

## **Family Violence and Substance Use: The Perceived Effects of Substance Use Within Gay Male Relationships**

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The purpose of this research endeavor is to examine the life situations of gay men where domestic violence was present. The current article expands on previously published works by examining respondents' perceptions of what role alcohol and other drug use plays in causing substance use-related domestic violence. Three different perceptions emerged from the data and are presented here. First, drugs and alcohol use was perceived to be causally related to the domestic violence our respondents endured. Second, our respondents believed substance abuse resulted from the violence—it was used as a coping mechanism. Finally, many respondents did not believe there was any association between substance abuse and violence. The need for further in-depth data related to the relationship between drugs, alcohol, and domestic violence is noted.

While intimate violence within heterosexual relationships has recently been at the forefront of sociological, epidemiological, criminological, and psychological research (Reiss & Roth, 1993), intimate violence between same sex couples has received far less scholarly attention. The increased attention and revised methodology used for heterosexual relationships has demonstrated the pervasiveness of violence people face at the hands of their romantic partners. Bachman and Saltzman (1995), for example, report that 29% of the violence women experience is perpetrated by an intimate (husband, ex-husband, boyfriend, ex-boyfriend). Moreover, these researchers have found that victims are more likely to be hurt in an attack by an intimate than in an attack by a stranger.

Alcohol and other drug use has been implicated as an important variable in the etiology of violence among heterosexual populations. Alcohol, in particular, has been described as an etiological determinant of violence when used in a culture that finds violence acceptable (Parker, 1995). Martin and Bachman (1997) utilized retrospective information from the National Crime Victimization Survey to ascertain the consequences when alcohol is a factor in domestic disruption. They found that the consumption of alcohol significantly increases the probability that a conflict will result in physical violence.

While much has been written with regard to the use of alcohol and/or other drug use as a factor related to domestic violence within a normative, heterosexual relationship, little has been written about substance abuse issues and violence within gay male relationships. Intimate violence between couples that happen to be of the same sex remains a largely ignored social problem. There is, however, some literature available related to gay and lesbian domestic violence (see, for example, Cruz, 2000; Cruz & Firestone, 1998; Elliott, 1996; Hamberger, 1994; Island & Letellier, 1991; Merrill, 1998; Renzetti, 1992; Schilit, Lie, & Montagne, 1990; Waldner-Haugrud, Gratch, & Magruder, 1997). What is more, for same-sex relationships, the role of traditional variables in intimate violence, such as the effects of alcohol and other drug use, has been unexplored. Despite the increasing attention to the prevalence of substance use within the gay population (see Bickelhaupt, 1995; Finnegan, & McNally, 1996; Ghindia, & Kola, 1996; Kus, & Latcovich, 1995; Weinberg, 1994), its association with violence within this marginalized group has received far less attention. This article will help to bridge the gap between these two bodies of research. How important is the use of alcohol or other substances when considering intimate violence between men? We will address these issues using perceptions of the very men involved in such relationships. Our intent is to examine how gay men involved in violent relationships perceive the role of alcohol and drugs in their battering experience.

Individual and societal level perspectives have been used to try to understand the etiology and epidemiology of interpersonal violence against intimates. Alcohol and other drug use are interesting variables to study because of their individual and social level characteristics. Substance abuse, which is an individual behavior with physiological consequences, is ultimately couched within sociocultural contexts.

We argue that, because drinking is largely a social activity, the use of alcohol has a purpose beyond the obvious intoxicating effect it promises. Its use is highly meaningful—to drinkers and abstainers alike. Alcohol-related consequences thus result not only from its intoxicating effect but also from the perception drinkers and nondrinkers alike have about alcohol and its effects (Wilsnack & Wilsnack, 1997). The factors affecting the perceptions of alcohol when it comes to violence are many and complex. These perceptions are shaped and reinforced by the way gender, race, and class are constructed in contemporary America (Wilsnack & Wilsnack, 1997).

Parker (1995) argues that the perceptions we have about the relationship between alcohol use and violence are relatively new, are relatively '(North) American,' and rooted in our nation's unique historical development. Extending the work of MacAndrew and Edgerton (1969), Parker's (1995) analysis demonstrates that cultural and behavioral factors influence how alcohol is used and the expectation people have for its effects. These expectations inevitably manifest themselves in behavioral patterns and can be clearly seen when examining groups instead of individual members. Across time and space we see that alcohol is not always associated with violence. In the United States, however, it has become an important factor. France, for example, has a relatively high rate of alcohol consumption and a high rate of alcohol related problems. Italy and Greece have high rates of alcohol consumption and relatively low rates of alcohol-related problems. Sweden and the U.S., on the other hand, have relatively lower rates of alcohol-consumption and high rates of alcohol-related problems (Grilly, 1994). The fact that the U.S. consumes less alcohol and has one of the highest prevalence rates of violence counters the argument that alcohol in and of itself leads to violence. Gender differences in the commission of violence are large but differences are almost nonexistent in alcohol consumption rates for adolescents and adult males and females in the U.S. African Americans self-report less alcohol consumption overall, yet self-report higher rates of violence compared

to Whites (see White, 1997 for discussion). Finally, studies that document that aggression peaks in adolescence before alcohol consumption begins in this population further counter the argument that alcohol is the etiological determinant of violence (White, 1997).

This empirical evidence exemplifies the importance of understanding cultural context (which includes expectations and perceptions) if we are to understand the etiology of violence. This lends credence to the important role of socioculturally informed expectations about the effects of drug use on individual behavior.

Reiss and Roth (1993) provide a good overview of the few ethnographic studies that have been performed across cultures to emphasize the multiple and diverse reactions to alcohol experienced by different societies. These different responses to alcohol clearly denote cultural and subcultural differences that cannot be ignored. Many variables beyond the psychopharmacological such as financial stress, social desirability of violence, sex role traditionalism, oppression and racism may be better suited to account for the differences we see in alcohol-related violence across time and space.

Cultural expectations dictate what substance use is supposed to do to behavior (MacAndrew & Edgerton, 1969). These perceptions are normalized and internalized by both drinkers and nondrinkers alike, so that perceived behaviors have an influence on behavioral actions. People act on perceptions. This nexus between

1. the individual-level effect of drugs and
2. the social meaning these drugs embody, creates a complicated interaction effect.

Our study adopts the assumption that people act on their perceptions. Perceptions about the effects of alcohol and other drugs, at least in part, influence and shape human behavior. It is thus important to understand the perceptions of social actors in a society where the use of alcohol qualifies drinkers for a 'time-out' period or is used as an excuse for deviant behavior and where nondrinkers look upon intoxicated persons with some degree of caution (Parker, 1995).

Emerging research is now informing us about the extent to which we as gendered beings are, in part, constructed by how we use alcohol, the expectations we have about alcohol use, and the way we think about those who use alcohol (see Robbins, 1989; Robbins & Martin, 1993; Wilsnack & Wilsnack, 1997). Power and how this power is expressed, for example, define men and manhood in contemporary America. Drinking and fighting are demonstrative of power especially for those with few economic resources—this association has been made clear in the literature on domestic violence within heterosexual contexts (Kantor & Straus, 1993). Thus we see race, class, and gender as intersectional axes of oppression, bearing down on everyday life, which include the seemingly mundane day-to-day consumption of alcohol. These factors affect our perceptions of alcohol.

The behaviors we expect with heavy drinking or binge drinking may better explain our high rates of alcohol-related violence. Ethnic/cultural, gender, and sexuality differences in drug expectations, in which little work has been done, could have significant implications for understanding alcohol use, abuse, and gender relations which include gender inequality.

The subcultural world in which openly gay men live is one of low social acceptance and approval. Meyer (1995) examines the effects of homosexuality on mental health from a 'minority stress' perspective. His findings reveal that being gay is much like living with the stigma of possessing an ethnic or racial minority status. The author concludes that mental health distress is three times more likely in gay men suffering from 'minority stress' compared to their heterosexual counterparts. This difference may be relevant to the meaning gay men place on the use and abuse of alcohol and other drugs. In other words, the

meaning and function of drugs and alcohol in the lives of gay men may serve different purposes when compared to those of heterosexual men. The unexpected consequences of this effect are unknown. This research will help to illuminate what gay men perceive is happening when they or their partners drink. Based on what we know about the alcohol-violence nexus in the United States for men, we would expect the use of alcohol to place those in relationships at some risk for violence. This is so because gay men are raised with the same cultural expectations and orientation as heterosexual men. That is, being 'manly' is not defined differently at birth for gay men (see Cruz, 2000 for a discussion related to gay men, domestic violence, and gender construction).

## METHODS

The goal of this study was to utilize qualitative research methods to explore how gay men felt about their same-sex relationships where domestic violence was present. The primary author conducted in-depth interviews with 25 men. While this is a small sample, it is an exploratory endeavor and we make no attempt at hypothesis testing.<sup>1</sup> These men were selected because they had experience with domestic violence in a same-sex relationship, and because they were at least 23 years of age. [This seems to be the age where one comes to terms with homosexuality in addition to having had some relationship experience (see Cruz & Firestone, 1998).] All respondents indicated they were gay when asked about their sexual orientation. Data were collected between September 1995 and May 1996.

Respondents were selected using a snowball sampling method and convenience sampling for interviews that lasted from one hour to one hour and a half. Contacts were made through the help of two persons working with social service agencies in the Dallas area. These two men gave the name and telephone number of the primary author to potential respondents. Additionally, the interviewer made contacts at a health club, by joining the local Gay/Lesbian Alliance, and by mentioning the study at social gatherings and gay community events. After several initial interviews were conducted, respondents would recommend speaking with friends who had experienced the same sort of violence or abuse within their romantic same-sex relationships. Interviews were audiotaped. Additionally, notes were taken during the interviews.

Data were collected in the Dallas and Fort Worth metropolitan area. Ages of the respondents ranged from 23 to 43 with the average age being 32. Educational attainment varied from an 11th grade education to postgraduate work. With regard to employment, five respondents indicated they were disabled and unemployed, while the rest were employed in various types of occupations. Race or ethnicity of the respondents was not obtained.

All except two of the respondents were no longer involved in the abusive relationship. Respondents had endured the abusive relationships from a low of 10 months to a high of 10 years. The average time out of the relationship varied from 1 week to 14 years. The average duration of the relationship was 3 years and 9 months. Lastly, all respondents indicated they were victimized and thus identified their partners as the batterer. Where the respondent indicated he was also a batterer (in one case), he said he perpetrated the violence by provoking his partner.<sup>2</sup>

Table 1 presents the sample characteristics. Of the 25 respondents, 14 persons indicated they were not substance abusers, while 11 said they were. Of their partners, 7 of the respondents said they were not substance abusers, while the remaining 18 indicated their partners did abuse alcohol and drugs. Substances that were used ranged from alcohol to marijuana and included cocaine and ecstasy (see Table 1).

TABLE 1. Respondent Characteristics Regarding Drug/Alcohol Use

Pseudonym	Age	Occupation	R use		Partner	
			Drugs?	Which?	Use Drugs?	Which?
Anthony	43	Restaurant Business	No	N/A	Yes	alcohol
Billy	30	Clerical	No	N/A	No	N/A
Brad	23	Leasing Agent	No	N/A	Yes	marijuana, cocaine
Chris	26	Disabled/Unemployed	Yes	alcohol	Yes	alcohol, cocaine
Clyde	25	Customer Service Rep.	No	N/A	Yes	alcohol
Danny	36	Fashion Designer	Yes	alcohol	Yes	alcohol
David	34	Disabled/Unemployed	No	N/A	Yes	alcohol, cocaine, marijuana
Henry	25	Leasing Agent	Yes	alcohol, cocaine	Yes	alcohol, cocaine
Homer	41	Assistant Sales Clerk	No	N/A	Yes	alcohol, marijuana, ecstasy
Jim	32	Disabled/Unemployed	Yes	alcohol, marijuana	No	N/A
Joe	33	Unemployed	Yes	alcohol	Yes	alcohol
John	34	Banker	No	N/A	Yes	alcohol
Mark	25	Health Insurance Industry	No	N/A	No	N/A
Martin	40	Hair Stylist/Massage Therapist	No	N/A	Yes	alcohol
Matthew	39	Self-Employed	Yes	marijuana, crystal methadone	Yes	alcohol
Michael	31	Hair Stylist	Yes	alcohol	Yes	alcohol
Nick	35	Disabled/Unemployed	Yes	marijuana	Yes	marijuana
Oscar	35	Horticulturist	No	N/A	No	N/A
Randy	26	Software Engineer	No	N/A	No	N/A
Robert	30	Collections Manager	No	N/A	No	N/A
Rodney	37	Disabled/Unemployed	Yes	alcohol, marijuana	Yes	alcohol, marijuana
Rudy	34	Business Systems Analyst	Yes	alcohol	Yes	alcohol
Sam	40	Sales Engineer	No	N/A	Yes	alcohol
Toby	31	Teacher	No	N/A	Yes	alcohol
Tom	32	Unemployed	Yes	marijuana, ecstasy, cocaine	No	N/A

This study is exploratory in nature, so that respondents were asked about their definitions of domestic violence and abuse. Thus, the interviewer did not impose definitions on them. Moreover, persons were queried about the specific types of violence or abuse experienced and they were asked to relate a specific violent or abusive episode.<sup>3</sup> The interview guide consisted of 45 questions. This served as a starting point for the discussions between the interviewer and the respondent. Frequent probes using follow-up questions provided depth and understanding to responses.

All respondents were guaranteed confidentiality. Precautions were thus taken in the presentation of the data, as pseudonyms were given to the respondents. Consent was obtained for all participants in the study to audio-record the interview and to take notes.

## FINDINGS

Persons interviewed provided information related to substance abuse that was easy to classify into one of three emergent themes. Specifically, 13 of the 25 respondents self-reported that they thought alcohol was a precipitating factor (where they related a drinking episode that seemed to serve as a disinhibitor and enabled violence or where money spent on drugs or alcohol led to an abusive episode); three respondents believed that alcohol or drugs were used as a result of domestic violence (i.e., and thus provided an escape from a dysfunctional relationship); lastly, one respondent stated that the abuser was violent regardless of the ingestion of alcohol or drugs.

### Alcohol as a Precipitating Factor

Related to the literature stating that substance abuse could be a precipitating factor to violence within a relationship (see Flanzer, 1993; Yegidis, 1992), one respondent, we call Tom, stated that he abused marijuana on a regular basis, ecstasy "recreationally," and cocaine rarely. Additionally, he said,

. . . that's what sparked the whole thing. He found out I was doing drugs and partying behind his back . . . he found out about it and that's what started the whole thing. That's what he feels gave him license to begin all this [the relationship violence]. That's exactly the case.

Rodney stated "we were usually drunk when it happened and he would usually strike me" while Michael concurred with ". . . most of the time anything [violent] happened when we both had been drinking" and Rudy added "There wasn't a whole lot of [violent] episodes but we were usually drunk when it happened. . . ." Furthermore, Sam said that while he was a social drinker, his partner was an alcoholic who would become abusive after becoming intoxicated. When asked to describe a violent or abusive episode, he said the following:

Okay, the main thing was we'd go out socially and he'd be a nice person, then he'd get drunk, then he'd just get belligerent. Then a lot of times it would escalate to, like, "Well, I'm going to leave. You're not paying me any attention." And then it goes from there and he'd come back and then he'd go, "Well, I'm ready to go." And then he'd want to walk home or whatever or even try to get out of the car while [I'm] at a stoplight. [And] I'd have to go follow the way back home and try to pick him up. And then when we'd get home all hell would break loose because every little thing would come up and we'd go at it. And then we'd calm down the next day and we didn't remember half these things. We'd act like

nothing happened. The alcohol was doing it. He was one of those little shits that wanted to fight everybody when he got drunk. He was 50 times bigger than he normally was with the alcohol.

Of his partner, John said he was a functioning alcoholic, so that "he's able to function in the life he's built for himself." Specifically,

... he'd start drinking on Wednesday, be pretty drunk Thursday, soused on Friday and Saturday. Sunday, after he's had some Screwdrivers and Bloody Marys he'll stop, but then on Monday, he would tell me he was coming down with a cold and wasn't feeling well. But in reality it was a hangover, so on Monday he would lay in bed all day or lay on the sofa and watch TV and then after working I would sit at home and make what we called "baby food." You know, make him macaroni and cheese and stuff 'till he got over his hangover. Tuesday he would say, "I feel a little better. I think I'm getting over my cold." Wednesday, "I'm feeling so good, I think I'll have a drink." So it'd start all over again.

John also described instances related to the partner's alcoholism whereby he would receive phone calls from neighbors asking him to come pick up his partner because he was intoxicated. Additionally, they would get thrown out of restaurants because of the drunken behaviors exhibited by the partner.

When asked about the frequency of violent or abusive episodes, Homer responded that they occurred "As long as there was alcohol."

Joe illustrates another way in which alcohol was a precipitating factor with this sample of gay men. He indicates that fights would ensue when he (the victim) would drink and his partner (the perpetrator) would become angry. For instance,

We went out to the bar. I got too drunk. It pissed him off. He stayed out all night and went home with somebody. And I went down to the bar the next morning and found him there. And I found him there with the guy he had gone home with the night before . . . so we got in a fistfight.

Clyde also mentions fighting because of the amount of money that was used for drugs rather than necessities. He mentions a time when their car was repossessed due to the misuse of money.

He told me he had made the payment, because I gave him the money to make the payment. And he didn't make the car payment and he didn't pay the apartment rent. He had been out drinking and doing drugs and spent the money, so I had to go to organizations to get our bills paid and we ended up in a really bad fight to where I had a broken arm and he had a broken leg. And I did both.

Chris shares the same sort of story when he says,

And if there wasn't enough money around the house and he couldn't see that his drinking and doing drugs was the reason, then there was another fight.

### Substance Abuse as an Effect

Gelles (1993) indicates that alcohol may be utilized as a coping mechanism. We found this to be the case with several respondents, as Matthew stated drugs and alcohol were present in his relationship. The probing question posed at this point was "What role did the drugs and alcohol play? You all would fight because he was drunk and then you would do drugs to escape . . . ?" His reply was:

Just to . . . Well, before I moved down here I was heavy into drugs and that was one of the reasons I moved down . . . to get away from it all. And then I met him and one thing led to another and I got in with some people that were party animals and doing drugs, and that sort of thing, but . . . Yeah, to escape, to like tune him out, I'd just get blown away at night.

This was followed up with the questions: "Were these ever reversed? Did you ever drink to escape what was going on at the house, or maybe fight because you were doing drugs instead of the other way around?" His reply was:

The best I remember, there were plenty of nights, that he would come in and he'd drunk his dinner. And I knew what was going to happen. And it's not that I did or didn't do anything, it's just the Jeekyll/Hyde thing would start. And he would take off with different personalities when he was drunk. And so when I saw that, I'd fire up a joint or something just to go ahead and start tuning it out. And then it just went from bad to worse.

Henry and Clyde both document substance use as a cause and an effect. By way of illustration, Henry states,

We were arguing about going out or doing drugs or something. I don't remember. And we were drunk anyway and he said something that really pissed me off and I turned around and I punched him and the next thing I know I'm being thrown around the room. He threw me into the wall face first and it tore my eye, my face under my eye.

He also said "Most of these fights were because of cocaine, after extended periods of use," which serves to indicate that while they may have been drunk during some of the fights, others happened due to issues related to the prolonged use of cocaine.

Additionally, Clyde said

Well, he would drink a little bit and he would come home and if I wasn't awake he would wake me up to fight. If I didn't go out and drink with him, he'd get angry and we'd fight. And if there wasn't enough money around the house and he couldn't see that his drinking and doing drugs was the reason, then there was another fight. And this got to where it was a couple-of-times-a-month ordeal. I mean a lot of trips to the emergency room.

### **Domestic Violence Regardless of Substance Abuse**

The last relationship to be explored is the actual lack of a relationship between the abuse of drugs or alcohol and domestic violence. This supposition would be held where respondents cite the occurrence of violence that is unrelated to the abuse of drugs or alcohol. In a study of gay men, one might offer gender role socialization and the acceptability of violence and aggression to indicate one's anger as a possible explanation for the occurrence of gay male domestic violence, where alcohol and drug use do not seem to play a causal role as perceived by the respondent (see Cruz, 2000).

Several people have noted that the relationship of alcohol and drugs to domestic violence is not clear (see Bushman & Cooper, 1990; Collins & Schlenger, 1988; Farley, 1996; and Gelles, 1993). Related to this literature, when asked about whether or not he or the partners were substance abusers, Rodney said, "Yes, but no matter . . . drugs or no drugs. It's not under the influence because we had a fight today and nobody was under the influence. Drugs have nothing to do with it." He goes on to state that his partner is ". . . naturally like that [violent]. He doesn't need drugs. As a matter of fact, under the influence of alcohol he could be a little nicer." This concurs with the conclusion drawn by Bard and



Zacker (1974) that the role of alcohol in a violent relationship is often exaggerated (see also Island & Letellier, 1991). Specifically related to the gay male community, Farley (1996) indicates that the majority of his respondents (60% of 119 gay men) were not alcohol or drug abusers.

## CONCLUSION

The goal of this article was to expand on previous work related to gay male domestic violence, in addition to contributing to the literature related to family violence and substance abuse. Specifically, we attempted to reanalyze data regarding gay male domestic violence within the framework of substance use.

Like Gelles (1993) we observed that factors other than one's addictions to alcohol and drugs play a part in a violent relationship. Previous work has indicated that the construction of masculinity within the context of this relationship may have an effect on a gay man's use of violence or abuse against his partner (see Cruz, 2000). Furthermore, respondents in Cruz and Firestone (1998) indicated one's socialization in a violent home is related to domestic violence.

Much of the information related to substance use and domestic violence seems to present a constructionist point of view. For example, Van Hasselt, Morrison, and Bellack (1985) indicate that implicit in relying on interview data is the perception of the respondent in relation to the substance use of the perpetrator. In their case, they question the wives' perception of their abusive husbands' alcoholism. This seems to be an important point. Likewise, Gelles (1993) states that the more accurate portrayal of a family violence incident by a police officer or social worker occurs if alcohol is involved. As authors of this article, we rely on the perceptions of substance abuse presented by the respondents. This is an obvious limitation to the study as these perceptions may or may not accurately reflect use of alcohol or drugs and the resulting incidents. Respondents' perceptions are, however, an important aspect of this research, and we believe serve as a strength as well. Perceptions and expectations influence behavior profoundly. Moreover, the perceptions reported here are based on their reality and how the respondents have come to understand their world. The norms and mores they have adopted over the course of their development influence this understanding. Future research needs to disentangle these varying environments to better understand how different constructions of masculinity and other components of identity influence behavioral outcomes.

It remains unclear whether the pharmacological effects of alcohol alone or cultural expectations of alcohol contribute to violence. It is most likely true that both influence the probability of aggressive behavior. Variables never exist in isolation in our highly complex and interactive societies. Empirically, many diverse variables have undeniable additive effects. As we have mentioned, we do not know if alcohol directly induces aggression and violence. Most people do not commit violence against others after imbibing alcohol. In fact, only about half of reported violent incidences involve alcohol (Greenberg, 1981). It is also true that the consumption of alcohol and subsequent violence never occur in a vacuum. Violence and alcohol use occur in homes and communities touched by heterosexism, homophobia, unemployment, poverty, powerlessness, and racism. Other homes are colored by their cultural views on domestic violence, effects of alcohol, drinking styles, and communication styles. These issues are worthy of continued investigation and need to be considered when interpreting our own work and the

work of others. Whether or not it is pharmacologically or expectation based, a common pattern in the research seems to suggest that the amount of alcohol consumed is of relevance.

Our study is a step toward understanding alcohol-related violence as it is experienced by a neglected social group in hopes of more fully comprehending the underlying roots of violence. Findings include respondents' experiences with substance use and violence in three scenarios: drugs and alcohol as contributors to domestic violence; substance abuse resulting from violence; and a lack of an association between substance abuse and violence. There is a dire need for more scholarship in the area of alcohol, perceptions about its meaning and violence, especially within understudied populations such as sexual minorities.

## NOTES

<sup>1</sup>It should be noted that there was difficulty in finding respondents who actually defined their violent relationships as such. Many men would tell of violent fights and dismiss them as a normal and expected gendered set of behavior (see Cruz, 2000 for more information). For these reasons as well as the often hidden nature of gay and lesbians, and the fact that this is an exploratory endeavor, the primary author only interviewed 25 respondents.

<sup>2</sup>Only 20 of the 25 respondents were asked this question because initially it was a question used to probe, but ended up being asked of every respondent after the fifth.

<sup>3</sup>The questions guiding this study were:

1. How do you define domestic violence? How do you define abuse?
2. Describe the kind of domestic violence or abuse you have encountered in same-sex relationships.
3. Why do you think these forms of domestic violence or abuse occur in same-sex relationships?

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