



# Examining the Interface Between Substance Misuse and Intimate Partner Violence

## Citation

Stuart, G. L., T. J. O'Farrell, K. Leonard, T. M. Moore, J. R. Temple, S. E. Ramsey, R. L. Stout, et al. 2009. "Examining the Interface Between Substance Misuse and Intimate Partner Violence." *Substance Abuse: Research and Treatment* 3 (1): 25-29.

## Published version

<https://doi.org/10.4137/SART.S2252>

## Link

<http://nrs.harvard.edu/urn-3:HUL.InstRepos:11879374>

## Terms of use

This article was downloaded from Harvard University's DASH repository, and is made available under the terms and conditions applicable to Other Posted Material (LAA), as set forth at

<https://harvardwiki.atlassian.net/wiki/external/NGY5NDE4ZjgzNTc5NDQzMGIzZWZhMGFIOWI2M2EwYTg>

## Accessibility

<https://accessibility.huit.harvard.edu/digital-accessibility-policy>

## Share Your Story

The Harvard community has made this article openly available.  
Please share how this access benefits you. [Submit a story](#)

# Examining the Interface Between Substance Misuse and Intimate Partner Violence

Gregory L. Stuart<sup>1</sup>, Timothy J. O'Farrell<sup>2</sup>, Kenneth Leonard<sup>3</sup>, Todd M. Moore<sup>1</sup>, Jeff R. Temple<sup>4</sup>, Susan E. Ramsey<sup>5</sup>, Robert L. Stout<sup>6</sup>, Christopher W. Kahler<sup>7</sup>, Meggan M. Bucossi<sup>8</sup>, Shawna M. Andersen<sup>8</sup>, Patricia R. Recupero<sup>8</sup>, Zach Walsh<sup>8</sup>, Yael Chatav Schonbrun<sup>8</sup>, David R. Strong<sup>8</sup>, Emily F. Rothman<sup>9</sup>, Deborah L. Rhatigan<sup>1</sup>, and Peter M. Monti<sup>7</sup>

<sup>1</sup>University of Tennessee-Knoxville. <sup>2</sup>Harvard Medical School Department of Psychiatry at the VA Boston Healthcare System. <sup>3</sup>Research Institute on Addictions and SUNY-Buffalo. <sup>4</sup>University of Texas Medical Branch at Galveston. <sup>5</sup>Alpert Medical School of Brown University and Rhode Island Hospital. <sup>6</sup>Pacific Institute for Research & Evaluation—Decision Sciences Institute. <sup>7</sup>Brown University Center for Alcohol and Addiction Studies. <sup>8</sup>Butler Hospital and Alpert Medical School of Brown University. <sup>9</sup>Boston University School of Public Health.

**Abstract:** There is considerable theoretical and empirical support for a link between substance misuse and perpetration and victimization of intimate partner violence. This review briefly summarizes this literature and highlights current research that addresses the interface between treatment for substance abuse and intimate partner violence. Suggestions for future research and clinical implications are provided.

**Keywords:** intimate partner violence, substance misuse, substance abuse, treatment

## Examining the Interface Between Substance Misuse and Intimate Partner Violence

The prevalence and frequency of intimate partner violence (IPV) is a major public health concern. In a large study evaluating couples in the United States, over one-fifth of the sample reported experiencing IPV within the past year.<sup>1</sup> Severe relationship violence, carrying a high potential for injury, is also a highly prevalent national problem, with at least 1.3 million women severely victimized annually in the United States.<sup>2</sup> The economic burden of medical costs related to IPV against women in the United States is estimated to range from \$2.3 billion to \$7.0 billion per year.<sup>3</sup> IPV constitutes an enormous problem throughout the world; a recent study conducted by the World Health Organization demonstrated that the prevalence of physical or sexual domestic violence against women ranged from 15%–71% in ten countries across the globe.<sup>4</sup>

IPV may be perpetrated by either gender. In a meta-analytic study, Archer<sup>5</sup> found that women are slightly more likely to engage in physical IPV than men. However, two population-based studies not included in Archer's meta-analysis demonstrated that women were more likely to report physical IPV victimization than men.<sup>6,7</sup> Nonetheless, there is consensus that male-to-female physical violence has more destructive effects than female-to-male violence.<sup>5</sup> For example, female victims of IPV are more likely than male victims to endure physical injuries and to utilize mental health and criminal justice system services.<sup>8–10</sup> Regardless of the perpetrator gender, IPV is associated with a variety of devastating consequences, including physical injury, depression, trauma, relationship discord, divorce, suicide, and homicide.<sup>11,12</sup>

A major hurdle to studying and treating partner violence is the heterogeneity of the perpetrators and victims. Researchers have hypothesized that there may be subtypes of partner violent men or couples, with a different etiology of violence for each subtype.<sup>13–16</sup> In light of these conceptualizations, the role of substance misuse may apply more to some subtypes of violent perpetrators or couples than to others.

There is an abundance of theoretical and empirical support for a connection between substance misuse and intimate partner violence perpetration and victimization. For example, a number of theorists have proposed etiological models of IPV in which the substance misuse of both partners plays an important role.<sup>17–25</sup>

**Correspondence:** Gregory L. Stuart, Department of Psychology, 310C Austin Peay Building, 1404 Circle Drive, University of Tennessee, Knoxville, TN 37996. Tel: (865) 974-3358; Fax: (865) 974-3330; Email: gstuart@utk.edu



Copyright in this article, its metadata, and any supplementary data is held by its author or authors. It is published under the Creative Commons Attribution By licence. For further information go to: <http://creativecommons.org/licenses/by/3.0/>.

Multivariate studies have been conducted in which these theoretical models were examined, with results showing strong empirical support.<sup>23,26–29</sup>

Numerous other theories have been proposed to explain the relationship between substance use and intimate partner violence perpetration. Theoretical models such as the spurious model, the indirect effects model, and the proximal effects model have been used to account for the association between IPV and substance use, with varying amounts of empirical support.<sup>30,31</sup> In addition, researchers have examined whether certain factors may moderate the relationship between intimate partner violence and substance use.<sup>30,32,33</sup> For example, researchers and theorists have suggested that the relationship between alcohol use and intimate partner violence perpetration varies according to the level of antisocial personality characteristics of the perpetrator.<sup>30,32</sup>

Empirical studies have demonstrated a strong association between the use of a variety of substances and IPV perpetration and victimization, with a majority of the research focusing on alcohol.<sup>34,35</sup> A temporal component to substance use and IPV has also been identified, such that IPV perpetration<sup>36–38</sup> and victimization<sup>39</sup> are more likely to occur on alcohol and drug use days, relative to non-use days. Similarly, researchers have revealed a longitudinal/prospective association between substance misuse and intimate partner violence perpetration and victimization.<sup>23,40–42</sup>

We have been conducting cross-sectional and longitudinal research on the association between substance misuse and IPV in our laboratory for many years. In order to address enduring questions regarding the associations between substance misuse and IPV, we have, with some exceptions,<sup>15,43,44</sup> employed two primary populations for these investigations that are notable for their high rates of substance misuse and violence. The first population is drawn from men and women in treatment for substance misuse. The second population is drawn from men and women arrested for domestic violence and court-referred to batterer intervention programs. A description of our central research questions, and the methods we use to address these questions in our populations of interest are provided below.

### IPV in substance abusers

A number of studies have shown that the prevalence of IPV perpetration and victimization in treatment-seeking samples of male and female substance

abusers is extremely high (e.g., 50%–90% in the past year).<sup>45–50</sup> Given extensive data showing an association between substance abuse and IPV perpetration and victimization, we have been interested in examining whether treatment for substance abuse may also bring a collateral reduction in IPV perpetration and victimization, even if the substance abuse treatment does not focus on the romantic relationship.

To test this central hypothesis, we have conducted several longitudinal studies examining the impact of treatment for substance abuse on IPV perpetration and victimization. All patients in our studies were diagnosed with alcohol abuse or dependence, and many had comorbid drug diagnoses. Substance abuse treatment involved a 5–6 day intensive outpatient partial hospitalization program, which had a cognitive-behavioral orientation administered primarily in a group format. Our research has shown significant reductions in substance use, IPV perpetration, and IPV victimization in men<sup>51,52</sup> and women<sup>53,54</sup> receiving treatment in an alcohol and drug partial hospital. In addition, our studies have shown that, relative to patients whose substance misuse remits, patients who relapse to substance abuse evidence greater levels of IPV perpetration and victimization. These findings are consistent with the results of other studies regarding the effects of individual treatment for substance abuse on IPV among male<sup>55</sup> and female<sup>56</sup> alcoholic patients.

Numerous studies have demonstrated that couples-based treatment approaches for addictions<sup>57</sup> significantly reduce IPV perpetration and victimization in male<sup>50,58–60</sup> and female<sup>61</sup> alcoholic patients. Furthermore, in clinical trials that directly compared the effects of individually-based versus couples-based interventions for substance abuse, couples approaches have elicited superior IPV reduction outcomes.<sup>62–65</sup>

### Substance abuse in batterers

Consistent with past research, we have found that men<sup>28,66</sup> and women<sup>67,68</sup> arrested for domestic violence and court-referred to batterer intervention programs are at excess risk for hazardous drinking, alcohol abuse and alcohol dependence. Drug use and abuse is also highly prevalent among men<sup>29,66,69</sup> and women<sup>29,67,68</sup> arrested for IPV perpetration.

Research has suggested that batterer intervention programs designed to reduce IPV recidivism have poor efficacy.<sup>70,71</sup> We have hypothesized that

the lack of efficacy of these programs is partially attributable to the untreated substance abuse that is rampant among batterer intervention program participants.<sup>72,73</sup> Indeed, men in batterer intervention programs with substance abuse evidence greater levels of violence recidivism than men with no substance use issues.<sup>73–77</sup>

In light of these data, we are currently conducting a randomized clinical trial in which hazardous drinking men arrested for domestic violence perpetration and court referred to batterer intervention programs are assigned to either a brief, motivationally focused alcohol intervention *plus* standard batterer intervention or standard batterer intervention alone. We are assessing substance use, alcohol related problems, and IPV perpetration and victimization at baseline, 3-, 6-, and 12-month follow-up. We hypothesize that adding a brief alcohol treatment to standard batterer intervention will result in less alcohol use and less IPV perpetration and victimization at all follow-up assessments, relative to standard batterer intervention alone.

Preliminary data from this study appear promising. Relative to standard batterer intervention alone, participants receiving the additional brief alcohol treatment evidence superior outcomes at one or more follow-up points in frequency of drinking, percentage of heavy drinking days, drinks per drinking day, and percentage of days abstinent from alcohol and drugs. In addition, men receiving the brief alcohol treatment have reported significantly reduced psychological and sexual aggression perpetration, relative to standard batterer intervention alone. Our research group has just begun conducting a similar randomized clinical trial with hazardous drinking women arrested for domestic violence. Our long-term goal is to establish the efficacy of the adjunct brief alcohol treatment and examine its effectiveness in reducing substance use, as well as IPV perpetration and victimization, in batterer programs across the United States.

## Future directions

Given the role of substance use in risk for IPV perpetration and victimization, there appears to be a critical role for brief interventions targeting substance use in high IPV-risk populations. Our work with individuals who have been arrested for IPV perpetration represents an early step in targeting substance use to impact IPV recidivism, and there are several other domains where similar

interventions may also have a wide-reaching impact. With regard to generalizability, it would be useful to determine the extent to which the efficacy of brief interventions are limited to intimate partner violence, or whether they might transfer to other populations and other forms of interpersonal violence. For example, brief substance use interventions may be transported to populations at high risk for violence such as individuals who are incarcerated or recently released from incarceration. Additionally, substance use interventions might be effectively combined with other treatments, including parent training to more effectively decrease risk for child abuse while concurrently enhancing positive parent-child interactions. Another promising area for future research might involve increasing the specificity of our appreciation of the parameters within which brief interventions are effective for reducing violence perpetration and victimization. Specifically, several studies have determined the heterogeneity of IPV perpetrators<sup>14,15</sup> and future studies that examine the efficacy of brief interventions across perpetrator subtypes may increase the power of treatment by facilitating the matching of treatments to perpetrator characteristics. In sum, given the preliminary evidence for the high potency of brief substance use interventions for reducing IPV perpetration and victimization, expansion and refinement of these efforts in new populations represents an important area for future research.

## Acknowledgments

Dr. Stuart is supported, in part, by grants R01AA016315 and R01AA014193 from the National Institute on Alcohol Abuse and Alcoholism. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institute on Alcohol Abuse and Alcoholism or the National Institutes of Health.

## Disclosure

The authors report no conflicts of interest.

## References

1. Schafer J, Caetano R, Clark CL. Rates of intimate partner violence in the United States. *American Journal of Public Health*. 1998;88:1702–1704.
2. National Center for Injury Prevention and Control. *Costs of Intimate Partner Violence Against Women in the United States*. Atlanta (GA): Centers for Disease Control and Prevention. 2003.

3. Brown DS, Finkelstein EA, Mercy JA. Methods for estimating medical expenditures attributable to intimate partner violence. *Journal of Interpersonal Violence*. 2008;23:1747–1766.
4. Garcia-Moreno C, Jansen H, Ellsberg M, Heise L, Watts CH. Prevalence of intimate partner violence: findings from the WHO multi-country study on women's health and domestic violence. *The Lancet*. 2006;368:1260–1269.
5. Archer J. Sex differences in aggression between heterosexual partners: A meta-analytic review. *Psychological Bulletin*. 2000;126:651–680.
6. Bensley L, Macdonald S, VanEenwyk J, Wynkoop Simmons K, Ruggles D. *Prevalence of Intimate Partner Violence and Injuries: Washington, 1998. Morbidity and Mortality Weekly Report*. 2000;49:589–592.
7. Tjaden P, Thoennes N. Extent, nature, and consequences of intimate partner violence: findings from the National Violence Against Women Survey. Washington (DC): Department of Justice U.S. Publication No. NCJ 181867. Available from: URL: www.ojp.usdoj.gov/nij/pubs-sum/181867.htm. 2000a.
8. Cascardi M, Langhinrichsen J, Vivian D. Marital aggression: Impact, injury, and health correlates for husbands and wives. *Archives of Internal Medicine*. 1992;152:1178–1184.
9. Stets JE, Straus MA. Gender differences in reporting marital violence and its medical and psychological consequences. In M.A. Straus and R.J. Gelles (Eds.). *Physical violence in American families*. 1990;(p. 151–165). New Brunswick, NJ:Transaction Publishers.
10. Tjaden P, Thoennes N. Prevalence and consequences of male-to-female and female-to-male intimate partner violence as measured by the National Violence Against Women Survey. *Violence Against Women*. 2000b;6:142–161.
11. Hines DA, Malley-Morrison K. Psychological effects of partner abuse against men: A neglected research area. *Psychology of Men and Masculinity*. 2001;2:75–85.
12. Schumacher JA, Feldbau-Kohn SR, Smith-Slep AM, Heyman RE. Risk factors for male-to-female partner physical abuse. *Aggression and Violent Behavior*. 2001;6(2–3):281–352.
13. Holtzworth-Munroe A, Stuart GL. Typologies of male batterers: Three subtypes and the differences among them. *Psychological Bulletin*. 1994;116:476–497.
14. Holtzworth-Munroe A, Meehan JC, Herron K, Rehman U, Stuart GL. Testing the Holtzworth-Munroe and Stuart batterer typology. *Journal of Consulting and Clinical Psychology*. 2000;68:1000–1019.
15. Holtzworth-Munroe A, Meehan JC, Herron K, Rehman U, Stuart GL. Do subtypes of maritally violent men continue to differ over time? *Journal of Consulting and Clinical Psychology*. 2003;71:728–740.
16. Johnson MP, Leone JM. The differential effects of Intimate Terrorism and Situational Couple Violence: Findings from the National Violence Against Women Survey. *Journal of Family Issues*. 2005;26:322–349.
17. Chermack ST, Giancola PR. The relation between alcohol and aggression: An integrated biopsychosocial conceptualization. *Clinical Psychology Review*. 1997;17(6):621–649.
18. Leonard KE. Drinking patterns and intoxication in marital violence: Review, critique and future directions for research. In U.S. Department of Health and Human Services, Research monograph 24: Alcohol and interpersonal violence: Fostering multidisciplinary perspectives (NIH Publication No. 93–3496). Rockville, MD: *National Institutes of Health*. 1993; p. 253–280.
19. Leonard KE. Domestic violence and alcohol: What is known and what do we need to know to encourage environmental interventions? *Journal of Substance Use*. 2001;6:235–245.
20. Leonard KE. Alcohol and intimate partner violence: When can we say that heavy drinking is a contributing cause of violence? *Addiction*. 2005;100:422–425.
21. Leonard KE, Jacob T. Alcohol, alcoholism, and family violence. In Van Hasselt VB, Morrison RL, Bellack AS, and Hersen M, (editors). *Handbook of family violence*. 1988; p. 383–406. NY: Plenum Press.
22. Leonard KE, Roberts LJ. Alcohol in the early years of marriage. *Alcohol Health and Research World*. 1996;20:192–196.
23. Leonard KE, Senchak M. Prospective prediction of husband marital aggression within newlywed couples. *Journal of Abnormal Psychology*. 1996;105:369–380.
24. Moore TM, Stuart GL. A review of the literature on marijuana use and interpersonal violence. *Aggression and Violent Behavior*. 2005;10:171–192.
25. Quigley BM, Leonard KE. Alcohol, drugs, and violence. In Van Hasselt VB, Hersen M. (editors), *Aggression and violence: An introductory text* (p. 259–283). Boston, MA: Allyn and Bacon. 2000.
26. Pan HS, Neidig PH, O'Leary KD. Predicting mild and severe husband-to-wife physical aggression. *Journal of Consulting and Clinical Psychology*. 1994;62:975–981.
27. Stuart GL, Holtzworth-Munroe A. Testing a theoretical model of the relationship between impulsivity, mediating variables, and marital violence. *Journal of Family Violence*. 2005;20:291–303.
28. Stuart GL, Meehan J, Moore TM, Morean M, Hellmuth J, Follansbee K. Examining a conceptual framework of intimate partner violence in men and women arrested for domestic violence. *Journal of Studies on Alcohol*. 2006;67:102–112.
29. Stuart GL, Temple J, Moore TM, Follansbee K, Bucossi M, Hellmuth JC. The role of drug use in a conceptual model of intimate partner violence in men and women arrested for domestic violence. *Psychology of Addictive Behaviors*. 2008;22:12–24.
30. Klostermann KC, Fals-Stewart W. Intimate partner violence and alcohol use: Exploring the role of drinking in partner violence and its implications for intervention. *Aggression and Violent Behavior*. 2006;11(6):587–597.
31. Leonard KE, Quigley BM. Drinking and marital aggression in newlyweds: An event-based analysis of drinking and the occurrence of husband marital aggression. *Journal of Studies on Alcohol*. 1999;60:537–545.
32. Fals-Stewart W, Leonard KE, Bircher GR. The occurrence of male-to-female intimate partner violence on days of men's drinking: The moderating effects of antisocial personality disorder. *Journal of Consulting and Clinical Psychology*. 2005;73:239–248.
33. Schumacher JA, Homish GG, Leonard KE, Quigley BM, Kearns-Bodkin JN. Longitudinal moderators of the relationship between excessive drinking and intimate partner violence in the early years of marriage. *Journal of Family Psychology*. 2008;22:894–904.
34. Stuart GL, O'Farrell TJ, Temple JR. (in press-a). Review of the association between treatment for substance misuse and reductions in intimate partner violence. *Substance Use and Misuse*.
35. Stuart GL, O'Farrell TJ, Temple JR. Intimate partner violence and substance abuse treatment. In: Fisher GL, Roget NA, (Eds.), *Encyclopedia of Substance Abuse Prevention, Treatment, and Recovery*. 2009. p. 990–993. Thousand Oaks, CA: Sage.
36. Fals-Stewart W. The occurrence of partner physical aggression on days of alcohol consumption: A longitudinal diary study. *Journal of Consulting and Clinical Psychology*. 2003;71:41–52.
37. Fals-Stewart W, Golden J, Schumacher JA. Intimate partner violence and substance use: A longitudinal day-to-day examination. *Addictive Behaviors*. 2003a;28:1555–1574.
38. Moore TM, Elkins SR, Kivisto A, Handsel V, et al. Electronic diary assessment of the temporal association between substance use and intimate partner violence. *42nd annual meeting for the Association for Behavioral and Cognitive Therapies*, Orlando, FL. November, 2008.
39. Parks KA, Fals-Stewart W. The temporal relationship between college women's alcohol consumption and victimization experiences. *Alcoholism Clinical and Experimental Research*. 2004;28:625–629.
40. Caetano R, McGrath C, Ramisetty-Mikler S, Field CA. Drinking, alcohol problems and the five-year recurrence and incidence of male to female and female to male partner violence. *Alcoholism: Clinical and Experimental Research*. 2005;29:98–106.
41. Fergusson DM, Boden JM, Horwood LJ. Developmental antecedents of interpartner violence in a New Zealand birth cohort. *Journal of Family Violence*. 2008;23:737–753.
42. Temple JR, Weston R, Stuart GL, Marshall LL. Longitudinal effects of alcohol use on intimate partner violence among ethnically diverse community women. *Addictive Behaviors*. 2008;33:1244–1248.

43. Heru A, Stuart GL, Recupero P, Eyre J, Rainey S. Prevalence and severity of intimate partner violence and associations with family functioning and alcohol abuse in psychiatric inpatients with suicidal intent. *Journal of Clinical Psychiatry*. 2006;67:23–29.
44. Moore TM, Stuart GL, Eisler RM, Franchina JJ. The effects of relationship aversive female partner behavior on attributions and physiological reactivity of verbally aggressive and nonaggressive males. *Violence and Victims*. 2003;18:95–106.
45. Chase KA, O'Farrell TJ, Murphy CM, Fals-Stewart W, Murphy M. Factors associated with partner violence among female alcoholic patients and their male partners. *Journal of Studies on Alcohol*. 2003;64:137–149.
46. Chermack ST, Fuller BE, Blow FC. Predictors of expressed partner and non-partner violence among patients in substance abuse treatment. *Drug and Alcohol Dependence*. 2000;58:43–54.
47. Chermack ST, Walton MA, Fuller BE, Blow FC. Correlates of expressed and received violence across relationship types among men and women substance abusers. *Psychology of Addictive Behaviors*. 2001;15:140–151.
48. Chermack ST, Blow FC. Violence among individuals in substance abuse treatment: The role of alcohol and cocaine consumption. *Drug and Alcohol Dependence*. 2002;66:29–37.
49. Murphy CM, O'Farrell TJ, Fals-Stewart W, Feehan M. Correlates of intimate partner violence among male alcoholic patients. *Journal of Consulting and Clinical Psychology*. 2001;69(3):528–540.
50. O'Farrell TJ, Murphy CM. Marital violence before and after alcoholism treatment. *Journal of Consulting and Clinical Psychology*. 1995;63(2):256–262.
51. Stuart GL, Ramsey SE, Moore TM, Kahler CW, et al. Reductions in marital violence following treatment for alcohol dependence. *Journal of Interpersonal Violence*. 2003c;18:1113–1131.
52. Stuart GL, O'Farrell TJ, Leonard K, Brown RA, et al. Reductions in intimate partner violence following treatment for alcohol problems in men. *Poster presented at the 41st annual meeting of the Association for Behavioral and Cognitive Therapies*, Philadelphia, PA. November, 2007b.
53. Stuart GL, Ramsey SE, Moore TM, Kahler CW, et al. Marital violence victimization and perpetration among women substance abusers: A descriptive study. *Violence Against Women*. 2002;8:934–952.
54. Stuart GL, O'Farrell TJ, Leonard K, Brown RA, et al. Reductions in intimate partner violence following treatment for alcohol problems in women. *Poster presented at the 41st annual meeting of the Association for Behavioral and Cognitive Therapies*, Philadelphia, PA. 2007c.
55. O'Farrell TJ, Fals-Stewart W, Murphy M, Murphy CM. Partner violence before and after individually based alcoholism treatment for male alcoholic patients. *Journal of Consulting and Clinical Psychology*. 2003;71:92–102.
56. O'Farrell TJ, Murphy M, Murphy CM, Fals-Stewart W. Partner violence before and after individually based alcoholism treatment for women alcoholic patients and their male partners. Unpublished manuscript. 2008.
57. O'Farrell TJ, Fals-Stewart W. *Behavioral couples therapy for alcoholism and drug abuse*. New York, NY: Guilford. 2006.
58. O'Farrell TJ, Murphy C, Neavins TM. Verbal aggression among male alcoholic patients and their wives in the year before and two years after alcoholism treatment. *Journal of Family Violence*. 2000;15:295–310.
59. O'Farrell TJ, Murphy CM, Stephan S, Fals-Stewart W, Murphy M. Partner violence before and after couples-based alcoholism treatment for male alcoholic patients: The role of treatment involvement and abstinence. *Journal of Consulting and Clinical Psychology*. 2004;72:202–217.
60. O'Farrell T, Van Hutton V, Murphy C. Domestic violence before and after alcoholism treatment: A two-year longitudinal study. *Journal of Studies on Alcohol*. 1999;60:317–321.
61. Schumm JA, O'Farrell TJ, Murphy M, Fals-Stewart W. Pathways to reductions in intimate partner violence following couples-based alcoholism treatment for women. *Paper presented at the 22nd Annual Meeting of the International Society for Traumatic Stress Studies*. Hollywood, CA. 2006.
62. Birchler GR, Fals-Stewart W. Does reduced conflict during treatment mediate the effect of BCT on partner violence after treatment among male alcoholics? In TJ, O'Farrell (Chair), *Behavioral Couples Therapy for Alcoholism and Drug Abuse: Recent Advances*. Symposium conducted at the Annual Meeting of the Association for the Advancement of Behavior Therapy, Boston, MA. 2003.
63. Fals-Stewart W, Birchler GR, Kelley ML. Learning sobriety together: A randomized clinical trial examining behavioral couples therapy with alcoholic female patients. *Journal of Consulting and Clinical Psychology*. 2006;74:579–591.
64. Fals-Stewart W, Kashdan TB, O'Farrell TJ, Birchler GR. Behavioral couples therapy for drug abusing patients: Effects on partner violence. *Journal of Substance Abuse Treatment*. 2002;22:87–96.
65. Fals-Stewart W, O'Farrell TJ, Birchler GR. Couples therapy for substance use disorders. In MA Whisman and DK Snyder (Chairs), *Couple Therapy for Mental and Physical Health Problems*. Symposium conducted at the Annual Meeting of the Association for Advancement of Behavior Therapy, Boston. 2003b.
66. Stuart GL, Moore TM, Kahler CW, Ramsey SE. Substance abuse and relationship violence among men court-referred to batterer intervention programs. *Substance Abuse*. 2003a;24:107–122.
67. Stuart GL, Moore TM, Ramsey SE, Kahler CW. Relationship aggression and substance use among women court-referred to domestic violence intervention programs. *Addictive Behaviors*. 2003b;28:1603–1610.
68. Stuart GL, Moore TM, Ramsey SE, Kahler CW. Hazardous drinking and relationship violence perpetration and victimization in women arrested for domestic violence. *Journal of Studies on Alcohol*. 2004;65:46–53.
69. Moore TM, Stuart GL. Illicit substance use and intimate partner violence among men in batterers' intervention. *Psychology of Addictive Behaviors*. 2004;18:385–389.
70. Babcock JC, Green CE, Robie C. Does batterers' treatment work? A meta-analytic review of domestic violence treatment. *Clinical Psychology Review*. 2004;23:1023–1053.
71. Feder L, Wilson D. A meta-analytic review of court-mandated batterer intervention programs: Can courts affect abusers' behavior? *Journal of Experimental Criminology*. 2005;1:239–262.
72. Stuart GL. Improving violence intervention outcomes by integrating alcohol treatment. *Journal of Interpersonal Violence*. 2005;20:388–393.
73. Stuart GL, Temple JR, Moore TM. Improving batterer intervention programs through theory-based research. *Journal of the American Medical Association (JAMA)*. 2007a;298(5):560–562.
74. DeMaris A, Jackson JK. Batterers' reports of recidivism after counseling. *Social Casework*. 1987;68:458–465.
75. Gondolf EW. Patterns of reassault in batterer programs. *Violence and Victims*. 1997;12:373–387.
76. Hamberger LK, Hastings JE. Recidivism following spouse abatement counseling: treatment program implications. *Violence and Victims*. 1990;5:157–170.
77. Jones AS, Gondolf EW. Time varying risk factors for reassault among batterer program participants. *Journal of Family Violence*. 2001;16:345–359.