Controlling behaviours and technology-facilitated abuse perpetrated by men receiving substance use treatment in England and Brazil: prevalence and risk factors

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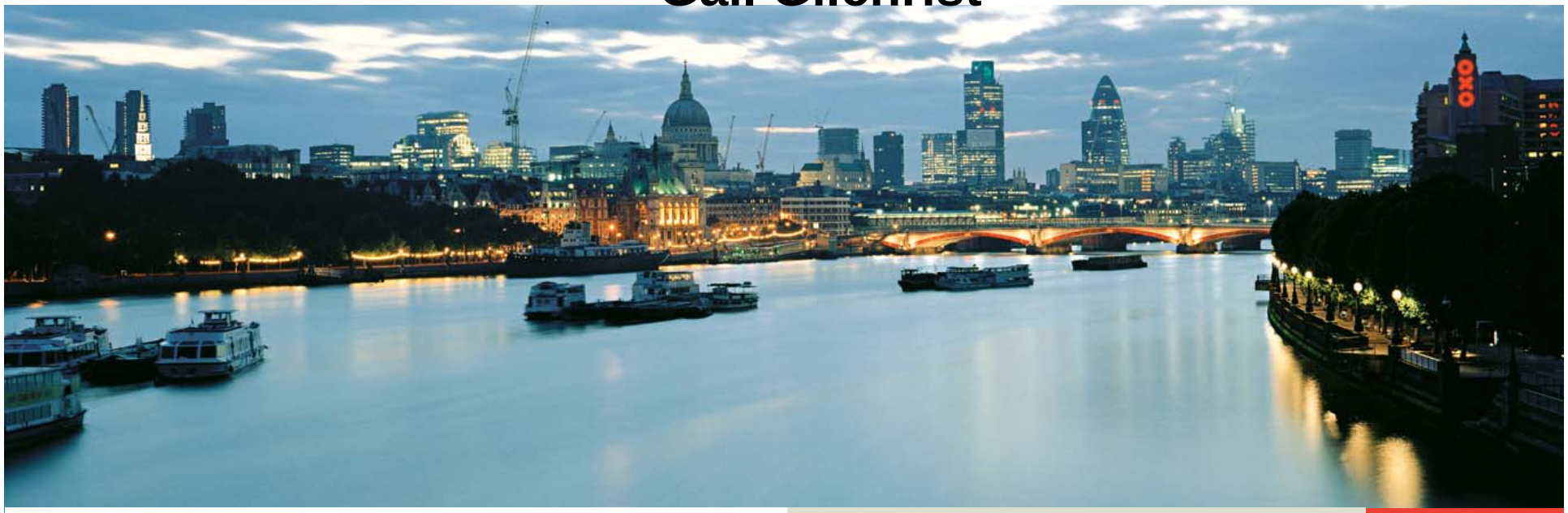

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Controlling behaviour in intimate relationships

- It is a highly prevalent form of non-physical violence and while it often co-occurs with physical and sexual violence in intimate relationships, there are different opinions as to whether it is always a constituent part of intimate partner violence (IPV) (Morgan & Bjorker, 2006).

Controlling behaviour in intimate relationships

- Different typologies for IPV perpetrator based on the nature of the violence (Kelly & Johnson, 2008):
  - Intimate Terrorism (a pattern of emotionally abusive intimidation, coercion, and control)
  - Violent Resistance (to a violent, coercively controlling partner),
  - Situational Couple Violence (violence that does not have its basis in the dynamic of power and control)

- Behaviours that include control over a partner's access to resources, to freedom of movement, and decision making, negatively affect the victim and, it is argued can be equal to or more threating than physical or sexual assault (DeKeseredy W, 2000; Logan et al, 2006)

Technology-facilitated abuse (TFA)

•A wide variety of technology is now being used to abuse partners including email, text messaging, phone calls, social media and GPS tracking (Burke et al., 2011; Ringrose et al, 2012)

- 40%-73% of US college students have experienced such cyber abuse in dating relationships (Marganski & Melander, 2015; Wolford et al., 2016)
- In Australia, 78% female survivors of IPV reported receiving text messages(Woodlock, 2016)

•The increasingly widespread use of mobile technologies provides a means for perpetrators to easily and repeatedly control, harass, stalk and intimidate partners from a distance (Fraser et al., 2010)

•Research suggests that victims of stalking via technological means do not always perceive that they are experiencing abuse (Woodlock, 2016)

IPV Perpetration

•Previous research has shown that rates for IPV perpetration are higher among men receiving treatment for substance use than for men in the general population (eg., Gilchrist et al., 2015; Smith et al., 2012)

•While alcohol and drug use are widely accepted risk factors for IPV there remains debate over the role of substance use (Stith et al, 2004)

•Societies that support stronger ideologies of male dominance have elevated rates of IPV. While the prevalence rates of controlling behaviour and physical and sexual IPV vary across cultures and countries, the association between these behaviours persists (Jewkes , 2007)

•Not clear how this varies across cultural settings and what role for example 'machismo' culture (a system of values and ideas that institutes, reinforces and legitimises men's domination over women) may play.

Current study

❖**Although there is growing recognition of controlling behaviours and TFA, the prevalence of these behaviours remains understudied, and has not been studied in groups at high risk of other IPV perpetration, such as men in treatment for substance use.**

Aims:

-To examine the **prevalence** of controlling behaviours and TFA by men receiving treatment for substance use in two distinct societies, England and Brazil.

-To describe the sociodemographic, psychological, and cultural **factors associated with** perpetrating controlling behaviour and TFA.

-To explore the **association between perpetrating and being a victim** of controlling behaviours and TFA with other forms of IPV victimisation and perpetration (emotional, physical, and sexual).

Methods

Design

- A secondary analysis of two cross-sectional studies (England n= 223 and Brazil n=280)

Measurements

- socio-demographic characteristics, infidelity, IPV perpetration and victimisation, adverse childhood experiences (ACE), attitudes towards gender relations and roles, substance use, depressive symptoms, and anger expression.

Sample

- Aged 43 years (SD 10.6) on average
- 96.6% were heterosexual (96.8% Brazil, 96.4% England)
- The most commonly used drugs in the past 30 days were cocaine (Brazil), crack, heroin (England) and cannabis; 70.2% reported hazardous drinking (74.0% Brazil, 65.3% England).

Results: Prevalence

Controlling Behaviours

- Highly prevalent in both the Brazil (65%) and English (64.1%) samples

Technology-facilitated abuse (TFA)

- Participants from England (32.7%) were almost twice as likely as participants from Brazil (20.4%) to report TFA (OR 1.90, 95%CI 1.27, 2.85).

Participants who reported perpetrating controlling behaviours were almost seven times more likely to also have reported perpetrating TFA (OR 6.94, CI95% 3.7, 12.76).

Results: Prevalence

•Similar rates of perpetrating controlling behaviours between countries were reported but lower rates of perpetrating TFA were reported in Brazil compared to England, potentially due to lower access to such technologies in Brazil.

•In 2015, 76% of the UK adult population had access to the internet and 52% of people in treatment for substance use had smartphones compared to 56% of the Brazilian population having access to the internet and 28% having a smartphone.

•Our findings, therefore, highlight the role that technological advancements has on providing additional opportunities for perpetrators to control, stalk and abuse their partners more frequently and easily

CONTROLLING BEHAVIOURS - BRAZIL - TFA

BRAZIL	NO (n=95)	YES (n=184)	OR (95% CI)	NO (n=223)	YES (n=57)	OR (95% CI)
Demographics						
Age [mean (SD)]	46.17 (11.26)	41.84 (11.16)	0.97 (0.94, 0.98)	45.06 (11.31)	36.65 (8.87)	0.41 (0.25, 0.66)
Heterosexual	91 (95.8%)	179 (97.3%)	1.57 (0.41, 6.00)	214 (96.0%)	57 (100.0%)	0.51 (0.45, 5.69)
Live in the country of birth	94 (98.9%)	182 (98.9%)	0.97 (0.09, 10.81)	221 (99.1%)	56 (98.2%)	0.52 (0.29, 0.91)
No/Primary schooling/Left school	61 (64.2%)	117 (63.9%)	0.99 (0.59, 1.66)	147 (66.2%)	31 (54.4%)	1.15 (0.64, 2.06)
without qualifications						
Unemployed/Receiving benefits	33 (34.7%)	91 (49.5%)	1.84 (1.10, 3.07)	98 (43.9%)	27 (47.4%)	0.77 (0.16, 3.62)
Homeless	2 (2.1%)	10 (5.5%)	2.69 (0.58, 12.52)	10 (4.5%)	2 (3.5%)	2.12 (1.16, 3.86)
Intimate relationship						
Infidelity	36 (38.3%)	97 (53.6%)	1.85 (1.12, 3.09)	98 (44.7%)	36 (63.2%)	2.12 (1.16, 3.86)
Believed that current/most recent	25 (26.3%)	39 (21.2%)	0.75 (0.42, 1.34)	47 (21.1%)	17 (29.8%)	1.60 (0.83, 3.06)
partner has/had a problem with						
alcohol or drug use						
Substance use						
In treatment for alcohol	85 (90.4%)	154 (83.7%)	0.54 (0.25, 1.20)	200 (90.1%)	40 (70.2%)	0.26 (0.13, 0.53)
In treatment for drug	45 (47.4%)	113 (61.4%)	1.77 (1.07, 2.92)	116 (52.0%)	42 (73.7%)	2.58 (1.35, 4.92)
AUDIT total score [mean (SD)]	17.09 (11.86)	19.97 (12.20)	1.02 (0.99, 1.04)	18.90 (12.25)	19.09 (11.82)	1.00 (0.98, 1.03)
Anger [mean (SD)]						
Anger Expression Index	32.37 (15.25)	42.28 (16.58)	1.04 (1.02, 1.06)	36.62 (16.01)	47.82 (16.91)	10.78 (1.45, 80.40)
Violence						
Victim of controlling behaviours	69 (72.6%)	173 (94.0%)	5.93 (2.78, 12.65)	187 (83.9%)	56 (98.2%)	10.78 (1.45, 80.40)
Victim of TFA	24 (25.3%)	78 (42.4%)	2.90 (1.63, 5.16)	59 (26.5%)	44 (77.2%)	9.41 (4.74, 18.69)
IPV Victimisation						
Emotional	56 (58.9%)	141 (76.6%)	2.28 (1.34, 3.89)	150 (67.3%)	48 (84.2%)	2.60 (1.21, 5.58)
Sexual	8 (8.4%)	39 (21.2%)	2.92 (1.31, 6.55)	30 (13.5%)	17 (29.8%)	2.73 (1.38, 5.43)
Moderate Physical	13 (32.5%)	27 (24.8%)	0.68 (0.31, 1.51)	31 (29.0%)	9 (20.9%)	0.65 (0.28, 1.51)
Severe Physical	27 (67.5%)	82 (75.2%)	1.46 (0.66, 3.23)	76 (71.0%)	34 (79.1%)	1.54 (0.66, 3.59)
IPV Perpetration						
Emotional	44 (46.3%)	126 (68.5%)	2.52 (1.51, 4.19)	125 (56.1%)	46 (80.7%)	3.28 (1.61, 6.66)
Sexual	6 (6.3%)	23 (12.5%)	2.12 (0.83, 5.40)	17 (7.6%)	12 (21.1%)	3.23 (1.44, 7.23)
Moderate Physical	10 (35.7%)	10 (12.2%)	0.25 (0.90, 0.69)	20 (24.4%)	1 (3.4%)	0.11 (0.15, 0.89)
Severe Physical	18 (64.3%)	72 (87.8%)	4.00 (1.45, 11.06)	62 (75.6%)	28 (96.6%)	9.03 (1.15, 70.68)
Ever physical fight with a man	66 (70.2%)	151 (83.0%)	2.07 (1.15, 3.72)	170 (76.9%)	47 (83.9%)	1.57 (0.72, 3.41)
Mental Health						
Probable depressive disorder	33 (34.7%)	101 (54.9%)	2.29 (1.37, 3.82)	96 (43.0%)	38 (66.7%)	2.65 (1.44, 4.87)
ACE total score [mean (SD)]	3.04 (1.94)	4.17 (2.10)	1.31 (1.15, 1.50)	3.45 (2.04)	5.07 (1.90)	1.47 (1.25, 1.71)
Ever told by health professional had	17 (18.3%)	33 (18.4%)	1.01 (0.53, 1.93)	41 (18.7%)	9 (16.7%)	0.88 (0.39, 1.92)
manic-depressive illness or bipolar						
Gender norms [mean (SD)]						
Attitudes to gender relations	42.07 (7.10)	44.05 (7.24)	0.95 (0.91, 0.98)	45.08 (7.46)	44.38 (6.37)	0.98 (0.94, 1.02)
Attitudes to gender roles	27.57(2.53)	28.05(1.89)	0.81 (0.72, 0.92)	27.97 (2.38)	27.71 (2.35)	0.96 (0.85, 1.08)

CONTROLLING BEHAVIOURS - ENGLAND - TFA

ENGLAND	NO (n=	YES (n=1	OR (95%	NO (n=15	YES (n=7	OR (95%
Demographics						
Age [mean (SD)]	44.14 (9.08)	41.59 (9.78)	0.97 (0.94, 1.00)	45.06 (11.31)	36.65 (8.87)	0.29 (0.13, 0.64)
Heterosexual	76 (96.2%)	138 (96.5%)	1.09 (0.25, 2.40)	146 (98.0%)	68 (93.2%)	0.28 (0.06, 1.20)
Live in the country of birth	73 (91.3%)	119 (83.2%)	0.47 (0.19, 1.16)	129 (86.0%)	63 (86.3%)	1.03 (0.46, 2.31)
No/Primary schooling/Left school	30 (35.5%)	46 (32.2%)	0.79 (0.45, 2.43)	51 (34.0%)	25 (34.2%)	1.01 (0.56, 1.85)
without qualifications				127 (84.7%)	66 (90.4%)	1.71 (0.69, 4.19)
Unemployed/Receiving benefits	68 (85.0%)	125 (87.4%)	1.22 (0.56, 2.69)			
Homeless	20 (25.0%)	39 (27.3%)	1.12 (0.60, 2.10)	41 (27.3%)	18 (24.7%)	0.87 (0.46, 1.65)
Intimate relationship						
Infidelity	12 (15.6%)	38 (26.6%)	1.96 (0.95, 4.02)	28 (19.0%)	22 (30.1%)	1.83 (0.96, 3.50)
Believed that current/most recent	38 (47.5%)	65 (45.5%)	0.92 (0.53, 1.59)	66 (44.00%)	37 (50.7%)	1.31 (0.75, 2.29)
partner has/had a problem with						
alcohol or drug use						
Substance use						
In treatment for alcohol	28 (35.4%)	50 (35.0%)	0.98 (0.55, 1.74)	49 (32.9%)	29 (39.7%)	1.34 (0.75, 2.40)
In treatment for drug	62 (77.5%)	107 (74.08%)	0.86 (0.45, 1.65)	115 (76.7%)	54 (74.0%)	0.86 (0.45, 1.65)
AUDIT total score [mean (SD)]	17.45 (14.13)	17.47 (13.35)	1.00 (0.98, 1.02)	16.96 (13.75)	50 (68.5%)	1.24 (0.68, 2.43)
Anger [mean (SD)]						
Anger Expression Index	32.57 (14.45)	38.12 (14.21)	1.03 (1.01, 1.05)	33.75 (13.81)	40.98 (14.81)	1.04 (1.01, 1.06)
Violence						
Victim of controlling behaviours	52 (65.8%)	127 (88.8%)	4.12 (2.05, 8.28)	110 (73.8%)	69 (94.5%)	6.12 (2.09, 17.87)
Victim of TFA	27 (34.6%)	86 (60.6%)	2.90 (1.63, 5.16)	55 (37.4%)	58 (79.5%)	6.47 (3.35, 12.50)
IPV Victimisation						
Emotional	46 (57.5%)	113 (80.1%)	2.98 (1.62, 5.47)	98 (66.2%)	61 (83.6%)	2.59 (1.28, 5.26)
Sexual	3 (3.8%)	16 (11.3%)	3.26 (0.92, 11.55)	10 (6.7%)	9 (12.3%)	1.95 (0.75, 5.04)
Moderate Physical	7 (12.5%)	10 (9.7%)	0.75 (0.27, 2.10)	15 (14.7%)	2 (3.5%)	0.21 (0.05, 0.95)
Severe Physical	49 (87.5%)	93 (90.3%)	1.33 (0.48, 3.71)	87 (85.3%)	55 (96.5%)	4.74 (1.04, 21.54)
IPV Perpetration						
Emotional	42 (52.5%)	96 (67.6%)	1.89 (1.07, 3.31)	82 (55.0%)	56 (76.7%)	2.69 (1.43, 5.06)
Sexual	1 (1.3%)	10 (7.0%)	5.83 (0.73,46.45)	6 (4.1%)	5 (6.8%)	1.73 (0.51, 5.86)
Moderate Physical	11 (36.8%)	18 (25.4%)	0.59 (0.23, 1.46)	20 (33.9%)	9 (21.4%)	0.53 (0.21, 1.32)
Severe Physical	19 (63.3%)	53 (74.6%)	1.70 (0.68, 4.26)	39 (66.1%)	33 (78.6%)	1.88 (0.75, 4.69)
Ever physical fight with a man	74 (93.7%)	128 (89.5%)	0.58 (0.20, 1.65)	137 (91.9%)	65 (89.0%)	0.71 (0.28, 1.83)
Mental Health						
Probable depressive disorder	38 (47.5%)	73 (51.0%)	1.15 (0.67, 1.99)	74 (49.3%)	37 (50.7%)	1.06 (0.60, 1.85)
ACE total score [mean (SD)]	3.57 (2.18)	4.57 (2.20)	1.23 (1.07, 1.41)	3.79 (2.22)	5.03 (2.05)	1.30 (1.12, 1.50)
Ever told by health professional had	8 (10.0%)	28 (19.9%)	2.23 (0.96, 5.16)	22 (14.8%)	14 (19.4%)	1.39 (0.66, 2.92)
manic-depressive illness or bipolar						
Gender norms [mean (SD)]						
Attitudes to gender relations	48.82 (5.67)	48.41 (5.41)	1.01 (0.96, 1.06)	48.41 (5.40)	49.23 (5.90)	1.03 (0.98, 1.08)
Attitudes to gender roles	28.85 92.16)	29.40 (2.45)	0.88 (0.77, 1.02)	28.93 (2.48)	29.29 (1.77)	1.08 (0.94, 1.23)

Results

- Participants in our study who were more supportive of gender equitable norms were less likely to report controlling behaviour.

- It is interesting that in spite of the higher support for gender equitable relations and less gender stereotyped attitudes towards gender roles in England compared to Brazil, the prevalence of perpetrating controlling behaviour was almost identical.

- The data from Brazil partially supports the concept that physical IPV may be used to maintain ‘coercive control’, while the data from England suggests that more subtle forms of IPV including TFA may also be used to enforce control in a cultural context where male domination and IPV is less socially accepted.

Multivariate analysis
(excluding intimate partner violence victimisation)

Brazil

England

❖ **CONTROLLING BEHAVIOURS**

- Severe Physical IPV perpetration
- Number of adverse childhood experiences (ACE)

❖ **TECHNOLOGY-FACILITATED ABUSE (TFA)**

- Age

❖ **CONTROLLING BEHAVIOURS**

- Anger Expression Index
- Number of adverse childhood experiences (ACE)

❖ **TECHNOLOGY-FACILITATED ABUSE (TFA)**

- Age

Multivariate analysis
(including intimate partner violence victimisation and/or perpetration)

Brazil

❖**CONTROLLING BEHAVIOURS**

- Severe Physical IPV perpetration

- Number of adverse childhood experiences (ACE)

- Victim of controlling behaviour

❖**TFA**

- Age
- Victim of TFA

England

❖**CONTROLLING BEHAVIOURS**

- Emotional IPV victimisation

- Number of adverse childhood experiences (ACE)

- Victim of controlling behaviour

- Anger Expression Index

❖**TFA**

- Age
- Victim of TFA

Results

- **Cultural differences**. It is possible that in cultures such as England where there is lower acceptability of severe physical IPV, controlling behaviour may substitute for physical IPV.

- **ACE.** Studies suggest that experiencing ACE can have an impact on the threat-appraisal response system and result in hyper-reactivity to later stressors in life. Heightened reactivity to stress has been argued to be the potential link between childhood adversities, anger and IPV perpetration (eg., Welles et al, 2011; Iverson et al, 2014)

- **Younger age.** the only factor associated with TFA, even when IPV victimisation was included in the model reflecting generational differences in technology use

Recommendations

- Limited evidence to recommend risk assessment tools in predicting and measuring controlling behaviour, but TFA should be considered within any assessment of IPV.

- Urgent need for policy and legal responses to address TFA in the context of IPV.

- The fact that younger participants were more likely to perpetrate TFA, suggests that the negative use of technology in intimate relationships should be a focus of prevention strategies to reduce IPV perpetration.

- Risk factors for perpetrating controlling behaviours and TFA identified could offer ways of improving interventions aimed at preventing and reducing IPV among men receiving treatment for substance use.

THANK YOU !

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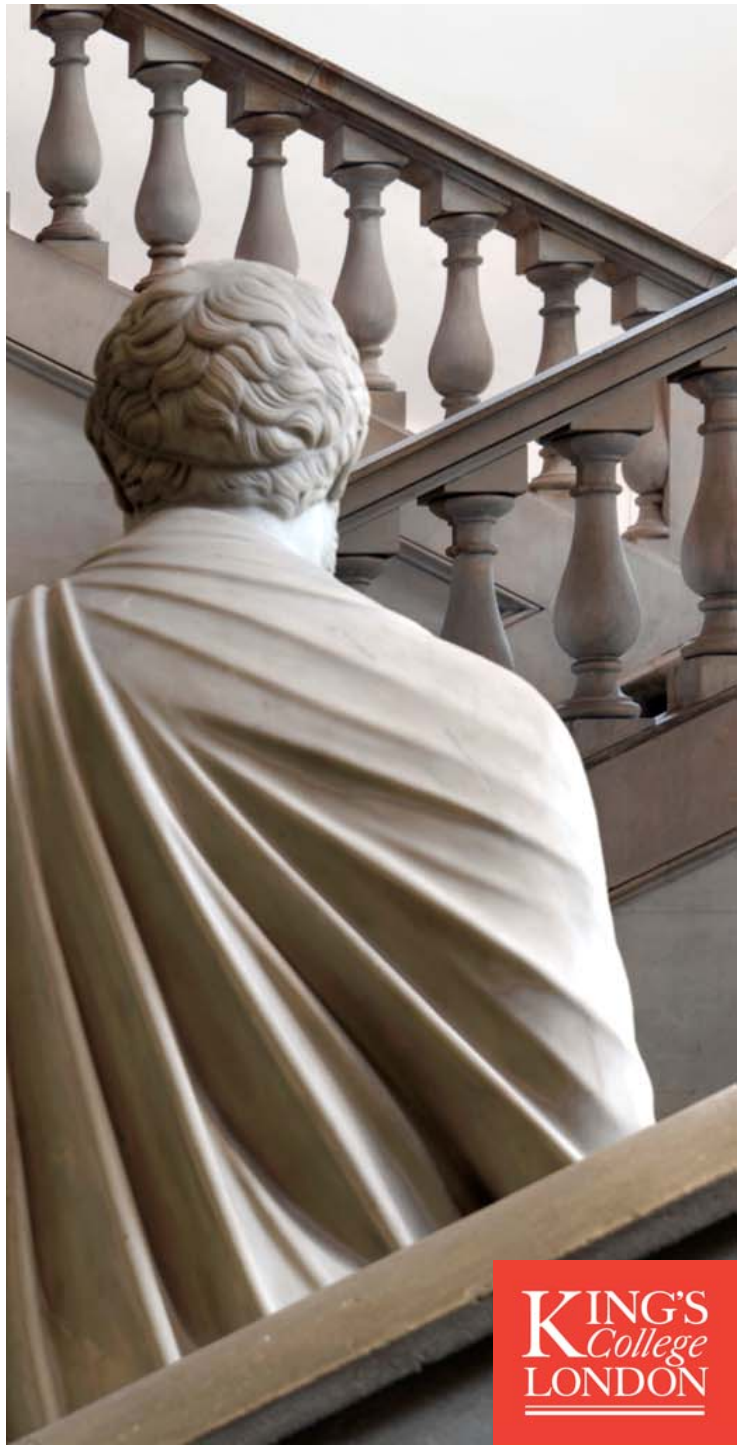
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