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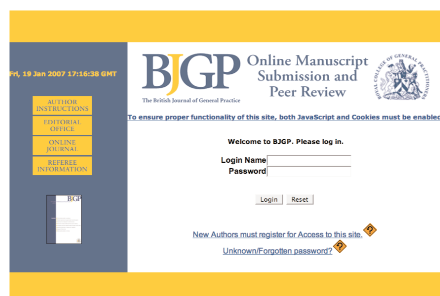

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Mike Fitzpatrick

Domestic violence in context

The discussion of domestic violence, now relabelled ‘intimate partner violence’, that has assumed such prominence in this — and other — medical journals suffers from a lack of historical and sociological perspective. The concepts of ‘abuse’ and its presumed sequelae of ‘low self-esteem’ and ‘post-traumatic stress syndrome’ are taken at face value instead of being understood as recently constructed categories that provide a framework for the reinterpretation of personal experience at a particular historical moment.

Over the past decade an obsession with abuse as a pervasive feature of all intimate relationships has risen to acquire an extraordinary prominence in Western society. It is now widely accepted that diverse forms of intimidation and exploitation are commonplace — if not universal — in relationships between sexual partners (including same sex relationships and male as well as female victims), between adults and children (child abuse, especially sexual abuse, not forgetting ‘elder abuse’), even among children (bullying, pathological peer pressure). Abusive relationships of all sorts provide the themes for a vast outpouring of novels, plays, films, documentaries — not to mention court cases and news reports. The vogue for wallowing in degradation reflects a misanthropic view of humanity and a pessimistic outlook towards the future.

Two recent childhood memoirs offer a valuable contrast. Bryan Magee tells the story of his upbringing in East London in the 1930s; John McGahern grew up in rural Ireland in the 1940s and 1950s.[1,2] Both are finely observed and elegantly told stories of childhood and family life. Both are also deeply moving accounts of childhood trauma and neglect. Both writers detail the pervasive violence of their respective societies and relate their experiences of violence in the home, at school and in the wider community. Both are also accounts, not of ‘survival’ — the highest aspiration of the contemporary culture of abuse — but of transcendence.

If the violence that characterised family life in the recent past is shocking, so too is the level of emotional ill-treatment. The memoirs of TV chef Nigel Slater and Beatles biographer Philip Norman emphasise the callous neglect of children in middle class English families in the 1950s, when it seems that many parents behaved without regard for the mental states of their children.[3,4]

While the worlds described in these memoirs are recognisable, they also seem strikingly remote. What is remarkable is the dramatic decline in the scale and social acceptability of violence in the home over the course of the post-war decades. This trend was accompanied by a growing recognition of the emotional needs of children — reflected in controversies about maternal deprivation and institutionalisation and the steady retreat from corporal punishment in schools and in the home. No doubt the causes of these major cultural shifts are complex. In his history of the 20th century, Eric Hobsbawm writes of the social and cultural ‘revolutions’ that took place between 1945 and 1990, characterised by rising living standards, greater sexual equality and the decline of patriarchal authority in the family.[5]

In short, it appears that the development of more civilised relations between the sexes and the generations was the consequence of the wider social progress that occurred in the second half of the 20th century. By contrast, over the past decade, not only has social progress apparently ceased, but in the prevailing climate of post-modernist cyncisim, the very concept has been repudiated. At a time when society has lost faith in the possibility of collective solutions to personal and social problems, the individual is reduced to the status of victim whose survival depends upon professional recognition and support.

The project of medicalising ‘intimate partner violence’ can best be understood as a morbid symptom of the culture of abuse. Far from helping vulnerable individuals, it is likely to compound their diminished autonomy and reinforce their dependency. The lesson of history is that improving the quality of human relationships is a social not a medical project.

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