ANGER, ALCOHOL USE, AND INTIMATE PARTNER VIOLENCE: ETIOLOGY AND INTERVENTION

CHRISTOPHER I. ECKHARDT, PH.D.
Department of Psychological Sciences
Purdue University
OVERVIEW

- Brief data review
- Some controversies!
- Theory
- More data
- Intervention implications
ANGER & VIOLENCE

- DOES ANGER CAUSE VIOLENCE/AGGRESSION?
DOES ANGER CAUSE VIOLENCE/AGGRESSION?

• Little evidence to suggest that feeling angry (i.e., state anger) is a necessary cause of aggression
  
  – physical aggression follows anger episodes in a very small percentage of cases (~10%) –
  verbal aggression much more common (~50%) (Averill, 1982; Tafrate et al., 2002)

HOWEVER, ample theoretical and empirical support for link between ANGRY DISPOSITION (i.e., trait anger) and violence risk

• Anger problems predict aggressive behavior among psychiatric inpatients:
  – prior to hospital admission (McNeil et al., 2003)
  – after release into community (Monahan et al., 2001)

• High trait anger individuals are more verbally and physically aggressive than their low trait anger counterparts (Deffenbacher et al., 1996; Tafrate et al., 2002)

But … effect is small/moderate, DV dependent, & inconsistent
IPV men higher in Trait Anger, Lower in Anger Control (Barbour, Eckhardt, Davison, & Kassinove, 1998; Eckhardt et al., 2002; Norlander & Eckhardt, 2005)

Not higher in State Anger in response to laboratory tasks (Babcock et al., 2005; Barbour et al., 1998; Eckhardt et al., in press)

No difference in physiological reactivity (Babcock et al., 2005)

IPV men display more belligerence and verbal aggression during conflict (Barbour et al., 1998; Eckhardt et al., in press)

Anger, belligerence, & contempt behaviors related to IPV frequency (Babcock et al., 2005)
Do anger problems help us understand abusive clients in treatment?

Study 1:
• Eckhardt, Samper, & Murphy (2008) *JIV*
  – 199 abusive men assessed post-adjudication (pre-program)
  – Males completed STAXI and other self-report instruments
  – Follow-up period = 13 months post-adjudication
3 ANGER PROFILES: ECKHARDT ET AL (2008)

The graph illustrates the distribution of anger profiles as measured by the STAXI (Spielberger Trait Anger Inventory) Test. The profiles are categorized into:

- **Low Anger** (~60%)
- **Moderate Anger-Inexpressive** (~10%)
- **High Anger-Expressive** (~30%)

The chart plots T-scores for different aspects of anger, including:

- STAXI Trait Anger
- STAXI Anger-Out
- STAXI Anger-In
- STAXI Anger-Control

The data points show the percentage distribution of individuals falling within each anger profile category.
CRIMINAL JUSTICE OUTCOMES

<table>
<thead>
<tr>
<th>ANGER CLUSTERS</th>
<th>Low Anger Cluster</th>
<th>Low-Moderate Anger Cluster</th>
<th>High Anger Cluster</th>
<th>$\chi^2$</th>
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<tbody>
<tr>
<td><strong>BIP Completion</strong></td>
<td></td>
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<tr>
<td>%Yes</td>
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<td>45.5</td>
<td>41.1</td>
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<tr>
<td>%No</td>
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<td><strong>Post-Offense Assaults</strong></td>
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<td><strong>Priors for Assault</strong></td>
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<td>78.6</td>
<td>.07</td>
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<tr>
<td>One or more</td>
<td>21.9</td>
<td>25.0</td>
<td>21.4</td>
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</tbody>
</table>

*p < .05. ** p < .01
Do client anger problems help us predict treatment outcomes?

Study 2:
- Murphy, Taft, & Eckhardt (2007) *J. Counseling Psych*
  - 139 consecutive-intake male adults (minimum age of 18) attending a suburban community-based treatment program for intimate partner abusive individuals (court mandated)
  - Assessed recidivism via self & partner reports
  - Evaluated impact of anger profiles on response to CBT
3-clusters:
- Pathological Anger (PA)
- Low Anger Control (LAC)
- Normal Anger (NA)

Figure 1. Average State–Trait Anger Expression Inventory subscale scores compared with population norms for pathological anger (PA), low anger control (LAC), and normal anger (NA) groups.
At post-treatment and 6-month follow-up, PA group had highest IPV prevalence rates by collateral report. Murphy, Taft, & Eckhardt (2007) *J. Counseling Psych*

Table 6
**Anger Group Differences in Dichotomous Physical Aggression and Injury Prevalence Outcomes by Collateral Partner Report**

<table>
<thead>
<tr>
<th>Abuse prevalence variable</th>
<th>PA (%)</th>
<th>LAC (%)</th>
<th>NA (%)</th>
<th>Three-cluster comparison</th>
<th>Problematic vs. normal anger groups&lt;sup&gt;a&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td>χ² (df = 2)</td>
<td>Kramer’s V</td>
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<tr>
<td>Posttreatment (PA, n = 17; LAC, n = 31; NA, n = 44)</td>
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<tr>
<td>CTS Physical Aggression</td>
<td>47</td>
<td>36</td>
<td>16</td>
<td>7.07*</td>
<td>.28</td>
</tr>
<tr>
<td>CTS–2 Injury</td>
<td>29</td>
<td>26</td>
<td>9</td>
<td>5.03</td>
<td>.23</td>
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<tr>
<td>6-month follow-up (PA, n = 16; LAC, n = 31; NA, n = 42)</td>
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<td></td>
<td></td>
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<tr>
<td>CTS Physical Aggression</td>
<td>25</td>
<td>19</td>
<td>5</td>
<td>5.47</td>
<td>.25</td>
</tr>
<tr>
<td>CTS–2 Injury</td>
<td>12</td>
<td>13</td>
<td>2</td>
<td>3.30</td>
<td>.19</td>
</tr>
</tbody>
</table>

*Note.* PA = pathological anger; LAC = low anger control; NA = normal anger; CTS = Conflict Tactics Scales; CTS–2 = Revised CTS.

<sup>a</sup>PA and LAC groups combined versus NA group.

* * p < .05.
ANGER & IPV!
NOT SO FAST....

WORST. IDEA. EVER.
One of “The 10 things every social worker needs to know about domestic violence” (Sandel, 2003):

“Men who batter usually do not have generalized anger or aggression problems. They do not beat up strangers, co-workers, or customers. This suggests that men who batter possess at least average anger control skills. The problem ... is an issue of choosing not to use the skills they possess with their intimate partners”
Influence on state standards:

- “These programs are NOT and should not be Anger Management programs. An Abuser does not have a "problem with anger"; the Abuser has a problem with the use of Power and Control over the Victim.” – Illinois Coalition against DV

  - 14 states strictly outlaw any anger control interventions
  
  - 13 states allow BIPs to incorporate anger control techniques into broader curriculum, but they may not emphasize such techniques
  
  - Only 5 states mention anger control techniques as useful components of BIP

Are anger control treatments for IPV perpetrators effective?

- UNKNOWN

  - This research question has not been systematically evaluated
RESOLVING THE CONTROVERSY
“…anger dyscontrol is a key issue in the profile of domestically violent men.” (Maiuro, Cahn, Vitaliano, Wagner, & Zegree, 1988, pp. 17)

“In short, anger is a highly interpersonal emotion. It cannot be fully understood apart from the social context in which it occurs; and...that context typically involves a close affectional relationship between the angry person and the target.” (Averill, 1982, pp. 1149)

“It is possible that anger found in intimate relationships, especially those that generate physical aggression, is a product of the individuals comprising the dyad, is generated by the dyadic conflict, or both.”

“Anger is central to intimate abusiveness” (Dutton, 2010, pp. 535, 543)
PRIOR META-ANALYSES

- Norlander & Eckhardt (2005)
  - Moderate ES for anger and hostility ($d = .51$), hostility ($d = .58$), and anger ($d = .47$)
  - First to evaluate the effects of method of assessment on anger, hostility and IPV association
  - Did NOT evaluate effects of other negative emotions, excluded dating relationships, and only explored male-to-female perpetrated IPV

- Stith, Smith, Penn, Ward, & Tritt (2004)
  - Moderate associations between anger/hostility and IPV ($d = .54$, $k = 11$) and depression and IPV ($d = .48$, $k = 14$) among male IPV perpetrators
  - Excluded non-cohabitating couples and not enough data to calculate ES for association between anger/hostility or depression and IPV for female-to-male IPV
ANGER, NEGATIVE EMOTIONS, & IPV

- MOST RECENT META-ANALYSIS:
- Birkley & Eckhardt, under review.

- 2,644 abstracts were obtained
- 112 studies were identified for closer review
- 62 studies with independent samples were analyzed
  - 102 effect sizes
- Self-report measures used in 87% of studies
- Observational measures employed in 18% of studies
- Self-report measures for IPV (version of CTS) were used exclusively in 84% of studies

<table>
<thead>
<tr>
<th>Demographics</th>
<th>M</th>
<th>SD</th>
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<tr>
<td>Age</td>
<td>31.92</td>
<td>5.69</td>
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<tr>
<td>Years of Education</td>
<td>12.86</td>
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<tr>
<td>Annual Income</td>
<td>31,959</td>
<td>10,658</td>
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</table>

- In 44% of studies, the majority of the sample was Caucasian, in 15% of the sample no ethnic group comprised more than 60% of the sample, and African Americans were the majority of the sample in 5% of studies
RESULTS

Grand Effect Size

- \( d = .43 \), \( k = 60 \), 95% CI = .40 - .47, \( p < .001 \)

Construct-level Effect Sizes

- Moderate effects for the associations between anger and IPV (\( d = .50 \), \( k = 37 \), 95% CI = .43 - .56, \( p < .001 \)) and hostility and IPV (\( d = .50 \), \( k = 16 \), 95% CI = .42 - .58, \( p < .001 \))
- Small effect for the relation between negative emotions and IPV (\( d = .33 \), \( k = 45 \), 95% CI = .28 - .39, \( p < .001 \))
- Between-category test was not significant (\( Q_b (3) = 5.35 \), \( p = .1477 \))
Variability was observed within the construct category of negative emotions ($Q_w(44) = 90.12, p < .001$), but not within anger ($Q_w(36) = 34.96, p = .5180$), hostility ($Q_w(15) = 5.28, p=.9895$), or the anger/hostility composite ($Q_w(2) = .0607, p = .9701$).

<table>
<thead>
<tr>
<th></th>
<th># of studies ($k$)</th>
<th>Mean $d$</th>
<th>95% CI</th>
<th>$Q$ between</th>
<th>$Q$ within</th>
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<tr>
<td>Neg. Emotions</td>
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<td>.46</td>
<td>51.72*</td>
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<td>Depression</td>
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<td>.36**</td>
<td>.13 - .59</td>
<td>37.23*</td>
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<td>Anxiety-related</td>
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<td>.36*</td>
<td>.04 - .67</td>
<td>13.52</td>
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<tr>
<td>Other</td>
<td>4</td>
<td>.15</td>
<td>-.43 -.73</td>
<td>.97</td>
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*p = .05; **p = .01; t = .07
## MODERATION ANALYSES

<table>
<thead>
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<th>Moderator Variables</th>
<th># of effects</th>
<th>Mean d</th>
<th>95% CI</th>
<th>Q between</th>
<th>Q within</th>
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<td>138.55**</td>
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<td>Self-Report</td>
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<td>.36 - .56</td>
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<td>Observational</td>
<td>22</td>
<td>.23**</td>
<td>.03 - .43</td>
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<td>17.57</td>
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<table>
<thead>
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<th>21.40</th>
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<td>Anger</td>
<td>9</td>
<td>.51</td>
<td>.27 - .74</td>
<td>6.56</td>
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<td>Hostility</td>
<td>5</td>
<td>.22</td>
<td>-.10 - .54</td>
<td>3.28</td>
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<tr>
<td>Negative Emotions</td>
<td>7</td>
<td>.31</td>
<td>.04 - .58</td>
<td>11.56</td>
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</table>

Moderate-severe IPV perpetrators had higher scores across the constructs of interest than low-moderate perpetrators (k=11, 21 effect sizes, $d = .47***$, 95% CI = .40 - .54)
<table>
<thead>
<tr>
<th>Moderator Variables</th>
<th># of effects</th>
<th>Mean $d$</th>
<th>95% CI</th>
<th>$Q$ between</th>
<th>$Q$ within</th>
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<tr>
<td>Male</td>
<td>91</td>
<td>.43***</td>
<td>.34 - .53</td>
<td>1.79</td>
<td>165.75**</td>
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<td>1.73</td>
<td>136.22**</td>
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<td>.34 - .64</td>
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<td>91.70***</td>
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<td>.16 - .57</td>
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<td>.06 - .74</td>
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<td>.55***</td>
<td>.40 - .71</td>
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*p = .05; **p = .01; ***p = .001;
Excessive anger and hostility, and to a lesser extent other negative emotions, are risk factors for IPV

..... but so are dozens of other variables....
DISTINGUISHING CHARACTERISTICS OF PERPETRATORS

- Younger Age
- Lower SES
- Afr/Amer & Latino ethnic identification (*huge within group variation*)
- Witnessing/Experiencing abuse during childhood
- Less secure attachment
- Relationship discord
- Negative reciprocity communication patterns
- Head Injury/Neuropsych Factors
- Cognitive Distortions/Biased Attitudes
- Substance Use/Abuse
- Psychopathology / Psychopathy .......
These accumulated risk factors lack theoretical cohesion

Existing models of IPV are largely topographic (i.e., non-dynamic), unidimensional, non-integrative, and (esp. in the U.S.) heavily influenced by sociopolitical ideology.
Fig. 1. Offender risk factors. Composite effect sizes were computed for the variables in bold (see results for further information). Unable to compute a computed effect size for italicized risk factors.
THEORETICAL IMPROVEMENTS NEEDED

- While there are over 100 identified risk factors, "theory and research on relationship violence remain uncohesive" (Berscheid & Regan, 2005, p. 52).

- Ultimately, however, the issues boil down to this somewhat simplistic balance:

Inclination to be Violent

Restraint on that Inclination

Finkel, 2007, RGP
Organizational *meta-theory* for understanding:

- The processes by which a risk factor, or set of risk factors, promote aggression
- How multiple risk factors interact to aggravate or mitigate the aggression promoting tendencies of each component
- Theoretically inclusive

Three processes:

- Instigation
- Impellance
- Inhibition

The three processes can function independently
Exposure to discrete social dynamics that *normatively* trigger an urge to become aggressive
Exposure to discrete social dynamics that *normatively* trigger an urge to become aggressive
Dispositional or situational factors that psychologically *prepare* an individual to experience a strong urge to aggress when encountering instigation *in a particular context*
Dispositional or situational factors that psychologically prepare an individual to experience a strong urge to aggress when encountering instigation in a particular context.
I3 PROCESS CATEGORIES

Instigation
Impellance
Inhibition

Factors that increase the likelihood that a person will be able to resist an urge to behave aggressively at a specific point in time.
Factors that increase the likelihood that a person will be able to resist an urge to behave aggressively at a specific point in time.
Factors that *decrease* the likelihood that a person will be able to resist an urge to behave aggressively at a specific point in time.
DISINHIBITING factors—interfere with one’s ability to regulate inclination to engage in aggression (Finkel & Eckhardt, 2013)—examples:

• **Distal** – Cultural/societal norms that condone or permit IPV perpetration

• **Dispositional** – relatively stable individual differences
  – e.g., Poor executive functioning (Giancola, 2000); Low dispositional self-control (Finkel & Campbell, 2001); High impulsiveness (Denson, DeWall, & Finkel, 2012)

• **Relational** – relationship characteristics that decrease inhibitory threshold
  – Low relationship commitment (Slotter, Finkel, & Bodenhausen, 2009)

• **Situational** – momentarily activated cognitive, affective, or physiological experiences that impair one’s ability to override an aggressive urge
  – Depleted self-regulatory resources (DeWall et al., 2007; Finkel et al., 2009)
  – Alcohol intoxication (Eckhardt, 2007; Leonard, 2005)
Factors that *decrease* the likelihood that a person will be able to resist an urge to behave aggressively at a specific point in time.
Instigation  Impellance  Inhibition
MAJOR ADVANTAGE OF THE I³ MODEL:

• allows for an analysis of the total immediate risk for IPV perpetration for a particular individual, in a particular context, with a particular set of factors that may impel or inhibit aggressive behavior
Violence-Impelling Forces  
“Urge-Readiness”

Violence-Inhibiting Forces  
“Urge-Impedance”

Instigation

Impellance

Specific Provocations

e.g., Trait anger, aggressiveness

Inhibition/Disinhibition

e.g., fear of consequences

e.g., alcohol intoxication

(Instigator + Impellers) – (∑ Inhibitors – ∑ Disinhibitors) = Presence/Absence and Severity of Aggressive Behavior
PREDICTING IPV

"Perfect storm"

Initial Data....
Longitudinal marriage study (Finkel et al, 2012)

IPV perpetration over the past 6 months (CTS), controlling for previous perpetration
- Ex: “Pushed, grabbed, or shoved spouse” (neg. bin. reg.)

I³ variables
- Instigator (proneness): Partner’s report of neuroticism
  - Ex: “I get irritated easily”

- Impeller: Trait anger
  - Average daily reports of “angry” from a 7-day diary

- (Dis)inhibitor: Life stress
Finkel et al., 2012, *JPSP*

Low Partner Neuroticism

- Low stress: 1, High stress: 3

High Partner Neuroticism

- Low stress: 0, High stress: 4

3-way: $B = .55$, $t = 2.16$, $p = .04$

2-way: $B = -.57$, $t = -1.35$, $p = .18$

2-way: $B = .54$, $t = 1.72$, $p = .09$

Anger: $B = 1.62$, $t = 2.62$, $p = .01$
ALCOHOL & IPV: WHAT WE KNOW

(i.e., everything Ken said....)

Bottom line is that alcohol is neither necessary nor sufficient for aggression to occur.

The effect of alcohol on aggression (and IPV) is dependent on individual and situational moderating variables (Ito et al., 1997)

- Affective (e.g., trait anger, anger control, negative affect)
- Cognitive (e.g., hostility, coping style)
- Behavioral (e.g., trait aggressivity, impulsivity)
- Relationship (e.g., relationship satisfaction)

WE KNOW WHO IS AT RISK
How do these processes interact to increase risk of acute IPV during provocation?

Laboratory Studies:

• Alcohol intoxication increases negative interaction in couples (Leonard & Roberts, 1998)

• especially among angry and intoxicated perpetrators (Eckhardt, 2007)
  – ...more on this:
“Perfect storm”

How does anger dysregulation interact with alcohol and other factors to increase likelihood of IPV?
Participan\[s\]t

• Maritally Violent Men, \(n = 46\) (IPV):
  – \(M\) Age = 29; married 3.8 yrs; 36% Afr-Amer, 52% Cauc, 7% Latino

• Maritally Nonviolent Men, \(n = 56\) (NV):
  – \(M\) Age = 29; married 4.5 yrs; 19% Afr-Amer, 71% Cauc, 10% Latino

Screening:

– MV: \(\geq 1\) act of husband-to-wife physical aggression according to husband and wife
– NV: no acts of physical aggression in history of relationship
– No current alcohol problems, current/prev alcohol abuse or dependence dx, not currently abstaining, no current medical conditions or prescription meds.
Method

- **Questionnaires:**
  - STAXI-2 Anger, BPAQ, CTS-2 IPV

- **Standard Alcohol – Placebo – Control beverage manipulation**
  - (BAC .09 in alc group)

Eckhardt, 2007, *JCCP*
PRIMARY ASSESSMENT PARADIGM:

- **ARTICULATED THOUGHTS IN SIMULATED SITUATIONS PARADIGM (ATSS; Eckhardt et al., 1998; Davison et al., 1983)**
- **Premise**: IPV-proximal emotions, cognitions, and behaviors are best assessed **during** an angry provocation

Eckhardt, 2007, *JCCP*
Jealousy

- You come home early to find a male acquaintance with your wife – you decide to remain hidden and listen –

SAMPLE JEALOUSY SEGMENT:

M: “It’s really nice of you to invite me over for dinner tonight.”
W: “I love to cook for someone who appreciates good food.”
M: “This is really great.”
W: “And I’ve got a “special” dessert planned for you too.”
Participants’ articulations recorded and transcribed

Trained raters code for cognitive variables using detailed coding manual
  • Read transcriptions while listening to audio
Alcohol increased males’ aggressive verbalizations only during anger arousal and only among those with an IPV history.

Eckhardt, 2007, *JCCP*
-- Alcohol interacts with high anger reactivity (left figure) and high trait anger (right figure) to predict aggressive verbalizations among IPV men

Eckhardt, 2007, JCCP
HYPOTHESES ABOUT ALCOHOL & IPV

Mechanisms of Alcohol-Facilitated IPV

1. Reduces fear and anxiety
2. Increases arousal
3. Disrupts higher-order cognitive functioning
There exist few direct tests of these assumptions.

Studies rarely assess these variables (e.g., affect, arousal, cognition) in vivo to determine whether they mediate the effect of alcohol on aggression.

Systemic problem in alcohol-aggression & behavioral science research:
- Efficacy research rarely invests significant resources to demonstrate that interventions affect relevant psychosocial mediators (Glasgow, Lichtenstein, & Marcus, 2003).
WHAT WE STILL DON’T KNOW

(1) Studies have not directly shown that theorized variables (e.g., attentional biases, anger, hostile cognitions) mediate the effect of alcohol on IPV.

(2) Studies have not ascertained the extent to which interventions for alcohol-related IPV work through those mechanisms.

(3) How do we reduce IPV that occurs following alcohol consumption?
PROJECT AIMS

- Project SPARC (Eckhardt & Parrott, NIAAA; 2012-2017):
  - *Studying Predictors of Alcohol-induced Relationship Conflict*

- (1) Examine how specific affective and cognitive processes mediates the relationship between alcohol intoxication and IPV
  - Overcome methodological limitations of assessing mediation

- (2) Test theory-based interventions that inform the development of treatments to prevent or reduce alcohol-related violence in close relationships

Eckhardt, Parrott, & Sprunger, in press, VAW
METHODOLOGY

- Two laboratory-based studies that recruit at-risk couples from Atlanta, GA and Indianapolis, IN

- **Study 1** \( (n = 500) \): Are effects of alcohol on aggression toward intimate partners mediated by attentional biases toward aggression-related stimuli and subsequent cognitive and affective processes?
  - Alcohol administration
  - Laboratory measures of attention allocation (dot probe task) and aggression (TAP)
  - Real-time measurement of cognitive and affective processes

- **Study 2** \( (n = 500) \): Does an AMT-based intervention manipulation reduce alcohol-related aggression toward intimate partners via these mechanisms?
  - Alcohol administration
  - AMT-based intervention manipulation to increase self-awareness
  - Laboratory measures of attention allocation (dot probe task) and aggression (TAP)
  - Real-time measurement of cognitive and affective processes

Eckhardt, Parrott, & Sprunger, in press, VAW
Why Is the I³ Model Important?

- Provides a meta-theoretical framework that isn’t wedded to one theoretical lens
  - Allows for diverse theoretical perspectives to operate
  - Process-oriented, dynamic, interactive model
  - Largely free from ideological influence

- Prediction/Risk Assessment
- Case Formulation
- Intervention Development
  - More on this....
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CBT for Perpetrators of Intimate Partner Violence

*The “I³” Approach*

Christopher I. Eckhardt, Cory A. Crane, and Joel G. Sprunger
THE END!

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ECKHARDT@PURDUE.EDU