for the development of effective interventions aimed at decreasing domestic violence against women. We are also presented with the provocative question of whether is it always women who are the victims, as some research finds that women are increasingly likely to inflict violence as well as to be victims of violence. Thus we are called upon to develop new concepts of intimate partner violence that account for these findings.

The various articles in this volume offer the reader a heart-rendering picture of how women suffer violence, exploitation, and abuse in countries as diverse as Botswana and Israel. Today, it is increasingly recognized that violence against women is a global health and social problem, and in the last two decades many countries have undertaken large-scale, national, qualitative research to assess the frequency and level of violence against women. Often under pressure from women's NGOs within the UN, government bodies have attempted to expose and analyze what is now perceived to be an enormous worldwide social issue. One important goal of this research is to educate the public and policy makers about the need to develop measures to address a reality that until now has remained behind closed doors, although violence against women is, in fact, a public issue for every country in the world. Irrespective of the methods of collection, the sample, or the country in which the sample was collected, the global statistics give us high rates of violence perpetrated against women, from more than 50% of women in a Portuguese sample, to 68% in a Belgian study, to 51% in a Canadian study. Nearly one-third of all visits to emergency rooms by women in the United States occur because of violence or abuse. Even in the socially progressive Nordic countries, women experience high levels of violence; a Finnish study reports 52% of adult women had been the victims of violence, and statistics collected by women's shelters in Sweden indicate that a Swedish woman is battered every 20 minutes. Acts of violence are committed against women among all economic and educational strata. Domestic violence cuts across social, racial, ethnic, and economic groups. In Italy, for example, 45% of perpetrators of violence toward their partner had university degrees. In the few minutes it takes you to read this preface, a woman in every country of the world will be raped, beaten, or sexually exploited.

The high incidence of violence against women worldwide has many serious repercussions for women's physical, emotional, and economic well-being. Although a higher education or income does not necessarily decrease the chances of violence and abuse for women, certainly low-income women and women on public assistance are at particular risk for experiencing the catastrophic effects of repeated abuse and partner violence, in large part because they have far fewer resources and support for escape or to change their circumstances. Poor women are very likely to be the victims of prior or current abuse and violence. In the United States, more than half of all women trying to leave welfare face the devastating barrier of violence from intimate partners. Americans have long been concerned with the high rates of violence in their society, and since the recent change in their welfare laws, a number of studies have begun to explicate the high rates of violence and abuse among women in poverty and women on welfare. An ethnically diverse population of women and women living in poverty are at especially high risk for all types of violence inside and outside of the home, particularly for life-threatening and severe assaults. In many cities, poor women live in neighborhoods where the level of assault in all types of relationships is very high and the availability of protective or preventive services

unusually low. The few studies focusing on the reports of poor women document much higher rates of frequent, uncontrollable, and life-threatening events than in the general population, and survey research consistently and dramatically documents the pervasiveness of violence in the lives of women on public assistance with reports of severe physical violence experienced by 30% to 75% of women across the United States. Violence interferes with work, job training, and education and thus undermines women's attempts at economic independence. Domestic violence is also strongly correlated with homelessness, and when a woman leaves an abusive relationship she often has nowhere to go.

Despite the prevalence of violence in the lives of women living in poverty, research on low-income women, and the ways in which poverty and social policies contribute to and maintain the prevalence of violence in their lives, is in the early stages. There are many methodological problems, including the difficulties in comparison of diverse samples, the reluctance of many women to report violence, which is frequently tied to cultural norms, and the changing definition of what constitutes "violence." For example, in Latino culture, maintaining patriarchal control through physical threats and hitting of wives is frequently considered necessary and normative. Cultural factors and values may also suppress help seeking by ethnically diverse women, such as among Asian women, where the cultural shame of exposing any conflict or abuse is very high. Minority status within a multicultural society may also present special problems. Immigrant status, little knowledge of the English language, and no family support are critical factors in the responses of some minority women to the dangers they face in an abusive relationship.

We know that women who have suffered abuse are more likely to suffer posttraumatic stress disorder (PTSD), depression, and somatization than those who have never experienced abuse; the more extensive the abuse, the greater the risk of PTSD. However, another methodological and conceptual difficulty appears here in the use of a diagnosis that may be gender biased. Despite the greater prevalence and chronicity of PTSD among females, the construct was based on data from male combat veteran experiences, resulting in measurement bias that may affect both research and practice.

Trauma and violence prevention is an important area to consider for research because (1) girls and women as a group are exposed to more traumatic stressors than boys and men; (2) the mental health of women and girls may be severely affected, resulting not only in immediate psychological symptoms, but also lifetime risk for self-destructive or suicidal behavior, anxiety and panic attacks, eating disorders, substance abuse, somatization disorder, and sexual adjustment disorders; and (3) psychologists are not regularly trained to work specifically with trauma survivors, which can reduce the effectiveness of the treatment survivors receive. Thus the American Psychological Association recently recommended that psychologists who practice in these areas receive specialized training to better understand and meet the special needs of women involved in partner violence.

A range of supportive psychological, social, medical, and legal services are necessary to help women successfully remove themselves from abusive situations and to become economically self-sufficient. Pervasive violence may leave women with physical injuries and psychological consequences that make daily functioning difficult. Abuse can have long-term physical effects on women, sometime damaging their hearing or eyesight or leaving them with chronic pain that interferes with their ability to work or to get training. Sufferers may feel helpless and terrified, experiencing flashbacks of the original trauma in recurrent and intrusive thoughts or dreams, have trouble sleeping, and be unable to concentrate. The more extensive the abuse, the greater the risk of PTSD. One hopeful sign is that these effects may not be permanent; in some studies women whose abuse was not current showed lower rates of symptoms and higher scores on self-esteem and mastery measures.

Psychological and economic control by the batterer, coupled with a lack of skills and resources and the demands of parenting, and the situation of living in a dangerous neighborhood, isolate many low-income abused women. Women who are fleeing violent men may be too afraid to seek work if they have to entrust young children to the care of strangers. Jealous abusers often will do everything they can to prevent their women partners from attending classes or their jobs, including violent threats, beatings, harassing calls at work, preventing sleep, and renegeing on promises of child care or transportation. Abuse is cited by 25% to 30% of battered women as the reason they lost their jobs. It is not surprising, then, that other studies have found that women who had experienced physical violence by a partner were more likely to remain on public assistance for longer periods, and that a lifetime history of violent victimization was a strong determinant of welfare "cycling" (more than one episode of public assistance). Even when these women manage to find jobs, they are likely to be low wage, unskilled, and part time. The experience of violence is also a factor. Poor women whose partners had threatened them or used a knife or gun against them have been found to be employed in significantly lower status, lower paying jobs than women who have not experienced these severe threats and assaults with a weapon.

Each battered woman faces different risks and therefore has different needs for restoring safety, self-sufficiency, and self-esteem. Because each battered woman's risks are different, determining specific needs must be done on a case-by-case basis. There is no formula for safety or self-sufficiency. Options that may work for one woman will increase the danger for another. For example, leaving a relationship can increase risks for some battered women and their children and diminish them for others. A question frequently asked about abused women is, "Why do they stay?" This question does not reflect the real issues and considerations a woman must face, such as "Should I stay and risk the violence?" "If I leave will the violence be worse?" "Should I leave and place my children and myself in greater poverty?" "Will it be worse to be homeless?" and "Should I risk losing my children in a custody battle?"

Battered women use complex and creative safety plans to reduce the risks that they and their children face. Like any person making a significant life decision, abused women must consider the consequences of pursuing certain options. In some cases, determining what a particular battered woman needs will be as simple as asking her, and some women will know exactly what they need to be safe and self-sufficient. Like all people, abused women in violent relationships have basic needs for housing, food, mental and physical health care, safety, and the basics of human dignity—privacy, opportunity, and self-determination. Other women may need advocacy to explore their risks and options. Working with battered women to help them on all fronts may be complex. It is work best done by trained advocates and therapists who can provide these women with confidential opportunities to explore their risks and plans.

In sum, battered and abused women need a wide range of responses, flexible services, and supportive policies to enhance their safety and self-sufficiency and to restore their self-esteem and welfare. These might include mental and physical health evaluation and referral; relocation services; confidential advocacy, shelter, and other domestic violence support services; educational and vocational training; legal representation concerning divorce, custody, visitation, and protective orders; evaluation of immigration status and ethnic or cultural issues; and the effective enforcement of criminal laws and court orders to help free them from their partners' control and to keep them and their children safe.

Much of the data and many of the women's stories presented in these articles are difficult to read without being moved, shocked, or upset. I hope that all readers come away from this information with renewed conviction that the problem that once was behind closed doors and had no name, has been named and that solutions must be aggressively and consistently pursued with all the intelligence, motivation, and effort we can muster. The task at hand is a very complex one that involves ending violence in environments that are inextricably linked—family microsystems within macronational systems and the global macrosystem in which all nations are embedded. A social problem of such magnitude and importance, one that ultimately affects not only half of humanity, but all people, will need to be addressed at all systemic levels—individual to institutional, familial to societal, and local to global.

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**VIOLENCE AND EXPLOITATION
AGAINST WOMEN AND GIRLS***Editors*FLORENCE L. DENMARK, HERBERT H. KRAUSS,
ESTHER HALPERN, AND JERI A. SECHZER

This volume is the result of a Psychology Section meeting at the New York Academy of Sciences, held on November 18, 2005, in New York City, and sponsored by the New York Academy of Sciences. The conference was cosponsored by the Pace University psychology department, in New York City; the International Organization for the Study of Group Tensions; the Academic Division of the New York State Psychological Department; and Division of Women's Issues of the New York State Psychological Association.

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Introduction

FLORENCE L. DENMARK,^a HERBERT H. KRAUSS,^a
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As far back in time as can be traced, well before they wrote, humans practiced violence against each other. In so far as is known, no time or system was free of it (Walker, 2001). To be sure, its incidence and prevalence waxed and waned, yet violence has always been with us, and never so more than in the last 100 years or so (Summerfield, 1997).

Recognizing that acts of violence produced many harmful effects beyond direct injury and suffering and that a “dramatic worldwide increase in the incidence of intentional injuries affecting people of all ages and both sexes, but especially women and children . . .” has occurred; resolution WHA49.25 of the forty-ninth World Health Assembly declared violence a “leading worldwide public health problem” (WHO, 1996) and requested its director general to take a number of steps designed to reduce both violence and its deleterious consequences. Among these were to be a series of initiatives intended to produce a better understanding of violence’s cause and the circumstances that facilitated and sustained its expression.

A report summarizing the director general’s preliminary efforts to fulfill the requests of resolution WHA49.25 was issued as the “World Report on Violence and Health” (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002). Therein may be found an attempt to formulate an acceptable and meaningful definition of violence, a useful typology of violent acts, and a model for conceptualizing violence from the public health framework. It also included a compilation of demographic information about various forms of violence and their occurrence.

Though the “World Report on Violence and Health” succeeds in drawing attention to the ubiquity of violence and the damage violence inflicts upon the individual, the community, and the polity, that report also makes it clear that a cross-cultural and cross-societal perspective on violence must be adopted if it is to be understood and its noisome consequences are to be reduced. The report is less successful in providing an acceptable definition of violence and consequently a useful typology of violent acts. Nor is it obvious that its public health model is indeed the best-suited paradigm for diagnosing and treating violence and its sequelae (Krauss, 2005).

While considerable headway can be made against violence without a complete understanding of its cause, nature, and manifestations, clearly having such an accurate conceptualization ought to provide a guide to its reduction. Surely one does not have to understand fully, for example, why men rape, to reduce rape's incidence and prevalence; one only needs to prohibit it and punish it severely when it occurs. But just as self evident is that knowing the circumstances (e.g., when one is not in control of their cognitive facilities or during ethnic conflict) when rape is most likely to happen and eliminating the possibility would also likely prove useful.

That something must be done immediately to halt violence against women and girls is obvious; for as Garcia-Moreno, Heise, Jansen, Ellsberg, and Watts (2005) have deduced, violence against women and girls is rampant. Their review of the epidemiological literature suggests that one in three women or girls across the globe have been victimized in childhood, adolescence, or adulthood. In some societies that rate is greatly exceeded. The "WHO Study on Women's Health and Domestic Violence Against Women"(Garcia-Moreno, Jansen, Ellsberg, Heise, and Watts, 2005) found, after conducting 24,000 interviews with 15- to 49-year old women at 15 sites in 10 countries (Bangladesh, Brazil, Ethiopia, Japan, Peru, Namibia, Samoa, Serbia, and Montenegro, Thailand, and Tanzania), that between 35% and 76% of those surveyed had been physically or sexually assaulted. Even more concerning was the extent it found violence against women and girls to be culturally institutionalized. In about half of the sites, of the women studied, between 50% and 90% of the women agreed, depending on the question asked, that it was acceptable for a husband to beat his wife if she disobeyed him, refused his sexual overtures, did not complete her housework on time, or questioned whether her husband might be guilty of infidelity.

As part of the effort to inform all interested parties about what is known about violence against women, how its occurrence might be reduced, and the techniques through which its consequences might be ameliorated, two of the editors of this volume, Florence L. Denmark and Herbert H. Krauss of Pace University, brought together a group of experts to present a workshop on this topic at the New York Academy of Sciences to concerned academics and practitioners. This workshop was hosted by the Academy and cosponsored by Pace University and the International Organization for the Study of Group Tensions. The success that greeted the workshop stimulated our interest in producing a book that would address the subject more comprehensively and with greater attention to detail. Prior to the workshop held at the Academy, another one of the editors, Esther Halpern of Tel Aviv University, organized a program on violence against women that was held in London, England. Jeri Sechzer, of Pace University, is another editor who has also explored violence against women and is committed to work in this area.

The book that you are about to peruse is organized into sections flowing from general information regarding violence against women to specific

descriptions of it in the United States and in countries worldwide. Its four sections include a conceptualization of violence against females; an exploration of violence against girls, adolescents, and young women; an examination of cultural and international perspectives on violence against women; and a summary article.

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Perspectives on Violence

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ABSTRACT: The worldwide rise in violence, especially that directed against females of all ages, led the World Health Organization (WHO) to undertake steps to deal with that problem. To do so, WHO adopted a public health approach. This entailed (1) developing a definition of violence, (2) devising a typology of violent acts, (3) creating a uniform database for reporting violence, and (4) promulgating a model for understanding violence and its attendant phenomena. This essay reviews, analyzes, and critiques those efforts.

KEYWORDS: bioarchaeological; sexual violence; violence

INTRODUCTION

If it is melodramatic to assert that human history is written with a mixture of blood and misery drawn from the victims of human violence, it is not overstated to say that Clio has frequently dipped her pen in that ink. In fact, as Krauss (2005, p. 11) has pointed out, “Before humans learned to objectify their experiences, concretize them symbolically, and transmit them in ideograph they had mastered the ability to prey on one another.” An irenic Garden of Eden existed only in myth.

PREHISTORY OF VIOLENCE

Recent discoveries and improvements in bioarchaeological research technology have opened a window on how humans lived before recorded history—not pacifically (Walker, 2001). Well before the advent of modern humans between 200,000 and 120,000 years ago (Gibbons, 2003), cut marks found on excavated human skeletal fragments suggest that some Neanderthals engaged in cannibalism, and correspondences between the state of human remains and animal food refuse at a New Stone Age site in France (La Baume Fonlebegoua) indicated that Neanderthals were not the only cannibalistic hominids. By the

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Mesolithic era, the increased incidence of small points found embedded in human bone demonstrates that homicide not only occurred then, but was not rare. The first clear evidence of mass murder comes from a collection of 38 skulls from a 7720-year-old site in Bavaria. Homicide was not just an Old World prerogative. Points embedded in human bones and crushed human skulls found in excavations at a number of the earliest Native American sites argue that similar patterns of violence were imported and established themselves in the New World (Walker, 2001).

Five conclusions may be drawn from Walker's review of bioarchaeological investigations of prehistoric people:

1. "Everywhere we probe into the history of our species we find evidence of a similar pattern of behavior . . . All the evidence suggests that peaceful periods have always been punctuated by episodes of warfare and violence." (p. 590)
2. "As far as we know, there are no forms of social organization, modes of production, or environmental settings that remain free from personal violence for long." (p. 590)
3. Two trends in the development of weapons have grown—their lethality and their ability to injure at a distance.
4. Not all modern patterns of violence can be found in the prehistoric bioarchaeological record. One that cannot is the "battered child syndrome." "Such abusive behavior leaves clear skeletal stigmata that my colleagues and I have looked for in vain in many large prehistoric skeletal series . . . It seems likely that treating children in this way was simply impossible in earlier societies." (p. 591)
5. "One sobering pattern that emerges from a survey of past violence is the close relationship seen between large-scale outbreaks of violence and climatic uncertainty." (p. 591)

HISTORY OF VIOLENCE

If prehistory was marked by predations against fellow humans, what can be said of historical times? It can be stated fairly that matters grew worse. Consider that the Old Testament, New Testament, and Koran, each averred to be, by their adherents, God's revealed truth, and, then and now, foremost among man's sources of moral instruction, often portray human violence as necessary exercises of power to attain the greater good. These words of God, if they did not precipitate it, were used to justify enormous carnage by those who worship the God of Peace. The wars springing up around the so-called "Protestant Reformation"—the wars of Religion (CE 1562 to 1598) and the Thirty Years' War (1618 to 1648)—are examples of this. In the latter, a third of Germany's population perished. Illustrative too are the various "Inquisitions"