

Straus, Murray A. 2007. "Conflict Tactics Scales." Pp. 190 - 197 in *Encyclopedia of Domestic Violence*, N. A. Jackson. New York: Routledge: Taylor & Francis Group.

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## CONFLICT TACTICS SCALES

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The Conflict Tactics Scales (CTS) are the most widely used instrument for identifying domestic violence. There are two main versions of the CTS: the CTS2 (Straus, Hamby, Boney-McCoy, and Sugarman 1996) is the version measuring violence against a partner in a dating or marital relationship. The CTS2 has scales to measure victimization and perpetration of three tactics that are often used in conflicts between partners: physical assault, psychological aggression, and negotiation; and scales to measure injury and sexual coercion of and by a partner.

The CTSPC is the version of the CTS (Straus, Hamby, Finkelhor, Moore, and Runyan 1998; Straus and Hamby 1997) for measuring maltreatment of a child by parents. The CTSPC has scales to measure physical assault (with subscales for corporal punishment and physical abuse), psychological aggression, and use of nonviolent discipline techniques. There are also supplementary questions on neglect, sexual abuse, and discipline in the past week. In this article, "CTS" will be used when the sentence applies to all versions of the instrument, and CTS2 and CTSPC will be used to refer to those specific versions.

Both the CTS2 and the CTSPC have versions for child respondents and for adult recall of tactics used between their parents (Straus website, 2006). The CTS2 has been translated into many languages. Both versions of the CTS can be obtained from Western Psychological Services.

### Theoretical Basis of Conflict Tactics Scales

Conflict theorists such as Louis Coser and Ralph Dahrendorf argue that conflict is an inevitable and valuable aspect of all human association because

conflict is part of the process by which inequities and problems are corrected. What is harmful is not the conflict itself, but use of coercion, including force and violence, as a tactic for resolving conflicts. In order to understand this perspective, it is necessary to distinguish between two closely related yet clearly different phenomena, both of which are often called conflict: "conflict of interest" and "conflict management." When conflict theorists talk about the ubiquity of conflict, they are referring to conflict of interest, that is, to the fact that members of a social group, no matter how small and intimate, are each seeking to live out their lives in accordance with personal agendas that inevitably differ. These differences range from the trivial, such as which TV show to watch at eight, to major life events such as whether to move to a new house. On the other hand, conflict management, or what for purposes of the CTS is called "conflict tactics," refers to the method used to resolve the conflict. Two families can have the same conflict but differ vastly, and with profound consequences, in how they deal with these conflicts. One family might resolve the issue of which TV program to watch by rotation, another by "first one there," and another by threat of force by the physically strongest.

### Measurement Strategy of the Conflict Tactics Scales

#### *A Behavioral Measure*

The CTS consists of a list of behaviors directed toward a partner or a child. It deliberately excludes attitudes, emotions, and cognitive appraisal of the behaviors. These are crucial for some research and clinical purposes but must be measured separately.

The value of a behavioral instrument is illustrated by a study which first asked about violent behaviors experienced, and then asked about cognitive appraisal. It found that more than a third of women who reported being victims of one or more violent acts did not regard themselves as having experienced "physical abuse," as a "victim of violence," or as a "battered woman" (Hamby and Gray-Little 2000). This discrepancy between the behavior and the cognitive appraisal of the behavior is important for understanding family violence and for designing programs of prevention and treatment. However, it is possible to identify the discrepancy only if there is an instrument such as the CTS which obtains the behavioral data.

The CTS2 questions are presented in pairs. The first question in the pair asks respondents to indicate how often they carried out each item in the referent period. The second asks how often the partner carried out each behavior. The response categories ask for the number of times each action occurred during the past year, ranging from "Never" to "More than 20 times." The default referent period is the past twelve months, but other referent periods, such as "since starting in this program," can be used. The five CTS2 scales and examples of a minor and a severe question in each scale are:

*Physical Assault:* "I slapped my partner." "I punched or hit my partner with something that could hurt."

*Injury:* "I had a sprain, bruise, or small cut because of a fight with my partner." "I needed to see a doctor because of a fight with my partner, but I didn't."

*Psychological Aggression:* "I shouted or yelled at my partner." "I stomped out of the room or house or yard during a disagreement."

*Sexual Coercion:* "I insisted on sex when my partner did not want to (but did not use physical force)." "I used force (like hitting, holding down, or using a weapon) to make my partner have sex."

*Negotiation:* "I said I cared about my partner even though we disagreed." "I suggested a compromise to a disagreement."

### *Symmetry of Measurement*

The CTS measures the behavior of both the respondent and the respondent's partner. This does not assume symmetry in the behavior; it only makes it possible to investigate the degree of symmetry or asymmetry. Most research and clinical uses of the CTS benefit from having data on the behavior of both partners in a relationship. This

applies even when it might seem that only information on the behavior of one of the partners is needed, such as when the CTS is used to measure progress in a treatment program for male batterers. Research has shown that cessation of violence by one partner is influenced by whether the other partner also stops hitting (Feld and Straus 1989; Gelles and Straus 1988). Thus, when monitoring a treatment program, it is crucial to know the extent to which the partner has also ceased acts of physical and psychological aggression. In addition, for reasons that are not yet understood, the sensitivity of the CTS (as measured by disclosure rate) is lower in studies, such as the National Violence against Women Survey, that used only the victimization questions.

### *Severity Level*

All CTS scales measuring maltreatment have subscales for less severe and more severe behaviors, based on the presumed greater harm resulting from acts in the severe subscale. The distinction between minor and severe assaults is roughly parallel to the legal distinction in the United States between "simple assault" and "aggravated assault." That conceptually based classification has been supported by factor analyses and by a growing recognition that the etiology and treatment of occasional minor violence may be quite different than the etiology of repeated severe assaults (Gelles 1991; Holtzworth-Munroe and Stuart 1994; Johnson and Ferraro 2000; Straus and Gelles 1990). Severity of violence is also measured by the frequency of the acts and by whether an injury results. A national survey of Canadians (Laroche 2005) demonstrated that the CTS can be used to identify what Johnson calls the terroristic level of violence (Johnson and Ferraro 2000).

### *Clinical Interpretation and Norms*

The CTS is also used for clinical assessment (Aldarondo and Straus 1994). Because even one instance of physical assault is a behavior that calls for remedial steps, a basic clinical assessment indicates whether there is a score of 1 or higher on the physical assault scale. In addition, there is information for many clinical and general population samples in the CTS Manual (Straus, Hamby, and Warren 2003), in the core papers on the CTS, and in many publications by others. These rates, mean scores, and standard deviations can be used to evaluate specific cases or categories of cases. In addition to the scale scores, each CTS item should be examined because of the different implications

of, for example, slapping as compared with punching, or insisting on sex compared with physically forcing sex.

## Reliability and Factor Structure

### *Internal Consistency Reliability*

Alpha coefficients of reliability for the CTS2, reported in forty-one articles, are tabulated in Straus (2005). The coefficients ranged from .34 to .94, with a mean of .77. A study of the CTS2 in seventeen nations found similar results (Straus 2004). The occasional low alpha coefficient occurred when the behavior measured by some of the items, such as attacking a partner with a knife or gun, was absent or nearly absent in some samples.

There are less data on the internal consistency reliability of the CTSPC because this instrument is less widely used. In the seven articles which provided reliability data, the alpha coefficients ranged from .25 to .92, with a mean of .64. The coefficients below the convention of .70 are for the severe violence subscale and reflect the near zero rate of extremely abusive acts in some samples.

### *Temporal Consistency*

Temporal consistency, as measured by a test-retest correlation or intraclass correlation, is arguably the most important aspect of reliability because low temporal consistency imposes an upper limit for validity. However, it is rarely reported, probably because it requires testing the same subjects on two closely spaced occasions. As a result, for the CTS2, test-retest correlations have been located for only two samples. The coefficients for the various scales ranged from .49 to .90 with a mean of .72. For the CTSPC, no studies were located that provide data on test-retest reliability. However, three studies provide data on the parent-child version of the original CTS. The coefficients range from .49 (McGuire and Earls 1993) to .70 and .79 (Johnston 1988) to .80 (Amato 1991). Because the CTSPC is so similar to the original CTS, those results probably apply to the CTSPC as well.

## Validity

### *Content Validity*

The steps to achieving content validity included developing the questions on the basis of qualitative interviews and suggestions and reviews by experienced researchers and clinicians. Each question is based around an example of the behavior being measured, such as punching a partner or a child.

For punching to be invalid, it would be necessary to conclude that it is not an act of violence.

Like most tests, the CTS includes only a sample of the universe of possible violent acts. This is analogous to a spelling test that includes only a sample of the total number of words that a child in the seventh grade should know how to spell. Although the behaviors in the CTS may be valid, the method used to select behaviors to include in the CTS did not guarantee that they are an adequate sample of violent behaviors. One indication that they are an adequate sample comes from a study by Dobash and Dobash (1984), who are among the most strident critics of the CTS. They used qualitative methods to identify typical violent acts. Their list of violent acts is almost identical to the items in the CTS.

### *Sensitivity and Confounding with Social Desirability*

*Sensitivity.* An instrument's sensitivity is its ability to detect the occurrence of a phenomenon. Sensitivity is a critical aspect of validity. It is especially important for self-report measures of socially undesirable behaviors such as those measured by four of the five CTS2 scales. When the CTS is administered according to the standard instructions, it obtains many times more disclosure of violence than the most widely used measures, such as the National Crime Victimization Survey and rates of cases reported to Child Protective Services.

*Confounding with Social Desirability.* Many studies have found low correlations between the CTS and "social desirability" scales (Sugarman and Hotaling 1996). These scales measure the degree to which respondents are reluctant to disclose socially undesirable behavior. The fact that there is little correlation between scores on a social desirability scale and the CTS2 was confirmed by data from the International Dating Violence Study data for students at thirty-one universities. This study found that the mean correlation with a social desirability scale was  $-.17$  for the physical assault scale (range =  $-.03$  to  $-.23$ ) and  $-.09$  for injury (range =  $.00$  to  $-.23$ ) (Straus and International Dating Violence Research Consortium 2004). These relatively low correlations suggest that scores on the CTS reflect real differences in violence, rather than differences in willingness to disclose socially undesirable behavior. Nevertheless, analysis of the CTS, like analysis of all self-report data on socially undesirable behavior, should include a control for score on a social desirability scale.

### *Agreement between Respondents*

Because the main threat to the validity of the CTS is failure to report violent behaviors that actually occurred, the degree of agreement between the reports of different participants is an important type of validity data. A number of studies have investigated the degree of agreement between partners in a relationship, and between data provided by parents about violence to a child and data provided by the child. A meta-analysis of agreement between partners summarizing results from nineteen samples which obtained CTS data from both partners and forty-three samples which obtained the data on both partners from just one of the partners found correlations that averaged about .50 (Archer 1999).

### *Construct Validity*

Construct validity refers to the association between the measure in question and other variables for which prior research or theory predicts a relationship. It follows that the construct validity of the CTS can be assessed by the degree to which the CTS produces findings that are consistent with theoretical or empirical propositions about the variables the CTS purports to measure. There are literally hundreds of studies providing such evidence. For parent-to-child violence, see Straus and Hamby (1997). For measures of partner violence, a few examples from the National Family Violence Surveys and the International Dating Violence Study will be mentioned.

Many hypothesized "risk factors" have been found to be related to partner violence as measured by the CTS (Gelles and Straus 1988; Straus and Gelles 1990), including:

- Inequality between partners, and especially male dominance
- Poverty and unemployment
- Stress and lack of community ties
- Youthfulness
- Heavy drinking

Experience of corporal punishment as children and neglectful behavior by parents were both found in a study of university students in seventeen countries to be independently associated with an increased probability of violence to a dating partner as measured by the CTS (Douglas and Straus 2006; Straus and Savage 2005).

### *Limitations of the Conflict Tactics Scales*

The CTS is both the most widely used measure of family violence and also the most widely criticized. Extensive critical examination is appropriate for

any widely used instrument because, if the instrument is wrong, then a great deal of research will also be wrong. In the case of the CTS, however, the most frequent criticisms reflect ideological differences rather than empirical evidence. Specifically, many feminist scholars reject the CTS because studies using this instrument find that about the same percentage of women as men assault their partners. This contradicts the feminist theory that partner violence is almost exclusively committed by men as a means to dominate women, and is therefore taken as prima facie evidence that the CTS is not valid. Ironically, the fact that the CTS has provided some of the best evidence confirming the link between male dominance and partner violence and other key aspects of feminist theory of partner violence (Coleman and Straus 1990; Straus 1994) has not shaken the belief that the CTS is invalid.

Another irony is that despite these denunciations, many feminist researchers use the CTS. However, having used the CTS, they reaffirm their feminist credentials by routinely inserting a paragraph repeating some of the erroneous criticisms. These criticisms are then cited in other articles as though there were empirical evidence. Anyone reviewing these studies would have the impression that there is a large body of empirical evidence showing the invalidity of the CTS, whereas there is only endless repetition of the same unvalidated opinions. Because of space limitations, only a few examples will be mentioned and rebutted. Others are documented elsewhere (Straus and Gelles 1990).

### *Erroneous Criticisms*

*The CTS Measures Only Conflict-Related Violence.* Although the theoretical basis of the CTS is conflict theory, the introductory explanation to participants specifically includes expressive and malicious violence. It asks respondents to answer questions about the times when they and their partners "disagree, get annoyed with the other person, want different things from each other, or just have spats or fights because they are in a bad mood, are tired or for some other reason." In the past twenty-five years this criticism has been repeated in over one hundred publications, giving the appearance of a well-established limitation. However, no empirical evidence has been provided showing that only conflict-related violence is reported. In fact, where there are both CTS data and qualitative data, as in Giles-Sims (1983), it shows that the CTS elicits malicious violence as well as conflict-related violence.

*Equates Acts That Differ Greatly in Seriousness.* As shown previously in this entry, exactly the opposite is a key characteristic of the CTS. The physical assault scale, like all the CTS maltreatment scales, differentiates between less severe acts of violence, such as slapping and throwing things at a partner, and more severe acts such as punching, kicking, and choking, and the CTS provides the opportunity to weight the scores by the frequency of these behaviors.

*Context and Consequences Are Ignored.* The idea that the CTS physical assault scale is defective because it does not take into account the context, meaning, causes, and consequences of the violent acts is analogous to declaring a reading ability test invalid because it does not provide data on why a child reads poorly (such as limited exposure to books at home or test anxiety), or for not measuring the harmful effects of reading difficulty (such as low self-esteem or dropping out of school).

Context and consequences are extremely important, but they must be measured separately from the behavior they presumably cause to be able to test theories about context effects. This includes information on whether the assault was in self-defense or retaliation or was provoked by domineering behavior, verbal taunting, or other psychological aggression. For example, because the CTS has a separate measure of psychological aggression, Murphy and O'Leary (1989) were able to test the theory that psychological aggression against a partner is associated with an increased probability of physical violence.

### *Some Actual Limitations*

*Covers Only a Limited Set of Violent Acts.* The brevity of the CTS makes its use possible in situations which preclude a longer instrument. However, its brevity is also a limitation because it means that the subscales are limited to distinguishing minor and severe levels of each of the tactics. For example, with only eight items, the psychological aggression scale cannot provide subscales for separate dimensions such as rejecting, isolation, terrorizing, ignoring, and corrupting.

*Response Categories Are Unrealistic.* The CTS asks respondents how many times they and their partners did each of the acts in the past year (or some other referent period). This is satisfactory to provide estimates of how many times severe and rarely occurring events such as punching a partner or a child have happened. However, for events that

can occur daily or several times a week, such as spanking or slapping a child (Giles-Sims, Straus, and Sugarman 1995), parents cannot be expected to accurately estimate how many times this behavior occurred in the past year. Nevertheless, thousands of respondents around the world have provided these estimates, and these data have been successfully used to identify cases which are low or high compared with other respondents. These response categories enabled Giles-Sims (1983) to estimate that women in the shelter she studied had been assaulted an average of sixty-nine times in the preceding year. This is more than ten times greater than the six times in the previous twelve months experienced by women in the National Family Violence Survey who had been assaulted that year (Straus and Gelles 1990).

*Underreporting.* Although the CTS has repeatedly been found to uncover higher rates of partner violence than other instruments, these rates are nonetheless lower-bound estimates because of underreporting. In addition, a meta-analysis (Archer 1999) found that although both men and women underreport, the extent of underreporting is greater for men. Perhaps the most serious type of underreporting is by partners or victims of partners who engage in repeated severe assaults that often produce injuries. Although such extreme violence is only a tiny percentage of partner violence, the perpetrators and the victims of such acts are the ones in most urgent need of intervention. This problem is a limitation of survey research on partner violence rather than a unique problem of the CTS.

*Obtains Maltreatment Data for Only the Current Partner or Caregiver.* The CTS2 asks for information about relationships with the current or most recent partner, and the CTSPC about the current caregiver of the child. Thus, the CTS does not provide information about the history of victimization or perpetration.

*Injuries Not Directly Linked to Assaults.* The injury scale does not provide information on which assault caused each of the injuries in the scale. Research to understand the processes resulting in injury could obtain this information by expanding the CTS to ask each of the injury items for each assaultive behavior reported.

### **Administration, Testing Time, and Scoring**

#### *Administration*

Experience with the CTS indicates low refusal rates, even in mass surveys such as the 1985

National Family Violence Survey, which had an 84 percent completion rate (Gelles and Straus 1988). The CTS can be administered in many ways, including in-person interview, telephone interview, self-administered questionnaire, and computer-administered questionnaire. Studies that compared in-person with telephone interviews of the CTS have found equivalent results. A study comparing paper-and-pencil self-administered questionnaires with computer-administered questionnaires also found general equivalence (Hamby, Sugarman, and Boney-McCoy, 2005). There is a picture-card version of the CTSPC for use with young children (Straus website, 2006).

### Testing Time

The testing time for the full CTS2 is twelve to fifteen minutes. A shorter alternative is to administer only the three core scales (physical assault, psychological aggression, and negotiation). This produces an instrument that has the same coverage and takes about the same time as the original CTS (seven to ten minutes). It is not advisable to shorten the scale by including only the victimization or only the perpetration questions. This obtains only half of the information needed to understand partner violence, and even for that half, it reduces the disclosure rate. A second alternative is to use the CTS2 short form (Straus and Douglas 2004), for which testing time is approximately three minutes. Both of these alternatives have important limitations. The first alternative means no data on injury and sexual coercion. The second alternative obtains information on all five scales, but at the cost of detecting only about half as many cases as when the full-length scales are used.

### Scoring

There are many ways to score the CTS. Each is suited to different circumstances. They are described in a paper on scoring (Straus website, 2006) and in the core publications on the CTS (Straus et al. 1996; Straus et al. 1998; Straus and Douglas 2004). Because of space limitation, only four will be mentioned.

*Prevalence.* For the scales with highly skewed distributions, and for which it is important to identify even a single occurrence of the behavior, such as the physical assault, injury, and sexual coercion scales, the "prevalence" score or rate is the most usual choice. This is simply an indication of whether any one or more of the acts in the scale have been committed. In the aggregate, this results in the

percentage who were violent, injured a partner, or coerced sex.

*Frequency.* This is the number of times the behavior occurred in the past year. A limitation of this score is that, for general population samples, the distribution is so skewed that the mean is not an appropriate measure of central tendency. In addition, unless a normalizing transformation is used, the frequency score does not meet the assumptions of parametric statistical tests. On the other hand, a sample of known offenders or victims will not have 85 or 95 percent with a score of zero, and the frequency score can be very useful for measuring the chronicity of maltreatment.

*Severity Level and Mutuality Types.* The severity level classifies each case into three categories: *none*, *minor only*, or *severe*. The mutuality types classify each case as *respondent only*, *partner only*, or *both*. The mutuality types may be particularly useful in couples therapy because over a hundred studies have found that when there is violence, 50 percent or more of the time it is by both partners (Archer 2000; Straus and Ramirez in press).

### Contributions of the Conflict Tactics Scales to Understanding Family Violence

The twentieth anniversary commemorative issue of the *Journal of Interpersonal Violence* included an article entitled "Top 10 Greatest 'Hits'" (Langhinrichsen-Rohling 2005). The list of hits begins, "Greatest Hit Number 1: He Gave Us a Tool to Look Behind Closed Doors." It goes on to say, "In 1979, Straus created a measure, the Conflict Tactics Scale (CTS), which lit a fire to the domestic violence field. The CTS was revolutionary because it allowed researchers to quantitatively study events that had often been ignored culturally and typically took place in private." The CTS made possible national surveys on the prevalence of family violence in the United States and other countries, such as the two National Family Violence Surveys (Straus and Gelles 1990), the National Violence against Women Survey, and the National Survey of Child and Adolescent Well-Being. Between the first study using the CTS (Straus 1973) and 2005, about 600 research papers and at least ten books reporting results based on the CTS were published. Between 1995 and 2005, four to six articles reporting results obtained using the CTS were published every month.

Every measuring instrument has limitations and problems, and the CTS is no exception. These

limitations need to be considered when interpreting results from the CTS, or when choosing an instrument to measure family violence. Fortunately, there are comprehensive compendia which describe over 100 measures of different aspects of violence (Dahlberg, Toal, and Behrens 1998; Hamby and Finkelhor 2001; Rathus and Feindler 2004). They facilitate examining alternatives to the CTS or choosing additional instruments to measure aspects of violence that are not covered by it.

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*See also Analyzing Incidents of Domestic Violence: The National Incident-Based Reporting System; Measuring Domestic Violence*

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## CONTROL BALANCE THEORY AND DOMESTIC VIOLENCE

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### Introduction

Domestic violence, or intimate partner violence (IPV), is a contemporary social problem that has evolved from a husband's legal right to discipline his wife through physical means (Lutze and Symons 2003: 321). Historically, the judicial system protected the right of the husband; however, as the women's movement gained influence, the courts began to treat IPV as the serious and pervasive problem that it is (Lutze and Symons 2003: 321, 324). While studies show that there are specific groups who are victimized with greater frequency than others—for example, women who are members of minority groups, or those who live in urban areas (U.S. Department of Justice 1998: 13-15), IPV is not exclusive, that is, it can affect anyone, regardless of age, sex, culture, socioeconomic status, or race. Therefore, society must continue to develop effective means to address violence between partners.

Before solutions can be found, the etiology of the problem must be understood. In the case of this critical issue, criminological theories should be

applied to better understand IPV and how best to control it. This article applies Charles Tittle's control balance theory to occurrences of domestic violence; in doing so, it seeks to explain not only instances of IPV, but also victims' responses to the violence that they are experiencing and suggests possible means of addressing IPV.

### Statement of Problem

On March 28, 2003, in a case that garnered widespread media attention in Austin, Texas, Ortralla Mosley was stabbed to death on her high school campus, and her ex-boyfriend Marcus McTear was accused of the crime (Gilbert 2003). He was later sentenced to a forty-year determinate sentence (Smith 2003). In a 2003 *Austin American Statesman* article discussing IPV (Gilbert 2003), Veranda Escobar was profiled. She survived her violent relationship, but not before it left her confined to a wheelchair. In 2002, Michael Edward Hill was stabbed to death by his girlfriend in what appeared to be an attempt by the woman to defend herself

limitations need to be considered when interpreting results from the CTS, or when choosing an instrument to measure family violence. Fortunately, there are comprehensive compendia which describe over 100 measures of different aspects of violence (Dahlberg, Toal, and Behrens 1998; Hamby and Finkelhor 2001; Rathus and Feindler 2004). They facilitate examining alternatives to the CTS or choosing additional instruments to measure aspects of violence that are not covered by it.

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*See also Analyzing Incidents of Domestic Violence: The National Incident-Based Reporting System; Measuring Domestic Violence*

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