THE EFFECT OF INTERPERSONAL RELATEDNESS ON PARTNER ABUSE AS MEDIATED BY HOPELESSNESS AND DEPRESSION IN AFRICAN-AMERICAN MALES

by
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A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy (Nursing) in The University of Michigan 1998

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Dedicated to my family, Charlotte, Lesley, Mary and B.J
ACKNOWLEDGMENTS

Thanks are due to the many individuals who helped directly and indirectly in the preparation and execution of this work and throughout the pursuance of my doctoral studies. To my Chairperson, Dr. Reg Arthur. Williams, who read my many drafts, and helped me reformulate ideas into chapters, and guided me in conceptualizing and analyzing the data, thank you for the many hours of your time and expertise.

From the beginning of my application into doctoral studies, Dr. Patricia Coleman-Burns has been tireless in mentoring and assisting in this project and my entire education at the University of Michigan. She has served as my advocate and supporter throughout my studies. Thank you for the many hours you put in with me and for me. Thanks to Dr. Bonnie Hagerty for agreeing to serve as committee member and reader. Thanks most of all for introducing me to the concept of sense of belonging and lending me your expertise and wisdom as I applied the sense of belonging instrument to this study. Thanks to Dr. Daniel G. Saunders for the many hours spent in assistance with theoretical and statistical consulting to put this dissertation together. Dr. Williams and Dr. Saunders were instrumental in providing evaluative feedback and critique as the path models evolved.

To Dr. Dorothy Booth, who helped me with many hours of editing, consultation, and encouragement, thank you for your willingness to share not only your expertise, but your friendship also.

I am grateful to the Horace H. Rackham School of Graduate Studies of the University of Michigan for the Rackham Merit Fellowship and the King-Chavez-Parks
Fellowship that supported me throughout my doctoral study. I also thankfully acknowledge Drs. Shake Ketefian, Bonnie Metzger and Barbara Therrien for their assistance in applying and successfully competing for the Neurobehavioral National Research Service Award sponsored by the National Center for Nursing Research during my first year of doctoral studies. To Drs. Elizabeth Allen, Susan Boehm, and Cornelia Porter, who not only welcomed me to the school but also material and instructional support, I thank you.

Many thanks to Probation Officer Anita Smith and the 14-A District Court personnel for their efforts towards eradicating family violence and for their efforts in providing the assistance accessing the subjects. Special thanks to 14-A District Court Chief Judge Betty R. Widgeon and Washtenaw County Probation Officer James Widgeon for their consultation and the many hours that were involved in helping me make essential contacts, develop a background to understand the criminal justice system and conduct the preliminary theoretical work for the study.

I am grateful to my parents Theodore Mitchell Rankin and Bertha M. Rankin, and my sisters, especially Rena I. Camp and Betty R. Widgeon for their love, professionalism, modeling, and mentoring throughout my life with their continual spiritual, mental and financial support, vision and their belief in me.

I am most grateful to my wife, Charlotte R. Rankin, my daughters Lesley TaRaye, and Mary Alice and my son, Larry B. Rankin II, for their love and understanding, and for allowing me to devote the many hours of time needed for the study which were rightfully owed to them. I love you and also thank you for the courage each of you demonstrated in
the uprooting and following as we journeyed together from state to state during this educational quest.

Finally, and most importantly, I thank God for His loving kindness toward me in allowing me the opportunity to effect some small measure of change in the men involved in the study and their families, and for His ever present guidance through this sometimes arduous undertaking.
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CHAPTER 1

PROBLEM AND PURPOSE

Problem Statement

Thirty years ago, the research on abusive relationships was too limited to generate any substantial controversy on why partner abuse occurs (Gelles & Loseke, 1993). Most of the empirical studies related to partner abuse emerged only in the last three decades. There are several reasons for this delay in research development. According to Gelles and Loeske, one of the major controversies among scholars centered on defining the field for abusive behavior studies. Corvo (1993) noted that some researchers have adopted a particular theory in their study of partner abuse, but few have agreed on what needs to be studied. Since the landmark national studies on domestic violence by Straus and Gelles (1980, 1990), subsequent research has continued to delineate the variables that need to be studied in relation to partner abuse. These variables include attachment, social support, sense of belonging, hopelessness, and depression.

Corvo (1993) stated that partner abuse research is an emerging area that needs continued exploration. This exploration needs to generate a definition of the variable of partner abuse itself. In many studies, concepts of family abuse, marital abuse, wife abuse, domestic violence, and partner abuse are used interchangeably but often are describing the same or similar phenomena. Problems also emerge when trying to
compare studies that are based on the assumption that partner abuse is the result of male domination, power, and control. For example, there may be skepticism about the same factors contributing to partner abuse in same sex unions. In this study partner abuse is defined as the actual or attempted use of injurious physical, psychological, or sexual tactics carried out by one person in an interpersonal relationship.

Problems may arise with conceptualizations, measurement, and methodology when comparing or attempting to replicate partner abuse studies. For example, Dutton and Stachan's study (1987) and some of the more recent studies (Stosny, 1993; Dutton, Starzomski, & Ryan, 1996) have focused on interpersonal relatedness variables to explain partner abuse. Stosny used an attachment framework in a study regarding treatment for abusers. That sample was composed of 31% African-American males. However, interpretations from the data in that study may be misleading if one attempts a replication study without taking into consideration how attachment concepts may be different from samples where African-Americans comprise almost none of the sample or comprise the majority of the sample.

Furthermore, Lockhart and White (1989) were concerned that there was a shortage of African-American respondents in partner abuse studies. The authors emphasized that family life among African-Americans has been studied and historically has been found strong and resilient in the face of almost constant external threats. However, few empirical studies have been conducted on the extent and nature of violence between marital partners in the African-American community. According to Lockhart and White, most studies on partner abuse that included African-American male subjects have involved comparative analyses across racial groups with little or no examination of
patterns within groups. Lockhart and White also suggested that most data collected on partner abuse in African-Americans was so limited that meaningful generalizations were not possible.

**Purpose**

The purpose of this study was to test the direct and indirect effects of interpersonal relatedness and affect on abusive behaviors in African-American men arrested for partner abuse. Interpersonal relatedness variables studied include attachment style, social support, and sense of belonging. Affect variables studied include hopelessness and depression. This study specifically examined the relationship between interpersonal relatedness and partner abuse as mediated by affective states of hopelessness and depression in a population of African-American males (See model on page 11).

**Background to the Problem**

Researchers have focused on various cognitive and affect states to explain partner abuse behaviors (Dutton, 1995; Hamberger & Hastings, 1988). Dutton, who used an attachment framework, found that the inclusion of variables such as personality and anger explained a significant amount of the abusive behavior. Few studies have been conducted to explain partner abuse in sub-groups in our country such as African-American males who have been arrested for physically abusing their partners.

Character traits that are formed in childhood such as insecure attachment styles may limit the African-American males’ ability to perceive attachment to and support from personal and public sources (Dutton, Ginkel, & Starzomski, 1995; Lopez, 1996).
Ucko (1994) examined cultural ideologies to better understand violent behaviors between spouses. The author considered African and American gender role differences in relation to violence in African-American households. Ucko posited that cultural and economic differences exist between some African cultures and the African-American culture so that both male dominance and female subservience means something different to each of the groups. Ucko reviewed historical studies of some African matriarchal societies where females often held economic and political power and contrasted these societies with Western societies where women are lacking in these types of power. The author noted that the effects of slavery in this country, including poverty and discrimination, might have created lasting psychological scars. In addition, Ucko indicated that after years of enduring slavery, many African-American males modeled the oppressors’ tactics of dominance and aggression at home. Ucko also noted that since African-American males lacked true economic power and status compared with their Euro-American counterparts, some of the former substituted extramarital sexual conquest for male status which further stressed their relationship with others and contributed to more violence. Ucko suggested that these behaviors may be related to an “emotional deprivation” in African-American males who may (a) have been torn by incompatible goals, family harmony, respect for independent women, reciprocity and interdependence between spouses and at the same time, (b) operationalized sexual experience as a symbol of masculine status and power. The latter showed the males’ preference for subservience of women and their patriarchal dominance, being the major financial provider in the home. The author theorized that a relative emotional deprivation might exist between the
expectation and accomplishment of these goals. The author states that this emotional deprivation may be expressed in violence and high rates of spouse abuse.

Given that persistent attachment bonds may influence partner abuse, some studies have focused on types of attachment bonds which are theorized as being developed early in life and persisting across the lifespan. Bartholomew and Horowitz (1991) identified four attachment styles: (a) secure, (b) preoccupied, (c) dismissing, and (d) fearful. Ainsworth, Blehar, Waters, and Wall (1978) identified a secure attachment style and an insecure style, with the latter style subcategorized into avoidant and anxious/ambivalent styles. Lopez (1996) noted three different types of attachment behavior: (a) secure, (b) anxious-ambivalent, and (c) avoidant behaviors. However, Feeney, Noller, and Hanrahan (1994) noted five factors based on these three types of attachment behaviors thus refining and specifying the essential behaviors in attachment. The factors were (a) confidence; (b) discomfort with closeness; (c) need for approval; (d) preoccupation with relationships; and (e) relationships as secondary.

Given the dependency issues in attachment bonds, Dutton and Stachan (1987) proposed that abusers have difficulty dealing with intimacy, dependency, and jealousy. Murphy and O’Leary (1993) posited that higher frequencies of psychological and physical violence would be related to violence in the family of origin of the abuser. In addition, they proposed that abusers would display higher rates of personality disorders. They found that severe childhood physical abuse was associated with higher rates of personality disorders and other psychopathology.

Dutton, Ginkel, and Starzomski (1995) proposed that children who were abused by the family of origin developed shame-proneness, which is related to the anger and
abusiveness displayed by male partner abusers. The possible sources of the shame-proneness include: (a) public scolding, (b) parental disciplinary punishment that was perceived by the child as unjustified; and (c) generic criticism. Dutton et al. stated that these parental actions created shame through global attacks on the self. Absence of parental affection and perceived parental coldness produced an unstable self that experienced emptiness and relied on others for fulfillment (Dutton, Starzomski, & Ryan, 1996). Batgos and Leadbeater (1993) linked attachment styles to depressive disorders, including bipolar illnesses and major depression. These researchers proposed that an anxious-ambivalent attachment style would lead to interpersonal dysphoria, and preoccupation with relationships, resulting in individuals who idealizes others and who are sensitive to rejection. In their study with 136 females, anxious-ambivalent and avoidant attachment was linked to self critical dysphoria while avoidant attachment styles also led to distancing in relationships, hostility, sensitivity to blame, and low levels of perceived support.

Social support is the second interpersonal relatedness variable in this study. Individuals’ perceptions of their social support system are developed through the social bonds established and maintained in intimate, individual relationships, networks and/or community attachments (Lackey & Williams, 1995). Social support has been defined in various ways by different researchers. Social support is defined in this study as the presence of others, and/or material and psychological resources which are provided through social ties with other individuals, and groups (Lin, Simeone, Ensel, & Kuo, 1979).
The perception of belonging to some group is the third interpersonal relatedness variable focused on in this research. In preliminary work, Rankin and Williams (1997) proposed that there may be a link between sense of belonging and partner abuse behaviors. It is important to study how the different variables associated with interpersonal relatedness co-vary in partner abuse.

The link between partner abuse and interpersonal relatedness is likely to be mediated by hopelessness and depression. Hopelessness has been found to be representative of both affective and cognitive states. Farran, Herth, & Popovich (1995) described hopelessness as a way of thinking, feeling, and a way of behaving. The component of hopelessness was described as being discouraged or de-energized. During periods of hopelessness, people not only feel despair, but their thinking is also impaired. They often have difficulty solidifying plans and understanding alternatives to conflict resolution. Gottschalk, Fronczek, and Buchsbaum (1993) found that cognition and memory, language and perception, and visual and emotional functions are all involved in cerebral representations of both hopefulness and hopelessness. NANDA defined hopelessness as “a sustained subjective emotional state in which an individual sees no alternatives or personal choices available to solve problems or to achieve what is desired and cannot mobilize energy on own behalf to establish goals” (Carpenito, 1987, p.55).

In addition to interpersonal relatedness and affect variables, researchers have examined other correlates of partner violence (Camper, Jacobson, Holtzworth-Munroe, & Schmaling1988; Holtzworth-Munroe, Smutzler, & Bates, 1997). Holtzworth-Munroe and Stuart (1994) reviewed typologies of partner abusers identified in earlier studies and proposed a developmental model of marital violence. In one of the dimensions proposed
by Holtzworth et al., the generality of the violence, alcohol, anger and depression were found to be associated with psychopathology and personality disorders. They identified three subtypes of male partner abusers. These were: (a) the family-only partner abuser or those males who committed violence only against family members, (b) the dysphoric/borderline partner abuser who is psychologically distressed, emotionally violent, and may show evidence of borderline personality characteristics and (c) the generally violent, antisocial partner abuser who is the most likely to have an antisocial personality disorder. Other researchers examined whether hopelessness and depression played a important constituent of partner abuse.

Abraham, Metalsky, and Alloy (1989) reconstructed a theory of depression called hopelessness depression. This theory proposed that a proximal and sufficient cause of depression is hopelessness. Campbell, Kub, Belknap, and Templin (1997), who examined predictors of depression in battered women, reviewed the literature on the effects of depression among racial and ethnic groups. This team suggested that sociodemographic characteristics and the social context combined with physical abuse was differentially related to depression within racial or ethnic groups among victims, but no findings were reported showing the effects of depression among the abusers themselves. The question of whether hopelessness and depression mediate interpersonal relatedness and partner abuse remains unanswered, especially within minority populations.

Priority should be given to specific aspects of partner abuse research such as intra-racial experiences, with inclusion of samples composed of a majority of African-American subjects. Few peer-reviewed studies have been conducted with sufficiently
large samples from this population. While African-American men are the focus of only a small percentage of studies, they are disproportionately represented in partner abuse cases. Straus, Gelles, and Steinmetz (1980) reported in a nationally representative sample that 11% of African-American women as compared with 3% of Euro-American women were victims of partner abuse. Further analysis revealed that the difference could be explained by income (Cazenave & Straus, 1976).

A goal of this study, then, is to determine if hopelessness and depression are mediators between interpersonal relatedness variables and partner abuse in a population of African-American males. Recursive path models (see Figure 1) are proposed in this study for the physical, psychological, and sexually abusive behaviors identified from the literature. Divisions of the MWA are for exploratory reasons. This path model as illustrated in Figure 1 shows the proposed relationships between interpersonal relatedness variables of attachment styles, social support, and sense of belonging and the partner abuse behaviors (i.e., physical, psychological, and sexual) as they are mediated by hopelessness and depression states. Direct and indirect links between attachment, social support, and sense of belonging are shown with partner abuse. The lines in the path models represent the proposed direct and indirect links of the interpersonal relatedness variables and affect states of hopelessness and depression depicted as mediators of abuse to partner abuse. Following are the hypotheses proposed for the study.

**Hypotheses**

The following hypotheses proposed for the study were tested in a group of African-American males arrested for partner abuse:

**Direct links between interpersonal relatedness and partner abuse**
1. Insecure attachment styles will be related to an increased severity and severity-weighted frequency of partner abuse.

2. Perceived decreased social support will be related to an increased severity and severity-weighted frequency of partner abuse.

3. Decreased sense of belonging will be related to an increased severity and severity-weighted frequency of partner abuse.

**Indirect links between attachment and partner abuse**

4. The effect of insecure attachment styles on severity and severity-weighted frequency partner abuse will be indirectly mediated by hopelessness.

5. The effect of insecure attachment styles on partner abuse will be indirectly mediated by depression.

**Indirect links between perceived social support and partner abuse**

6. The effect of perceived social support on severity and severity-weighted frequency partner abuse will be indirectly mediated by hopelessness.

7. The effect of perceived social support on severity and severity-weighted frequency partner abuse will be indirectly mediated by depression.

**Indirect links between sense of belonging and partner abuse**

8. The effect of sense of belonging on severity and severity-weighted frequency partner abuse will be indirectly mediated by hopelessness.

9. The effect of sense of belonging on severity and severity-weighted frequency partner abuse will be indirectly mediated by depression.
Figure 1.1 Proposed model of the effect of interpersonal relatedness as mediated by affective states on Partner Abuse

Legend: Partner Abuse refers to physical, psychological, and sexual abuse. Each number on the arrows refer to the hypothesis number. X1, X2, X3-Cognitive states X4, X5- Depressive Affective States X6- Partner Abuse
CHAPTER 2

LITERATURE REVIEW

This chapter reviews studies from the past three decades that focused on relationships among partner abuse, attachment, social support, sense of belonging, hopelessness and depression. In particular, this review concerns itself with studies that addressed the nature and significance of attachment, social support, sense of belonging, hopelessness and depression in relation to partner abuse.

Partner Abuse

For the purposes of this research, partner abuse is conceptually defined as the actual or attempted use of injurious physical, psychological, or sexual tactics carried out by one person in an interpersonal relationship. The abusive actions are intended to cause physical or emotional pain or injury to the other person in the relationship. Intent is defined as a state of mind that directs the abusive person’s actions toward a specific object. Conceptual and operational definitions have been developed to allow assessment of severity and types of violence in relationships independent of the perpetrator’s awareness. Defining partner abuse is especially important when researchers are studying behaviors of individuals whose value systems encourage them to use physical, psychological, sexual, or verbal acts with intentions other than these abusive behaviors mentioned above.
Partner abuse has been studied using psychological frameworks that assume there are fundamental needs that are unmet in abusive individuals (Bowlby, 1982; Horowitz, 1991; Lopez, 1996). Behavioral psychological theories contend that partner abuse is a learned, rather than innate response to perceived threats in the relationship (Bandura, 1993). Researchers working from a feminist perspective noted the significance of a patriarchal society on this phenomenon (Dobash & Dobash, 1979; Sonkin, Martin, & Walker, 1985; Campbell, McKenna, Torres, Sheridan, & Landenburger, 1993; Wilson & Daly, 1993; Yllo, 1993; Campbell, Kub, Belknap, & Templin, 1997). Wilson and Daly argued that the violent rages of husbands are exhibited in different ways cross-culturally, but reflect an evolved sexual proprietoriness and perceived sexual entitlement among males in general.

A similar perspective taken in partner abuse research is that social expectations are constructed solely for the purpose of creating and maintaining male power and control within the family and society (Dobash & Dobash, 1979). This view of the male's need to maintain power and control has been expanded (Yllo, 1993); that is, men perceive a sense of entitlement or have the belief that it is their right to control the lives of their female partners and women in general. According to this view, male partner abusers consciously manipulate and control women to ensure they get their way. This model of power and control is pervasive in the partner abuse literature. Yet, concepts of power and control in reference to partner abuse may have different meanings when used to reflect views of men and women of minority cultures compared to their counterparts from the dominant culture in our society. Straus et al. (1980) suggested that violence by African-
American males might be an attempt to compensate for decreased resources by mirroring aggressive images of power from which they were deprived.

The issue of powerlessness also was raised by Taubman (1986) who noted that males were being socialized with much stricter role expectations that punished men for deviation from the norm. They are "shamed," which leads to powerlessness, which can, in turn, lead to compensatory violent and abusive behaviors. Dutton, van Ginkel, and Starzomski (1995) also studied the role of shame-proneness and feelings of guilt in abusers. The researchers examined shame and guilt-producing actions that made the respondents feel unloved in the family of origin. These actions included: (a) public humiliation by the parents, (b) random punishments, and (c) parental treatment that affected the whole self. The researchers found significant relationships for recollections of shaming actions by parents on adult anger, abusiveness, and a borderline personality organization.

Allen et al. (1989) noted that African-American males who battered their spouses were found to have dependency conflicts, fear of intimacy, inability to express emotions, and spouse-specific unassertiveness. The authors stated these characteristics were related to African-American men having great needs but lacking the means to satisfy those needs. In the present study with African-American males, partner abuse is studied from a combined interpersonal relatedness framework of attachment, social support, and sense of belonging. Theories of partner abuse which fall under an attachment theoretical framework assert that abusive behaviors committed by perpetrators are responses to real and imagined threats to the attachment bond. Social support theories look at the effects of social support in increasing or decreasing partner abuse through the strength of the
social bond. Sense of belonging has been studied much less as it relates to partner abuse and is proposed as another link in understanding the phenomenon of partner abuse.

**Attachment**

Attachment is "the stable tendency of an individual to make substantial efforts to seek and maintain proximity to and maintain contact with one or a few specific individuals who provide the subjective potential for physical and/or psychological safety and security safety" (Berman & Sperling, 1994, p. 8). According to these researchers, attachment style refers to the internal working models of attachment that determine an individual's responses to real or imagined separation from and reunion with their attachment figures.

As one of the pioneers in research on attachment, Bowlby (1982) proposed that one phenomenon, anger towards intimates, might be related to powerful evolutionary forces that are concerned with the reproduction and the survival of the young. The purpose of anger in these instances was viewed as attempts to re-establish attachment bonds. Bowlby conceptualized attachment behavior as types of behavior that result in a person assuming or maintaining closeness to a particular individual who is thought of as enabling better coping.

This researcher contended that although attachment behavior is most prominent during childhood, these behaviors persist throughout the life cycle, and can be especially observed in times of perceived emergencies. Bowlby emphasized that the understanding of attachment variables is key to a better understanding of related phenomena such as separation anxiety, abandonment, and resulting anger throughout life. These phenomena are viewed as basic human dispositions with emotional responses connected to them. For
example, threats of abandonment can be very terrifying and anger-provoking experiences for individuals. Anger in these instances, and accompanying emotional, psychological, and physical abuse may be used by male partners to try to prevent abandonment and to coerce care-giving behaviors from their partners. A basic assumption noted by Bowlby is that the quality of later adult attachment relationships is predicated by the quality of the infant’s relationships with parental figures and other early life experiences.

Dutton and Starzomski (1993) examined the relationship of adult attachment relationship and factors associated with wife assault by interviewing 75 female partners of male abusers. The purpose of their study was to assess whether an anger/anxiety template in the male could predict the female partners’ reports of psychologically and physically abusive behaviors by their male partners. The samples included partners of court-referred and self-referred abusers, partners of men incarcerated in federal prisons, and partners of blue-collar workers. The researchers posited that the anger/anxiety template generated anger in males with this attachment form. The anger would be blamed on the female and then serve as a basis for the ensuing rage directed at her. The researchers posited that an unstable sense of self and an inability to tolerate aloneness caused the men to depend on their relationships with their female partners to protect their own sense of self. The strongest predictor of domination/isolation behaviors for both physical and psychological abuse was the anger-magnitude that was scored by the female subjects using the Multidimensional Anger Inventory. This team also noted that anger is a prominent characteristic of individuals with borderline personalities, which creates an environment that can foster both relationship conflict and abuse. Dutton (1995) proposed that abusiveness in intimate relationships is triggered by internal mood swings rather than
external forces and events, which is consistent with the earlier contention by Dutton and Starzomski (1993), who proposed that a borderline personality organization is related to abusive behaviors in males.

Dutton, Starzomski, and Ryan (1996) continued to examine antecedents to male abusiveness with 140 men referred for spousal abuse. These researchers found that a measure of parental rejection (Eegna Minnen Betraffande Uppfostran (EMBU) (Perris, Jacobsson, Lindstrom, von Knorring, & Perris, 1980) and abuse (Conflict Tactics Scale (CTS) (Straus, 1979) was associated with anger, cyclical borderline personality organization, and subjects' self-reports about their chronic experience of trauma symptoms from their family of origin. Dutton et al. created a new variable and referred to this variable as Abusive Personality (ABP), consisting of: (a) physical and verbal abuse from the CTS (Straus, 1979), and (b) dominance and emotional abuse from the Tolman PMWI (1989). This variable correlated (.42) with the spousal reports of abuse. ABP also was correlated (.41) with a combination of other factors: (a) perceived paternal affection, (b) verbal, (c) physical abuse and (d) lack of maternal warmth. The family of origin variable was only correlated (.22) with abusive behaviors in the subjects. Dutton et al. (1996) suggested that the data implied that development of ABP may be related to modeling of abusive behaviors in the family of origin experiences.

Corvo (1993) noted that attachment behaviors occur across species and have been studied extensively in laboratory animal studies but only minimally in humans. The researchers found that the behaviors were related to pursuing, achieving and retaining the nearness and the responsiveness of the caregiver. Corvo proposed that healthy
development might involve creating positive emotional bonds in the child/parent relationship, which transfers later to the adult romantic relationship.

In attachment theory, several typologies have been constructed to describe positive and negative relationships. These relationship styles in the infant’s bond with the parent also have been postulated to occur in adult relationships (Lopez, 1996). Bartholomew and Horowitz (1991) identified four distinct attachment styles present in childhood that persist in adult romantic relationships: (a) secure; (b) preoccupied; (c) dismissing; and (d) fearful attachment styles.

Lopez (1996) presented three different types of attachment behaviors that may be linked to violent behaviors in adult life. These three types were identified as: (a) the secure; (b) the anxious-ambivalent; and (c) the avoidant behaviors. From infancy, secure human beings have an accessible and responsive caregiver that allows them to form an internal model of the self, which is worthy and competent. Secure infants see others as responsive and dependable. Anxious-ambivalent infants experience inconsistent responses from the caregiver and develop an uncertain and fearful model of the self. Infants with this type of behavior see others as unreliable. Confidence and sense of mastery in humans is dependent on their perceiving that others will be there for them. Anxious-ambivalent perceptions about their relationships with others leave humans vulnerable to stress and emotional lability. In the third type of attachment, children perceive rejection and unresponsiveness from the caregiver which leaves them feeling unwanted, lonely, and mistrusting of others (Lopez, 1996). Although the typologies mentioned are similar in representation of secure and insecure attachment style behaviors, for this study a five factor typology developed by Feeney, Noller, and Hanrahan (1994)
was used to assess more subtle differences in insecure behavior types. The five factors were referred to as: (a) confidence; (b) discomfort with closeness; (c) need for approval; (d) preoccupation with relationships; and (e) relationships as secondary. In this typology, the secure style corresponds to the confidence factor. The anxious-ambivalent type corresponds with the need for approval and the preoccupation with relationships subscales. The avoidant type is associated with the discomfort with closeness and the "relationships as secondary" component.

**Social Support**

Social support has long been recognized for its important role in individual health and well being. Over time, social support studies vary in the magnitude to which researchers developed and operationalized concepts surrounding social support (Lin, Simeone, Ensel, & Kuo, 1979; Umberson & Landis, 1988). Many studies have focused on structural and/or functional dimensions of social support including marital status, type and number of close relationships, and social integration (Lin, Dean, & Ensel, 1981; House & Kahn, 1985; House, 1981).

Social support has been widely defined in the literature (Cobb, 1976; House, 1981; Schaefer, 1981; Weiss, 1974). The variable includes emotional support (esteem, affect, trust, concern, listening), appraisal support (affirmation, feedback social comparison), informational support (advice, information), and instrumental support (money, labor, modifying environment). The definition of social support as information leading to the belief that one is cared for, loved, esteemed, valued, and part of a network of communication and mutual obligation originally was formulated by House (1981).
House (1981) noted that social support consists of four components including emotional support, appraisal support, informational support, and instrumental support. Emotional support was seen in concepts like trust, care, and intimacy. Appraisal support was noted to be feedback that acknowledged one’s self-worth. Informational support referred to guidance and information from others, and instrumental support was seen as material goods and assistance.

Wilcox (1981) noted that the concept of social support has been operationalized in many ways, with the common thread being a focus on one or more dyad relationships, marital status, having a confidant and/or having a number of close friends. Sociologists and anthropologists have pointed to the family as the primary support group with the major environmental influence on the behavior and attitudes of the individual. Cassel (1976) also proposed a functional relationship between psychosocial factors and stress-related disorders. Cassel stated that social supports serve as a protective buffer to cushion the individual from physiologic and psychological consequences of exposure to the stressing situation.

DeKeseredy (1988) noted that social support may be counter-therapeutic especially in relation to post-separation phases of wife abuse. That is, male peer support networks may encourage violence against women. DeKeseredy and Kelly (1995) examined male peer support and found that both increased social integration with male peers and decreased functional support including informational and esteem support were associated with increased partner abuse.

Limitations of studies that have focused on social support include precise definitions of social support and lack of specific mediating mechanisms. This includes
identifying affective states through which supportive relationships influence individuals’ mental health and perceived choices in behaviors.

**Sense of Belonging**

Another interrelatedness variable, sense of belonging, developed by Hagerty, Lynch-Sauer, Patusky, Bouwsema, and Collier (1992) increases our understanding of an individual’s perception of belonging to social and interpersonal groups. Hagerty et al. defined the variable of a sense of belonging as “the experience of personal involvement in a system or environment so that persons feel themselves to be an integral part of that system or environment” (p. 173). The two attributes of sense of belonging were described as “valued involvement,” which was seen as the experience of feeling valued, needed, and accepted, and “fit,” which was described as the person’s perception that his or her characteristics articulate or complement the system or environment (p. 173).

The presence of a sense of belonging has been associated with an augmented sense of cohesion within groups and improved interpersonal functioning (Patusky, 1994). Absence of this phenomenon was theorized to be related to depression and loneliness. Patusky studied qualitative and quantitative effects of the Sense of Belonging Instrument (SOBI) with 86 African-American and 243 Euro-American subjects. The researcher examined the item response differences, reliability, and construct validity in a secondary analysis of the instrument development data set. Results of the study indicated that sense of belonging is an important variable for research when assessing the African-American lived experience. SOBI scale scores showed no significant differences in responses by race except on three individual items. The researcher reported that African-American responses were significantly different on the following items: (a) a greater sense of
belonging concerning participating in life rather than observing it, (b) feeling that their strengths were recognized and (c) ascribing less importance to being accepted by others or feeling valued. The study results indicated that the SOBI scale is a valid instrument for measuring sense of belonging in both racial groups.

Sense of belonging includes psychological and antecedent components. The psychological component (SOBI-P) reflects one's valued involvement in a relationship or environment and fit of the individual's characteristics or qualities with the relationship or environment. Antecedents are those conditions that facilitate one's sense of belonging.

Hagerty, Williams, Coyne and Early (1996) examined the proposition that sense of belonging is an element of psychosocial functioning in men and women. This team described interpersonal relationships and male and female differences between sense of belonging, personal characteristics and indicators of social and psychological functioning. The sample consisted of 379 community college students. The researchers examined sense of belonging in relation to conflict, social support, depression, religious affiliation, involvement in community activities, loneliness, anxiety, past psychiatric treatment and suicidality. In their study, responses of both men and women on the SOBI-P was positively related to positive social support items, and negatively related to negative social support items for friends, relatives, co-workers and spouses. The SOBI-A was positively related to the positive items on the scale and negatively related to the negative items only for the women in that study. Differences in male subjects' sense of belonging varied with their religious affiliation. That is, men who expressed a Protestant or Catholic religious preference differed significantly (higher) in their psychological sense of belonging compared with men who did not express a religious preference.
Lower sense of belonging scores for both women and men were related to loneliness, depression, anxiety, history of psychiatric treatment, and suicidal attempts and thoughts.

**Hopelessness**

Hopelessness is a psychological attribute with trait and state dimensions, characterized by cognitive and affective behaviors. Persons who are hopeless demonstrate a lack of anticipation of the future and planning of goals, and show inertia in taking action to achieve goals and self-expectations. Grimm (1990) described the dimension of state hopelessness as dynamic, changing individual differences in human responses to specific situations at a given moment, while the trait dimension refers to relatively stable individual differences in hopelessness that predispose persons to react in a consistent manner in different situations.

Hopelessness has been noted to be expressed as discouragement and despair, and de-energizing. Farran, Herth, and Popovich (1995) noted that individuals' thinking processes are impaired when they feel hopeless. Individuals who are hopeless feel entrapped and have difficulty making plans concrete. They may have difficulty perceiving alternative methods of resolving conflict in relationships. The authors noted that the presence of hopelessness signals that an individual's situation may have become difficult and unbearable, and that personal goals or needs are not being fulfilled. Hopelessness is often present in individuals with clinical illnesses such as depression.

**Depression**

Chiles et al. (1989) compared symptoms of 37 people in the People's Republic of China and 46 patients in the United States who were experiencing depression. Their symptoms included suicidal thinking and behaviors. The researchers suggested that other
cognitive processes exist which may play an instrumental role in determining the form and intensity of depressive symptoms such as suicidal behaviors. In their study, similarities and differences in depression and hopelessness existed in both Chinese and American subjects. Hopelessness was not related to suicidal intent in the Chinese sample but a significant relationship was found between these same variables in the American sample. Depression, however, was related to suicidal intent in the Chinese patients. Chiles et al. proposed that further research examining the relationship between depression and hopelessness in different cultures may provide knowledge needed to treat these conditions.

Beck, Brown, Berchick, Stewart, and Steer (1990) studied 1,958 depressed patients to determine the relationship between depressive symptoms and hopelessness. Subjects who ultimately committed suicide scored higher on both hopelessness and depression measures compared with subjects who did not commit suicide and who died of natural causes. Moreover, according to the subjects’ scores on the Beck Hopelessness Scale, a group of individuals were identified who were 11 times more likely to commit suicide than a low risk group identified using the Beck Depression Inventory. Beck et al. noted that hopelessness may be considered a risk factor for serious depressive symptoms and suicide. They also identified state and trait characteristics in depressed patients, which were noted to rise when depression developed and subsided.

Depression is conceptually defined by the Diagnostic and Statistical Manual IV (1994) (DSM IV) as consisting of depressed mood or loss of interest or pleasure, weight loss or gain, sleep disturbance, psychomotor agitation or retardation, fatigue, feelings of worthlessness or guilt, difficulty concentrating and recurrent thoughts of death or suicide.
Scores on the 21-item self-report Beck Depression Inventory (BDI) (Beck, Steer, & Garbin, 1988) operationally define depression, and measure the severity of depressive symptoms. Hopelessness and depression, therefore, are seen as important factors to include when explaining interrelatedness variables and studying their relationship to partner abuse.

**Attachment and Partner Abuse**

There has been research that links attachment in children with adult romantic attachment and abuse (Barnett, Martinez, & Bluestein, 1995; Hazan & Shaver, 1987). In a study of jealousy and romantic attachment, Barnett, Martinez, and Bluestein (1995) contrasted the childhood homes of maritally violent men with maritally non-violent men. They then compared the men on jealousy and relationship factors. The investigators found significantly elevated levels of jealousy in maritally violent, uncounseled partner abusers, and in maritally violent counseled abusers as compared with non-violent, unhappily married men and non-violent satisfactorily married men. Their jealousy scales were significantly correlated with a number of childhood abuse factors including being threatened as a child and being verbally abused as a child.

Bowlby (1984) examined the functionality and appropriateness of anger in adult relationships when the expressed anger served to drive off a rival, deter an individual from dangerous behaviors or when an individual used anger to coerce a partner. The aim of each situation was to protect the valued relationship of the angry person and the attachment figure. In addition, attachment behaviors were examined in relationships between sexual partners, as well as between parents and children and between offspring. Bowlby stated that individuals who abuse their partners may appear very different from
other abusers. Their behaviors can vary from being cold, rigid, obsessional, and
disparaging, to being submissive, distressed, and disordered. Partner abusers commonly
exhibit intense anxiety interrupted by upheavals of violent anger; they are also frequently
impulsive and immature with extreme dependency needs and might be very distrustful
and unwilling to form close relationships (Bowlby, 1984).

Mattinson and Sinclair (1979) noted various coercive techniques used by
anxious/ambivalent abusive husbands such as threatening to leave the relationship,
threatening to harm their partner or threatening to commit suicide. Specific coercive
techniques used by abusive husbands included imprisoning their spouse in the house, or
locking them out of the house and then later running after them to persuade them to
return home. These researchers also found that physical battering to coerce a partner
was another technique used by men to prevent loneliness and detachment from their
partners.

Stosny (1993) theorized about male abusers within the framework of attachment
theory. Stosny examined rates of abuse and cessation of abuse by using a pre-test and
post-test experimental study with 100 male spouse abusers. Spouse abusers in the
experimental group were given treatment aimed at improving affect regulation and self-
enhancement. Stosny measured anger and hostility in the abusers and found that the male
subjects had significant deficits in affect regulation and attachment skills. Stosny saw the
attachment figures (female partners) serving as illusory reflections of the inner self. This
researcher argued within an attachment abuse framework that in the construction of the
self, if one construes self to be unlovable, incompetent, or non-empathetic, confirmation
of this image will occur in the world in which this view is constructed. Stosny suggested
that the male abuser might have emotional learning deficits or immature ways of processing powerful affective information. The experimental group had significantly reduced recidivism rates of violence and verbal aggression, and used more strategies to resolve potentially violent situations. This group also showed increased compassion for their spouses and their own well-being and had increased their acceptance of responsibility for their abusive behavior.

Williams and Hawkins (1989) conducted randomly dialed telephone conducted interviews with male respondents to test Hirschi’s theory of social bonding in an attempt to explain male aggression in adult intimate relationships. Hirschi’s theory states that individuals are normally deviant unless they are controlled, and that all individuals are motivated to break societal rules and laws. The ability of individuals to conform to certain laws is due in part to social bonds that control deviance. These social bonds include: (a) attachment to others, (b) commitment to goals set by society and personal aspirations, (c) involvement in work and other social behaviors, and (d) moral beliefs. Hirschi’s theory posits that the stronger one of the four bonds is, the less likely it is that a person will be a non-conformist and break the law. A basic question when applying this conceptual approach is, “Why do some men not perpetrate physical, sexual, psychological or verbal abuse on women?” The authors questioned whether families were more violent in the 1990s than in earlier decades and whether there is a need for outside control to maintain non-abuse in families. The study identified factors that control male aggression against their partners. One of the factors was the attachment bond. The authors posited that integration of the husband and family as a unit into larger society should serve as a measure of control over aggression within the relationships.
They proposed that with more networks outside the family, more behaviors would be visible and serve to decrease aggressive behavior. The goal of their research was to determine if the strength of social bonds could be used to predict which males would be likely to engage in violent confrontations with their wives/partners. However when they examined the social bonds, attachment and moral beliefs had the strongest correlations with each other. They also found that among the sample, men who placed greater importance on socializing with their significant other perceived a greater risk of arrest for partner abuse and more strongly disapprove of such behavior and are more likely to be non-abusers. They also found that in some cases, strong attachment to a partner may sometimes provoke aggression in some men. However, according to these researchers, early-developed attachment in family and friends' networks should have a reformatory effect (decreasing abuse). In other words, individuals usually want family members to have good opinions about them, and this desire acts as a barrier to partner abuse (Williams & Hawkins, 1989).

Another issue related to attachment theory involves the visibility of behaviors among other individuals outside the family. Interaction with others outside of the family is a function of the strength of the attachment bonds between the individual and intimates and the individual and others outside the family. In their study, Williams and Hawkins (1989) attachment variables were used to denote the importance subjects placed on socializing with (a) friends, (b) neighbors, (c) relatives or (d) partners. The researchers also examined family income, age, and race/ethnicity as they related to abuse against women. The percent of abusers was lower for the older men, the men with higher incomes, and the Euro-Americans than for African-Americans and Hispanics. The
researchers found that affect control is grounded in both family intimates and associates outside the family such as co-workers, friends, and acquaintances. The factor of negative sanctions is of special interest especially when exploring the contributions of male peer support to violent behavior. DeKeseredy (1988), and DeKeseredy and Kelly (1995) noted that with partner abusers, male peer support might actually lead to more abuse. DeKeseredy and Kelly examined data from a national survey of college students and found that informational support from and attachment to abusive peers were significantly associated with sexual abuse.

Other aspects of affect and attachment as it relates to partner abuse have been explored. Hershorn and Rosenbaum (1991) examined attachment issues of separation/individuation by studying over-controlled versus under-controlled hostility in partner abusers. The researchers collected data from 41 male subjects who were referred to a batterer’s program for wife abuse. The investigators found support for their theory that under-controlled men would exhibit less frequent, but significantly more severe patterns of abuse towards their wives than over-controlled men. Mothers of over-controlled men were perceived by these men as being more rejecting than mothers of the under-controlled men. Under-controlled men were more likely to exhibit patterns of aggression toward others as well as their wives. Under-controlled partner abusers also showed more frequent use of abusive tactics than over-controlled partner abusers, and males in the under-controlled group were significantly more likely to have witnessed their mothers being abused in their family of origin. The investigators suggested that over-controlled abusive batterers might be helped by strategies aimed at teaching them
communication and assertiveness skills, while under-controlled batterers might benefit from self-control technique treatments.

**Attachment and Social Support**

The research linking attachment and social support is limited, but several researchers have explored the connections between attachment and supportive relationships in the last decade by looking at both childhood and adult attachment (Weiss, 1975; Hazan & Shaver, 1987; Shaver, Hazan, & Bradshaw, 1988). In particular, Weiss found support for a proposed model of social support that contained provisions for studying attachment and intimacy, social integration, nurturant behavior, reassurance of worth, and the availability of informational, emotional and material help. Weiss noted the enduring nature of attachment in adult romantic relationships, which was demonstrated in research findings. When the attachment bonds were disrupted in divorced persons, the style of attachment persisted for months after the separation, expressed in recurrent thoughts and images of the ex-spouse (Weiss, 1975). Assessing the availability or non-availability of informational, emotional and material help may be pertinent in our understanding of social support.

**Attachment and Sense of Belonging**

Sense of belonging has been linked to attachment concepts in one study. Hagerty, Lynch-Sauer, Patusky, and Bouwsema (1993) theoretically linked sense of belonging to attachment in the theory of human relatedness that they proposed. They posited that relatedness is grounded in early patterns of attachment behaviors. Relatedness was noted to incorporate the experiences of people in all types of relationships. Sense of belonging emerged as one of four states involved in instituting and advancing relatedness. These
researchers noted that understanding relatedness and its states helps to facilitate the reframing of psychological disorders and behaviors, which in turn aids in responding to illness.

**Attachment and Hopelessness**

Melges and Bowlby (1969) recognized the important role hopelessness played in the attachment process in children and in adults. These researchers explored how different types of hopelessness influenced psychological organization, particularly with regard to the development of goal-corrected behavioral systems that are felt to mediate personal attachment behaviors in persons with psychopathology. This research team stated that in some forms of psychopathology, plans and goals appear to interact in ineffective ways that negatively influence the outcome. For example, an individual might evoke a goal long after it is evident that the goal cannot be reached. Another example might be an individual restricting plans of action to achieve short-term goals while neglecting long-term goals (Melges & Bowlby, 1969).

These same researchers noted that the type of hopelessness experienced can be influenced by several variables such as (a) the degree of skill or chance believed to influence the outcome, (b) the perceived trustworthiness of other persons, and (c) the distance of the expected outcome. The individual who is involved in a relationship with a significant other whom they distrust is likely to blame the significant other if the goal is not achieved. The individual may then begin viewing any co-operative enterprises with others as doomed to failure from the beginning and may thus limit their commitment to goal achievement.
Attachment and Depression

During the past three decades a number of studies have provided data that supports links between attachment patterns, and cognitive and affective development (Melges & Bowlby, 1969; Bowlby, 1988; Lopez, 1995; Barnett, Martinez, & Bluestein, 1995; Kesner, Julian, & McHenry, 1997). In fact, attachment theory predicts that less competent affect regulation strategies of insecurely attached individuals forecast higher levels of distress and difficulty in functioning in adult relationships (Lopez, 1995).

Some researchers have commented that insecurely attached individuals, especially those who demonstrate anxious/ambivalent or avoidant type attachment behaviors, develop in an environment that puts them at risk for depression (Diamond & Blatt, 1994). These researchers formulated two types of depression, anaclitic (dependent) depression and introjective (self-critical) depression, and hypothesized that these types of depression overlap with the anxious/ambivalent and avoidant types of attachment. Anaclitic depression types are characterized by a need for direct physical and emotional contact and chronic fears of abandonment. Introjective depression types are characterized by self-criticism, fears of loss of approval of significant others, feelings of guilt, isolation and unworthiness.

Melges and Bowlby (1969) suggested that an essential process contributing to depression is a belief that available plans of action can no longer achieve established goals. These researchers noted that depressed persons attribute their depression to their own incompetence which in turn enables them to be more dependent and rely more on significant others furthering the attachment bond.
Social Support and Partner Abuse

Social support has been addressed in the literature as it relates to partner abuse to a lesser extent than was evident with the phenomena of attachment and partner abuse. Researchers have studied social support as it relates to the strength of the social bond on inhibiting or contributing to deviance. Hirschi (1969) asserted that the inhibitory effects of support systems aid in decreasing deviance such as partner abuse through bonding, involvements, commitments, and being with family, friends and relatives.

Lackey and Williams (1995) tested the cessation of intergenerational transmission of partner violence. They examined the inhibitory effects of the social bond on violent behavior with 424 men involved in cohabiting relationships. The researchers measured attachment through responses to questions asking the men how important it is to have special occasions and activities with their partners (partner attachment), friends and relatives (network attachment), and attend meetings and clubs (community attachment). The respondents were asked to estimate how likely it was that a negative behavior would occur. They were then asked how likely it would be that they would receive sanctions for those negative behaviors and the effect of such sanctions on their continuance of the negative behaviors. The research findings showed that males who develop strong attachments to and perceive negative sanctions from significant others are more likely to be non-violent towards their female partners, notwithstanding violent family histories. Shortcomings of the study were the homogeneity of the sample and lack of analysis of racial factors. Race was dropped from the analysis due to an insufficient number of African-American men in the sample. However, DeKeseredy (1988) noted that abusive behaviors if supported by male peers may increase if standards that lead to partner abuse
are full developed in these men who are heavily integrated in male peer groups the reinforce standards of gratification through dominance. The researcher noted that some men encourage partner abusers to beat their partners to keep control over them.

Social Support and Sense of Belonging

Social support has been viewed as integral to psychological well being and has been studied widely. Its link to sense of belonging and other interpersonal relatedness variables has been documented in the literature (Cobb, 1976; Hagerty, et al., 1992, Hagerty, et al., 1993; Hagerty & Patusky, 1995; Norbeck, 1981). Social support was viewed as information that would lead to the belief that one is cared for, esteemed, valued and part of a network. Hagerty et al. (1993) suggested that sense of belonging and other states of relatedness assist in exemplifying the processes of social support.

Social Support and Hopelessness

The variables of social support and indices of health such as hope and hopelessness have also been linked in several studies (Bloom, 1990; Callaghan & Morrisey, 1993; Horman, 1989; McGee, 1984; Yarcheski, Scoloveno, & Mahon, 1994). The presence of hope was found a powerful mediator between perceived social support and general well being in mid-adolescents. Yarcheski, Scoloveno, and Mahon examined the variable of hopelessness, which was characterized by diminished physical, mental and spiritual functioning, and quality of life. These researchers sampled 99 high school students and found positive correlations between hopefulness, perceived social support, and general well being.
Social Support and Depression

Social support has also been linked to positive adjustment in depressed individuals in a number of studies (Cowen & Murphy, 1985; Krause, 1986; Norris & Murrell, 1990). Krause (1986) studied the modifying effects of social support on depressive symptoms and physical health. The researcher sampled 3000 adults aged 55 and older in a three-stage probability design. Significant differences in measures of depression emerged over time between groups of spouses and groups of parents and children. Individuals who lost a spouse were significantly more depressed than comparison groups and had lower measures of social embeddedness. The authors posited that the presence or absence of a supportive spouse defines one’s position in society and is of primary importance in defining identity and one’s style of life. This identity and style of life are often changed when an individual perceives loss of the supportive spouse and appears to be highly related to increased depression.

Sense of Belonging, Hopelessness, Depression and Partner Abuse

Sense of belonging’s link to hopelessness and partner abuse has been addressed much less in the literature than other proposed links in this study. The sense of belonging to the larger society and its link with hopelessness was examined in one review by Allen-Meares and Burman (1995). The authors reviewed studies that focused on problems African-Americans face in our society including violence, inequities between races, helplessness and hopelessness, depression, frustration, and devaluation of African-Americans. They noted that a climate of alienation, uncontrolled rage, and physical assaults could create a sense of hopelessness and depressive devastation when persons feel they do not fit in socially. The authors suggested that historical and current societal
conditions must be taken into account when deriving theories and models to guide practice.

Sense of belonging has been linked to depression in the study by Hagerty and Williams (In press). These researchers examined the relationship between sense of belonging and social support, conflict, loneliness, and depression in a path model. The data were obtained from a sample of 31 persons diagnosed with Major Depression, and 379 community college students. The researchers proposed that sense of belonging would have both a direct effect and an indirect effect on depression. Psychological sense of belonging had significant negative direct effects on depression with a path coefficient of .23. Sense of belonging antecedents also had a direct path to depression with a path coefficient of .11. These results were consistent with other research where decreased sense of belonging was associated with a higher level of depressive symptoms in college students (Hagerty, Williams, Coyne, & Early, 1996).

**Hopelessness and Partner Abuse**

The relationship of hopelessness and partner abuse has been studied largely among victims who may have been experiencing depressive symptoms and disorders. Research linking hopelessness within the perpetrator of abuse is limited (Allen-Meares & Burman, 1992; Willis 1994). Willis (1994) proposed a model for counseling violent offenders in an examination of violence in African-American males. The author indicated there were associations between feelings of hopelessness, negative self-image and self-failure beliefs among African-American partner abusers and their striking out behaviors based on a review of the existing literature. Bell (1987) similarly proposed "strategies" for confronting violence among African-Americans using primary, secondary
and tertiary prevention strategies. Primary prevention strategies were aimed at identifying and counseling children who witnessed violence either in their family of origin or environment. Secondary prevention included the identification and treatment of perpetrators and victims of any violence not including murder. Tertiary prevention was stated as occurring after murder had occurred.

**Hopelessness and Depression**

Hopelessness and its link to depression have been examined in a number of studies, (e.g., Abraham, Metalsky, & Alloy, 1989; Beck, Brown, Berchick, Stewart, & Steer, 1990; Chiles, Strohsahl, Yan Ping, Michael, Hall, Jemelka, Senn, & Reto, 1989; Marciano & Kazdin, 1994). Abraham, Metalsky, and Alloy (1989) presented a revision of a theory of helplessness and depression called the hopelessness theory of depression. The authors hypothesized the existence of an unidentified subtype of depression, which they referred to as hopelessness depression. The authors posited that hopelessness was a proximal sufficient cause of the symptoms of hopelessness depression and not included as a symptom of this type of depression. The researchers hypothesized a causal chain that began with perceived occurrence of negative life events or nonoccurrence of positive life events. These perceptions, when combined with situational cues, inferred negative consequences of negative life events, led to hopelessness. Hopelessness, in turn, led to symptoms of hopelessness depression.

**Depression and Partner Abuse**

Several studies have examined the relationship of depression to violence in perpetrators of abuse (Davidovich, 1990; Dinwiddie, 1992; Lohr, Hamberger, & Bonge, 1988; Magdol, Moffitt, Caspi, & Newmanm, 1997; Pan, Neidig, & O'Leary, 1994;
Saunders, 1992; Watts, & Courtois, 1981). Davidovich (1990) attempted to identify the psychological variables that explain the acts of violently abusive males who engage in partner abuse. The researcher identified common psychological characteristics among males who physically abused their partners. Males who engaged in partner abuse were found to have high rates of depression, dysphoria, histrionicity, and anger-proneness as compared with non-abusers.

Dinwiddie (1992) studied 61 male partner abusers who were identified from a group of relatives of treated alcoholics. The researchers compared past and present psychiatric diagnoses and antecedent behaviors in the male partner abusers and in married or formerly married males (N=319) who had no history of partner abuse. Partner abusers had greater lifetime rates of alcoholism, antisocial personality disorder, and depression than non-abusers, but did not have other psychiatric disorders. In the study partner abusers were more likely to have been divorced two or more times and to report repeated unfaithfulness while in partner relationships.

Magdol, Moffitt, Caspi, and Newman (1997) described male and female partner abuse in a representative sample of males and females. Unemployment, low educational attainment, few social support resources, use of multiple drugs, antisocial personality disorder symptoms, depression symptoms, and violence toward strangers were more closely correlated with severe physical violence for men than for women in the sample. The link of depression to partner abuse thus appears evident in a number of studies. However, most of these studies are limited by samples drawn from majority Euro-American populations.
Tolman and Bennett (1990) reviewed studies linking depression to partner abusers. They noted in a number of studies empirical evidence that partner abusers tended to be more distressed than non-partner abusers. This team stated that it is unclear as to whether depression scores in the studies reviewed represented situational responses to negative consequences such as going through the criminal justice system or being separated from the abused partner, or rather represented longstanding affective disorders. They consistently found, however, that many men were depressed when they went to treatment programs and recommended support in managing the depression by assisting the abusers to link their depressive symptoms with their abusive behaviors.

Lohr, Hamberger, and Bonge (1988) examined the attributes of irrational beliefs and affective states in male partner abusers. They used data obtained from 188 males who were attending a domestic violence cessation program. The men completed the Beck Depression Inventory and other measures of affect. Analysis indicated that depression and anger expression scores were positively correlated with the subscales, Anxious Overconcern, Problem Avoidance, and Helplessness for Change factors on the Irrational Beliefs Test. Lohr et al. stated that the findings supported their hypothesis that the expression of negative emotions may be mediated by irrational beliefs.

**African-American Partner Abusers**

The majority of the studies cited above and others studies reviewed but not cited did not specifically focus on relationships between interpersonal relatedness variables, partner abuse and affective mediators of abuse in African-American males. African-
American male partner abusers may have different patterns of interpersonal relatedness, hopelessness, and depression.

As a means of protection, African-American males are often socialized by parents to be aware of societal inequities and injustices based on race (Julian, 1994; Majors & Billson, 1992; Taylor, Chatters, Tucker, & Lewis, 1990; Taylor, Chatters, & Jackson, 1993). Julian (1994) stated that socialization in the African-American family is modified by a history of racial prejudice and discrimination which affects parenting styles. Taylor (1990) noted that a distinctive feature of child rearing among African-Americans is explicit racial socialization. This socialization includes instituting coping skills for survival in a hostile environment.

Majors and Billson (1992) wrote of the dilemmas of African-American males in their creation of a sense of self while facing daily insults and oppression. They noted that American society has not provided African-American males with many legitimate avenues to success. Majors and Billson stated that African-American males learn that there are many roadblocks to prevent them from pursuing opportunities that are available to their Euro-American counterparts. The authors noted that the two most common responses by African-American males to this lesson in reality are to adopt stances of aggression and rigidity that are similar to behaviors in anxious-ambivalent and avoidant individuals.

Many men in the preliminary study by Rankin and Williams (1997) also stated that the “cards were stacked” against them in social and business opportunities. They argued that they did not belong to “mainstream” America due to oppressive and prejudiced business practices by employers, health systems, and even small businesses.
Many of the same subjects in this pilot study stated that they did not even attempt to frequent these businesses or look for employment in these businesses because of perceived prejudices and blocked opportunities.

Lockhart and White (1989) wrote of understanding “marital abuse” in the African-American community. They examined the lived experience of conflict in family relationships by studying African-American women and looked simultaneously at effects of social class on familial abuse and conflict. The investigators pointed out that there are perceptions that this problem occurs predominantly in African-American families rather than taking into account socioeconomic status and class differences. This is especially pertinent for the present study where the majority of the partner abusers self-reported incomes of under $10,000. Lockhart and White surveyed 155 participants and found that marital conflicts over decision-making was associated with class position. Approximately 36% of the respondents in the study stated that they were victims of spouse abuse. Middle class respondents reported more violent acts than either upper or lower class respondents.

Lockhart and White (1989) also noted that African-Americans have historically faced constant external threats for survival. Many social scientists have argued that there are socially maintained structural forces that work as barriers or internal oppressors in our society, particularly against minorities. These barriers may contribute to increased mental health disorders and increased rates of abuse among minorities and in society in general (Hawkins, 1987; Hunter & Davis, 1994; Pearson, 1994; Williams, 1990; Williams & Fenton, 1994).
Some authors have noted that due to economic inequities between the majority white and minority races, African-Americans, especially males face an uphill struggle for survival. Kunjufu (1990) noted in a type of “conspiracy” theory that African-American males were “on the endangered list.” The author stated that a “power struggle” exists between young African-American males and their Euro-American teachers that leads to an academic decline which further places African-American males at risk for failure. Surviving in a society in which they and their ancestors have been relegated to lower class citizenship in many respects, African-American males attempt to achieve the “American Dream” with a pre-conceived “knowledge” that they cannot. Factors contributing to this “knowledge” include racial biases, “glass ceilings” in the business and political system, and decreased educational opportunities compared with the peers of the dominant culture (Kunjufu, 1990).

This “knowledge” most likely adds to the African-Americans’ feelings of increased societal pressures to be competitively aggressive while at the same time facing societal pressures to remain “compliant” with dominant culture ideals. These and many more examples all contribute to African-American males’ conception of who they are and in all reality, what they are able and likely to become. Partner abusers may be lashing out against their loved ones as a displacement of their anger and as an expression of their mistrust of social institutions and perceived barriers. White (1985) stated that the experiences of slavery, lynchings, segregation, and being imprisoned have had negative effects on African-American men. The author noted that African-American men have good reason to feel powerless. The author noted “Black men know that regardless of how hard they work, most will never become a part of the power structure of American
society, and the few that do will pay a price for their success through physical and mental stress” (p.24). The author stated that the African-American male may abuse because he has not learned to express his pain, frustration, lack of confidence and insecurity about his lack of power in society. The abuse only furthers the notion that he, as an African-American is abusive and violent and warrants being feared by others, including his partner. Discriminatory practices have added to the African-American males’ problems. Davis, Galinsky, and Schopler (1995) stated that with racism and institutional discrimination prevalent in this society, people of color are most at risk for poverty, drug abuse, and family violence.

Social exchange theories have long maintained that relationships depend on mutual exchanges of emotional and substantial supplies (Cook, 1987). Although socioeconomic status, patterns of joblessness, race, and abuse appear intricately related to one another when examining daily newspaper headlines, partner abuse researchers Gelles and Loeske (1993) devoted only one paragraph in their book on family violence to findings on African-Americans and partner abuse. They failed to include several recent studies that have focused on increased or decreased rates of partner abuse by race. Based on a 1975 study on family conflict, Straus, Gelles, and Steinmetz (1980) found that African-American husbands were less likely to slap their wives except for those in the $6,000 to $11,999 range. Also based on that same 1975 study, Cazenave and Straus (1979) found that the sample of blue collar men chose provider as the number one choice of four masculine roles including provider, husband, father and worker. They found that higher rates of abuse in African-Americans was the result of this group having lower incomes and higher rates of employment then Euro-Americans. Hampton and Gelles
(1994) examined data from the Second National Family Violence Survey (Gelles & Straus, 1989). The researchers found that African-American wives were 1.23 times more likely to report minor violence and 2.36 times more likely to report severe violence than Euro-American wives. Results of these important studies and the lack of subsequent research with this population show the need to expand theory and publications that are focused on African-Americans and partner abuse.

Addressing the African-American partner abuser’s social and historical context is imperative if examination of the growing body of data is to be meaningful. The needs of these male abusers cannot be fully met unless the context of their behavior is understood. In summarizing suggestions from multiple pieces of literature, data that should be examined include: (a) feeling of loss of control; such as possible battery in childhood; (b) problems in school and socialization; (c) feelings of inadequacy in the male role when the male compares self with “normative” models of success; (d) prior knowledge of the inequities meted out to African-Americans by the judicial system; and (e) power struggles between the male and female partners in the African-American dyad.

While emphasizing the importance of the historical context, Coleman-Burns (1989) pointed out that concepts of liberty and freedom are in stark contrast with the denial of equality faced by people of color in this society. Coleman-Burns also noted that the supposed “Rights” in the Declaration of Independence excluded all women, African-Americans and other people of color. It could be argued that this inequality and exclusion from the mainstream of society has affected and continues to affect all African-Americans, and certainly may have affected those who have had difficulties with developmental attachment issues in the home as well as the larger social environment.
Allen-Meares and Burman (1995) suggested that racially-based inequities in American communities continues to exist. They also noted that bias, oppressive conditions, and unmanageable stresses are linked to African-American men “turning against themselves, their loved ones and others in an attempt to vent feelings of helplessness and hopelessness” (p. 268). They viewed these behaviors as occurring in cyclic patterns and posited that this cycle will continue to affect the future of African-American families for generations to come. In other words, the continued oppressive conditions, and biases against people of color not only fuel feelings of hopelessness in the present generation because of what they are likely to be able to obtain, but becomes the reality for the next generation through modeling of behaviors associated with this hopelessness and despair. These negative feelings are often related to violent outbursts against family members and society. The authors noted that African-Americans are outraged at a system that pledges equality for all but which does not deliver due to economic stagnation and inequality impassioned by a continual history of institutional racism and oppression.

Using data from the 1975 national study, Cazenave and Straus (1979) examined contributions of race, class, network embeddedness and family abuse. The researchers lent support to this historical and cultural argument by noting that African-American men contend with a double bind in the socialization process. Men are socialized into instrumental family roles that equate masculinity with being a good provider. The researcher noted that African-American men accept this role but are denied access to the significant economic opportunities needed to carry out their roles as providers. Cazenave and Straus coupled this finding with a response from a minority of the African-American
male sample who attributed part of the blame for their low status on African-American women. The basis for their blaming women stemmed from the females' ability to bring in an income. It appeared that the men felt threatened by this and abused their partners as a method of keeping control in their hands.

Bryan and Ajo (1992), in examining the role perceptions of African-American fathers, identified employment status and income as two factors associated with partner abuse. The problem of unemployment traditionally has been very significant for African-American males with nationwide built-in racist biases in the U.S. job market. These patterns of job-based biases against African-American men were noted in a study by Valocchi (1994). This researcher examined national policies that were set forth since the civil war which serve to exclude African-American males from positions of power in the workforce.

Valocchi (1994), in an even more telling account of the inequities related to African-Americans, referenced social and financial injustices as far back as the aftermath of the Civil War. The researcher documented federal and state laws that had the effect of relegating African-Americans to lower status roles based on race-specific policies. Using an historical approach, Valocchi explored powerlessness experienced among African-Americans due to specific policies that kept African-Americans from voting and holding public office.

In sum, African-American male partner abusers may perceive a decreased sense of belonging with the larger environment due to social, cultural and political biases and injustices toward African-Americans. Their feeling of not belonging may also be related
to the characteristic hopelessness found among male African-American partner abuser respondents for the preliminary study by Rankin and Williams (1997).

Huge gaps still exist in conceptualizing and explaining relationships among factors contributing to partner abuse in African-American males. Goals of this study included explicating the links between interpersonal relatedness, hopelessness, depression, and partner abuse in African-American males.

**Summary**

This chapter provides a review of literature on attachment styles, social support, sense of belonging, hopelessness, depression, and their relationship to partner abuse. Research on attachment theory strongly suggests that the quality of the attachment bond, if secure, can be a powerful force in the maintenance of relationships both in children and adults. Attachment behaviors were identified among infants and children and among adults in intimate relationships. Similar patterns of behaviors were found across these age groups with the behaviors directed towards maintaining and re-establishing the attachment bond.

Selected attachment styles have been found to be related to certain destructive behaviors in childhood and adult relationships. Researchers who described these behaviors using several typologies and styles identified various forms of attachment behaviors. A number of researchers have reported associations between an insecure attachment style and a number of pathological behaviors. Several of the studies included in this review identified relationships between insecure attachment styles and abusive behavior in males who abuse their partners.
In reviewing the literature on structural and functional dimensions of social support (i.e., emotional, appraisal, informational, and instrumental support), it becomes clear that social support plays important roles in decision-making and other behaviors. Social support’s tie to attachment, sense of belonging, hopelessness, depression and partner abuse have been examined. Findings suggest that social support from peers versus family members may produce opposite effects in terms of partner abuse although over-attachment to partners can also lead to abuse. The literature linking social support and attachment is limited but researchers have theorized social support as being especially important when examining attachment concepts such as trust, care, and intimacy. There was only one study found that focused on social support and relationships between sense of belonging and depression. Findings from this study provide a foundation for studying these variables as they relate to partner abuse.

Sense of belonging, although a new and developing concept in the literature, has been studied as a component of a human relatedness framework (Hagerty et al., 1992). Sense of belonging was examined as an essential element of psychosocial functioning that reflects an individual’s feeling of fit and value in a relationship. Sense of belonging was examined for its explanatory power with both African-American and Euro-American respondents. There were similar responses by all individuals. Although the literature is limited on this variable, the present study aims to expand on this important interpersonal relatedness phenomenon especially as it relates to African-American males arrested for partner abuse.

The theory of helplessness formulated by Abramson, Seligman, and Teasdale (1978) and refined in the theory of hopelessness depression proposed by Abraham,
Metalsky and Alloy (1989) that was included in this review provides other conceptual material for studying the relationships between hopelessness and depression and partner abuse in African-American males.

Links between depression and attachment, social support, sense of belonging, hopelessness, and partner abuse are clearer than the link between sense of belonging and hopelessness. The literature reviewed also suggested that depression is associated with insecure attachment concepts and irrational beliefs. Abusive tactics used by males toward their partners have been associated with hopelessness, negative self-image, self-failure beliefs, parenting styles, and behaviors similar to those seen in insecurely attached individuals.

Although associations have been found between attachment, social support, sense of belonging, hopelessness, depression, and partner abuse, no one study has been published that examined the variables as a group, and no study has been published that examined this entire group of variables and partner abuse in African-American males. Research findings reveal that rates of partner abuse are higher among the African-American population. However, the research revealed a paucity of studies specifically looking at the issue of partner abuse in the African-American community. Although socialization biases and institutionalized inequities were posited as correlates of partner abuse in some of the literature reviewed, the scope of present study could not be expanded to include these important variables.

The present research seeks to gain a clearer understanding of the African-American male partner abuser, and intends to measure African-American male partner abuser perceptions of insecure attachment styles, social support, decreased sense of
belonging, hopelessness, and depression related to their abuse. This study will be the first research endeavor to include all of the above variables in one study to understand how they may be related to partner abuse.
CHAPTER 3

METHOD

This chapter describes the methodology used in the study. Sections include: (a) description of the study design; (b) subjects; (c) measures and instruments; (d) procedures; (e) human subjects, and (f) data analysis.

Design

The study used a survey technique to collect data from a sample of African-American males arrested for partner abuse. The study employed a correlational design using selected self-report instruments designed to collect demographic data and measure attachment styles, social support, sense of belonging, hopelessness, depression, and partner abuse behaviors. A path analysis was used to predict the effect of interpersonal relatedness variables as mediated by hopelessness and depression in African-American male partner abusers.

Subjects

Sixty-nine African-American males who had been arrested on charges of domestic violence from the same Midwestern state district court and sentenced to probation were recruited and asked to participate in the study. Subjects were selected from a list provided by the probation officer in a district court. The list included the names of 88 males and 12 females who had been arrested for assault and battery and "other" partner abuse related charges against a significant other. The "other" charges,
including offenses of breaking and entering, destruction of property, vandalism, and/or stalking, were crimes they had committed against their partners. Seventy men met the criteria for inclusion in the study. The criteria included being an English-speaking African-American adult male who had been arrested for partner abuse. One male subject declined to participate in the study after initially agreeing to participate and was dropped from the study. All participants were eighteen years or older and they were either placed on probation or had been mandated to domestic violence treatment as part of their probation before sentencing by the district court.

**Measures and Instruments**

Subjects were asked to answer the questions found in the questionnaire packet compiled for each subject. Measures included for this study were as follows:

1. Measure of Wife Abuse (MWA) (Rodenburg & Fantuzzo, 1993)
2. Attachment Styles Questionnaire (ASQ) (Feeney, Noller, and Hanrahan, 1994)
3. Montana State University School of Nursing’s Personal Resource Questionnaire (PRQ85) (Weinert & Brandt 1987), for measuring social support
4. Sense of Belonging Instrument with its two subscales (Antecedent (SOBI-A) and Psychological (SOBI-P) (Hagerty & Patusky, 1995)
5. Grimm State-Trait Hope Inventory Self Evaluation Scale (STHI) (Farran, Herth & Popovich, 1995)
6. Beck Depression Inventory (BDI) (Beck, Steer, & Garbin, 1988)
7. General Information Questionnaire (GIQ) for providing demographic and background information.
The SOBI, STHI, and BDI instruments have all been used in studies with African-Americans subjects. The ASQ, PRQ85, and MWA have had very limited testing with African-American samples. These instruments were chosen to be able to test the study hypotheses and to determine the validity of their use with an African-American male population.

**Measure of Wife Abuse (MWA)** The MWA (Rodenburg & Fantuzzo, 1993) is a 60-item, self-report scale designed to assess destructive behaviors of partner abusers and impact of the abuse on the victims of the abuse. The instrument aids in the assessment of the diversity of acts of abuse typically used by abusers toward their partners. The MWA consists of items to measure behaviors ranging from the use of verbally abusive language to nonverbal psychological, sexual and physical abuse. The 60 statements contained different types of abuse and levels of seriousness of the abuse, which were deliberately mixed and are interspersed throughout the instrument. Immediately after responding to a statement regarding the number of abusive behaviors, subjects are asked to provide their assessment of how the particular behavior affected their partner (the victim of the abuse). The original scale was developed for use with female respondents who were victims of partner abuse. In the present study, the scale was modified for use with male subjects. An example of the original scale was the statement “your partner slapped you.” In the modified version used in the present study, the statement is modified as “you slapped your partner” (see Appendix-A). The subjects wrote the number of times a certain behavior occurred in the immediate six months prior to their arrest. The scale is divided into four subscales identifying physical abuse items, non-verbal psychological abuse items, verbal psychological abuse, and sexual abuse items. In the second part of the
MWA that was not used in the present study, subjects then wrote how much they felt that same behavior hurt or upset their partner. To do this, they circled the answer that corresponded with their perception of the partner’s response: (a) “This never hurt or upset her,” (b) “This rarely hurt or upset her,” (c) “This sometimes hurt or upset her,” or (d) “This often hurt or upset her. The Rodenburg and Fantuzzo did a factor analysis to assess whether the item fit in the four abuse categories noted above and found that some of the items cross-correlated with factors that were not hypothesized. This was noted with several items in the psychological and verbal abuse categories. Examples of cross-correlation from these two categories include: (a) “You told her you would kill her”, (b) “You told her you would kill the children”, and (c) “You told her you would take the children.” The majority of the items in the verbal abuse category clearly have a psychological impact as well as a verbal impact. These two subscales appear to refer to similar psychological terrorist acts whose purpose was to control women. In the present study, after consulting with two experts in the field of partner abuse and noting a correlation of .73 between the scales, a decision was made to combine psychological and verbal abuse items into a subscale named psychological abuse.

Rodenburg and Fantuzzo (1993) computed the alpha coefficient of reliability to assess the internal consistency reliability of each of the four MWA subscales and the instrument as a whole. The Cronbach alpha coefficients on the subscales were: (a) physical abuse = .81, (b) sexual abuse = .73, (c) psychological abuse = .94, and (d) verbal abuse = .83), (N=164). The reliability of the total MWA scale (.93) was noted to be higher than the reliability (.83) of the Conflict Tactics scale (CTS) in Straus’s study which has been used in many studies on partner and family abuse. In the present study
the Cronbach alpha coefficients on the subscales were: (a) physical abuse = .75, (b) 
sexual abuse = .54, (c) psychological abuse = .75, and (d) verbal abuse = .77. The 
coefficient for the combined psychological abuse subscale was .80. The reliability for the 
total MWA was .87. Validity of the MWA was demonstrated by correlations of the 
subscales with the CTS subscales. The correlation coefficients calculated for the Verbal 
Abuse Scale and the CTS Verbal Aggression subscale and for the MWA Physical Abuse 
scale and the CTS Violence scale reached correlations of .40 (p< .01). Pearson product-
moment correlations between total test scores of the two instruments were significant also 
(r= .44, df=132, p<.01).

**Weighting in the MWA**

Before data were analyzed for the present study, a decision was made to examine 
items on the MWA for their severity as well as the frequencies reported by the subjects. 
To accomplish this the MWA items were rated by six experts who work with abused 
women in the health care field and in the community. The experts included a district 
court judge, a probation officer, a nurse practitioner working with abused women, an 
outpatient mental health nurse, an officer manager of an outpatient clinic and a pre-
medical student at a local university. Five of the experts were females.

**Severity Weighted Frequencies of Partner Abuse**

To develop severity-weighted frequencies of physical, psychological, and sexual 
abuse, the items from the adapted MWA instrument and a form for categorizing the items 
were individually given to the experts. The experts were instructed to rate the items for 
severity into mild, moderate, severe and very severe categories based on their 
professional work with battered women. When at least three of the raters agreed on the
level of severity of abuse, the items were placed in the corresponding category. Three of the experts agreed on level of severity of abuse for 60 of the 69 items on the MWA, whereas for the remaining nine items, fewer than three raters agreed. The remaining nine items were categorized by the investigator who assigned the raters’ highest severity ratings for those items. The items were then weighted for their severity with mild items multiplied by one, moderate items multiplied by two, severe items multiplied by three, and very severe items multiplied by four. The item scores reported by the subjects were computed into subscales for physical abuse (severity-weighted frequency of physical abuse), psychological abuse (severity-weighted frequency of psychological abuse), and sexual abuse (severity-weighted frequency of sexual abuse). Items from the subjects’ probation records were also examined for evidence of physical violence against their partner (i.e. pushing or hitting their partner, or whether the victim had been hurt during the incident of arrest) and put in the analysis. To illustrate with an example, the experts rated item #7 on the MWA (You slapped your partner) as being very severe. One subject reported committing this act 10 times in the last 6 months. This individual’s score was factored by four to get a severity-weighted frequency score of 40. If a subject reported 0 for this item, but there was evidence in the probation record that the victim had bruise marks on her face at the arresting incident, the subject received a score of 4.

Severity of Partner Abuse

The physical abuse items were also computed to examine their relative severity regardless of the frequency in a 4-point scale called severity of physical abuse (1=mild, 2=moderate, 3=severe, and 4=very severe). To accomplish this, the items that were rated by the experts were recoded. The item scores were computed for scores greater than 0.
Subjects who reported no physical abuse but had evidence in their probation record of pushing the victim received a score of one. If subjects reported no violence but there was evidence in their record of a weapon being used against their partner, or if the victim was hurt in the violent incident, they received a score of two. If the subjects were charged with aggravated assault, they received a score of three. If the subjects had evidence of pushing a partner, hurting the victim and were charged with aggravated assault, or had used a weapon against the victim, subjects received a score of four.

Attachment Styles Questionnaire (ASQ) This research instrument is based on concepts from attachment theory that includes: (a) proximity seeking; (b) separation protest; and (c) pathological patterns of adult attachment (Feeney, Noller, & Hanrahan, 1994). According to Feeney et al., these three types of behavior correspond with the secure, avoidant, and anxious-ambivalent individual. The questionnaire contains 40 statements forged from five factors or subscales that categorize an individual’s attachment style. The five subscales are classified as: (a) Confidence; (b) Discomfort with Closeness; (c) Need for Approval; (d) Preoccupation with Relationships; and (d) Relationships as Secondary. Higher scores indicate higher levels of a confident or secure attachment style. The Confidence subscale is designed to measure secure attachment styles of behavior while the other four subscales are designed to measure insecure attachment styles. Feeney et al. found Discomfort with Closeness was related to avoidant attachment so this subscale is used to measure avoidant attachment behavior. The Need for Approval subscale measures an individual’s need for acceptance and authentication by others and characterizes individuals who are fearful of the relationship ending and who may be engrossed with the relationship. “Preoccupation with Relationships” is
central to the concept of anxious/ambivalent; this subscale measures the dependent personality type of an individual who, when in distress, reaches out to others to meet that dependency need. Another subscale, referred to as Relationships as Secondary, was constructed to identify individuals who try to protect themselves from being hurt and from being in an exposed position by emphasizing accomplishment and autonomy. This subscale identifies the individual with a dismissing style (Bartholomew, 1990). The need for approval, discomfort with closeness, preoccupation with relationships and relationships as secondary are scored so that higher scores indicate higher levels of insecure attachment styles.

Items on the ASQ are rated on a 6 point scale that are scored from 1 = "totally disagree" to 6 = "totally agree." Examples of items on the ASQ include: (a) I find it relatively easy to get close to people (confidence); (b) I find it hard to trust people (discomfort with closeness); (c) It's important to me that others like me (need for approval); (d) I worry a lot about my relationships (preoccupation with relationships); and (e) I am too busy with other activities to put much time into relationships (relationships as secondary). See Appendix A.

The Cronbach alpha coefficients reported for the subscales were: (a) .80 for Confidence (in self and others), (b) .84, for Discomfort with Closeness, (c) .79, for Need for Approval, (d) .76, for Preoccupation with Relationships, and Relationships as Secondary. Test-retest reliability was calculated from data collected with a sub-sample of university psychology students. Test-retest occurred over a 10-week period and yielded correlations of .74 for both the Confidence and the Discomfort with Closeness subscales, .78 for the Need for Approval subscale, .72 for the Preoccupation with
Relationships subscale, and .67 for the Relationships as Secondary subscale. The Cronbach alpha coefficients for the subscales in the present study were: (a) .63 for Confidence (in self and others), (b) .86, for Discomfort with Closeness, (c) .77, for Need for Approval, (d) .76, for Preoccupation with Relationships, and .66 for Relationships as Secondary. After reliability analysis and consultation regarding reliability estimates noted by Feeney et al. (1994) and from the present study, the decision was made to not include the Relationships as Secondary subscale due to the reported low coefficients. In the present study, the three insecure attachment styles were used to analyze the data. The three insecure type subscales were also collapsed into one scale measuring the overall effect of insecure attachment styles on the other variables.

According to Feeney et al, pairwise correlations between the five subscales of the ASQ were significant. The Confidence subscale correlated negatively with the other four subscales. The other four subscales, which measured insecure attachment styles, were positively inter-correlated. Feeney et al. reported analysis of variance (ANOVA) was conducted by dividing subjects into three groups (secure, avoidant, and anxious/ambivalent) and compared their scores on the five subscales. On the Confidence subscale, secure individuals had higher scores than any other group. For Discomfort with Closeness, the secure group scored significantly lower than any other group. Anxious/ambivalent individuals scored higher than any other group on the Preoccupation with Relationships subscale. The anxious/ambivalent individuals also scored higher on Need for Approval and Preoccupation with Relationships subscales than the other groups. Feeney et al. did not report racial composition of their sample.
Personal Resource Questionnaire—Part 2 (PRQ-85) Part 2 of the PRQ-85 is a self-report scale designed to measure social support and its impact on stress, maintenance of health, and restoration of well being (Brandt & Weinert, 1981). This scale is comprised of 25 statements and a Likert-type scale from 1 (Strongly Disagree) to 7 (Strongly Agree). Perceived social support yields a high score on Part 2 of the PRQ-85 scale. Weinert and Brandt (1987) defined social support to include: (a) provision for attachment/intimacy, (b) social integration, (c) opportunity for nurturant behavior, and (d) reassurance of worth as an individual and in role accomplishments, and (e) the availability of informational, emotional, and material help.

Examples of statements on the PRQ-85 are: (a) There is someone I feel close to who makes me feel secure; (b) I have enough contact with the person who makes me feel special; (c) There is no one to talk to about how I'm feeling; and (d) There is someone who loves and cares about me (See Appendix A). Cronbach’s alpha coefficients were reported between .85 and .93 using several samples that ranged from 45 to over 1000 subjects. The Cronbach’s alpha coefficient for the present study was .85.

Discriminant validity was established by examining correlations between Part 2 of the PRQ-85 and four other social support scales including (a) the Social Support Scales by Lin, Dean and Ensel, 1981; (b) Norbeck Social Support Questionnaire (Norbeck, Lindsey & Carrieri, 1981); (c) the Interpersonal Support Evaluation List (Cohen, Mermelstein, Kamarck, & Hoeberman, 1985), and (d) the Inventory of Socially Supportive Behaviors (Barrera, 1985). Significant inter-correlations between Part 2 of the PRQ-85 and these scales were .49, .25, 74, and .40 respectively (Brandt & Weinert, 1987).
**Sense of Belonging.** The Sense of Belonging Instrument (SOBI) is a psychometrically tested self-report instrument designed to measure sense of belonging in adults. The SOBI is a 33-item self-report instrument consisting of 2 separately scored scales, SOBI-P (psychological state) and SOBI-A (antecedents). Sense of belonging was defined as "the experience of personal involvement in a system or an environment so that persons feel themselves to be an integral part of that system or environment (Hagerty et al., 1992, p.173). SOBI-A measures a person's sense of fit and of being valued within an interpersonal relationship. The SOBI-A measures components presumed to be present for sense of belonging to take place. This includes the components of energy needed for involvement in relationships and the desire for meaningful relationships (Hagerty & Williams, In press). The instrument consists of statements that assess subjects' perceptions about their belonging and fit in a socially constructed group. Responses are measured on a four point Likert-type scale with answers ranging from "Strongly Agree" (SA) to "Strongly Disagree" (SD). Scores can range from 18 to 72 with low scores signifying low sense of belonging and high scores signifying a strong sense of belonging. Examples on the scales include: (a) I feel like an outsider in most situations; (b) I feel like a square peg trying to fit into a round hole; (c) It is important to me that I fit in somewhere in this world; and (d) All of my life I have wanted to feel like I really belonged. (See Appendix A). Test-retest reliability on the initial SOBI was .84 for the SOBI-P subscale and .66 for the SOBI-A subscale with 379 community college students over eight weeks (Hagerty et al., 1992). Cronbach alpha coefficients in the present study were .94 for the SOBI-P and .76 for the SOBI-A.
Content validity of the SOBI was established with seven expert panelists. Item content validity ranged from .50 to 1.00 with the entire instrument's validity being .83. Construct validity was established using factor analysis, contrasted groups consisting of college students, depressed patients and Catholic nuns, and scale correlation with measures of loneliness, reciprocity and social support (Hagerty & Patusky, 1995). African-Americans comprised 23% of the community college students surveyed in that study. The SOBI has also been used in other studies with African-Americans and has been found to be a valid instrument for use with this population. Hagerty et al. revised the SOBI-A based on psychometric properties and the newly revised version was used in this study.

Grimm State-Trait Hope Inventory Self Evaluation Scale (STHI). The instrument consists of 40 statements that relate to the individual’s feelings of hope and hopelessness. The scale is divided into two 20-item sub-scales which represent the state (how an individual feels at the time of the interview) and trait (how the individual usually feels) dimensions of hopelessness. Subjects rate their feelings on a five-point Likert-type rating system with choices ranging from “strongly agree” to “strongly disagree.” Scores range from 20 to 100 for each subscale. The higher the score, the more hope is perceived at the time of interview or as a pattern (Grimm, 1990). Low scores indicate perceptions of hopelessness. Some questions from the STHI are “The future does not hold any good things for me,” “Any plans I make for myself usually won’t work out,” and “I expect my future life to be more difficult” (See Appendix A). Cronbach alpha coefficients ranged from the mid-to upper .90s when the instrument was tested with a sample that consisted of both healthy individuals and those with severe psychiatric illnesses (Farran, Herth &
Popovich, 1995). Forty-five percent of the Farran et al. sample was Euro-American and 25% were African-Americans. Grimm (1990) reported that the state dimension alphas ranged from .78 to .99, and trait subscale alphas as ranging from .75 to .99. Grimm also reported Cronbach's alpha coefficients for both the state and trait subscales at .82 in a sample of cancer patients. Cronbach's alpha coefficients for the present study were .83 for the state subscale and .87 for the trait subscale.

In Grimm's study, content validity for the STHI scale was deemed adequate by calculating the average congruency percentages of three experts. Construct validity of the scale was supported by hypothesis testing and comparing the conceptual relationships between hope and spiritual well-being with the Spiritual Well-Being Scale (Ellison, 1983). The relationship found between state hope and depression was compared with outcomes using the Brief Symptom Inventory (Derogatis, 1975). Grimm reported Pearson Product Moment correlations of .60 with the Spiritual Well-Being Inventory and hope state, and .63 with the hope trait. The hope state was found to be negatively correlated (r = -.43) with the Brief Symptom Inventory (Grimm, 1990).

**Beck Depression Inventory (BDI)** (Beck, Steer, & Garbin, 1988) The BDI is a self-report measure designed to measure the severity of depression. The questionnaire consists of 21 groups of statements measuring affective, cognitive, motivational and psychomotor components of depression. Reliability estimates have ranged from .78 to .93. Cronbach's alpha coefficient for the present study was .92. This instrument has strong concurrent validity when tested with other measures of depression. Subjects rate their feelings on each item using a scale of 0 to 3 to describe how they have been feeling in the past week. Examples of statements from the BDI follow: (a) "I feel sad," (b) "I
feel I have nothing to look forward to,” (c) “I am disappointed with myself,” (d) “I would like to kill myself,” and (e) “I cry more now than I used to.” Scores of less than 10 denote absence of depression, scores of 10 to 18 are indicative of mild to moderate clinical depression. Scores of 19 to 29 are indicative of moderate depression to severe depression and scores of 30 to 63 are indicative of an individual with a severe depression (See Appendix A). Beck (1967) noted means of 10.9 (SD=8.1), 18.7 (SD=10.2), 25.4 (SD=9.6), and 30.0 (SD=10.4) respectively for the above categories in a study that compared BDI scores of depressed and non-depressed subjects. Beck reported that educational attainment was inversely related to scores on the BDI.

**General Information Questionnaire** Each subject completed a 28-item survey questionnaire that asks for demographic information on socioeconomic status and variables such as age, race and ethnicity, education, employment, income, and gender. This questionnaire was designed to assess selected measures that may reflect of subjects’ socioeconomic status (e.g., subjects employment status, income, and education (Williams & Collins, 1995).

**Procedures**

The study was approved by the Human Subjects Review Committee at the University of Michigan and permission granted for the study from a midwest county probation department. The department provided the researcher forms that contained names of all persons eligible to participate in the study based on the subject criteria set for the study. Potential subjects’ police records had been reviewed to determine the nature of their domestic violent behaviors.
Individuals who were on probation for domestic violence related charges were approached and asked to participate in the study. Inclusion criteria were: (a) being an African-American male, (b) 18 years or older, who had been arrested and charged with partner abuse, or (c) who had been arrested for an associated crime toward the partner which consisted of battering or other forms of abuse (e.g., stalking, and property damage). The researchers made initial contact with potential subjects when they met with their probation officer for their monthly check-in. Probation officers were contacted daily to determine if they would be seeing probationers who met study criteria.

Potential subjects were provided verbal and written descriptions of the study, its purpose and the procedures involved in the data collection. They were then asked their willingness to participate in the study. Informed consent forms were reviewed with the potential subjects at the initial contact (See Appendix B for Informed Consent Form). Of 76 probationers who met the criteria for the study and who were contacted, 69 African-American males agreed to participate. Data were collected individually from subjects when they had completed items on all of the self-completion paper and pencil measures chosen for the study, including demographics and interpersonal relatedness items and partner abuse behaviors.

Probationers who agreed to be in the study were given a coded packet of materials including the Measure of Wife Abuse (MWA), the Attachment Styles Questionnaire (ASQ), Part 2 of the Personal Resource Questionnaire (PRQ85), the Sense of Belonging Instrument with subscales (Antecedent (SOBI-A) and Psychological (SOBI-P), (Hagerty & Patusky, 1995), the Grimm State-Trait Hope Inventory Self Evaluation Scale (STHI)
(Farran, Herth & Popovich, 1995), the Beck Depression Inventory (BDI), and the demographics questionnaire referred to as the General Information Questionnaire (GIQ).

Permission was sought and obtained to use sense of belonging instruments from the developers of the instrument. Authors of the other instruments used in the study gave their written permission for their instruments to be used in the present study as noted in prior publications. Data collection took place in one-hour scheduled interviews during the respondents' required monthly check-in with the probation department. Individuals were given a private room to complete the survey forms. Efforts were made to maximize the validity of the answers with questions being read to any subjects with minimal reading skills and any other subjects who requested assistance. Reading skills were assessed by (a) asking subjects if they were comfortable reading the consents, and (b) assessment of their self-completed probation records. Instructions for completing the self-reports were read to the men after informed consent was given.

**Human Subjects**

The University of Michigan Human Subjects Review Committee (Appendix C) granted approval for the study's protocol. An effort to protect human subjects was made using several procedures. First, verbal and written descriptions of the following were provided to the potential respondents: (a) a complete description of all procedures, (b) a description of potential risks and benefits expected from taking part in the study, (c) an offer to answer questions for any respondent regarding the study, (d) assurance that participation is unforced and voluntary, and (e) assurance that the participant may withdraw consent and discontinue participation at any time without consequences. After
the respondent explicitly acknowledged understanding of the study, agreed to participate, and signed an informed consent, the survey was then administered and completed.

Procedures for providing confidentiality included: (a) assuring respondents that their questionnaires were private and would shared only with the research team, (b) removal of all identifying information from the data questionnaire after recording of the data with (c) all identifying information kept in a separate locked file, and (d) coding the questionnaires with numbers identified by the researcher. One other research assistant was trained to respect the confidential nature of the data.

Data Analysis

Data were analyzed using the Statistical Package for the Social Sciences (SPSS) for Windows 7.0 program designed for personal computer use. Descriptive statistics including frequencies and measures of central tendency were run, and the data were cleaned before running inferential statistics (e.g., bivariate statistics (Pearson correlations coefficients), analyses of variance, and multiple regressions) for all variables. Regression assumptions of independence, normal distribution, equality of variance and linearity were ascertained by obtaining residual analyses. Regression assumptions needed to test hypotheses must be satisfied to have confidence in the model being tested. Assumptions include: (a) all of the observations must be independent, (b) variance must be the same for all values of the independent variables, (c) the relationship between the dependent and independent variable must be linear, and (d) the distribution of the values of the dependent variables must be normal. Data were transformed when there were violations of normality. Due to the limited studies available on African-American partner abusers
and the need to decrease the possibility of a Type II error, the researcher chose the value of $p \leq .10$ for declaring statistical significance.

A series of multiple regression analyses were run to determine the link between the proposed variables in the path model. Path analysis was used to explain the relationships between interpersonal relatedness variables (attachment styles, social support, sense of belonging), affective variables (hopelessness and depression), and partner abuse behaviors. Path analysis is comprised of a series of multiple regressions and correlations structured by a priori hypothesis (Wootton, 1994). Paths can either be evaluated by path coefficients or by regression coefficients. Regression coefficients provide information about the functional relationships between pairs of variables, predicting how much the dependent variable changes with a given change in any of the causal variables. Path analysis assumes that the relationships among variables are linear and additive and that the residuals are not correlated. Path analysis allows the testing of theoretical models with the use of non-experimental data (Hinshaw, 1984). This process estimates the effect of the betas through both the direct and indirect effects of the diverse independent variables on partner abuse. All paths with significance levels greater than .10 were excluded from the path model. Path analysis can suggest which of certain preferred hypotheses depicting the relationships among variables is most likely accurate. It also calculates the comparative strengths of direct and indirect connections among variables (Hayduk, 1987). The model presumes a seven-variable combination including insecure attachment styles, social support, sense of belonging (antecedent and psychological), hopelessness, depression and partner abuse behaviors. Hopelessness and
depression were proposed as mediators between the interpersonal relatedness variables and partner abuse behaviors.

Mediators are those variables that are significantly affected by deviations in the independent variables and can account for the deviations in the dependent variable (Engel & Lin, 1991). A series of multiple regressions were performed with (a) the dependent variable being regressed on the independent variable; (b) the mediating variable regressed on the independent variable; and (c) the dependent variable regressed on both the independent variable and on the mediator. The independent variable must be shown to: (a) significantly affect the dependent variable in the first equation; (b) significantly affect the mediator in the second equation; and (c) the mediator must significantly affect the dependent variable in the third equation (Baron & Kenny, 1986). Hierarchical regression analyses were also used in this study to examine the effects that each variable adds when entered into the analyses. Hierarchical regression analysis is a multivariate technique used to enter variables in the equation as a block in a single step. (Norusis, 1993) It reveals the unique variance of variables or sets of variables and also reveals the mediating effects.

In order to specify the proposed relationships among the interpersonal relatedness variables affective variables and partner abuse behaviors, a recursive path model was proposed (See Figure 1.). The recursive model is a series of linkages that progress in one direction without feedback loops.
CHAPTER 4

RESULTS

The findings of the data analysis are presented in this chapter. The chapter consists of two sections. The first section describes the results of both univariate and bivariate statistical analyses that were used to explore the characteristics of the 69 African-American males arrested for partner abuse. The second section explains the results of the multivariate analyses that were computed to test the proposed hypotheses.

Univariate and Bivariate Analyses

Descriptive Statistics

Table 4.1 presents sociodemographic characteristics of the sample. All participants were African-American males. The average age of the sample was 31 with ages of the subjects ranging from 18 to 69 years. Seven subjects (10%) were under the age of 21 years and 3 men (4%) were 63 years and older. The average years of education was 12 years (SD= 2) of school with only 14 (20%) subjects reporting any college education.

Employment status ranged from unemployed with no visible means of income to full time employment with 35 subjects (51%) unemployed, and 24 (35%) subjects employed full-time. The yearly income reported by subjects ranged from no income (n=35) to over $70,000 (n=1); the majority of the subjects (n= 43) reported income in the of $0-$9999 range. Only three of the subjects reported making $40,000 per year or more. Occupations of sample members were not determined.
Table 4.1. Sociodemographic characteristics of the sample in the study

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>%</th>
<th>Mean</th>
<th>S. D.</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
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<td>18-25</td>
<td>31</td>
<td>11</td>
<td>18</td>
<td>69</td>
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<tr>
<td>26-40</td>
<td>52</td>
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<tr>
<td>41-69</td>
<td>16</td>
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<td>2.0</td>
<td>6</td>
<td>17</td>
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<tr>
<td>Employment</td>
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<td>35</td>
<td>51</td>
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<td>retired</td>
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<tr>
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<td>30</td>
<td>44</td>
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<td>other</td>
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<tr>
<td>$0-$9999</td>
<td>43</td>
<td>62</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$10,000-$24,999</td>
<td>15</td>
<td>22</td>
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<tr>
<td>$25,000-$39,000</td>
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<td>$40,000-$54,999</td>
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<tr>
<td>$55,000-$69,000</td>
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<td>1</td>
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<td></td>
</tr>
<tr>
<td>Over $70,000</td>
<td>1</td>
<td>1</td>
<td></td>
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</tr>
</tbody>
</table>

Table 4.2 summarizes the subjects’ mean scores, standard deviations, and theoretical scale ranges for the dependent, independent and mediating variables included in the study. An elaboration of these results are provided below:
Table 4.2. Means, standard deviations, and theoretical scale ranges for the variables.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean</th>
<th>SD</th>
<th>Theoretical Range</th>
<th>Actual Range</th>
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</thead>
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<tr>
<td><strong>Partner abuse</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>physical abuse</td>
<td>386.69</td>
<td>1764.38</td>
<td>unlimited</td>
<td>0-10509</td>
</tr>
<tr>
<td>psychological abuse</td>
<td>3126.63</td>
<td>8728.59</td>
<td>unlimited</td>
<td>0-41115</td>
</tr>
<tr>
<td>sexual abuse</td>
<td>35.30</td>
<td>182.24</td>
<td>unlimited</td>
<td>0-1152</td>
</tr>
<tr>
<td><strong>Attachment Styles</strong></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Secure style</td>
<td>33.79</td>
<td>6.34</td>
<td>8-48</td>
<td>13-46</td>
</tr>
<tr>
<td>Insecure styles</td>
<td>103.13</td>
<td>24.75</td>
<td>32-192</td>
<td>42-155</td>
</tr>
<tr>
<td>Disc with closeness</td>
<td>36.71</td>
<td>10.33</td>
<td>10-60</td>
<td>10-59</td>
</tr>
<tr>
<td>Need for approval</td>
<td>18.86</td>
<td>6.83</td>
<td>7-42</td>
<td>7-36</td>
</tr>
<tr>
<td>Preoc. with Rel</td>
<td>26.55</td>
<td>8.10</td>
<td>8-48</td>
<td>8-45</td>
</tr>
<tr>
<td>Rel as secondary</td>
<td>21.00</td>
<td>6.28</td>
<td>7-42</td>
<td>7-36</td>
</tr>
<tr>
<td>Social Support</td>
<td>129.24</td>
<td>21.32</td>
<td>25-175</td>
<td>67-166</td>
</tr>
<tr>
<td><strong>Sense of Belonging</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Antecedent</td>
<td>44.75</td>
<td>5.92</td>
<td>15-60</td>
<td>26-58</td>
</tr>
<tr>
<td>Psychological</td>
<td>53.86</td>
<td>12.36</td>
<td>18-72</td>
<td>20-72</td>
</tr>
<tr>
<td><strong>Hopelessness</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Future Orientation</td>
<td>25.59</td>
<td>7.41</td>
<td>11-55</td>
<td>11-45</td>
</tr>
<tr>
<td>Goal planning</td>
<td>19.39</td>
<td>6.21</td>
<td>9-45</td>
<td>9-39</td>
</tr>
<tr>
<td>Relationships</td>
<td>24.41</td>
<td>5.37</td>
<td>10-50</td>
<td>13-37</td>
</tr>
<tr>
<td>Taking Action</td>
<td>21.34</td>
<td>6.29</td>
<td>10-50</td>
<td>10-35</td>
</tr>
<tr>
<td>STATE</td>
<td>44.23</td>
<td>10.81</td>
<td>20-100</td>
<td>21-73</td>
</tr>
<tr>
<td>TRAIT</td>
<td>46.50</td>
<td>11.84</td>
<td>20-100</td>
<td>20-80</td>
</tr>
<tr>
<td>BDI</td>
<td>13.62</td>
<td>12.24</td>
<td>0-63</td>
<td>0-45</td>
</tr>
</tbody>
</table>
Partner abuse

The subjects in the study reported on the MWA that they attempted carried out over 70,000 separate acts of partner abusive behaviors in the six-month period preceding their arrest. Although 30 (43%) of the subjects denied committing any physically abusive acts, three subjects reported committing more than 2000 physically abusive acts each. Police records were used to verify claims of no usage of physical abuse by the subjects. In all but five cases (n=69), there was evidence in the police records of at least one physically abusive act perpetrated by 64 of the subjects against their partners before the arrest. Forty-four (64%) of the victims were hurt according to data gathered from subjects’ police records. The police records also indicated that weapons were used by 15 (21%) of the sample against their partners in the prior six months before arrest.

Verbal reports from intervention groups were gathered demonstrating the subjects’ unwillingness to take responsibility for their actions. A dominant theme recurred in the focus and intervention groups with these same men when they attempted to explain their violence. The majority stated that the abuse was not their fault but was related to a dominant racist society; Many subjects shared their perception of not belonging to the majority American society and therefore not being understood. Several verbatim statements from the subjects follow which illustrate their denial of responsibility, but also suggest that there may be undiagnosed addictions to substance abuse which may contribute to continued patterns of abuse: One subject stated “It was with a White girl. I wouldn’t take a cop” (plea bargain in court). “I (sic) takes her into the room and wouldn’t let her leave... It ain’t like I was kidnapping or something.” Another individual stated “When I’m under the influence (referring to drugs) I’m cool,
calm and relaxed.” One individual always spoke of the third person when referring to his violent episodes: “He (referring to himself) was always doing this (referring to crack cocaine)”. Another subject stated: “We (sic) was always arguing everyday and I got a domestic (domestic violence charge) with my son and girlfriend, but I was just talking to her loudly.” The means, standard deviations and frequencies of abusive behaviors reported in the a-MWA by subjects are listed in Appendix D, TableD1.

**Zero-order Correlations between the variables**

Table 4.3 shows the zero-ordered Pearson correlation coefficients computed to determine relationships between partner abuse, interpersonal relatedness variables (attachment styles, social support, and sense of belonging), and mediating variables (hopelessness and depression). Correlations are presented to show the relationships between the independent variables, the relationships between the dependent and independent variables and the relationships between the independent variables. Examining the relations on a bivariate level allows for interpretation after other variables enter which may have mediating effects between independent variables and dependent variables. In other words, bivariate correlations are the foundation for path analysis and other multivariate analyses. Scores on the severity weighted frequency of physical abuse subscale, severity of physical abuse and the severity weighted frequency of psychological abuse subscale were significantly related to each other as expected (.32-.71) with the lowest correlation among the independent variables between the severity of physical abuse and the severity-weighted frequency of psychological abuse and sexual abuse subscales. Scores on the severity-weighted frequency of physical abuse, severity of physical abuse and severity-weighted frequency of psychological abuse subscales were
also significantly correlated with all of the ASQ insecure attachment style subscales and the BDI scores \( r = .22 \) to \( .25 \). The severity-weighted frequency of sexual abuse scores of the MWA were significantly related to ASQ Insecure attachment scores \( r = .35 \). Significant negative relationships were found between the severity weighted frequency of physical abuse, severity of physical abuse, and the weighted psychological abuse variables and the ASQ Secure attachment style, social support, and SOBI-P scores \( r = -.22 \) to \( -.40 \). The severity-weighted frequency sexual abuse scores of the MWA had significant negative relationships to the PRQ-85 (social support), and the SOBI-P \( r = -.29 \) to \( -.33 \).

Subjects’ insecure attachment styles scores were significantly and negatively related to scores on the hopelessness state subscale \( r = .51 \) and BDI \( r = .39 \). The insecure attachment styles scores showed significant negative relationships with subjects’ scores of social support \( r = -.44 \) and SOBI-P \( r = -.63 \).

Social support subscale scores were significantly related to SOBI-A and SOBI-P scores \( .29 \) and \( .63 \) and negatively related to scores on the STHI Trait \( r = -.51 \) and BDI scales \( -.56 \). Other significant negative findings were noted between scores on the SOBI-A and SOBI-P subscales and scores on the STHI Trait and BDI subscales \( -.34 \) to \( -.70 \). Subjects’ scores on the STHI Trait also showed a significant relationship to scores on the BDI \( r = .55 \).

These findings show that: (a) the types of abuse are closely related and have an effect on each other; (b) there is support for a path model because of the relationship between the independent variables, mediator, and dependent variables; and (c) alternatives to the proposed path model can be explored.
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<th>Variable</th>
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<th>2</th>
<th>3</th>
<th>4</th>
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<th>7</th>
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<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>14</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Severity-Weighted</td>
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</tr>
<tr>
<td>Frequency of Physical Abuse</td>
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<td>.709**</td>
<td>1.000</td>
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<tr>
<td>2 Severity of Physical Abuse</td>
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<td></td>
<td>.677**</td>
<td>.321**</td>
<td>1.000</td>
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<td>Frequency of Psychological abuse</td>
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<tr>
<td>3 Severity Weighted</td>
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<td>Frequency of Sexual abuse</td>
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<td>7. ASQ Need for Approval</td>
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<td>.250*</td>
<td>.299**</td>
<td>.204*</td>
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<td>8. ASQ Discomfort with</td>
<td>.241*</td>
<td>.317**</td>
<td>.218*</td>
<td>.315**</td>
<td>.325**</td>
<td>.731**</td>
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<td>9. ASQ Prooccupation with</td>
<td>.271*</td>
<td>.212*</td>
<td>.270*</td>
<td>.288**</td>
<td>.193</td>
<td>.921**</td>
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<td>.179</td>
<td>.071</td>
<td>.161</td>
<td>.949**</td>
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<td>11. PRQ-85</td>
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<td>12. SOBI-A</td>
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<td>.271*</td>
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<td>13. SOBI-P</td>
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<td>.359**</td>
<td>.400**</td>
<td>.305**</td>
<td>.452**</td>
<td>.633**</td>
<td>.573**</td>
<td>.513**</td>
<td>.459**</td>
<td>.436**</td>
<td>.628**</td>
<td>.229*</td>
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<td>14. STII traits</td>
<td>.178</td>
<td>.183</td>
<td>.193</td>
<td>.179</td>
<td>.468**</td>
<td>.510**</td>
<td>.463**</td>
<td>.398**</td>
<td>.419**</td>
<td>.310**</td>
<td>.511**</td>
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<td>.701**</td>
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<td>15. BDI</td>
<td>.244*</td>
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<td>.217*</td>
<td>.098</td>
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<td>.385**</td>
<td>.399**</td>
<td>.362**</td>
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<td>.080</td>
<td>.564**</td>
<td>.376**</td>
<td>.628**</td>
<td>.548**</td>
<td>1.000</td>
</tr>
</tbody>
</table>

Note: *p<.05, **p<.01; one tailed
Path Model Analysis

Using multiple regression procedures, regression equations were constructed. This was accomplished in six steps for each model presented. Several different models were examined when assessing both frequency and severity of the abusive behaviors. Figures 4.1, 4.2 and 4.3 present the path analysis for the results of severity weighted frequency of physical, psychological and sexual abuse. In addition, further path analyses were completed examining severity-weighted frequency of physical abuse from self-report only which is presented in Figure 4.4. Figure 4.5 presents the model of severity of physical abuse from the self-reports and police record. The new variable was computed to examine a model of severity of physical abuse based on (a) weighted physical abuse scores and (b) four variables included from the subjects’ police records. These variables were: (a) whether the victim was hurt, (b) whether a weapon was used in the arresting incident, (c) whether the subject pushed the victim, and (d) whether the subject was charged with aggravated assault in the arresting incident. The variable was labeled severity of physical abuse. Lastly, Figure 4.6 presents the alternate model of severity-weighted frequency of sexual abuse.
Figure 4.1 Model of the effect of interpersonal relatedness as mediated by affective states on severity weighted frequency of physical abuse.

Legend: X1, X2, X3-Interpersonal Relatedness, X4, X5- Depressive Affective States, X6- Partner Abuse

Numbers represent beta coefficients;  * = p  < .10, ** = p  < .05, *** = p  < .01. Only significant effects are presented.
Figure 4.2 Model of the effect of interpersonal relatedness as mediated by affective states on severity weighted frequency of psychological abuse.

Legend: X1, X2, X3 - Interpersonal Relatedness, X4, X5 - Depressive Affective States, X6 - Partner Abuse

Numbers represent beta coefficients, * = p < 0.10, ** = p < 0.05, *** = p < 0.01. Only significant effects are presented.
Figure 4.3: Model of the effect of interpersonal relatedness as mediated by affective states on severity weighted frequency of sexual partner abuse.

Legend: X1, X2, X3-Interpersonal Relatedness, X4, X5-Depressive Affective States, X6-Partner Abuse

Numbers represent beta coefficients; * = p < .10, ** = p < .05, *** = p < .01. Only significant effects are presented.
Figure 4.4 Model of the effect of interpersonal relatedness as mediated by affective states on severity weighted frequency of physical partner abuse

Legend: X1, X2, X3-Interpersonal Relatedness, X4, X5-Depressive Affective States, X6-Partner Abuse

Numbers represent beta coefficients. * - p < 0.10, ** - p < 0.05, *** - p < 0.01. Only significant effects are presented.
Figure 4.5 Model of the effect of interpersonal relatedness as mediated by affective states on severity of physical partner abuse from self-report and police records.

Legend: X1, X2, X3-Interpersonal Relatedness, X4, X5-Depressive Affective States X6-Partner Abuse

Numbers represent beta coefficients. * = p < 0.10, ** = p < 0.05, *** = p < 0.01. Only significant effects are presented.
Figure 4.6  Model of the effect of interpersonal relatedness as mediated by affective states on severity weighted frequency sexual partner abuse. (with three insecure attachment styles)

Legend: X1, X2, X3-Interpersonal Relatedness. X4, X5- Depressive Affective States. X6- Partner Abuse
Numbers represent beta coefficients, * = p 0.10, ** = p 0.05, *** = p 0.01. Only significant effects are presented.
Results of the Path Analysis

Direct effect of interpersonal relatedness on partner abuse  The direct effects of attachment styles, social support, and sense of belonging on partner abuse were as follows:

Hypothesis 1  Insecure attachment styles will be related to an increased severity and severity-weighted frequency of partner abuse.

Findings presented in Figure 4.1 - 4.5, indicate that an insecure attachment style did not directly effect a significant increase in severity-weighted frequency of physical abuse, psychological abuse, or severity-weighted frequency of sexual abuse. However, three subscales of the insecure attachment style were also examined for their ability to effect partner abuse in a more specific model (See Figure 4.6). The need for approval ($\beta = .303$), the discomfort with closeness, ($\beta = .275$) and the preoccupation with relationships attachment styles ($\beta = -.331$) had significant direct effects on an increase in the severity-weighted frequency of sexual abuse ($R^2 = .217$). The relationships as secondary variable was not included in analysis related to its low reliabilities in prior studies. Thus Hypothesis 1 only was supported with an alternate model of components of insecure attachment style as mediated by affective states on severity weighted frequency sexual partner abuse as shown in Figure 4.6.

Hypothesis 2  Perceived decreased social support will be related to an increased severity and severity-weighted frequency of partner abuse.

As noted in Figure 4.1 through Figure 4.4 social support did not directly effect a significant increase in any types of partner abuse. Thus, Hypothesis 2 was not supported in any of the models.

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**Hypothesis 3** Decreased sense of belonging will be related to an increased severity and severity-weighted frequency of partner abuse.

Findings are presented from Figures 4.1, through Figure 4.5. Decreased sense of belonging (psychological) effected a significant increase in severity-weighted frequency of physical partner abuse ($R^2 = .230$) ($n = 69$), ($\beta = -.609$). As noted in Figure 4.2, sense of belonging (psychological) had significant direct negative effects upon severity of psychological abuse ($R^2 = .190$) ($n = 69$), ($\beta = -.499$). As noted in Figure 4.3, decreased sense of belonging (psychological) effected a significant increase in severity-weighted frequency of sexual abuse ($R^2 = .130$) ($n = 69$), ($\beta = -.307$). Thus Hypothesis 3 was supported in three of the five tests.

**Indirect (mediating) effect of trait hopelessness and depression on partner abuse.** The indirect effects of attachment styles, social support, and sense of belonging on partner abuse as mediated through trait hopelessness and depression were tested. The value of an indirect effect is the change in the dependent variable at the end of a chain produced by a one unit increase in the independent variable at the origin of the chain (McClelland, 1994). As discussed in Chapter 3, a mediating effect is said to occur if (a) variations in the levels of the independent variable significantly account for variations in the posited mediator, and in turn (b) if variations in the mediator significantly account for variations in the dependent variable (Ensel & Lin, 1991).

**Hypothesis 4** The effect of insecure attachment on partner abuse will be indirectly affected by trait hopelessness.

Findings presented in Figures 4.1 through Figure 4.3 indicate that although insecure attachment styles had significant direct and indirect effects on trait hopelessness, trait hopelessness did not have a direct or indirect path to partner abuse. In the model
shown in Figure 4.4, trait hopelessness scores had a significant direct path to severity-weighted frequency of physical abuse based on self-reports from the subjects. There were no significant direct effects of insecure attachment styles on trait hopelessness. The effect of insecure attachment styles on trait hopelessness was mediated through insecure attachment styles link with sense of belonging (SOBI) (both antecedent and psychological). Both SOBI components had a significant direct effect on trait hopelessness in all models. The path models that were tested and the findings among the variables are summarized in the diagrams that follow:

Insecure attachment styles $\rightarrow$ Hopelessness $\rightarrow$ Partner abuse

$0.179$ ns

Insecure attachment styles $\rightarrow$ SOBI-P $\rightarrow$ Hopelessness $\rightarrow$ Partner abuse

Severity weighted frequency of Physical abuse based on self-reports

$-0.474$  $-0.504$  $-0.294$

Insecure attachment styles $\rightarrow$ SOBI-A $\rightarrow$ Hopelessness $\rightarrow$ Partner abuse

Severity weighted frequency of Physical abuse based on self-reports

$-0.220$  $-0.225$  $-0.294$

Insecure attachment styles $\rightarrow$ SOBI-A $\rightarrow$ SOBP $\rightarrow$ Hopelessness $\rightarrow$ Partner abuse

Severity weighted frequency of Physical abuse based on self-reports

$-0.220$  $0.145$  $-0.225$  $-0.294$

Thus, only the model that is presented in Figure 4.4 provided support for Hypothesis 4.

**Hypothesis 5** The effect of insecure attachment on partner abuse will be indirectly affected by depression.

As shown in Figures 4.1-4.4 the effect of insecure attachment on partner abuse did not have significant indirect effects on depression although attachment styles had significant indirect effects on depression through sense of belonging. The path models that were tested and the findings among the variables are summarized in the diagram that follows:
Insecure attachment styles $\rightarrow$ depressive symptoms $\rightarrow$ Partner abuse

Thus Hypothesis 5 was not supported by any of the models.

**Hypothesis 6**  The effect of perceived social support on partner abuse will be indirectly affected by hopelessness.

Findings presented in Figure 4.4 indicate that the effect of perceived social support on partner abuse was indirectly affected by hopelessness through sense of belonging. There were no significant direct relationships of social support and hopelessness in any of these models. Although social support had indirect effects on hopelessness, hopelessness effected only severity-weighted physical abuse based on subjects' self reports only. The path models that were tested and the findings among the variables are summarized in the diagrams that follow:

Social Support $\rightarrow$ SOBI-P $\rightarrow$ STHI-Trait $\rightarrow$ Severity-weighted frequency of physical abuse

\[
\begin{array}{ccc}
.377 & -.504 & -.294 \\
\end{array}
\]

Social Support $\rightarrow$ SOBI-A $\rightarrow$ STHI-Trait $\rightarrow$ Severity-weighted frequency of physical abuse

\[
\begin{array}{ccc}
.383 & -.225 & -.294 \\
\end{array}
\]

Hypothesis 6 was not supported by the data. However, when SOBI (antecedent and psychological) were included in the path, social support had an direct effect on SOBI when mediated by hopelessness on severity weighted frequency of physical partner abuse.

**Hypothesis 7**  The effect of perceived social support on partner abuse will be indirectly affected by depression.
As shown in figures 4.1-4.5 the effect of perceived social support on partner abuse through depression was not statistically significant in any of the models tested. Although perceived social support had a direct effect on depression and indirect links with depression through sense of belonging, as noted in all models, depression did not go on to effect any types of partner abuse. The path models that were tested and the findings among the variables are summarized in the diagrams that follow:

Perceived social support----⇒depressive symptoms----⇒Partner abuse

- .230

Perceived social support----⇒ SOBI-P ⇒depressive symptoms---- ⇒Partner abuse

.377

- .360

Perceived social support----⇒ SOBI-A⇒depressive symptoms---- ⇒Partner abuse

.383

- .193

Hypothesis 7 was not supported by the data in any of the models tested.

**Hypothesis 8** The effect of sense of belonging on partner abuse will be indirectly affected by hopelessness.

Findings presented in Figure 4.1 through 4.5 indicate that although both SOBI-P and SOBI-A had significant relationships with hopelessness, hopelessness did not effect partner abuse in any of these models. In Figure 4.4 sense of belonging (antecedent and psychological) had effects on trait hopelessness, which had a direct effect on severity-weighted frequency of physical abuse from self-reports of subjects only. The path models that were tested and the findings among the variables are summarized in the diagrams that follow:

Sense of belonging P----⇒hopelessness----⇒Severity-weighted frequency of Physical abuse.

- .504

ns

Sense of belonging A----⇒hopelessness----⇒Severity-weighted frequency of Physical abuse.

- .225

ns
Sense of belonging → hopelessness → Severity-weighted frequency of Physical abuse based on self-reports only.
- 0.504
- 0.294

Sense of belonging A → hopelessness → Severity-weighted frequency of Physical abuse based on self-reports only.
- 0.225
- 0.294

Hypothesis 8 was only supported by the model of the severity-weighted frequency of physical partner abuse from the self-reports of subjects.

**Hypothesis 9** The effect of sense of belonging on partner abuse will be indirectly affected by depression.

As noted in Figure 4.1–4.4, although sense of belonging (both SOBI-P, and SOBI-A) had a significant effect on depression, depression had no significant direct effect on partner abuse. The path models that were tested and the findings among the variables are summarized in the diagrams that follow:

SOBI-P → depressive symptoms → Partner abuse
- 0.360
ns

SOBI-A → depressive symptoms → Partner abuse
- 0.193
ns

Hypothesis 9 was not supported by the data in any of the models.

**Path Coefficients of Direct and Indirect Effects of Interpersonal relatedness on Partner abuse**

The effect of attachment styles, social support, and sense of belonging on partner abuse was examined. The effect between interpersonal relatedness (attachment styles, social support, and sense of belonging) and partner abuse is the sum of two components: (a) the effect of interpersonal relatedness on partner abuse controlling for all mediators (direct or net effect) plus (b) the effect of interpersonal relatedness on partner abuse via changes in the level of mediator produced by interpersonal relatedness. Table 4.4

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summarizes the direct and indirect effects of interpersonal relatedness (attachment styles, social support, and sense of belonging on partner abuse). The table shows the significant and insignificant direct and indirect effects not shown in the path model. In the model sense of belonging has the greatest direct and indirect effects for the variables. The magnitude of the SOBI-P beta coefficients suggest that the effect of SOBI-P would be evidenced in other variables relationships to partner abuse.
Table 4.4 Path Coefficients of Direct, Indirect, and Total Effects of Interpersonal relatedness on Partner abuse

<table>
<thead>
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<th>Variable</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
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<td>.050</td>
<td>.161</td>
<td>-.024</td>
<td>.002</td>
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<td>Hopelessness</td>
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<td>.017</td>
<td>-.055</td>
<td>-.015</td>
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<td>Depressive symptoms</td>
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<td>-.028</td>
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<td>.007</td>
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<tr>
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<tr>
<td>Direct effect</td>
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<td>.048</td>
<td>.063</td>
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<td>.009</td>
<td>.023</td>
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<td>-.016</td>
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<tr>
<td>SOBI-P</td>
<td>-.089</td>
<td>-.072</td>
<td>-.044</td>
<td>-.096</td>
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</table>

Note: A = Path coefficients for Severity-Weighted-Frequency of physical abuse
B = Path coefficients for Severity-Weighted-Frequency of psychological abuse
C = Path coefficients for Severity-Weighted-Frequency of sexual abuse
D = Path coefficients for Severity-Weighted-Frequency of physical abuse (based on self-reports)
E = Path coefficients for Severity of physical abuse
Hierarchical Regression Analyses

Hierarchical regression analyses were conducted to examine the overall variance explained and to examine the change in $R^2$ for each variable as it entered the analysis. The hierarchical regression analyses contain path analysis but can suggest alternative path models to the original model. Hierarchical analyses can also explain the path results in terms of variance explained by blocks rather than single variables. Tables of the results are presented in Appendix E. Table E1 shows the results of the regression analysis with severity weighted frequency of physical abuse as the dependent variable. The ASQ variables explained 10% of the variance in predicting severity weighted physical abuse. The largest change for the ASQ variables came in step 3 when sense of belonging variables entered and the need for approval beta decreased from .21 to -.03. Scores on social support added 3% to the model. When sense of belonging entered the model, however, the social support beta decreased from -.18 to -.03. showing sense of belonging as the variable mediating social support’s effects on partner abuse. Sense of belonging added 10%, with trait hopelessness and BDI adding to its negative effects upon severity of weighted frequency of physical abuse. Trait hopelessness added 2% and was not affected when BDI entered the model, although SOBI-A’s effects were decreased when hopelessness entered the equation. BDI added less than 1% to the overall variance explained.

Table D2 shows the results of the regression analysis with severity weighted frequency of psychological abuse as the dependent variable. The ASQ variables explained 11% of the variance in predicting severity weighted psychological abuse. In this model sense of belonging again had the greatest mediation effect upon the need for approval insecure attachment style. Scores on social support added 2% to the model,
while sense of belonging mediated the attachment effect upon psychological abuse. Sense of belonging added 6%, to the variance explained, trait hopelessness added 2% and the BDI added less than 1% to the overall variance explained for this model.

Table D3 shows the results of the regression analysis with severity weighted frequency of sexual abuse as the dependent variable. The ASQ variables explained 22% of the variance in predicting severity weighted sexual abuse when they entered the model. Scores on social support did not add to the model while trait hopelessness added less than 1%. Sense of belonging and the BDI added less than 1% apiece to the overall variance explained. The greatest mediation effects again appeared when sense of belonging entered the model and suppressed the effect of the ASQ need for approval. Again, in this model trait hopelessness and BDI added very little to the effects of psychological sense of belonging.

Table D4 shows the results of the regression analysis with severity of physical abuse as the dependent variable. The ASQ variables explained 14% of the variance in predicting severity weighted physical abuse. Scores on social support added less that 1% while sense of belonging added only 4%. Trait hopelessness added approximately 1% to the model. BDI scores did not add to the model in the overall variance explained. In this model sense of belonging variables appeared to mediate the effects of ASQ need for approval and discomfort with closeness on physical abuse. BDI effects were minimal on the partner abuse variables. The results support the path models by showing that (a) the strongest effects in each model came from the effects of sense of belonging and (b) showing why attachment styles did not have strong direct effects on the partner abuse variables.
Summary

The data supported Hypotheses 1, which stated that insecure attachment styles will be related to an increased severity and severity-weighted frequency of partner abuse only when the insecure attachment subscales were examined for their effect on severity-weighted frequency of sexual abuse. Hypothesis 3 which stated that decreased sense of belonging will be related to an increased severity and severity-weighted frequency of partner abuse received the greatest support in all three models as sense of belonging had a direct effect on severity-weighted frequency of physical, psychological and sexual abuse. Hypothesis 4 which posited that the effect of insecure attachment styles on partner abuse will be indirectly mediated by hopelessness was only supported in one model of severity-weighted frequency of physical abuse based on self-reports and thus had only limited support. Hypothesis 8 which stated that the effect of sense of belonging on partner abuse will be indirectly mediated by hopelessness was supported only in the model of severity-weighted frequency of physical abuse from self-reports. Hypothesis 2, 5, 6, 7, and 9 were not supported. Insecure attachment had a strong effect on the three forms of partner abuse but only indirectly through sense of belonging. The data also showed that psychological and antecedent sense of belonging had significant effects upon trait hopelessness, which had a significant effect upon partner abuse in the model of severity-weighted frequency of physical abuse based on self-reports.
CHAPTER 5

Discussion

This study examined the relationship between interpersonal relatedness and partner abuse as mediated by hopelessness and depression. The study design incorporated the current concepts and theories that have been used to explain the relationships of interpersonal relatedness, depressive symptoms, and partner abuse. In Chapter 5, discussion of univariate and bivariate analyses will examine the sample through sociodemographic characteristics, and relationships among the dependent and independent variables. The support or lack of support for each of the hypotheses will be discussed. Implications of the findings for nursing research and practice will be presented, followed by a discussion of limitations of the study. The chapter concludes by proposing suggestions for future research.

Univariate and Bivariate Analyses

The average age of participants, 31 (SD = 11), is similar to subject ages in other studies of partner abusers (Barrera, Palmer, Brown, & Kalaher, 1994; Else, Wonderlich, Beatty, Christie, & Staton, 1993; Hanson, Cadsky, Harris, & Lalone, 1997) where the mean ages of partner abusers ranged from 31.7 to 36.01. The average years of education was actually higher: 12 years (SD = 2) for this sample compared with 10 years of education in the above studies. However the employment and income were lower for the present sample with a majority (n = 43) 62% making less than $10,000. This income was low as compared with $21,000-$26,200 for the studies mentioned above.
The reports of abuse behaviors were varied, but show patterns of minor to moderate psychological abuse to very serious physical abuse producing physical injury to the victim. Of note, the majority of the men (52%) reported using verbal abuse while 43% denied using any physical abuse. Fifty-two subjects denied using any type of sexual abuse (74%), but appeared to hold very degrading views of women evidenced by their conversations with male peers who attended groups for abusers. The denial of more severe, physical and sexual abuse by the subjects is not surprising however, since many of the psychological abuse items men reported were not items they could be arrested for while many of the physical and sexual abuse items were illegal. The subjects may have felt that although assurances were given that they would be anonymous and their answers were confidential, they would not risk violating terms of probation in affirming some of these items. The affirming of certain types of abuse by some individuals, such as the individual who reported committing more than 1000 psychological abuse acts against their partner, may be related to the influence of male peers and the male privilege alluded to in verbatim statements noted in the results. The denial of this type of abuse is in contrast to studies by DeKeseredy and Kelly (1995) where the researchers found male peer support was associated with increased sexual abuse.

**Bivariate Correlations between Variables**

The correlation matrix show significant correlations between all dependent variables used in the study with all independent variables except ASQ preoccupation with closeness, ASQ Relationships as Secondary, SOBI-A, and STHI Trait hopelessness indicating that there are effects of many of the independent variables on partner abuse. However, most are mediated by other variables when entered into regression equations. The SOBI-P had the largest coefficient. Many of the interpersonal relatedness and affect
variables show significant coefficients and support the relationships observed in the regression equations. When examining the correlations and their significance to the path analysis models, it is important to remember that the correlations are bi-directional and do not give indication as to which variable effects the other. The correlation coefficients are indicative of the relative strength of the variables as shown by the significant correlations between variables. This is especially noted in the high correlations between the independent variables and for correlations between psychological sense of belonging and every other variable. The strong relationship of sense of belonging to other variables is mirrored in the path analyses, tables of effects in the path analyses and in the hierarchical regressions.

**The Direct Effect of Interpersonal Relatedness on Partner Abuse.**

**The Effect of Attachment Styles on Partner Abuse.**

Hypotheses 1 through 3 addressed the question of whether a significant relationship exists between interpersonal relatedness and partner abuse. Insecure attachment as a subscale did not have significant direct effect on partner abuse although some effects were noted. In an alternate model presented in Figure 4.6, however, components of insecure attachment style (need for approval, discomfort with closeness, and preoccupation with relationships) were linked to one form of abuse, severity-weighted frequency of sexual abuse. This finding is consistent with findings from other studies where these types of attachment styles were associated with abusive behaviors in men (Dutton, vanGinkel, & Landolt, 1996; Hudson & Ward, 1997; Kesner, Julian, & McHenry, 1997; van Ijzendoorn, et al., 1997). As noted in chapter 2, the need for approval attachment style characterizes both fearful and preoccupied (anxious/ambivalent) attachment styles, while discomfort with closeness is central to the
conceptualization of avoidant attachment. In particular, Hudson and Ward proposed that the preoccupied type of abuser would be more likely to commit rape and sexual violence than persons with other types of attachment styles. Although Hudson and Ward (1997) found no significant relationship between attachment styles and sexual violence, data from the present study indicate these forms of insecure attachment styles have a direct effect on severity-weighted frequency of sexual abuse scores. The ability of these components of insecure attachment styles to have an effect on sexual abuse shows the complex nature of partner abuse and may suggest that it is important to identify and understand the actual intent of the abusive acts.

Another notable finding in the present study is that preoccupation with relationships had a negative effect on sexual abuse while the other two forms of insecure attachment styles had the effect of increased severity of sexual abuse. Stosny (1993) noted that the single most important element of attachment abuse is the self-construction perceptions by abusers. If they believe that they are unlovable or unloving, this belief will create a continual rejection-anxiety and a distrust of anyone who they perceive as pretending to love them. The researcher noted that because of the insecure attachment and inability to self-regulate negative affect (such as hopelessness and depression), abusers will continue to attempt to control their own feelings by controlling their attachment figures through dominance, manipulation, coercion and force. This conceptualization appears closely aligned with views reflected in subjects’ responses on the ASQ in the present study.

A possible explanation as to why insecure attachment styles did not have significant effects may be explained by Mayseless (1991) who stated that according to attachment theory, individuals who received unsympathetic and unacceptable care giving

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from their primary attachment figure in childhood are more prone to have expectance for similar treatment in adult attachment relationships. In other words, insecure attachments formed in childhood may produce models of altered intimate relationships that persist into adulthood.

Rothbard and Shaver (1994) suggested that attachment dynamics in adulthood are similar to those in childhood but more complex. They noted that although some adults do relate coherent memories denoting insecure attachment in childhood, many of these individuals display more secure attachment styles as adults, which may be the result of other attachments they formed throughout the years that offset the impact of earlier insecure attachment. This complex nature of this phenomenon may be key to understanding that while in informal groups and intervention groups, many of the male subjects who participated in the researcher’s pilot study revealed beliefs consistent with insecure attachment styles. However, an indirect path showed statistically significant evidence of an indirect path between insecure attachment styles and abuse through SOBI-P. This seems to suggest that SOBI-P is itself a mediator for attachment as well as for social support as noted in Figures 4.1 through 4.5. This is also suggested in the results of the hierarchical regression (See Appendix E) when sense of belonging entered the model. Need for approval insecure attachment styles greatly decreased when sense of belonging entered the equation. It suggested a strong mediating effect of sense of belonging.

The Effect of Social Support on Partner Abuse

Social support was not found to have a significant direct effect on abuse in any of the path models based on severity-weighted frequency of violence but non-significant direct and indirect effect on abuse through other variables. In Hypothesis 2, it was
proposed that social support would have a direct negative effect upon partner abuse. The findings did not support a direct positive or negative effect of social support on past abuse. The findings did show that social support had an indirect effect on partner abuse through the sense of belonging variable reports (Fig. 4.1 through Fig. 4.5). Social support is a multidimensional variable that has been applied to a broad range of conceptualizations including material support, instrumental support, and emotional support (House, 1981; Schaefer, 1981; Weiss, 1974). Therefore this single measure may not have captured the nature of the variable.

Although subjects in the study spoke openly about family relationships, having an increase in social contacts may increase the probability of disharmony as family of origin and the present family and friends networks interact. The lack of significance in direct effects of social support may in part be explained with findings by DeKersedy and Kelly (1995). These researchers showed that support from male peers might have different effects than support from family members. Male peer support may actually increase forms of partner abuse especially noted in sexual abuse (DeKersedy & Kelly, 1995).

One of the four types of social support conceptualized by House (1981), instrumental support, appeared lacking in the majority of the sample whose mean income was less than $10,000, even though other types of support were sufficient, based on subjects’ reports. This disparity in types of perceived support may have led to non-significant findings for this variable. Perceived social support was not a significant predictor of physical and psychological partner abuse. These finding may have been influenced by the discrepancy between reported positive family support and reported peer support, the latter, which was found to be related to increased abusive behaviors (DeKersedy & Kelly). The non-significant findings overall of social support effects on
partner abuse shows the need to examine other measures of social support which may specifically target peer support as well as the present measures.

**The effect of sense of belonging on partner abuse.**

An individual's need to belong to part of some group has long been argued to be a basic need which humans seek. This basic, primitive need must be satisfied before individuals are able to attend to other less basic needs according to Maslow (1970). Maslow listed the need to belong as basic to each individual and prioritized above other needs such as respect, self-esteem, and self-actualization. Hagerty and Patusky (1995) noted that the need to belong is so powerful a variable that in some cases the primary unit of reflection is the relationship between individuals instead of individual functioning. This appears to also be closely related to dependency needs by the abusers who reported wondering how they could cope without others to love them.

Hagerty and Patusky (1995) also noted that sense of belonging might have different meanings to individuals depending on situational factors. This appears to be true with the population used in this study. Sense of belonging (or the lack of) was the best predictor of most forms of partner abuse and accounted for the majority of the variance within the models. As noted in Figures 4.1, 4.4, and 4.5, decreased sense of belonging (psychological) predicted an increase in severity-weighted frequency of physical partner abuse and severity of partner abuse through direct and indirect effects. The analysis also showed that most of the other interpersonal relatedness variables have indirect effects to partner abuse through sense of belonging. The psychological sense of belonging appears as a stable variable explaining much of the variance for partner abuse in the regression models. Although the antecedent component of sense of belonging had less of an effect on the abuse dependent variables, the variable nevertheless had direct
effects with the hopelessness mediator and the other interpersonal relatedness variables, which contributes to our overall understanding of partner abuse in this population. Findings were consistent with other research findings from Patusky (1994) who used the SOBI to study African-Americans students. Patusky found that subjects had an increased sense of belonging when interacting with their own racial group. When comparing social support and sense of belonging, each may have similar or different effects on partner abuse depending on the individuals or groups to which respondents identify. For instance, social support from male peers may contribute to increased abuse towards women. With sense of belonging, individuals who identify closely with other male peers who view abusing their partners as the norm may exhibit increased abuse if the abuser identifies with belonging to their peer or a referent group with similar views.

Consistent with the literature on sense of belonging, sense of belonging antecedents effects on partner abuse were mostly indirect with the exception of the effect of SOBI-A on SOBI-P, hopelessness and depression. The failure of the antecedents to have direct effects on partner abuse may also be related to the attributes of the antecedent component. Hagerty et al. (1992) stated that the antecedents, which must occur before the existence of the concept of sense of belonging, were: (a) energy for involvement, (b) potential and desire for meaningful involvement, and (c) potential for shared characteristics (p. 174). Thus, the antecedents are important components when studying African-American partner abusers especially related to the potential for meaningful involvement, and potential for shared characteristics. If there are perceived barriers which appear to prevent these individuals from being involved in activities shared by the majority society, opportunity for involvement may be limited to activities in one’s own family and community. If the supportive environment is comprised of male peers who
share common views related to partner abuse and male privilege, sense of belonging may have actually be related to an increase in partner abuse.

The mean for depressive symptom scores on the BDI was 13.62 (SD = 12.24) indicating mild depression in the samples and possible low energy, the latter which is needed to boost sense of belonging in other than immediate family activities. Although subjects reported belonging to a social network and people in their immediate environment, there may be little opportunity for these lower income men (many without employment or who are underemployed) to be involved in meaningful physical and social organizations other than those events held in their immediate surroundings. The magnitude to which sense of belonging effected most of the interpersonal relatedness variables, affect variables and partner abuse behaviors suggest that sense of belonging may actually act as a mediator between interpersonal relatedness variables and partner abuse.

**Indirect (Mediating) Effects of Hopelessness and Depression on Partner Abuse**

Hypotheses 4–9 proposed there would be indirect effect of hopelessness and depression on attachment styles, perceived social support, and sense of belonging. Although hopelessness had significant links with other variables, the immobilization of energy described by Carpenito (1987) may have contributed to the paucity of significant findings in this study when hopelessness was tested as a mediator of partner abuse.

Path models were also tested to determine the effect of hopelessness on partner abuse based on frequency of abuse from subjects’ self-reports, but most of those models were not used in the final analysis since many of the subjects denied using abusive tactics even though there was evidence in police records of abuse towards their partner. The one model that is based on self reports (see Figure 4.4) shows that when trait hopelessness is
entered into the model, it appears to have a negative effect on severity of physical partner abuse (Beta = -.294). However, overall findings of the study failed to demonstrate that hopelessness plays a significant part in subjects’ use of abusive acts against a female partner.

African-American Partner Abusers

From the verbatim responses of subjects (pg. 71), most failed to assume full responsibility for their own actions. Instead, many of the younger men in the study spoke of believing that they would not live to be 30 years of age, not because of their own actions, but due to racism and racial injustices, their low standard of living and family and community violence. Several men also spoke of their relationships as hopeless because of their partner abuse related legal problems. These men stated that as African-American males they could not receive justice once they were arrested. They reported that their arrest was due to (a) prejudiced views of the arresting officers, (b) their partner being “part of the system” which was against them, or (c) their partner being at fault for “causing” them to become violent. Many men in the present study stated in clinical interviews a perception of life as negative when relating low educational attainment, lack of jobs, or low paying jobs with little opportunity for advancement.

Although feelings of hopelessness were a primary topic during group work with other probationers, the study results did not show hopelessness as being significantly related to subjects’ reports of abuse. Eisikovits and Buchbinder (1997) found in a phenomenological study that partner abusers sometimes perceived themselves to be “at war” with their partners and used metaphors to describe their relationships. The researchers found that when the partner is seen as the enemy, intimacy becomes dangerous with fear and threats becoming central themes of the abusers’ perceptions of
their lives with their partners. Another possible reason for lack of significant findings between the study variables and partner abuse, with the exception of sense of belonging, may be subjects' denial of the abusive incidents that occurred. Their denial may be based either out of a conscious fear of the authorities if they affirmed the abuse although they were assured of confidentiality, or an unconscious fear of probable change if they confront or face up to their own violent behavior. This change could lead to loss of control over the victim whom the abuser had controlled. For individuals in a powerful position, giving up power and control may be too frightening unless mandated by powerful others. Subjects may even view change as the reversal of the position of control they had been in with the victim and view this possibility as unacceptable. This conclusion would be supported by findings from Petrik, Olsen, and Subtonik (1994), who studied 36 male abusers in outpatient treatment. These researchers found that the men in the study (a) felt powerless and (b) had a very low tolerance for being controlled, but tried to convey the opposite impression to partners.

Another possible explanation for the minimal results on hopelessness as a mediator of partner abuse is that hopelessness may be biologically related as well as situational (Gottschalk, Fronczek, & Buchsbaum, 1992, 1993). Gottschalk et al. found evidence of relationships between negative hope scores and localized cerebral glucose metabolic rates. Although outside the scope of this study, controlling for hopelessness by manipulating biological components may have yielded other results. The support of the hopelessness hypothesis suggests that this variable has multiple characteristics and is a heterogeneous phenomenon.

Although, as noted in Figure 4.2, the subjects reported mild to severe depression scores, in the majority of the models tested, the level of depression was not linked to an
increase or decrease in partner abuse although other interpersonal relatedness variables were directly linked to depression. Depression scores did not have any direct significant paths with physical abuse, psychological abuse, or sexual abuse. There were direct and indirect negative paths between depression and insecure attachment styles, perceived social support, and sense of belonging. However, none of those paths led to partner abuse in any of the models. One possible explanation for the non-significant findings of depression as a mediator of partner abuse may be the negative relationships between depression, social support, and depression and sense of belonging. Sense of belonging's large coefficients explains the variance between depression and partner abuse and mediates the effect depression may have on partner abuse. This suggests that depression may lead to low sense of belonging. The results also might be interpreted as suggesting that individuals could be so depressed that they do not have the energy needed for antecedents of sense of belonging.

Value of Interpersonal Relatedness in Predicting Abuse

Results of these analyses indicate the potential value of an interpersonal relatedness theoretical perspective in predicting male physical, psychological and sexual abuse against a female partner. The models developed through the data analysis supports major tenets of Bowlby’s attachment theory (1969) and Hagerty et al.’s (1992) conceptualization of sense of belonging. The results of the study indicate that the interpersonal relatedness variables were connected to partner abuse mainly through sense of belonging. The strongest direct predictor of the violence was sense of belonging, supporting its applicability in clinical practice with this population.

The results of the analyses and the above variables are compelling in themselves to sustain their use in future studies and increase the understanding of partner abuse in
this and other populations. Most of the earlier data on partner abuse has come from
majority Caucasian populations. Interpersonal relatedness concepts can have vastly
different meanings when doing cross-cultural research. Although part of American
culture and society, African-Americans nevertheless may impart significantly different
meanings to their partner relationships than the majority culture.

When addressing the variable of attachment within the African-American culture,
not only must one examine insecure attachment bonds as they relate intra-familial, but
one must also address how historical concerns such as power and control, domination,
and subjugation affect not only individuals, but communities and whole cultures. For
example, being female in a male dominant society may consciously and unconsciously
foster attachment or detachment from the prominent attachment figures based on a
society’s view of females and their value to the society. The issue of being an African-
American male in a predominantly Caucasian society which may not value them
(Hawkins, 1987) may also have an effect upon insecure attachment styles. A related
question outside the scope of the present study is: “Does racial identity impact one’s
perception of belonging, not only to their primary groups but in a larger sense to their
‘world’?” These questions were raised after examining the data especially when trying to
interpret the subjects’ responses to statements on the ASQ as noted in the results. These
data and the subjects’ verbatim statements echoed empirical reviews and studies which
noted many barriers, attitudes and stereotypes of African-American males that serve to
inhibit not only their masculine roles but also their functioning in a nurturant role as a

Although the attachment styles, social support, and sense of belonging variables
refer to interpersonal relations, with these African-American abusers it appears that
cultural and historical concerns are also involved in their views about taking responsibility for their abuse. During the O.J. Simpson domestic homicide trial and the subsequent not guilty verdict in Los Angeles, the subjects who had already participated in the study were attending groups for probationers held by this researcher. To boost their statements of a perception of not belonging to the larger Euro-American society and of group identification, one subject replied regarding the verdict: “Well at least we (referring to African-Americans) got over this time.” This is not an exhaustive study, and it is beyond the scope of this study to examine other variables conceptualized as being related to partner abuse, but a new path model has evolved for examining interpersonal relatedness and mediating variables in African-American males who abuse their partners.

Hierarchical Regression Analysis

The path findings are embedded in the hierarchical analyses and showed changes in the betas when each variable or block was entered into the model. The variance explained by the variables in Appendix tables D1 -D4 demonstrated the overall importance of the insecure attachment styles and sense of belonging in their ability to predict types of partner abuse. The analyses also demonstrated the mediating effect of sense of belonging upon insecure attachment styles and the additive effects of depression on sense of belonging. In these tables one may note that the effects of attachment style decrease as sense of belonging increases. It appears that sense of belonging acts as a mediator between attachment styles and partner abuse. That is, the model suggests that insecure attachment leads to a low sense of belonging which leads to partner abuse. In addition, as noted in D1 through D4, sense of belonging had an even greater effect for subjects who may report feeling hopeless and depressed. Also as shown in these tables, SOBI-P increased as hopelessness and depression entered in the equation. SOBI-A’s
effects, however, decreased slightly as hopelessness entered the equation. This may indicate that the antecedents to sense of belonging are vastly different than the psychological components. In other words, being able to measure an individual’s psychological sense of belonging may be one of the most important variables to examine in preventive efforts to combat partner abuse.

**Implications**

Findings of the present study have important implications for nursing practice and nursing research. Not only are women coming to emergency departments in increasing numbers. Approaches to combat violence against women and children need to include strategies for prevention. This cannot be accomplished until all of the key variables in the partner abuse equation have been identified. One key variable is the high unemployment rate in this sample. In many studies, socioeconomic status has been found to be significantly related to partner abuse.

Nursing and other health care personnel must be able to recognize the potential for violence in families and implement effective plans to intervene at the earliest stages in the cycle of abuse. One of the keys to prevention is understanding and educating perpetrators and victims that abuse against less powerful individuals by partners may be driven by interpersonal relatedness variables. The proposed models of partner abuse provide understanding of some of the key variables that appear interrelated with partner abuse within African-American males who perpetrate abuse against their partners. The study demonstrates the importance of examining correlates of the actual physical violence. The study also implicitly provides a conceptual framework for future intervention studies based on data obtained from minority subjects. Attachment theory looks at patterns of attachment or detachment as the patterns operate in parental/offspring
and spouse/spouse bonds. Significant findings in this study of insecure attachment styles effecting partner abuse lead to several new questions. Are attachment styles (the need for approval, preoccupation with relationships and discomfort with closeness) affected by the race of the respondent? These accounted for some of the variance when examining severity-weighted frequency of sexual abuse. Is race itself a significant factor on any of these types of abuse? Are patterns of attachment passed through generations through the socialization process? Are the interpersonal relatedness instruments that were used for the study tapping into a larger sense of connectedness or disconnectedness? If so, this not only ties in with interpersonal relatedness theories, but then raises the question of why only some African-American males become partner abusers and other do not exhibit this behavior. This naturally leads to future intra-racial replication studies between abusers and non-abusers as the next mode of inquiry in the research process.

One goal of studies is to inform the methodology of future research. The results from this one study help to demonstrate the appropriateness and applicability of questions and approaches to this specific population. Although the variables introduced in the study by themselves could be applied to other cultures, their use with minority subjects lays the groundwork for future studies. Refinement of measures, terminology, and study procedures become very important when they are applied to samples from other cultures. If we as healthcare providers want to impact the lives of dysfunctional families, not only must we treat the victims of abuse and hold partner abusers accountable, but we must also begin to understand correlates and predictors of abuse in multicultural communities through research and models which examine the issue through empirically based, culturally sensitive methodologies. As researchers, we strive to build models of human behavior and experiences such as abuse, pain, and suffering through rigorous
methodologies and tested procedures. However, as nurse researchers, we are constrained to remember that human experiences such as sense of belonging, hopelessness or pain may not always be verifiable through scientific means. We must remember that as nurses we understand the concept of pain to be "as the patient perceives." Models that fail to capture the experience as relayed by the respondents may need to be approached with different methodologies. If the research is based on triangulated methods, including input by the subjects, statistical non-significance in the findings does not mean the hypothesized relationships do not exist. We must constantly re-examine our research, not only to question the hypotheses that were supported, but to continually question why others were not.

Limitations of the Study and Directions for Future Research

Several limitations in the current study are noteworthy. One limitation is the sample size of 69. Although the sample size was adequate for path analyses with the range of 10-20 subjects suggested for each independent variable (Mitchell, 1993), the power of a study increases with sample size. The ability to reject the null hypotheses also increases with a larger sample size as more of the hypothesized effects of independent and mediator variables may have been significant. The limited range in socioeconomic status as well as sample size also limits the generalizability of the study. Future studies based on reports from more subjects who come from varied SES may yield different results. Future studies also may employ the use of structural equations modeling which like path analysis can estimate the direct and indirect effects, but also allows the discussion of latent variables. This type of analysis would allow the researcher to address measurement and path issues. This type of analysis also allows for non-recursive models which could allow the researcher to more closely analyze the direction and relationship of
sense of belonging and the other variables in this study. Another limitation of the study was the inclusion of only African-American partner abusers. Studies with both (a) partner abusers and non-abusers, and (b) African-Americans and Caucasian partner abusers need to be conducted to examine whether the results of this study vary significantly from data obtained from African-American non-abusers. Differences on the interrelationships of the identified variables as they occur across races also need to be identified. However, there appeared to be a group identification with the African-American culture. Future studies need to examine measures of racial identity in samples of African-American partner abusers and non-abusers to assess the effects and interactions with sense of belonging measures.

Thirty subjects reported using no physical abuse although there was evidence in the police record that 25 of them had committed partner abuse. The use of self-reports has limitations especially when comparisons are not made between the self reports and reports from victims of abuse. Studies have shown that there is much discrepancy between rates of abuse as reported by perpetrators of violence and the victims of their abuse (Hilton, Harris, & Rice, 1998; Holtzworth-Munroe & Anglin, 1991; Koss, 1993; Straus & Gelles, 1990). Care in designing comparison studies is needed because we know that questioning the female victims may place them at risk for further abuse unless appropriate measures are introduced to assure their safety.

Another limitation of the study involves the use of cross-sectional data for the analysis. This method provides a "snapshot" of events and lends itself to under reporting and in some cases over-reporting. One inherent limitation of cross-sectional survey methods is that individuals' responses may give misleading results as different items may be interpreted differently for each individual. With small samples, the probability of
committing Type II errors increases. Longitudinal studies with large samples help decrease those risks. In addition, a few of the subjects in the study reported very high scores for several physical and psychological abuse items which could suggest that partner abuse for them is a norm in their referent group. Certainly, the high scores skewed the data to some extent.

The Measure of Wife Abuse (MWA) was developed with statements about different types of partner abuse (physical, verbal, and non-verbal psychological and sexual) which randomly interspersed throughout the scale. Several of the respondents for the present study commented on some of the items that “Black men don’t talk like this.” The cultural sensitivity of this tool, then, needs to be examined before it is used in future studies. The Conflict Tactics Scale (CTS) is the scale most often used to assess partner abuse. Although not used for the study, the CTS was designed so those less severe questions that may appear more socially desirable are responded to before severe items. The phenomenon of social desirability may indeed be a factor when attempting to elicit responses from partner abusers who may be responding to perceived social desirability of items. Future studies employing the MWA can be designed using a format similar to the CTS, which may decrease the chances that individuals may be giving socially desirable responses.

Although sense of belonging was the variable that had the most direct and indirect paths to partner abuse, the total amount of variance explained by the models was modest (Table 4.4). This could indicate the need to assess other variables as well as sense of belonging such as alienation, which may play a role in partner abuse. One interesting phenomenon occurred with the raters of the severity of violence scales. Although the number of raters was small, a possible trend was noted as the female raters consistently
rated the majority of items as more severe in all categories than the one male professional rater. Not only does this have implications regarding gender issues in responses on the scales, but it also indicates on the need to examine individual items closely. For example, one item asks about the “intent of the abusive behavior” which may be interpreted differently between genders. If, for instance, male abusers and non abusers see the severity of the items more similarly than females, more research is needed to assess how men see the abuse as affecting their partners. Although not within the scope of this study, the potential for different interpretations of items needs to be considered when developing scales and planning future research studies with this population.

Roles of Nursing in Partner Abuse Research

Nursing has long considered the concept of care to be a central concept to the study and practice of nursing. A successful model of care requires understanding of concepts and phenomena basic to the needs of the patient, whether the patient is an individual, family, or community of individuals. African-American victims of partner abuse do not live in isolation but in an environment that may be vastly different than the surroundings in which they interface with the nurse. Nursing research must continue to inform nursing practice through testing of culturally sensitive models which describe cultural values and needs of people of color. The meaning of phrases such as multicultural, and cultural sensitivity must not remain in the domain of academia but must filter down to the nurse practicing both at the bedside and in the community where the client lives. Nurses working in the community have evidenced some of the dynamics involved in meeting the healthcare needs of women and children of color who have been abused by perpetrators of violence. These dynamics are complex and may be affiliated with interpersonal relatedness themes that influence the abuser’s behaviors. Results of
this study suggest that individuals' insecure attachment styles and sense of belonging may occur as antecedents to the abusers' behaviors and may give direction for partner abuse treatment. In groups with peers, many of the subjects in the present study often spoke of issues of racism and injustices based on race as being pertinent to their ability function in this society. The men appeared to find it difficult to address their abuse without referring to injustices done to them by Euro-Americans. The significant effects of sense of belonging and attachment on certain forms of partner abuse may have a great deal to do with perpetrators' feeling as if they do not belong and their insecure attachment to broader social structures as well as in the home. Although this interpretation is speculative from the results shown, the written self-reports as well as anecdotal comments from the men during group work conveyed that we cannot take a colorblind treatment approach to men who abuse. We cannot neglect the influence of their cultures or offer only one treatment model for all abusers, and still hope to achieve goals of stopping family violence. Davis, Galinsky, and Schopler (1995) stated that whenever people of different races come together in a group, issues of race, culture and ethnicity are present that cannot be overlooked. This includes the nurse-patient relationship and can impact patient care from the nurse provider through quality of care given and/or through the patient with issues of non-compliance. Davis et.al. noted that whenever interaction takes place within multiracial groups, issues of institutional racism in the local environment and throughout society affects attitudes and behaviors of all members of a group. Effective treatment for the African-American male partner abuser may necessarily include addressing racism and racial attitudes before the abuser can address his own behaviors. Likewise, the African-American woman seeking treatment for abuse by her partner may be dealing with trust issues involving the nurse-patient
relationship as much as she is with her partner. We cannot afford to wait until after the partner abuser delivers the first slap, the first bruise, or the first wound to the victim, but must actively investigate possible correlates of abuse behaviors in preventive efforts. We must seek to develop prescriptive intervention models that not only treat or intervene in partner abuse, but which educate abusers and their families on concepts of attachment, sense of belonging, hopelessness and depression, and their effect on partner abuse.
APPENDICES
3-MWA

Please, write in the number of times you did these actions to your partner during the past six months, or during the last six months of the time you and your partner were together. Also, please circle one answer for how hurt or upset the partner was by each action. If you did not do these actions, please write a zero in the blank space.

<table>
<thead>
<tr>
<th>Number of times this happened in the last SIX months</th>
</tr>
</thead>
</table>
| 1. You screamed at your partner.  
How much did this hurt or upset her? (please circle below) |
| This Never hurts or Upsets her | This Rarely hurts or Upsets her | This Sometimes hurts or Upsets her | This Often hurts or Upsets her |
| 2. You squeezed your partner's torso.  
How much did this hurt or upset her? (please circle below) |
| This Never hurts or Upsets her | This Rarely hurts or Upsets her | This Sometimes hurts or Upsets her | This Often hurts or Upsets her |
| 3. You imprisoned your partner in your house.  
How much did this hurt or upset her? (please circle below) |
| This Never hurts or Upsets her | This Rarely hurts or Upsets her | This Sometimes hurts or Upsets her | This Often hurts or Upsets her |
| 4. You threw objects at your partner.  
How much did this hurt or upset her? (please circle below) |
| This Never hurts or Upsets her | This Rarely hurts or Upsets her | This Sometimes hurts or Upsets her | This Often hurts or Upsets her |
| 5. You entered your partner's genital area.  
How much did this hurt or upset her? (please circle below) |
| This Never hurts or Upsets her | This Rarely hurts or Upsets her | This Sometimes hurts or Upsets her | This Often hurts or Upsets her |
| 6. You used your partner's where.  
How much did this hurt or upset her? (please circle below) |
| This Never hurts or Upsets her | This Rarely hurts or Upsets her | This Sometimes hurts or Upsets her | This Often hurts or Upsets her |
| 7. You squeezed your partner.  
How much did this hurt or upset her? (please circle below) |
| This Never hurts or Upsets her | This Rarely hurts or Upsets her | This Sometimes hurts or Upsets her | This Often hurts or Upsets her |
| If you answered "Yes" to any of these questions, please tell us how you can change your behavior to prevent further harm to your partner. |
18. You scratched your partner with your fingernails.................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

19. You grabbed your partner in the bedroom.................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

20. You tried to rape your partner.........................................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

21. You took your partner's wallet leaving them stranded..................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

22. You punished your partner.........................................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

23. You said your partner was going to kill them................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

24. You hit your partner........................................................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

25. You humiliated your partner's children........................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

26. You stole your partner's possessions............................................................................

How much did this hurt or upset her? (please circle below)

This Never hurts
or upsets her

This Rarely hurts
or upsets her

This Sometimes hurts
or upsets her

This Often hurts
or upsets her

120

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27. You took your partner's car keys. .................................................................

How much did this hurt or upset her? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>

28. You hit your partner that no one would ever want her. ...............................

How much did this hurt or upset her? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>

29. You destroyed your partner's car. .................................................................

How much did this hurt or upset her? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>

30. You hit your partner that she were lazy. ....................................................

How much did this hurt or upset her? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>

31. You stabbed your partner with a knife. ..............................................................

How much did this hurt or upset her? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>

13. You told your partner that you were going to take away the children. ...........

How much did this hurt or upset her? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>

14. You threatened suicide. .................................................................................

How much did this hurt or upset your partner? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>

15. You called your partner a bimbo. ..................................................................

How much did this hurt or upset her? (Please circle below)

<table>
<thead>
<tr>
<th>This Never Hurts</th>
<th>This Rarely Hurts</th>
<th>This Sometimes Hurts</th>
<th>This Often Hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
<td>or Upset her</td>
</tr>
</tbody>
</table>
16. You hit your partner with a belt..................

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

17. You raced your partner..........................

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

18. You threw your partner onto the furniture.................

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

19. You harassed your partner over the telephone.......

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

40. You hung around outside your partner's outside home...

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

41. You told your partner that she was a horrid wife...........

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

42. You took porn pictures of your partner..................

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

43. You prostituted your partner..........................

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her

44. You told your partner that she wasn't good enough.....

How much did this hurt or upset her? (please circle below)

This Never hurts or upsets her
This Rarely hurts or upsets her
This Sometimes hurts or upsets her
This Often hurts or upsets her
45. You spank your partner. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

46. You forced your partner to have sex with other partners. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

47. You forced your partner to have sex with animals. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

48. You forced your partner as a sex object. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

49. You pushed you partner. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

50. You followed your partner. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

51. You told your partner you were going to kill her parents or family. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

52. You told your partner that she was stupid. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>

53. You forced your partner’s clothing off. .................................................................
   How much did this hurt or upset her? (please circle below)

<table>
<thead>
<tr>
<th>This Never hurts</th>
<th>This Rarely hurts</th>
<th>This Sometimes hurts</th>
<th>This Often hurts</th>
</tr>
</thead>
<tbody>
<tr>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
<td>or Upsets her</td>
</tr>
</tbody>
</table>
54. You shot you partner with a gun

How much did this hurt or upset her? (please circle below)

| That Never hurts or upsets her | This Rarely hurts or upsets her | This Sometimes hurts or upsets her | This Often hurts or upsets her |

55. You forced your partner to do unwanted sex acts

How much did this hurt or upset her? (please circle below)

| That Never hurts or upsets her | This Rarely hurts or upsets her | This Sometimes hurts or upsets her | This Often hurts or upsets her |

56. You choked your partner

How much did this hurt or upset her? (please circle below)

| That Never hurts or upsets her | This Rarely hurts or upsets her | This Sometimes hurts or upsets her | This Often hurts or upsets her |

57. You turned off your partner's electricity

How much did this hurt or upset her? (please circle below)

| That Never hurts or upsets her | This Rarely hurts or upsets her | This Sometimes hurts or upsets her | This Often hurts or upsets her |

58. You stole food or money from your partner

How much did this hurt or upset her? (please circle below)

| That Never hurts or upsets her | This Rarely hurts or upsets her | This Sometimes hurts or upsets her | This Often hurts or upsets her |

59. You told your partner that she was ugly

How much did this hurt or upset her? (please circle below)

| That Never hurts or upsets her | This Rarely hurts or upsets her | This Sometimes hurts or upsets her | This Often hurts or upsets her |

60. You whipped your partner

How much did this hurt or upset her? (please circle below)

| That Never hurts or upsets her | This Rarely hurts or upsets her | This Sometimes hurts or upsets her | This Often hurts or upsets her |
### Attachment Style Questionnaire

**Instructions:** Show how much you agree with each of the following items by rating them on this scale. Circle the response that most closely represents how you feel.

<table>
<thead>
<tr>
<th>Item</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, I am a worthwhile person.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>I am easier to get to know than most people.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>I feel confident that other people will be there for me when I need them.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>I prefer to depend on myself rather than other people.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>I prefer to keep to myself.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>To ask for help is to admit that you’re a failure.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>People’s worth should be judged by what they achieve.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>Achieving things is more important than building relationships.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>Doing your best is more important than getting on with others.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>If you’ve got a job to do, you should do it no matter who gets hurt.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>It’s important to me that others like me.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>It’s important to me to avoid doing things that others won’t like.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>I find it hard to make a decision unless I know what other people think.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>My relationships with others are generally superficial.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td>Sometimes I think I am no good at all.</td>
<td>1 2 3 4 5 6</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>16.</td>
<td>I find it hard to trust other people.</td>
</tr>
<tr>
<td>17.</td>
<td>I find it difficult to depend on others.</td>
</tr>
<tr>
<td>18.</td>
<td>I find that others are reluctant to get as close as I would like.</td>
</tr>
<tr>
<td>19.</td>
<td>I find it relatively easy to get close to other people.</td>
</tr>
<tr>
<td>20.</td>
<td>I find it easy to trust others.</td>
</tr>
<tr>
<td>21.</td>
<td>I feel comfortable depending on other people.</td>
</tr>
<tr>
<td>22.</td>
<td>I worry that others won’t care about me as much as I care about them.</td>
</tr>
<tr>
<td>23.</td>
<td>I worry about people getting too close.</td>
</tr>
<tr>
<td>24.</td>
<td>I worry that I won’t measure up to other people.</td>
</tr>
<tr>
<td>25.</td>
<td>I have mixed feelings about being close to others.</td>
</tr>
<tr>
<td>26.</td>
<td>While I want to get close to others, I feel uneasy about it.</td>
</tr>
<tr>
<td>27.</td>
<td>I wonder why people would want to be involved with me.</td>
</tr>
<tr>
<td>28.</td>
<td>It’s very important to me to have a close relationship.</td>
</tr>
<tr>
<td>29.</td>
<td>I worry a lot about my relationships.</td>
</tr>
<tr>
<td>30.</td>
<td>I wonder how I would cope without someone to love me.</td>
</tr>
<tr>
<td>31.</td>
<td>I feel confident about relating to others.</td>
</tr>
<tr>
<td>32.</td>
<td>I often feel left out or alone.</td>
</tr>
<tr>
<td>33.</td>
<td>I often worry that I do not really fit in with other people.</td>
</tr>
<tr>
<td>34.</td>
<td>Other people have their own problems, so I don’t bother them with mine.</td>
</tr>
</tbody>
</table>

1 = totally disagree  
2 = strongly disagree  
3 = slightly disagree  
4 = slightly agree  
5 = strongly agree  
6 = totally agree

126
<table>
<thead>
<tr>
<th></th>
<th>1 = totally disagree</th>
<th>2 = strongly disagree</th>
<th>3 = slightly disagree</th>
<th>4 = slightly agree</th>
<th>5 = strongly agree</th>
<th>6 = totally agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>35.</td>
<td>When I talk over my problems with others, I generally feel ashamed or foolish.</td>
<td>1 2 3 4 5 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>36.</td>
<td>I am too busy with other activities to put much time into relationships.</td>
<td>1 2 3 4 5 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>37.</td>
<td>If something is bothering me, others are generally aware and concerned.</td>
<td>1 2 3 4 5 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>38.</td>
<td>I am confident that other people will like and respect me.</td>
<td>1 2 3 4 5 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39.</td>
<td>I get frustrated when others are not available when I need them.</td>
<td>1 2 3 4 5 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>40.</td>
<td>Other people often disappoint me.</td>
<td>1 2 3 4 5 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statement</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------</td>
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<td>---</td>
<td>---</td>
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<td>---</td>
<td>---</td>
</tr>
<tr>
<td>There is someone I feel close to who makes me feel secure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I belong to a group in which I feel important</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People let me know that I do well at work (job, homemaking)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I can't count on my relatives and friends to help me with problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have enough contact with the person who makes me feel special</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I spend time with others who have the same interests that I do</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is little opportunity in my life to be giving and caring to another person</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Others let me know that they enjoy working with me (job, committees, projects)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are people who are available if I needed help over an extended period of time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is no one to talk to about how I'm feeling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Among my group of friends we do favors for each other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have the opportunity to encourage others to develop their interests and skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KEY:</td>
<td>1 = Strongly Disagree</td>
<td>2 = Disagree</td>
<td>3 = Somewhat Disagree</td>
<td>4 = Neutral</td>
<td>5 = Somewhat Agree</td>
<td>6 = Agree</td>
</tr>
<tr>
<td>------</td>
<td>---------------------</td>
<td>-------------</td>
<td>-----------------------</td>
<td>-----------</td>
<td>------------------</td>
<td>--------</td>
</tr>
<tr>
<td>m.</td>
<td>My family lets me know that I am important for keeping the family running</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>n.</td>
<td>I have relatives or friends that will help me out even if I can't pay them back</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>o.</td>
<td>When I am upset there is someone I can be with who lets me be myself</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>p.</td>
<td>I feel no one has the same problems as I</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>q.</td>
<td>I enjoy doing little &quot;extra&quot; things that make another person's life more pleasant</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>r.</td>
<td>I know that others appreciate me as a person</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>s.</td>
<td>There is someone who loves and cares about me</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>t.</td>
<td>I have people to share social events and fun activities with</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>u.</td>
<td>I am responsible for helping provide for another person's needs</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>v.</td>
<td>If I need advice there is someone who would assist me to work out a plan for dealing with the situation</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>w.</td>
<td>I have a sense of being needed by another person</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>x.</td>
<td>People think that I'm not as good a friend as I should be</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>y.</td>
<td>If I get sick, there is someone to give me advice about caring for myself</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
# Sense of Belonging Instrument-A

**Instructions:** Here are some statements with which you may or may not agree. Using the key listed below, circle the response that most closely reflects your feelings about each statement.

<table>
<thead>
<tr>
<th></th>
<th>strongly disagree</th>
<th>disagree</th>
<th>agree</th>
<th>strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>It is important to me that I am valued or accepted by others.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>2.</td>
<td>In the past, I have felt valued and important to others.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>3.</td>
<td>It is important to me that I fit somewhere in this world.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>4.</td>
<td>I have qualities that can be important to others.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>5.</td>
<td>I am working on fitting in better with those around me.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>6.</td>
<td>I want to be a part of things going on around me.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>7.</td>
<td>It is important to me that my thoughts and opinions are valued.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>8.</td>
<td>Generally, other people recognize my strengths and good points.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>9.</td>
<td>I can make myself fit in anywhere.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>10.</td>
<td>All of my life I have wanted to feel like really belonged somewhere.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>11.</td>
<td>I don't have the energy to work on being a part of things.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>12.</td>
<td>Fitting in with people around me matters a great deal.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>13.</td>
<td>I feel badly if others do not value or accept me.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>14.</td>
<td>Relationships take too much energy for me.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
<tr>
<td>15.</td>
<td>I just don't feel like getting involved with people.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
</tr>
</tbody>
</table>

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### Sense of Belonging Instrument-P

**Instructions:** Here are some statements with which you may or may not agree. Using the key listed below, circle the response that most closely reflects your feelings about each statement.

<table>
<thead>
<tr>
<th>1. I often wonder if there is anyplace on earth where I really fit in.</th>
<th>SD</th>
<th>D</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. I am just not sure if I fit in with my friends.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>3. I would describe myself as a misfit in most social situations.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>4. I generally feel that people accept me.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>5. I feel like a piece of a jigsaw puzzle that doesn't fit into the puzzle.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>6. I would like to make a difference to people or things around me but I don't feel that what I have to offer is valued.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>7. I feel like an outsider in most situations.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>8. I am troubled by feeling like I have no place in this world.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>9. I could disappear for days and it wouldn't matter to my family.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>10. In general, I don't feel a part of the mainstream of society.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>11. I feel like I observe life rather than participate in it.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>12. If I died tomorrow, very few people would come to my funeral.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>13. I feel like a square peg trying to fit into a round hole.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>14. I don't feel that there is anyplace where I really fit in this world.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>15. I am uncomfortable knowing that my background and experiences are so different from those who are usually around me.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>16. I could not see or call my friends for days and it wouldn't matter to them.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>17. I feel left out of things.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
<tr>
<td>18. I am not valued by or important to my friends.</td>
<td>SD</td>
<td>D</td>
<td>A</td>
<td>SA</td>
</tr>
</tbody>
</table>
STATE-TRAIT HOPE INVENTORY
GRIMM SELF-EVALUATION SCALE
(Form H-S)

Directions: A number of statements which people might use to describe themselves are given below. Read each statement and then circle the choice to the right of the statement to indicate how you feel right now at this moment. There are no right or wrong answers. Do not spend too much time on any one statement, but give the answer that seems to describe your present feelings best.

SA = Strongly Agree   D = Disagree
A = Agree               SD = Strongly Disagree
NAD = Neither Agree Nor Disagree

1. I am working hard to get what I want. SA  NAD  D  SD
2. I feel optimistic about the future. SA  NAD  D  SD
3. Any plans I make for myself won’t work out. SA  NAD  D  SD
4. I need other people for advice and support. SA  NAD  D  SD
5. I have choices regarding my direction in life. SA  NAD  D  SD
6. I’m not sure I can solve any problems I may have. SA  NAD  D  SD
7. I expect my future life to be more difficult. SA  NAD  D  SD
8. A relationship with God is important to me. SA  NAD  D  SD
9. The future does not hold any good things for me. SA  NAD  D  SD
10. I know I am able to clearly identify what I want. SA  NAD  D  SD
11. My future seems uncertain to me. SA  NAD  D  SD
12. I feel I am a loner and on my own. SA  NAD  D  SD
13. Nothing can go well help me get what I want. SA  NAD  D  SD
14. I trust others to be there for me. SA  NAD  D  SD
15. Setting goals for myself is important to me. SA  NAD  D  SD
16. I can take action to solve any problems I may have. SA  NAD  D  SD
17. I’m not sure I know what to do with my life. SA  NAD  D  SD
18. I do nothing about my problems as they will work themselves out. SA  NAD  D  SD
19. I can’t believe other people can help me. SA  NAD  D  SD
20. My future holds good things in store. SA  NAD  D  SD

132
SELF-EVALUATION SCALE
(Form H-T)

Directions: A number of statements which people might use to describe themselves are given below. Read each statement and then circle the choice to the right of the statement to indicate how you generally feel. There are no right or wrong answers. Do not spend too much time on any one statement, but give the answer that seems to describe how you generally feel.

SA = Strongly Agree
A = Agree
NAD = Neither Agree Nor Disagree
D = Disagree
SD = Strongly Disagree

21. I generally have choices regarding my direction in life. SA A NAD C SD
22. I usually feel I am a loner and on my own. SA A NAD C SD
23. Setting goals for myself usually won't work out. SA A NAD C SD
24. My future holds good things in store. SA A NAD C SD
25. I generally know I am able to clearly identify what I want. SA A NAD C SD
26. I generally trust others to be there for me. SA A NAD C SD
27. Any plans I make for myself usually won't work out. SA A NAD C SD
28. I generally don't know what to do with my life. SA A NAD C SD
29. I can take action to solve any problems I may have. SA A NAD C SD
30. I generally expect my future life to be more difficult. SA A NAD C SD
31. I usually need other people for advice and support. SA A NAD C SD
32. I am not sure I can solve any problems I may have. SA A NAD C SD
33. I generally work hard to get what I want. SA A NAD C SD
34. I usually don't think about the future. SA A NAD C SD
35. I do nothing about my problems as they will work themselves out. SA A NAD C SD
36. My future seems uncertain to me. SA A NAD C SD
37. Usually nothing I can do will help me get what I want. SA A NAD C SD
38. I don't believe other people can help me. SA A NAD C SD
39. I generally feel optimistic about the future. SA A NAD C SD
40. A relationship with God is important to me. SA A NAD C SD

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BDI

This questionnaire consists of 21 groups of statements. After reading each group of statements carefully, circle the number (0, 1, 2 or 3) next to the one statement in each group which best describes the way you have been feeling the past week, including today. If several statements within a group seem to apply equally well, circle each one. Be sure to read all the statements in each group before making your choice.

1 0 I do not feel sad.
1 1 I feel sad.
2 2 I am sad all the time and I can’t snap out of it.
3 3 I am so sad or unhappy that I can’t stand it.

2 0 I am not particularly discouraged about the future.
1 1 I feel discouraged about the future.
2 2 I feel I have nothing to look forward to.
3 3 I feel that the future is hopeless and that things cannot improve.

3 0 I do not feel like a failure.
1 1 I feel I have failed more than the average person.
2 2 As I look back on my life, all I can see is a lot of failures.
3 3 I feel I am a complete failure as a person.

4 0 I get as much satisfaction out of things as I used to.
1 1 I don’t enjoy things the way I used to.
2 2 I don’t get real satisfaction out of anything anymore.
3 3 I am dissatisfied or bored with everything.

5 0 I don’t feel particularly guilty.
1 1 I feel guilty a good part of the time.
2 2 I feel quite guilty most of the time.
3 3 I feel guilty all of the time.

6 0 I don’t feel I am being punished.
1 1 I feel I may be punished.
2 2 I expect to be punished.
3 3 I feel I am being punished.

7 0 I don’t feel disappointed in myself.
1 1 I am disappointed in myself.
2 2 I am disgusted with myself.
3 3 I hate myself.

8 0 I don’t feel I am any worse than anybody else.
1 1 I am critical of myself for my weaknesses or mistakes.
2 2 I blame myself all the time for my faults.
3 3 I blame myself for everything bad that happens.

9 0 I don’t have any thoughts of killing myself.
1 1 I have thoughts of killing myself, but I would not carry them out.
2 2 I would like to kill myself.
3 3 I would kill myself if I had the chance.

10 0 I don’t cry any more than usual.
1 1 I cry more now than I used to.
2 2 I cry all the time now.
3 3 I used to be able to cry, but now I can’t cry even though I want to.
11 0 I am no more irritable now than I ever am.
   1 I get annoyed or irritated more easily than I used to.
   2 I feel irritated all the time now.
   3 I don't get irritated at all by the things that used to irritate me.

12 0 I have lost interest in other people.
   1 I am less interested in other people than I used to be.
   2 I have lost most of my interest in other people.
   3 I have lost all of my interest in other people.

13 0 I make decisions as well as I ever could.
   1 I put off making decisions more than I used to.
   2 I have greater difficulty in making decisions than before.
   3 I can't make decisions at all anymore.

14 0 I don't feel I look any worse than I used to.
   1 I am worried that I am looking old or unattractive.
   2 I feel that there are permanent changes in my appearance that make me look unattractive.
   3 I believe that I look ugly.

15 0 I can work about as well as before.
   1 It takes an extra effort to get started at doing something.
   2 I have to push myself very hard to do anything.
   3 I can't do any work at all.

16 0 I can sleep as well as usual.
   1 I don't sleep as well as I used to.
   2 I wake up 1-2 hours earlier than usual and find it hard to get back to sleep.
   3 I wake up several hours earlier than I used to and cannot get back to sleep.

17 0 I don't get more tired than usual.
   1 I get tired more easily than I used to.
   2 I get tired from doing almost anything.
   3 I am too tired to do anything.

18 0 My appetite is no worse than usual.
   1 My appetite is not as good as it used to be.
   2 My appetite is much worse now.
   3 I have no appetite at all anymore.

19 0 I haven't lost much weight, if any lately.
   1 I have lost more than 5 pounds.
   2 I have lost more than 10 pounds.
   3 I have lost more than 15 pounds.

   I am purposely trying to lose weight by eating less.
   Yes ______ No ______

20 0 I am no more worried about my health than usual.
   1 I am worried about physical problems such as aches and pains; or upset stomach; or constipation.
   2 I am very worried about physical problems and it's hard to think of much else.
   3 I am so worried about my physical problems that I cannot think about anything else.

21 0 I have not noticed any recent change in my interest in sex.
   1 I am less interested in sex than I used to be.
   2 I am much less interested in sex now.
   3 I have lost interest in sex completely.
General Information Questionnaire

Below are some questions about you that will help us to better understand the results of our research. Your directness in answering these questions is important. Remember that this is confidential and our results will only be reported as group data.

1. What is your age? ______ years

2. Your sex? □ male □ female

3. Marital status? □ single □ divorced □ separated □ married □ widowed
   If married, how long? ______

4. What are your living arrangements?
   □ live alone □ live with spouse
   □ live with a relative □ live with significant other
   □ live with a roommate □ other (please describe):

5. How many children do you have? ______

6. Total number of children living at home? ______

7. What is your religious preference?
   □ Jewish □ Protestant
   □ None □ Roman Catholic
   □ Other (please specify)

8. What is your ethnic background?
   □ Caucasian/Euro-American □ Hispanic
   □ Native American □ Asian
   □ Other (please specify)
9. What is the highest grade of school or year of college that you have completed?

<table>
<thead>
<tr>
<th>Grade School</th>
<th>College</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ 00</td>
<td>☐ 07</td>
</tr>
<tr>
<td>☐ 01</td>
<td>☐ 08</td>
</tr>
<tr>
<td>☐ 02</td>
<td>☐ 09</td>
</tr>
<tr>
<td>☐ 03</td>
<td>☐ 10</td>
</tr>
<tr>
<td>☐ 04</td>
<td>☐ 11</td>
</tr>
<tr>
<td>☐ 05</td>
<td>☐ 12</td>
</tr>
<tr>
<td>☐ 06</td>
<td></td>
</tr>
</tbody>
</table>

10. What is the yearly income level of your immediate family (or self if not assisted by parents or spouse)?

<table>
<thead>
<tr>
<th>Income Level</th>
<th>☐ $0 - $9,999</th>
<th>☐ $25,000 - $39,999</th>
<th>☐ $55,000 - $69,999</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ $10,000 - $24,999</td>
<td>☐ $40,000 - $54,999</td>
<td>☐ over $70,000</td>
</tr>
</tbody>
</table>

11. What is your employment status?

- ☐ not employed
- ☐ retired
- ☐ employed full-time
- ☐ employed part-time
- ☐ Other (please specify)

12. What is your student status?

- ☐ not a student
- ☐ part-time student
- ☐ full-time student

13. What types of health insurance do you have (check all that apply)?

- ☐ None
- ☐ Medicare
- ☐ Blue Cross/Blue Shield
- ☐ Medicaid/SSI
- ☐ Private insurance (please specify)
- ☐ HMO (please specify)
- ☐ Other (please specify)

14. Can you describe what types of mental health care your insurance covers (check all that apply)?

- ☐ None
- ☐ Outpatient services
- ☐ Hospitalization
- ☐ Private individual therapy
- ☐ Group therapy
- ☐ Couples/marital therapy
- ☐ Don't know/Not sure
15. Have you EVER received any type of mental health treatment (prior to any present treatment)? □ yes □ no

16. What types of mental health treatment have you experienced in the past?
- none
- individual counseling/therapy
- family counseling/therapy
- group counseling/therapy
- psychiatric medications
- electroconvulsive therapy
- in-patient hospitalization
- day treatment program
- self-help group such as Alcoholics Anonymous

17. Have you ever attempted suicide? □ yes □ no

If YES, how many times have you attempted suicide?

18. Are you currently thinking about committing suicide? □ yes □ no

19. On how many different occasions have you sought mental health treatment in the past?

20. Are you taking any nonpsychiatric medications now? □ yes □ no

If yes, please list the medications you are taking and what they are for:

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

21. Are you taking any psychiatric medications now? □ yes □ no

If yes, please list the medications you are taking and what they are for:

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________
22. Is there a history of mental illness/emotional problems in your family? □ yes □ no

If yes, please describe:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

23. Do you believe the mental health treatments you have received so far have been effective? □ yes □ no □ not sure

24. What types of mental health treatment that you are now receiving do you find most helpful?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

25. What types of mental health treatment that you are now receiving do you find NOT helpful?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

26. Do you have a family physician or primary care provider? □ yes □ no

27. How would you rate the quality of your family physician or primary care provider?
□ poor □ fair □ average □ above average □ excellent

28. How often do you feel that you are able to talk to your family physician or primary care provider about any problem?
□ not at all □ rarely □ somewhat □ usually □ all the time
Statement of Informed Consent

1. __________________ agree to participate in a research project conducted by Larry B. Rankin, RN. BSN. MA. HSM. a graduate student from the University of Michigan School of Nursing. I understand that during the course of domestic violence treatment, data will be obtained through questionnaires, and verbal and taped interviews aimed at identifying of various patterns of my behavior and interaction between myself and my spouse/significant other. I understand that no physical risks are involved. Mental health risks include possible affective (emotional) problems incurred in communicating past difficulties with spouse/significant other or family members and will be dealt with by referral to Community Mental Health Services.

I understand that all information will be kept strictly confidential and used for research purposes only. Taped interviews will be discussed only in post group sessions with mental health advisors and then destroyed. My name will never be used in any published papers regarding the study. I understand that participation in the project is voluntary and that refusal to participate will not affect my current treatment. I may withdraw at any time from the research study by notifying the investigator. The investigator has explained the research procedure to me. I understand that I can ask questions at any time during the procedure concerning the study and implications from being involved. I also understand that my participation is voluntary and that I may withdraw from the study at any time. If I ever have any questions about my involvement in the study, I can telephone Mr. Rankin at [insert phone number].

Signature___________________________________________ Date_____

Investigator________________________________________ Date____
THE UNIVERSITY OF MICHIGAN SCHOOL OF NURSING  
Ann Arbor, Michigan

MEMO TO:  James Randolp, Senior Project Representative  
Division of Research Development and Administration

FROM:  Marilyn J. Sveiga, PhD, RN  
Chairperson, Human Subjects Review Committee

RE:  Institutional Review Board Action

DATE:  July 18, 1995

<table>
<thead>
<tr>
<th>Name(s) of Investigator(s)</th>
<th>Program/Department</th>
<th>Faculty/Staff</th>
<th>Student Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Larry Bernard Rankin</td>
<td>School of Nursing</td>
<td>Doctors, Student</td>
<td></td>
</tr>
</tbody>
</table>

Proposal Title: The impact of hopelessness, sense of belonging, locus of control, and socio-economic status on domestic violent behaviors in African American women

Type of Submission:  X New  
FUNDING SOURCE:  X NOT APPLICABLE

Type of Human Subjects Review:  X Expedited  
Full Board

Modifications as Result of Review:  X Minor  
Major

Informed Consent Method:  X Written  
Written Waived

Adequate precautions have been instituted to assure reasonable protection of subjects' rights:  X Yes  
No

Institutional Review Board Action:  Proposal/Project Approval:  X Yes  
No

Investigator(s) is/are notified by a copy of this form that, before making any changes (including but not limited to site change) which might bring into question the rights of human subjects, the School of Nursing Human Subjects Review Committee must be notified in writing and approved the changes.

Next Human Subjects Review due in 12 months by July 1996.

Human Subjects Review Committee/Chairperson  
Date  
7-2-96

CC:

OO/bg

Rev. 7/87
TO: James R. Randolph  
Assistant Director Research Administration  
Division of Research Development and Administration  
3003 S. State. Room 1044. zip: 1274

FROM: Marilyn J. Sveyda, Ph.D., Acting Chair for Nursing  
Human Subjects Review Committee  
IRB II/Health Committee

DATE: 7/25/96

The Committee has reviewed the protocol: The Impact of Hopelessness, Sense of Belonging, Locus of  
Control, and Socio-economic Status on Domestic Violent  
Behaviors in African Americans

Submitted by: Larry Rankin #3062

Source of Support: 

- [ ] Human Subjects will be at risk.
- [ ] Human Subjects will be at minimal risk.
- [X] Human Subjects will not be at risk.
- [X] The Committee approves this study under expedited review
- [X] The Committee approves this study as originally proposed.
- [ ] The Committee approves this study as modified following review.

NOTE: The principal investigator is obliged to inform the Review Committee of any  
change in protocol which might alter the conditions of participation of  
human subjects from those on which this proposal is based. Approval will  
extend for a period of one year unless a shorter period is specified. A new  
application will be required at that time.

Marilyn Sveyda, Ph.D., Acting Chair for Nursing

cc: Principal Investigator  
Applicant's School

smd
### APPENDIX D

Table D.1 Mean, standard deviation and frequencies of abusive behaviors reported in a-MWA by subjects

<table>
<thead>
<tr>
<th>MWA subscale items</th>
<th>Mean</th>
<th>SD</th>
<th>n (% of total subjects)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 screamed at partner</td>
<td>105.39</td>
<td>281.40</td>
<td>48 (70)</td>
</tr>
<tr>
<td>2 squeezed your partner’s pelvis</td>
<td>.49</td>
<td>2.22</td>
<td>5 (3)</td>
</tr>
<tr>
<td>3 imprisoned partner in your house</td>
<td>14.83</td>
<td>120.35</td>
<td>7 (10)</td>
</tr>
<tr>
<td>4 threw objects at partner</td>
<td>.54</td>
<td>1.60</td>
<td>12 (17)</td>
</tr>
<tr>
<td>5 kneeled partner in the genital area</td>
<td>.35</td>
<td>1.91</td>
<td>5 (7)</td>
</tr>
<tr>
<td>6 called partner a whore</td>
<td>25.59</td>
<td>133.53</td>
<td>26 (38)</td>
</tr>
<tr>
<td>7 slapped partner</td>
<td>8.87</td>
<td>60.11</td>
<td>25 (37)</td>
</tr>
<tr>
<td>8 locked partner out of the house</td>
<td>.65</td>
<td>3.24</td>
<td>10 (15)</td>
</tr>
<tr>
<td>9 squeezed partner’s breasts</td>
<td>17.07</td>
<td>120.57</td>
<td>10 (15)</td>
</tr>
<tr>
<td>10 called partner crazy</td>
<td>59.19</td>
<td>209.59</td>
<td>32 (46)</td>
</tr>
<tr>
<td>11 put foreign objects in partner’s vagina</td>
<td>.72</td>
<td>6.02</td>
<td>1 (1)</td>
</tr>
<tr>
<td>12 mutilated partner’s genitals</td>
<td>.00</td>
<td>.00</td>
<td>0 (0)</td>
</tr>
<tr>
<td>13 bit your partner</td>
<td>.78</td>
<td>6.02</td>
<td>5 (7)</td>
</tr>
<tr>
<td>14 held partner down and cut their pubic hair</td>
<td>.00</td>
<td>.54</td>
<td>2 (3)</td>
</tr>
<tr>
<td>15 burned partner’s hair</td>
<td>.00</td>
<td>.00</td>
<td>0 (0)</td>
</tr>
<tr>
<td>16 harassed partner at work</td>
<td>1.48</td>
<td>8.45</td>
<td>4 (6)</td>
</tr>
<tr>
<td>17 told partner you’d kill the children</td>
<td>.00</td>
<td>.12</td>
<td>1 (1)</td>
</tr>
<tr>
<td>18 scratched partner with fingernails</td>
<td>.36</td>
<td>1.03</td>
<td>10 (15)</td>
</tr>
<tr>
<td>19 locked partner in bedroom</td>
<td>.87</td>
<td>6.03</td>
<td>6 (9)</td>
</tr>
<tr>
<td>20 tried to rape partner</td>
<td>1.52</td>
<td>8.45</td>
<td>5 (7)</td>
</tr>
<tr>
<td>21 took partner’s wallet leaving them stranded</td>
<td>.29</td>
<td>1.36</td>
<td>6 (9)</td>
</tr>
<tr>
<td>22 punched your partner</td>
<td>22.72</td>
<td>133.67</td>
<td>20 (29)</td>
</tr>
</tbody>
</table>
Table D.1 Mean, standard deviation and frequencies of abusive behaviors reported in a-MWA by subjects (continued)

<table>
<thead>
<tr>
<th>MWA subscale items</th>
<th>Mean</th>
<th>SD</th>
<th>n (% of total subjects)</th>
</tr>
</thead>
<tbody>
<tr>
<td>23 told partner you would kill them</td>
<td>36.62</td>
<td>178.13</td>
<td>13 (19)</td>
</tr>
<tr>
<td>24 kicked your partner</td>
<td>.39</td>
<td>1.00</td>
<td>13 (19)</td>
</tr>
<tr>
<td>25 kidnapped partner’s children</td>
<td>.10</td>
<td>.46</td>
<td>4 (6)</td>
</tr>
<tr>
<td>26 stole partner’s possessions</td>
<td>15.19</td>
<td>120.33</td>
<td>11 (15)</td>
</tr>
<tr>
<td>27 took partner’s car keys</td>
<td>.83</td>
<td>3.82</td>
<td>12 (17)</td>
</tr>
<tr>
<td>28 told partner no one would ever want them</td>
<td>16.03</td>
<td>120.59</td>
<td>10 (15)</td>
</tr>
<tr>
<td>29 disabled partner’s car</td>
<td>5.88</td>
<td>48.15</td>
<td>5 (7)</td>
</tr>
<tr>
<td>30 called partner lazy</td>
<td>21.28</td>
<td>123.39</td>
<td>20 (29)</td>
</tr>
<tr>
<td>31 stabbed partner with a knife</td>
<td>1.06</td>
<td>6.50</td>
<td>4 (4)</td>
</tr>
<tr>
<td>32 called partner a bitch</td>
<td>36.35</td>
<td>168.81</td>
<td>36 (52)</td>
</tr>
<tr>
<td>33 told partner you’d take children away</td>
<td>16.46</td>
<td>120.77</td>
<td>10 (15)</td>
</tr>
<tr>
<td>34 attempted suicide</td>
<td>.12</td>
<td>.56</td>
<td>4 (6)</td>
</tr>
<tr>
<td>35 called partner a cunt</td>
<td>14.49</td>
<td>120.39</td>
<td>1 (1)</td>
</tr>
<tr>
<td>36 hit partner with a belt</td>
<td>.00</td>
<td>.31</td>
<td>4 (5)</td>
</tr>
<tr>
<td>37 raped your partner</td>
<td>.75</td>
<td>6.02</td>
<td>3 (4)</td>
</tr>
<tr>
<td>38 threw partner onto furniture</td>
<td>36.99</td>
<td>178.06</td>
<td>15 (22)</td>
</tr>
<tr>
<td>39 harassed partner on telephone</td>
<td>26.51</td>
<td>135.35</td>
<td>13 (19)</td>
</tr>
<tr>
<td>40 hung around outside of partner’s home</td>
<td>15.71</td>
<td>120.41</td>
<td>9 (13)</td>
</tr>
<tr>
<td>41 told partner she was a horrible wife</td>
<td>14.71</td>
<td>120.37</td>
<td>3 (4)</td>
</tr>
<tr>
<td>42 took porno pictures of partner</td>
<td>.13</td>
<td>.77</td>
<td>2 (3)</td>
</tr>
<tr>
<td>43 prostituted your partner</td>
<td>.00</td>
<td>.38</td>
<td>2 (3)</td>
</tr>
<tr>
<td>44 told partner she was not good enough</td>
<td>29.94</td>
<td>168.87</td>
<td>12 (17)</td>
</tr>
<tr>
<td>45 shook partner</td>
<td>.31</td>
<td>168.77</td>
<td>21 (30)</td>
</tr>
<tr>
<td>46 forced partner to have sex with other partners</td>
<td>.00</td>
<td>.24</td>
<td>1 (1)</td>
</tr>
<tr>
<td>47 forced partner to have sex with animals</td>
<td>.00</td>
<td>.24</td>
<td>1 (1)</td>
</tr>
<tr>
<td>48 treated partner as a sex object</td>
<td>14.81</td>
<td>120.35</td>
<td>9 (8)</td>
</tr>
<tr>
<td>49 pushed your partner</td>
<td>37.20</td>
<td>170.14</td>
<td>27 (39)</td>
</tr>
</tbody>
</table>
Table D.1 Mean, standard deviation and frequencies of abusive behaviors reported in a-MWA by subjects (continued)

<table>
<thead>
<tr>
<th>MWA subscale items</th>
<th>Mean</th>
<th>SD</th>
<th>n (% of total subjects) reporting behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td>50 followed your partner</td>
<td>15.19</td>
<td>120.32</td>
<td>10 (15)</td>
</tr>
<tr>
<td>51 told partner you’d kill her parents or family</td>
<td>.19</td>
<td>.91</td>
<td>3 (4)</td>
</tr>
<tr>
<td>52 told partner she was stupid</td>
<td>35.03</td>
<td>168.91</td>
<td>34 (49)</td>
</tr>
<tr>
<td>53 ripped partner’s clothes off</td>
<td>1.91</td>
<td>8.55</td>
<td>12 (17)</td>
</tr>
<tr>
<td>54 shot partner with a gun</td>
<td>.00</td>
<td>.00</td>
<td>0 (0)</td>
</tr>
<tr>
<td>55 forced partner to do unwanted sex acts</td>
<td>.10</td>
<td>.65</td>
<td>2 (3)</td>
</tr>
<tr>
<td>56 choked your partner</td>
<td>30.23</td>
<td>168.90</td>
<td>12 (17)</td>
</tr>
<tr>
<td>57 turned off partners electricity</td>
<td>.00</td>
<td>.00</td>
<td>0 (0)</td>
</tr>
<tr>
<td>58 stole food or money from partner</td>
<td>15.94</td>
<td>120.81</td>
<td>2 (3)</td>
</tr>
<tr>
<td>59 told partner she was ugly</td>
<td>1.01</td>
<td>6.08</td>
<td>7 (10)</td>
</tr>
<tr>
<td>60 whipped your partner</td>
<td>.10</td>
<td>.43</td>
<td>4 (5)</td>
</tr>
</tbody>
</table>
## APPENDIX E

Table E1 Hierarchical Regression examining correlation coefficients, betas, and change in $R^2$ of Interpersonal Relatedness variables on Severity Weighted Frequency of Physical Abuse as Mediated by Hopelessness and Depression

<table>
<thead>
<tr>
<th>Variable</th>
<th>$r$</th>
<th>$\beta$ at step 1</th>
<th>$\beta$ at step 2</th>
<th>$\beta$ at step 3</th>
<th>$\beta$ at step 4</th>
<th>$\beta$ at step 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ASQ Need for Approval</td>
<td>.24</td>
<td>.21</td>
<td>.16</td>
<td>-.03</td>
<td>-.00</td>
<td>-.00</td>
</tr>
<tr>
<td>ASQ Preoccupation with Relationships</td>
<td>.15</td>
<td>-.10</td>
<td>-.11</td>
<td>-.10</td>
<td>-.07</td>
<td>-.06</td>
</tr>
<tr>
<td>ASQ Discomfort with closeness</td>
<td>.27</td>
<td>.25</td>
<td>.20</td>
<td>.15</td>
<td>.14</td>
<td>.14</td>
</tr>
<tr>
<td>ASQ Relationships as secondary</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$R = .31$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .10$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Social Support</td>
<td>-.28</td>
<td>-</td>
<td>-.18</td>
<td>-.03</td>
<td>-.04</td>
<td>-.05</td>
</tr>
<tr>
<td>$R = .36$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .03$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. SOBA</td>
<td>-.02</td>
<td>-</td>
<td>-</td>
<td>.15</td>
<td>.09</td>
<td>.08</td>
</tr>
<tr>
<td>SOBP</td>
<td>-.44</td>
<td>-</td>
<td>-.51</td>
<td>-.62</td>
<td>-.64</td>
<td></td>
</tr>
<tr>
<td>$R = .48$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .10^*$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. STTHI Trait</td>
<td>.18</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-.25</td>
<td>-.22</td>
</tr>
<tr>
<td>$R = .50$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .02$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. BDI</td>
<td>.24</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-.05</td>
</tr>
<tr>
<td>$R = .50$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .00$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total $\uparrow R^2 = .25$</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$R^2 = .25$</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Table E2 Hierarchical Regression examining correlation coefficients, betas, and change in $R^2$ of Interpersonal Relatedness variables on Severity Weighted Frequency of Psychological Abuse as Mediated by Hopelessness and Depression

<table>
<thead>
<tr>
<th>Variable</th>
<th>r</th>
<th>β step 1</th>
<th>β at step 2</th>
<th>β at step 3</th>
<th>β at step 4</th>
<th>β at step 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASQ Need for Approval</td>
<td>.22</td>
<td>.15</td>
<td>.10</td>
<td>-.01</td>
<td>.01</td>
<td>.03</td>
</tr>
<tr>
<td>ASQ Preoccupation with Relationships</td>
<td>.18</td>
<td>.00</td>
<td>.01</td>
<td>.01</td>
<td>.04</td>
<td>-.06</td>
</tr>
<tr>
<td>ASQ Discomfort with closeness</td>
<td>.27*</td>
<td>.24</td>
<td>.19</td>
<td>.13</td>
<td>.12</td>
<td>.12</td>
</tr>
<tr>
<td>ASQ Relationships as Secondary</td>
<td>.07</td>
<td>-.08</td>
<td>-.08</td>
<td>-.15</td>
<td>-.15</td>
<td>-.18</td>
</tr>
<tr>
<td>R = .33</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .11$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Support</td>
<td>-.28*</td>
<td></td>
<td>-.19</td>
<td>-.02</td>
<td>-.03</td>
<td>-.06</td>
</tr>
<tr>
<td>R = .35</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .02$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOBA</td>
<td>-.14</td>
<td></td>
<td>-</td>
<td>-.01</td>
<td>-.07</td>
<td>-.10</td>
</tr>
<tr>
<td>SOBP</td>
<td>-.40**</td>
<td></td>
<td>-</td>
<td>-.39</td>
<td>-.50</td>
<td>-.55</td>
</tr>
<tr>
<td>R = .43</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .06$</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>STTI Trait</td>
<td>.19</td>
<td></td>
<td>-</td>
<td>-</td>
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<td>-.21</td>
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<tr>
<td>R = .45</td>
<td></td>
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<tr>
<td>$\uparrow R^2 = .02$</td>
<td></td>
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<tr>
<td>BDI</td>
<td>.21</td>
<td></td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-.15</td>
</tr>
<tr>
<td>R = .47</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>$\uparrow R^2 = .01$</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total $\uparrow R^2 = .20$; $R^2 = .22$</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Table E.3 Hierarchical Regression examining correlation coefficients, betas, and change in $R^2$ of Interpersonal Relatedness variables on Severity Weighted Frequency of Sexual Abuse as Mediated by Hopelessness and Depression

<table>
<thead>
<tr>
<th>Variable</th>
<th>R</th>
<th>$\beta$ at step 1</th>
<th>$\beta$ at step 2</th>
<th>$\beta$ at step 3</th>
<th>$\beta$ at step 4</th>
<th>$\beta$ at step 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ASQ Need for Approval</td>
<td>.32**</td>
<td>.36</td>
<td>.35</td>
<td>.30</td>
<td>.30</td>
<td>.31</td>
</tr>
<tr>
<td>ASQ Preoccupation with Relationships</td>
<td>.07</td>
<td>-.41</td>
<td>-.41</td>
<td>-.41</td>
<td>-.40</td>
<td>-.39</td>
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<tr>
<td>ASQ Discomfort with closeness</td>
<td>.29*</td>
<td>.26</td>
<td>.25</td>
<td>.24</td>
<td>.24</td>
<td>.25</td>
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<tr>
<td>ASQ Relationships as secondary</td>
<td>.27</td>
<td>.24</td>
<td>.24</td>
<td>.21</td>
<td>.21</td>
<td>.19</td>
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<td>$R = .47$</td>
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<tr>
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</tr>
<tr>
<td>2 Social Support</td>
<td>-.19</td>
<td>-.04</td>
<td>-.02</td>
<td>-.02</td>
<td>-.02</td>
<td>-.04</td>
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<td>$R = .48$</td>
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<tr>
<td>3 SOBA</td>
<td>.04</td>
<td>.07</td>
<td>.06</td>
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</tr>
<tr>
<td>4 STHI Trait</td>
<td>.18</td>
<td></td>
<td>-.03</td>
<td>-.16</td>
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<tr>
<td>5 BDI</td>
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<tr>
<td>Total $\uparrow R^2 = .24$</td>
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<td>$R^2 = .24$</td>
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Table E4 Hierarchical Regression examining correlation coefficients, betas, and change in $R^2$ of Interpersonal Relatedness variables on Severity of Physical Abuse as Mediated by Hopelessness and Depression

<table>
<thead>
<tr>
<th>Variable</th>
<th>$r$</th>
<th>$β$ at step 1</th>
<th>$β$ at step 2</th>
<th>$β$ at step 3</th>
<th>$β$ at step 4</th>
<th>$β$ at step 5</th>
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<tbody>
<tr>
<td>1. ASQ Need for Approval</td>
<td>.32**</td>
<td>.37</td>
<td>.35</td>
<td>.23</td>
<td>.25</td>
<td>.24</td>
</tr>
<tr>
<td>ASQ Preoccupation with Relationships</td>
<td>.11</td>
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<td>-.18</td>
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<tr>
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<td>.21*</td>
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<td>.10</td>
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<td>-.08</td>
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<td>4. STHI Trait</td>
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<td>5. BDI</td>
<td>.24*</td>
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REFERENCES
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