

Domestic abuse, sexual assault, and child abuse



Domestic abuse and sexual assault

Research typically finds that between 25% and 50% of those who perpetrate domestic abuse have been drinking at the time of assault,¹ although in some studies the figure is as high as 73%.² Other research found that the risk of rape was twice as high for attacks involving drinking offenders.³ Alcohol misuse is consistently found in a high proportion of those who perpetrate domestic abuse and sexual assault, and it has been found that within intimate relationships where one partner has a problem with alcohol or other drugs, domestic abuse is more likely than not to occur.⁴

However, the impact of alcohol on domestic abuse and sexual assault is complicated. Where alcohol is involved, much of the evidence suggests that it is not the root cause, but rather a compounding factor, sometimes to a significant extent.⁵ Domestic abuse agencies agree that alcohol misuse should not be seen as taking responsibility away from those who commit domestic violence.

While the majority of domestic abuse is attributable to men, and men are more likely to be recorded as using alcohol,⁶ it can impact in a variety of other ways. At times it can fuel child-to-parent violence, and alcohol seems to be particularly significant where both partners use violence.⁷

Not only might alcohol impact on incidents of domestic violence, it might affect the wider landscape for victims of abuse. For example, domestic abuse groups have raised alcohol use by victims of abuse as an important issue, while emphasising the need to avoid damaging victim-blaming narratives. There is evidence that victims of long term domestic abuse may use alcohol to cope with the effects of this abuse. Indeed, one study found that women who suffered domestic abuse from their partners were twice as likely to drink after the abuse as their violent partner.⁸ These women might face additional difficulties if they try to access treatment for alcohol misuse or access refuges.

Mixed-gender spaces or a lack of anonymity might be a barrier to women who have experienced domestic abuse accessing alcohol treatment services, as there may be a lack of services that can fit around their family life and childcare responsibilities. Women may also find themselves turned away from domestic violence refuges if they are experiencing alcohol problems. Indeed, research examining this in London found that while almost all boroughs require the refuges they fund to support women with alcohol, drug or mental health problems in some way, two boroughs actively exclude them, while 61% of boroughs only 'sometimes accept' women who use alcohol or drugs.⁹ Further, women may be concerned that if they report abuse, children will be taken into care, and this fear may be more acute when coupled with alcohol misuse.

Sexual harassment and the night time economy

Alcohol-related sexual harassment and assault, including of frontline emergency service personnel, is commonplace in the night-time economy.¹⁰ Scottish Health Action on Alcohol Problems (SHAAP) and the Institute of Alcohol Studies (IAS) have suggested that this may to some degree be due to characteristics of the night time economy: 'the night-time economy places a great deal of emphasis on a hyper-sexualised femininity where beauty, confidence, and sexual competence are seen as advantageous and as desirable characteristics, to which women need to conform...overtly sexualised displays of femininity are often encouraged and rewarded within the night-time economy'. It was posited that this might



contribute to 'normalising the objectification of women...in turn [normalising] sexual harassment and assaults (Rogan, Piacentini, & Szmigin, 2016)'.¹¹

The same report also raised the possibility that harmful gendered stereotypes presented in alcohol advertising more broadly might promote and perpetuate similar attitudes to women, noting: 'When marketing is targeted at women...the aim is to establish a link between alcohol and empowerment... Marketing targeted at men often depicts women as sexual objects...'¹² It appears the current industry self- and co-regulatory system for alcohol marketing in the UK is ill-equipped to address this, and it has been suggested that instead a similar approach to France's 'Loi Évin' law should be employed, which restricts the use of lifestyle messaging on such advertisements (for more information, please see the marketing factsheet).¹³

Child abuse

While parental drinking does not automatically have a harmful impact on children, it can lead to significant emotional and physical abuse, violence and a general lack of care and support.¹⁴ Indeed, concern about parental drinking is the number one reason that children contact ChildLine, with over 5,300 children doing so per year – more than 100 per week.¹⁵

From 2011 to 2014, parental alcohol use was involved 'in 37% of cases involving the death or serious injury of a child through neglect or abuse in England'.¹⁶ The NSPCC view alcohol abuse as a high risk factor, which can increase the risk to children who live in families where domestic abuse is present.¹⁷

¹ Bennett, L., and Bland, P. 2008. Substance Abuse and Intimate Partner Violence. National online recourse centre on violence against women, p. 2

https://andvsa.org/wp-content/uploads/2009/12/sa-and-ipv-bennett-and-bland-vawnet_ii1.pdf

² Gilchrist, E., Johnson, R., Talriti, R., Weston, S., Beech, A., and Kebell, M. 2003. Domestic Violence offenders: characteristics and offending related needs. Findings, 217. Home Office: London, p. 2

<http://webarchive.nationalarchives.gov.uk/20110218141158/http://rds.homeoffice.gov.uk/rds/pdfs2/r217.pdf>

³ Brecklin, L. R. and Ullman, S. E. 2002. The roles of victim and offender alcohol use in sexual assaults: results from the National Violence Against Women Survey. *Journal of Studies on Alcohol*, 63(1), pp. 57–63

<https://www.ncbi.nlm.nih.gov/pubmed/11925059>

⁴ Galvani, S. 2010. Supporting families affected by substance use and domestic violence. The Tilda Goldberg Centre for Social Work and Social Care, University of Bedfordshire, ADFAM, p. 5

https://www.adfam.org.uk/files/docs/adfam_dvreport.pdf

⁵ Abbey, A., Zawacki, T., Buck, P., Clinton, M., and Auslan, P. 2001. Alcohol and Sexual Assault. *Alcohol Research and Health*, Volume 25: Issue 1, pp. 43–51

<https://pubs.niaaa.nih.gov/publications/arh25-1/43-51.pdf>

⁶ Hester, M. 2009. Who Does What to Whom? Gender and Domestic Violence Perpetrators. Bristol: University of Bristol in association with the Northern Rock Foundation, p. 15

<http://journals.sagepub.com/doi/abs/10.1177/1477370813479078?journalCode=euca>

⁷ Ibid.

⁸ Galvani, S. 2010. Grasping the Nettle: alcohol and domestic violence. p. 3

<https://www.injuryobservatory.net/wp-content/uploads/2012/09/Cross-Tools-2011-Alcohol.pdf>

⁹ Against Violence and Abuse. 2014. Case by Case: Refuge provision in London for survivors of domestic violence who use alcohol and other drugs or have mental health problems, p. 17 <https://bit.ly/2A6qoli>

¹⁰ Institute of Alcohol Studies (IAS). 2015. Alcohol's Impact on Emergency Services

http://www.ias.org.uk/uploads/Alcohols_impact_on_emergency_services_full_report.pdf

¹¹ Scottish Health Action on Alcohol Problems (SHAAP) and IAS. 2018. Women and Alcohol: Key Issues, pp. 7–8 http://www.ias.org.uk/uploads/pdf/IAS_reports/rp29032018.pdf

¹² SHAAP and IAS. 2018. Women and Alcohol: Key Issues, p. 7

¹³ IAS. 2017. Policies to regulate alcohol marketing <https://bit.ly/2Cbrk97>

¹⁴ Galvani, S. 2010. Grasping the Nettle: alcohol and domestic violence, p. 3

<https://www.injuryobservatory.net/wp-content/uploads/2012/09/Cross-Tools-2011-Alcohol.pdf>



¹⁵ Belfast Telegraph. 2014. Jump in child calls over parents

<https://www.belfasttelegraph.co.uk/news/uk/jump-in-child-calls-over-parents-30279013.html>

¹⁶ Houses of Parliament Office of Science and Technology. 2018. Parental Alcohol Misuse and Children, p. 3

<https://researchbriefings.parliament.uk/ResearchBriefing/Summary/POST-PN-0570>

¹⁷ NSPCC. 2018. Domestic abuse: learning from case reviews <https://bit.ly/2yhH8ED>



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