Coercive Control

Domestic violence comprises a range of behaviors beyond physical and emotional abuse. Abusers often use violence, intimidation, degradation and isolation to deprive victims of their rights to physical security, dignity and respect. Evan Stark has been encouraging the use of “coercive control” to describe a course of oppressive behavior grounded in gender-based privilege. While all forms of abuse are about power and control, coercive control is a strategic form of ongoing oppression and terrorism that invades all arenas of women’s activity by limiting access to money and other basic resources. In addition, few elements of coercive control are currently considered criminal, or are only crimes when committed against strangers, which further complicates this issue within the context of domestic violence.

To learn more about Coercive Control, see the Q&A with Evan Stark on page 3.

Did you know...

In a recent study on teens and orders of protection, 51% of male respondents with an average age of only 20.9 years already had adult criminal histories when the orders were taken out against them.

Juvenile Orders of Protection as a Remedy for Dating Violence

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New York State’s 2008 Expanded Access Law allowed teens to secure orders of protection (OPs) for dating violence. Despite extensive research on adult orders of protection, the study summarized below is the first to examine teen dating violence. With the assistance of Cornell University’s Family Life Development Center and Day One, a NYC legal service agency for teens, we obtained data from the NYS Office of Court Administration and NYS Division of Criminal Justice Services and from all petitions and Domestic Incident Reports (DIRs) filed by teens (18 and younger) across New York State in 2009 and 2010. We also heard from teen focus groups statewide, including teens who secured OPs for dating violence in NYC.

KEY FINDINGS

There is limited utilization of OPs by teen dating violence victims.
In the first two full years after the Expanded Access Law passed, 1,200 juveniles petitioned NY Family Courts for dating violence OPs against 1,205 different respondents (abusers). Since the Centers for Disease Control and Prevention estimates that at least 10% of teens suffer dating violence, this is a fraction of potential teen dating violence victims. The 2011 Empire State Poll reveals that only 14.5% of NYS adults have heard either “a lot” or “some” about the 2008 law, and our teen focus group was no more familiar with the law.

Substantial barriers to obtaining OPs are perceived.
Teens reported attitudes, beliefs, and fears about usefulness (it’s “only a piece of paper”), acceptability (“your friends… might look at you a different way,” including being branded a “snitch”), and accessibility (“It’s a big deal”) as the most substantial barriers. Those who secured OPs expressed ambivalence about losing the relationship, which was often worse than losing the boyfriend and often included the loss of mutual friends (“it’s like I don’t have anybody”).

Almost all petitioners were female, and younger than their dating partners.
More than 90% of petitioners were female and their abusers male. Just under eight percent involved a male-petitioner-female respondent pairs, and less than 2% involved same sex couples. Most respondents averaged 2.92 years older than their petitioners. While most victims were teens, most abusers were not. The few female respondents were less likely to have arrest histories than male respondents, and NY judges were significantly less likely to grant petitions against female respondents.

Despite their youth, the majority of male respondents had criminal histories.
Fifty-one percent of respondents committed an average of four arrests each. Forty percent of respondents were arrested for crimes against persons. Despite their youth and being unmarried, the extensive criminality of half the study respondents fit the description of adult serial abusers. When respondents committed new intimate partner violence in 2011, 20% of the victims were not the same as the study victims.

Most petitioners alleged harassment and assaults.
Alleged abuse included harassment (83.7%), aggravated harassment (50.9%), assault (52.3%), stalking (47.6%) and a sexual offense (< 20%). Based on NYS law, however, 30 of the respondents could have also been charged with criminal sexual acts because their victims were either under age 15 or 17 while respondents were 18 or 21 years or older, respectively. However, only two of these Family Court cases included concurrent arrest of respondents.

Repeated violence drove teens to pursue OPs.
Some teens obtained OPs after concluding: “Enough was enough,” while teens with children were primarily motivated by concern for their babies’ safety. For some, a parent or caring professional prompted them to seek an OP.

Support before and after the decision was extremely limited.
Most domestic violence service providers focus on adults, and shelters do not accept unaccompanied youth under age 16. Also, other than Day One and a few newer teen support groups, youth agencies do not address dating violence.

A little more than a quarter of respondents reabused their petitioners through 2011.
According to DIRs, new abuse petitions, and respondent arrests for OP violations, reabuse rate was around 28%. While fewer than 10% of orders were violated, only 20% of petitioners received final orders that remained in effect, on average, for just over a year. Two-thirds of petitioners received one or repeat temporary orders that remained in effect, on average, for two months.

Predictors of reabuse.
Reabuse was significantly more likely for female petitioners-male respondents. While age was not associated with reabuse, age differential was. Other predictors of reabuse: respondents at least a year older than victims; respondents who had a child in common with their petitioners; and respondents with criminal histories.

SUMMARY

OPs can deter reabuse and increase victim satisfaction. However, resources and police involvement are lacking for teens. Future research could examine why Family Courts are not issuing final OPs, whether there is a breakdown in service of temporary OPs, and whether Family Courts can adequately respond to the specialized needs of these petitioners.

1 The 2011 Empire State Poll (ESP 2011) was the ninth annual general survey of adult residents, age 18 and over, of New York State. It is a combination of an annual core of community, economic and social science modules together with omnibus modules. The ESP 2011 was conducted by the Survey Research Institute (SRI) at Cornell University.
Q&A About Coercive Control

Q: What is Coercive Control?

A: Coercive control is a strategic course of oppressive behavior designed to secure and expand gender-based privilege by depriving women of their rights and liberties and establishing a regime of domination in personal life. This definition reminds us that women are often targets of violence. I wrote Coercive Control (Oxford, 2007) to examine the oppressive tactics some males used to dominate women. Coercive control refers to abuse as a “strategic course of oppressive behavior,” meaning that battering is:

- rational, instrumental behavior and not a loss of control
- “ongoing” rather than episodic
- based on multiple tactics like violence, intimidation, degradation, isolation, and control.

Sixty to 80% of abused women experience coercive control beyond physical and emotional abuse. Men possess “gender-based privilege” because they are male. While all forms of abuse are about “power and control,” women are vulnerable to coercive control because of unequal political status and because men can take advantage of pervasive sexual inequalities in ways women cannot. While control involves everything from survival resources like money, to what television shows women watch, male abusers exploit and regulate women’s sexuality (e.g., how they dress, wear their hair, make love, etc.) and how they perform traditional gender roles as housewives and mothers.

Coercive control is a violation of “rights and liberties” protected by the US Constitution and international human rights conventions, including right to physical security (violence); to live without fear (intimidation); to dignity and respect (degradation); to social intercourse (isolation) and to autonomy, liberty and personhood (control). Over time, victimization and dependence are replaced by domination/subordination, agency and resistance. Emphasis shifts from what men do to women to what they keep women from doing.

Q: What should advocates know?

A: Advocates must “look beyond violence,” develop a proactive and ongoing response to the persistent nature of coercive control, emphasize the level of entrapment and control in assessing future risk, document and respond to the coercion and control in each case, adapt the political language of rights and liberties, and balance the restoration of freedom, autonomy and dignity with the provision of safety.

Nonviolent tactics used in coercive control invade all arenas of women’s activity. In response, advocacy must help restore autonomy wherever it is denied, by negotiating safe spaces at work, school or Church, identifying ‘safe stops’ where women can call for help, and organizing protective support networks.

Although coercive control is more extensive than domestic violence, advocates can partner with women from a strengths perspective – what I term “control in the context of no control.” Using the language of rights and liberties is key to helping women. It is also essential in getting police, courts and other providers to acknowledge how forcefully they would respond to someone who held a stranger hostage, or who tightly regulated how they dressed, walked, talked, spent their time or money, or how they made love under the threat of an “or else” proviso.

Q: How might the legal system better serve victims and hold abusers accountable?

A: When they confront the courts and ACS/CPS, victims feel they are on different planets. The criminal “perpetrator” is the “good enough father” in Family Court cases or invisible to ACS/CPS. The same woman rewarded for pressing charges is punished for doing so in Family Court. ACS/CPS may prohibit her from contacting her partner while Family Court punishes her for denying him access. Advocates can help women and the courts understand how systems collude with the batterer and support his control and/or use of the children.

Domestic violence laws focus on and respond to individual incidents according to the level of physical harm. Consequently, coercive control, where frequent low-level violence is accompanied by the other tactics, has no legal standing. Few elements of coercive control are currently considered criminal, or are only crimes when committed against strangers.

Coercive control is rooted in the battered women’s movement; the abuse of individual women harms and impacts women’s standing in society. However often women may abuse male or female partners, women are rarely able to deprive men of basic resources, or to rape or degrade them sexually, regulate their enactment of gender roles, or systemically isolate them from the supports needed for autonomy.
Legislative Update

Violence Against Women Act (VAWA) Reauthorized

VAWA was first signed into law in 1994, becoming the nation’s primary comprehensive response to domestic violence and sexual assault crimes, providing federal resources to improve services to victims, strengthen prevention efforts, enhance law enforcement and judicial response and improve community-coordinated response to combating violence. With subsequent reauthorizations, VAWA has expanded to focus attention on specific survivor groups, such as, teens and college students, immigrants, stalking victims, etc., and to fund new initiatives to respond to emerging or under-resourced needs, such as legal assistance, transitional housing, trafficking prevention and services, etc.

The 2013 reauthorization of VAWA includes numerous changes to improve the efficiency and effectiveness of current programming and funding. In addition, several new initiatives help to ensure that VAWA’s protections and programs are extended to all victims, including protections that:

- Specifically prohibit discrimination against LGBT victims in provision of services and protection
- Give tribal courts the authority to prosecute non-Native perpetrators on tribal lands
- Provide additional protections to immigrant women, including strengthening the International Marriage Broker Regulation Act and improving provisions around self-petitions and U visas
- Improve housing protections by expanding anti-discrimination provisions to all federally subsidized housing programs, explicitly including sexual assault victims, and by creating emergency federal housing transfer options
- Provide additional protections for college students by requiring schools to create prevention and intervention materials for domestic and sexual violence, dating violence and stalking victims in underserved populations on campus
- Give state domestic violence coalitions a stronger role in how states spend VAWA funds

A summary of the changes and the full text of the changes made by the 2013 reauthorization of the Violence Against Women Act are available.

Guiding Principles for Community Domestic Violence Policy

Guiding Principles for Community Domestic Violence Policy is a web document that is a collaborative effort between OPDV, the Empire Justice Center and subject matter experts across the state. It provides valuable information for community systems and organizations who are thinking about developing a domestic violence policy. In addition to general Guiding Principles for all systems and organizations, there is information for:

- Law Enforcement
- Community Corrections
- Prosecutors/Civil Attorneys
- Courts

The CAP PC

The Child and Adolescent Psychiatry for Primary Care (CAP PC) program, funded by NYS Office of Mental Health, responds to the psychiatric needs of children and families throughout New York State. The program is a partnership between the child psychiatry divisions at five university-based sites and the American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AAFP), and the REACH Institute. It provides primary care physicians with education and support by offering access to CAP PC Liaison Coordinators (LCs) to assist with linkage and referral to specialty child mental health services and the REACH Mini-Fellowship in Child/ Adolescent Mental Health.

Primary Care Physicians (PCP, PNP, or PA working within a physician practice) can call to speak with the covering LC about any case involving youth up to age 21. The LC will ask basic questions and may provide immediate referral and resource information. If the PCP has no other questions, the consultation is complete. However, if the PCP is calling about a specific mild to moderate intensity case, the covering psychiatrist will return the PCP’s call within two hours.

While the CAP PC does not provide crisis intervention, it will refer urgent cases to appropriate emergency services. Occasionally, an in-person consultation may be offered when the PCP can manage the case in the primary care setting.

For additional information and resources:

- Visit CAP PC’s website at http://www.cappcn.org/home/
- Access their toll-free phone consultation line, accessible 5 days/week 9AM-5PM (excluding major holidays) at 855-227-7272.

NYS Office for the Prevention of Domestic Violence www.opdv.ny.gov

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