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Pepperdine University

Graduate School of Education and Psychology

RABBINICAL EXPOSURE, RESPONSE AND TRAINING WITH INTIMATE PARTNER VIOLENCE IN THE JEWISH COMMUNITY

A dissertation submitted in partial satisfaction

of the requirements for the degree of

Doctor of Psychology

by

Alison J. Marks

July, 2012

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This clinical dissertation, written by

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DOCTOR OF PSYCHOLOGY

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DEDICATION

This dissertation is dedicated to all those who have come before and bravely faced the heartbreak, alienation, and destruction begat of silent mouths, blind eyes, and deaf ears.

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ABSTRACT

This study aims to address the paucity and obsolete nature of current research on partner violence within the Jewish community by focusing on the experiences of rabbis as centers of Jewish life. The current study considered the attitudes of rabbis toward intimate partner violence and gender roles, the level and quality and of intimate partner violence training received both during and post rabbinical school, and the intimate partner violence prevention efforts provided by rabbis. Participants in the study completed an online survey created by authors of this study, which included *The Inventory of Beliefs about Wife Beating* and *The Sex Role Egalitarianism Scale (*Form BB). Data were collected from 104 rabbis (age 28-72) representing 26 states. This study found high endorsement of egalitarian views amongst rabbis and low tolerance for partner violence; beliefs which were almost universally not significantly related to age, gender, or denomination. However, male rabbis endorsed higher beliefs that partner violence may be justified and Reform rabbis endorsed higher beliefs that relationships should be egalitarian. Majority of participants received training on partner violence issues but many felt these trainings were lacking in information and did not help in counseling congregants. Receiving training on issues related to partner violence did not have a significant relationship with partner violence attitudes and gender roles. With the exception of counseling, rabbis reported more engagement in passive methods of service provision related to intimate partner violence. Rabbis identified considering many factors when recommending divorce or separation to congregants (i.e. relational, religious, professional, personal, and victim/perpetrator centric factors). This study concludes with implications and suggestions for future research.

Chapter I. Introduction

Research regarding intimate partner violence has increased exponentially since its infancy in the 1970's (Kelly & Johnson, 2008). As a result of the increasing research and the resulting awareness, women's shelters and community programs aimed at intimate partner violence have begun to emerge at rapid rates over the last 10 years (Copel, 2008). While intimate partner violence can be defined many ways, for our purposes intimate partner violence is defined as "a pattern of assaultive and coercive behaviors, including physical, sexual, and psychological attacks, as well as economic coercion, that adults use against their intimate partners" (Warshaw, Ganley, Salber, Fund, & Violence, 1995, p. 18). Physical violence is often the most readily identified form of partner violence and includes acts such as slapping, shoving, pushing, kicking, and using a weapon (Farber, 2006). Psychological violence may be more difficult to identify and define, but can be comprised of threat of force, shaming tactics, imposed isolation, or neglect (Farber, 2006). Adelman (2000) describes denial of divorce, threat of unwanted divorce, forced reconciliation, control of sexuality/reproduction, and blackmail/extortion as additional forms of psychological partner violence. It should be noted that intimate partner violence, partner violence, and abuse are used interchangeably in this study as recommended by the National Women's Health Information Center (Copel, 2008). Use of the terms interchangeably reflects the lexicon of the literature and organizations in the field of violence against women.

Studies have shown 20% to 25% of couples in the United States have experienced partner violence, 3% to 10% of which report physical violence (Ellison, Bartkowski, & Anderson, 1999; Freedman, 2005; Rubin, 2007; Sisselman, 2009). Such findings

underscore the importance of intimate partner violence related research, as rates appear to be on the rise. For example, in the mid 1980's, only 15.8% of couples in the United States reported partner violence (Anson & Sagy, 1995). Evidence suggests men are increasingly falling victim to partner violence; however, the overwhelming majority of partner violence (85%) occurs as male against female abuse, with women being 5 to 8 times more likely to experience abuse than their male counterparts (Rennison, 2001; Rubin, 2007).

Generalized research on partner violence is increasing; however there is a paucity of research regarding intimate partner violence among specific ethnic and religious groups, such as Jewish Americans. This lack of research appears neglectful when one considers that Jewish Americans account for 2.1% of the United States population (Sheskin & Dashefsky, 2011) and that partner violence within the Jewish community occurs at rates equal to that of the national population (Sisselman, 2009). Specifically, statistics indicate 15% to 30% of Jewish families experience intimate partner violence (Freedman, 2005; Giller, 1990; Horsburgh, 1995; Rubin, 2007). Increased partner violence research and public education has increased awareness within the United States; however, this growth in awareness has not been documented within the Jewish community. Historically, Jewish victims of partner violence who sought assistance from their community or religious leaders were met with beliefs that partner violence in the Jewish community was a myth, the victim deserved the abuse, and the woman held the responsibility to examine her own behavior for how she could increase peace within the home (Gardsbane, 2002). While within the general public increased awareness regarding intimate partner violence has resulted in increased social services for survivors, there is

still a lack of sufficient services for survivors within the Jewish community. For example, the National Network to End Domestic Violence identified over 2,000 programs serving intimate partner violence victims in 2008; as of 2005 there were only around 80 agencies serving the Jewish population (Altfeld, 2005). Additionally, while partner violence in the lesbian, gay, bisexual, and transgender (LGBT) community has gained attention in the scholarly discourse, literature on Jewish partner violence within LGBT relationships is practically non-existent. As a result the following review is focused on intimate partner violence within heterosexual Jewish relationships.

It is important to note prevalence research on Jewish intimate partner violence has been limited to community based surveys which inhibit statistical reliability and generalizability (Gardsbane, 2002; Rubin, 2007; Sisselman, 2009). Low response rates, sampling concerns, and inconsistent definitions of abuse present in many of these community based prevalence studies raise questions of biases in the data (Altfeld, 2005). When researchers and statisticians attempt to collect data on the Jewish community a dilemma arises, as “Jewish” can refer to religion, ethnicity, and culture- the intersection of which is as varied as the Jewish population itself (Gardsbane, 2002). According to Altfeld (2005), even when researchers do include members of the Jewish community in national partner violence surveys, which have historically shown low rates of abuse in the Jewish community compared with other religions, self-selection bias (i.e. Jewish respondents disregarding partner violence based questions) and small sample sizes impact the soundness of these studies when examining rates of partner violence in the Jewish community. This complication may lead to an under-reporting of Jewish violence

statistics, further underscoring the need for a study aimed at describing the experience of Jewish survivors of partner violence.

A plethora of studies exist examining the response of various clergy to partner violence. Such studies have found clergy to be among the first individuals from whom partner violence survivors seek help (Cwik, 1996; Gillum, Sullivan, & Bybee, 2006; Levitt & Ware, 2006). However, there is scant literature centering on the response of rabbis to violence within their congregation (Ringel & Bina, 2007). Although some findings of studies utilizing Christian ministers may be generalizable to rabbis, caution should be used in doing so due to the possible differences between the leaders of different religious groups. Cwik (1996) conducted the most recent and most empirically sound study of rabbinical response and involvement with issues related to partner violence. Cwik found more than 66% of rabbis feel unprepared to deal with a congregant involved in a violent relationship and close to 60% have never addressed intimate partner violence in a sermon. Given the tendency for partner violence survivors to seek assistance and guidance from clergy and the simultaneous feelings of unpreparedness reported by clergy to address issues of intimate partner violence, further research is needed to understand these variables.

The aim of this introduction is to provide an in-depth exploration of the unique cultural factors which impact partner abuse in the Jewish community, including the help-seeking behaviors of survivors. Additionally, information is provided which focuses on the beliefs and perspectives rabbis hold about partner violence, the level of training regarding intimate partner violence, frequency with which rabbis offer counsel to violent

couples or partner violence victims, and services or prevention efforts offered to congregants regarding partner violence.

Intimate Partner Violence in the Jewish Community

Overview of Judaism. Followers of Judaism encompass a wide range of denominations, much like divisions within Christianity, ranging from ultra-Orthodox to more contemporary Renewal Judaism. However, discussions of Judaism within the partner violence literature are often divided among lines of the three main "movements" within the Jewish community (i.e. Reform, Conservative, and Orthodox; De Lange, 2000) and these studies rarely specify which denominations are included, thus this literature review will focus on the three main branches of Judaism. While much continuity exists between these branches of Judaism, large amounts of intergroup differences are present. The following information is provided as a basic introduction to Judaism and Jewish culture and is not intended to reflect all members of the Jewish community.

According to Kertzer and Hoffman (1996), Orthodox Judaism is the most conservative of the three movements, with an emphasis on literal interpretation and meticulous application of nearly all traditional rituals and practices. Within Orthodox Judaism there are several sects (e.g. *Hasidim* and *Misnagdim*), with each community adopting slight variations on how they observes Jewish law, regulations, and codes of dress. Conservative Judaism takes a more moderate approach in its beliefs regarding how to apply the practice of Judaism to the modern world. Most liberal of the three is Reform Judaism, which believes that Judaism is ever evolving, emphasizing a commitment to Jewish tradition but encouraging adaptation of tradition based on individual conscience and modern life. Regardless of a heavy emphasis within the literature on intimate partner

violence among Orthodox Jews, past research findings indicate no significant differences in the amount of violence reported by members of the three branches (Giller, 1990). A recent study examining partner violence within a Baltimore community sample did find non-Orthodox women experience more incidents of physical and verbal abuse than their Orthodox counterparts (Freedman, 2005). As with other community based studies, it is unclear how representative this Baltimore-based sample is of Jewish communities throughout the United States (i.e. non-probability sampling). Cultural differences and idiosyncrasies within the Jewish community are most apparent in the Orthodox and Conservative branches of Judaism (i.e. particular methods of dressing, living in secluded communities, separation of men and women during religious services, use of religious courts), partially accounting for the emphasis on these denominations within the literature. Likewise the prior studies in the field focus on intra-ethnic religious couples in which both partners are members of the Jewish community. As a result the following literature should not be generalized beyond heterosexual couples in which both partners are members of the Jewish community.

Comparisons with Non-Jewish Intimate Partner Violence Survivors

Buchbinder and Eisikovits (2003) determined Jewish partner violence survivors, despite unique religious circumstances, share similar post-trauma symptoms with intimate partner violence survivors of other ethnic-religious backgrounds. Regardless of religious affiliation, intimate partner violence often leaves immense feelings of shame, powerlessness, helplessness, hopelessness, fear and low self-esteem in its wake (Buchbinder & Eisikovits, 2003). The hypothesis exists that intimate partner violence is grossly under reported, in part as a result of these feelings of shame. These negative

feelings and tendencies to self blame may, in part, account for the propensity of Jewish women to remain in violent relationships longer than their non-Jewish counterparts (Freedman, 2005; Horsburgh, 1995). Negative and confusing emotions in conjunction with the difficulty Jewish women may face when seeking a divorce might account for the research showing Jewish intimate partner violence survivors remain in violent relationships from 7 to 13 years, compared with 3 to 5 years for non-Jewish women (Clorfene-Casten, 1993; Farber, 2006). It is important to note that this tendency for Jewish women to remain longer in violent relationships is often quoted in research with little accompanying information regarding details of the study which determined this (i.e. demographics, methodology); thus caution is to be used when interpreting this information (Altfeld, 2005).

Unique Cultural Concerns as Barriers to Help-Seeking

Survivors of partner violence often suffer long term effects of the abuse they endured; however, disclosing the violence and seeking help from both formal and informal support may help mediate these effects (Postmus, Severson, Berry, & Jeong Ah, 2009). Family and friends are the most common sources of informal support sought by intimate partner violence victims (Ansara & Hindin, 2010). As violence escalates; however, research indicates women are increasingly likely to seek formal support services such as law enforcement, legal services, clergy, domestic violence resources (e.g. shelters, crisis lines), and health professionals (Ansara & Hindin, 2010; Gordon, 1996; Postmus et al., 2009). Victims of partner violence in Jewish community often face barriers when seeking help. The next section will examine the implications regarding

intimate partner violence within Jewish law (*halakhah)* and distinct values within the Jewish tradition *(*Horsburgh, 1995).

Jewish law. ***Texts and interpretations.*** Distinct from American civil and federal laws, Jewish law is the combination of written and oral teachings founded upon the sacred texts of Judaism (i.e. the Torah and Talmud; Freedman, 2005; Horsburgh, 1995). It is important to note that only Orthodox Jews strictly follow *halakhah* (Jewish law); however, its impact reverberates throughout all denominations of Judaism. Within Jewish communities there is much debate regarding the "official" stance of Jewish law regarding intimate partner violence. In 1994 the Rabbinical Council of America established a policy expressing absolute rejection of intimate partner violence leading many contemporary rabbis to see intimate partner violence as clearly forbidden (Horsburgh, 1995). However, this position comes in direct opposition to ancient Jewish commentary on sacred texts offered by many respected Jewish scholars, such as Maimonides (Cwik, 1996). Judaism is a religion steeped in tradition, and as such, great emphasis is placed on the aforementioned commentary, often placing it in equally high esteem as the texts which it interprets. As such, the assertions within such religious texts that wife abuse is warranted as a form of discipline create moral and religious complications for members of the Jewish court required to rule on issues of intimate partner violence within the Jewish community (Horsburgh, 1995).

While interpretations of the Torah regarding intimate partner violence are varied, it is important to note Jewish teaching does acknowledge and distinguish between the severity of two specific types of abuse: emotional and financial. According to Jewish religious texts, oppression by means of words (*ona'at devarim)* is a more serious offense

in the eyes of God than financial abuse (*ona'at mammon*); reasoning that financial misappropriation can be reconciled but the wounding of someone with words cannot be compensated for (Russ, Weber, & Ledley, 1993). Survivors facing various forms of violence may not be aware of this distinction or how their rabbis will interpret this text.

Divorce. Many in the Jewish community still widely believe intimate partner violence to be a problem only faced by the secular world; a problem that only exists for non-Jewish women. A Jewish women who identifies herself as “abused” may feel that her abuse will be seen through this lens and may feel vulnerable to a loss of Jewish identity and sense of communal non acceptance (Gardsbane, 2002; Horsburgh, 1995, Palant, 2004). Should a more conservative Jewish woman decide to risk rejection from her community by seeking to escape an abusive partner, she must then face the process of seeking a divorce from the religious courts, as well as the secular courts. Many Jewish Americans utilize civil courts for divorce proceedings; however as previously stated, this literature review focuses on the more conservative of Jewish Americans due to the cultural and religious distinctions, therefore discussion of religious court proceedings is integral. Reliance on the religious courts to nullify marriage in the eyes of Judaism often leads women to view secular courts as culturally inadequate in assisting them in escaping violent situations (Horsburgh, 1995).

Further complicating matters is the male-dominated and male-centered nature of the religious courts, and by extension Jewish law (Horsburgh, 1995). For example, according to Jewish tradition, divorce is permitted under certain concrete circumstances; however, while a woman can request a divorce from her partner, she is dependent on her husband to grant her a *get* (a legal divorce document) to nullify the *ketubah* (marriage

contract), which may or may not contain clauses forfeiting rights of the wife to the husband (Horsburgh, 1995). An additional form of abuse Jewish women face is get refusal, an issue which has not been adequately addressed in guidelines created by the *Beth Din* of America- the national court of Jewish Law (Gardsbane, 2002; Rubin, 2007). While religious courts can impose a divorce on a husband (*kefiyat get),* these enforced divorces are often seen as invalid and improper (Enger, Gardsbane, Zimberoff, & Brown, 2005). One may incorrectly assume only Orthodox women are affected by the need to obtain a *get*; however, a woman without a *get* is unable to be married by Conservative or Orthodox rabbis, her children born to her new marriage are seen as illegitimate and thus, are also unable to marry into some parts of the Jewish community (Gardsbane, 2002). Jewish survivors of intimate partner violence struggle to receive assistance from secular courts in obtaining a divorce as well, as interference with the proceedings of religious courts is often viewed as a violation of first amendment rights under the Establishment clause (Horsburgh, 1995). Such reliance on religious courts and the emphasis on the power of men within religious legal proceedings accentuate the control and power an abusive male exerts over his wife, increasing an already poignant sense of helplessness and hopelessness.

Jewish values. Jewish tradition often emphasizes peace within and preservation of the family, appropriate forms of speech, and cultural preservation. While these values have cultural functions they may hinder Jewish victims of intimate partner violence from seeking help.

Preservation of the home. Within Jewish teachings, peace within the home (also known as *shalom bayit*) sets the ideal by which Jewish families are judged,

perpetuating the myth that partner violence does not exist within the Jewish community (Grodner & Sweifach, 2004). The widespread belief in *shalom bayit* is founded on principles which serve to protect and support the ideal of the Jewish family (Farber, 2006). These beliefs regarding the “ideal Jewish family” include the mandate for Jewish women to serve as *Akeret Habayit*, the matron of the home, making her responsible for meeting the needs of both her husband and her children (Lebovics, 1998). Therefore, a family in discord, even when the cause is partner violence, is seen as the woman's inability to fulfill her matronly role. When a family fails to live up to this idealized image, the women assumes great shame (*shonda*); however, a long history of anti-Semitism and minority status prevents women from discussing their *shonda* with non-Jews (i.e. secular authorities) for fear of bringing shame against the community as a whole (Cwik, 1996; Farber, 2006; Rubin, 2007; Sweifach & Heft-LaPorte, 2007).

Forbidden speech. Discussing one’s intimate partner violence is complicated by the concept of *lashon hara* (the evil tongue; Grodner & Sweifach, 2004). Lashon hara refers to a Jewish concept which chastises those who engage in defamatory speech. This is considered a part of several forms of speech forbidden by Jewish tradition such as lies (*sheker*) and gossip (*rekhilut*) (Horsburgh, 1995; Russ et al., 1993). In Judaism the Torah contains 613 commandments, 31 of which address issues related to *lashon hara* (Freedman, 2005). While none of these commandments specifically refer to intimate partner violence, misattribution of this concept may lead women to feel they are in violation of Jewish law if they report abuse to community members, rabbis, and especially secular service providers (Freedman, 2005).

Cultural preservation. The value placed on cultural preservation of the Jewish community may also inform the responses of Jewish women in violent relationships. Literature has shown members of traditional communities, such as Orthodox Jews, are resistant to change; fearing a loss of unique cultural values in favor of secularized values (Farber, 2006). This hesitancy towards change can negatively impact the desire for and openness towards seeking help from clinicians and agents of social change. As previously mentioned, fear of bringing shame to the Jewish community may play a part in this resistance; however, a history of transgenerational trauma may also have a profound impact of the desire of the community to preserve its cultural identity.

Transgenerational trauma is defined as "trauma that passes down from one generation to another, either directly or indirectly" (Frazier, West-Olatunji, St. Juste, & Goodman, 2009, p. 25). For Jewish generations, this would include slavery in Egypt, the Spanish Inquisition, pogroms, the Holocaust, and ongoing persecution. As with other instances of transgenerational trauma, limited discussion of past atrocities can amplify feelings of loneliness, isolation, and mistrust (Frazier et al., 2009; Gardsbane, 2002) fostering the resistance to change within the Jewish community. This history of trauma contributes to the view that Jewish society exists within a more hostile outside environment (Farber, 2006). With the increasing assimilation of Jewish families, those in more conservative communities, already predisposed to seeing their beliefs as more moral and righteous than those of the secular world, will cleave more faithfully to them and increase resistance towards endeavors to change or challenge these (Farber, 2006). For many of the aforementioned cultural reasons, Jewish women in violent relationships who decide to seek help may prefer to seek the counsel of religious leaders such as

rabbis, rather than members of the secular community. Additionally, religious minorities, such as Orthodox Jews, tend to under-utilize therapeutic support services, possibly due to differences between the religious affiliation of the service provider and the Jewish client (i.e. “religiosity gap”), providing further reasoning for seeking the guidance of rabbis within their community (Margolese, 1998; Sweifach & Heft-LaPorte, 2007).

Experience of Rabbis Regarding Intimate Partner Violence

Most studies indicate individuals prefer the counsel of mental health professionals in times of personal struggle; however, clergy have been shown to be a preferred source of treatment over psychiatrists (Wang, Berglund, & Kessler, 2003). Clergy may be seen by members of the congregation as “gatekeepers” to other referral sources; a sentiment reflected in findings indicating engaged couples seek the counsel of religious leaders with three times the frequency of mental health professions, despite believing they are not as knowledgeable as secularly trained specialists (Weaver et al., 2002). Religiosity impacts perceptions of clergy as mental health professionals. In fact, over half of individuals who attend church weekly in a 2008 study of 317 Jewish and Christian adults over age 65, considered their primary mental health care professional to be their religious leader (Pickard & Baorong, 2008).

Given the religiosity of the Conservative population, it is reasonable to assume clients will engage in religious coping techniques, including the use of rabbis as a source of spiritual guidance and emotional support. Studies of religious coping have revealed an important distinction between positive religious coping and negative religious coping. Positive religious coping techniques usually embody a strong and secure relationship with God, spiritual connectedness and personal meaning in life; while negative religious

coping suggests a strained relationship with God, difficulty finding meaning in life, and a hostile world view (Bjorck & Thurman, 2007). Statements reflecting positive religious coping include “I look for a stronger connection with God” (Arnette, Mascaro, Santana, Davis, & Kaslow, 2007, p. 914). Negative religious coping can be reflected in statements such as “Because I was not devoted enough, God has abandoned me” (Arnette et al., 2007, p. 914). As can be imagined, negative religious coping leads to poorer health outcomes and increased mental health concerns in individuals when compared with those using positive religious coping (Bjorck & Thurman, 2007; Pargament, Koenig, Tarakeshwar, & Hahn, 2004).

As respected members of the community, clergy often serve as economically-sound mental health resources which are geographically close, maintain pre-established rapport, and come with fewer stigmas than psychologists and psychiatrists (Grimm & Bassett, 2000). Given these factors, it is easy to understand why 40% of Americans report seeking religious counsel in times of personal distress (Pickard & Baorong, 2008; Weaver, 1995; Weaver et al., 1997).

Congregational view of clerical counsel. Seeking help from religious leaders is so common, clergy report spending 15% of their average work week engaging in counseling activities (Weaver et al., 1997). Considering most clergy engage in short term counseling relationships (i.e. four or less sessions), this reflects the provision of mental health services to a large number of congregants (Grimm & Bassett, 2000). Clergy who engage in counseling most often face congregants struggling with spiritual concerns (i.e. existential questions, guilt, death/dying issues), marital concerns (i.e. premarital counseling, separation, divorce), and occasional psychological concerns (i.e. anxiety,

depression, anger; Grimm & Bassett, 2000). Clergy report feeling most competent in providing counseling for spiritual and marriage concerns (Moran et al., 2005). When congregants are asked about the counseling their clergy provides, 58% believed their religious leader “helped or helped a lot,” especially when the issue required emotional support and guidance from the clergy (Weaver, 1995, p. 139). Most clergy offer marriage preparation services, ranging from informal sessions with the clergy to empirically supported pre-marital counseling programs (e.g. FOCCUS). Studies have indicated congregates find this service incredibly helpful, with over 50% continuing to rate the preparation services as valuable after 8 years of marriage (Williams, Riley, & Dyke, 1999). Research also has examined the role of clergy in hospitals and the perceived helpfulness of pastoral care within this setting, indicating visits from religious leaders and hospital chaplains decrease the concerns of hospitalizations and provide a sense of hope upon discharge (Broccolo & VandeCreek, 2004; Koenig, 1998; Milstein, Manierre, Susman, & Bruce, 2008; Moran et al., 2005). Additionally, clergy have been found to be helpful and effective in dealing with issues of drug, alcohol, and sexual addiction (Manning & Watson, 2007; Sigmund, 2003).

As opposed to clergy helpfulness on spiritual matters and health matters, clergy are often rated as unhelpful by the partner violence survivors who utilize their services (Postmus et al., 2009; Rubin, 2007; Sisselman, 2009). The lack of benefit gained from seeking advice from clergy may be a result of women viewing untrained clergy as unsympathetic, inadequately prepared, and ineffective (Ringel & Bina, 2007). Additionally, Sisselman (2009) reports survivors experienced an increase in violence following consultation with their clergy members, as their abusive partners were made

aware of these contacts. It should be noted, that some studies have reported clergy members being seen as helpful by intimate partner violence survivors (Rotunda, Williamson, & Penfold, 2004). This discrepancy from studies indicating clergy as unhelpful may be a result of varied responses to disclosure of intimate partner violence given by clergy, the ability of the clergy to bring resolution to those seeking help, and the level of abuse the women is experiencing. It should be noted that while Rotunda et al. (2004) conducted a sound empirical study, the measures utilized were developed by the authors and no validity or reliability information was provided, thus one is to be cautious when interpreting the study results. Those women who did find their religious leaders unhelpful found their spiritual strength depleted and received little enhancements from their clergy, compounding the sense of helplessness and hopelessness already experienced from abusive encounters (Copel, 2008). A possible reason for the large number of reports indicating the ineffectiveness of clergy may result from gender differences, as it is unknown if female religious leaders address uses of partner violence in ways that are markedly different from their male colleagues. For women who were referred by clergy to secular service agencies, these contacts were perceived as helpful. The survivors indicate that the most helpful service offered by the agencies was material services and goods obtained (i.e. welfare benefits, food resources, housing, job training) (Postmus et al., 2009). Although clergy, as previously discussed, are inclined to refer to outside agencies, Ringel & Bina (2007) found rabbis were perceived to hold a less than favorable view of non-Orthodox agencies by the women receiving counsel for partner violence.

In general, clergy feel inadequately prepared to deal with many of the mental health issues and relationship-based concerns they encounter when counseling members of their congregation (Weaver, 1995). Studies have indicated clergy often desire additional training in areas of mental health, substance abuse, child abuse, rape, and intimate partner violence (Grimm & Bassett, 2000; Weaver et al., 1997). Training has a direct effect on the type and quality of counseling provided by religious leaders. Grimm and Bassett (2000) reports religious leaders with less training are more likely to utilize directive techniques (i.e. encouraging action, giving advice), as well as, using prayer and scripture when counseling congregants. Use of such directive and scripture based counseling techniques is often found unhelpful by survivors of intimate partner violence. Such findings by Grimm and Bassett (2000) may explain how religious leaders can be deemed so helpful in dealing with personal distress yet be viewed so negatively by women dealing with partner violence; namely, clergy are not inherently inadequate within this scope of practice but rather a lack of quality and adequate training on issues related to intimate partner violence may leave them ill-prepared to deal with these issues when they arise. Although clergy are commonly a source of counseling on marriage related issues, intimate partner violence has unique concerns (i.e. safety, power, control) not present in many common marital concerns which may account for feelings of being inadequately trained.

Attitudes and beliefs toward intimate partner violence. Despite the relatively high rate of abuse disclosure to clergy, studies find consistently that clergy deny the existence of partner violence within their community using indirect reactive responses (i.e. creating insight via use of scripture) to admissions of violence rather than proactive

solutions (Sisselman, 2009). Within the Jewish community it is widely believed that intimate partner violence doesn't occur or is a problem only for others; however, there are several court rulings found in Jewish texts that indicate the Jewish community has been facing issues of partner violence for centuries (Gardsbane, 2002). During the First International Conference on Domestic Abuse in the Jewish Community 2003, it appeared increased awareness efforts had successfully resulted in recognition of intimate partner violence as a cross-cultural issue. As Altfeld (2005) reports, nearly 60% of community members and nearly 87% of rabbis in attendance felt intimate partner violence was a serious problem; however, this data is highly skewed as attendance at the First International Conference on Domestic Abuse necessitates awareness of issues related to partner violence and does not accurately represent the Jewish community as a whole. However, such findings exemplify that awareness-raising can have a positive effect on the Jewish community. More recently, studies have shown participants continue to believe partner violence is non-existent within the Jewish community (Sisselman, 2009). Ringel and Bina (2007) discovered rabbis identifying as Orthodox were more likely than Conservative and Reform counterparts to believe intimate partner violence was less prevalent within their community than within the country's population as a whole. This perception is inaccurate in light of evidence that rates of intimate partner violence do not differ across denominations (Giller, 1990). For those clergy who did believe partner violence was a concern for the Jewish community, views of problematic violence was limited to physical forms of abuse (Sisselman, 2009). Even so, physical definitions of abuse were incomplete, such that 84% did not believe a slap from a husband to a wife constituted partner violence. Such findings indicate Jews may have less inclusive

definitions of partner violence which may result in incorrect reporting of experiences of similar forms of abuse (Sisselman, 2009).

According to several studies, leaders trained in male-focused or patriarchal religions, such as Judaism, have indicated beliefs that intimate partner violence may be a result of action (or inaction) on the part of the women, as well as, inherent personality deficits within the survivors themselves (Horsburgh, 1995; Levitt & Ware, 2006; Ringel & Bina, 2007). In addition, some clergy indicated victims seek out abusive relationships due to low self-esteem from previous childhood abuse (Levitt & Ware. 2006). Although studies have indicated previous exposure to abuse is a risk factor for experiencing intimate partner violence, these findings do not demonstrate a desire or active seeking out of abuse on behalf of the victim (Ehrensaft et al., 2003; Hotaling & Sugarman, 1990). Clergy have also been cited attributing partner violence to spiritual problems or mental health concerns (Sisselman, 2009). This belief is known as victim-blaming within the literature (Henning & Holdford, 2006). While Orthodox rabbis are more inclined to minimize the occurrence of intimate partner violence, no difference in the aforementioned attitudes was found based on level of conservatism (Martin, 1989).

Training and education regarding intimate partner violence. As previously mentioned, Cwik (1996) found less than 33% of rabbis felt prepared to deal with victims of intimate partner violence and over half of the rabbis interviewed failed to address the topic in a public forum with the congregation. A study by Rotunda et al. (2004) did not indicate much improvement in this area. Although 80% of the clergy had partner violence related contacts in the past year, 57% said they lacked the training to deal with partner violence, 32% of which having no training at all (Rotunda et al., 2004). Such sentiments

have been echoed in several studies demonstrating the near negligent levels of training provided in clerical and rabbinical education programs regarding partner violence, and the subsequent feelings of ineptitude among the graduates (Cwik, 1996; Horne & Levitt, 2003; Martin, 1989). Telephone contact with rabbinical schools training Reform and Orthodox rabbis, Hebrew Union College and Yeshiva University respectively, reveal no specific curriculum addressing issues of domestic violence. Rabbis studying at both schools are required to attend Clinical Pastoral Education classes that provide information on general counseling and cover topics that may relate to intimate partner violence; however, partner violence is not a strong focus in any of these classes (C. Bronstein, personal communication, January 31, 2012; J. Schwartz, personal communication, January 26, 2012).

Some continuing education and workshop based trainings exist to provide additional education in working with intimate partner violence victims. These trainings; however, vary in quality of materials and accuracy of information. For example, the clergy training manual used by Delaplane, D., Delaplane, A., and Spiritual Dimension in Victim Services (1994) provides ample information on various forms of family violence (i.e. partner abuse, child abuse, sexual assault, burglary) and includes logical and sound guidelines for clergy when working with these issues. In addition, the manual addresses religious diversity by including small sections on violence in the Jewish community and the role of rabbis; however, this section poses questions to which it provides no answers such as:

> …in the particular case of battered wives, more often than not, the rabbinic authorities do not tell the woman to go home and correct her behavior. They do

> not place the blame upon the wife….Why then do we find examples of so many modern rabbis who ignore this literature? Why do so many rabbis believe the myths about spouse abuse? (p. 99)

In general, it appears that community service providers receive intimate partner violence training in greater quantity and of greater quality, possibly accounting for literature indicating clergy are not viewed as favorably by survivors who sought help from both religious and secular sources (Sisselman, 2009).

Frequency and quality of counsel provided. ***Frequency.*** In order to better understand why clergy are often rated as unhelpful by help-seeking victims, it is important to examine the frequency and types of advice and counsel provided by clergy (Strickland, Welshimer, & Sarvela, 1998). Historically, Christian clergy have been reported to be the least utilized resource in early intimate partner violence studies; however, it appears rates have risen with some studies indicating contact rates between clergy and partner violence survivors up to 80% (Bowker, 1982; Rotunda et al., 2004). In fact, Sigmund (2003) reports clergy as one of the first contacted resources for individuals attempting to deal with the effects of trauma. The hesitancy of women to disclose abuse to clergy may be due to the patriarchal nature of religious institutions and the fear that women will be seen as less than their male partners and held responsible for the level of marital discord and familial concerns (Copel, 2008). In addition to concerns of receiving blame for their experiences, survivors may feel they are unworthy of receiving help or that God, and thus their religious community, has forsaken them (Copel, 2008).

Clergy who do provide counsel to survivors report encountering instances of partner violence in addition to all other forms of abuse (i.e. child abuse, rape); however,

they rarely take proactive measures to help victims of partner abuse who do not actively seek their counsel (Horne & Levitt, 2003). Strickland et al. (1998) report only 15% of the clergy from their sample of Christian clergy attended intimate partner violence meetings intended for religious service providers when such an event was held. In addition, clergy from several denominations neglect to address partner violence in sermons at rates of 60% or higher (Cwik, 1996; Strickland et al., 1998). It should be noted that larger churches, more educated clergy, and churches run by female religious leaders tend to engage in more intimate partner violence related outreach, potentially due to the increased availability of resources to do so (Martin, 1989; Strickland et al., 199).

Type of counsel provided. Historically, congregational and community responses to intimate partner violence can be grouped into five forms: acceptance; denial; apologetics; rejection; evasiveness (Gardsbane, 2002). According to Gardsbane, rabbis who traditionally accepted partner violence within Jewish relationship both acknowledge men abuse their wives and take a permissive stand on the issue. In contrast, rabbis engaging in denial will deny the existence of partner violence in the Jewish community unequivocally; sometimes commenting that abuse in relationships is a Gentile problem (Gardsbane, 2002). On opposite ends of the spectrum of responses are rabbis who reject partner violence unconditionally, notably a more modern stance on the issue. More median approaches include apologetics, when a rabbi attempts to lessen the stigma of partner violence in the Jewish community by minimizing, justifying, ignoring, and shifting blame to factors in external culture rather within the Jewish community or religious teachings; and evasiveness when rabbis acknowledge the inappropriate

existence of violence within the Jewish community but also attest to their inability to affect change in this area (Gardsbane, 2002).

More recent research has shown that clergy tend to encourage women to “forgive and forget” as part of familial duties, avoid involvement and make referrals, or give less than helpful advice which is often based on religious texts or sentiments (Neergaard, Lee, Anderson, & Gengler, 2007). Victims who are encouraged to “forgive and forget” are asked to submit to husbands as a method of reducing the current level of abuse, advice which places these women in extremely dangerous and psychological damaging positions (Rotunda et al., 2004). Thirty-three percent of the women in the study conducted by Rotunda et al. (2004) indicated that while they were advised to stay within the violent home, they were also encouraged to receive individual counseling. In addition, Christian clergy have been known to refer women to couples counseling at alarmingly high rates, a method of treatment which is contraindicated when active violence is present (Bograd & Mederos, 1999; Harris, 2006; Rotunda et al., 2004). While referrals to community based agencies may allow victims to make use of extended levels of knowledge and training often found among secular service providers, these referrals can risk the loss of community identity among Orthodox Jewish women.

Increasingly there is recognition of the need for victims of partner abuse to leave the violent situations they currently endure. While more than half the women in the study by Rotunda et al. (2004) report being advised to obtain a protective order and 87% of the clergy recognizing the need for the women to leave their violent relationships, only 39% actually recommended divorce. This reflects findings within the literature that secular service providers were more likely to encourage a woman to leave her violent situation

than religious service providers (Sisselman, 2009). Moreover, some intimate partner violence survivors report clergy encouraging the maintenance of violent relationships for greater lengths of time than the women were inclined to on their own accord (Levitt & Ware, 2006). Such dramatic hesitation toward relationship dissolution is often in the interest of marriage continuation, familial unity, and concern of the effects of said dissolution on children, rather than from the perspective that engaging in relationship violence is morally or legally improper (Levitt & Ware, 2006). It is important to note, Conservative and Reform rabbis are less inclined to stress marriage preservation and *shalom bayit* than their Orthodox counterparts (Ringel & Bina, 2007).

Summary

A major critique of the literature on Jewish partner violence is the outdated nature of the research. Awareness of changes in partner violence over time is integral to conceptualizing the issue within the Jewish community. Relying on the knowledge base in its current obsolete state may lead researchers to incorrect conclusions regarding dynamics, prevalence, and specifics of Jewish partner violence. Compounding the historical nature of the current literature are concerns of generalizability. Specifically, much of the previous research on partner violence in the Jewish community focuses on city-wide or community-wide studies consisting of small sample sizes which may be affected by self-selection biases. Furthermore, research regarding religious service providers and intimate partner violence focuses almost exclusively on Christian clergy-revealing limited information on the experiences, training, and perspectives of rabbis on intimate partner violence issues. Lastly, issues of diversity within the Jewish community are often not accounted for in the existing literature. While practical concerns may not

allow for inclusion of expanded Jewish demographics (i.e. wide range of denominations, considerations for ethnic diversity, country of origin) the limited representation of the diverse Jewish community inhibits generalizability and maintains an incomplete picture of intimate partner violence within the Jewish community.

Purpose of Study

Despite the cumulative scholarship regarding intimate partner violence, there is still much to learn. One area in which research is lacking is in the study of intimate partner violence within the Jewish community. Specifically, this study aims to create a clearer picture of the experiences of rabbis working with intimate partner violence issues, given their unique position as valued member of the Jewish community from whom many seek counsel and guidance. While scholarship on intimate partner violence is limited in general, the role of rabbis has been under-represented and under-researched for much of the decade. Increasing services available for Jewish survivors of abusive relationships underscores an increasing awareness within the Jewish community regarding intimate partner violence. It is imperative to gain perspective on how this increased awareness has affected members of the rabbinate. Identifying the experiences, education, and perspectives of rabbis on issues of violent relationships will allow for assessment of community needs that are not being met and assist in development of prevention programs, training resources, and psychoeducational material. Additionally, understanding the issue of partner violence within the Jewish community on a national level and within an empirical context will address areas of the literature not previously addressed. This descriptive study will consider the following research questions:

1. Overall, what do rabbis report as their attitudes toward intimate partner violence and gender roles?
    a. Is there a relationship between the rabbi's demographic characteristics (i.e., age, gender, denomination affiliation) and her/his attitudes?
    b. What is the relationship between rabbis' beliefs about gender roles and their attitudes toward intimate partner violence?
2. What is the level and quality of education received by rabbis on issues related to intimate partner violence within the Jewish community?
    a. Is there a relationship between receiving DV training and rabbi's beliefs about gender roles and their attitudes toward IPV?
3. Overall, what prevention efforts and services are provided by rabbis regarding intimate partner violence within the Jewish community?
4. When providing counseling, what recommendations do rabbi's make regarding IPV and how often are these recommendations made?
    a. What factors influence rabbi's recommendations regarding IPV?

Chapter II. Method

Procedures

After obtaining study approval from the Pepperdine University Graduate and Professional Schools Institutional Review Board, participants were recruited to participate in an internet-based national survey designed by the researchers. Participant recruitment occurred in three phases utilizing email methods. An initial email invitation for participation in the study including a link to the survey was sent to members of the Central Conference of American Rabbis (CCAR), the major rabbinical professional association for Reform rabbis in the United States, via the organization's newsletter. Additional participants from the Jewish community were recruited through emails forwarded on the researcher's behalf from rabbinical representatives in the community to increase the diversity of the rabbinical population included in the survey (i.e. non-Reform rabbis, rabbis with no professional organization affiliation). See Appendix B for these recruitment materials. Following this first wave of participant recruitment, the invitation for survey participation was run in a subsequent newsletter a month to two months after the initial recruitment email and rabbinical contacts were asked to again share the invitation to participate with colleagues. After 6 months, the researchers utilized these email channels one additional time to increase what are historically low survey response rates. Considering the type of analysis, the number of groups compared, and a medium effect, at least 100 rabbi participants were needed to conduct the analysis for the study to allow for adequate statistical power (Cohen, 2003).

When participants accessed the survey link, an initial window displayed an informed consent statement (see Appendix C) that highlighted pertinent information to aid in

deciding whether to continue with survey participation. Following the informed consent statement, participants are given an option to either accept or decline the terms of study. Participants were also notified of their right to discontinue completion of the survey at any time without suffering any penalty. If potential participants declined the terms of study participation, they were thanked for their time and consideration. If the participant elected to continue with participation, the first question of the survey was presented. The survey took participants 30 minutes to an hour to complete. Those participants who completed any portion of the survey were provided the option to participate in a raffle. Incentives for this survey consisted of a charitable donation on behalf of the rabbi to a charity of their choice. Upon completion of the survey the participants were directed to a screen with a randomly generated confirmation code. Participants were instructed to email the participation number to a confidential email. Emails received in this account were organized alphabetically, so as not to link receipt of email with order of data responses. Participant personal information and conformation code were in no way being linked to their respective data. To certify receipt of the email, an auto-reply letter was drafted that acknowledges raffle entry and also provides contact information for several national partner violence agencies should the participant desire more information (see Appendix D).

On March 9th, 2012 the principal investigator attempted to log into the confidential email created for use for this study in order to select raffle winners as the study had reached completion. However, once logged in, the email hosting service notified the principal investigator that the account had been deactivated due to inactivity and that all email submissions to the raffle had been deleted; however, survey data were not affected

by this error. After receiving approval from the Pepperdine University Graduate and Professional Schools Institutional Review Board, an email was sent asking for those interested in participating in the raffle to resend their contact information to the reinstated email address (Appendix E). This email was sent via original recruitment channels in efforts to reach as many potential participants who were impacted by the technical error as possible. Those interested in participating were given two weeks to submit an email. At the completion of this two week window four winners were chosen via a raffle. The winning participants were contacted via email and asked to provide their name and a charity or organization of their choice to receive a contribution of $50 in their name. Please see Appendix F for copies of these emails.

The survey site used in this study was SurveyMonkey Online Surveys (www.surveymonkey.com). SurveyMonkey is a third party company that provides on-line data collection services to researchers at major universities throughout the country. In order to protect data and other sensitive information during transmission, SurveyMonkey uses Secure Socket Layer (SSL) 128-bit encryption technology, the same encryption technology that is used to protect credit card data and other privacy-sensitive transactions completed over the internet (SurveyMonkey Online Surveys, 2012). Furthermore, options within SurveyMonkey were selected to prohibit recording of participant IP addresses or other electronic identification information. The SurveyMonkey database was only accessed by the researcher, via username and password protection, and was not accessible by employees of SurveyMonkey. All data collected via the online survey measure were downloaded into a computer program file stored on flash drive in locked safe at the researcher's personal residence to meet

requirement for data preservation 5 years after research concludes. As an additional measure of participant protection, all data were marked with identification numbers with no discernible link to identifying information. At the conclusion of the study, all data collected online using SurveyMonkey were permanently deleted from the online computer data storage system.

Participants

The over 2,000 members of CCAR were invited to participate in an online survey through the organizations listserve. Members of this organization include congregational rabbis, rabbis involved in academia, chaplains (military and health-care), and organizational professionals. Additional rabbis were solicited via personal contacts of the researcher. The criteria for inclusion include: (a) both men and women; (b) adults over the age of 21; (c) rabbis of the Reform, Conservative, Orthodox denominations, and Non or Post Denominational rabbis; and (d) adults with all levels of education. Specific exclusionary criteria include: (a) rabbis residing and practicing outside the United States, (b) retired rabbis who have been retired for longer than 2 years, (c) rabbis who do not directly serve congregations and, (d) rabbis who fail to complete 2/3^{rds} of the survey measure.

Of the invited potential rabbi participants, 159 participants agreed to the terms of the survey; however, only 104 completed at least 2/3rds of the survey. These 104 rabbis were the only ones included in the analysis. The participants ranged in age from 28 to 72 years (M = 48.36, SD = 11.57), 57.7% were male (n = 60), 93.3% identified as Caucasian (n = 97), and 98.1% of the participants had at least a Master's degree (n = 108). Additionally, participants represented 26 states within the United States of America, representing all

regions of the United States (U.S. Census Bureau, Geography Division, 2011). Table 1 provides more details of the demographic characteristics of the participants.

Table 1

Demographic Description of Rabbinical Participants

Variable	*n*	Percentage
Age		
20's	3	2.9%
30's	24	23.1%
40's	22	21.2%
50's	32	30.8%
60's	15	14.4%
70's	2	1.9%
Gender		
Male	60	57.7%
Female	42	40.4%
Race		
Caucasian	97	93.3%
Other [a]	7	6.8%
Education		
Bachelor's Degree	2	1.9%
Master's Degree	83	79.8%
Doctorate Degree	19	18.3%
Decade of Graduation		
1970's	11	10.6%
1980's	16	15.4%
1990's	29	27.9%
2000's	42	40.4%
2010's	5	4.8%
Geographic Region		
Northeast	28	26.9%
Midwest	29	27.9%
South	20	19.2%
West	23	22.1%

Note. $N = 104$.
[a] Other responses include Jewish, Semitic, American Indian/Alaska Native, Middle Eastern, and Human.

In addition to questions examining demographics and personal characteristics, questions were asked about the rabbis' religious affiliations and employment background. Although a number of denomination affiliations were indicated, the denominations with

the most endorsements were Reform (68.3%, n = 71) and Orthodox (29.2%, n = 21). Due to the lack of diversity among our sample, analysis looking at the participants identified denomination included only those categories with large enough samples, namely Reform and Orthodox rabbis. Using these two group will not only ensure the veracity of statistical analysis but will allow for comparison of two seemingly polar groups within the Jewish religiosity spectrum.

Of the participants, 79.6% reported currently serving a congregation (n =82) and of the 4.8% of rabbis who indicated they were retired, all retired within the past two years, thus meeting inclusion criteria (n =5). Interestingly, participant scores on the scale of congregational religiosity ranged from 11 to 24, out of a possible 32 (n = 83, M = 18.27, SD = 2.01), indicating rabbis may be serving in congregations whose level of religiosity is not congruent with what is expected given their personal denominational affiliation. For example, rabbis may be serving several congregations of various denominations in a rural area despite personally identifying as an Orthodox rabbi. Table 2 provides more details about the religious affiliations and employment backgrounds of the participants.

Table 2

Description of Rabbinical Participants Religiosity and Employment

Variable	*n*	Percentage
Denomination [a]		
Reform	71	68.3%
Orthodox	21	20.2%
Reconstructionist	5	4.8%
Non Denominational	3	2.9%
Post Denominational [b]	4	3.8%

(table continues)

Variable	*n*	Percentage
Length of time serving congregations throughout career		

Less than 5 years	37	35.6%
6-10 years	23	22.1%
11-20 years	22	21.2%
More than 20 years	16	15.4%
Currently serving a congregation		
Yes	82	78.8%
No	21	20.2%
Less than 5 years	38	36.5%
6-10 years	18	17.3%
11-20 years	15	14.4%
More than 20 years	11	10.6%

Note. $N = 104$.
[a] No rabbis participating identified as Conservative
[b] Post Denominational Jews find the idea of denominationalism within Judaism questionable and prefer to not define their practice of Judaism (Heilman, 2005).

Instrumentation

The survey included the following domains of information: (a) demographics of rabbi participants, (b) congregational religiosity, (c) attitudes regarding partner violence and gender roles, (d) education and training on partner violence issues, and (e) services offered to congregation and prevention efforts related to partner violence. Unless otherwise stated, these measures have been created by the researchers.

Prior to formally administering the survey, a focus group of three rabbis and statistically minded researchers reviewed the content validity, face validity, and assisted with survey item construction. As demonstrated in Kingree et al. (2006), a readability analysis of the survey was conducted. It was determined that a 9th grade reading level is needed for completion and comprehension of this measure, as demonstrated by a Flesch–Kincaid score of 8.2. Given that all rabbis must complete at least a high school education (S. M. Stahl, personal communication, February 20, 2010), this survey was appropriate for our population. Please see Appendix G for a copy of the author-created survey in its entirety.

Rabbi demographics. The following demographic characteristics were obtained for the study participants: (a) gender, (b) age, (c) ethnicity/race, (d) state of residence, (e) highest educational degree obtained, (f) year graduated, (g) denomination identification, (h) retirement status, and (i) congregational service.

Congregational religiosity. Given the prevalence of rabbis serving congregations whose level of religiosity may not be reflective of the rabbi's personal level of religiosity (S. M. Stahl, personal communication, February 20, 2010) an 8-item scale regarding congregational level of religiosity was developed by the researchers and included in this survey. Congregational religiosity was defined by level of observance of various Jewish laws and rituals which commonly vary amongst denominations (e.g. keeping kashrut, participating in a mikvah, observing Shabbat regularly). Statistical analysis produced an excellent score of internal reliability for this congregational religiosity scale ($\alpha = 0.968$).

Attitudes regarding partner violence. Given the historically conservative views of rabbis regarding the role of women in intimate partner violence, it is possible attitudes of participants toward partner abuse and beliefs regarding gender roles also follow along traditional lines. Research indicates men who hold traditional gender-role stereotypes and beliefs about the man's role in a relationship are more likely to hold attitudes blaming women for their violence and to hold negative views of women in general (Dobash & Dobash, 1979; Nabors & Jasinski, 2009). Thus examination of both rabbis' gender-role views and attitudes towards partner violence is warranted to better understand their involvement around intimate partner violence issues. Examination of the rabbis' attitudes regarding partner violence utilized T*he Inventory of Beliefs about Wife Beating* and *The Sex Role Egalitarianism Scale*.

The Inventory of Beliefs about Wife Beating. The Inventory of Beliefs about Wife Beating (IBWB; Saunders, Lynch, Grayson, & Linz, 1987) is a 32 item, Likert-style measure which assesses attitudes toward the use of physical violence in relationships, including justifications for such behavior. This measure has been modified from its original form due to the use of the word "beat." Specifically, the word "beat" has been changed to the word "hit" given research which demonstrates the word change increases response variability (Binford-Weaver, 2005).

The IBWB's reliability and validity has been repeatedly studied. For example, Saunders et al. (1987) found in a sample of college students that scores on the IBWB significantly correlated with scores on both Burt's (1980) Rape Myth Acceptance Scale and Sex-Role Stereotyping Scale ($p < .001$). Studies have also found significantly positive correlation with the Hostility toward Women Scale (Check & Malamuth, 1983) and the Attitudes toward Women Scale (Spence, Helmreich, & Stapp, 1973). Furthermore, Saunders et al. (1987) found victim advocates scores were in opposition to scores of convicted wife batterers; underscoring the construct validity of the IBWB (Jackson, 2009). The modified version of the measure used in this study has also demonstrated internal consistency ($\alpha = .85$; Binford-Weaver, 2005).

The Sex Role Egalitarianism Scale. The Sex Role Egalitarianism Scale (SRES; Beere, King, Beere, & King, 1984) examines the views of participants regarding whether sex/gender should influence perceptions of people. There are two forms (B and K) with 95 Likert-style statements, both of which also have short forms (BB and KK; Peters, 2008). Form B measures attitudes within five domains (i.e. Marital Roles, Parental Roles,

Employment Roles, Social-Interpersonal-Heterosexual Roles, and Educational Roles) and this study used the shortened version (Form BB).

Form BB of the SRES is a 25-item measure that examines a variety of attitudes toward heterosexual relationships and the equality between the partners (King, King, Gudanowski, & Taft, 1997). The measure is considered bi-directional as it examines participation in non gender-stereotyped roles for both men and women (King & King, 1993). Higher scores on the measure reflect greater endorsement of egalitarian gender-role beliefs and attitudes (King & King, 1993). Form BB was found to have an internal consistency ranging from 0.82 to 0.94 (Brutus, Montei, Jex, King, & King, 1993; Langhinrichsen-Rohling & Monson, 1998). Reliability indices, multifaceted generalizability procedures, and an item-response theory based analysis of precision all support the strength of the SRES as a measure of attitudes toward gender roles (Pavlou, Tsaousis, Vryonides, & Vitsilaki, 2008). Additionally, King and King (1993) have demonstrated test–retest reliability ranging from 0.80 to 0.90 for all forms of the SRES.

Intimate partner violence education and training. Survey questions on education and training were created in order to determine whether the participant had any formal education or training on partner violence issues during rabbinical training or post-graduation through workshops or supervision**.** The researchers felt it was imperative to collect information on the rabbis' education and training on partner violence issues given the literature indicating clergy do not feel adequately trained on issues related to violence within relationships (Cwik, 1996; Weaver, 1995). The following information was gathered regarding the education and training of study participants: (a) quantity (in hours), (b) frequency of training, (c) time in education when training occurred, (d) format

of training, (e) the type of instructors providing intimate partner violence education, (f) ratings of perceived quality, (g) positive training experiences, and (h) negative training experiences.

Services and prevention efforts. Questions and responses options within this section were based on a review of the literature and adaptation of surveys from Rotunda et al. (2004).The following information was obtained from the rabbis: (a) types of services provided to congregation (i.e. provided workshops or seminars on intimate partner violence; held panel discussions or given sermons on intimate partner violence; organized religious services or religious study groups around issues of intimate partner violence; participated or organized marches, rallies, or outreach activities for partner violence issues; allowed intimate partner violence related organizations to provide materials for distribution or inclusion in synagogue announcements; provided premarital counseling to couples; provided counseling to congregants dealing with intimate partner violence), (b) frequency with which each service is provided, (c) likelihood of engaging in each activity in the future, (d) positive feedback received from participants, and (e) negative feedback received from participants.

To examine experiences while operating in counseling capacities, questions were asked regarding (a) types of recommendations offered to those counseled, (b) difficulties while serving in counseling capacities, (c) how often specific recommendations (including divorce and separation) are made, and (d) factors influencing recommendations of divorce or separation.

Chapter III. Results

Data Analysis

Data were analyzed using the Statistical Package for Social Sciences (SPSS) software version 19. In addition to descriptive statistics, independent *t*-tests, chi-square, and Pearson correlations were conducted to analyze the data. The responses to open-ended questions were content analyzed via inductive analysis to identify the content and frequency of major themes that emerge from the data (Patton, 1990). Information on the descriptive findings for each of the study's research questions follows.

Research Question 1: Rabbinical Attitudes and Beliefs

Rabbinical attitudes and beliefs were assessed using The Sex Role Egalitarianism Scale (SRES) and the 5 subscales of The Inventory of Beliefs about Wife Beating (IBWB). Generally, participants endorsed highly egalitarian views of gender roles, with 89% scoring between 100 and 125 of a possible 125 on the SRES (n = 90, M = 115.64, SD = 9.67). Rabbinical participants also tended to endorse low tolerance levels of partner violence and strong views about the culpability of the offender. These data are presented in greater detail in Table 3.

Table 3

Rabbinical Participants Responses to Attitudinal Measures

Variable	*n*	*M*	SD
SRES	90	115.64	9.67
IBWB [a]			
Wife Beating is Justified	104	1.19	0.36
Wives Gain from Abuse	104	1.37	0.48
Help Should be Given	104	6.54	0.49
Offender Should be Punished	104	3.74	1.50
Offender Is Responsible	104	5.75	1.27

Note. N = 104.
[a] All subscales have possible score ranges from 0 to 7.

Comparisons to norming populations. Scores of participants were also compared to the normative data provided for each measure using one-sample t-test. Participants in this study scored statistically higher on the SRES (*M* = 115.64, *SD* = 9.67) than the population used to norm the measure, $t(89) = 9.84$, $p < 0.001$. Participants in this study also scored statistically higher on almost all scales of the IBWB than the psychology students from two universities in the United States used to norm the measure (Saunders et al., 1987). Table 4 shows the comparisons among the 5 subscales. The means and standard deviations for each sample are given, as well as the *t*-test comparisons between the participants in this study and the norming population.

Table 4

Rabbinical Attitudes Relative to Norming Populations

Variable	*n*	*M*(SD)	*t*	df	*p*
SRES			9.84	89	0.00
Rabbis	90	115.64 (9.67)			
Students [a]	467	105.61 (13.42)			
IBWB [b]					
WJ			-17.37	103	0.00
Rabbis	104	1.19 (0.36)			
Students	675	1.81 (0.76)			
WG			-18.60	103	0.00
Rabbis	104	1.37 (0.48)			
Students	675	2.24 (0.82)			
HG			13.08	103	0.00
Rabbis	104	6.54 (0.59)			
Students	675	5.91 (0.77)			
OP			-1.29	103	0.20
Rabbis	104	3.74 (1.50)			
Students	675	3.93 (0.91)			
OR			10.21	103	0.00
Rabbis	104	5.75 (1.27)			
Students	675	4.48 (1.05)			

Note. *N* = 104.
[a] Information on the norming population is from *Manual for the Sex-Role Egalitarianism Scale: An instrument to measure attitude toward gender-role equality* by L.A. King and

D.W. King, (1993), London, Ontario, Canada: Research Psychologists Press/Sigma Assessment Systems.
[b] *Key:* WJ = Wife Beating is Justified; WG = Wives gain from Abuse; HG = Help Should be Given; OP = Offender Should be Punished; and OR = Offender is Responsible

Influence of demographic variables. The researchers also examined the relationship between demographic characteristics of participants (i.e. age, gender, identified denomination) and their attitudes regarding partner violence and beliefs about gender roles. A Pearson product-moment correlation coefficient was conducted to examine the relationship between the rabbi's age and their reported attitudes regarding partner violence and gender roles. No significant associations were found. Please see Table 5 for a summary of the correlational analyses.

Table 5

Pearson Correlational Analysis of Age and Rabbinical Attitudes

Variable	*n*	*M*(SD)	*r*	*p*
SRES	90	115.64 (9.67)	0.001	0.993
IBWB [a]				
WJ	104	1.19 (0.36)	0.44	0.668
WG	104	1.37 (0.48)	0.33	0.744
HG	104	6.54 (0.59)	-0.067	0.515
OP	104	3.74 (1.50)	0.086	0.402
OR	104	5.75 (1.27)	0.075	0.461

Note. $N = 104$.
[a] *Key:* WJ = Wife Beating is Justified; WG = Wives gain from Abuse; HG = Help Should be Given; OP = Offender Should be Punished; and OR = Offender is Responsible

An independent *t*-test was conducted to examine the differences on IBWB and SRES scores based on gender. Results of gender comparisons are shown in greater detail in Table 6. No statistical differences were found between male and female rabbis in their IBWB and SRES scores, except in the area of believing that wives gain from involvement in violent relationships, $t(100) = 2.38$, $p = 0.019$, while assuming equal

variances. Evidence suggests male rabbis endorse such beliefs more than female rabbis (see Figure 1 for graphical representation of the data). Not assuming equal variances, results indicate no significant differences between male and female rabbis on the WJ subscale of the IBWB, $t(99.80) = 1.89$, $p = 0.061$, Levene's $F = 8.59$, $p = 0.004$; on the HG subscale of the IBWB, $t(100) = -1.09$, $p = 0.278$, Levene's $F = 0.89$, $p = 0.347$; on the OP subscale of the IBWB, $t(100) = -0.82$, $p = 0.414$, Levene's $F = 0.60$, $p = 0.439$; the OR subscale of the IBWB, $t(100) = -0.44$, $p = 0.658$,. Levene's $F = 0.71$, $p = 0.403$; and the SRES, $t(84.99) = -1.88$, $p = 0.064$, Levene's $F = 7.64$, $p = 0.007$. Thus, t-tests not assuming homogeneity of variance were computed for these variables.

Table 6

Gender Differences in Rabbinical Attitudes

Variable	*n*	*M*(SD)	*t*	df	*p*
IBWB [a]					
WJ			1.89	99.80	0.061
Male	60	1.25 (0.41)			
Female	42	1.12 (0.27)			
WG			2.38	100	0.019
Male	60	1.47 (0.53)			
Female	42	1.24 (0.36)			
HG			-1.09	100	0.278
Male	60	6.50 (0.52)			
Female	42	6.60 (0.40)			
OP			-0.82	100	0.414
Male	60	3.60 (1.49)			
Female	42	3.85 (1.48)			
OR			-0.44	100	0.658
Male	60	5.73 (1.24)			
Female	42	5.84 (1.31)			
SRES			-1.88	84.99	0.064
Male	50	113.94 (10.97)			
Female	38	117.63 (7.43)			

Note. $N = 104$.

[a] *Key:* WG = Wives gain from Abuse; HG = Help Should be Given; OP = Offender Should be Punished; and OR = Offender is Responsible

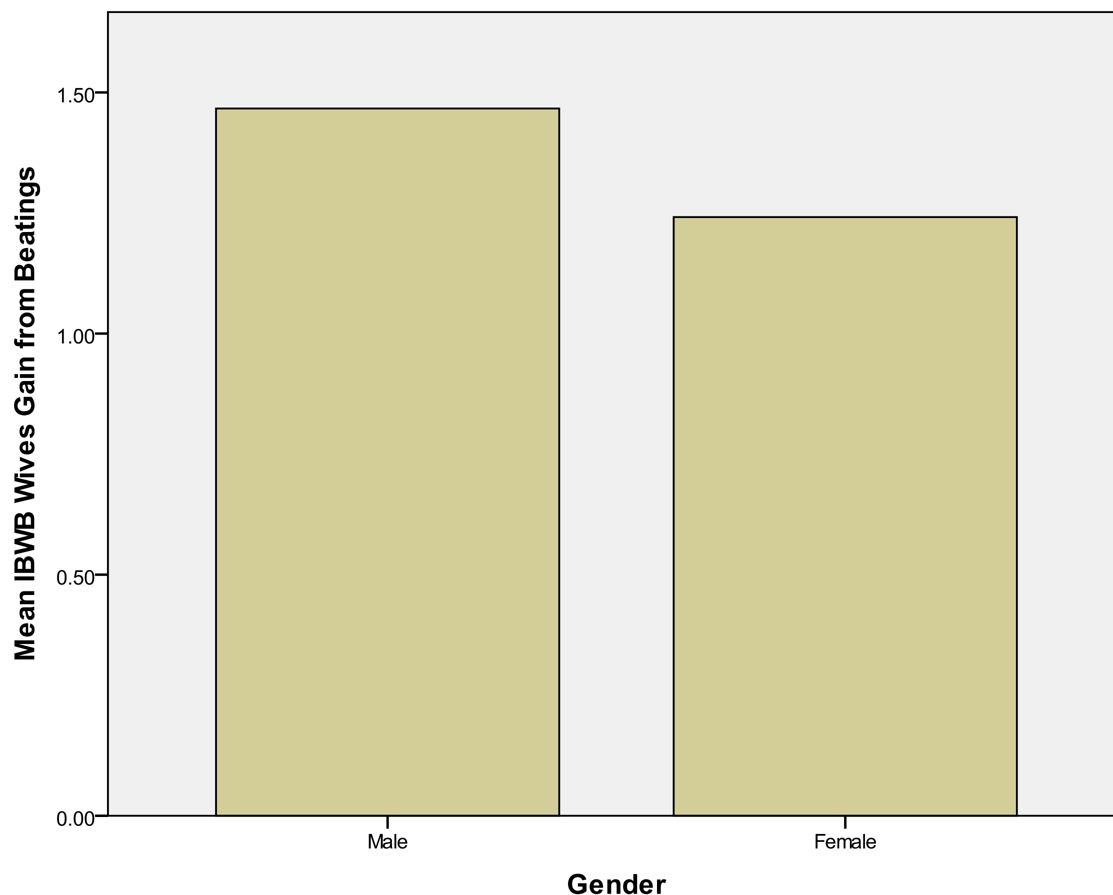

Figure 1. WG by gender. This subscale of the IBWB consists of 7 Likert- items. Response choices ranged from one to seven with four indicating a neutral midpoint. Total possible scores ranged from 12 to 84. Higher scores indicate greater agreement that partner violence is justified.

An independent *t*-test was conducted to examine the differences on IBWB and SRES scores based on denomination. Results indicate no significant differences between Reform rabbis (M = 1.14, SD = 0.29) and Orthodox rabbis (M = 1.28, SD = 0.40) in their beliefs about the justification of partner violence, $t(26.54) = -1.47$, $p = 0.155$, equal variances not assumed, $F = 6.55$, $p = 0.012$. Results also indicate no significant differences in beliefs about victims benefiting from violent relationships between Reform

rabbis (M = 1.32, SD = 0.39) and Orthodox rabbis (M = 1.45, SD = 0.63), $t(90) = -1.13$, p = 0.26, assuming equal variances, Levene's F = 1.89, p = 0.172. Analysis reveals no significant differences in beliefs about offering help to victims of partner violence between Reform rabbis (M = 6.56 SD = 0.42) and Orthodox rabbis (M = 6.50, SD = 0.69), $t(90) = 0.51$, p = 0.612, assuming equal variances, Levene's F = 2.26, p = 0.137. Furthermore, analysis revealed no significant differences between Reform rabbis (M = 3.76, SD = 1.47) and Orthodox rabbis (M = 3.76, SD = 1.52) in their beliefs about whether violent partners should be punished, $t(90) = -0.004$, p = 0.997; or between Reform rabbis (M = 5.87, SD = 1.30) and Orthodox rabbis (M = 5.5, SD = 1.25) and their beliefs about the responsibility of violent partners, $t(90) = 1.14$, p = 0.256, equal variances assumed for both, Levene's F = 0.001, p = 0.976, and F = 0.60, p = 0.44, respectively.

Tests did indicate statistically significant difference between Reform rabbis (M = 118.10, SD = 7.23) and Orthodox rabbis (M = 109.95, SD = 10.72) in endorsement of egalitarian views of sex roles, $t(23.33) = 3.10$, p = 0.005, while not assuming equal variances, F = 10.94, p = 0.001. These differences are represented graphically in Figure 2.

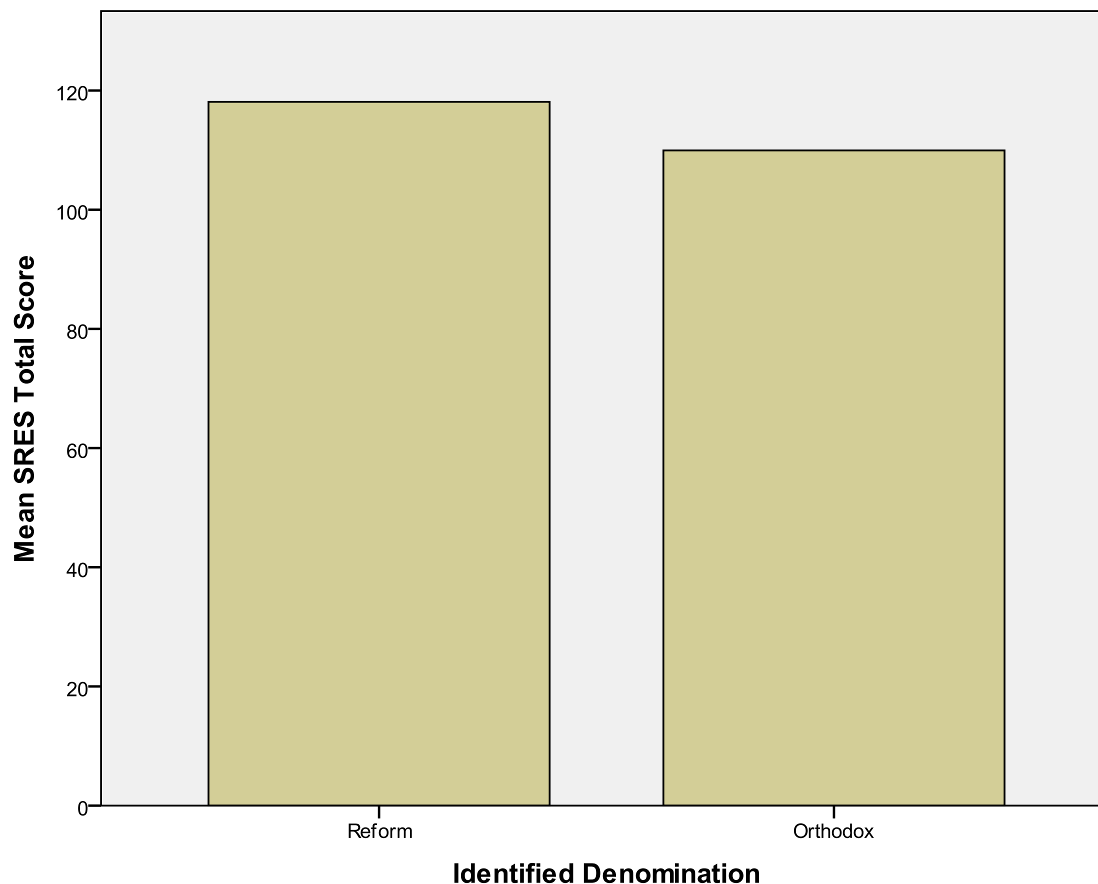

Figure 2. SRES by identified denomination. The SRES consists of 25 Likert items. Response choices ranged from one to five with three indicating a neutral midpoint. Total possible scores ranged from 25 to 125. Higher scores indicated greater endorsement of egalitarian views of gender roles.

Relationship between attitudinal measures. Lastly, the researchers were concerned with the relationship between the attitudes of participants regarding partner violence and gender roles. A Pearson product-moment correlation analysis was conducted to examine the relationship between the rabbi's views on egalitarianism and beliefs about violence in relationships. The, SRES is significantly correlated with four of the five scales on the IBWB. Results indicated less egalitarian views of relationships were associated with believing wife beating was justified (r = -0.47, p < 0.001) and believing wives gain from abuse (r = -0.41, p < 0.001). Higher belief in the egalitarian

model of relationships was significantly correlated with believing help should be given to victims of abuse ($r = 0.34$, $p < 0.001$) and believing the offender of abuse should be held responsible for their behavior ($r = 0.26$, $p = 0.015$). There was no significant correlation between beliefs about offender punishment and attitudes towards egalitarianism ($r = 0.08$, $p = 0.468$).

Research Question 2: Level and Quality of Intimate Partner Violence Training

Level of training. Results of self-reports of training activities both during and following rabbinical school showed that 73.1% of the participants indicated receiving training on intimate partner violence at some point in their career ($n = 76$). Participants who received training indicated that 52.6% received training while in school ($n = 40$) and 68.8% received training following school ($n = 49$). Interestingly, 17% of those who received training did so both during and after rabbinical school ($n = 18$). Of those who did not receive training, 20% wished it had been offered ($n = 8$). Participants who participated in trainings were asked about frequency and 100% of participants reported receiving partner violence training once a year or less ($n = 104$). In addition, participants were asked about the total hours of training they had received around issues of intimate partner violence. The majority (75%, $n = 48$) received between one to ten hours of training, 17.2% received 11 to 20 hours ($n = 11$), and 7.8% received more than 20 hours ($n = 5$).

Quality of training. Participants were asked about the formats of and quality of training in which participants engaged. Table 7 describes the topics covered in trainings. The most commonly attended training activity was a workshop, seminar, or conference. Most training, regardless of format, while in school was taught by rabbis; while trainings

post-school were typically conducted by intimate partner violence counselors. Table 8 provides more detailed data on training during and after rabbinical school. In general, trainings were rated "fair" or "excellent" on a five-point Likert scale of quality, with quality improving slightly for post-school training experiences. Table 9 contains more detailed information on quality ratings.

Table 7

Description of Topics Covered in Rabbinical Partner Violence Trainings

	During Rabbinical		Post Rabbinical School	
Variable	*n*	Percentage	*n*	Percentage
Topics Covered				
Children and Partner Violence	22	28.9%	29	38.2%
Counseling Perpetrators of Partner Violence	12	15.8%	9	11.8%
Counseling Victims of Partner Violence	23	30.3%	32	42.1%
Definitions and Prevalence Statistics	31	40.8%	41	53.9%
How to find and use resources and referrals	36	47.4%	43	56.6%
Legal Aspects	21	27.6%	34	44.7%
Risk Assessment and Providing Options for Safety	27	35.5%	41	53.9%

Note. $N = 76$.

Table 8

Description of Rabbinical Participants Training Formats and Instructors

	Lecture/Panel Format [a]				Course Format			
	During Rabbinical (n = 30)		Post Rabbinical School (n = 33)		During Rabbinical (n = 20)		Post Rabbinical School (n = 1)	
Variable	*n*	Percentage	*n*	Percentage	*n*	Percentage	*n*	Percentage
Taught by DV Counselors	15	50%	31	93.9%	4	20%	0	0%
Taught by Jewish community based resource	1	3.3%	0	0%	0	0%	0	0%
Taught by Police Officers or Lawyers	0	0%	3	9%	0	0%	0	0%
Taught by Professors	5	16.7%	4	12%	4	20%	0	0%
Taught by Psychologists, therapist, or psychiatrists	19	63.3%	21	63.6%	12	60%	1	100%
Taught by Rabbis	20	66.7%	13	39.3%	14	70%	0	0%
Taught by Victims or Perpetrators	3	10%	4	12.1%	0	0%	0	0%

(table continues)

	Workshop, Seminar, Conference Format [b,c]				Other Format [d]			
	During Rabbinical (n = 23)		Post Rabbinical School (n = 39)		During Rabbinical (n = 3)		Post Rabbinical School (n = 12)	
Variable	*n*	Percentage	*n*	Percentage	*n*	Percentage	*n*	Percentage
Taught by DV Counselors	9	39.1%	31	79.5%	0	0%	8	66.7%
Taught by Jewish community based resource	0	0%	1	2.6%	0	0%	1	8.3%
Taught by Police Officers or Lawyers	0	0%	3	7.7%	0	0%	1	8.3%
Taught by Professors	4	17.4%	5	12.8%	0	0%	1	8.3%
Taught by Psychologists, therapist, or psychiatrists	11	47.8%	21	53.8%	0	0%	1	8.3%
Taught by Rabbis	14	60.8%	15	38.5%	1	33.3%	2	16.7%
Taught by Victims or Perpetrators	2	8.6%	3	7.7%	1	33.3%	0	0%

Note. N = 76.

[a] Instructor percentages calculated from participants who endorsed receiving that training format.

[b] *While in school:* 60.9% attended a workshop (n = 14); 56.5% attended a seminar (n = 13); 8.7% attended a conference (n = 2)

[c] *Post school:* 9.2% attended a workshop (n = 27); 35.9% attended a seminar (n = 14); 25.6% attended a conference (n =10)

[d] Includes readings, orientations or private trainings at places of employment, and personal interactions with partner violence victims, perpetrators, and counselors.

Table 9

Description of Partner Violence Training Quality

	Lecture/Panel Format				Course Format			
	During Rabbinical ($n = 30$)		Post Rabbinical School ($n = 33$)		During Rabbinical ($n = 20$)		Post Rabbinical School ($n = 1$)	
Variable	n	Percentage	n	Percentage	n	Percentage	n	Percentage
Excellent	6	20%	18	54.5%	5	25%	1	100%
Fair	17	56.7%	9	27.2%	8	40%	0	0%
Adequate	5	16.7%	6	18.2%	3	15%	0	0%
Poor	1	3.3%	0	0%	3	15%	0	0%
	Workshop, Seminar, Conference Format				Other Format [a]			
	During Rabbinical ($n = 23$)		Post Rabbinical School ($n = 39$)		During Rabbinical ($n = 3$)		Post Rabbinical School ($n = 12$)	
Variable	n	Percentage	n	Percentage	n	Percentage	n	Percentage
Excellent	4	17.4%	23	58.9%	0	0%	7	58.3%
Fair	13	56.5%	6	15.3%	1	33.3%	4	33.3%
Adequate	4	17.4%	8	20.5%	0	0%	1	8.3%
Poor	0	0%	1	2.5%	0	0%	0	0%

Note. $N = 76$.
[a] Includes readings, orientations or private trainings at places of employment, and personal interactions with partner violence victims, perpetrators, and counselors.

Motivation for training. Participants who attended trainings were also asked about their motivations to do so with the following results: 52.6% indicated an interest in the topic (n = 40); 35.5% found the topic to be relevant to their congregation (n = 27); 32.9% identified trainings as readily available in their area (n = 25); and 30.3% of participants indicated training was mandatory for their rabbinical school program (n = 23). The following were also endorsed as reasons rabbis chose to attend trainings on partner violence: training was required for a non-rabbinical job (6.5%, n = 5); a desire to increase personal knowledge (6.5%, n = 5); being influenced by a colleague in the helping professions (5.2%, n = 4); and viewing partner violence as part of broader important women's issues (1.3%, n = 1). For rabbis indicating no training on issues related to partner violence, the most common reason provided for a lack of training was that it was unavailable through their rabbinical school programming (92.9%, n = 26). Rabbis also cited lack of readily available training in their area (32.1%, n = 9) and a lack of interest in the topic (3.6%, n = 1) as reasons they had not received training.

Description of training experiences. Content analysis was conducted on open-ended survey questions in which participants described both positive and negative training experiences in greater detail. Responses revealed themes regarding the types of trainings identified as helpful, helpful aspects of trainings, topics identified as helpful, and aspects of less positively viewed trainings. Tables 10 and 11 present the data from analyzing the content of the responses to the open-ended questions.

Table 10

Aspects of Positive Training Experiences

Major Themes (*N*)	Subthemes (*n*)
Types of Trainings Identified as Helpful (*N* = 33)	• Events hosted by Jewish organizations or the Board of Rabbis (*n* = 11) • Discussions or trainings with partner violence professionals (*n* = 8) • Educational resources [a] (*n* = 4) • Hands on experiences (*n* = 3) • Discussions with other clergy members (*n* = 3) • Stories told by partner violence victims (*n* = 2) • Being approached by a congregant (*n* = 1) • Lecture-film series (*n* = 1)
Helpful Aspects of Trainings (*N* = 9)	• Having information regarding referral resources (*n* = 4) • Inclusion of a variety of perspectives (*n* = 2) • Increasing the breadth and depth of previous knowledge (*n* = 2) • Being in a community receptive to the issue (*n* = 1)
Topics Identified as Helpful (*N* = 7)	• Legal issues (*n* = 2) • Victim issues [b] (*n* = 2) • Religious blind spots and de-stigmatizing (*n* = 2) • How to identify partner violence (*n* = 1)

[a] Educational resources include journal articles and continuing education (i.e. clinical pastoral education).
[b] Examples given include empowering a victim when you disagree with their choices; how to help them heal.

Table 11

Aspects of Negative Training Experiences

Major Themes (*N*)	Subthemes (*n*)
Elements of Unhelpful Trainings (*N* = 12)	• Training that was limited in scope or too abstract (*n* = 4) • Emphasis on Orthodox values [a] (*n* = 2) • Un-answered questions or less than helpful referral sources (*n* = 2) • Instruction provided to disregard individual safety needs, or to violate laws about reporting and privacy (*n* = 2) • Conducted by speakers who were not knowledgeable or helpful (*n* = 2)

[a] Examples given include emphasizing marriage preservation or believing partner violence was acceptable in certain circumstances.

Training and attitudes. Lastly, the researchers were concerned with the relationship between receiving training related to partner violence and attitudes of participants regarding partner violence and gender roles. Independent sampled *t*-test was conducted to assess the relationship between receiving training and the rabbi's views on egalitarianism and beliefs about violence in relationships. Assuming equal variances, no significant differences were found between rabbis who received training and those who did not on beliefs about egalitarianism in relationships, $t(88) = 1.20$, $p = 0.234$, Levene's $F = 0.58$, $p = 0.449$; beliefs about whether victims gain from partner violence, $t(102) = -0.40$, $p = 0.689$, assuming equal variances, Levene's $F = 0.27$, $p = 0.871$; beliefs about whether domestic violence victims should be given help, $t(33.30) = 1.58$, $p = 0.124$, not assuming equal variances, Levene's $F = 11.18$, $p = 0.001$; beliefs about the punishment of violent partners, $t(102) = -0.55$, $p = 0.581$, assuming equal variances, Levene's $F = 0.71$, $p = 0.40$; and beliefs whether a violent partner should be held responsible, $t(102) = 0.20$, $p = 0.845$, assuming equal variances, Levene's $F = 0.35$, $p = 0.555$. No significant

differences were found between rabbis who received training and those who did not on beliefs about justification of partner violence, $t(38.42) = -1.51$, $p = 0.139$, not assuming equal variances, Levene's $F = 0.03$, $p = 0.871$. These results are outlined farther in Table 12.

Table 12

Differences in Rabbinical Attitudes Related to Receiving Training

Variable	*n*	*M*(SD)	*t*	df	*p*
SRES			1.20	88	0.234
Training	66	116.38 (9.41)			
No Training	24	113.63 (10.28)			
IBWB					
WJ			-1.51	38.418	0.139
Training	76	1.16 (0.32)			
No Training	28	1.30 (0.43)			
WG			-0.40	102	0.689
Training	76	1.36 (0.48)			
No Training	28	1.40 (0.48)			
HG			1.58	33.304	0.124
Training	76	6.59 (0.38)			
No Training	28	6.38 (0.69)			
OP			-0.55	102	0.581
Training	76	3.69 (1.55)			
No Training	28	3.88 (1.37)			
OR			0.20	102	0.845
Training	76	5.77 (1.26)			
No Training	28	5.71 (1.33)			

Note. $N = 104$.

Research Question 3: Rabbinical Service Provision and Prevention Efforts

Overall, allowing intimate partner violence organizations to distribute or display information to congregants was the most commonly performed service (84.6%, $n = 88$), followed by referring congregants to intimate partner violence organizations (61.5%, $n = 64$) and allowing intimate partner violence organizations to place ads in the synagogue newsletter or announcements (58.7%, $n = 61$). Conducting sermons on the topic of intimate partner violence was the most commonly performed activity (40.4%, $n = 42$) in which the rabbi took an active leadership role. Almost all services were indicated to be provided at most twice a year, with most occurring less than once a year. Additional information regarding the services provided by rabbis is presented in Table 13.

Given previously mentioned gender and denominational differences in attitudinal measures of the study, the researchers decided to conduct post-hoc analysis to observe gender and denominational patterns in service provision and prevention activities. Due to limited sample size, no post-hoc statistical analysis was conducted. Few differences are seen amongst service provision activities by gender or denomination. As is expected given their proportional representation amongst participants, activities are more commonly endorsed by male participants; however, women host special religious services aimed at partner violence, organize Torah or religious text study groups, and request flyers and posters from domestic violence agencies more frequently than male rabbis. Results are demonstrated graphically in Figures 3 and 4.

Table 13

Services Provided by Rabbis Regarding Partner Violence

Variable	Allowed partner violence organizations to distribute or display information to congregants [a] (n = 88)		Referred congregants to partner violence organizations (n = 64)		Allowed partner violence organizations to place advertisement in synagogue newsletter or announcements [b] (n = 61)		Requested flyers or posters from partner violence organizations (n = 49)	
	n	Percentage	*n*	Percentage	*n*	Percentage	*n*	Percentage
Less than once a year	23	26.1%	51	79.7%	23	37.7%	23	46.9%
Between once every 6 months and a year	13	14.8%	12	18.8%	11	18.0%	24	49.0%
Between once a month and every 6 months	11	12.5%	1	1.6%	13	21.3%	1	2.0%
Every Month	8	9.0%	0	0.0%	9	14.8%	1	2.0%
More than Once a Month	28	31.8%	0	0.0%	1	1.6%	0	0.0%

(table continues)

Variable	Provided sermons on partner violence ($n = 42$)		Organized outreach activities that benefit partner violence organizations ($n = 36$)		Organized, Attended, or Spoken at a partner violence rally [c, d] ($n = 26$)		Provided workshops or seminars on partner violence ($n = 17$)	
	n	Percentage	n	Percentage	n	Percentage	n	Percentage
Less than once a year	38	90.5%	25	69.4%	25	96.2%	16	94.1%
Between once every 6 months and a year	4	9.5%	10	27.8%	1	3.8%	1	5.9%
Between once a month and every 6 months	0	0.0%	1	2.8%	0	0.0%	0	0.0%
Every Month	0	0.0%	0	0.0%	0	0.0%	0	0.0%
More than Once a Month	0	0.0%	0	0.0%	0	0.0%	0	0.0%

(table continues)

Variable	Held panel discussions on partner violence (n = 16)	
	n	Percentage
Less than once a year	15	93.8%
Between once every 6 months and a year	1	6.3%
Between once a month and every 6 months	0	0.0%
Every Month	0	0.0%
More than Once a Month	0	0.0%

Note. N = 104.

[a] 40% allowed distribution (n = 44); 85.2% allowed displays (n = 75)

[b] 82.5% allowed in newsletter (n = 52); 49.2% allowed in announcements (n = 31)

[c] None organized rallies; 69% attended rallies (n = 18); 50% spoke at rallies (n = 13)

[d] 19.2% both attended and spoke at rallies (n = 5)

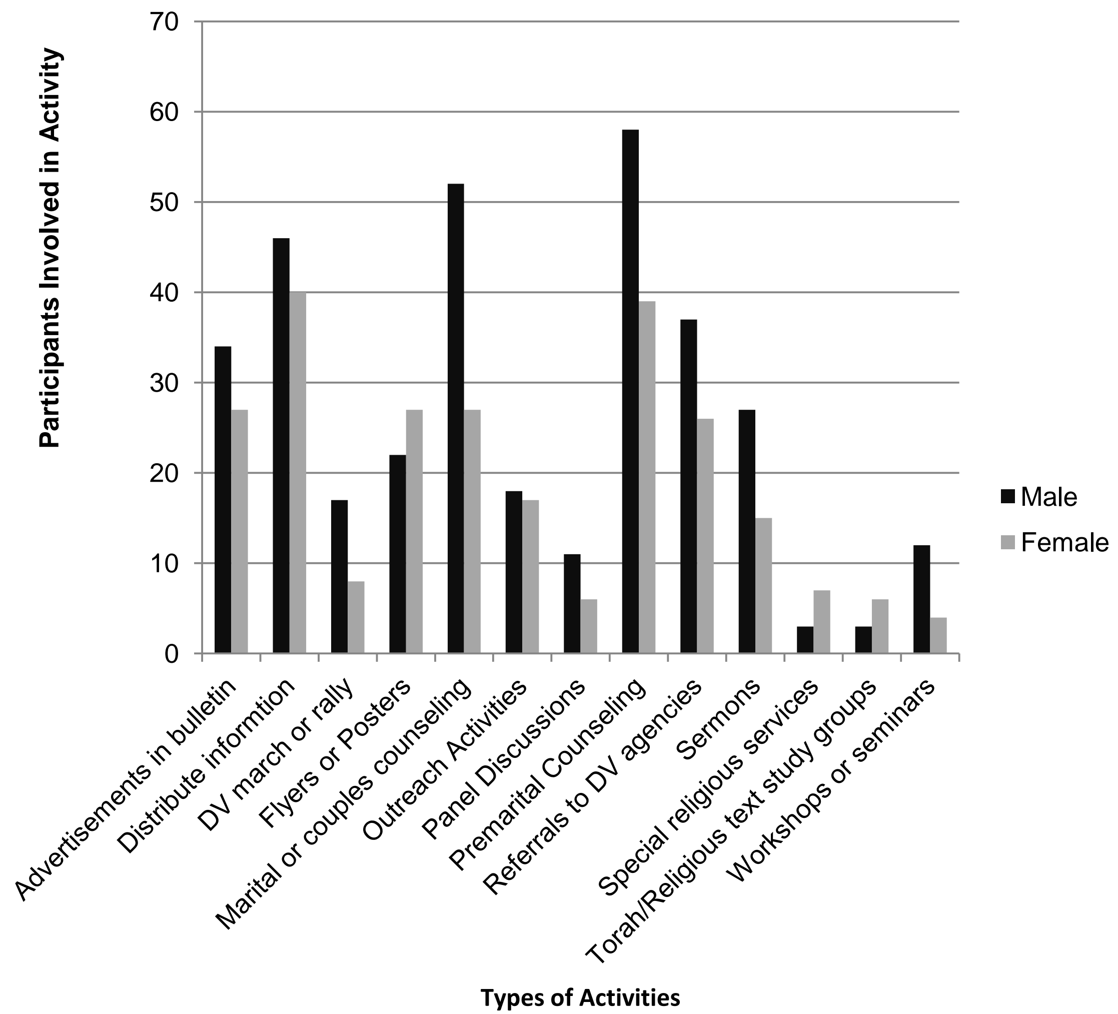

Figure 3. Service provision and prevention activities by gender. Males $N = 60$; Females $N = 42$.

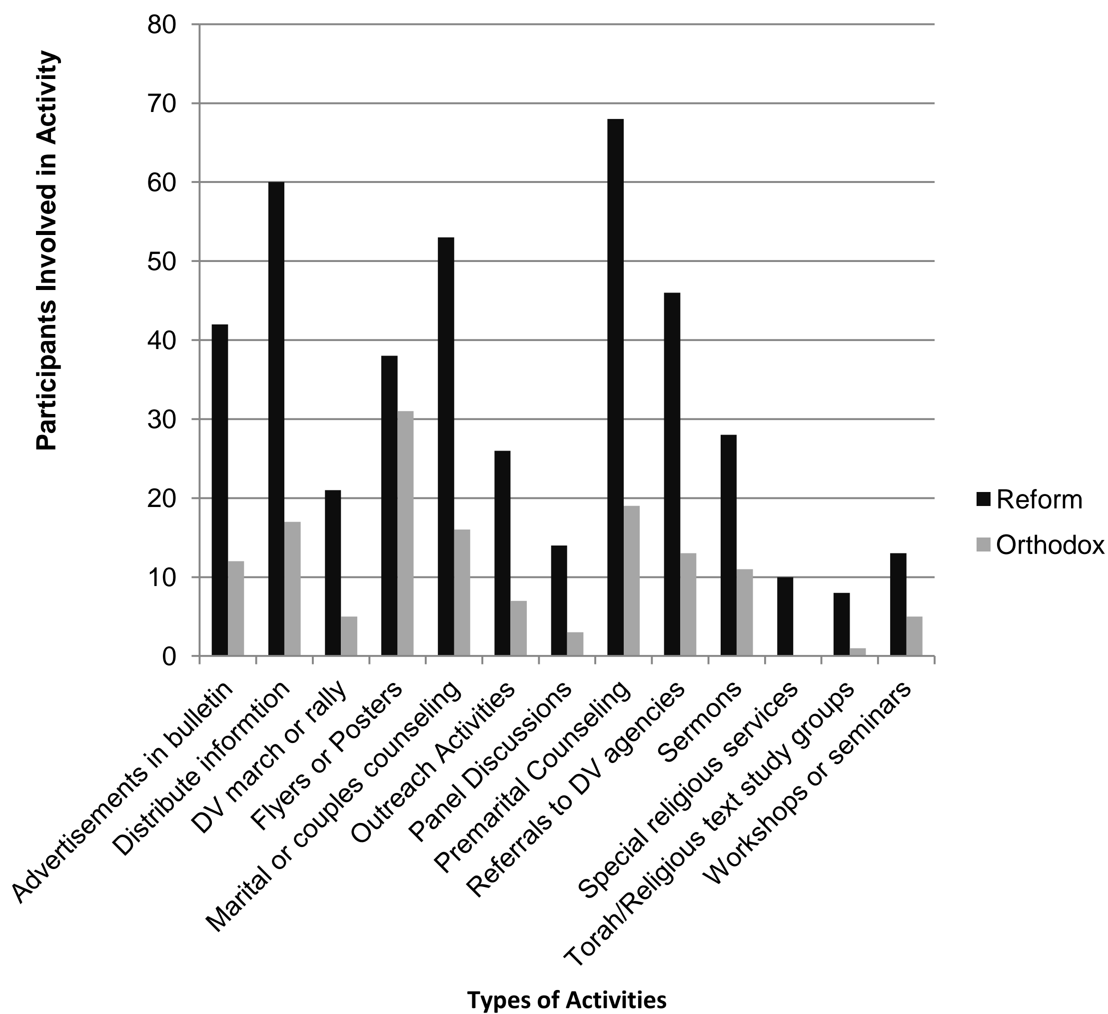

Figure 4. Service provision and prevention activities by denomination. Reform rabbis $N = 71$; Orthodox rabbis $N = 21$.

Research Question 4: Counseling Recommendations Regarding Intimate Partner Violence

For the last research question, researchers were interested in the counseling services provided by rabbis regarding intimate partner violence. Nearly all participants indicated providing some sort of counseling to congregants (96.2%, n =100). Of these, 98% report providing premarital counseling (n = 98) and 80% report providing counseling to married couples (n = 80); 78% report providing both forms of counseling (n =78). This represents 94.2% and 76.9%, respectively, of the studies total participants. Of those providing counseling, 57% have provided counseling to victims or perpetrators of intimate partner violence; All of these provided counseling to victims (n =57) and 10% counseled perpetrators (n = 10). When providing couples counseling, 24% of participants indicated the couples being counseled were currently involved in a violent relationship (n = 24). Such results indicate providing counseling is a primary form of service provision for rabbis.

Percentages were generated for self-reported frequencies of the counseling recommendations made by the rabbis who reported providing intimate partner violence counseling to congregants (41.3%, n = 43) and are shown in Table 14. While the recommendations to "remain in the home" and "forgive your partner" were each endorsed by one participant, no frequency information was provided. It is of note that no participants endorsed recommending "Submit to partner and pray that God will change him or her"

Table 14

Counseling Recommendations Provided by Rabbis Regarding Partner Violence

Variable	Devise and/or implement methods of ensuring victim's safety [a] ($n = 36$)		Contact a partner violence program ($n = 35$)		Receive individual counseling ($n = 30$)		Contact the police for protection ($n = 24$)	
	n	Percentage	n	Percentage	n	Percentage	n	Percentage
Very Often	22	61.1%	12	34.3%	14	46.7%	3	12.5%
Often	8	22.2%	14	40%	14	46.7%	5	20.8%
Sometimes	1	2.8%	4	11.4%	0	0.0%	9	37.5%
Rarely	0	0.0%	1	2.9%	0	0.0%	1	4.2%

Variable	Separate from partner ($n = 23$)		Consult a lawyer ($n = 22$)		Continue receiving rabbinical counseling ($n = 16$)		Pursue couples counseling ($n = 16$)	
	n	Percentage	n	Percentage	n	Percentage	n	Percentage
Very Often	2	7.7%	1	4.5%	5	31.3%	3	18.8%
Often	5	21.7%	8	36.4%	7	43.8%	6	37.5%
Sometimes	13	56.5%	8	36.4%	3	18.8%	4	25.0%
Rarely	1	4.3%	0	0.0%	0	0.0%	1	6.3%

(table continues)

Variable	Get a restraining order ($n = 15$)		Refrain from providing recommendations and just listen ($n = 14$)		See a medical doctor or seek treatment in an emergency room ($n = 8$)		Divorce partner ($n = 7$)	
	n	Percentage	*n*	Percentage	*n*	Percentage	*n*	Percentage
Very Often	1	6.7%	1	7.1%	1	12.5%	0	0.0%
Often	4	26.7%	3	21.4%	2	25.0%	3	42.9%
Sometimes	8	53.3%	1	7.1%	2	25.0%	3	42.9%
Rarely	1	6.7%	1	7.1%	0	0.0%	0	0.0%

Variable	Get a restraining order ($n = 15$)		Refrain from providing recommendations and just listen ($n = 14$)		See a medical doctor or seek treatment in an emergency room ($n = 8$)		Divorce partner ($n = 7$)	
	n	Percentage	*n*	Percentage	*n*	Percentage	*n*	Percentage
Very Often	1	6.7%	1	7.1%	1	12.5%	0	0.0%
Often	4	26.7%	3	21.4%	2	25.0%	3	42.9%
Sometimes	8	53.3%	1	7.1%	2	25.0%	3	42.9%
Rarely	1	6.7%	1	7.1%	0	0.0%	0	0.0%

(table continues)

Variable	Provide encouragement and/or means to prevent angering and provoking partner (n = 5)		Attend religious services with increased frequency or regularity (n = 5)		Perform mitzvoth [b] (n = 3)	
	n	Percentage	*n*	Percentage	*n*	Percentage
Very Often	0	0.0%	0	0.0%	1	33.3%
Often	1	20.0%	1	20.0%	1	33.3%
Sometimes	0	0.0%	3	60.0%	1	33.3%
Rarely	1	20.0%	0	0.0%	0	0.0%

Note. N = 100.

[a] Recommendation options adapted from survey utilized in "Clergy response to domestic violence: a preliminary survey of clergy members, victims, and batterers," by R. Rotunda, G. Williamson, and M. Penfold, 2004, *Pastoral Psychology*, *52*(4), 353-365. Adapted with permission.

[b] Mitzvoth refers to good deeds prescribed in the religious texts.

The researchers were also interested in the factors which influenced the decisions of rabbis who recommend divorce or separation to individuals in violent relationships. Content analysis was conducted on open-ended survey questions in which participants described factors which influence their decisions regarding these recommendations. Responses revealed themes regarding the factors related to the violence, personalities of the victims and perpetrators, relational factors, religious or professional reasons, and personal reasons for recommendations. Table 15 presents the data from analyzing the content of the responses to the open-ended questions.

Table 15

Factors Influencing Decisions Regarding Divorce or Separation

Major Themes (*N*)	Subthemes (*n*)
Factors related to the violence (*N* = 44)	• Possibility for safety (*n* = 12) • Nature and/or severity of the abuse (*n* = 9) • Presence and age of children (*n* = 9) • Length, time period, and frequency of abuse (*n* = 5) • Financial security of victim (*n* = 3) • Availability of support network (e.g. friends, family, community) (*n* = 3) • Presence of drugs, alcohol, and/or firearms (*n* = 2) • Believability (*n* = 1)
Personality factors of the victim (*N* = 11)	• Currently enrolled or willing to enroll in therapy (*n* = 6) • Victim willingness to consider divorce (*n* = 3) • Relationship to the victim (*n* = 1) • Possibility of change in the victim (*n* = 1)
Personality factors of the perpetrator (*N* = 10)	• Currently enrolled or willing to enroll in therapy (*n* = 5) • Possibility of change in the abuser(*n* = 2) • Concerns about perpetrator's mental health (*n* = 2) • Presence of expressions of remorse and desire for forgiveness (*n* = 1)

(table continues)

Major Themes (N)	Subthemes (n)
Relational factors ($N = 7$)	• Expressed interest in repairing relationship ($n = 2$) • Current level of relationship satisfaction and/or respect ($n = 2$) • State of communication between partners ($n = 2$) • Relationship history ($n = 1$) • Previous attempts at solutions ($n = 1$)
Religious or professional factors ($N = 4$)	• Lack of training or knowledge about violence ($n = 2$) • Lack of guidance from religious texts ($n = 1$) • Believing that divorce and separation are permitted in general within Judaism ($n = 1$)
Personal factors ($N = 8$)	• Zero tolerance policy for violence ($n = 3$) • Did not specify factors, but did indicate considering each situation individually ($n = 3$) • Amount of time spent with individual partners ($n = 1$)

The researchers also felt it was important to examine possible difficulties rabbis may face in providing counseling services to victims and perpetrators of partner violence. Of the participants who completed this portion of the survey ($n = 50$), it is of note that no participants reported difficulty counseling due to personal feelings about divorce/separation or due to the religious doubts of those they may be counseling. The difficulties endorsed by participants are shown in greater detail in Table 16.

Table 16

Description of Rabbinical Difficulties When Counseling

Variable	n	Percentage
Felt they lacked enough training to counsel congregants for partner violence	24	48%
Struggled because of counselee's lack of motivation for change	13	26%
Felt it was difficult to handle emotional demands of counseling for partner violence	11	22%
Did not endorse any difficulties	9	18%
Felt they lacked information about partner violence in general	6	12%

(table continues)

Variable	*n*	Percentage
Felt uncomfortable counseling congregants for partner violence	5	10%
Felt they lacked knowledge about resources in the community for partner violence	3	6%
Struggled due to personal attitudes regarding partner violence	1	2%

Note. $N = 43$.

Summary of Study Findings

The following is a summary of the major findings among the rabbis who participated in this study:

1. Generally, rabbinical participants indicated believing strongly in egalitarian roles between sexes in relationships. They also endorsed low levels of tolerance for partner violence and strong beliefs that violent partners should be punished for their actions.
2. There was no significant relationship between rabbi's age and belief about intimate partner violence and egalitarianism in relationships.
3. Overall, gender was not significantly related to attitudes about partner violence or gender roles. However, male rabbis as compared to female rabbis did endorse significantly higher beliefs that that wives gain from involvement in violent relationships.
4. Additionally, identification as an Orthodox or Reform rabbi was not significantly related to attitudes about partner violence or gender roles. However, Reform rabbis did endorse significantly higher beliefs that relationships should be egalitarian than Orthodox rabbis.
5. In general, endorsement of beliefs in egalitarian relationships was significantly related to finding partner violence to be unjustified, disagreement that victims

benefit from abuse, believing victims should be given help, and feelings that perpetrators should be held responsible for their behavior.

6. The majority of rabbis in this study had received training on issues related to partner violence, with most of the training on partner violence occurring post-rabbinical school.
7. Of the rabbis in this study who did not receive training, they expressed a desire to do so and believed the lack of training provided by the rabbinical schools was a primary reason for their lack of knowledge.
8. The most common training format was a workshop, seminar, or conference and these were most commonly taught by rabbis during rabbinical school and intimate partner violence counselors post-rabbinical school.
9. In general trainings were rated of high quality, with the quality seeming to improve post rabbinical school.
10. Receiving training on issues related to partner violence did not have a significant relationship with attitudes regarding partner violence and gender roles.
11. Of all the service provisions explored in this study, rabbis are most inclined to allow intimate partner violence organizations to distribute or display information to congregants, followed by referring congregants to intimate partner violence organizations and allowing intimate partner violence organization to place ads in the synagogue newsletter or announcements.
12. Nearly all rabbis in this study report providing counseling to congregants, both in premarital and marital contexts. This includes a large proportion of work with violent couples, victims, and perpetrators of abuse.

13. The most common recommendations provided to congregants regarding intimate partner violence were safety planning, contact an intimate partner violence program, and suggestions to receive individual counseling.
14. When recommending divorce or separation, rabbis identified considering factors related to the violence, the victim, and the perpetrator. They also considered relational, religious, professional, and personal factors.
15. Those who report struggling to provide counseling regarding partner violence felt a lack of knowledge about the subject and/or community resources and feelings of discomfort were the primary causes.

Chapter IV. Discussion

Jewish women experience violence at rates equal to that of the population of the United States as a whole, with Jewish women experiencing similar psychological trauma to their non-Jewish counterparts. While scholarly discourse has discussed unique cultural concerns of Jewish families that may impact intimate partner violence, the literature base on intimate partner violence in the Jewish community is sparse, historical in nature, and suffers from several methodological concerns (i.e. concerns of generalizability, small sample sizes which may be affected by self-selection biases, limited concern for diversity in the Jewish community). Furthermore, the experience of rabbis related to intimate partner violence issues is noticeably absent from the current scholarly discourse. The purpose of this national survey was to elucidate the experiences of rabbis working with intimate partner violence issues, as they serve as figureheads among the Jewish community. This study aimed to identifying the experiences, education, and perspectives of rabbis on issues of violent relationships to allow for assessment of community needs that are not being met and assist in development of prevention programs, training resources, and psychoeducational material. Additionally, this survey endeavored to provide needed empirical information missing from the current literature to inform further research.

Interpretation of Findings

In this study, rabbinical attitudes were examined from several angles. Although rabbinical participants in this study appear to hold more egalitarian views than the population used to norm the measure used to assess this domain (i.e. SRES); according to King and King (1993), norms for the SRES were should be interpreted cautiously as little

attention was paid to the use of a representative sample of students at universities across the United States and Canada when norming the instrument. Thus, no interpretations should be made regarding these differences at this time. Furthermore, the rabbinical participants in our study almost exclusively hold degrees graduate level degrees, while the students used to norm the measures used to examine views of gender roles and beliefs about wife beating were in the process of obtaining their Bachelor degrees.

Historically, beliefs in Judaism regarding intimate partner violence have taken patriarchal and victim blaming stances (Gardsbane, 2002; Horsburgh, 1995; Levitt & Ware, 2006; Ringel & Bina, 2007). Surprisingly, in this study, rabbinical participants reported believing in high levels of equality amongst the sexes in relationships. Although social desirability may help explain this surprising result, both attitudinal measures utilized in this study have demonstrated resistance to contamination by social desirability (Beere et al., 1984; Saunders et al., 1987). Thus, this result may be accounted for by the possibility that rabbis with more tolerant views around gender and progressive views of partner violence were more willing to participate in the survey which was advertised to look at conflict within relationships, reflecting a selection bias effect.

Rabbinical participants were also intolerant of violence within intimate relationships, specifically, denying beliefs that partner violence is justified or that secondary gains occur for victims of violence. Given the increase in exposure to issues of partner violence since the 1970's (Kelly & Johnson, 2008), one might argue our study in which the mean age of participants falls below 50, may be responsible for the more egalitarian views and less permissive attitudes regarding violence. However, statistical analysis revealed there was no significant relationship between rabbi's age and scores on

attitudinal measures. Furthermore, in general gender was not significantly related to attitudes about partner violence or gender roles. While male rabbis did endorse significantly higher beliefs that partner violence may benefit women than female rabbis; these results can be expected given previous research on the *Inventory of Beliefs about Wife Beating* (Locke & Richman, 1999; Saunders et al., 1987). Questions utilized by the IBWB to explore beliefs about gaining from abuse appear to assess this construct with questions about the culpability for abuse (e.g. victims should have foreseen the abuse, her behavior causes the violence), felt experience during abuse, and possible methods of gaining (e.g. attention and sympathy). It appears that most significant differences between genders occur within the construct on questions regarding the potential for sympathy and attention following abuse. This reflects literature indicating women are more sympathetic than men to victims of abuse, perhaps reflecting in-group v. out-group dynamics (Locke & Richman, 1999).

Additionally, some studies have found evidence supporting that gender differences consistently demonstrated on measures of attitudes toward violence are the result of different sources of information on which these attitudes are based. Specifically, men endorse basing opinions on cultural myths regarding domestic violence, including those similar to the ones present in Jewish communities; while women have demonstrated basing their belief on empirically supported data (Nabors, Dietz, & Jasinski, 2006). Following this logic, sources of information may be connected to education. Post-hoc analysis reveals that a higher percentage of female participants (21.4%) than male participants (15%) in this study hold doctoral level degrees, while rates of Master's degrees are equivalent. Despite previous research indicating differences amongst

denominations in endorsement of attitudes regarding the prevalence of partner violence in the Jewish community (Martin, 1989; Ringel & Bina, 2007; Sisselman, 2009), this study found identified denomination had little effect on attitudes about partner violence or gender roles. The exception being results demonstrating Reform rabbis did endorse significantly higher beliefs that relationships should be egalitarian than Orthodox rabbis. This result reflects each denomination's approach to gender in a more global context. For example, within Orthodox Judaism men and women are often separated during various prayer activities and women are still unable to assume rabbinic positions. However, in Reform Judaism, gender equality is becoming increasingly prevalent and often encouraged within teachings regarding marital interactions. It is possible this study's unexpected result regarding high endorsement of egalitarianism and low support for partner violence may relate more to the significant relationship found between endorsement of beliefs in egalitarian relationships and beliefs that partner violence to be unjustified, disagreement that victims benefit from abuse, believing victims should be given help, and feelings that perpetrators should be held responsible for their behavior. Given the prevalence of Reform rabbis in this study, the overall high rates of egalitarianism and intolerance for partner violence may also be a reflection of the intersection between views on gender and beliefs about partner violence. There has been a previously demonstrated relationship between holding traditional gender-role stereotypes and holding negative views of women and blaming women for intimate partner violence (Dobash & Dobash, 1979; Nabors & Jasinski, 2009). Participants in this study appear to align with previous research; those who endorsed higher beliefs in egalitarian relationships also find partner violence to be unjustified, disagree that victims

benefit from abuse, believe victims should be given help, and feel that perpetrators should be held responsible for their behavior. There was no significant relationship found between egalitarian views of gender roles and beliefs about the punishment of offenders; however, this may have been due to the high rate “Don’t Know” (n = 71) responses to a question on this scale inquiring about the length of time abusive men should spend in prison. Uncertainty among respondents regarding this question may reflect feeling unqualified or uncomfortable in making decisions of legal punishment. These findings suggest possible convergent validity, as would be assumed by the literature base, between measures of egalitarian views of gender roles and beliefs about violence against women.

Another interesting and unexpected result of this study was that no significant relationship was found between receiving training on issues related to partner violence and attitudes regarding partner violence and gender roles. Research has shown that multifaceted partner violence trainings can impact attitudes toward domestic violence (Kripke, Steele, O’Briane, & Novack, 1998); however, it is possible that the trainings received by the rabbis in this study were not as multifaceted or tailored to the modification of attitudes as were those in the cited study. This possibility is supported by data from this study indicating rabbinical trainings on partner violence are focused on: (a) how to find and use resources and referrals, (b) definitions and prevalence statistics, (c) risk assessment and providing options for safety; noticeably avoidant of topics which may impact personal attitudes of rabbis. Furthermore, prior research in this area has studied health care professionals (e.g. doctors, nurses, and medical students), not clergy or rabbis; therefore, introducing additional confounds to making interpretations based on previous literature.

In this study, the majority of rabbis had received training on issues related to partner violence, with less than 20% indicating no training on the subject. This appears to represent an increase in training from previous reports (e.g. Cwik, 1996; Rotunda et al., 2004). Trainings appear to be increasingly available both within rabbinical schools and as post-school continuing education, reflecting the general increase in awareness and training regarding intimate partner violence in recent decades. Trainings were most commonly provided as a workshop, seminar, or conference; however, lecture or panel formats were also popular. The timeliness, affordability, and ease of providing these training modalities may explain their prevalence. For trainings during rabbinical school, rabbis were the most common instructors; most likely reflecting the use of school faculty and professional resources to staff trainings. Following rabbinical school, partner violence counselors were the most common instructors; perhaps reflecting the transmission of educational responsibilities to experts in the field and those with demonstrated interest in the topic. In general trainings were rated of high quality, with the quality seeming to improve post rabbinical school.

Despite the increase in training from previous studies and the high quality ratings, many rabbis still report feeling unprepared. For example, a 29-year-old female rabbi in this study recounted an experience where she referred a congregant to the domestic violence posters in the synagogue’s restroom for help because she felt “terribly unprepared to deal with [domestic violence issues].” This low belief in self-efficacy is echoed in previous studies of clergy training regarding intimate partner violence (Cwik, 1996; Rotunda et al., 2004). Given that not all rabbis in this study had received training, the low self-efficacy demonstrated by this sample may also reflect a gap between

education and expectations of rabbis to provide services regarding partner violence, regardless of training. For example, both pre and post rabbinical school, the least covered training topic is how to work with perpetrators of partner violence (15.8% and 11.8% respectively). Additionally, little more than half (54%) of the respondents who indicated providing counseling to victims or perpetrators of intimate partner violence have received training in working with either population and only 18% have received training in working with both populations.

Participants in this study indicate involvement in a multitude of services regarding intimate partner violence, including providing counseling to perpetrators and victims. Results indicate rabbis are more often engaging in passive forms of service provision (i.e. allowing partner violence organizations to distribute or display information to congregants, referring congregants to partner violence organizations) when compared with active prevention activities such as proving sermons or speaking at partner violence rallies. The endorsement of referrals to outside agencies reflects the findings of previous studies, including sentiments of participants regarding a preference of Jewish specific domestic violence resources when possible (Ringel & Bina, 2007). Despite this discrepancy, there does appear to be an increase in the general services provided by rabbis when compared with previous studies (e.g. Cwik, 1996). The low sense of self efficacy and the preference for providing referrals speaks to the need for collaboration with health professionals and domestic violence agencies. A post-hoc trend analysis of the service provision data was conducted examining gender and denominational differences with hopes of helping to further explore attitudinal differences found on these variables. In general, few differences were visible across denomination and gender.

Differences present indicate that female rabbis may be more inclined than male rabbis to engage in activities that promote education and critical thinking (e.g., host special religious services aimed at partner violence, organize Torah or religious text study groups). Given that education and critical thinking are often behind social change, such as those that relatively recently has allowed women rabbis to join many synagogues and temples, their value on these forms of services is understandable.

Nearly all rabbis in this study report providing counseling to congregants, both in premarital and marital contexts. This includes a large proportion of work with violence couples, victims, and perpetrators of abuse. Based on report that 40% of Americans seek religious counsel when struggling with personal issues, it is possible congregants of the rabbis in this study utilize rabbinical counsel more than what is to be expected (Pickard & Baorong, 2008; Weaver, 1995; Weaver et al., 1997). It is encouraging to see that participants' recommendations when providing counseling show greater sensitivity to the safety needs of the victim and emotional impact of violence in relationships than has been indicated in previous studies. Very few participants indicated encouraging women to "forgive and forget" as part of familial duties or giving less than helpful advice based on religious texts as was demonstrated in Neergaard et al., (2007). Additionally, rabbinical training which appears to have increasingly focused on how to provide victims of abuse resources in the community appears to have greatly reduced the percentage of rabbis who advise women to stay within the violent home, 1% in this study compared to 33% in a 2004 study by Rotunda et al. It should be noted that despite improvements in many areas of counseling, rabbis continue to recommend and provide couples counseling to individuals in currently violent relationship at surprising rates given the contraindication

of couples counseling when active violence is present (Bograd & Mederos, 1999; Harris, 2006; Rotunda et al., 2004). It is likely that trainings received by rabbis may not discuss the rationale for this contraindication, resulting in little awareness of the danger such recommendations presents for victims of partner violence.

When considering divorce rabbinical participants reported considering a variety of factors before making recommendations. These included factors related to the violence (e.g. frequency, severity, possibility for safety), the victim and the perpetrator (i.e. participation in therapy, readiness for change), and the relationship (i.e. relationship satisfaction, effectiveness of communication). They also considered religious factors, such as Torah writing and Talmudic teachings, and personal values around partner violence. It is of note that many of the factors described by participants align with factors identified as part of domestic violence assessments within the literature (Schacht, Dimidjian, George, & Berns, 2009). However, these issues do not appear to be addressed in trainings received by rabbinical participants. It is possible that knowledge in other areas and general training provide through Clinical Pastoral Education allows for rabbis to have insight into factors appropriate for consideration when recommending divorce. However, the accuracy of their assessment of these variables, such as offender readiness for change, is unknown at this time.

As discussed in the introduction, the issue of partner violence in the Jewish community is a complicated one; reflecting the intersection of cultural, religious, and personal morals. While service provision in areas of prevention and counseling appear to have increased, some participants in this study find these activities to present unique challenges. Several rabbis in the study noted the complexities involved with providing

counseling to congregants in violent relationships, including how to define the violence, willingness of the victim to name her experience, and the risk of disclosure when speaking with her rabbi. It is of note that rabbis in this study appear to have a more inclusive definition of partner abuse that one might expect, given previous literature (e.g. Sisselman, 2009). This may reflect the exponential increase in education regarding partner violence over recent years. Furthermore, those who report struggling to provide counseling regarding partner violence felt a lack of knowledge about the subject and/or community resources and feelings of discomfort were the primary causes; a finding consistent with literature which indicates clergy often desire additional trainings on areas such as intimate partner violence (Grimm & Bassett, 2000; Weaver et al., 1997).

Limitations of the Current Study

Prior to suggesting areas of further exploration raised by this study, it is necessary to acknowledge some methodological limitations with the present study. Due to the paucity of research on the experiences of rabbis when dealing with issues of partner violence, one of the key challenges was obtaining a relevant, previously constructed, instrument. In order to conduct the proposed study the researchers designed their own survey using the existing body of literature on clergy and religious leader's experiences with partner violence issues to identify key domains of knowledge and relevant areas for inquiry.

The lack of diversity within our sample is also worth mentioning. In addition to a lack of ethnic diversity which may not be reflective of the diversity within the rabbinate of the United States, our sample failed to include any participants from the Conservative Judaism movement, which results in an incomplete picture of the various domains measured in this study given that as much as 30% of the Jewish community may identify

as Conservative (S.M. Stahl, personal communication, April 27, 2012). Furthermore, it is important to recognize that as many as 54% of Jewish marriages in the United States are interfaith relationships (Tal, 2008); thus, it is possible some of the prevalence information provided by the participants reflects violence on the behalf of non-Jewish partners or with non-Jewish victims, complicating the ability to provide accurate information on the state of intimate partner violence within the Jewish community. Lastly, the scope of this study prohibited exploration of the domestic violence in the LGBT community, thus there has been no advancement in the knowledge of rabbinical experiences in relation Jewish men and women in violent same-sex relationships.

Another potential limitation that needs to be taken into account is the sensitive nature of the topic survey which may bias the sample with participants more familiar or more comfortable with the topic. This self selection bias may be responsible for low response rates in certain areas of the study and unexpected results regarding rabbinical attitudes.

Finally, the fourth potential limitation is the use of an online survey, which has methodological challenges and implications for the generalizability of data. Despite the advantages of a web-based survey (e.g. ease of access to a large, national population of rabbis in a cost-effective manner and allowing respondents to complete survey at their leisure), it is possible not all rabbis in the population of interest may have email or online access. Therefore, some potential participants may not have received the email invitation nor had access to the survey (Reips, 2002; Ritter & Sue, 2007).

Clinical Implications

Working with victims. With small amounts of additional training, rabbis should be able to generalize the skills gained in Clinical Pastoral Education classes to working

with intimate partner violence. When female victims of partner violence enlist the help of formal services from a mental health professional, there is general agreement in the literature that the primary goal is to initially ensure the safety of the victim and her children as necessary (Elliott, Bjelajac, Fallot, Markoff, & Reed, 2005); a factor participants in this study already report considering when offering counseling. Once client safety has been determined, rabbis can offer counsel focusing on self care, shame, trust, and psychoeducation on the cycle of violence (Bryant-Davis, 2005; Tutty & Rothery, 2002).

Additionally, rabbis can make use of salient imagery within Jewish history, which is scattered with strong female role models with whom they can encourage violence survivors to identify and a rich history of overcoming oppression (Giller, 1990). Rabbis should also be encouraged to make use of "spirituality modified cognitive therapy," a therapeutic modality focused on the re-construction of traditional self-statements via identification of underlying fundamental beliefs which require separation from westernized values, verification that self statement is congruent with Jewish values, and rephrasing the statement to match both the survivor's worldview and that of Judaism (Hodge, 2008). Given the importance of ritual in Jewish tradition, incorporation of ritual in rabbinical counseling can bring a sense of closure and healing to Jewish survivors of partner violence. Rituals should start with a tradition that is familiar and comfortable and should include some of the following elements: singing and music, lighting candles, throwing bread crumbs into a moving body of water (*tashlich),* silent meditation, and immersion in ritual baths or water for renewal and healing (Gardsbane, 2002).

Lastly, rabbis can work to address cultural values preventing help seeking (e.g. *lashon hara*) by focusing on the most important tenet in Judaism: the sanctity of life. Jewish women in violent relationships should be educated on scripture which indicates that when failure to speak out against an individual results in harm to another or is necessary to save a life, the dilemmas regarding defamatory speech no longer apply (Russ et al., 1993). In addition, teachings dictate saving one's own life takes precedence over saving the lives of others, even justifying the use of homicidal force; therefore, it would reason that if homicide is justified to save one's life, speaking out against one's violent partner is certainly warranted (Russ et al., 1993). In essence, rabbis are respected religious leaders who can clarify inaccurate interpretations of Jewish religious teachings by helping to assert that the dignity and life of an individual is more important than the dominance of a violent spouse or concern for their honor (Farber, 2006).

Working with perpetrators. A fair number of rabbinical participants in this study have provided counseling to perpetrators of domestic violence, presumably with limited training on doing so given the lack of domestic violence centered training and topical foci endorsed by participants. Rabbis engaging in work with perpetrators may benefit from exposure to the current empirically supported practices for working with violent partners, currently in the form of Batterer Intervention Programs (BIP). Most common is the Duluth Model, a feminist psychoeducational program that believes partner violence stems from a male-centered ideology within society and the resulting explicit and implicit messages regarding power and control (Babcock et al., 2004). Rabbis working from the Duluth Model will prompt men to accept responsibility for their abuse, teach them ways to interrupt and avoid abuse, and change attitudes and beliefs about men

and women that tend to sustain abuse (Gondolf, 2001). Cognitive behavioral therapies are also common in working with perpetrators of partner violence, arguing that violence is a learned behavior that maintains as a coping mechanism due to its ability to reduce physical sensations associated with anger, effectively achieve goals (e.g. compliance of partners) and reduce interpersonal conflict and tension (Babcock et al., 2004). Cognitive behavioral BIPs hope to explore the functional aspects of violence while using skills training, including anger management work, to provide perpetrators with alternative behavior choices (Babcock et al., 2004). Although offender treatment programs have become more prevalent, rates of attrition and recidivism remain high; 40% to 60% and 20% to 30% respectively (Buttell & Pike, 2002; Chang & Saunders, 2002). An underlying factor to these findings is that the majority of intervention programs for IPV perpetrators are standardized and ignore cultural differences among clients (Buttell & Carney, 2006; Buttell & Pike, 2003; Gondolf, 2004).

Given the importance of accountability and repentance within the Jewish tradition, Jewish ethical writings are clear on the steps perpetrators must take to prove repentance and receive forgiveness from God (Kaufman, Lipshutz, & Setel, 2005). In the context of IPV: the perpetrator must first acknowledge and take responsibility for his harmful actions against his wife; confess a full account of his transgressions to another (preferably neutral) party; and lastly take whatever actions are required to make amends to his victim (Kaufman, 2004). This act of repentance and contrition, known as *teshuvah,* should be familiar for Jewish perpetrators as *teshuvah* is common in Jewish practice and ritual, with holidays such as *Yom Kippur* based entirely around the idea (Myers, 2009). Actions required to make amends may include financial retributions, involvement in

rehabilitation programs, compliance with legal consequences, accepting the victim's account of his violent behavior, and provision of evidence he will not become violent again (Kaufman et al., 2005). Similar to non-violent transgressions, Jewish tradition does not require a victim's forgiveness for the perpetrator to be forgiven by God.

Referral considerations. Rabbis should be aware of and familiar with resources both nationally and within their community which provides assistance to Jewish survivors of IPV. Jewish Women International (JWI) represents one such national organization which offers information and services to survivors of IPV including, but not limited to, legal resources for orders of protections and divorce (*get*), and a regularly updated list of national and topical resources (Jewish Women International, 2009). Also included in JWI's services are trainings for service providers and clergy who work with women in violent partnerships. Another Jewish-focused agency is Shalom Bayit, a culturally-based organization which provides education, prevention services, counseling, and advocacy for Jewish adolescents and adults (Shalom Bayit, 2005). Shalom Bayit uses a peer counseling model to explore such issues as power and control in relationships, forms of abuse, decision-making, safety planning, living a violence-free life, and the ways in which Judaism can support the recovery process (Shalom Bayit, 2005). Additional national resources include hotlines (i.e. National Domestic Violence Hotline, National Sexual Assault Hotline), as well as training and resource organizations (i.e. The Shalom Task Force, Jsafe, FaithTrust Institute, and The Awareness Center/The Jewish Coalition Against Sexual Abuse/Assault).

Suggestions of Future Research Directions

Given the exploratory nature of this study, there is clearly a need for further research on the topic of intimate partner violence in the Jewish community, including the experience of rabbis. Based on the results of this study, additional administrations of the survey would be behooved to take care to seek a larger and more diverse sample, specifically considering steps to secure Conservative participants. This would include examination of violence amongst LGBT affiliated Jewish couples. Doing so will help further clarify the landscape of the current Jewish experience with intimate partner violence. Given the plethora of data collected, future studies may wish to look at the intersection of various cultural variables in a number of additional domains, such as religiosity and service provision or divorce recommendation rate. Future studies will also benefit from including additional and increasingly complex measures of attitudes toward partner violence.

Additional studies should also be conducted looking at additional aspects of rabbinical training, perhaps involving the rabbinical schools and Jewish domestic violence organizations to help better understand the content and intentionality behind the current rabbinical training landscape. Increasing information regarding rabbinical experiences with intimate partner violence should be utilized for the creation, testing, and implementation of additional training materials for rabbis; including examination of the most effective methods for implementation of these trainings. It is suggested that trainings also address the roles of rabbis as recommenders of divorce and provide structure and education around how this may be done most effectively for the Jewish

community. This may involve studies examining the generalizability of current intimate partner violence assessment formats and methods.

The field would greatly benefit from connecting the current study with the clerical literature in general through empirical data. Perhaps the current survey can be generalized to apply to multiple religious leaders' experiences, allowing for comparisons amongst religious communities. It is possible that rabbis may be more or less active in addressing partner violence or hold different attitudes about gender roles and violence than their Christian or Muslim counterparts; thus comparison studies are necessary. Lastly, additional studies will be served to include the voices of the members of the Jewish community outside of rabbis, such as congregants to help understand the communal experience around intimate partner violence. It may be beneficial to conduct a study comparing rabbinical reports of help-seeking with perspectives of Jewish community members. Such a study should include a comparison of reported frequency of help-seeking, as well as cultural barriers that may align with those outlined in the introduction of this study.

Conclusion

This study represents the first successful attempt to create a national picture of the experience of rabbis related to intimate partner violence in over 10 years. While it appears rabbinical attitudes toward violence and gender roles in relationships are becoming increasingly sensitive to the problems within violent relationships, prevention efforts and counseling services appear to be slower in their progress. Rabbis also indicate increased levels and quality of trainings from previous studies; however, there remains a desire for increased training opportunities that include a developmental approach to

knowledge; hopefully arming rabbis with increasing levels of knowledge and support in dealing with partner violence issues as they progress in their career. The role of rabbis as leaders within the Jewish community remains clear in this study, and as such, they should be mobilized as agents of change regarding intimate partner violence.

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APPENDIX A

Review of the Literature

Introduction

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Adelman, M. (2000).	1. To explore the intersection between IPV and divorce.	49 battered Israeli women who (mostly) had not entered a shelter or contacted police. Undisclosed number of paid staff and volunteers from partner violence organizations, activists, mental health professionals, religious leaders, members of the legal system, and scholars in the field.	Unstructured interview Review of legal resources and Israeli newspapers from 1993-1999 for historical data	Ethnographic qualitative study	• Discusses the multiple ways battered women may attempt to leave violent situations. • Reports 1 in 7 Israeli women are victims of IPV. • Discusses historical, political, and sociocultural barriers to providing support for victims of IPV. • Discusses Israeli divorce law and the steadily rising rates of divorce. • Discusses cultural barriers amongst Jews to obtaining divorces in Israel. • 39% of women who had stayed in a shelter reported continued beating once leaving shelter from husband. • Describes “divorce denial", forced reconciliation, control of sexuality and reproduction, threat of unwanted divorce, and blackmail/extortion as extensions of IPV.
Altfeld, S.	l. To synthesize	n/a	n/a	Literature review	• First literature addressing IPV

(2005).	literature that has explored violence in Jewish families.				in the Jewish community appears in 1980. • This research led to the establishment of the first Jewish IPV program by Jewish Family and Children Services of Los Angeles. • At time of the study, 24 states and 80 programs in the United States addressed Jewish IPV. • Studies have been conducted in cities/communities to assess the magnitude of IPV in the Jewish community. However, provides several methodological critiques of these studies. • Research at the First International Conference on Domestic Abuse in the Jewish Community found 57.8% of community member, 58.3% of women leaders, and 86.9% of rabbis felt IPV was an issue within the Jewish community but identified this as a skewed and biased sample. • Described prevalence facts regarding Jewish IPV that are cited in several sources but have not been sufficiently

					demonstrated within the research (i.e. Jewish women stay longer in violence relationships and the rates of violence are equal to national levels).
Anson, O., & Sagy, S. (1995).	1. To determine the degree of comparison that can be made between North American and Israeli IPV research.	161 women who had given birth recently at large medical hospital, 29 of which report one IPV incident during the study year.	35 minute interviews which examined the following variables: • Sociodemographic information; • Attitudes towards marital power and violence (17 Likert scale items); • Power relations in the marital dyad (6 questions); • Conflict solving (Conflict Tactics Scale); emotional dependency (6	Mixed methods	• In mid 80's 15.8% of couples in the US reported IPV. • Reiterates idea that the belief "Jews don't beat their wives" is wide spread in the community. • 29 study participants of 161 experience at least one IPV incident in the past year. • None report just one incident • Theories regarding helplessness, isolation or traditional values did not hold true with sample. • IPV victim's attitudes allowed for help-seeking behaviors. • Eight variable measures explained 56% of the variance between IPV victims and non-victims: violent act by the women as a conflict resolution tactic; seeing self as nervous rather than calm; believing family should resolve familial problems; avoiding sex to

			questions); and • Self image and perception of the spouse (twelve differentials using 5-point scale).		resolve conflict; seeing husband and more dominant than self; intercourse not being a mutual decision; and keeping some income to oneself). • IPV was found to be connected to financial hardship, tolerance of male control, emotional dependence on husband, and less egalitarian relationships. • IPV victims were more economically, sexually, and socially dominated by their husbands, which supports "battered women's syndrome" theory. • IPV victims viewed violence in relations as more common, justified it with positive emotions, and thought women deserve IPV.
Copel, L. (2008).	1. To examine the experience of women in abusive relationships who obtained spiritual guidance from clergy in efforts to decrease their distress.	A convenience sample of 16 volunteer women self identified as experiencing IPV and spiritual distress and who sought counsel from	Interview using two open ended questions: Will you please describe the spiritual distress that you experienced?; and Will you please	Phenomenological qualitative study	• Previous literature indicates low help seeking from clergy amongst IPV victims. • Four major themes emerged between participant experiences: spiritual suffering, devaluation, a serious sense of loss, and powerlessness. • Results seem to support current

		clergy.	describe your experience of seeking spiritual assistance from your religious leaders?		acceptance of IPV in patriarchal cultures. • Participants felt unable to draw upon previous spiritual strength or to obtain help from clergy, which compounded sense of hopelessness. • All participants left their clergy feeling as if she must endure the abuse. • All clergy approached by participants were male.
Cwik, M. (1996).	1. Explore whether or not Jewish IPV victims approach rabbis with their problem. 2. If so, explore the rabbinical responses.	127 rabbis (some from phone some from internet)- 38 orthodox, 47 conservative, 42 reform	69 question questionnaire which looked at the following variables: • Demographics and personal background (8 questions); • Rabbis understanding, awareness of, and personal experiences with IPV (17 questions); • Advice and reactions given	Descriptive study	• All three denominations denied IPV in congregation at rate comparable to society at large. • Orthodox rabbis were more concerned with concept of *Shalom Bayit*. • Decrease from previous studies in rates of IPV denial. • All denominations indicated belief in their duty to intervene on behalf of IPV victims. • Orthodox rabbis more likely to contact husband directly as means of intervention. • Orthodox Rabbis were less likely to refer congregants to counseling professionals. • No difference amongst

			to victims (17 questions); • Patriarchal attitudes on IPV (11questions); • Difficulties in counseling IPV victims (10 questions); and • Resources that would be helpful for rabbis (6 questions)		denominations in suggesting divorce or separation. • Orthodox rabbis held greater patriarchal attitudes, however, low scores in general across all 3 denominations. • All 3 denominations endorsed seeking protective measures for IPV victims, with Reform rabbis most apt to involve the police. • Orthodox most likely to recommend staying in the home. • violence within Jewish couples begins within the courtship phase of the relationship when the husband may engage in intense arguments and use a raised voice, which later may escalate to sexual disinterest • Participants report seeing 400 IPV victims in their time as rabbis, with half from each denomination counseling an IPV victim within the study year. • Most rabbis did not feel they had difficulties with dealing with IPV.

Ellison, C., Bartkowski, J., & Anderson, K. (1999).	1. Examines the religious antecedents of IPV in couples within the United States.	4,662 respondents (2,420 women and 2,242 men) who were married or cohabitating.	National Survey of Families and Households self-administered survey (a cross-sectional national probability sample of 13,017 men and women) and interview with researchers. Variables explored along a dichotomous dependent variable (Perpetration of IPV) include: 1. Denominational affiliation and homogamy; 2. Religious attendance and attendance (dis)similarity; and 3. Theological conservatism and theological (dis)similarity	5x4(5)x3(5) within subjects design	• No evidence that men or women from Conservative Protestant denominations or those who hold Conservative views of the Bible are likely to perpetrate IPV. • Frequency of religious service attendance bears an inverse relationship to the likelihood of engaging in IPV. • The protective effects of religious attendance are more evident for women. • Partners sharing identical denominational affiliation is associated with lower risk of IPV for men and women. • Abuse by men is more likely in couples where the men attends services more often and holds more conservative beliefs. • Occasional church attendance is not related to likelihood of IPV. • Denomination hemogamy is inversely associated with violence by women. • IPV risk is not associated with inter-faith couples more than same-faith couples. • Age decreases risk for IPV.

			Controlled for age, education, income, employment status, marital status, and race/ethnicity.		• African-American men are more likely than Caucasian men to engage in IPV. • Couples with a more educated male partner increases risk of male violence and reduces risk of female violence. • No association between cohabitation or income and IPV. • Unemployment is a strong predictor of abuse by men, but not women.
Farber, R. (2006).	1. Explore changes in perspectives of IPV within ultra-Orthodox Jewish communities using programs in these communities.	Unknown number of professional involved in IPV programs.	Open ended and non scripted interviews in person and via phone Review newspaper/magazine articles and organizational literature to explore change in social attitudes	Descriptive study	• Literature review includes discussion of the cultural values within Jewish communities which related to IPV. • Abuse was first discussed at Jewish conference in the 1970's. • In New York, first battered women's shelter was developed in 1980. • In 1988 the Steinberg case brought IPV in Jewish homes to the media forefront and served as a watershed event. • In 1991 there appeared to be no organizations serving Orthodox or ultra-Orthodox women and

					many shelters were unable to keep up with strict dietary laws of kashrut. • Article provides information on the development of organizations since this time which have begun to address IPV in the ultra-Orthodox community: Shalom Task Force (1992), Project Eden (2002), and JSafe (2005). • Established agencies have also begun to demonstrate increased presence in Orthodox communities. • Many of these conduct training seminars as well as provide victim services.
Freedman, M. B. (2005).	1. Compare Orthodox and non-Orthodox women from this sample on the following research questions: • How many women reported being a victim of	1534 women (380 orthodox, 1068 non orthodox)	Survey consisting of the Conflict Tactics Scale and the Intimate Partner Violence Study	Secondary data analysis in form of cross-sectional study design	• 25.4% of women reported being physically abused at least once (16% more than once) . • 66% of physical and verbal abuse occur mainly to women who have college degrees and almost 4/5 of those women who work outside the home (this is different from the findings of the studies on non-Jewish population who show higher rates of abuse among less

	IPV; • Are there certain demographic characteristics associated with reporting of IPV; • To whom do Jewish women report their IPV; • How did others respond when told by the abused about IPV; • What are the reasons for not disclosing, other than this survey, by women who have self-reported IPV; and • How aware are women of IPV.				educated women and those in lower income groups). • Non-Orthodox Jewish women (17.1%) report significantly more physical abuse and verbal abuse than Orthodox women (11.6%). • Orthodox women report their abuse to a rabbi more than non-Orthodox women. • 50% of people told about abuse were supportive. • The most frequent (>40%) reasons for non-reporting was shame. • 23% of non-Orthodox women report having no one to tell about abuse. • Most (73%) reported no awareness of an IPV organization (Project Chana).
Gardsbane,	1. To assist	n/a	n/a	Resource manual	• No statistically valid research

D. (2002).	treatment providers in working with IPV within the Jewish community.			for treatment providers	has yet to be conducted nationally in the Jewish community to look at prevalence. • Historically rabbi response to IPV has been in one of five veins: acceptance; denial; apologetics; rejection; evasiveness • Despite belief that IPV isn't in Jewish communities, centuries old court rulings prove otherwise. • Congregational and community responses include: discouraging disclosure for fear of polarizing community; asking to leave congregation (places her in danger); ignoring lack of resources and connections; allow abuser to discredit victim; give committee, board member positions and honors *(aliyot)* to abuser; lack of community education; no training for professionals; encourages participation in couples counseling. • Transgenerational trauma has instilled a fear in Jews to not

					look bad to others for fear of repercussions; this has been dealt with by flatly denying problems such as IPV, addiction and incest exist and idealize homes as safe havens from a hostile Anti-Semitic world. • Shelters do not accommodate or understand the needs of Jewish women. • In 2002 over 60 programs in US designed to meet needs of Jewish IPV victims- most operate out of local JCFS/JFS, some through Jewish federations, and some independent or associated with secular shelters. • Discusses unique issues for GLBT victims. • Discusses the difficulties in obtaining divorces from religious courts. • Discusses ideas for how to raise awareness within the community (e.g. providing easily accessible info in synagogue newsletters, women's restrooms, mikvah, and other public areas).

					• Provides information on creating new rituals, incorporating prayer, sermons, and torah study. • Concludes with providing national, organizational, and informational resources.
Giller, B. (1990).	1. To describe current statistics and culture regarding IPV in the Jewish Community.	n/a	n/a	Literature review	• The conflicts faced by Jewish families in American societies: idealized American family, discrepancy between Jewish values and Jewish reality, how Jews want non Jews to see them. • Cultural values complicate the landscape of Jewish IPV: shalom bayit, sanctity of marriage, wifely duties, gender roles and stereotypes, shame, and use of outside authorities. • Jewish families report levels of IPV comparable with general population. • No difference in violence rates between denominations of Judaism. • Explores effect of intergenerational trauma. • Suggests specific treatment recommendations for Jewish

					families struggling with IPV (e.g. safety planning, women's groups, and use of strong female role models in Judaism).
Gillum, T. L., Sullivan, C. M., & Bybee, D. I. (2006).	1. To examine the influence of spirituality and religious involvement on the psychological wellbeing of IPV survivors.	151 women with violence occurring within the past 4 months and had at least 1 child between ages 5-12 living with them.	Interview consisting of the following variables (and measures): • Physical Abuse Experienced (Conflict Tactics Scale-modified); • Psychological Abuse Experienced (Index of Psychological Abuse-shortened); • Depression (Center for Epidemiological Studies Depression Measure); • Quality of Life (Scale of Well-Being);	Descriptive study	• Discusses the role religion plays in coping and healing. • Positive correlation between physical IPV and depression but negatively correlated with social support. • Psychological IPV was correlated with all outcomes. • Higher numbers of children relates to higher self esteem and lower depression. • Institutional religious involvement appears to predict both depression and quality of life. • Women of color report a relationship between higher religious involvement and higher social support. • Religious involvement does not predict self esteem. • 97% report their spirituality was a source of strength for them. • Discusses cautions when interpreting the data (i.e. some measures not as sound as they

			• Social Support (Adult Social Support Questionnaire); • Self Esteem (Rosenberg Self-Esteem Inventory); • Spirituality or God as a Source of Strength (single item); and • Involvement with Organized Religion (two items)		appear).
Horsburgh, B. (1995).	1. Summarize the literature on Jewish IPV with anecdotal illustrations. 2. Examine blatant and subtle forms of intra group oppression that foster mistreatment of women.	n/a	n/a	Literature review	• Discusses stereotypes of Jewish women and relationships. • Reviews the loss of cultural identity women dealing with IPV feel in the Jewish community, including historical examinations. • Illustrates torah and Talmudic references to IPV • Provides in depth analysis of Jewish law and IPV, divorce included, and also discusses how commentary on

					law/religious texts has influenced current opinion of IPV. • Provides examples of prayers to normalize/heal/include IPV in religious services.
Kelly, J., & Johnson, M. (2008).	1. Discuss the need to distinguish between types of IPV. 2. Describe reasons for the debate regarding gender and IPV.	n/a	n/a	Literature review	• Distinguishing among types of IPV allows development of screening instruments that are more accurate in assessing IPV • The primary reason for the debate in the field is the fear of misapplication of typologies. • Authors propose the following terms and provide information on the unique dynamics and etiology of each: Coercive Controlling Violence (pattern of emotionally abusive intimidation, coercion, and control coupled with physical violence against partners); Violent Resistance (violent reactions to their partners who have a pattern of Coercive Controlling Violence);Situational Couple Violence (type of partner violence that does not have its basis in the dynamic of power

					and control); and Separation-Instigated Violence (violence that first occurs in the relationship at separation). The original and revised • Some forms of IPV show female and males with equal offender rates. • Coercive Controlling Violence is seen with most frequency in women's shelters, court-mandated treatment programs, police reports, and emergency rooms. • Surveys on large levels that target national or community level samples is most apt to catch Situational Couple Violence; which is more common that Coercive Controlling Violence. • When researchers claim that IPV occurs equally across genders they are using methods that catch Situational Couple Violence, not Coercive Controlling Violence. • Discusses the effects of IPV on children's adjustment and how this impacts custody disputes.

					• Authors suggest tailoring batterer intervention programs to the type of IPV engaged in by participants. • Authors suggest how to utilize distinctions between types of violence in working with divorce mediation.
Levitt, H. M. & Ware, K. N. (2006).	1. Aims to understand how clergy views IPV and IPV related divorce.	22 clergy from six faith groups in Memphis (i.e. Christian conservative, Christian mainline, Christian nontraditional, Christian Orthodox, Judaism, Islamic).	Open ended (1-3 hour) interviews over several months.	Qualitative study utilizing grounded theory analysis Reliability assessed through four credibility checks	• Religious leaders expressed concern about IPV and wanted it to end, but had difficulty being supportive of divorce/separation, especially when other methods of conflict resolution had not been explored. • Many clergy placed responsibility for IPV to the victims. • Some suggested abusive relationships were sought out due to childhood abuse and resulting low self esteem. • Minority of leaders viewed divorce as a viable response. • For some leaders divorce was only considered appropriate in light of infidelity or desertion. • Concern over divorce's effects on children was most

					commonly cited hesitation. • Hesitancy toward divorce was due to interest in maintaining intact marriages NOT that abuse was wrong. • Acknowledges trouble with generalizability of results.
Rennison, C. M. (2001).	1. To review statistical data related to IPV collected between 1993 and 1999.	n/a	This report presents data from the BJS National Crime Victimization Survey, excluding homicide data obtained from the FBI's Uniform Crime Reporting Program.	Literature review	• 790,000 IPV incidents document in 1999. • 85% of IPV in 1999 had female victims. • Women 16-24 were most common IPV victims. • IPV decreased 49% over 6 years (1993-1999) • Other than ages 20-24, no racial differences between IPV

					victims. For 20-24 year old women, African American women were more likely to be IPV victims. • Separated women were victimized more than married, divorced, widowed, or single women.
Ringel, S. & Bina, R., (2007).	1. To provide statistical information on IPV in the Ultra-Orthodox community. 2. To understand the causes of IPV in the Orthodox community. 3. To examine hindrances to help seeking. 4. Seek to understand the role of rabbi's education and prevention.	8 orthodox IPV survivors and 11 community leaders considered experts in orthodoxy	Open ended interviews in homes or synagogues lasting 1-2 hours.	Qualitative study utilizing constant comparison method of modified grounded theory Reliability assessed through biweekly meetings between investigators	• Respondents reported that the reasons for IPV included marrying at a young age, lack of contact between genders, and personality traits. • Religious beliefs and social values (e.g. fear of divorce and stigma, "evil tongue") are barriers for seeking help. • Victims and clergy view rabbinical roles regarding IPV very differently. • In general survivors felt rabbis could not help them, were not sympathetic, and were not trained to handle IPV. • Survivors felt rabbis had negative view of non-orthodox agencies. • Rabbis felt confident dealing with IPV or referring to counseling when they weren't.

Rubin, C. J. (2007).	1. Develop a deeper understanding of the role of Orthodox Jewish ritual as and beliefs as well as other relationship factors that affect and/or influence the attitudes and behaviors of Orthodox Jewish women in violent relationships. This is done by examining the following research questions: • How Jewish orthodox cultural rituals and beliefs such as shalom bayit, shiddach, the possibility of obtaining a get impact the attitudes and	10 Jewish Orthodox women at least 21 years of age.	Semi-structured interview including the Conflict Tactic Scale 2.	Qualitative study utilizing grounded theory Reliability assessed through peer debriefing support group	• Factors of interpersonal dynamics, managing the violence, defining an authentic self, family history, and religious/cultural issues influenced participants' experiences of conflict and aggression in their relationship. • Participants have more experiences with psychological aggression than physical assault. • Family experiences that impacted IPV experiences include Holocaust survivors in family, loss of parent, and parental levels of aggression. • Nine participants expressed a desire to work out marriage difficulties. • Data suggests maximizing negotiation skills and learning ways to communicate anger/differences would improve IPV rates. • All participants identified a struggle between balancing self-care and family responsibilities. • Found shalom bayit to be prevalent in several of the

	beliefs of abused Jewish orthodox women; • How Jewish orthodox women view the dynamic of abuse in relation to their partner; and • How factors such as love and attachment, economic issues, welfare for children and fear impact the experience of abused Jewish orthodox women.				stories told by women. • Several women reported the rabbi as unhelpful and uneducated • Half felt living as divorced, single woman in the Orthodox community would be intolerable. • All of the participants got strength from their orthodox cultural values, but could see how they could be oppressive.
Sheskin, I. M & Dashefsky, A. (2011).	1. To provide national level empirical information about Jews in North	n/a	Populations statistics are an aggregate of Scientific Estimates, United	Literature review	• Includes historical Jewish population data . • Presents vignettes of recently completed Jewish community

	America.		States Census Data, Informant Estimates, and Internet Estimates.		studies in the Berkshires, Massachusetts (2008), Broward County, Florida (2008), Cincinnati, Ohio (2008), and Middlesex County, New Jersey (2008) as well as vignettes of older studies in Hartford, Connecticut (2000), Phoenix, Arizona (2002), and Pittsburgh, Pennsylvania (2002). • Shows comparisons among Jewish communities on four different variables: the percent of Jews who are age 65 and over; the number of adult children from Jewish households who live in their parent's towns while owning their own homes; connection to Israel; and the number of Holocaust survivors and children of survivors. • Presents maps of the Jewish communities of Florida and New Jersey
Sisselman, A. (2009).	1. To expand the literature base on the impact of religion on one's beliefs about domestic	Convenience sample of participants recruited from the agency, Advanced	Cross Sectional Survey Dependent variable: Opinion regarding	Exploratory study	• Cautions against including women under 18 due to higher rates of IPV which may skew statistics. • Jewish participants were more

	violence by exploring the opinions of Jews and rabbis regarding IPV, as well as how such opinions compare to those of other religious groups/clergy.	Center for Psychotherapy in Forest Hills, NY located within New York City. Exclusion criteria included: those under age 18, those who have severe mental illness, and non-Jewish clergy.	domestic violence. Independent variable: Religion, or religious denomination/orientation, and religiosity. Potential moderating variables: demographic variables (i.e., gender, age, income, profession, employment status, level of education, marital status); religious involvement; IPV history; and knowledge of other IPV victims.		likely to minimize IPV and believe women caused IPV. Also more likely to know IPV resources in community. • Jewish participants were only group to endorse the lack of IPV in their community (5%). • IPV amongst Jewish participants matched national rates. • 84% of Jewish participants did not consider a man slapping his wife as IPV. • Rabbis were more likely, compared to other clergy: to endorse views of boys being socialized toward violence; believe violent people aren't likely to change; and be familiar with IPV resources while having no personal IPV experiences.
Warshaw, C., Ganley, A., Salber, P., Fund, F., &	1. To assist health care providers in working with victims and	n/a	n/a	Resource manual for treatment providers	• Describes basic spiritual, clinical, and IPV terms. • Provides literature review regarding the following aspects

Violence, P. (1995).	perpetrators of IPV.				of IPV: learned behavior, gender, culture, illness-based violence, the role of substances, emotional components, and victim blaming. • Discussion of identification, assessment and intervention with IPV victims, including how to incorporate spirituality and utilize positive religious coping. • Suggests the use of metaphor, imagery, relaxation, stories and parables, ritual and ceremony when working with victims of IPV. • Focuses on health care responses to IPV perpetrators and ensuring victim safety. • Discusses collaboration between clergy and therapists and models for effectiveness, including common obstacles in collaborations.

Intimate Partner Violence in the Jewish Community

I. Overview of Judaism

Author/Year	**Research Questions/Objectives**	**Sample**	**Variables/ Instrumentation**	**Research Approach/Design**	**Major Findings**
De Lange, N. R. (2000).	1. To provide a foundation of information on contemporary Judaism by focusing on Jewish rituals and practice, demographics, Jewish books, home and synagogue activities, and philosophy.	n/a	n/a	Literature review	• Jewish communities historically have been culturally, religiously, socially, and economically self-sufficient. • Rabbis traditionally serve as guardians of religious norms and traditions and severed as moral compass for individuals and community alike. • Expulsion from Spain began the segregation of Jewish communities by ethnic (e.g. Ashkenazi and Sephardic) distinctions. • Mass migrations since 1880 and the Holocaust have erased much of traditional Judaism, thus, those who which to follow traditional law again were required to create and support self-sufficient communities (i.e. Orthodoxy). • The most important institution in traditional Judaism is the yeshiva, which is the place to study the Talmud and Torah.

					• Reform Judaism arose out of recognition of social and political disadvantages of Jews and inspired by Black Panther movement of the 70's and increased interactions between Christians and Jews. • Conservative Judaism was born over dissent about how to "reform" traditional Judaism. • Orthodox Jews today believe the Torah and Talmud are divinely inspired and immutable. • Conservative Judaism is the "middle of the road." • Reform Judaism reflects the most liberal of the three denominations. • Reconstructionism combines the Conservative emphasis on the peoples of Israel with the rejection of the supernatural element in Jewish theology. • Despite the compromise between tradition and modernity, Reconstructionism has failed to establish itself as a major strand in contemporary Judaism.

					• Despite differences and often hostile rhetoric, all three denominations share central presuppositions (e.g. belief in single and benevolent God, authority of scripture, importance of synagogues and the rabbinate). • Purports Jewish radicalism (e.g. Jewish atheism, Secular Jews) has been present throughout Jewish history and is crucial in the growth of the traditions of Judaism.
Kertzer, M. N., & Hoffman, L. A. (1996).	1. To educate an audience who knows little about Judaism.	n/a	n/a	Book chapters	• Until the 19th century, Jews distinguished between themselves based on ethnic differences (e.g. Ashkenazi and Sephardic). • Orthodox Judaism is the most resistant sect to change, believing the Torah was given to Moses and should remain unchanged. • Modern Orthodoxy attempts to merge ancient traditions with cotemporary points of view. • When these modern and tradition conflict, Orthodox Jews favor tradition.

					• Reform Jews view Judaism as an ever-changing religion, and while valuing tradition, they believe in individual conscience and choice. • Reform Jews emphasize education. • Reform Jews were the first denomination to declare women to men. • Reform Judaism is the fastest growing Jewish denomination. • Conservative Judaism originated with Jewish immigrants who wanted to be modern while connecting with Jewish traditions but felt uncomfortable in Reform temples. • Modern Conservative Judaism falls between Reform and Orthodox on spectrums of philosophy and theology. • Reconstructionist Judaism originated in the 10th century with Rabbi Kaplan who believed Judaism consisted of God, Torah and the Jewish people. • Reconstructionist Judaism is

					traditional in ritual but nontraditional in its views, including the emphasis on decision making with a community rather than individual perspective.

Comparisons with General Population of Intimate Partner Violence Survivors

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Buchbinder, E., & Eisikovits, Z. (2003).	1. To explore the role of shame in IPV victim's relational experiences.	20 Jewish Israeli battered women selected through purposive sampling.	2 hour in-depth interviews occurring over 3 sessions.	Qualitative study using cross case content analysis	• Shame was endorsed as a theme throughout the participant's lives and is present in both family of origin and romantic relationships. • Shame serves as an obstacle in leaving a violent relationship. • IPV victims tend to come from families of origin which emphasize traditional patriarchal family values and male dominance.
Clorfene-Casten, L. (1993).	1. To provide information on SHALVA, a Chicago area Jewish IPV organization.	n/a	n/a	Interview	• Safe Homes Advice and Legal Aid for Victims of Abuse (SHALVA) is the only Chicago area Jewish organization specializing in IPV victims. • SHALVA's first meeting had 300 Jews of all levels of observance in attendance. • Educates over 10,000 households a year and serves 140 families directly. • Provides training for rabbis and professional, including therapists and social workers. • Conducts workshops in high

					school, Jewish day schools and women's/men's clubs. • Discusses cultural values that impact the myth that Jewish IPV is non-existent. • 205% of Jewish families experience IPV. • Jewish women stay in relationships 7-13 years while women in general stay 3-5. • SHALVA aims to help women who seek their assistance become as independent as possible. • Also provides brief information on the origin of the Shalom Bayit organization.

Unique Cultural Concerns as Barriers to Help-Seeking

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Ansara, D., & Hindin, M. (2010).	1. To examine the relationship between various patterns of IPV and Formal/informal help-seeking. .	696 Canadian women and 471 Canadian men who reported physical or sexual violence in a committed/married relationship.	Data as obtained from Canada's 2004 General Social Survey (Geographically stratified cross-sectional telephone survey conducted via computer assisted telephone inter-viewing).	Descriptive study using latent class analysis (similar to factor analysis)	• For women, three violence classes were found: The ''Physical aggression'' (least chronic and severe with no acts of coercive control); the ''Severe violence, control, verbal abuse'' (most chronic and severe with acts of control, intimidation, and threats of violence); and ''Physical aggression, control, verbal abuse'' (least severe acts of physical aggression as well as acts of control and verbal abuse). • Men endorsed the severe and moderate classes of violence. • Men and women experienced the ''Physical aggression'' classes equally. • Men and women both sought help most frequently from formal sources of help-provision. • Women also utilize large amounts of informal support services.

					• As violence severity increased, the use of formal sources of support became more important. • Women who suffered the sever form of violence appear to make use of shelters and crisis centers in large numbers.
Gordon, J. S. (1996).	1. To examine the help-seeking of IPV victims, specifically which services are utilized, with what frequency help-seeking occurs, and how helpful these services are perceived to be.	n/a	n/a	Literature review	• IPV victims endorse contacting the following services most frequently: police, social service agencies, clergy, crisis lines, physicians, psychotherapists, women's groups, and lawyers; however these are not always seen as useful. • Which services are contacts depends on the type of IPV experienced with crisis lines, women's groups, social workers, psychotherapists, and physicians being rated most helpful for all forms of violence and police officers, lawyers, and clergy being seen as ineffective in most situations. • The familiarity of clergy and promise of confidentiality leads many IPV victims to turn to them.
Postmus, J.,	1. To explore IPV	Convenience	Interview	Exploratory study	• Participants report high levels

Severson, M., Berry, M., & Jeong Ah, Y. (2009).	victims experiences and their perceptions/use of services.	and snowball sampling recruited 423 women, including 157incarcerated women, 157 women living and receiving IPV services with one community, and 109 women who have not sought help for IPV within one year.	consisting of a combination of existing and modified standardized instruments including: Childhood Maltreatment Interview Schedule, Abusive Behavior Inventory, and the Sexual Experiences Survey.		of abuse throughout their lives. • Almost all of the women report physical IPV (91.5%). • 67% of the sample report having been raped. • More than half the women report childhood maltreatment, but this is the least reported form of victimization. • More than 37% of participants report experiencing physical child abuse, sexual child abuse, physical IPV, and rape. • Racially, Caucasian participants report more physical IPV, followed by African American participants with Latino participants endorsing least amounts of violence. • Childhood sexual abuse, IPV, and rape are correlated with receiving welfare. • Incarcerated women report highest levels of childhood sexual abuse and adult rape. • Women from the domestic violence/sexual assault agencies report highest rates of physical IPV. • There are no significant

					differences between demographic groups in the incidence of childhood physical abuse. • Education is not related amongst the participants to victimization. • Material support (i.e. day care, housing, education, food bank, and job training) was the least provided but most helpful service • Welfare benefits, food banks, and religious or spiritual counseling were the most often used services and were all rated as helpful. • A desire for solving one's own problems (82%) and a belief the problem would resolve itself (70%) were top barriers to help seeking.

Unique Cultural Concerns as Barriers to Help-Seeking

I. Jewish Law

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Enger, C., Gardsbane, D., Zimberoff, A., & Brown, L. (2005).	1. To provide a sample of the presentations from the First International Conference on Domestic Abuse in the Jewish Community which aimed to begin building a global Jewish movement against domestic violence.	n/a	n/a	Presentations	• Conference presentations focused on providing background information and illuminating the importance of the issues of IPV, address healing on individual and communal levels, review programs and practices currently within the community, and discuss implications for future work and research in this area.
Palant, E. (2004).	1. To describe Bat-Melech, a shelter for Jewish women, and compare with traditional women's shelters. 2. To briefly outline the unique experiences of Jewish IPV	n/a	n/a	Descriptive study	• Bat-Melech is the only Jewish shelter in Israel. There are 13 other shelters. • Bat-Melech provides safety, professional counseling, and legal support. • How Bat-Melech is different from traditional shelters: keeps laws of kashrut; observes Shabbat; observes Jewish holidays; staff reflects various

	victims when in shelters.				Jewish denominations; coordinates treatment with Rabbis; provides counsel on whether to choose a legal or religious frame for divorce; tends to have women with larger numbers of children (3x average at other shelters). • Reviews historical teachings regarding IPV. • Two particularly "religious" manifestations of abuse in the shelter: religious observance abuse (e.g. forced to transgress religious commandments, using religious ceremonies to control/humiliate) and how long women wait to seek help from a shelter. • Religious women tend to remain in violent relationships longer and struggle with more severe forms of violence before seeking help. • Women who seek shelter may lose family support for "airing dirty laundry." • In more than 80% of cases leaving the abusive relationship was prompted by concern of the

					impact of IPV on someone else, usually children. • 75% of the women who leave Bat Melech do not return to violent partners- more than 3x the number of other Israeli shelters.
Russ, I., Weber, S., & Ledley, E. (1993).	1. To help Jewish institutions with the process of recognizing child abuse and domestic violence. 2. To help in developing a response that is legally and ethically sound while supportive of distressed families.	n/a	n/a	Resource manual for treatment providers.	• Reviews the current state of domestic violence and child abuse in the Jewish community. • Reviews reporting laws for child abuse in California, including distinctions between individual and institutional responsibility. • Reviews the process of making a report and anticipated outcomes of such reports. • Discusses available Jewish and secular resources.

Unique Cultural Concerns as Barriers to Help-Seeking

I. Jewish Values

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Frazier, K., West-Olatunji, C., St. Juste, S., & Goodman, R. (2009).	1. To begin using transgenerational trauma as a way to conceptualize and treat childhood sexual abuse	d	n/a	Literature review	• Transgenerational trauma is defined as "that has been passed down from one generation to another, either directly or indirectly". • Approximately 48% of the CSA victims meet criteria for PTSD; with primary symptoms being avoidance behaviors and developmental delays. • CSA can have detrimental effects on identity development, • Transgenerational trauma is excluded in DSM definitions of PTSD. • Involving supportive care-givers is effective in treatment and can help diminish guilt/blame of care-giver as well. • Provides a case illustration of how to incorporate transgenerational trauma work and CSA work.
Grodner, E., & Sweifach,	1. To highlight the value-	A 27-year-old ultra-Orthodox	n/a	Case study	• Many Orthodox marriages begin with a short courtship and

J. (2004).	sensitive approach (e.g. using cultural factors) in working with Jewish IPV.	woman from NYC.			partners are often introduced by a matchmaker during their teens/early 20's. • Despite the homogeneity of Orthodox Jews there are many subdivisions within the Orthodox community. • Three main subdivisions: modern Orthodox, "Yeshivish" Orthodox, Chassidic Jews, • Willingness to work with secular helping professionals varies in the Orthodox community. • Jewish laws such as the prohibition against speaking badly about others (lashon hara) can inhibit Orthodox Jews from seeking help for IPV. • Three areas to be mindful of when working with Orthodox Jewish subgroups: the culture of each subgroup; history of each subgroup; and contemporary topics (e.g. politics).
Lebovics, S. (1998).	1. To provide an overview of the dynamics of IPV.	n/a	n/a	Literature review	• Cultural concerns relevant to the Orthodox IPV victim are examined (i.e. divorce stigma, involvement of the rabbi, get obtainment, and reluctance to

					go outside the community for safety. • Common Countertransference issues that clinicians may struggle with when working with women who are abused are discussed (i.e. feeling pressured to save the marriage, frustration with resistance, and/or rescue fantasies).
Margolese, H. (1998).	1. To synthesize the literature regarding psychotherapy with Orthodox Jews.	n/a	n/a	Literature review	• No scientifically rigorous studies in this area. • Orthodox Jews presenting for therapy may experience great shame and feel as if they have failed to meet culturally defined social roles. • May ascribe mental illness to vastly different origins than the clinician (i.e. punishment for not adhering to religious tenets). • Rules of modesty may complicate clients feeling comfortable with clinicians of the opposite sex; a chaperone can be helpful and does not appear to hinder levels of disclosure. • Biological basis treatment (inpatient) may be tolerated

					better than milieu therapy. • Confidentiality is of the upmost importance, so much so that clients from same subgroups should not be scheduled consecutively. • Psychodynamic therapy is well suited for the introspective and object related thinking of most Orthodox Jews. • Imperative to be aware of countertransference and transference reactions. • CBT has been found to helpful with anxiety disorders in Orthodox Jewish clients. • Couples therapy requires awareness of Jewish laws regarding sexuality and separation rituals regarding menstruation. • There are similarities between structural family therapy and Orthodox Judaism. • Group therapy with Orthodox Jews is most effective when it is a homogenous group of the same sex based on a single issue and led by a leader of the same-sex.

Sweifach, J., & Heft-LaPorte, H. (2007).	NO preconceived hypothesis- themes and categories emerged from the text	Snowball sampling resulted in a purposive sample of 10 clinical social workers who practiced Orthodox Judaism and worked as group facilitators from family service agencies that help IPV victims in the United States and Israel.	Face to face and phone interviews utilizing semi-structured interview protocol.	Qualitative study	• Religious minorities, including Orthodox Jews, tend to under-utilize psychological services due to a religiosity gap. • Group therapy can be beneficial in creating a sense of normalization, globalization, and community for women who feel isolated and stigmatized. It can also provide mutual support for members from collectivistic communities. Obstacles to group work with Orthodox Jews includes: lashon hara, cultural sensitivity, stigma, cognitive and theological distortion, and issues of modesty. • Strategies for addressing these obstacles include: establishing ground rules regarding confidentiality, use of metaphor, shared histories and cultural meaning making, observance of cognitive dissonance and distortion, and selection of homogenous groups.

Experience of Rabbis Regarding Intimate Partner Violence

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Arnette, N., Mascaro, N., Santana, M., Davis, S., & Kaslow, N. (2007).	1. To examine longitudinally which theoretically relevant variables (e.g. hopelessness, religious coping) predicted spiritual well-being .	74 low socioeconomic status, African American IPV survivors who have attempted suicide in the past year.	Interview consisting of a battery of assessments, including The Beck Hopelessness Scale, RCOPE, and Spiritual Well-Being Scale.	Longitudinal quantitative study utilizing path analysis	• At 10 week following, higher levels of positive religious coping and lower levels of hopelessness had significantly higher levels of religious well-being; however religious coping and hopelessness did not account for much of the variance in well-being. • Discusses several important limitations of the study (e.g. generalizability, inability to account for large amounts of variance).
Bjorck, J., & Thurman, J. (2007).	1. To investigate moderating role of religious coping on the relationship between negative life events and psychological functioning.	Convenience sample consisting of 336 adult (197 women, 139 men) Protestant church members in southern California.	Questionnaires included measures of religious participation, negative life Events (Life Experience Survey), positive and negative religious coping (RCOPE), and psychological functioning	Quantitative study using correlations and hierarchical canonical analyses.	• Negative events were related to increase in religious coping decreased psychological functioning, with religious participation not impacting this relationship. • High levels of positive religious coping limited the impact of negative event. • General stress prompted more positive than negative religious coping. • As negative life events

			(Satisfaction with Life Scale and the Center for Epidemiological Studies-Depressed Mood Scale).		cumulate, Protestants increase both negative and positive religious coping.
Grimm, J., & Bassett, R. (2000).	1. To provide an updated look at the counseling practices of clergy in general, specifically comparing rural and urban clergy. 2. To provide preliminary information on the effectiveness of clergy as counselors.	117 men, 7 women, and 7 non-reported gender clergy from a 7 county region in the northeast, which included a large metropolitan area.	Survey developed utilizing 5-point Likert scale.	Descriptive study	• Respondents have higher education levels than previous studies. • Rural and urban clergy are similar in terms of frequency of counseling persons with a variety of presenting problems and frequency of using a variety of counseling skills. • Rural and urban clergy have no significant differences in self-reported effectiveness. • Majority have 4 or less counseling sessions with clients. • Depression and marriage problems are most common presenting concerns, issues of death/dying are also large part of counseling duties. • Issues of sexuality and abuse were reported less frequently than in previous studies. • Prayer and other non-directive counseling techniques are most

					frequently reported. • Clergy with lower levels of training were more likely to utilize prayer/scripture and directive counseling techniques. • Clergy reported feeling most confident in dealing with spiritual, marital, and common emotional (e.g. anxiety, anger) concerns. • Clergy expressed a desire for more training in areas of abuse/IPV, substance issues, and depression.
Pargament, K., Koenig, H., Tarakeshwar, N., & Hahn, J. (2004).	1. To determine which forms of religious coping impact health status.	268 medically ill, elderly, hospitalized patients.	Measures of religious coping (RCOPE) and spiritual, psychological and physical functioning.	Longitudinal study (2 year follow up)	• Improvement in heath was associated with positive methods of religious coping. • Declines in health were associated with negative methods of religious coping.
Pickard, J., & Baorong, G. (2008).	1. To further explore older adults' help-seeking from clergy through the lens of religiosity variables.	317 adults aged 65 or older living in a naturally occurring retirement community in one square mile section of Saint	Interview examining the following levels of variables: • Dependent (help seeking from clergy); • Predisposing factors (age,	Quantitative study using hierarchical logistic regression analyses.	• Low social support and increased attendance at services was correlated with help-seeking from clergy. • Levels of intrinsic religiosity and private religious activities related to help-seeking from clergy. • No religious faith differences

		Louis County, Missouri.	gender, marital status); • Enabling factors (education, financial security, social support); • Need factors (depressive symptoms, stress, alcohol use, physical health); and • Religious factors (frequency of attendance at religious services, time spent in private religious activities, intrinsic religiosity and religious affiliation).		were related to help-seeking from clergy. • Christian participants go to church more often, spend more time in private religious activities, and described more intrinsic value from religion than Jewish participants.
Wang, P., Berglund, P., & Kessler, R. (2003).	1. To provide empirical data on a national level exploring the	8, 098 respondents (ages 15–54) to the National	A modified version of the Composite International	Cross-Sectional Survey	• 25% of participants sought treatment from a clergy member; however help-seeking

	services clergy provide to mentally ill in the United States.	Comorbidity Survey (a nationally representative general population survey)	Diagnostic Interview was used to assess DSM-III R mental disorders. Reports were also obtained on age of onset of disorders, age of first seeking treatment, and treatment in the 12 months before interview with each of six types of professionals (clergy, general medical physicians, psychiatrists, other mental health specialists, human services providers, and alternative treatment providers).		for mental illness from clergy members has declined between the 1950s (31.3%) and the early 1990s (23.5%). • Those who sought help from clergy are not likely to be receiving treatment from a physician or mental health professional. • Clergy were contacted more than psychiatrists or general medical doctors by study participants.
Weaver, A. (1995).	1. To review the literature regarding clergy training regarding	n/a	n/a	Literature review	• In American and Canadian research studies over a fourteen year period between 1976 and 1989, the majority of a

	mental health issues.				demographically diverse group of Protestant, Catholic, and Jewish clergy reported a very significant need for additional training in counseling skills. • Fifty to 80% of the clergy considered their training in pastoral counseling inadequate in helping them cope with severe mental illness and marital issues they were consulted about. • About one-half of the seminaries had no course requirement in the area of pastoral care or counseling. • A study concluded that even though 95% endorsed having some pastoral counseling training in seminary, only one in four regarded their seminary training as a significant contributing factor to their competence in the area of pastoral counseling, regardless of age or extent of pastoral experience. • In 1961, the Joint Commission on Mental Illness reported that 42% of the people who thought

					they had an emotional problem sought the help of a member of the clergy, while 29% sought physicians, 18% sought psychologists and psychiatrists, and 10% sought social services. • Evidence that clergy are called upon by many Americans for help on the frontlines of mental health. • Clergy report that counseling is perceived by them as a very important part of their responsibility, and that their work involves heavy demands for mental health services • As a result of fewer mental health services being available, pastors of rural churches may be more likely to be used as a general community counseling resource than pastors in larger urban congregations where more services are available • According to the United States Department of Labor (1992), there are approximately 312,000 Jewish and Christian clergy serving congregations in America (4,000 Jewish rabbis,

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<td>53,000 Roman Catholic priests, and 255,000 Protestant pastors).
• In a 1987 survey of one thousand battered women, clergy counseled one-third of the victims and one-tenth of the perpetrators.
• Clergy are rated as more effective than medical personnel, social services, police, lawyers, shelters, and women's groups.
• There is an urgent need to train clergy in the recognition of depression and suicide risk factors
• Clergy referred less than ten percent to mental health specialists. Many fewer referrals were reported from mental health specialists to clergy or other religious resources.
• In the most comprehensive study of who Americans seek for help with problems, it was found that among those who sought the help of clergy, 58% endorsed being "helped or helped a lot," while 11%</td>
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					believed their experience with clergy "did not help." • Many mental health specialists fail to receive training in religion. • Additional research has discovered that practicing religious people are underrepresented in the mental health professions when compared to the general population.
Weaver, A. et al., (1997).	1. To gain insight into the relationship between clergy and the practice of psychology.	n/a	n/a	Literature review	• Of 2,468 quantitative articles, only 4 empirically based studies looked at clergy. • Four out of 10 individuals with mental health issues seek help from clergy. • Clergy are more likely than psychologists or psychiatrists combined to deal with serious mental illness. • Young adults rank clergy higher than psychologists or psychiatrists in warmth, caring, stability, and professionalism. • Clergy spend 15% of their time providing counseling (assuming a 40-60 hour work week). • Clergy are able to uniquely

					observe changes in behavior as signs of distress, given their longitudinal relationships with individuals/families.
Weaver, A. et al., (2002).	1. To measure the scientific research on religion in six major MFT journals.	n/a	n/a	Literature review	• MFT journals had higher levels (13.2%) of articles examining religion than psychiatric journals. • Research on religion as a construct suggest the use of multiple measures rather than a single variables. • Religious professionals may be more inclined to consult on marriage and family issues • MFTs may be more likely to collaborate with clergy than other mental health providers (10x greater than psychologists and 3x more than psychiatrists). • MFTs may also have more training in religious issues than doctoral degree holders. • High levels of marital adjustment and satisfaction can be correlated with high levels of religiosity. • Most clergy offer some form of pre-marital counseling • Engaged couples are 3x more

					likely to prefer clergy for counseling, with committed couples even more likely.

Experience of Rabbis Regarding Intimate Partner Violence

I. Congregational View of Clerical Counsel

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Broccolo, G., & VandeCreek, L. (2004).	1. To explore ways chaplains are helpful to those who have lost family members.	130 individuals who experienced the death of a loved one.	Semi-structured telephone interview	Exploratory study integrating qualitative and quantitative methods	• Few family members (14%) requested chaplains, reporting that the chaplain simply appeared, apparently called by nursing or medical staff members. • Seventy four percent said that this was the first time they met the chaplain. • Almost nine out of ten family members (88%) reported that they received the comfort and support they needed. • Chaplains were reported helpful in: supportive; helped with organization/details needed surrounding death; acted as safety net until other loved ones arrived; and helped provide spiritual guidance. • Family members rated the helpfulness of chaplains positively.
Koenig, H. (1998).	1. To examine the occurrence of religion in ill	542 patients age 60 or over admitted to the	Systematic survey which elicited information on	Descriptive study using multivariate analysis.	• 53.4% of participants attend religious services weekly. • 58.7% engaged in daily bible

	older adults and connect these beliefs to various personal (e.g. social, psychological and health) characteristics.	general medicine, cardiology and neurology services of Duke University Medical Center.	religious affiliation, religious attendance, private religious activities, intrinsic religiosity, religious coping, demographic, social, psychological and physical health characteristics.		study or prayer. • More than 40% identified religion as important in their coping. • Religion was related to race (Black), low education levels, greater social support and increased life stressors. • Religious attendance was related to greater levels of health and decreased depression.
Manning, J., & Watson, W. (2007).	1. To explore the desired types of support of women struggling with sexually addicted/compulsive spouses.	22 women from Canada and the USA age 25 or older who are married and discussing a spouse's/partner's sexually addictive behavior in therapy.	Interview	Qualitative study using grounded theory	• Two categories of support emerged from the data: "Coping Supports" and "Change-Oriented Supports" • Types of change-oriented supports: recreational, relational, professional, spiritual, and conceptual. • One of the most common sources of help for participants were clergy members. • 72.73% of participants felt clergy were helpful in their support while 36.36% found clergy unhelpful or even damaging.
Milstein, G.,	1. To describe the	n/a	n/a	Program	• Clergy Outreach and

Manierre, A., Susman, V., & Bruce, M. (2008).	pilot study of a prevention protocol aimed at increasing collaboration between mental health providers and clergy.			development description	Professional Engagement (C.O.P.E.). is a multi-disciplinary, multi-faith, and science-based program based on the idea that clergy and clinicians working together can provide higher quality/quantity of services. • C.O.P.E also is designed to make working together mutually beneficial for both fields. • C.O.P.E. begins with an inreach to educate clinicians in recognizing the importance of religion. • Therapist religiosity (or lack thereof) does not prohibit involvement in C.O.P.E or in counseling on religious issues.
Moran, M. et al., (2005).	1. To examine kinds of problems clergy address; self perceived competence; frequency of patient contact in hospital; and referral considerations.	179 clergy in four New York and Connecticut hospitals.	Survey instrument collected data in three general areas: • demographics (age, ethnicity, gender, religion, and years as a religious	Descriptive study utilizing factor analysis	• Clergy most frequently dealt with grief, death and dying, anxiety, and marital problems. • Clergy felt less competent dealing with depression, alcohol/drugs, domestic violence, severe mental illness, HIV/AIDS, and suicide but often failed to consult on these issues.

			leader, and the amount of Clinical Pastoral Education the clergy had completed); • pastoral activity (frequency with which they visited patients at hospitals, the hours per week they spent doing so, the hours per week they spent doing pastoral counseling); and • referral and consultation practices (referring patients to hospitals, how often parishioners presented ten different kinds		• Clinical Pastoral Education increased feelings of competence but less than half the sample received CPE. • Clergy visited patients less than four hours a week. • Clergy preferred referring to hospitals with chaplains.

			of emotional, psychological problems, and how competent they felt they were to respond).		
Rotunda, R., Williamson, G., & Penfold, M. (2004).	1. To examine the frequency with which a sample of clergy members from various faiths encounter domestic violence situations, the advice they provide to those seeking their help, and the reactions of victims and batterers to their own interactions with clergy.	47 female victims and 70 male perpetrators of domestic violence; 41 clergy members from various denominations.	For clergy members a questionnaire was developed that assessed individual and church characteristics, the frequency and nature of their counseling activities with IPV and the types of advice they gave those who sought help. For victims and batterers utilized questionnaires that assessed demographic factors; frequency of relationship	Exploratory study	• Low survey response rate BUT did get a varied type of clergy. • 43% of the victims and 20% of the perpetrators sought help from clergy. • 95% of the victims were satisfied with the counsel of clergy. • All clergy respondents reported counseling people who had experienced domestic violence during their career. • 80% of clergy had violence-related contacts in the past year. • 37% have made referrals to community based agencies. • 39% had recommended divorce. • 87% recognized the need for victims to separate from their partners. • 12% felt that physical abuse is not adequate grounds for divorce.

			violence prior to entering counseling; level of religious affiliation and involvement (church attendance was also used as an indicator of involvement); and the frequency, nature, and evaluation (i.e., satisfaction) of their contacts with clergy.		• 93% suggested couples counseling • Submission to abuser was recommended to 5% of wives. • 57% said that they felt that they lacked enough training . • 25% of the clergy had any training related to DV. • Separation from abuser was suggested to 61% of the victims. • Restraining orders were suggested to 56% of the participants. • 38% of the victim’s clergy recommended that they think about “what Jesus would do in your situation”. • 33% of the victims stated that clergy recommended they remain in the home and get counseling. • Couples therapy was offered to 39% of women in the study.
Sigmund, J. (2003).	1. To review the literature regarding the spiritual aspects of trauma, and to describe one	n/a	n/a	Literature review	• Review of the literature revealed studies from various disciplines, including family therapy, nursing, psychology, pastoral counseling, and medicine.

	facility's use of clergy in the treatment of PTSD. 2. Asses the strengths and weakness of the work of three different chaplains.				• Religiosity limits impact of IPV. • Ability to connect with God related to ability to connect with others. • Trauma has the potential to create spiritual growth. • The work by chaplains at the Dayton VA supported the assessment of the spiritual issues of trauma. • Spiritual issues which arose in the VA included forgiveness, letting-go, and anger at God. • The elimination of bible study from the group was important. • The exploration of the four loves of C. S. Lewis provided an environment where veterans could explore their relationships. • The basic principles of Alcoholics Anonymous, specifically the belief in a "higher power" allowed for veterans to challenge cognitions and try out new behaviors of relating to themselves, to God, and to their community.
Williams, L.,	1. To assess	Individuals	Survey measures	Descriptive study	• 66% felt marriage preparation

Riley, L., & Dyke, D. (1999).	perceived helpfulness of marriage preparation elements, providers, formats, topics, and session numbers.	married 1–8 years who completed a premarital inventory called FOCCUS (Facilitating Open Couple Communication, Understanding and Study) between the years of 1987 and 1993.	consisting of 6 point Likert scales	utilizing one-way analysis of variance.	was helpful but its benefits faded over time. • Aspects of marriage preparation rated most helpful included providing time for couples to learn about each other, using a team of providers, addressing the Five Cs (communication, commitment, conflict resolution, children and church), and having 8–9 sessions.

Experience of Rabbis Regarding Intimate Partner Violence

II. Attitudes and Beliefs toward Intimate Partner Violence

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Ehrensaft, M. et al., (2003).	1. To explore interactions between risk for IPV and childhood factors (e.g. parental violence, behavior problems, and substance use).	543 children	Followed over 20 years	Longitudinal study	• Behavioral problems were the strongest risk for perpetrating IPV for both sexes, followed by parental violence and corporal punishment as a child. • Child abuse also increased risk of IPV perpetration.
Henning, K. & Holdford, R. (2006).	1. To explore the relationship between IPV recidivism and beliefs of IPV causes.	2,824 convicted IPV offenders	Survey with novel scales created to measure attributions of blame, minimization, and social desirability.	Exploratory study.	• Respondents were likely to engage in minimization, denial, blaming, and socially desirable responding. • The majority of perpetrators denied arguing during the arrest incident and insisted there was no physical contact with their partner. • Justifications used by participants included believing the victim or police had lied, claims of self defense, or personality traits of the victim. • Minimization of the event was common amongst perpetrators.

					• Perpetrators demonstrating social desirability in their answers were less likely to recidivate.
Hotaling, G., & Sugarman, D. (1990).	1. To examine which risk factors differentiate between different types of violence relationships.	699 women who participated in the National Family Violence Survey.	National Family Violence Survey data	Descriptive study using multivariate analysis.	• IPV risks are not increased by witnessing parental violence and low self esteem. • High levels of marital conflict and lower income were the factors most related to increased chances of IPV.
Martin, S. E. (1989).	1. To examine the response of religious organizations to IPV.	Clergy representing various denominations from 143 churches and synagogues in suburban Maryland.	Mail administered fixed-response survey	Exploratory study.	• Across denominations, clergy are not proactive around IPV despite having been faced with the problem within the past 6 months. • 54% of clergy have counseled victims of IPV. • Differences in providing IPV related services may be related to the size of the congregation. • The most frequent response while counseling was information on treatment programs.

					• 29% deny that IPV is a problem amongst their congregation, with Catholics most likely to deny IPV. • Majority of clergy felt victim resistance to seeking help was a primary obstacle they dealt with.

Experience of Rabbis Regarding Intimate Partner Violence

III. Training and Education Regarding Intimate Partner Violence

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Delaplane, D., Delaplane, A., & Spiritual Dimension in Victim Services. (1994).	1. To provide education for clergy on issues currently facing victims of violent crimes	n/.a	n/a	Resource manual for clergy.	• Provides general information on various forms of family violence (i.e. partner abuse, child abuse, sexual assault, burglary) and violent crime. • Provides guidelines for clergy when working with these issues, including religious responses. In addition, the manual addresses religious diversity by including small sections on violence in the Jewish community and the role of rabbis. • Provides guidelines for hosting a clergy training event.

Experience of Rabbis Regarding Intimate Partner Violence

IV. Frequency and Quality of Counsel Provided

Author/Year	Research Questions/Objectives	Sample	Variables/ Instrumentation	Research Approach/Design	Major Findings
Bowker, L. (1982).	1. To examine the helping behaviors of clergy who had been sought out for counsel in regards to IPV	146 women who had experienced IPV but had not been involved in violence for more than a year prior to interview.	In-depth interview covering: • Background characteristics of victim and husband; • social embeddedness; • frequency, severity, and patterns of violence; • Techniques, strategies, and sources of help for stopping violence; and • conditions and characteristics of cessation of violence.	Descriptive study	• 59 of the participants consulted clergy related to IPV. • Helping behaviors reportedly offered by clergy include focused talking, problem solving, providing material aid, listening, and providing referrals. • Typical counseling with a clergy member lasted 11 sessions. • 50 women reported having the abuser become aware of her help seeking, 9 of which suffered additional violence. • Overall impression of clergy was positive. • Clergy tended to be more successful with higher level socioeconomic status victims and victims who experienced less severe IPV. • Clergy appear to be effective in working with currently married couple to improve

					relationship despite IPV.
Bograd, M., & Mederos, F. (1999).	1. To develop assessment protocol to screen clients/couples for appropriateness for couples therapy.	n/a	n/a	Literature review	• Goal of screening is to determine whether physical/psychological IPV has occurred. • Conditions that must be met for assessment: both partners voluntarily participate, confidentiality agreements may need to be tailored to individual situations, optimal therapeutic stance is needed. • Assessment should not occur in first meeting and is preferably screened during individual meetings with partners. • Provides suggestions of specific questions to inquire about various forms of violence and risk in efforts to assess safety. • Criteria for allowing couples work: both partners willing to participate, violence is limited in severity and frequency, psychological abuse is minimal and non-severe, no safety concerns are present,

					and perpetrator is willing to accept responsibility for violence.
Harris, G. E. (2006).	1. To examine considerations in deciding whether to use couples therapy in treatment of IPV.	n/a	n/a	Literature review	• While there is benefit to working with IVP from an individual therapy approach, couples therapy allows for alternate and helpful interventions. • Safety remains the priority when working with violent couples.
Horne, S., & Levitt, H. (2003).	1. To integrate findings on religious coping and IPV to explore the need for cleric based intervention.	Survey of Christian women victims: 157 southern Christian women. Interviews with Christian women victims: 10 women who had experienced IPV. Interviews with religious leaders: 22 faith leaders from	Varies by study • Survey of Christian women victims: path model analysis • Interviews with Christian women victims: qualitative exploration using grounded theory • Interviews with religious leaders: qualitative	Literature Review	• Abused women tend to contact the police and then the clergy. • Clergy report IPV is the most common type of abuse they encounter. • IPV is not something clergy report addressing proactively. • IPV training is rarely provided to clergy and most feel unprepared to handle the topic. • Suggestions for clergy: assume there is IPV within your religion; conduct IPV sermons/dialogues; be aware of referral resources; place safety above marriage preservation; be receptive to a victims disclosure; take a

		Jewish, Islamic, and Christian faiths.	exploration using grounded theory		proactive stance; update training and knowledge on IPV issues; remember couples treatment is contraindicated with active violence or abuser has not received therapy.
Neergaard, J., Lee, J., Anderson, B., & Gengler, S. (2007).	1. To explore whether women dealing with IPV confide in religious leaders. 2. If women confide in religious leaders, are they helpful. 3. Does confiding in leaders and viewing them as helpful have positive psychological outcomes.	476 abused Christian women living @ home rather than shelters.	Survey which included questions of religiosity, abuse, social support, stress, mastery, self esteem, self efficacy, and life satisfaction.	Exploratory study	• High self esteem and mediating the impact of low social support can be connected with disclosing IPV to clergy. • 70% identified as religious but only 25% went to religious leaders
Strickland, G., Welshimer, K., & Sarvela, P. (1998).	1. To explore rural clergy's attitudes, knowledge, and prevention efforts toward IPV, including role of religious	260 Christian clergy from four rural southern Illinois towns.	Survey consisting of four subscales: knowledge of IPV, doctrinal label scale, attitude toward IPV, and practices toward primary	Exploratory study	• IPV prevention efforts are most common in large churches and amongst highly educated female clergy. Larger churches, more educated clergy and female clergy provide more prevention. • No difference between liberals

	beliefs.		prevention of IPV		and conservatives on attitude scales. • Neither knowledge nor attitudes necessarily impacted prevention practices. • Provides suggestions for prevention efforts.

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APPENDIX B

Participant Recruitment Materials

FOR E-NEWSLETTER:

ATTENTION ALL CCAR MEMBERS:

You have been invited to participate in a 30-60 minute CONFIDENTIAL survey about GENDER ROLES AND CONFLICT IN RELATIONSHIPS!

After completion, you will be given the opportunity to enter into a raffle to win a $50 dollar donation to a charity or organization of your choice!

Participation in this study is voluntary and confidential. The study poses no more than minimal risk. Participants are free to omit any questions they do not want to answer or may withdraw from the study at any time.

To be eligible, for this study you must:

1. **Be over the age of 21**
2. **Reside inside the United States of America**
3. **Serve or have served as a Rabbi of the Reform, Conservative, Orthodox, or Reconstructionist congregation**
4. **If retired, have been retired less than 2 years**

This research study is affiliated with Pepperdine University. For more information, call the researcher, Alison Marks, at 210-313-7257 or click on the link below. All calls are strictly confidential.

Take the survey!
www.surveymonkey.com/s/2XFVQKY

****
FOR EMAIL DISTRIBUTION:

Hello,

I am forwarding this message on behalf of Alison Marks, a doctoral student in clinical psychology at Pepperdine University in Los Angeles, who is supervised by Dr. Thema Bryant-Davis, Associate Professor of Psychology

Ms. Marks is working on her dissertation and is inviting members of the rabbinical community to participate in a CONFIDENTIAL survey about GENDER ROLES and CONFLICT IN RELATIONSHIPS. It will take approximately 30 minutes to an hour to complete the questionnaire.

After completion, you will be given the opportunity to enter into a raffle to win a $50 dollar donation to a charity or organization of your choice!

Participation in this study is voluntary and confidential. The study poses no more than minimal risk. Participants are free to omit any questions they do not want to answer or may withdraw from the study at any time.

To be eligible, for this study you must:

1. **Be over the age of 21**
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Take the survey!
www.surveymonkey.com/s/2XFVQKY

APPENDIX C

Informed Consent Statement

Cover Letter to Participate in Research
Pepperdine University
Informed Consent Statement
IRB # P1010D11

You are being asked to participate in a research study on GENDER ROLES and CONFLICTS IN RELATIONSHIPS that is being conducted to meet dissertation requirements by Alison Marks, a graduate student in clinical psychology at Pepperdine University, under the supervision of Dr. Thema Bryant-Davis, Associate Professor of Psychology at Pepperdine University. This page provides you with information about the study. Your participation is **entirely voluntary** and you can refuse to participate without penalty or loss of benefits to which you are otherwise entitled. Completion and submission of the survey indicates your willingness to participate in the current study. The following are the key considerations to help you decide whether you wish to complete the survey:

What will I be asked to do if I take part in this research study?

If you choose to participate in this study, you will be asked to fill out a 30-60 minute survey about the following topics: (a) demographics, (b) professional background, **(c) knowledge and attitudes about conflicts and dating or marital relationships, especially intimate partner violence,** (d) education and training, (e) services provided as part of rabbinical duties. You are free not to answer any questions that you do not wish to answer. After completion of the online questionnaire, you will be directed to a screen that provides you with a confirmation code. This code indicates that you have successfully completed the study. You will then be given the opportunity to send an email with your confirmation code to the research team's email address (will be provided). Your personal information and conformation code will in no way be linked to your survey responses.

At the conclusion of the study four randomly selected participants will have $50 donated in their name (or anonymously if they choose) to a charity or organization of their choice. If you are selected as a winner, you will receive an email from the investigators and be asked to provide your name and desired donation recipient such that they may receive a $50 dollar donation.

What are the possible discomforts and risks?

The study poses no more than minimal risk, such as discomfort or feeling self-conscious about discussing these issues. It is possible that some participants may experience inconvenience due to the time required for the study. **You are free to omit answers to questions and may discontinue your participation at any time without suffering any penalty.**

What are the possible benefits to you or to others?

There are no direct benefits to you personally resulting from your participation in this study. The information we obtain in this study will add to our general knowledge of conflict and relationships within the Jewish community.

How will your privacy and the confidentiality of your research records be protected?

If you choose to participate in this study, your responses will be **confidential**. This means that records of any responses you give during this study will not contain any

identifying information. As such, your identity cannot be determined by anyone who has access to the records of your responses. We will not record your IP address. The survey is administered through SurveyMonkey.com, a third party company that provides on-line data collection services to researchers at major universities throughout the country. In order to protect data and other sensitive information during transmission, SurveyMonkey uses Secure Socket Layer (SSL) 128-bit encryption technology, the same encryption technology that is used to protect credit card data and other privacy-sensitive transactions completed over the internet. **If the results of this research are published or presented at scientific meetings, no personally identifying information about any participants will be disclosed.**

If you have questions about the study procedures, you may contact Alison Marks at Alison.Marks@pepperdine.edu or (210) 313-7257, or you may contact her dissertation chairperson, Dr. Thema Bryant-Davis at Pepperdine University, Graduate School of Education and Psychology, 6100 Center Drive, Los Angeles, CA 90045, Thema.S.Bryant-Davis@pepperdine.edu or (818) 501-1632

If you have questions about your rights as a study participant, you may contact Doug Leigh, Ph.D., Chairperson of the Graduate and Professional Schools Institutional Review Board, Pepperdine University, Graduate School of Education and Psychology, 6100 Center Drive, Los Angeles, CA 90045, (310) 568-2389 or doug.leigh@pepperdine.edu.

Please click on one of the following options to continue:

☐ I understand the participation criteria outlined above. I would like to take part in the survey.
☐ I do not wish to take part in the survey at this time.

APPENDIX D

Email Acknowledging Receipt of Confirmation Code

Thank you for your completion of this survey.

This is an automatically generated email acknowledging your confirmation code has been received and you will be entered into the $50 dollar donation drawing.

If you have any questions regarding this research please contact the principal investigator:

Alison Marks, MS

Pepperdine University

(210) 313-7257

If you have any questions regarding your rights as a research participant please contact:

Dr. Doug Leigh

Chairperson of the Graduate and Professional Schools Institutional Review Board

Pepperdine University

(310) 568-2389

For more information regarding Intimate Partner Violence please contact the following agencies:

Shalom Bayit
Ending Domestic Violence in Jewish Homes
P.O. Box 10102, Oakland CA 94610
(510) 451-8874
www.shalom-bayit.org

Jewish Women International
2000 M Street, NW Suite 720
Washington, DC 20036
(800) 343.2823
www.jwi.org

APPENDIX E

Email Requesting Resubmission of Raffle Entry

FOR E-NEWSLETTER:

ATTENTION ALL CCAR MEMBERS:

Last year you may recall having been asked to participate in a CONFIDENTIAL survey about GENDER ROLES and CONFLICT IN RELATIONSHIPS. **At the conclusion of completing this survey you were given the option opportunity to enter into a raffle to win a $50 dollar donation to a charity or organization of your choice.**

I regret to inform CCAR members that due to a technical error, entries into this raffle were deleted and are unable to be retrieved. *Your personal information and responses to the survey are in NO WAY compromised. Your responses to the survey remain confidential and continue to remain divorced from your emailed raffle submissions.*

DESPITE THIS GLITCH, THE RAFFLE WILL BE HELD AS PLANNED!

If you participated in this online survey and wish to re-enter the raffle please send an email to:

pepperdine_relationship_research@yahoo.com

Entries for the raffle will be accepted until (date two weeks from IRB approval)

Raffle winners will be contacted to provide additional information following this date.

This research study is affiliated with Pepperdine University. For more information, call the researcher, Alison Marks, at 210-313-7257 or click on the link below. All calls are strictly confidential.

****

FOR EMAIL DISTRIBUTION:

Hello,

I am forwarding this message on behalf of Alison Marks, a doctoral student in clinical psychology at Pepperdine University in Los Angeles, who is supervised by Dr. Thema Bryant-Davis, Associate Professor of Psychology

Last year you may recall having been asked to participate in a CONFIDENTIAL survey about GENDER ROLES and CONFLICT IN RELATIONSHIPS. **At the conclusion of completing this survey you were given the option opportunity to enter into a raffle to win a $50 dollar donation to a charity or organization of your choice.**

I regret to inform you that due to a technical error, entries into this raffle were deleted and are unable to be retrieved. *Your personal information and responses to the survey are in*

NO WAY compromised. Your responses to the survey remain confidential and continue to remain divorced from your emailed raffle submissions.

DESPITE THIS GLITCH, THE RAFFLE WILL BE HELD AS PLANNED!

If you participated in this online survey and wish to re-enter the raffle please send an email to:

pepperdine_relationship_research@yahoo.com

Entries for the raffle will be accepted until (date two weeks from IRB approval)

Raffle winners will be contacted to provide additional information following this date.

This research study is affiliated with Pepperdine University. For more information, call the researcher, Alison Marks, at 210-313-7257 or click on the link below. All calls are strictly confidential.

APPENDIX F

Notification of Raffle Win/Loss

LOSING TEXT

To Whom It May Concern:
Thank you for recently participating in an online research study investigating conflict and relationships. As detailed in the consent form of this study, we randomly select four participants and donate $50 in **his/her** name to a charity of **his/her** choice. **We are sorry to inform you you're your entry was not one of the four winning entries selected in our raffle.**

We thank you for submitting your data as it will help us to better understand conflict and relationships in the Jewish community. If you have any questions about this study, feel free to contact the principal investigator, Alison Marks, at (210) 313-7257.

Regards,
Alison Marks, MS
Pepperdine University
6100 Center Drive, 5th Floor
Los Angeles, CA 90066

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WINNING TEXT

To Whom It May Concern:
Thank you for recently participating in an online research study investigating conflict and relationships. As detailed in the consent form of this study, we randomly select four participants and donate $50 in **his/her** name to a charity of **his/her** choice. We are pleased to inform you that your entry was selected as one of the four winning entries.

In order to make the $50 donation to a charity of your choice, please e-mail us with your First and Last Name and the charity or organization you would like to receive the donation. If you would like this donation to be anonymous, you do not need to provide your name. Please note, this can include a donation to a temple or synagogue of your choice. To ensure your confidentiality, your name and email address will in no way be linked to any of the data you submitted for the study.

We thank you for submitting your data as it will help us to better understand conflict and relationships in the Jewish community. If you have any questions about this study, feel free to contact the principal investigator, Alison Marks, at (210) 313-7257.

Regards,
Alison Marks, MS
Pepperdine University
6100 Center Drive, 5th Floor
Los Angeles, CA 90066

APPENDIX G

Survey

<u>Rabbi Demographics (23 questions)</u>

1. Please indicate your gender:
   - o Male
   - o Female
2. Please indicate your age (in years): (open ended)
3. Please indicate **your** racial identification:
   - o American Indian or Alaska Native
   - o Asian
   - o Black or African American
   - o Native Hawaiian and Other Pacific Islander
   - o White or Caucasian
   - o Other (open ended question)
4. Please select the state in which you reside: (drop down menu)
5. Please select your highest level of education completed:
   - o Did not complete high school
   - o Yeshiva education only
   - o High school degree
   - o 2 year college degree
   - o **Bachelor's** degree
   - o Master's degree
   - o Doctoral degree
6. Please indicate the year in which you graduated from your last educational placement: (open ended)
7. Please select the denomination of Judaism with which you identify:
   - o Reform
   - o Conservative
   - o Orthodox
   - o Other (open ended question)
8. Are you currently retired?
   - o Yes
   - o No

   8.1. If yes, please indicate year of retirement:
   - o 2010
   - o 2009
   - o 2008
   - o 2007
   - o 2006
   - o Prior to 2006
9. Have you ever served a congregation?
   - o Yes
   - o No

   9.1. If yes, what has been your longest period of service? (open ended)
10. Are you currently serving a congregation?
    - o Yes
    - o No

10.1. If Yes, please indicate the length of years of service at CURRENT synagogue (in years): (open ended)

10.2. If no, If yes, please indicate year of last congregational service:

- o 2010
- o 2009
- o 2008
- o 2007
- o 2006
- o Prior to 2006

10.3. If Yes, <u>Please answer the following questions about your current congregation. What percentage of your congregation:</u>

	All	Most	Some	None	Unknown
Observes Shabbat					
Attends services weekly					
Attends services only on High Holy days					
Keeps Kosher dietary laws					
Wears head coverings daily					
Visits a Mikvah					
Resides in all Jewish neighborhoods					
Sends children to Jewish day school exclusively					

11. Please indicate the average number of religious services you attend weekly (open ended)

<u>Attitudes Regarding Intimate Partner Violence (57 questions)</u>

Inventory of Beliefs about Wife Beating

SA=Strongly Agree A=Agree SLA= Slightly Agree N= Neither Agree Nor Disagree SLD= Slightly Disagree D=Disagree SD=Strongly Disagree

	SA	A	SLA	N	SLD	D	SD
Social agencies should do more to help battered women.							
There is no excuse for a man hitting his wife.							
Wives try to get hit by their husbands in order to get sympathy from others.							
A woman who constantly refuses to have sex with her husband is asking to be hit.							
Wives could avoid being battered by their husbands if they knew when to stop talking.							
Episodes of a man hitting his wife are the wife's fault.							
Even when women lie to their husbands they do not deserve to get hit.							
Women should be protected by law if their							

husbands hit them.							
Wife-battering should be given a high priority as a social problem by government agencies.							
Sometimes it is OK for a man to hit his wife.							
Women feel pain and no pleasure when hit by their husbands.							
A sexually unfaithful wife deserves to be hit.							
Causes of wife-battering are the fault of the husband.							
Battered wives try to get their partners to beat them as a way to get attention from them.							
Husbands who batter should be responsible for the abuse because they should have foreseen that it would happen.							
If I heard a woman being attacked by her husband, it would be best that I do nothing.							
Battered wives are responsible for their abuse because they intended it to happen.							
When a wife is hit, it is caused by her behavior in the weeks before the battering.							
A wife should move out of the house, if her husband hits her.							
Wives who are battered are responsible for the abuse, because they should have foreseen it would happen.							
A husband has no right to hit his wife even if she breaks agreements she has made with him.							
Occasional violence by a husband toward his wife can help maintain the marriage.							
A wife doesn’t deserve to be hit even if she keeps reminding her husband of his weak points.							
Most wives secretly desire to be hit by their husbands.							
If I heard a woman being attacked by her husband, I would call the police.							
It would do some wives some good to be hit by their husbands.							

1.1. How long should a man who has hit his wife spend in prison or jail?

- No jail time
- 1 month
- 6 months
- 1 year
- 3 years
- 5 years
- 10 years

- Don't know

The Sex Role Egalitarianism Scale
SA=Strongly Agree A=Agree N= Neutral/Undecided/No Opinion D=Disagree SD=Strongly Disagree

Home economics courses should be as acceptable for male students as for female students	SA	A	N	D	SD
Women have as much ability as men to make major business decisions.					
High school counselors should encourage qualified women to enter technical fields like engineering.					
Cleaning up the dishes should be the shared responsibility of husbands and wives.					
A husband should leave the care of young babies to his wife.					
The family home will run better if the father, rather than the mother, sets the rules for the children.					
It should be the mother's responsibility, not the father's, to plan the young child's birthday party.					
When a child awakens at night, the mother should take care of the child's needs.					
Men and women should be given an equal chance at professional training.					
It is worse for a woman to get drunk than a man.					
When it comes to planning a party, women are better judges of which people to invite.					
The entry of women into traditionally male jobs should be discouraged.					
Expensive job training should be given mostly to men.					
The husband should be the head of the family.					
It is wrong for a man to enter a traditionally female career.					
Important career-related decisions should be left to the husband.					
A woman should be careful not to appear smarter than the man she is dating.					
Women are more likely than men to gossip about people they know.					
A husband should not meddle with the domestic affairs of the household.					
It is more appropriate for a mother, rather than a father, to change the baby's diapers.					
When two people are dating, they should base their social life around the man's friends.					
Women are just as capable as men to run a business.					
When a couple is invited to a party, the wife, not the husband, should accept or decline the invitation.					

Men and women should be treated the same when applying for student loans.					
Equal opportunity for all jobs regardless of sex is an ideal we should all support.					
Home economics courses should be as acceptable for male students as for female students					

<u>Intimate Partner Violence Education and Training (47 Questions)</u>

Domestic Violence (DV) is defined as "a pattern of assaultive and coercive behaviors, including physical, sexual, and psychological attacks, as well as economic coercion, that adults use against their intimate partners"

1. Have you ever received training or education on DV issues?
   - o Yes
   - o No
   - 1.1. If no, Reason for not receiving DV training or education (CATA)
     - o Not provided in Rabbinical school
     - o None available in my area
     - o I am not interested in the topic
     - o Topic is not relevant to my congregation

   <u>If no, skip to #9</u>
2. How many hours of DV related training or education have you received? (open ended #)
3. How often do you attend DV related training or education programs?
   - o Never
   - o Less than once a year
   - o Between once every 6 months and a year
   - o Between once a month and every 6 months
   - o Every month
   - o More than once a month
4. Which factors affect your decision to attend training or education programs on DV issues? (CATA)
   - o Mandatory for my Rabbinical school program
   - o Readily available in my area
   - o I am interested in the topic
   - o Topic is relevant to my congregation
   - o Other (open ended question)
5. Did you receive DV training or education during your Rabbinical School Training?
   - o Yes
   - o No
   - 5.1. If no, did you desire any training or education on these issues prior to graduation from Rabbinical School?
     - o Yes
     - o No

     <u>THEN skip to#6</u>
   - 5.2. If yes, How many hours? (open ended #)
   - 5.3. If yes, what topics were covered? (CATA)

- o Definitions and Prevalence Statistics
- o Legal Aspects
- o Risk Assessment and Providing Options for Safety
- o Counseling Victims of DV
- o Counseling Perpetrators of DV
- o Children and Domestic Violence
- o How to find and use resources and referrals
- o Other (open ended)

5.4. If yes, Have you ever received training or education about DV while in Rabbinical School in a lecture or panel discussion format?

- o Yes
- o No

If no, skip to #5.5

5.4.1. If yes, Who of the following conducted the lecture or panel discussion training or education program? (CATA)

- o Rabbis
- o Professors
- o Domestic Violence Counselors
- o Psychologists or Therapists
- o Other (open ended)

5.4.2. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program?

Excellent	Fair	Adequate	Poor	Extremely Poor

5.5. If yes, Have you ever received training or education about DV while in Rabbinical School in a course taken for educational credit?

- o Yes
- o No

If no, skip to #5.6

5.5.1. If yes, Who of the following conducted the course training or education program? (CATA)

- o Rabbis
- o Professors
- o Domestic Violence Counselors
- o Psychologists or Therapists
- o Other (open ended)

5.5.2. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program?

Excellent	Fair	Adequate	Poor	Extremely Poor

5.6. If yes, Have you ever received training or education about DV while in Rabbinical School in a workshop, seminar, or conference?

- o Yes
- o No

If no, skip to #5.7

5.6.1. If yes, Which training format did you attend? (CATA)

- Workshop
- Seminar
- Conference

5.6.2. If yes, Who of the following conducted the workshop, seminar, or conference? (CATA)

- Rabbis
- Professors
- Domestic Violence Counselors
- Psychologists or Therapists
- Other (open ended)

5.6.3. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program?

Excellent	Fair	Adequate	Poor	Extremely Poor

5.7. If yes, have you ever received training or education about DV while in Rabbinical School in a format not previously mentioned?

- Yes
- No

If no, skip to #6

5.7.1. If yes, please describe the format of the training. (open ended)

5.7.2. If yes, Who of the following conducted the training or education program? (CATA)

- Rabbis
- Professors
- Domestic Violence Counselors
- Psychologists or Therapists
- Other (open ended)

5.7.3. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program?

excellent	Fair	Adequate	Poor	Extremely Poor

6. Did you receive DV training or education post graduation from Rabbinical School?

- Yes
- No

6.1. If no, did you desire any training or education on these issues following graduation from Rabbinical School?

- Yes
- No

THEN skip to #7

6.2. If yes, How many hours? (open ended #)

6.3. If yes, what topics were covered? (CATA)

- Definitions and Prevalence Statistics
- Legal Aspects
- Risk Assessment and Providing Options for Safety
- Counseling Victims of DV
- Counseling Perpetrators of DV

- o Children and Domestic Violence
- o How to find and use resources and referrals
- o Other (open ended)

6.4. If yes, Have you ever received training or education about DV following Rabbinical School in a lecture or panel discussion format?

- o Yes
- o No

<u>If no, skip to #6.5</u>

6.4.1. If yes, Who of the following conducted the lecture or panel discussion training or education program?(CATA)

- o Rabbis
- o Professors
- o Domestic Violence Counselors
- o Psychologists or Therapists
- o Other (open ended)

6.4.2. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program?

Excellent	Fair	Adequate	Poor	Extremely Poor

6.5. If yes, Have you ever received training or education about DV following Rabbinical School in a course taken for educational credit?

- o Yes
- o No

<u>If no, skip to #6.6</u>

6.5.1. If yes, Who of the following conducted the course training or education program? (CATA)

- o Rabbis
- o Professors
- o Domestic Violence Counselors
- o Psychologists or Therapists
- o Other (open ended)

6.5.2. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program? (Likert)

Excellent	Fair	Adequate	Poor	Extremely Poor

6.6. If yes, Have you ever received training or education about DV following Rabbinical School in a workshop, seminar, or conference?

- o Yes
- o No

<u>If no, skip to #6.7</u>

6.6.1. If yes, Which training format did you attend? (CATA)

- o Workshop
- o Seminar
- o Conference

6.6.2. If yes, Who of the following conducted the workshop, seminar, or conference? (CATA)

- Rabbis
- Professors
- Domestic Violence Counselors
- Psychologists or Therapists
- Other (open ended)

6.6.3. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program?

Excellent	Fair	Adequate	Poor	Extremely Poor

6.7. If yes, have you ever received training or education about DV following Rabbinical School in a format not previously mentioned?

- Yes
- No

If no, skip to #7

6.7.1. If yes, please describe the format of the training? (open ended)

6.7.2. If yes, Who of the following conducted the training or education program?(CATA)

- Rabbis
- Professors
- Domestic Violence Counselors
- Psychologists or Therapists
- Other (open ended)

6.7.3. If yes, On a Scale of 1-5: How would you rate the quality of this training or education program?

Excellent	Fair	Adequate	Poor	Extremely Poor

7. Please describe any positive DV related training or education experiences you have had. (open ended)
8. Please describe any negative DV related training or education experiences you have had. (open ended)

Services and Prevention Efforts (57 Questions)

1. During your rabbinical career, have you provided workshops or seminars on DV for congregants to attend?
   - Yes
   - No

   If no, skip to #2

   1.1. If yes, how often have you provided these workshops or seminars?
   - Never
   - Less than once a year
   - Between once every 6 months and a year
   - Between once a month and every 6 months
   - Every month
   - More than once a month

2. During your rabbinical career, have you held panel discussions on DV for congregants to attend?
   - o Yes
   - o No

   <u>If no, skip to #3</u>

   2.1. If yes, how often have you held these panel discussions?
      - o Never
      - o Less than once a year
      - o Between once every 6 months and a year
      - o Between once a month and every 6 months
      - o Every month
      - o More than once a month
3. During your rabbinical career, have you given sermons on DV?
   - o Yes
   - o No

   <u>If no, skip to #4</u>

   3.1. If yes, how often have you given these sermons?
      - o Never
      - o Less than once a year
      - o Between once every 6 months and a year
      - o Between once a month and every 6 months
      - o Every month
      - o More than once a month
4. During your rabbinical career, have you held special religious services aimed at DV awareness, prayer, and prevention?
   - o Yes
   - o No

   <u>If no, skip to #5</u>

   4.1. If yes, how often have you held these services?
      - o Never
      - o Less than once a year
      - o Between once every 6 months and a year
      - o Between once a month and every 6 months
      - o Every month
      - o More than once a month
5. During your rabbinical career, have you organized outreach activities (e.g. community service days) for your congregants that benefited DV organizations?
   - o Yes
   - o No

   <u>If no, skip to #6</u>

   5.1. If yes, how often have you organized these outreach activities?
      - o Never
      - o Less than once a year
      - o Between once every 6 months and a year
      - o Between once a month and every 6 months
      - o Every month

  - More than once a month
6. During your rabbinical career, have you organized Torah/religious text study groups on DV for congregants to attend?
   - Yes
   - No

   If no, skip to #7

   6.1. If yes, how often have you organized these study groups?
      - Never
      - Less than once a year
      - Between once every 6 months and a year
      - Between once a month and every 6 months
      - Every month
      - More than once a month
7. During your Rabbinical career, have you organized, attended, or spoken at a DV related march or rally?
   - Yes
   - No

   If no, skip to #8

   7.1. If yes, in which of the following activities have you participated? (CATA)
      - Organized a DV related march or rally
      - Attended a DV related march or rally
      - Spoken at a DV related march or rally

   7.2. If yes, how often have you organized, attended, or spoken at these marches or rallies?
      - Never
      - Less than once a year
      - Between once every 6 months and a year
      - Between once a month and every 6 months
      - Every month
      - More than once a month
8. During your rabbinical career, have you allowed DV related organizations and resources to run advertisements in your synagogue's bulletin or weekly temple announcements?
   - Yes
   - No

   If no, skip to #9

   8.1. If yes, in which of the following activities have you participated? (CATA)
      - Allowed DV related organizations and resources to run advertisements in your synagogue's bulletin
      - Allowed DV related organizations and resources to run advertisements in your weekly temple announcements

   8.2. If yes, how often have you allowed these advertisements to run?
      - Never
      - Less than once a year
      - Between once every 6 months and a year
      - Between once a month and every 6 months

- o Every month
- o More than once a month

9. During your rabbinical career, have you allowed DV related organizations and resources to distribute or display DV information to congregants, excluding synagogue bulletins?
   - o Yes
   - o No

   If no, skip to #10

   9.1. If yes, in which of the following activities have you participated? (CATA)
   - o Allowed DV related organizations and resources to distribute DV information to congregants, excluding synagogue bulletins
   - o Allowed DV related organizations and resources to display DV information to congregants, excluding synagogue bulletins

   9.2. If yes, how often have you allowed distribution or displaying of this information?
   - o Never
   - o Less than once a year
   - o Between once every 6 months and a year
   - o Between once a month and every 6 months
   - o Every month
   - o More than once a month

10. During your rabbinical career, have you requested flyers or posters from DV related organizations and resources to display in your synagogue?
   - o Yes
   - o No

   If no, skip to ##11

   10.1. If yes, how often have you requested flyers or posters?
   - o Never
   - o Less than once a year
   - o Between once every 6 months and a year
   - o Between once a month and every 6 months
   - o Every month
   - o More than once a month

11. During your rabbinical career, have you provided premarital counseling to congregants?
   - o Yes
   - o No

   If no, skip to #12

   11.1. If yes, how often have you provided premarital counseling?
   - o Never
   - o Less than once a year
   - o Between once every 6 months and a year
   - o Between once a month and every 6 months
   - o Every month
   - o More than once a month

12. During your rabbinical career, have you provided marital or couples counseling to congregants?

- o Yes
- o No

If no, skip to #12

12.1. If yes, how often have you provided marital or couples counseling?
- o Never
- o Less than once a year
- o Between once every 6 months and a year
- o Between once a month and every 6 months
- o Every month
- o More than once a month

13. During your rabbinical career, have you provided counseling to victims or perpetrators of DV?
- o Yes
- o No

If no, skip to #13

13.1. If yes, in which of the following activities have you participated? (CATA)
- o Counseled victims of DV
- o Counseled perpetrators of DV

13.2. If yes, how often have you provided counseling to DV victims or perpetrators?
- o Never
- o Less than once a year
- o Between once every 6 months and a year
- o Between once a month and every 6 months
- o Every month
- o More than once a month

13.3. If yes, in what percentage of these violent couples did the PERPETRATOR of violence identify as Jewish?
- o All
- o Most
- o Some
- o None
- o Unknown

13.4. If yes, in what percentage of these violent couples did the VICTIM of violence identify as Jewish?
- o All
- o Most
- o Some
- o None
- o Unknown

14. During your rabbinical career, have you provided counseling to couples currently experiencing DV?
- o Yes
- o No

If no, skip to #14

14.1. If yes, how often have you provided counseling to couples currently experiencing DV?

- o Never
- o Less than once a year
- o Between once every 6 months and a year
- o Between once a month and every 6 months
- o Every month
- o More than once a month

15. During your rabbinical career, have you provided congregant referrals to DV related agencies, resources, or organizations?
    - o Yes
    - o No

    <u>If no, skip to #15</u>

    15.1. If yes, how often have you provided DV related referrals?
    - o Never
    - o Less than once a year
    - o Between once every 6 months and a year
    - o Between once a month and every 6 months
    - o Every month
    - o More than once a month

    15.2. If yes, On a Scale of 1-5: How helpful do you believe DV related referrals to be?
16. During your rabbinical career have you provided DV related counseling to congregants?
    - o Yes
    - o No

    <u>If no, skip to end</u>

    16.1. If yes, which of the following recommendations did you make to congregants you counseled? (CATA)
    - o Refrain from providing recommendations and just listen
    - o Separate from partner
    - o Provide encouragement and/or means to prevent angering and provoking partner
    - o Divorce partner
    - o Remain in the home
    - o Receive individual counseling
    - o Devise and/or implement methods of ensuring victim's safety
    - o Continue receiving rabbinical counseling
    - o Submit to partner and pray that God will change him or her
    - o Get a restraining order
    - o Contact a domestic violence program
    - o Perform mitzvot
    - o Pursue couples counseling
    - o Consult a lawyer
    - o Attend religious services with increased frequency or regularity
    - o Contact the police for protection
    - o Forgive your partner
    - o See a medical doctor or seek treatment in an emergency room

16.2. If yes, which (if any) of the following difficulties did you experience when providing counseling to congregants? (CATA)

- o I was uncomfortable with the topic
- o I felt that I lacked information on the topic
- o It was difficult to handle the emotional demands of the congregants
- o I found it difficult to counsel them because of my opposition to separation or divorce
- o I found it difficult to counsel them because of my attitudes around DV
- o **I didn't** know about domestic violence resources in the community
- o It was difficult because of the religious doubts the victim or perpetrator expressed
- o I felt that I didn't have enough counseling training in the area
- o I found it difficult because of the lack of motivation of the victim or perpetrator to make changes

16.3. When providing recommendations to congregants, how often did recommendations include the following:

V=Very Often O= Often S=Sometimes R= Rarely N=Never U=Unsure N/A=Not Applicable

	V	O	S	R	N	U	N/A
Refrain from providing recommendations and just listen							
Separate from partner							
Provide encouragement and/or means to prevent angering and provoking partner							
Divorce partner							
Remain in the home							
Receive individual counseling							
Devise and/or implement methods of ensuring victim's safety							
Continue receiving rabbinical counseling							
Submit to partner and pray that God will change them							
Get a restraining order							
Contact a domestic violence program							
Perform mitzvot							
Pursue couples counseling							
Consult a lawyer							
Attend religious services with increased frequency or regularity							
Contact the police for protection							
Forgive your partner							
See a medical doctor or seek treatment in an emergency room							

16.4. When making decisions regarding recommendations of separation and/or divorce, what factors would influence your decision? (open ended)

17. Please use this space to discuss anything you would like to say about DV that has not already been addressed. (open ended)