BLAME, DEPRESSION AND COPING
IN BATTERED WOMEN

by

CAROL ANNE PORTER

B.A., Denison University, 1971
M.A., University of British Columbia, 1978

A THESIS SUBMITTED IN PARTIAL FULFILMENT OF
THE REQUIREMENTS FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY

in
THE FACULTY OF GRADUATE STUDIES
(Psychology)

We accept this thesis as conforming
to the required standard

THE UNIVERSITY OF BRITISH COLUMBIA

February 1983

© Carol Anne Porter, 1983
In presenting this thesis in partial fulfilment of the requirements for an advanced degree at the University of British Columbia, I agree that the Library shall make it freely available for reference and study. I further agree that permission for extensive copying of this thesis for scholarly purposes may be granted by the head of my department or by his or her representatives. It is understood that copying or publication of this thesis for financial gain shall not be allowed without my written permission.

Department of Psychology

The University of British Columbia
1956 Main Mall
Vancouver, Canada
V6T 1Y3

Date April 20, 1983
Abstract

The focus of this study was the interrelation among the causal attributions, affective reactions, and coping effectiveness of battered women. Fifty female residents of a shelter for battered women were interviewed in depth, and shelter counselors rated each woman on a measure of coping effectiveness. Consistent with predictions, both attributions and emotional state were related to coping. The major deviation from the hypothesized relationship, however, was the finding that self-blame attributions were not related to effective coping while another measure, women's perceptions of the degree of contingency between aspects of themselves and their partners' abusive behavior, was highly related to successful adjustment. As predicted, positive emotional state correlated with effective coping.

The hypothesized relation between attributions of blame and affective state was not supported. While subjects' perceptions of avoidability were not related to coping as predicted, it was found that both perceived contingency and a decision not to return to the abusive situation were positively correlated with perceptions of the abuse as unavoidable.

Finally, several variables distinguished the group of women who returned from those who did not. Those who returned were characterized by negative affect, a tendency to blame their partners, previous departures from the abusive situation, shorter durations of violence than those who did not return, and
were more likely to perceive the abuse as avoidable.

The concept of perceived contingency and in particular the difference between this measure and self-blame, is discussed at length because it has implications for both theoretical and applied concerns. The absence of a relation between attributions and affect is also discussed in some detail since an attribution-affect link has received strong support in other psychological research. Problems associated with the definition and measurement of coping are discussed, and finally, the implications of the findings for both attribution theory and research and practice in the area of domestic violence are presented.
# TABLE OF CONTENTS

Abstract ................................................................. ii

List Of Tables ......................................................... vi

Introduction ........................................................... 1

Causal Attributions And Personal Outcomes ...................... 3

Blaming The Victim .................................................... 20

Victims Of Domestic Violence ........................................ 26

The Research Problem ................................................ 39

Hypotheses ............................................................... 41

Method ................................................................. 44

Subjects ................................................................. 44

Procedure ............................................................... 45

Measures ................................................................. 47

Procedural Modifications .............................................. 53

Behavioral Versus Characterological Blame ....................... 53

Perception Of Contingency ............................................ 54

Results ................................................................. 57

Affect And Blame Attributions: Composite Scores ............... 57

Hypothesis 1: Interrelationships Among Attributions And Affect ........................................... 63

Hypotheses 2 And 3: Predictors Of Coping ....................... 65

Hypothesis 4: Avoidability And Coping ............................ 67

Hypothesis 5: Predictors Of Future Behavior (Outcome) ....... 68

Results: Open-ended Responses ..................................... 72

Discussion .............................................................. 82
Predictors Of Coping .........................................................82
The Relationship Between Affect And Attributions ........98
Avoidability And Outcome .............................................105
Coping: Definitions And Measurement ..........................109
Implications ...............................................................112
Footnotes .................................................................125
Reference Notes .........................................................127
References ...............................................................128
Appendices ...............................................................137
<table>
<thead>
<tr>
<th>TABLE</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Intercorrelations among Measures of Affect</td>
<td>58</td>
</tr>
<tr>
<td>II</td>
<td>Factor Loading Matrices</td>
<td>59</td>
</tr>
<tr>
<td>III</td>
<td>Frequencies: Blame and Perceived Contingency</td>
<td>61</td>
</tr>
<tr>
<td>IV</td>
<td>Intercorrelations among Attribution Measures</td>
<td>62</td>
</tr>
<tr>
<td>V</td>
<td>Correlations among Affect, Blame and Contingency</td>
<td>64</td>
</tr>
<tr>
<td>VI</td>
<td>Regression Analysis: Predictors of Coping</td>
<td>66</td>
</tr>
<tr>
<td>VII</td>
<td>Hotelling's $T^2$ and Discriminant Analysis</td>
<td>71</td>
</tr>
</tbody>
</table>
INTRODUCTION

Two of the most common assumptions made by social psychologists are that people are motivated to organize and understand their social world and that the ways in which people perceive and comprehend their social world are important determinants of their behavior (Heider, 1958; Jones & Gerard, 1964). One of the fundamental ways in which people organize their experiences and find meaning in events is in terms of causality. In recent years social psychologists have attempted to determine the principles that guide causal explanation as well as the behavioral and affective consequences of causal analysis. These two enterprises together comprise the theoretical perspective known as attribution theory (Harvey & Weary, 1981). An attribution is an inference about why an event occurred or about the causes of one's own or another's behavior. The seminal statement of attribution theory is found in the writing of Fritz Heider (1958) who analyzed commonsense theories that people use in understanding the underlying causes of events they observe in their daily lives.

One example of the importance of our causal analysis of behavior occurs in our legal system. Whether a given behavior is considered "criminal" depends not only on the nature of its consequences, but on the degree of intentionality and the type of motivation that is attributed to the actor. Our reactions to outcomes as well as to behavior are also affected by our explanations. How one reacts to experiences of success and failure, for example, appears to be contingent upon one's causal
analysis of the outcome: success attributed to one's ability is reacted to more positively than success due to luck, whereas failure is reacted to more negatively if attributed to ability rather than luck (e.g., Weiner et al., 1979). These distinctions illustrate a general principle guiding attributional analyses that was first articulated by Heider (1958): behavior is seen either as caused by factors within the person (internal cause) or by those outside the person (external cause). Internal causes refer to an individual's personal qualities such as ability or motivation, whereas external causes refer to forces in the situation surrounding the individual, such as task difficulty or luck.

A particularly interesting area of research within the attribution tradition concerns the relationship between causal attributions for negative life events and a person's reactions to those events. The interrelationship among causal attributions, emotional responses and coping capabilities for one particular negative life event, domestic violence, is the focus of this thesis. Research that has investigated the relationship between causal attributions and personal outcomes will be reviewed below, followed by a review of the literature in social psychology that deals with attributions of blame and victimization. Finally, a review of the existing literature on battered women and domestic violence will follow.
Causal Attributions and Personal Outcomes

Investigations of the relationship between causal attributions and personal outcomes can be divided roughly into two categories. The first category is concerned with the relationship between cognitions (attributions) and mood states. What has been explored here is the link between attributions and an individual's affective or emotional reaction to a given outcome. For purposes of the present organization, this literature can be divided into research focusing on what will be called "trait-measures" of affect and that focusing on "state-measures" of affect. It is the goal of researchers studying trait-measures of affect to compare the attributions of individuals with chronically different mood states. Work that exemplifies this approach has examined the patterns of attributions made by depressed versus nondepressed people (e.g., Abramson, Seligman, & Teasdale, 1978). In brief, these theorists contend that depressed people explain events with a consistent attributional style that not only leads to but, once established, maintains their depressive mood.

Research dealing with state-measures of affect, on the other hand, has focused on the relatively immediate and short-term emotional consequences of success and failure experiences. In this work it is proposed (e.g., Weiner et al., 1979) that the causal attributions people make for specific achievement outcomes will influence their affective reactions to those outcomes.

The second category of research is concerned with the
relationship between people's behavioral adjustment to negative events and their causal analyses of these events. "Behavioral adjustment" is used here as a general term that encompasses a variety of reactions to negative events, including coping with paralysis, post-divorce adaptation, and marital satisfaction.

Relationship of Cognitions and Mood States

Causal attributions and trait-measures of affect. An extensive body of literature supports the general contention that causal inference processes are significant in the etiology and maintenance of chronic depressed affect, or more simply, depression (Alloy, in press). There are two theoretical models of depression that prominently feature cognitive processes. The first of these is Beck's (1967, 1976) model of depression that is based on clinical observations of depressed patients; the second is a reformulated model of learned helplessness and depression in humans (Abramson et al., 1978) which stemmed from Seligman's (1975) learned helplessness paradigm. The latter model, and particularly its reformulation, has generated more empirical work than the former and will be discussed here in some depth.

Research with both animal and human laboratory subjects led Seligman and his associates (e.g., Seligman, 1974) to propose that maladaptive consequences including depression result from the realization that one's actions and outcomes are independent. In early studies with animals, for example, it was shown that dogs exposed to shocks that they could not avoid behaved passively in a new aversive situation from which escape was
possible. Similar results have been reported in research with human subjects (e.g., Hiroto, 1974). It has been shown that individuals exposed to aversive noise that they could not control subsequently listened passively to the stimulus in conditions when they were in fact able to terminate the noise (Abramson et al., 1978). Based on these findings, Seligman (1975) proposed a helplessness theory of depression, the basic postulate of which is that many of the symptoms of depression, such as helplessness, hopelessness and negative affect, occur when people believe that they cannot control important outcomes in their lives. The induced expectancy that one's responses are ineffective was hypothesized to interfere with effective responding in situations in which control was possible.

In order to resolve a number of inadequacies of the original learned helplessness model, Abramson, Seligman and Teasdale (1978) proposed a reformulated model based on attribution theory. In brief, they argued that when people find that they are helpless, they ask themselves why they are helpless. The kinds of causal attributions people make for their inability to control outcomes, in turn, are presumed to influence their reactions, specifically their self-esteem and the generality and chronicity of their symptoms of helplessness and depression.

Three dimensions of causal attributions were deemed critical for explaining helplessness and depression: internal-external, stable-unstable, and global-specific. Abramson et al. (1978) hypothesized that people will attribute outcomes to
themselves (internal factors) if they believe that these outcomes are more or less likely to happen to themselves than to relevant others. Stable causal factors are seen as long-lived or recurrent relative to unstable factors, and an attribution to global factors suggests that such factors should affect a wide variety of outcomes. For example, an individual who attributes a low exam score to lack of intelligence is making an attribution that is internal, stable and global. According to these theorists, when people believe that they have no control over the important goals in their lives and attribute this uncontrollability to internal, stable and global factors, they are likely to show symptoms of helplessness, as well as depressed affect and loss of self-esteem.

In order to test this model, patterns of causal inference have been examined in depressed and nondepressed individuals. Abramson et al. (1978) speculated that individuals differ in attributional style and postulated the existence of a "depressive attributional style." An Attributional Styles Scale was developed by Seligman, Abramson, Semmel and Von Baeyer (1979) to assess the content of people's causal attributions. Twelve hypothetical situations are presented to subjects, half of which are interpersonally oriented and half achievement oriented. Further, each class of situations contains three positive and three negative outcomes. For each situation, subjects indicate the cause of the outcome, its importance, and rate it for degree of internality, stability, and globality. For example, "You meet a friend who acts hostilely toward you" is a
negative interpersonal situation, for which subjects suggest one cause and then rate whether the cause is due to something about themselves or to external factors, will be present in future encounters, and will influence other areas of their lives.

In their initial study, Seligman et al. (1979) examined the relation between attributional style and degree of depression among university students. The Short Form of the Beck Depression Inventory (BDI, Beck & Beck, 1972) was employed as a measure of depression, as well as the depression scale from the Multiple Affect Adjective Checklist (MAACL, Zuckerman & Lubin, 1965). One hundred and forty-three undergraduate students completed the attribution scales, the BDI, and the MAACL during class time. In completing the Attributional Style Scale, subjects were asked to vividly imagine themselves in the situations presented, and "if such a situation happened to you, what would you feel would have caused it."

Results indicated that compared to nondepressed students, "depressed" students (that is, high scorers on the BDI) attributed negative outcomes to internal, stable and global factors. It was contended that these findings provided support for the reformulated model of learned helplessness and depression and moreover, revealed the existence of a depressive attributional style. Similar findings with undergraduate populations have been reported (see, e.g., Kuiper, 1978; Rizley, 1978). To take one example, Kuiper separated female university students into depressed and nondepressed groups on the basis of prior testing. After a word association task with varied
reinforcement, subjects made attributions for their task outcomes. While nondepressed students made external attributions for a failure outcome, the attributions made by depressed subjects for a failure were internal.

Beck (1967, 1976) also assigns particular importance to maladaptive causal inferences in the etiology and maintenance of depression. According to Beck, depressed people view themselves, their world, and their future in a negative way. They tend to attribute negative outcomes to defects within themselves, and consequently have low self-esteem and often experience guilt. Whereas the reformulated model of helplessness and depression does not specify the psychological processes that may underlie depressive causal inferences, Beck attempts to describe these processes. In Beck's view, the thinking of depressed people is characterized by systematic errors or distortions. For example, he hypothesizes that depressives tend to accept uncritically the validity of their inferences and that they tend not to consider information that might disconfirm these inferences. The reformulated model also differs from Beck's theory in that the former suggests that both depressed and nondepressed people may exhibit errors and distortions in making causal inferences. Beck's model, on the other hand, implies that in general only depressives show such inferential distortions (Abramson & Martin, 1981). In a review of this model, Abramson and Martin (1981) reported that Beck's predictions regarding causal inferences made by depressed people are only now being tested empirically, and thus to date supportive evidence stems
primarily from clinical observations.

While the strength of Beck's model of depression resides in his extensive clinical work, the lack of clinical data to support the reformulated helplessness model has been cited by a number of researchers as a critical weakness (e.g., Depue & Monroe, 1978; Gong-Guy & Hammen, 1980; Gotlib & Olson, Note 1). Although Abramson et al. (1978) hypothesize that a continuity exists between the more mild subclinical forms of depression presumably experienced by university students and severe clinical depression, this remains a controversial issue as is demonstrated in a study by Gong-Guy and Hammen (1980) where cognitions about the causes and consequences of recent stressful life events were examined in depressed and nondepressed outpatients. While the groups differed when only the most upsetting events were compared, no overall differences between depressed and nondepressed individuals were found when all stressful events were included in the comparison. These findings led Gong-Guy and Hammen to question the generality and utility of the reformulated helplessness model for characterizing depressive cognitions in samples and situations different from university populations.

Abramson et al. contend that certain attributional patterns may lead normal (nondepressed) people to eventually become depressed. Neither they nor Beck consider the alternative view that being in a depressed state may lead people to make maladaptive causal inferences. Although Abramson and Martin (1981) state that further research is necessary to elucidate
more fully the directionality of the relationship between attributional style and depression, they nevertheless strongly advocate that changing people's causal ascriptions about events may make them less vulnerable to depressive episodes. Similarly, Beck has developed "cognitive therapy" techniques to help depressives interpret their behaviors and outcomes differently.

Causal attributions and state-measures of affect. Weiner and his associates (e.g., Weiner et al., 1978; 1979) have attempted to search for attributional determinants of affect within the context of achievement settings. The focus of their more recent work has been the association between attributions for success and failure and the intensity of emotional experiences. A fundamental assumption of this research is that the causal attributions one makes for an achievement outcome influence the way one feels about that outcome. More formally, attributions mediate between success and failure experiences and emotional expression.

The causes of success and failure are described within a two-dimensional framework consisting of an internal-external factor and a stable-unstable factor. Ability, effort and mood, for example, are properties internal to the person, whereas task difficulty and luck are external causes of achievement outcomes. Both ability and task difficulty are likely to be perceived as relatively fixed, or stable causes, while luck, effort and mood are generally perceived as unstable causes of success or failure. What Weiner and his colleagues have hypothesized is that specific causal ascriptions are associated with specific
emotional reactions.

In their initial investigation, Weiner et al. (1978) had university students read a brief story format describing an individual in an exam situation, who either succeeded or failed for a given reason (attribution). Subjects were asked to rate what feelings would be experienced in this situation, using a previously compiled "dictionary" list of potential affective reactions. It was assumed that subjects would project their own emotional experiences upon the characters in the vignette, and that the labels provided reflected the "real" experiences of subjects.

The results of this investigation indicated that for both success and failure outcomes, disparate attributions (including attributions to effort, personality, luck, and ability) gave rise to distinct emotional feelings. For example, feelings of self-enhancement were reported when a successful exam score was attributed to one's personality, whereas the same attribution for an unsuccessful outcome was associated with feelings of resignation. Attributions to luck for success yielded surprise, and attributing a failure to one's ability was related to feelings of incompetence.

In a follow-up study, Weiner et al. (1979) sought to improve on the methodological shortcomings of their initial investigation. For example, subjects' own experiences with success or failure were used as stimuli in place of standard vignettes describing an individual in an exam situation. In this experiment, subjects were first asked to relate a personal
experience of success or failure, in which they had attributed the outcome to a specific cause, such as help from others. They were then asked to indicate how they felt, both in a free response format and on a checklist of seven affective experiences known from previous research to be associated with the outcome. The stated goal of this investigation was to determine if the emotions linked with internal causal ascriptions clustered together and differed from emotions associated with external ascriptions. The results of this study indicated that a number of specific causal attributions are associated with distinct affective reactions. For instance, for successful outcomes, pride, competence and satisfaction were more likely to be experienced given internal than external attributions, and external attributions were more closely tied with gratitude, thankfulness, surprise and guilt.

In discussing the relevance of their findings for theories of emotion, Weiner et al. (1978) contend that "cognitions are necessary and sufficient causes of emotion" (p.84) and they suggest that future work in the area should focus more closely on the cognitive, or attributional, determinants of emotion.

**Relationship of Cognitions and Behavioral Adjustment**

Investigators of people's reactions to negative events have become increasingly concerned that the limitations of the laboratory preclude a realistic assessment of how people respond to and cope with real life trauma. In the research discussed above, for example, criticisms have been leveled against the use of university instead of clinical populations in studies of
depression, and against methodologies that elicit subjects' reactions to hypothetical situations or contrived tasks with limited personal meaningfulness (see e.g., Gong-Guy & Hammen, 1980). The research efforts to be reviewed in this section, while stemming from a variety of theoretical orientations, share a common concern in their focus on individuals who have been confronted with unfortunate events in their own lives. These events vary in seriousness from marital conflict to debilitating accidents, but the investigators share an interest in the relationship between people's explanations of their situations and how they are adapting to or coping with these outcomes.

In a study of post-divorce adjustment, Newman and Langer (1981) explored the possibility that the manner in which people think about or explain their divorces is associated with their ability to adapt to the termination of their marriage. These authors hypothesized that the use of "interactive" attributions, as opposed to "person" attributions, facilitate adjustment since the former type of explanation enables one to assess more realistically the reasons why one's marriage had failed. By interactive attributions the authors refer to explanations which point to features of the couple itself, such as problems in communication; person attributions are those explanations which point to characteristics of either the spouse or self. Newman and Langer suggested that person attributions may lead to feelings of self-recrimination or resentment, and the unreasonable search for "the more perfect person."

Divorced women were asked to explain the main reason they
had become divorced and also completed a questionnaire that assessed contentedness and self-esteem. In every case, those "person" attributions cited referred to characteristics of the spouse such as emotional immaturity, psychological problems, or excessive drinking and gambling. Interactive attributions included incompatibility, changing lifestyles and lack of communication.

The results indicated that subjects who made interactive attributions had a consistently higher opinion of themselves than subjects who blamed the divorce on personal characteristics of their spouses. The latter subjects were in general more unhappy, less optimistic, and saw themselves as less socially active than the former.

Because of the correlational nature of these data, Newman and Langer hastened to point out that it remains unclear whether interactive explanations for divorce lead to better post-divorce adjustment or whether people who make such attributions tend to be generally happier, more confident, and more active people. The authors nonetheless suggest that the link between interactive attribution-making and factors related to self-esteem is noteworthy and may prove to be a useful therapeutic tool.

In a somewhat similar vein, research conducted by Madden and Janoff-Bulman (1981) had as its focus the relationship between attributions of control and blame for marital conflict and marital satisfaction. It was hypothesized that blaming one's spouse and believing that one does not have control over
conflicts would be associated with low marital satisfaction. These hypotheses were derived from earlier findings that either blaming another for one's misfortune or perceiving little control is associated with poor coping (Bulman & Wortman, 1977). In individual interviews, thirty-two married women were asked to respond to two standard conflict situations and two generated by themselves. As well as apportioning blame for the conflicts, they were asked a series of questions regarding perceived control, and in addition completed a marital satisfaction questionnaire. In general the findings provided support for the hypotheses that marital satisfaction is negatively associated with husband-blame and positively associated with wives' perceived control over conflict resolution.

The fact that husband-blamers were less satisfied in their marriages is consistent with the findings of Newman and Langer (1981). While self-blame was not directly correlated with marital satisfaction in the Madden and Janoff-Bulman study, the majority of women who attributed most of the blame to themselves were among the more satisfied group of respondents. The authors argue that blaming oneself for negative events may foster the belief that one can control similar events in the future. Because none of the women who participated in the research by Newman and Langer cited characteristics of themselves as reasons for their divorces, it is difficult to draw comparisons between these studies with regard to self-blame. However, the positive contribution of perceived control to marital satisfaction seems to have been borne out in the research by Madden and Janoff-
Bulman, as women who believed they could affect marital outcomes were more satisfied with their marriages than women who believed they had little control.

In attempts to deal realistically with people's reactions to undesirable life events, Wortman and her coworkers (Wortman et al., 1980) have been investigating people's responses to a variety of negative outcomes in natural settings. Extensive clinical exposure to cancer victims and their families provided them with a rich source of insights into the coping process, and gave them the opportunity to explore the relevance of existing psychological theories for victims trying to cope with life-threatening illness (Wortman & Dunkel-Schetter, 1979). One of the questions to emerge from this line of inquiry was whether personal responsibility for a traumatic event such as terminal illness would facilitate or impede the person's ability to cope with such an outcome. Those investigators who have commented informally on the attributional patterns of victims of cancer, for example, have tended to disagree about the relationship of blame and adjustment (e.g., Abrams & Finesinger, 1953; Chodoff et al., 1964).

In order to examine the relation between attributions of blame and effective coping, Bulman and Wortman (1977) conducted a study of victims of severe spinal cord injuries. Because of its relevance to the present thesis, this investigation will be described in some depth. Twenty-nine hospitalized individuals who had been paralyzed in serious accidents were intensively interviewed using both quantitative and open-ended questions to
elicits attributions of blame and causality. The subjects were victims of "freak" accidents, accidents that seemed to involve an element of chance, such as automobile or diving accidents, shootings, hang-gliding and football accidents.

On a five-point scale, respondents were asked to indicate how much they blamed themselves, and to apportion blame among themselves, others, environment and chance. They were also asked to what extent they believed they could have avoided what happened, how happy they were, and considering the best and worst things that could happen in their lifetime, where did their present disability fit into the scale. Several questionnaires were administered (e.g., a religiosity scale), and respondents were also asked both if they had ever asked "Why me?" and if so how they had answered this. Coping scores for each patient were obtained from social workers and nurses familiar with each case. Individuals were described as coping well if, for example, they had accepted the reality of their injury and were attempting to deal positively with the paralysis. Poor copers were described as those individuals who expected to improve miraculously, or denied the extent of their injuries (Bulman & Wortman, 1977).

Analyses were performed to determine both the predictors of self-blame and those of successful coping. Individuals were most likely to blame themselves if they believed they could have avoided the accident, if there were no "adversary other" involved, and if they were very religious. Poor coping was predicted by the extent to which victims believed they could
have avoided the accident, and the extent to which they blamed another for their fate. Further, the more victims blamed themselves, the better they coped.

Additional analyses were performed to shed light on what appeared to be a complex interrelationship among perceived avoidability, self-blame, and coping. Since the perception that one could have avoided the accident and self-blame were positively correlated, it seemed surprising to the authors that one of these variables (self-blame) was positively correlated with effective coping and the other one (avoidability) was negatively correlated with successful adjustment. By categorizing subjects into high and low scores on the three variables of interest, it was found that individuals who blamed themselves and who did not feel that they could have avoided the accident were more likely to be good copers than poor copers. However, victims who blamed themselves little and felt the accident could have been avoided were more likely to be poor rather than good copers.

An examination of the circumstances surrounding the accidents, and the free response comments made by respondents led Bulman and Wortman to suggest that accident victims who were engaging in a freely chosen activity may be able to cope more effectively than people victimized in other ways. This suggestion raises the issue of true blameworthiness versus distortion, a difficult problem encountered when interpreting attributions of blame for real (as opposed to random laboratory) outcomes. In general, however, respondents in this study
appeared to assign themselves more blame than "objective circumstances would warrant" (Bulman & Wortman, 1977, p. 361). Even individuals who were accidentally shot were willing to take some responsibility for their fates.

Alternative interpretations for these findings can be derived from various theoretical orientations prevalent in social psychological research, particularly the view that people have a need for control which may influence their causal analyses of events in their lives (e.g., Kelley, 1971). This need may motivate individuals to attribute outcomes to modifiable factors, such as themselves, in order to believe that similar events can be avoided in the future. This perspective will be reviewed in more detail below. Bulman and Wortman further suggest, consistent with a need for control, that the "ability to perceive an orderly relationship between one's behavior and one's outcomes is important for effective coping" (p. 362).

Furthermore, it was clear from respondents' answers to the question "why me" that the majority of them had entertained hypotheses that indicated a concern for order and meaning. Examples of such responses included those that emphasized the will of God, chance (e.g., responses reflecting the belief that the accident could have happened to anyone), or reevaluation of the event as positive (e.g., responses indicating that victims had learned a lot about themselves and others as a result of the accident). Bulman and Wortman suggest that the need to believe that there is an underlying order and meaning to existence may
provide a better conceptual framework for their data than the need for a controllable world. They also point out that predictors of effective coping in accident victims may differ in important ways from predictors in other victim populations.

**Blaming the Victim**

Self-blame has been found to be a common reaction among victims of undesirable life events (Ross & Ditecco, 1975; Wortman, 1976). People frequently take personal responsibility for negative outcomes over which they have had little or no control. Parents of children with leukemia, for example, have been described as trying to prove that something they had done or failed to do might have been responsible for the child's falling ill (Chodoff et al., 1964) and research with 60 cancer patients revealed that 93% had some feelings of guilt (Abrams & Finesinger, 1953). Averill (1968), in a similar vein, noted that people who had lost a loved one frequently respond with feelings of guilt for real or imagined transgressions against the deceased.

Guilt and self-blame also appear to be characteristic reactions of women who have been raped. A survey of rape crisis centers by Janoff-Bulman (1979) found that the mean percentage of women who blamed themselves at least in part for the rape was 74%. Medea and Thompson (1974) speculated that a rape victim may feel guilty if she had had rape fantasies, or if she had not taken all necessary precautions to prevent the occurrence of rape. Guilt, shame and self-blame are cited repeatedly as
characteristics of battered women (Martin, 1978; Prescott & Letco, 1977).

Why do victims hold themselves responsible for their fate? Criticism has been leveled at helping professionals, psychologists and social planners for often overemphasizing victims' responsibility for their problems, a phenomenon labeled "blaming the victim" (Caplan & Nelson, 1974; Maslach, 1976). Because victims are usually powerless and more controllable than their "aggressor" (individual or societal), those who try to solve their problems find it more expedient to focus on characteristics of the victim that contributed to their victimization than on less controllable, external factors. In the case of battered women, this tendency may be in part responsible for the belief that women provoke the violence, and that they do so to satisfy their own masochistic needs (Fields, 1978; Fleming, 1979).

Understanding how observers react to a victimized individual has been the focus of much social psychological investigation of victimization. Central to a number of theoretical statements is the suggestion that the judgments people make about others are determined in large part by their own psychological needs. For example, the "just-world theory" posits that people have a need to believe that the world is a fair place where people get what they deserve and where bad things do not happen to good people without justification (Lerner & Miller, 1978). According to Lerner, the need to believe in a just world motivates individuals to derogate the
character or fault the behavior of victims.

It is also the case that people do not want to believe that severe negative outcomes can happen at random (Walster, 1966). Such a belief would imply to an individual that similar disasters could befall him or her at any time. Thus people will be motivated to blame the victim, to convince themselves that the victim is different from them, and that they personally could never have suffered a similar fate. The notion that people prefer to assign causality to controllable rather than chance factors is a central tenet of attribution theory (Kelley, 1971). Rather than admit that the world is a disorderly place where events are dictated by chance, people may prefer to attribute responsibility to factors perceived to be modifiable.

These theoretical models have two different implications for victims, both of which could result in self-blame. The first is that observers' attributions of blame to the victim are more or less internalized by the victim (e.g., Goffman, 1963). If everyone holds victims responsible for their fate, perhaps they have in fact deserved it in some way.

A second implication focuses on the coping mechanisms employed by victims. Do victims' needs, as well as observers', help to determine what judgments or attributions they will make about the negative event? Such an interpretation was brought to bear by Bulman and Wortman (1977) on their self-blame data in accident victims. These investigators suggested that the need to perceive an orderly world, as well as a meaningful one, might be important factors that influence the kinds of attributions one
makes.

Further, following from the theories of Walster (1966) and Kelley (1971) a concern for control would lead one to blame those factors most within one's control. If victims believed their behavior to be modifiable, this need for control would lead them to hold themselves responsible. A similar process has been described in victims of rape:

What appears to be guilt ... may be the way the woman's mind interprets a positive impulse, a need to be in control of her life. If the woman can believe that somehow she got herself into the situation, if she can feel that in some way she caused it, if she can make herself responsible for it, then she's established a sort of control over the rape. It wasn't someone arbitrarily smashing into her life and wreaking havoc (Medea & Thompson, 1974, p. 105).

The notion of a control motivation may also be relevant to battered women, even though they generally describe themselves as helpless and unable to control the batterer's actions. In her clinical interviews with abused women, Walker (1979) found that many of them attempted to exert a degree of control over their beatings. Although they accepted the violence as inevitable, they often tried to control the time and place. According to Walker, this small measure of control seemed to be an effort not to feel totally helpless. Similarly, blaming themselves may constitute a way of perceiving their situation as somewhat controllable.
Two Conceptions of Self-blame

Although self-blame may in fact be linked to effective coping, the relationship appears to be a complex one. A more traditional conception of self-blame than a control-oriented response is one which depicts the phenomenon as maladaptive and a correlate of depression. One prominent theory of depression postulates that the depressive individual is characterized by a negative cognitive set, and interprets most outcomes as instances of failure for which he or she feels responsible (Beck, 1967, 1976). Self-blame is thus associated here with guilt and harsh self-criticism. Similarly, in the reformulated model of helplessness and depression (Abramson et al., 1978) specific causal inferences (such as internal attributions for negative events) are assumed to have maladaptive implications.

Efforts have been made to resolve the two contrasting views by recognizing that two different types of self-blame may in fact exist, one representing an adaptive, control-oriented response and the other a maladaptive, self-deprecating response (Janoff-Bulman, 1979). Behavioral self-blame is proposed to be control related in that it involves attributions to a modifiable source, specific behavioral acts or omissions. On the other hand, characterological self-blame is esteem related and involves attributions to a relatively nonmodifiable source, one's character or the sort of person one is. The case of rape offers an example of the difference between these attributions. A woman can blame herself for having walked home alone (something that she can control in the future) or for being too
trusting (a trait that may be difficult to change). Janoff-Bulman (1979) draws a parallel between this distinction and the stability dimension proposed by Weiner et al. (1972) in classifying attributions for achievement outcomes. She suggests that characterological self-blame corresponds to a stable attribution such as ability, whereas behavioral self-blame corresponds to an unstable attribution such as effort. In research with college women, Janoff-Bulman found that depressed subjects engaged in more characterological self-blame than did nondepressed subjects. Further support for this distinction came from a more recent study of female undergraduates in which the depressive symptoms of subjects correlated with blame directed at their own characters, but blame directed at their own behaviors correlated with lack of depressive symptoms (Peterson, Schwartz & Seligman, 1981). In addition, a survey of rape crisis center counselors indicated that the kind of self-blame reported by rape victims focused to a greater extent on behavioral acts than on specific traits or aspects of their personalities (Janoff-Bulman, 1979).

There may be reason to believe, therefore, that some kinds of self-blame represent a functional response to a traumatic event, not a maladaptive attitude to be discouraged by others. How others interpret self-blame on the part of a victim undoubtedly affects their interactions with a victimized individual and has consequences for the victim's overall adjustment. There is some indication in the literature that professionals and laymen alike generally view self-blame as a
sign of maladjustment and emotional disturbance (e.g., Abrams & Finesinger, 1953; Coates et al., 1979). Research by Coates et al. (1979) investigating observers' reactions to a rape victim who expressed self-blame indicated that self-blaming victims were seen as more emotionally disturbed and maladjusted than those who attributed their victimization to other factors. If in fact victims' self-blaming strategies are an attempt on their part to cope more effectively with the situation, to regain a sense of control over their lives, their efforts may be thwarted if others react unfavorably to their explanations and respond to them as though they were maladjusted or disturbed.

In some cases victim self-blame may function to confirm an observer's general tendency to hold the individual responsible for his or her fate. Particularly in the case of rape or wife assault, in contrast to cancer for example, admission of blame on the part of the woman is often held up as at least indirect evidence that the abuse had in some way been sought out or provoked. It is an objective of the proposed research to explore the tendency toward self-blame in battered women, and to investigate whether this is an adaptive or maladaptive strategy for them.

Victims of Domestic Violence

Domestic violence traditionally has been understood to be a relatively isolated phenomenon, and has been explained largely through reference to the psychological problems of the individuals involved (e.g., Davidson, 1977; Prescott & Letco, 1977). However, within the last decade there has been a growing
public awareness of the extent and pervasiveness of violence between intimates and a recognition that the phenomenon is a social problem of vast proportions, affecting millions of people.

It has been estimated that as many as 50% of all women will be victims of spousal abuse at some point in their lives (Langley & Levy, 1977; Straus et al., 1980; Walker, 1979). In a study of 57 representative families selected at random in Delaware it was revealed that 60% were involved in some kind of husband-wife physical violence (Steinmetz, in Langley & Levy, 1977). However, in a random sample of over 2,000 couples throughout the U.S., Straus et al. (1980) found that only 28% of the couples interviewed had engaged in some kind of violence directed at one another. But, like many other researchers, Straus et al. suggest that this figure may be a substantial underestimate, as there is likely to be a tendency on the part of both partners to underreport the violence. In fact, the FBI has stated that marital violence is the most unreported crime, as much as ten times more unreported than rape (Martin, 1978). The extent of the phenomenon is particularly salient when it becomes difficult to find non-violent control groups for research on domestic violence. While studying a group of likely candidates for violence, Gelles (in Langley & Levy, 1977) found that one third of his control group reported spousal violence. Similar findings were reported by Frieze (1979).

To fully comprehend the meaning and significance of these statistics, it clearly is important to know how researchers
define wife abuse. Unfortunately, many reported studies are vague with regard to this question. Straus et al. (1980) suggest that estimated frequencies of 50-60% are probably based on definitions of abuse that include pushes and shoves as well as more extreme cases of assault, but these authors also state that far from all incidents of violence are restricted to pushes and slaps. In their survey with a nationally representative sample of over 2000 couples, Straus et al. used the Straus Conflict Tactics Scale to gather data on a continuum of violent acts directed at one's spouse, ranging from throwing things at one's spouse to the use of a gun or knife. On this scale, those acts which carry with them a high risk of serious physical injury to the victim were included in what Straus et al. have called the "wife-beating index." (These acts include kicking, biting, or hitting with fist; hit or tried to hit with something; beat up; threatened with knife or gun; used knife or gun.) For the twelve month period preceding the interview, 3.8% of the respondents in the Straus et al. sample reported one or more physical attacks which fall in this category of "wife-beating." Over the course of their marriages, almost 4% had faced an angry partner with a knife or gun in hand, and almost 13% admitted there had been an act of violence which could cause serious injury. The figure of 28% reported above included violent acts which ranged from throwing things through more extreme assaultive behaviors.

Another important consideration is the frequency with which beatings occur. Straus et al. reported great variation in their sample, from one serious assault per year to once or more often
per week. Among those couples in which a serious assault (categorized as wife-beating) had occurred, 19% reported 2 assaults per year; 16% reported 3 or 4 beatings; and 33% reported five or more during a year.

Severity can also be judged from statistics on the need for medical care as a result of spousal assault. In a report prepared for the Canadian Advisory Council on the Status of Women, MacLeod (1980) presented statistics gathered from 73 shelters and hostels for battered women across Canada. Of those women asked about the extent of their injuries, between 30% and 36% responded that they had required medical care. Of those women asked about the regularity of the abuse, 26% were beaten at least once per month. One shelter reported that 84% of its residents had been beaten at least eleven times (MacLeod, 1980).

In a report on wife assault by the Vancouver Transition House and the Women's Research Centre in Vancouver, it was reported that 61.9% of the battered women interviewed had received professional medical treatment for their injuries. Over 62% of these women reported being beaten often and/or regularly (Barnsley, 1980).

The inability to document accurately the incidence of domestic violence stems from a number of factors. Historically the family has been considered the most private and intimate of social institutions, making detailed study of family behavior often difficult. As noted above, researchers also have doubts about the extent to which violence in the home is accurately reported. There are two likely reasons for underreporting abuse.
(Straus, 1978). For many families a certain amount of violence is "normal" and not noteworthy enough to be reported. It is for this reason that many abused women do not think of themselves as "battered women." For others the violence may be so severe that guilt and shame prevent both the abuser and the abused from admitting to it.

It is generally agreed among researchers that domestic violence crosses socioeconomic lines. However, it has been assumed that violence may be more common in lower income homes than in those of the middle and upper classes. Recent research by Straus et al. (1980) would seem to support this view. Among their findings is the fact that the rate of violence between husbands and wives was twice as high in the families of blue collar workers than in white collar families. And when the two extremes of income were examined it was found that families living at or below the poverty line had a rate of violence between spouses which was 500% greater than the rate of spousal violence in the most well-to-do families. One problem with these statistics is that this sample included only those couples who were living together. It is frequently pointed out that women in the middle and upper classes have more means at their disposal to assist them in leaving an abusive relationship. Thus, as Straus et al. suggested, although their research was extensive as well as being representative of the population as a whole, their findings do not include separated or divorced couples who may at one time have been victims of violence in the home.

Research on domestic violence generally reports violence
between spouses, and the fact that both husbands and wives are physically abusive has led some to suggest that husbands are victimized as much as are wives and consequently should warrant a comparable amount of concern. In response to this, data have been reported to support the view that wife abuse is a more serious problem than is husband-abuse. Research by Dobash and Dobash (1979) revealed that 76% of the family violence in their sample was husband assaults on their wives, while 1% involved wife assaults on their husbands. Additionally, studies of patterns of violence have shown that (1) men engage in more extreme forms of violence than do women, (2) violent acts committed by a husband are likely to be repeated more often than is the case for their wives, and (3) violence by women is more often in self-defense than it is an initiating act of abuse (e.g., Macleod, 1980; Straus et al., 1980).

Apart from the major issue of incidence, there appear to be two questions that have been of most interest to researchers of domestic violence. The first addresses the causes of wife-battering, and the second asks "Why do the women stay?" Both questions are fundamental to an understanding of battered women's own perceptions of their victimization.

Causes of Domestic Violence

Theories advanced to explain wife-abuse generally fall into two categories, those centered around the individuals involved and those that take into account the wider social context. Psychological studies of the individual personalities of battered women and their abusers have indicated that they appear
to have some characteristics in common, although they cannot be readily distinguished by demographic descriptions or stereotypes. In general, both groups have been described as having low self-esteem and as being traditionalists with regard to home and prescribed sex roles (Walker, 1979). One of the more popular conceptions of the abusing relationship which stems from traditional clinical theories about women has portrayed the battered woman as a masochist (Waites, 1978; Fleming, 1979). If these women were not masochistic they would obviously not tolerate the abuse and would leave. The belief that women enjoy suffering and pick mates responsive to their own needs has in the past enjoyed wide appeal, but recent evidence makes it clear that the abuse is not enjoyed and that there are complex psychosocial reasons to explain the inability of many women to extricate themselves from a battering relationship (e.g., Dutton & Painter, in press; Fleming, 1979; Gelles, 1977).

A number of reasons have been offered to explain why men beat their wives including alcohol, mental illness, jealousy, frustration and stress. However, this approach fails to account for the fact that many people in the same conditions do not beat their partners. Such explanations do not address the questions of why there is so much violence in the family (and not in other social institutions), and why the violence is so often directed at the wife.

In an effort to address domestic violence as a social problem rather than one contained in individual relationships, Straus (1978), a sociologist, has argued that the causes of
spousal abuse are to be found in the structure of society and its family system. (For additional theoretical explanations of violence between intimates see e.g., Dutton, in press.) Straus first makes the point that the family as a social group is characterized by a high level of conflict. Family membership confers the right to influence the behavior of others in the family, and people generally have a large emotional investment in that behavior. Straus points to the violent nature of society as one reason why family members turn to violence to deal with conflict. He suggests as a second reason that, for children, love tends to be associated with violence to the extent that physical punishment is used as a childrearing technique. An additional factor is that violent parents may serve as role models for their children. The "cycle of violence" theory contends that children who have witnessed violence between their parents, or have been abused themselves, are likely to be involved in abusive relationships as adults. This may be more the case for men than it is for women, however. The San Francisco Family Violence project is one among several reporting that over 60% of battering men come from violent households, while it is found generally that less than one-third of battered women report having seen violence between their parents (Fleming, 1979).

Mention should be made of the fact that the research from which these statistics are drawn suffers from at least two limitations. First, researchers often fail to report what definitions have been assigned to such terms as "violent homes"
or "parental violence." It is therefore impossible to assess the range of violent behaviors referred to. Second, because these percentages are based on reported violence, rather than documented violence, it is unclear to what extent both men's and women's reports are biased by, for example, distortion or repression.

In his analysis of the causes of wife-beating, Straus (1978) also contends that there exist cultural norms that legitimize the use of violence between family members. These norms, or informal social rules, derive from the fact that this form of violence was once legally condoned in western societies. Understood in its historical context, wife-beating is not a "deviant" act but rather an acceptable form of behavior which has existed for centuries within a patriarchal family system (e.g., Dobash & Dobash, 1970; Macleod, 1980). Men traditionally owned their wives and children and were considered to have complete authority over them. The woman's place was in the home, and the family and home were understood to be immune to rules which applied to the wider society (e.g., Macleod, 1980). It is only within the last century that men were denied the legal right to beat their wives in Britain and the United States. At that time, in the late 19th century, at least one state's law declared that the "moral sense of the community revolts" at the idea of a husband "chastising" his wife (Dobash & Dobash, 1978, p. 431). Although men no longer have the legal right to beat their wives, however, the law has continued to make it difficult for women to enforce their rights. Many women have been
confronted with police department "stitch rules" which prescribe that a woman must have become injured to a certain degree (e.g., a certain number of stitches) to be able to file assault charges against her husband (Gelles, 1977). The law grants much less protection to an abused wife than if the same violence had been inflicted on her by someone other than her husband (e.g., Davidson, 1977). Further, the philosophy that the family must be held together at all cost is often reflected in social and legal reactions to wives who flee their abusive spouses (e.g., Macleod, 1980).

Why Do They Stay?

Battered women remain with or return to their partners for complex reasons that cannot be wholly separated from the causes of their abuse. A general assumption held by many laymen is that any reasonable person, having been beaten, would avoid being hit again. It follows in the minds of many observers that abused wives who fail to leave must be masochists or mentally ill. It is often not recognized that those women who may want to leave or attempt to leave are often actively discouraged from seeking help, as noted above, due to beliefs in the sanctity of the family and a cultural acceptance of some amount of violence between intimates, or "consenting adults" (Gelles, 1977). Many women have no place to go. Their resources are limited in that they are often economically dependent on their husbands, their job opportunities are limited and they are generally also responsible for their children. Many abused women hold out hope that the batterer will change, or believe that keeping the
marriage together is best for the children. Feelings of guilt that they were responsible for their partner's abuse also serve to keep some women in the relationship.

It is also important to recognize that women who have been battered by their husbands often feel strong emotional ties to their partners, a fact that is difficult for most people to believe because they cannot understand how strong affective bonds could develop under conditions of abuse. In a theory of "traumatic bonding", Dutton and Painter (in press) have described some of the social conditions of abusive relationships which may serve to mitigate against the ability of battered women to break away from their partners. Two common features of abusive relationships (including child-parent, hostage-captor) are 1) a power imbalance, where the maltreated person perceives him or herself to be dominated, and 2) the intermittent nature of the abuse.

As Dutton and Painter point out, research in social psychology has shown that unequal power relationships can become increasingly unbalanced over time, to the point where individuals may exhibit a variety of pathological behaviors. Dutton and Painter describe a cycle of dependency and lowered self-esteem on the part of the less powerful individual that may occur in a power-imbalanced relationship. The low power person may internalize the other's assumed perspective and becomes less capable of fending for him or herself over time. The individual is thus more in need of the person in power and comes eventually to feel strong affective bonds to this person. This cycle also
creates dependency needs in the high power person, and if the power imbalance is disturbed, the individual may resort to desperate control attempts to restore the role relationship. One example of this is evidenced among abandoned battering husbands who resort to tactics such as intimidation and surveillance to bring their wives back to them.

The abuse that occurs in battering relationships is generally intermittent, with intervening periods characterized by more normal and acceptable behavior. As Dutton and Painter describe, such intermittent maltreatment patterns have been found to produce strong emotional bonding effects in both animals and humans. The authors present evidence from psychological research to suggest that for battered women, the removal of the aversive arousal associated with their abuse and the tendency of many batterers to be exceptionally loving and contrite following abusive incidents, in combination can strengthen the emotional attachment of women for their abusers.

If a woman does in fact decide to leave her partner, Dutton and Painter suggest that this decision may be suddenly reversed if the woman, in "an emotional deprivation state of increasing intensity" (p.22) is faced with the harsh realities of obtaining safety, shelter and economic sustenance.

Walker (1979) has applied the learned helplessness construct to the battering phenomenon in an effort to understand further why many women remain in their situation and what happens to them psychologically. She proposes on the basis of extensive clinical interviews that women learn to be helpless in
a battering relationship, and that this helplessness makes it difficult for them to get out. In this analysis, traditional sex role socialization is understood to encourage women's feelings of helplessness. According to Walker, they are systematically taught that their personal worth depends not on their own effective responses to situations, but on their appeal to men. Their role in life is to make their marriage successful. They blame themselves for the violence and try to change, but regardless of what they do, they are abused. After a time they realize that they have no control over the violence, that the abuse is independent of any responses or behavior on their part. Further, repeated batterings diminish their motivation to respond.

Walker goes on to suggest that the helplessness, passivity, and depression experienced by battered women may generalize to other aspects of their lives. Once they believe they cannot control what happens to them, they have difficulty believing they can ever exert influence in their lives. The nonresponsiveness of external agencies and individuals reinforces this belief. Walker believes that this concept of learned helplessness is important for understanding why battered women do not attempt to free themselves from battering relationships.

However, Rounsaville (1978) reported that the battered women in his sample had not generalized their feelings of helplessness and ineffectiveness to other areas of their lives. Further, in another study Rounsaville and his colleagues
(Rounsaville, Lifton & Bieber, 1978) found that the abused women interviewed reported themselves to be competent in their work outside the home, and in their relationships with their family of origin and their children. Feelings of ineffectiveness were specific to the spouse relationship and to leisure-time activities.

Thus while the syndrome of learned helplessness may be a contributing factor to a woman's inability to free herself of the abusive relationship, it does not appear to explain in full the situation in which battered women find themselves.

**The Research Problem**

Battered women represent a distinctly different kind of victim population than has heretofore been investigated. The most salient features of their victimization that set them apart from other individuals who have met with unfortunate life events is the nature of their relationship to the perpetrator of the violence, and the recurrent nature of their victimization. A battered woman's explanation and understanding of her situation may be strongly influenced by these factors. While a victim of a rape or of an accident is explaining an event that happened in the past and is receding with time, most battered women must explain a recurring phenomenon that may have extended over a long period of time, and further, may reoccur in the future.

Moreover, the emotional state of abused women would appear to be a particularly important aspect of their reactions to their victimization. Unlike most subjects in laboratory
experiments, questions asked of victims of domestic violence refer to a traumatic, emotion-laden period of their lives. Studies investigating individuals' attributional patterns have not commonly related these patterns to emotions, and even when emotional reactions are examined they tend to be emotions of low intensity, generally ones generated by a laboratory event or a hypothetical scenario (e.g., Weiner et al., 1979).

One purpose of the present investigation was to examine how the emotional reactions of battered women relate to their coping capabilities, as well as to the explanations (attributions) made by these individuals for their abuse. In everyday life, and especially in emotion-filled contexts such as those related to domestic violence, it seems reasonable to expect that affect is an important contributing factor in how people react to events.

In sum, the research to be reported in this thesis was directed toward a greater understanding of how battered women explain and interpret the abuse that they have experienced and to determine how their interpretations relate to their emotional reactions and coping capabilities. A major objective of this undertaking was to determine the extent to which existing social psychological research and theory on reactions to negative life events can account for the experiences of women who have been assaulted by their partners.

The strategy of the proposed research was to interview women who had sought refuge in a shelter for battered women. Questions asked of them that were the most central to the theoretical concerns of this thesis involved their attributions
of blame for their abuse, their affective reactions, and the extent to which they were perceived by shelter counselors as coping well with their situation. Furthermore, attempts were made to contact women (or get information pertaining to them) one month after their initial interview to determine whether or not they had returned to their abusive partners.

Hypotheses

Hypothesis 1: The Relationship between Attributions of Blame and Affect

Based on theory and research establishing a link between causal attributions and affective reactions, as well as findings that self-blame may be a positive psychological mechanism, it is predicted here that the degree of self-blame found in battered women will be correlated with their current affective state (that is, their current emotional state at the time of measurement). Specifically, on the basis of theory and preliminary research by Janoff-Bulman (1979) and Peterson et al. (1981), it is hypothesized that blame directed at one's behavior will be positively correlated with positive affective reactions, and blame directed at one's character will be negatively correlated with positive affect.

Hypothesis 2: The Relationship between Attributions of Blame and Coping

On the basis of findings presented by Bulman and Wortman (1977) and theory and research discussed above, it is predicted
that self-blame attributions in battered women will be related to effective coping. More specifically, it is hypothesized that behavioral blame and effective coping will be positively correlated, while a negative correlation will be found between characterological blame and effective coping.

Hypothesis 3: The Relationship between Affect and Coping

It has been proposed that the study of affect will contribute to an understanding of people's reactions to negative life events. In the present research, it is predicted that the emotional reactions of battered women will be related to their effective coping. Specifically, it is hypothesized that positive affect will be related to successful coping. Perhaps more interesting and important is the general belief that affect is an important variable that warrants inclusion in social cognition research. It is hypothesized that both affect and attributions will emerge as important predictors of coping in multiple regression analyses.

Hypothesis 4: The Relationship between Coping and Avoidability

Bulman and Wortman (1977) found that accident victims coped better the less avoidable they saw their accidents as being. Kahneman et al. (1982) similarly report that people feel less regret over negative outcomes the more inevitable the outcome is perceived to be. It is expected here that the concept of avoidability will also be important to battered women. Specifically, it is hypothesized that the less avoidable the violence is perceived to be by women in abusive relationships, the more effectively they will cope subsequently.
Hypothesis 5: Predictors of Future Behavior

The existing literature on domestic violence provides few clues with regard to those variables that may determine which women return to their situation and which do not—no doubt because the factors influencing women's decision to return are as varied and complex as those which prevent them from leaving the abusive relationship in the first place. Nevertheless, it seems worthwhile to explore possible correlates of this behavior. The following factors are hypothesized to be related to this outcome variable: duration of abuse, characterological self-blame, and depression.
METHOD

Subjects

Fifty female residents of the Woman's Alliance shelter for battered women in San Jose, California served as subjects in this research. Women who are admitted to this shelter have no other options for emergency housing and are in need of a safe place to stay on a temporary basis (up to a maximum of 30 days). They are described as battered if they have been mentally or physically abused by their husbands or partners, whether or not they are living together. Physical abuse constitutes by far the major complaint of the majority of residents, and ranges from bruises resulting from slaps and pushes to a variety of severe injuries including lacerations and broken bones.

The fifty women interviewed in this research ranged in age from 19 to 48 years. The mean age was 28.4 years and the median age 27. There were a number of ethnic backgrounds represented in the sample: 28 of the respondents were white, 10 were black, 9 were hispanic, and three had other ethnic origins (East Indian, American Indian and Filipino). The women had been living with or married to their partners for a mean of 5.4 years, while the length of relationship over the entire sample ranged from three months to 28 years. Thirty-two were married, 18 were unmarried. Forty-six of the 50 women had at least one child, and 17 of these women had more than two children.

The education of the women interviewed ranged from Grade 10 to graduate training. While seven had not completed high school, 17 had attended university and two had graduate training. Forty
of the fifty women were not working outside the home at the time they came to the shelter; nine women had had to leave jobs when they came to the shelter.

**Procedure**

Residents of the shelter were initially approached by shelter counselors shortly after their arrival and were told of the nature of this research project. They were asked if they would be interested in participating and those who answered in the affirmative (over 95% of those who were approached) were subsequently contacted by the experimenter to arrange a convenient interview time.

Subjects were interviewed as soon as possible following their arrival in the shelter in order to avoid the possibility of potential biases in their responses that might have resulted from interaction with the shelter staff and other residents. It was explained to them that the interviewer was a member of the volunteer shelter staff, and was engaged in a research project on the subject of domestic violence. Subjects were told more specifically that the interviewer was interested in speaking to them about their understanding of, and explanations for, their abuse.

Subjects signed consent forms that indicated to them that their responses would be confidential and that their anonymity would in all cases be assured. The majority of women were eager to talk about their experiences, and many seemed to find it easier to talk to the interviewer than to staff counselors, for
two reasons. The first is that counselors were often pressed for time and found it difficult to conduct lengthy discussions without interruption. Second, because their interviews were confidential, some women commented that they felt more comfortable talking to the interviewer than to the staff. The content of their discussions would have no bearing on any decisions made by the shelter concerning them, such as length of stay, or regarding information to be communicated to social workers.

Most interviews were held in the evening, in a relatively quiet dining area in the shelter. A standardized description of the research project was presented to all participants. Subjects were asked questions from the interview schedule (Appendix A) and their responses were recorded by the investigator. One measure, the Mood Inventory (Appendix B), required subjects to mark their own responses on the questionnaire. (While a request had been made to the staff of the Woman's Alliance to permit the use of a tape recorder in these sessions, it was suggested that it would be in the women's best interest to protect as much as possible their privacy and anonymity, and the request was therefore denied.)

The average time spent interviewing each subject was approximately three hours, although sessions ranged from 2 to 6 hours in length.
Measures

Interview Schedule

The interview (see Appendix A) was a combination of open-ended and structured questions requiring responses on a scale of one to five. It was developed on the basis of a number of sources, most notably research with battered women and attributional analyses of victim populations (e.g., Bulman & Wortman, 1977). Questions were included that elicited information about the following general areas or issues: demographic variables; characteristics of and background information about the abuse; perceptions of the abuse (e.g., normality, avoidability); support and communication; and perceived causes of the abuse. Five attribution questions were posed to subjects, each response on a scale from one to five: extent of partner blame, self-blame, other blame (e.g., partner's upbringing), and behavioral versus characterological self-blame.

Measures of Affect

Three questionnaires (see Appendix B) were administered to subjects in order to obtain general indices of affect or emotional reactions. These included the short form of the Beck Depression Inventory (Beck & Beck, 1972); a Mood Inventory (Mehrabian & Russell, 1974) from which two separate dimensions of affect were utilized, the Pleasure scale and the Dominance scale; and finally, a checklist of emotional reactions adapted from research by Wortman (Note 2) which will be referred to here as the Affect Frequency Checklist and which yielded two scores,
one indicating positive affect and one negative affect.

In addition to these five measures of affect, two questions from research by Bulman and Wortman (1977) were included in the interview schedule: the extent to which subjects saw their situation as the worst thing that could ever happen to them, and a general question to assess how happy subjects felt at this stage of their lives. Both questions were responded to on five-point scales. Thus, seven separate measures of affect were included in analyses of subjects' affective response.

Beck Depression Inventory. The Beck Depression Inventory (BDI; Beck, 1967) has been used in a number of studies designed to assess the relationship between attributions and depression (e.g., Rizley, 1978; Seligman, 1979). The short form of the BDI rather than the longer form was included in the present research for practical, time-related considerations. The short form correlates .96 with the longer BDI, and the reliability and validity of both forms have been well documented (Beck & Beck, 1972; Seligman et al., 1979).

The short BDI consists of 13 items, each item including four alternative statements ranging in severity from 0 to 3. Subjects are asked to indicate the one or more statements from each item which best describe the way they feel. Responses (the highest score for each item) are summed to provide one score for depression. The items are intended to cover a range of depressive symptoms including sadness, sense of failure, guilt, social withdrawal, and self-image change, among others (see Appendix B).
In the current sample, the mean rating for the group on the BDI was 8.4 which according to Beck and Beck (1972) reflects moderate depression. The range of BDI scores and associated degree of depression as reported by Beck and Beck were utilized to ascertain the severity of depression among the battered women interviewed. Seventeen women were not at all or only minimally depressed, seven could be categorized as mildly depressed, 18 were moderately depressed, and eight women scored high enough on the BDI to fall within the severely depressed category.

**Mood Inventory.** Because the purpose of the BDI is to assess depression, an effort was made to include a more general measure of affect. Although the Zuckerman and Lubin (1965) Multiple Affect Adjective Checklist (MAACL) has been used extensively among college populations (e.g., Seligman et al., 1979) its focus is on depression, hostility, and anxiety, scales which correlate highly with one another. In addition to this limitation, Russell and Mehrabian (1977) have criticized the MAACL and similar scales on a number of points, and suggest that their Mood Inventory (Mehrabian & Russell, 1974, Appendix B) is preferable. Because this inventory also accounts for most of the variance in the MAACL and a number of other measures of affect, its inclusion in the present research was thought appropriate. Moreover, the format for the Mehrabian and Russell inventory appeared to be more suitable for the subject population in this research because it takes less time to complete and is easier to comprehend. Pilot testing confirmed this reasoning.

The inventory consists of 30 pairs of words, each of which
describes a "feeling dimension". Subjects indicate by checkmark how they feel most of the time with regard to each pair. According to Mehrabian and Russell, the inventory assesses three separate affective dimensions: pleasure, dominance, and arousal. Six word pairs are associated with each dimension, and scores are obtained by summing subjects' responses within each dimension. Thus three separate scores result from the inventory. In the current analysis of affect, only the pleasure and dominance scores were utilized, as they were thought to be particularly relevant to an understanding of the emotional reactions of the current sample.

Affect Frequency Checklist. The Affect Frequency Checklist (adapted from Wortman, Note 2) was included in this research because it was currently in use in Wortman's research with victims of negative life events and appeared to offer a straightforward means to measure some relevant affective reactions of battered women. Two additional adjectives (guilty and optimistic) thought to be relevant to this sample were included with Wortman's list of eleven descriptions of emotional state. Subjects were asked to indicate how often (on a scale of one to five) they had experienced each feeling over the course of the previous week's time.

A panel of three judges was asked to indicate which adjectives were descriptions of negative emotional states and which were descriptions of positive emotional states. With no disagreement, three adjectives were described as positive, and ten negative. Subjects' responses were summed within each
category to provide one score for positive and one for negative affective state.

**Measure of Coping**

A measure of how well each woman was coping with her present situation was obtained by having counselors at the shelter rate each woman on a nine-point scale (see Appendix C). The coping scale itself had been designed with the help of three shelter counselors, and was intended to assess the extent to which each woman was getting back on her feet, making decisions with positive implications for herself, and taking responsibility for her own life. While geared specifically to the problems and challenges facing battered women, this measure of coping can best be described as problem-focused as opposed to emotion-focused coping, a distinction made recently by Lazarus and his coworkers (Folkman & Lazarus, 1980). The function served by problem-focused coping, as described by Folkman and Lazarus, is the "management or alteration of the person-environment relationship that is the source of stress" (Folkman & Lazarus, 1980, p. 223). The criteria used here to assess whether a subject was coping effectively with her situation emphasized specific attempts on her part to ameliorate her lot. For example, poor copers were described as unwilling to face the reality of the situation, reluctant to do things for themselves and expecting the situation to change miraculously, while good copers were seen to actively pursue specific courses of action (search for job, apartment, counseling with partner) and to have made plans with which they felt clear and comfortable.
At least two counselors scored each subject for coping. While it had been assumed initially that these coping scores would be analyzed for their interrater reliability, subjects unfortunately spent differential amounts of time with each counselor. Each counselor thus felt that she might not have enough information to assess adequately each subject. Therefore, two counselors together discussed each woman in depth and arrived at a coping assessment with which both agreed. On a scale of nine, the mean coping score for the current sample was 4.6. Twenty-six of the 50 women received coping scores on the lower end of the continuum (4 or less) while coping ratings over five were given to 19 women.
PROCEDURAL MODIFICATIONS

Behavioral versus Characterological Blame

In-depth interviews often afford the opportunity for interviewers to receive immediate feedback from respondents with regard to the questions asked of them. That is, subjects may request clarification or question the meaning of specific items. While this can lead to a more thorough understanding of the meaning of subjects' responses, interviewers must remain open to the possibility that changes in format may be necessary to accommodate subjects' feedback. Pilot testing often serves to shape the interview format appropriately. However, it may be the case that respondents' comments raise issues of theoretical importance, rather than simply the need to rephrase a particular question. The current research provides such an example.

After a number of lengthy pilot interviews with shelter occupants, it became clear that a problem existed with the attribution questions designed to assess behavioral and characterological blame. The distinction made in the literature between these two kinds of self-blame appeared difficult to apply to the battered women in this sample. It will be recalled that behavioral blame refers to attributions to specific acts or omissions, while characterological blame involves attributions to one's character or the sort of person one is. When responding to either the behavioral or characterological blame questions in the current research (e.g., "How much do you blame yourself for the violence because of things you did or didn't do, i.e., do you think if you had acted differently the violence wouldn't..."
have occurred or been so bad?) women generally answered in such a way as to incorporate both their behavior and character or personality: "He would hit me because I am outspoken, that is, I talked back to him." While this issue will be addressed in more detail in the Discussion section, it should suffice to say here that the ongoing nature of domestic abuse no doubt largely accounts for the lack of distinction between these two types of blame. Recurrent acts, viewed retrospectively, must reflect something about one's character or personality. It was, therefore, decided that rather than pose two questions that appeared redundant, the initial behavioral and characterological blame questions should be merged. Thus, in addition to the general self-blame question (asked in conjunction with partner blame), this second question assessed blame for specific instances of violence, blame that could be attributed to either a specific act or to some aspect of the woman's personality. As references to specific instances of violence often elicited responses different from the general self-blame attribution, this question was retained rather than dropped altogether from the interview format.

Perception of Contingency

Further, an important distinction emerged in pilot interviews between attributions of blame and the perception of contingency or covariation between one's actions or personality and the abuse. When addressing the issue of blame, women were often quick to point out the existence of a relationship between
what they did and the onset of abuse, but they did not blame themselves for the abuse. For instance, a woman might respond that her partner was violent because she was independent or outspoken, but she did not believe she was to be faulted for this and thus attributed no blame to herself. The distinction seemed an important one, particularly as some respondents did not acknowledge this contingency. A new question was thus incorporated into the interview schedule designed to assess the perceived relationship between a woman's behavior or personality and her partner's abuse: "To what extent do you think your husband was violent because of something about you, some particular trait that you have (e.g., too submissive, outspoken), or particular ways in which you acted?" The item as rephrased is in fact quite similar to attribution questions that have been used in other research contexts (see, e.g., Abramson et al., 1978; Gong-Guy & Hammen, 1980). Posed differently the item could read, "To what extent do you attribute the abuse to something about yourself," that is, a person or internal attribution. However, in the present context, the "contingency" wording seemed readily interpretable by respondents and was clearly distinguishable from an assessment of blame. (The issue of contingency versus blame will also be addressed in more detail in a later section.)

The five attribution questions posed to subjects thus included four questions to assess blame (blame to partner, self, other factors, and self-blame for specific instances of violence) and one question (contingency) to assess the perceived
relationship between aspects of self and the abuse.
RESULTS

Affect and Blame Attributions: Composite Scores

Affect

The seven measures of affect were highly intercorrelated (see Table I). It will be recalled that these measures included the short form of the Beck Depression Inventory (BDI), the Pleasure and Dominance dimensions of the Mood Inventory, ratings of happiness and of subjects' situation on a best to worst continuum, and negative and positive affect scores from the Affect Frequency Checklist. Because both the BDI and the Mood Inventory have been tested extensively for reliability and validity, it was encouraging that the less reliable measures included in this research were for the most part highly related to them.

In order to create one composite affect score for each subject, a principal component analysis was performed. The first principal component, or factor, in such an analysis yields the best linear combination of variables; i.e., this combination accounts for more of the variance in the data than any other linear combination (e.g., Kerlinger & Pedhazur, 1973). The factor or component derived from this analysis could be readily described as a bipolar factor where a high score on the factor was indicative of general negative affect (see Factor Loading Matrix, Table II). That is, high scorers tended to be depressed on the BDI, had low pleasure and dominance scores, and described themselves as frequently anxious, angry and afraid. On the other hand, low scores on this factor were associated with reported
TABLE I

Intercorrelations among Measures of Affect

<table>
<thead>
<tr>
<th></th>
<th>Beck Depression Inventory</th>
<th>Pleasure (Mood Inventory)</th>
<th>Dominance (Mood Inventory)</th>
<th>Happiness</th>
<th>Best-Worst</th>
<th>Negative Affect (Affect Frequency)</th>
<th>Positive Affect (Affect Frequency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beck Depression Inventory</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pleasure</td>
<td></td>
<td>.62&lt;sup&gt;a&lt;/sup&gt;</td>
<td></td>
<td></td>
<td>.54&lt;sup&gt;a&lt;/sup&gt;</td>
<td>.59&lt;sup&gt;a&lt;/sup&gt;</td>
<td>-.54&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Dominance</td>
<td></td>
<td></td>
<td>.57&lt;sup&gt;a&lt;/sup&gt;</td>
<td>-.71&lt;sup&gt;a&lt;/sup&gt;</td>
<td>-.29&lt;sup&gt;c&lt;/sup&gt;</td>
<td>.72&lt;sup&gt;a&lt;/sup&gt;</td>
<td>-.66&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Happiness</td>
<td></td>
<td></td>
<td></td>
<td>.30&lt;sup&gt;c&lt;/sup&gt;</td>
<td></td>
<td>-.60&lt;sup&gt;a&lt;/sup&gt;</td>
<td>.43&lt;sup&gt;b&lt;/sup&gt;</td>
</tr>
<tr>
<td>Best-Worst</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-.35&lt;sup&gt;c&lt;/sup&gt;</td>
<td></td>
<td>.36&lt;sup&gt;b&lt;/sup&gt;</td>
</tr>
<tr>
<td>Negative Affect</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive Affect</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>a</sup> p < .001
<sup>b</sup> p < .01
<sup>c</sup> p < .05
### TABLE II

Factor Loading Matrices
(from Principal Component Analyses)

<table>
<thead>
<tr>
<th>Affect</th>
<th>Coefficient *</th>
<th>Blame Attributions</th>
<th>Coefficient *</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variable</td>
<td></td>
<td>Variable</td>
<td></td>
</tr>
<tr>
<td>Pleasure **</td>
<td>.87</td>
<td>Partner blame</td>
<td>-.92</td>
</tr>
<tr>
<td>(Mood Inventory)</td>
<td></td>
<td>Self blame (general)</td>
<td>.91</td>
</tr>
<tr>
<td>Negative Affect</td>
<td>.86</td>
<td>Self blame (specific)</td>
<td>.70</td>
</tr>
<tr>
<td>(Affect Frequency)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive Affect</td>
<td>-.78</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Affect Frequency)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BDI</td>
<td>.77</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Happiness</td>
<td>-.69</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dominance **</td>
<td>.62</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Mood Inventory)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Best-Worst</td>
<td>-.46</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Principal component pattern coefficients: these are correlation coefficients between each constituent variable and the linear combination of variables

** High scores on these variables indicate low pleasure and low dominance
happiness, a tendency to view one's lot in life as closer to the best than the worst, and a frequency of calm, happy and optimistic feelings. (See Table II for the correlations between each variable and the derived factor.) Each subject's factor score for affect (i.e., the linear combination of the above variables) was used in subsequent analyses.

**Attributions**

Table III reports frequencies for the number of subjects who attributed various levels of blame to themselves and others, and the extent to which the women saw a contingency between their behavior or personality and the violence.

Intercorrelations among the five measures of attribution are shown in Table IV. The fact that perceived contingency did not correlate with attributions of blame provides further evidence that blaming oneself for one's partners' abusive behavior is distinct from perceiving a relationship between aspects of oneself and the abuse. Thus contingency was analyzed separately from self and partner blame attributions.

While blame directed at "other factors" was unrelated to self (general and specific) and partner blame, the latter were significantly correlated. Three blame measures were thus also combined to form composite scores using principal component analysis: the extent to which one's partner was blamed for the violence, the extent to which one blamed oneself, and the extent to which one blamed oneself for specific instances of violence. The factor loading matrix (see Table II) indicates that people who had high scores on this factor blamed themselves, both in
### TABLE III
Frequencies: Blame and Perceived Contingency

#### Blame: Number of Subjects Attributing Blame to Partner, Self (general), Self (specific), and Other Factors

<table>
<thead>
<tr>
<th>Amount of Blame</th>
<th>Partner/n</th>
<th>Self (general)</th>
<th>Self (specific)</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>0/50</td>
<td>25/50</td>
<td>18/48</td>
<td>14/50</td>
</tr>
<tr>
<td>Some</td>
<td>50/50</td>
<td>25/50</td>
<td>30/48</td>
<td>36/50</td>
</tr>
<tr>
<td>At least 50%</td>
<td>50/50</td>
<td>12/50</td>
<td>21/48</td>
<td>35/50</td>
</tr>
<tr>
<td>100%</td>
<td>24/50</td>
<td>0/50</td>
<td>0/48</td>
<td>9/50</td>
</tr>
</tbody>
</table>

#### Contingency: Number of Subjects Who Perceived a Contingency between Aspects of Themselves and Their Partners' Abuse

<table>
<thead>
<tr>
<th>Amount</th>
<th>Contingency/n</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>15/49</td>
</tr>
<tr>
<td>Some</td>
<td>34/49</td>
</tr>
<tr>
<td>At least 50%</td>
<td>28/49</td>
</tr>
<tr>
<td>100%</td>
<td>6/49</td>
</tr>
</tbody>
</table>
### TABLE IV

Intercorrelations among Attribution Measures

<table>
<thead>
<tr>
<th></th>
<th>Partner blame</th>
<th>Self blame (general)</th>
<th>Self blame (specific)</th>
<th>Other blame</th>
<th>Contingency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partner blame</td>
<td>1.00</td>
<td>-0.83&lt;sup&gt;a&lt;/sup&gt;</td>
<td>-0.46&lt;sup&gt;a&lt;/sup&gt;</td>
<td>0.02</td>
<td>-0.01</td>
</tr>
<tr>
<td>Self blame (general)</td>
<td>1.00</td>
<td>0.43&lt;sup&gt;b&lt;/sup&gt;</td>
<td>-0.04</td>
<td>-0.04</td>
<td></td>
</tr>
<tr>
<td>Self blame (specific)</td>
<td>1.00</td>
<td>0.04</td>
<td>0.11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other blame</td>
<td>1.00</td>
<td></td>
<td></td>
<td>0.05</td>
<td></td>
</tr>
<tr>
<td>Contingency</td>
<td></td>
<td></td>
<td></td>
<td>1.00</td>
<td></td>
</tr>
</tbody>
</table>

<sup>a</sup> \( p < .001 \)

<sup>b</sup> \( p < .01 \)
general and for specific abusive incidents, while partner blamers had low scores on the factor. This factor could, therefore, be described as a self-blame factor, and subjects' composite blame scores were used in subsequent analyses.

**Hypothesis 1: Interrelationships among Attributions and Affect**

While Hypothesis 1 was concerned with the relationship between blame attributions and affect, the changes in the measures detailed above necessitated a slight variation in the actual analyses performed. Thus in addition to blame attributions, perception of contingency was also included among the attribution measures to be correlated with affect, while as discussed above, assessments could not be made of behavioral versus characterological blame.

It was predicted that self-blame on the part of battered women would be related to positive affect. However, as one can see from Table V, this prediction was not upheld. The intercorrelations among blame attributions, contingency, and affect are nonsignificant.

The absence of a relationship between attributions and affect is particularly surprising in view of the substantial amount of literature that points to the existence of an attribution-affect link in other subject populations. A hint of such a link in the current sample of women does suggest itself if one looks at individual measures of blame and affect, rather than their composite scores. The more women blamed their partners the less they were likely to describe themselves as
TABLE V
Correlations among Affect, Blame and Contingency

<table>
<thead>
<tr>
<th></th>
<th>Affect *</th>
<th>Blame attributions *</th>
<th>Contingency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affect</td>
<td>1.00</td>
<td>-.10</td>
<td>-.17</td>
</tr>
<tr>
<td>Blame attributes</td>
<td>1.00</td>
<td>.02</td>
<td></td>
</tr>
<tr>
<td>Contingency</td>
<td></td>
<td></td>
<td>1.00</td>
</tr>
</tbody>
</table>

* Composite scores for Affect and Blame variables
carn, happy and optimistic on the Affect Frequency Checklist \( r = -0.34, p < 0.02 \); and the more women tended to take general blame for the abuse, the less likely were they to see their situation as the worst thing that could befall them \( r = 0.30, p < 0.05 \). In general, however, there were few significant interrelationships among specific blame attributions and individual measures of affect, which no doubt accounts for the absence of a relationship between the composite scores.

**Hypotheses 2 and 3: Predictors of Coping**

It was predicted in Hypotheses 2 and 3 that, in general, both affect and attributions would emerge as predictors of coping, and more specifically, that both self-blame and positive affect in battered women would be related to effective coping.

These hypotheses were tested by a stepwise multiple regression analysis and the predictors entered into the regression included affect, blame attributions, and perceived contingency. Both the affect and blame scores were the composite scores derived from principal component analyses.

In a stepwise regression analysis, the independent variables are entered into the equation one by one on the basis of a pre-established statistical criterion. In this case, the probability value associated with a given variable was not to exceed \( p = 0.05 \). The order of inclusion of the variables was determined by the respective contribution of each variable to the amount of variance in coping that could be explained (see e.g., Nie et al., 1975). In the analysis (see Table VI), the
### TABLE VI
Regression Analysis: Predictors of Coping

<table>
<thead>
<tr>
<th>Variable</th>
<th>$r_yi$</th>
<th>$\beta$-Coefficient</th>
<th>F-ratio</th>
<th>F-probability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contingency</td>
<td>.41</td>
<td>.354</td>
<td>7.77</td>
<td>$p = .008$</td>
</tr>
<tr>
<td>Affect</td>
<td>-.38</td>
<td>-.315</td>
<td>6.14</td>
<td>$p = .017$</td>
</tr>
</tbody>
</table>

$R = .513$
$R^2 = .263$
$F = 8.406$
$p = .0008$

Correlations among Affect, Blame, Contingency and Coping

<table>
<thead>
<tr>
<th></th>
<th>Affect</th>
<th>Blame attributions</th>
<th>Contingency</th>
<th>Coping</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affect</td>
<td>1.00</td>
<td>-.10</td>
<td>-.17</td>
<td>-.38$^a$</td>
</tr>
<tr>
<td>Blame attributions</td>
<td>1.00</td>
<td>.02</td>
<td></td>
<td>.01</td>
</tr>
<tr>
<td>Contingency</td>
<td>1.00</td>
<td></td>
<td>.41$^a$</td>
<td></td>
</tr>
<tr>
<td>Coping</td>
<td></td>
<td></td>
<td></td>
<td>1.00</td>
</tr>
</tbody>
</table>

$^a p < .005$
regression equation was significant ($R=.513$, $R^2=.263$, $F=8.406$, $p<.001$) and the best predictors of coping to emerge were perceived contingency ($\beta=.354$, $F=7.77$, $p<.01$) and affect ($\beta=-.314$, $F=6.14$, $p<.05$). Table VI also presents the intercorrelations among the predictor variables entered into the regression analysis and coping.

As predicted, both affect and attributions emerged as predictors of effective coping in battered women. However, the major deviation from the proposed relationship was the fact that attributions of blame (i.e., self-blame) were not related to coping, while perceived contingency was highly related to coping capabilities. Women who were ranked as good copers by shelter counselors were more likely to acknowledge a relationship between their own behavior or personality and their partners' violence than were women rated as poor copers. The relationship between affect and coping indicated that women rated as good copers tended, for example, to score high on the pleasure dimension of the mood inventory, and to describe themselves as calm, happy and optimistic.

**Hypothesis 4: Avoidability and Coping**

It was predicted that effective coping in battered women would be related to perceptions of one's victimization as "unavoidable". However, unlike with the accident victims in research by Bulman and Wortman (1977), coping and perceptions of avoidability were not found to correlate among battered women.

The concept of avoidability may nevertheless still be an
important one to victims of domestic abuse. Subsidiary analyses revealed that both perception of contingency and outcome (whether or not women returned to their abusive partner) were related to avoidability. Those women who perceived a contingency between aspects of themselves and their partners' abuse were likely to perceive the violence as unavoidable ($r = -0.35, p < 0.05$). The relationship between avoidability and outcome will be discussed below.

**Hypothesis 5: Predictors of Future Behavior (Outcome)**

Information pertaining to subject's whereabouts once they left the shelter was obtained largely through shelter counselors who tried to maintain contact with the women in order to provide support and resource material. Of the 50 women interviewed, information was obtained about the status of 41 one month following their interviews. Of this group, twelve women had returned to their situations and 29 had not. Thus, 29% of the women contacted had returned to their abusive partners.

It was hypothesized that duration of abuse, characterological self-blame and depression (BDI scores) would be related to the women's outcomes. As discussed, characterological blame was not assessed after pilot interviews indicated this attribution was not distinguishable from behavioral blame in battered women. No correlation was found between depression and outcome, but duration of abuse and whether or not women returned were significantly related ($r = -0.36, p < 0.05$). The longer the duration of violence, the less
likely a woman was to return to her abusive partner. Moreover, in subsidiary analyses of the concept of avoidability, it was revealed that the more unavoidable women perceived their abuse to be, the less likely they were to return to the battering situation \( r = .37, p < .05 \).

It was decided that further analyses should be conducted to explore more fully the relationship of outcome to other variables assessed in this research. There are several concerns that justify this exploration. The outcome variable measures a specific, real-life behavior on the part of subjects in this sample. As a behavioral measure (in contrast to self-report measures) it seems particularly important to explore any possible relationships that may exist with other variables currently under investigation. The existing literature that pertains to battered women offers little data on which to base predictions regarding the likelihood of a woman's return. Any further light that can be shed on this phenomenon will no doubt prove useful in understanding more fully the dynamics of domestic violence, in both theoretical and applied domains.

An analysis that seemed relevant under the circumstances was one that assessed whether subjects who did not return differed as a group from subjects who did return to their partners. Hotelling's \( T^2 \) test (a generalization of Student's \( t \)-test to situations involving more than one dependent variable) was performed on the data in order to determine if the two groups differed on a range of variables. The variables included in the analysis were the following: duration of violence,
avoidability, length of relationship, number of times the subject had previously left the relationship, attributions of blame, affect, and contingency. (Duration and avoidability were included in this analysis in order to corroborate the above findings using a statistical technique distinctly different from correlation. Affect was included as a composite score.)

The functions performed by a Hotelling's $T^2$ test are to weight and linearly combine the dependent variables in such a way as to make the two groups as statistically distinct as possible. Thus vectors of scores are compared, rather than single scores. These scores are called the discriminant scores, and the set of weights which maximally discriminates between groups is called the discriminate function. Thus in conjunction with the $T^2$ test, a discriminant analysis can be performed. The weighting coefficients in the discriminant function serve to identify the variables that contribute most to the differentiation of the groups (see e.g., Harris, 1975).

The Hotelling's $T^2$ test (see Table VII) indicated that the two groups did differ significantly on the dependent measures of interest ($F=2.44$, $p<.05$). The discriminant function was also significant ($\chi^2=14.36$, $p<.05$). However, no significant differences were found when comparisons between the two groups were made individually for each dependent variable. Thus, the overall significance of this analysis indicates that the variables of interest, in interaction, differentiated the two groups of subjects. Those variables which contributed most to the differentiation of the groups were (in order of importance):
### TABLE VII

*Hotelling's $T^2$ and Discriminant Analysis*

<table>
<thead>
<tr>
<th>Discriminating variable</th>
<th>Standard normalized discriminant function coefficient</th>
<th>$\bar{x}$ Group 1 *</th>
<th>$\bar{x}$ Group 2 *</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of relationship</td>
<td>-.12</td>
<td>6.18</td>
<td>3.00</td>
</tr>
<tr>
<td>Times previously left</td>
<td>.45</td>
<td>2.07</td>
<td>3.50</td>
</tr>
<tr>
<td>Duration of violence</td>
<td>-.59</td>
<td>2.03</td>
<td>1.42</td>
</tr>
<tr>
<td>Blame **</td>
<td>-.33</td>
<td>49.76</td>
<td>47.39</td>
</tr>
<tr>
<td>Contingency</td>
<td>.03</td>
<td>3.06</td>
<td>2.50</td>
</tr>
<tr>
<td>Avoidability</td>
<td>.52</td>
<td>2.55</td>
<td>3.65</td>
</tr>
<tr>
<td>Affect **</td>
<td>.25</td>
<td>48.66</td>
<td>52.56</td>
</tr>
</tbody>
</table>

Hotelling's $T^2$: $F = 2.435$, $p = .039$

Discriminant function: Chi-squared = 14.36, $p = .045$

* Group 1: subjects who did not return to their abusive situations

* Group 2: subjects who did return to their abusive situations

** Composite scores
duration of violence, avoidability, times previously left, blame, and affect. The weighting coefficients represent the relative contribution of the associated variables to the discriminant function, and as is clear in Table VII, both length of relationship and contingency were associated with weights of negligible importance. Thus in addition to duration of violence and avoidability which have been discussed in relation to outcome, the fewer times a woman had previously left her partner, the less likely was she to return; women who blamed their partners were more likely to return; and the worse a woman felt emotionally, the greater the likelihood was that she would return.

Results: Open-ended Responses

The objective of this section of results is to present a more detailed profile of the battered women who participated in this research, based on their responses to open-ended questions and their comments about their abusive relationships. Case histories of two of the women interviewed are presented in Appendix D, in order to provide the reader with a more coherent account of subjects' abusive relationships, as recounted by them. These women were selected on the basis of the amount of information elicited from them. They are not necessarily representative of the 50 women interviewed. In this section, a discussion follows of subjects' responses to questions regarding their abuse, their reactions to it, and elaborations on previously discussed issues such as self-blame and perceived contingency. It should be noted that not all women commented
freely on every question posed to them. Many, however, elaborated on their responses to the structured interview items and some of their remarks are quoted in this section to provide a more detailed illustration of at least some women's explanations for their abuse.

**Background Information**

Forty-eight women responded to questions about violence in their family or their partner's family of origin. This item was meant to refer not only to spouse abuse, but also to parental abuse of children. Twenty-eight women responded affirmatively with regard to their partners' families, while eight said there was none and 12 were not sure. With regard to their own families, 11 women reported that they came from violent homes, 33 did not, and four women responded that there may have been violence between their parents but they were not sure of it. Thus, according to subjects' reports, 58% of the abusive men, and 23% of abused women came from families characterized by some amount of violence.

With regard to questions posed about the men's level of education, 18 did not finish high school, 10 men finished high school but did not continue with further education, and 21 received additional training or attended college after Grade 12. Of these 21 men, seven received college degrees and four, graduate degrees. Fourteen of the couples had received the same amount of formal education, while in 16 couples the men had more formal training than the women, and 19 of the women interviewed had received more formal education than their partners. It is
interesting to note that neither level of education nor age of the women interviewed correlated significantly with any of the major variables of interest.

Of those 32 couples who were married, in 11 cases the abuse began before marriage, and 16 of the 18 women living with but not married to their partners were abused in the first year of the relationship.

Perceptions of Abuse

When asked to what extent they had perceived the abuse in their relationships as normal or expected, four-fifths of the women responded that they did not see it as normal at all, and most women described their partner's violence as unacceptable behavior. The ten women who reported that the abuse seemed slightly or fairly normal all commented that these views reflected attempts on the batterers' part to convince them that violence was to be expected in relationships: "You have to take the good with the bad," and "This is the way it's supposed to be--you've been spoiled." Comments by two women indicated that others in their environment had advised them that their men's abuse was normal and "you just have to learn to live with it."

Similarly, with the exception of three subjects, the women interviewed did not perceive the abuse as justified. Fourteen women commented that anger and verbal spats were to be expected, but that physical violence on the part of either spouse was unjustifiable. Fourteen women said that they had been led to believe at first that the violence directed at them might have been justified, but when eventually they came to the realization
they were doing nothing wrong, they ceased to believe this. 

Subjects were also asked to what extent they blamed themselves after the first violent incident. One-half responded that they had never found fault with themselves, and the responses of thirteen others indicated that their partners had them convinced for some period of time that they were to blame and deserved to be abused. One woman said she blamed herself for seven years, but now not at all, and another commented that her partner convinced her that he beat her "because he cared."

**Alcohol and Drugs**

The role of alcohol and drugs in contributing to batterers' abusive tendencies seems somewhat ambiguous based on the current data. While 11 women reported that alcohol and/or drugs (e.g., marijuana, cocaine) were always a contributing factor to their men's violence, 15 women responded that their partners were always sober when violent.

**Characteristics of the Abuse**

For thirty of the women interviewed, incidents of physical abuse occurred more frequently than once per month. At least ten incidents of violence over the duration of their relationships were reported by more than half of the women, and several found it impossible to estimate single instances of abuse but believed there may have been well over 100 separate episodes. Using the Straus Conflict Tactics Scale to categorize levels of violence reported, only two of the 48 women who responded reported acts of violence that did not constitute "acts which carry with them a high risk of serious physical injury to the victim" (Straus,
Thus, 46 women reported that they had been at least kicked or hit with a fist. Often their partners hit them with whatever came to hand at the moment, for instance a telephone, belt, crutch, wrench, hammer and meatboard were mentioned. Many had been kicked or choked, and one woman was paralyzed for five hours after her husband choked her. Three women reported they had been pushed down or kicked when pregnant. (One of the most distressing cases was a woman who had been severely kicked by her husband when pregnant and subsequently gave birth to a child with a severely damaged liver. The child was in the shelter with her mother but did not have long to live.) Twelve women had been threatened with guns or knives; one when her child was in her lap, and another woman reported being forced to bed with her husband holding a loaded pistol to her head. Three women sustained knife wounds. The injuries reported varied from bruises and lacerations to broken bones. Twenty-seven women received medical care for their injuries, and 13 of those who did not go for treatment said that they were either too scared to go, or "were not allowed" to seek medical aid.

When asked if they had ever been the first to use violence, 37 women responded that they had never done so, and most of those who answered affirmatively said that such an occasion was rare. While the majority of women had attempted to defend themselves by fighting back at least once, thirteen responded that this only made their partners more violent. General reactions seemed to be attempts to placate the men, or to take
the abuse as quietly as possible in the hope that it would soon 
be over.

Support and Communication

Few of these relationships appeared to be ones that 
permitted open verbal communication between partners. Only nine 
women stated that they felt free to talk openly with their men 
about the violence. Thirty-four women responded that they could 
ever, or only rarely, voice the subject to their partners. When 
asked to what degree they could confide in others, 18 women 
stated that they could discuss their problems not at all, or at 
the least a very little, with other people, including family and 
close friends. This is perhaps not surprising in view of the 
fact that 34 women felt their men actively discouraged them from 
spending time with friends and family, often to a point where 
women were not permitted to see people or talk on the phone. 
Five respondents stated that they did not associate with their 
friends for their own protection. Two women reported being 
locked into the house during the day, and one woman was taken 
daily to her husband's place of work so that he could keep an 
eye on her. Four women mentioned that others, especially the 
partner's family, refused to believe the reported abuse. When 
describing the reaction of their own families, two women were 
told in so many words that they had made their bed, now sleep in 
it.

Although three-fifths of the women interviewed had never 
sought counseling or therapy, in sixteen of these cases subjects 
reported that they had entertained the idea, for either
themselves, their partners, or both, but either the men rejected the idea or made promises on which they never followed through.

Why had They Returned?

To outsiders, one of the most perplexing issues with regard to domestic violence is why abused women remain in their relationships. A similar question was posed to those women in this study who had previously left their men: why did they go back? Of those responses given, the most frequent was that their men had promised to change. Also common were feelings of guilt on the part of the women, generally for taking the children away from their father. The fact that some women had no place to go, or felt that they were taking advantage of others' hospitality, often led them back to their partners. Several explained that they were worn out, had no support from their families, or were pregnant.

Blame and Contingency

In addition to perceptions of contingency, four questions were asked of subjects to assess different foci of blame: partner-blame, self-blame, self-blame for specific instances of violence, and blame to other factors. While virtually no one felt the need to elaborate why they blamed their spouses, many women commented on their responses to the other attribution items.

General self-blame. Probably the most salient characteristic of responses to this question was the variety of explanations it elicited from subjects, which in turn indicated in retrospect the need for more precise questions regarding
attributions of blame. Four subjects found fault with themselves for putting up with the abuse. Other explanations varied in the degree to which women actually felt responsible for causing the violence. Three women indicated that they did not know how to deal with their partners' problems, and stated that if they had understood their spouses better, perhaps they would not have been abused. One woman said that "it took two" and another felt that she had done things to provoke her husband, but nevertheless did not condone his use of violence. Other individual responses included violence on the part of the woman, "nagging," and specific circumstances which seemed to imply to the woman sufficient cause for an abusive reaction on the part of the man. For example, one woman said that her partner's violence stemmed from anger regarding "her past," and another explained that her husband was often abusive because her child was not his.

Blame for specific instances of violence. The most common explanation given in response to this question by ten women was one which indicated that the woman felt she was too outspoken, and her partner would react violently to specific things she said, for example, "If I had learned to shut up ..." or "my expressions got him mad." Three women indicated in so many words that if they had "abided by his rules" there would have been less violence. Other responses were more specific, such as one woman's comment that "I never cooked his eggs right or cleaned the house the way he wanted."

Other Blame. By far the most frequent response when asked
what other factors might account for their partners' violence was references by 21 subjects to the men's upbringing. In some instances this explanation referred to the partner's traditional view of sex roles, and three women answered that their men were insecure and distrustful, possibly as a result of the way in which they were brought up. At least six subjects believed that their partners' violence stemmed from problems and stress associated with their work, and four women believed that a major contributing factor to their man's violent tendencies was his experiences in Vietnam.

Perceived contingency. Explanations offered by 14 women who perceived some relationship between aspects of themselves and the abuse referred to their independent or outspoken natures. An explanation from one woman was "he wanted me to stay the way I was when we first got married, and I wanted to go back to school and get a job," and from another, "he couldn't understand why I wanted to do things for myself." Related comments by four women indicated that their men wanted them to be different sorts of people than they were. Other explanations included one woman's comment that she did not give her husband the attention he wanted, and another's response that she was stubborn.

One salient feature of many of these explanations concerned the way in which the traits to which the women referred were evaluated by them. The majority of women who had noticed a relationship between some aspect of themselves and the abuse appeared to evaluate the trait or behavior referred to in a positive light. As mentioned, a number of subjects attributed
their partner's abuse to their independent or outspoken nature. In addition to the comments noted above was a remark from one subject that her independence challenged her partner's security. Another woman said that her partner resented the fact that she always spoke her mind. Other examples of explanations that appeared to reflect positively evaluated characteristics referred to the woman's friendliness, an unwillingness to be dominated, and a comment from one subject that she was verbally "faster" than her partner.²

Perceived Causes of Partners' Violence

Three categories of causes encompassed the majority of responses to the item "What do you think causes your partner to abuse you?" The first included references by 11 women to the man's insecurity, jealousy and possessiveness; the second category involved explanations by six women that pointed to "macho" characteristics of the men, and to the view that they had to prove their manhood through violent means; and third, five women gave responses that referred to their partners' anger with themselves and others. This third category included explanations such as fear of failure, self-loathing, and an inability on the part of many men to deal with their emotions. In addition to the above, other explanations offered emphasized stress, upbringing, and alcohol.

Subjects were also asked whether they had any views on what causes domestic violence in general, but for the most part these responses did not differ from causes cited for their own abuse, or women simply stated that they did not know.
DISCUSSION

The predicted relationships among the major variables of interest in this investigation were partially upheld, but in addition to testing specific hypotheses, a major objective of this study was to determine the extent to which existing social psychological theory and research on reactions to negative life events could account for the experiences of victims of domestic violence. To this end, the present research effort has provided several informative findings that have implications for research in the field of attribution, as well as for researchers and practitioners in the area of domestic abuse.

Two general findings appear particularly interesting. The first concerns predictors of coping, and the second, the relationship between subjects' attributions for negative life events and their affective reactions to these events. Both will be discussed in detail below. In addition, the results pertaining to the avoidability and outcome variables will be discussed, as will the nature of the concept "coping." Finally, implications of the current findings for research in attribution and domestic violence will be reviewed.

Predictors of Coping

The general prediction that both attributions and affect would relate to the coping capabilities of battered women was supported, but the specific hypothesis that self-blame in victims of domestic abuse would be associated with effective coping was not borne out. In fact, no relationship emerged
between victims' attributions of blame and their ability to cope. However, it was not the case that causal attributions per se assumed no importance in understanding how battered women deal with their situation. Subjects' perceptions of the degree of "contingency" between aspects of themselves (specific actions or personal characteristics) and the abusive behavior of their partners was related to effective coping on the part of abused women in this study. In the following discussion an attempt will be made to characterize in more detail the nature of this relationship, drawing in part from comments made by subjects during their interviews.

Contingency

Evaluation. An important point to be made in understanding the nature of the contingency variable in the current sample and the association between contingency and coping is the finding that, for the most part, the trait or behavior to which these women attributed the violence was evaluated by them in a positive light, or was something about themselves that they did not want to change. For instance, a number of subjects reported that they felt their independence, or tendency to be outspoken, was related to the abusive behavior of their partners. Previous research with men and women in abusive relationships has indicated that both partners often adhere to traditional sex role stereotypes. Here it seemed to be the case that these women did not want to or could not comfortably fit into the roles demanded of them. This suggestion is supported by comments such as, "He wants me to do all the 'wife' things, to be
traditional"; "He doesn't want me to do anything for myself, to
go to school or get a job." Women who were quick to acknowledge
that a characteristic such as independence on their part was not
appreciated by their partners and may well have provoked violent
behavior also gave the impression that this was a quality in
themselves that they were unwilling to change.

The notion of a "person" or internal attribution being
evaluated in either a positive or negative light appears to be a
novel dimension in theory and research on attributions. While
the outcome of an event (e.g., win or lose) has been evaluated
for its importance to the individual (Abramson et al., 1978),
similar questions have not been asked of the attributions
subjects make concerning personal characteristics. A personal
attribution for a negative event has been assumed, it would
appear, to connote negative self-evaluations. In the context of
the current research, however, attributing a negative event to a
characteristic such as friendliness or intelligence, about which
one feels positively, appears to have positive ramifications in
that it is associated with effective coping.

This interpretation may in fact shed some light on the
Bulman and Wortman (1977) findings with regard to self-blame in
victims of "freak" accidents. These researchers suggested that
effective copers were often those individuals who were engaged
in freely chosen leisure activities when an accident occurred,
such as hang-gliding or diving. Perhaps the self-blame reported
by these people reflected a belief that their "adventurousness"
put them at risk for a potential misfortune. That is, they could
adjust more readily to their fates, knowing that they had willingly engaged in a potentially dangerous activity, and further, that their adventurousness was a quality they viewed in a positive light.

Multiple observations. One reason why the concept of contingency emerged in this research was that attributions were being made for events that were witnessed time and again. The long-term, recurrent nature of abuse in violent relationships is in fact what sets battered women apart from most other victims. Essentially, these women were aware of a covariation between their behavior and the abuse over a period of time. From this perspective, attribution-making within abusive relationships can be understood within the framework of Kelley's (1967; 1971) theory of attributions for multiple observations. Kelley argues that people act like statisticians when searching for the causes of events, in that they take note of those factors in their environments which tend to covary over time. The cause of a specific event will generally be found among the conditions that vary as the event occurs. It may be the case that for victims of traumatic events such as accidents or rape ("single observations"), the notion of contingency between self and other would be more difficult to detect.

Behavioral-Characterological blame. It was the recurrent nature of the women's victimization that illuminated the inadequacy of the behavioral-characterological self-blame distinction (Janoff-Bulman, 1979) for this sample of subjects. It will be recalled that behavioral blame refers to specific
behavioral acts that led to a negative event, while characterological blame involves the identification of an enduring personal quality that engendered the outcome. This distinction becomes blurred when one shifts from acute to chronic events. To blame repeated acts of victimization on one's recurrent behavior would seem to be conceptually indistinguishable from blaming one's character or disposition. It is not surprising that the initial research supporting this distinction was based on attributions made for single, imagined events. Just as single observations are less likely to provide data for the perception of contingency, so too would they be more likely to facilitate distinctions between specific behaviors and personality traits. Recent research by Peterson et al. (1981) lends support to the suggestion that this distinction becomes blurred with the passage of time. The more stressful life events reported by subjects on a life events questionnaire, the more subjects blamed their characters or dispositions for the outcomes of negative events. What remains constant over the years is one's character, and hence character is inferred to be the cause of events.

It has been argued that behavioral blame facilitates a sense of control and hence adjustment, while characterological blame leads to feelings of helplessness and depression (Janoff-Bulman, 1979; Peterson et al., 1981). In the current research, not only was it difficult conceptually and empirically to separate these attributions, but in addition, attributions made to aspects of one's character were more complex than initially
envisioned. As discussed above, the evaluation of a given trait as either positive or negative may influence one's adjustment. Further, some women cited dispositional qualities that characterized themselves in the present, while others cited traits that they believed no longer characterized themselves. For example, women who described themselves as independent were referring to a trait that currently applied, while some subjects attributed their victimization to their youth or naivety, traits that they believed they no longer possessed. Blaming dispositional qualities, even undesirable ones, may not lead to depression or helplessness if these qualities are no longer seen to characterize the self. In fact, blaming one's former qualities might even facilitate the adjustment process since this type of blame would have the advantage of both explaining the past and inspiring optimism for the future. It is interesting in this connection that the descriptions of dispositional causes cited by the depressed subjects of Peterson et al. (1981) were almost invariably phrased in the present tense.

Contingency versus blame. It was clear from the responses of the battered women interviewed that the acknowledgement of a relationship between aspects of themselves and the abuse they suffered did not constitute an admission of blame, at least to the extent that blame connotes moral responsibility. They did not feel that the abuse was justified; on the contrary they saw it as unacceptable behavior. The importance of the distinction between perceived contingency and blame is further supported by
the absence of a relationship between the measure of contingency and blame attributions.

There is a tendency among attribution theorists to equate the concepts of blame, responsibility, and causality. Recently, however, Harvey and Rule (1978) have contended that there are important distinctions between moral evaluation and attributions of responsibility. They point out that causal responsibility for an outcome is assigned to an individual because he or she has taken some action that results in a particular outcome, whereas moral evaluation refers to the deservingness of blame or credit for the outcome. A similar argument is presented by Fincham and Jaspers (1980). And in a study investigating attributions made to rape victims, Krulewitz and Nash (1979) also distinguish between blame and fault on the one hand, and responsibility on the other. The former, they argue, are concepts that imply moral wrongdoing, and the latter seems to imply causal involvement.

The aforementioned critiques refer to research concerned with attributions of responsibility and blame made to others, but to date it appears that no one has applied such distinctions to self-attributions and in particular to literature dealing with self-blame. But unless these concepts are clearly defined and distinguished for subjects, the meaning of their responses to "blame" questions may be somewhat ambiguous. An individual who responds affirmatively to a self-blame question may be taking causal but not moral responsibility, or both causal and moral responsibility. It may well be that much of the victim self-blame reported in the literature is not so much blame or
moral evaluation as it is a perception of causal responsibility. For instance, while a rape victim may indicate that she feels she is to blame because she walked home alone, this may simply imply that the outcome in large part resulted from her action, not that she perceived herself to be morally at fault for her victimization. Too liberal a use of the word "blame" by professionals and laymen alike may contribute to a distorted understanding of individuals' perceived causal role in their victimization.

**Cause versus occasion.** A somewhat different distinction with regard to causal role than those described above that may in fact be quite relevant to the current research with battered women has been proposed by the legal philosophers, Hart and Honore (1959). They contend that in some instances, one can distinguish between the cause of an event and the occasion within which a cause operates. As an illustration of this distinction, consider a victim of theft. If one were to leave the ignition keys in one's car, this could provide the occasion for theft, but does not constitute the principal cause of a burglar's actions. In the present study, those women who saw a contingency between themselves and their partners' abuse appeared to be suggesting that their independence or outspoken nature provided the occasion for the abusive behavior of their partner but not the cause. The cause lay within the abuser, but the abuse manifested itself as a result of some characteristic way in which the women behaved. Being the occasion for the violence, rather than the cause, would generally not make one
feel accountable for the abuse.

**Relationship between contingency and coping.** A common argument that has been offered to explain the relationship between self-blame for negative outcomes and effective coping is a need on the part of victims to perceive that they can control their fate. Blaming oneself is believed to promote a sense of control if the causal factors are perceived to be modifiable. Similarly, the ability to perceive an orderly relationship between one's behaviors and one's outcomes is said to facilitate coping in that people prefer not to think that negative events occur randomly (e.g., Wortman, 1976). It has also been suggested that the need for meaning may lead individuals to blame themselves for their misfortunes (Bulman & Wortman, 1977). In particular, this motive may surface when individuals are faced with truly uncontrollable outcomes such as permanent paralysis or terminal illness, for which future control is irrelevant.

The current finding that abused women coped better if they perceived a contingency between some aspect of themselves and their partners' abuse would seem to be consistent with a control interpretation, particularly if one adopts the view that these individuals saw themselves as the occasion, rather than the cause, of the violence. In fact, this relationship may be somewhat more straightforward than an interpretation of self-blame as a control response. In light of the maladaptive connotations associated with self-blame, it has appeared counterintuitive to suggest that blaming oneself for negative outcomes can have positive ramifications. In the case of
battered women, the identification of a personal characteristic that occasioned the abuse, but did not leave them feeling morally accountable for the abuse, could provide them with a sense of meaning and order, as well as with the perception that they could control the abuse if they acted differently. Furthermore, to interpret their abuse in this manner should imply that a future relationship would not necessarily be an abusive one.

It also seems reasonable to suggest that the inability to perceive any logic or order to the violence, or the inability to see any aspect of one's behavior that might occasion the abuse, may well leave the victim with a sense of helplessness (e.g., Seligman, 1975). To be assaulted verbally and physically time and again, and yet be unable to ascertain why or under what circumstances the abuse is likely to occur would indeed appear to leave one feeling helpless, frustrated and afraid.

**Blame and coping.** While a concern for control may explain the relationship between perceived contingency and successful adjustment, why should blame not function in a similar manner? That is, why is contingency and not blame related to coping? One reason may relate to the need discussed above for more explicit definitions of blame, responsibility, and causality. A question such as "To what extent are you to blame ..." as used in the current investigation may be too imprecise to reasonably expect a relationship with coping to emerge.

Not only may the concept of blame be confused with less evaluative meanings associated with causal role but,
particularly in the context of domestic violence, blame for the abuse may be multidimensional. One can ask, for example, what are victims blaming themselves for? Open-ended responses from the women in this research suggested that abused women can blame themselves for causing the abuse, for their inability to modify their partners' abusive actions, or for tolerating the abuse and not leaving the relationship sooner than they did. Adjustment may well relate differentially to blame, depending on the type of blame involved. In fact, it may be the case that the type of blame a battered woman attributes to herself will prove to be more integral to an understanding of her psychological state than the degree of blame she takes for the violence. If a relationship between blame and coping does exist, it may have been masked in this research by the failure to differentiate among different dimensions of self-blame.

An alternative explanation for the absence of a relationship between blame and coping should be considered. Attribution theory is founded on the presumption that people attempt to explain events in their lives. While this assumption may hold true for most individuals in their day-to-day encounters, it may be the case that searching for causes of behavior, and particularly placement of blame in some circumstances, serves little purpose and therefore shows no relationship to other variables such as coping. Bulman and Wortman (1977) suggested that self-blame in accident victims seemed to be indicative of a need for an orderly and meaningful world. Women who have left an abusive relationship and are
living with their children in a temporary shelter have a number of high priority needs upon which to focus their concern. At least while in the shelter, the search for order and meaning in past events is probably far less important than making decisions that will impose some sense of order on the present. Whether or not placement of blame may eventually come to serve a need for order and meaning is discussed below.

Social psychological research on the link between a person's attitudes and his or her behavior may be relevant to this point. It has been argued (e.g., Fazio & Zanna, 1981) that only those attitudes which are salient to an individual may be reasonably related to his or her actions. Viewed from this perspective, women who have recently been the victims of domestic abuse and who are concerned for their own and their children's safety and security may not have time to reflect on the causes of their victimization, or at least, their causal attributions may not be particularly salient to them at this point. Victims of accidents such as those interviewed by Bulman and Wortman (1977) may on the other hand have an overabundance of time while hospitalized to reflect on such questions.

The ability to perceive a contingency between one's behavior and the abuse, on the other hand, may facilitate coping. Unlike blame, perceived contingency may be linked to a woman's self-concept, and therefore be more salient. A profile of such an individual might depict her as someone who thinks well of herself (evaluates her traits in a positive light) and describes her partner as one who was threatened by her, jealous,
or otherwise made to feel insecure by the type of person she was. Thus contingency seems much more closely linked to subjects' ways of viewing the world than does placement of blame.

**Distance from the victimization.** One interesting question is the extent to which blame changes over time and its concomitant association with variables such as adjustment. In contexts other than domestic violence, situational explanations for events were found to be more common the more the event receded in time (Miller & Porter, 1980). Bulman and Wortman (1977) also reported that victims of accidents saw their accidents as more "environmentally" caused the further in the past they were. The degree of blame individuals assign to self and other factors, and indeed the extent to which attributions for the event are made at all may well depend on the length of time since the victimization occurred.

There are a number of reasons why battered women's assessments of blame might change over time. Many subjects in the current investigation reported that they initially blamed themselves in their relationships until a point was reached wherein they truly believed they were doing nothing wrong. Often this perspective does not become salient until a woman has sought counselling or spent time in a shelter and found out just how common wife abuse is as well as some of the reasons for it. If she has become involved with another man who does not abuse her, the woman will have further evidence that it was not "her" who caused the violence. Further, once a woman has left an
abusive relationship, has relocated and feels somewhat secure financially and emotionally, she may be more motivated to seek an understanding of past events in her life.

Weiss (1975) reports that divorced individuals often spend what seems to outsiders as an inordinate amount of time analyzing the events in their marriages in order to understand and perhaps reach some sort of closure with regard to the past. As discussed above, battered women may be too preoccupied with more urgent concerns immediately following their departure from their abusive partner to engage in such analyses at that time. It would be particularly interesting to undertake an investigation of battered women that measured blame and its relationship to coping repeatedly from a point in time well before they left their relationships, until they had settled comfortably into a new lifestyle.

Affect

Perhaps the least surprising result to emerge from this research was the positive relationship between affect and coping. Women who reported themselves to be generally happy and free from symptoms of depression and other negatively toned emotions were rated by shelter counselors as good copers. It is possible either that depressed mood interferes with the women's ability to take constructive action to ameliorate their situation, or that the inability to cope can lead to negative affect and depressive symptoms. Of course, it is also possible that both forms of influence may occur.

What is perhaps more interesting is that affect does indeed
emerge as an important variable to be included in studies examining how people react and adjust to traumatic events in their lives. Where emotional reactions have been investigated in previous research, they often tend to be of low intensity, generated by laboratory events or hypothetical scenarios. In such contexts it is difficult to ascertain the extent to which affective reactions contribute to an understanding of an individual's behavioral adjustment, and the relationship between affect and attributional patterns. Theoretical models of domestic violence have been proposed (e.g., Frieze, 1979) that emphasize the causal importance of attributions in determining how battered women react to their abuse, but tend to neglect the potential contribution of the women's emotional state. Based on the results of this research, these models may be shortsighted. The current findings provide support for the suggestion that in some contexts, attributions of blame cannot be assumed to account for the major proportion of variance in individuals' responses to events in their lives.

Summary

To briefly summarize the above discussion, the best predictors of coping to emerge in this research were perceived contingency and affect. The notion of contingency as it emerged in this research should be distinguished from the concept of blame where blame carries with it a connotation of moral wrongdoing. A distinguishing characteristic of contingency responses of the battered women interviewed here was a tendency to evaluate in a positive light the personal disposition to
which these women attributed their partners' abusive behavior. Moreover, it was suggested that subjects' perceptions of contingency might best be understood to mean that they saw themselves as occasions for, rather than the cause of, their partners' violence. The relationship between contingency and coping fits well within a control motivation interpretation as the ability to identify some logical pattern in the abuse might enable women to control, or at least predict, their partners' violent outbursts. It was also proposed that the absence of a relationship between blame and effective coping might be due to the imprecise nature of the blame questions posed to subjects. An alternative explanation offered suggests that in some contexts, and depending on the temporal distance from the victimization, placement of blame may serve little purpose in facilitating coping with one's fate. The ability to perceive a contingency between oneself and the abuser's behavior, on the other hand, seemed more closely tied than did blame to the women's concept of self. In their self-descriptions many women appeared to have a stable and coherent view of themselves that enabled them to understand more fully not only themselves, but also the dynamics of their relationship.

The finding that affect also predicts the coping capabilities of battered women provides support for the view that emotional reactions are important for an understanding of how people respond to negative events. While it came as no surprise that positive emotions were associated with good coping, in that depression is characteristically associated with
impaired motivational and behavioral performance (e.g., Abramson & Martin, 1981), this finding is nevertheless interesting. It provides new evidence for the role played by affective reactions in interrelationship with attributional patterns, as well as behavioral adjustment in natural settings.

**The Relationship between Affect and Attributions**

Particularly in view of the strong support that the relationship between attributions and affect has received in other psychological research, the absence in general of such a correlation here is noteworthy. In research reviewed above, internal attributions for negative outcomes have been found to be associated with depression (e.g., Abramson & Martin, 1981) and attributions for both success and failure experiences have been linked with specific affective reactions. However, in the current investigation, subjects' composite affect scores were related to neither blame attributions nor perceived contingency. As the Beck Depression Inventory (BDI) has been used extensively in studies linking attributions with depression, it seemed particularly surprising that no relationship emerged here between women's scores on the BDI, which represented a full range of depressive symptoms, and their explanations for the violence.

A discussion of these findings will focus on two general, related questions: (1) what characteristics of the current sample and the traumatic event with which they were dealing might provide an explanation for these results, and (2) on what
dimensions does the present research differ from previous studies that could shed light on these findings?

Victims of Domestic Violence

The degree of relationship between an individual's explanation for and emotional reaction to an event may well depend to a large extent on the event itself. In the literature to date, little systematic attention has been given to differences among negative events.

Many things may make an event a negative experience. The event, for instance, may threaten some personal need of the individual, such as the need for effective control or the need for high self-esteem. Indeed for many negative events, especially hypothetical events or those created in the laboratory, threats to psychological motives or needs may constitute the major determinant of any negative affect that is aroused. Furthermore, since the degree of threat that a negative event poses to a person's self-esteem or need for control has been found to be influenced by the person's explanations of the event (e.g., Miller & Porter, in press; Wortman, 1976) it is not surprising to find that causal attributions and affective experiences are significantly related in such contexts.

Other events, however, give rise to negative consequences that go far beyond threats to psychological motives. Sources of negative affect can stem, for example, from fear for one's physical well-being, fear of public shame, or distress over how one is going to cope with an uncertain future. In situations that produce a diversity of negative consequences, and
associated negative affect, it seems questionable whether causal attributions and experienced affect will be correlated.

Consider a woman who has left her abusive husband and taken her children to a shelter where she fears her husband will discover her and who despairs of finding a job to support herself and her family. Because her emotional state will be influenced by a number of urgent concerns, it does not seem likely that this woman's attributional analysis of her victimization will be a major determinant of her affective state. This speculation could be readily extended to other contexts. For instance, a victim of an accident resulting in permanent paralysis probably suffers tremendous grief and is overwhelmed with concerns about his or her ability to cope with paralysis. In their study of accident victims, Bulman and Wortman (1977) reported no correlations between attributions and reported happiness. An intriguing study would be one in which the importance of blame and responsibility attributions was assessed in relation to severity of fate. How badly you feel about doing poorly on an exam may be greatly affected by how you explain your performance but it is unlikely that your reaction to the death of your child from cancer will be as strongly influenced by your causal analysis of the child's death.

In short, what is being argued here is that causal analyses of traumatic events may not account for a large proportion of the variance in victims' emotional reactions to those events, especially when the event carries with it a variety of unfortunate consequences. The point made above about temporal
distance from the event is also relevant here. The consequences of negative events can change or diminish in importance over time and thus the relationship between causal explanations and affective or adjustment measures might be expected to vary, depending upon when the measures were collected.

Comparisons with Prior Research

Evidence for an attribution-affect link has come primarily from laboratory studies or classroom questionnaires investigating students' emotional reactions to exam outcomes (Weiner et al., 1979) and the attributional patterns of depressed versus nondepressed students (Abramson et al., 1979). Researchers in both of these areas claim that their results can be generalized to contexts outside the laboratory, involving other populations and different events. There appear to be two dimensions on which the current study differs from previous investigations, and these differences cast doubt on, or at least qualify, this assumption of generality.

The first point is that the negative event upon which the present study has focused differs in important respects from laboratory outcomes, and as outlined above, the extent to which affective reactions are linked to causal explanations may depend to a large degree on the nature of the event itself. Methodologies typical of prior investigations where affect and attributions are linked require subjects to react to hypothetical outcomes such as exam failure, or an unpleasant personal interaction. In contrast to the situation faced by abused women, most of these imagined events would not appear to
have a variety of profound consequences. While causal explanations for these events may be associated with affect, to generalize to more traumatic contexts is questionable. In the latter case, a range and intensity of variables exists that for the most part cannot be examined in laboratory situations and which may contribute far more to the variance in emotional reaction than do causal explanations.

Second, the causal factors to which people attribute events may differ in degree of complexity, and this may influence the extent to which affective reactions are found to relate to attributions. Earlier it was pointed out that a battered woman who attributes the cause of her victimization to herself may have in mind one of several alternative causal factors: a negative characteristic within herself, her inability to modify her partner's behavior, or her tolerance of the abuse. In contrast, the relative simplicity of situations used in laboratory studies of negative outcomes makes the question of blame assignment a much easier task. Attributions may in fact be associated with emotional states if the causal factors to which one attributes an outcome are relatively specific. Thus the relationship between causal attributions and affect reported in laboratory research may derive from the fact that subjects were asked to search for causes for unidimensional events.

This proposal might facilitate an understanding of the significant negative relationship found in the current research between partner blame and subjects' ratings of positive emotional mood. In contrast to questions of self-blame posed to
battered women, attributions of blame to one's partner appeared to be more straightforward and unidimensional. If finer distinctions in self-blame had been utilized in the present study, attributions of blame might in fact have been found to correlate with affective state.

**Partner Blame**

Apart from methodological considerations, the correlation between partner blame and affect is interesting as it provides some corroboration for previous research findings. In the current study, women who blamed their partners did not describe themselves as calm, happy and optimistic. Similarly, Newman and Langer (1981) reported that divorced women who attributed the cause of their marital breakup to personal characteristics of their spouses were in general more unhappy, less optimistic and less socially active than those who made attributions to interactive causes such as problems in communication. Further, research by Madden and Bulman (1982) found that women who blamed marital conflict on their husbands were not satisfied with their marriages. In their study of accident victims, Bulman and Wortman (1977) reported that individuals who blamed an "adversary other" for their fate were not rated as coping well with their victimization. The current findings thus appear to lend additional support to the view that blaming another for one's misfortune is not particularly adaptive.
Summary

The relationship between affect and attributions was discussed in some detail because the current research did not corroborate the findings of previous investigations. In focusing on the nature of the negative event under investigation, it was contended that the degree to which there are a diversity of unfortunate consequences associated with it might serve to mitigate the relationship between explanations for, and emotional reactions to the event. An individual's reaction to an exam failure may be closely tied to his or her explanation for the outcome. However, emotional state is likely to be multiply determined for victims of more serious misfortune, and the variance in affect is unlikely to be largely accounted for by attributions of blame or contingency. This explanation also serves to underscore the difference between the current research and those laboratory and classroom studies that have reported a consistent relationship between attributions and affect. The hypothetical negative events to which subjects have responded in prior research appear qualitatively distinct from traumatic outcomes in natural settings, and generalizations stemming from such laboratory work should be made cautiously.

Alternatively, the absence of an attribution-affect link may have resulted from the imprecise nature of the blame measurements utilized in the current study, support for which was revealed by a correlation between affect and blaming one's partner, a less ambiguous attribution question than self-blame. Partner blame was then discussed in light of similar findings.
Avoidability and Outcome

While seeing one's victimization as "unavoidable" was not related to effective coping as it was in the Bulman and Wortman (1977) research, the concept of avoidability may nevertheless be an important one in understanding some of the dynamics of domestic violence. One interesting result to emerge here was the finding that those women who perceived a contingency between aspects of themselves and their partners' abuse also perceived their victimization as unavoidable. (On a scale of one to five, the question was "To what extent do you see the violence as having been avoidable, if you, your partner, or circumstances had changed or been different?") The foregoing discussion of contingency provides some insight into the nature of this relationship. It was pointed out that women who perceived a relationship between themselves and their abuse often described the personal characteristic to which they attributed the violence in a positive manner, or believed it to be a dimension of their personality with which they were comfortable and not likely to change for someone else. In this regard, it is not surprising that they viewed their fate as not easily avoidable. Comments from the women such as, "I couldn't be a different person for him" support this reasoning. Although not directly related to coping, the perception of one's fate as unavoidable seemed to carry with it positive connotations.

Perceiving one's lot as avoidable or unavoidable raises some interesting questions with regard to how we come to understand past events in our lives. In responding to the
question of avoidability in this research, subjects were asked to consider whether a change in themselves, their partners, or their circumstances could have influenced the extent to which they were victimized. The impression one received from women's responses was that the interaction among contributing factors was too complex to expect a radically different resolution of the situation. Those women who believed that they themselves could not have changed also often implied, or specifically stated, that it was their own personality in interaction with their partner's which contributed to the state of conflict and which, at least in retrospect, left them convinced that nothing could have been done to alter the situation.

Similarities exist between this view of unavoidability and the attributions of divorced women reported by Newman and Langer (1981), discussed above. Women who made interactive attributions for their divorces scored more positively on measures of contentedness and self-esteem than did those who attributed their divorces to their partners. Interactive attributions referred to explanations pointing to features of the couple itself, such as problems in communication and general incompatibility. While Newman and Langer argue that interactive attributions enable people to assess more realistically the reasons for a failed marriage, an alternative interpretation is that such explanations provide people with a sense that it was not within their power to alter the situation or the outcome. Instead of spending useless energy attempting to undo the past, one may be better off in assuming that it could not have been
otherwise (e.g., see Kahneman et al., 1982). An intriguing question concerns the extent to which our understanding of events changes over time, and whether we come to see things as more unavoidable or inevitable the more the event recedes into the past. This raises issues of relevance to counselors: should attempts be made to encourage a particular perspective of events, or do people need to work through different stages of understanding at their own pace?

The finding that avoidability was also related to whether or not the battered women in this study returned to their abusive partners lends credence to the view that seeing one's situation as unavoidable may serve a positive function. The more avoidable the women perceived their victimization to be, the more likely were they to return to their partners. One obvious interpretation of this finding is that those women who were optimistic that steps could be taken to ameliorate their situation were willing to give their relationship another chance. And following from the above discussion, women who sensed that nothing could have been done to alter their situation were unlikely to subject themselves again to the same fate, and wished to put the past behind them.

An alternative interpretation of this finding is that women who did not want to terminate their relationships wished to see their situations as avoidable so that at least in their own minds it did not seem foolish to return to their partners. In this regard, it was interesting that women's answers to the question, "How sure are you that you will or will not return"
did not correlate with their outcomes. With the exception of one individual, those women who felt relatively sure of their future plans indicated that they would not return. Perhaps an acknowledgement that they wished to return seemed inappropriate given the lengths to which they had gone to leave their partners, and the juxtaposition of this sentiment with the facts of their abuse as they recounted them in the interview. By contrast, the avoidability question was somewhat more subtle, and thereby elicited a more veridical statement of their intentions.

Women were also less likely to return to their partners, the longer had been the duration of abuse. This finding does not seem altogether surprising in that many women probably came to realize over time that their situation was not going to change, whereas victims of short-term abuse may still hold out hope that the violence in their relationship is not permanent. Long-term abusive relationships would also provide an opportunity to change one's understanding and interpretation of one's victimization, to see it perhaps as more unavoidable, and to perceive differently one's own and one's partner's roles in the violence.

Additional variables found to distinguish the group of women who returned from those who did not included the number of times a woman had previously left, partner-blame, and negative affect. The more times a woman had left her partner, the more likely she was to return. As leavetakings and subsequent returns become more frequent, they are also likely to be perceived as a
less extreme action by the woman, and a commitment not to return would become increasingly weak.

The tendency to blame one's partner, and negative affect also characterized women who returned to their situation. A recurring theme throughout this discussion has focused on the possibility that victimized individuals may alter their attributional patterns as time goes by. Perhaps the battered women who blamed their partners would subsequently come to interpret their victimization from a different perspective, to view it as unavoidable, or due to complex interactive or situational factors. The finding that the women who returned were also characterized by negative affect could be interpreted to mean that although they were not happy with their decision to return, they were not yet ready to separate themselves permanently from their partners. One can speculate that blaming another for one's misfortunes may be associated with feelings of anger and resentment, and finding fault with oneself leaves one with feelings of guilt. Attributing negative experiences arising from interpersonal relationships to interactive factors, however, may free individuals from both anger and guilt, and from dwelling on the past. This analysis points to a need in future research to focus on the interrelationship of attributions and affect over time in victims of negative events.

Coping: Definitions and Measurement

Theorists and researchers from a variety of disciplines have devoted considerable attention to coping processes among
individuals under stress, but as a result of the interdisciplinary nature of this topic, it is difficult to locate consistent definitions of effective coping, as well as consistent approaches to the measurement of this variable. The present investigation is not unique in this regard, and the issues of definition and measurement as they apply to this thesis should be briefly discussed.

The conceptual problems in defining successful adjustment have recently been discussed by Silver and Wortman (1980). One point that they address which is particularly relevant here is that the decision of what comprises good coping is often tied up with a question of values. Since the measure of coping used in the current study was designed in collaboration with shelter counselors, it may have reflected, at least in part, a particular philosophy concerning the question of what constitutes successful adjustment among battered women in a shelter. In particular, these counselors were in agreement that a woman who sought counseling with her partner was taking positive action to ameliorate the situation, and a woman was not thought to be coping poorly simply if she voiced the intention to return to her partner. In contrast, some shelters for battered women are unequivocal in their belief that women should not return to their partners, and a major purpose served by counseling strategies is to discourage women from this course of action. One implication of these discrepant philosophies is that indices of coping among battered women in shelters may vary. While a standard measure of coping to be used in all research
with battered women might resolve this problem, such a strategy may either alienate shelter staff who disagreed with the criteria in use, or force researchers to omit coping indices of potential importance.

Another issue discussed by Silver and Wortman concerns the stability over time of indices of successful adjustment. To fully understand the interrelationship of coping and variables such as affect and causal explanation, it has been suggested here that measures of these variables at different temporal distances from a person's victimization may prove enlightening. However, the criteria used to assess adjustment might change, making any comparisons obviously difficult. The problems faced by women in shelters may differ from those they would face months later, if they were living separately from their partners, and were employed and supporting their children.

With regard to issues of measurement, Folkman and Lazarus (1980) have identified several different approaches to the study of coping, one of which is the "situation-oriented" perspective. This approach best describes the one in current use, for what is measured is the way in which individuals cope with a specific situation. Folkman and Lazarus point out that a comprehensive description of coping is possible using this approach because the definition of coping is not limited to defensive processes or personality traits, which characterize the other major approaches to measurement discussed by the authors. However, they also argue that research findings from situation-oriented perspectives tend not to be generalizable to other contexts
because studies often identify coping strategies in unusual situations. This limitation has also been identified by Bulman and Wortman (1977) in stating that negative life events differ in the problems in adjustment that they pose for the victim. Clearly, battered women in shelters are faced with different concerns than are victims of spinal cord injury.

There is probably no simple or immediate resolution of these problems. For the time being at least, researchers in this area are aware of the complexities inherent in the study of coping, and attempts are being made to arrive at clearer conceptual definitions of successful adjustment, as well as to identify the most effective means of measuring this variable (e.g., see Aldwin et al., Note 3). More research that identifies common coping strategies used by battered women would be helpful to those studying domestic violence. As pointed out by the shelter staff who were consulted in this investigation, such coping assessments could also serve as an evaluation tool for those who work in shelters.

**Implications**

**Attribution Theory**

The current investigation has extended findings of research in the attribution tradition by providing several important insights into the interrelationship among attributions, affect and behavior in victims of negative life events. Of course, in studies that involve relatively small sample sizes from restricted contexts, replication is important before firm
conclusions can be drawn.

Causal search outside the laboratory. The present research has highlighted some of the difficulties associated with making generalizations from laboratory investigations of reactions to negative events to natural settings. One question of particular importance concerns the extent to which people's causal explanations of events can be assumed to influence their reactions to those events when the event is particularly severe and has associated with it a variety of consequences. It has been argued here that in some contexts the impact of victims' causal attributions on their emotional reactions and coping capabilities should not be assumed to be profound. In contrast, it has been strongly contended by researchers studying reactions to negative events in laboratory and classroom settings that causal attributions determine affective reactions. The results of the present research investigation suggest that such generalizations should be made with caution.

In future research, an attempt should be made to determine whether a systematic relationship exists between characteristics of negative events (such as perceived severity, associated consequences, and the salience of attributional questions) and the importance of causal explanations in accounting for people's reactions to these events.

Attributions of blame. A major impetus for the current study was the intriguing hypothesis that self-blame among victims is adaptive. Several important and novel insights with regard to blame have emerged in this study of battered women.
The first concerns the current finding that victims may acknowledge their role in their victimization without finding themselves at fault or to blame for their assailant's action. Future research on self-blame among victim populations should distinguish among the concepts of blame or moral evaluation and causal role. In addition, the notion that one can be the occasion for, rather than the cause of, a violent action should be a useful distinction in research with victims. We will be in a position to understand how individuals perceive their own roles in their victimization only when we give them the opportunity to explain clearly what they mean by the phrase "it's my fault."

The second issue also derives from the finding that people can recognize their causal role in an event but perceive themselves as blameless. What distinguishes those individuals who perceive their role in an event but do not blame themselves from those who recognize the contingency between their behavior and an event's outcome and do find fault with themselves? In other words, under what conditions do people blame themselves? An adequate analysis of this question is beyond the scope of this thesis, however it is worth noting here some preliminary speculation with regard to battered women.

It is reasonable to assume that an initial perception of contingency, or causal association between one's behavior and the outcome, should be necessary but not sufficient for an individual to blame him or herself for the outcome. Then, at least with regard to the blaming process in battered women, it
seems likely that an acknowledgment of blame will be highly determined by the individual's personal value judgments. For example, consider a woman who has been abused by her partner, and knows that there is a high probability of a violent response from him, given a particular behavior on her part. Blaming herself for the abuse would seem to depend on the woman's beliefs about the appropriateness of her own behavior, as well as that of her partner's. That is, a woman might find fault with herself if she felt that criticizing her partner violated a personal norm of acceptable behavior, and in addition, that a violent response from her partner was not an inappropriate reaction. On the other hand, if any level of violence was perceived as inappropriate to the woman, then regardless of her actions she may not hold herself to blame for the abuse.

One problem with many current analyses of the causes of domestic violence (e.g., Straus, 1978) is the relative lack of attention given by theorists to individual differences among assaultive couples that stem from factors associated with, for example, family and work environments (see, e.g., Dutton, in press). The brief analysis presented above suggests that the blaming process is probably also influenced by individual differences that exist among the values held by battered women. In fact, such differences may be an influential factor in whether or not a battered women ever leaves her abusive partner. Women whose values derive from a belief that a husband has the right to control his wife, and that a wife is a man's possession are probably less likely to leave their relationships than
others who view marriage as a partnership between equals. The fact that important differences may exist between abused women in shelters and those who have not left their partners is an issue that will be discussed further below.

A third point is that one needs to be aware of all the various sources of self-blame a negative event may permit. At least for battered women, the type of blame taken (e.g., causing versus tolerating the abuse) may be found to be a more important determinant of a person's reaction than is the degree of blame taken. A fourth issue concerns the current finding that distinctions between characterological and behavioral self-blame become blurred when one shifts from acute to chronic events. Further, within characterological attributions, dispositional factors can be evaluated as positive or negative. More attention should be given to trait evaluation in attribution research, and possible correlates with adjustment.

Changes over time. The fact that attributions for an event change with the passage of time has been documented elsewhere, and further support for this proposition was evidenced in comments made by the battered women interviewed here. What remains unclear is whether such changes follow any predictable pattern, for example from initial self-blame to partner-blame and eventually to a more situational or interactional perspective. The relationship over time between blame and affective or adjustment measures is also one which requires further research.

The role of affect. In the "real world," people generally
acknowledge that one's behavior is often in large part determined by emotional state. Few would probably disagree that the depression and despair of an abused woman might impede her ability to cope successfully. However, research designed to explore the relation between causal attributions and emotional reactions has often been based in the laboratory, and such investigations have precluded the study of intense emotional experience. The results of the current research should be replicated before any firm conclusions can be drawn about the relationship between affect and attributions. However, the present findings provide support for the argument that to understand the role of affect in people's reactions to negative events, and its interrelation with other variables, affect should also be explored among individuals who have suffered real misfortune rather than to generalize from laboratory experiments alone.

Domestic Violence

There are two general areas within which to explore the implications of the current study for research on and counselling for victims of domestic violence. The first addresses the points of similarity between the women interviewed here and descriptions in the literature of abused women. The second concerns differences that may exist between the present sample of battered women and others sharing the same fate, particularly those women who have not left their abusive relationships. Before proceeding, however, it should be emphasized that due to the paucity of systematic research with
battered women, it seems premature to advocate at this time the application of any one finding from the present study to counseling strategies for abused women.

**Similarities between current data and previous data on battered women.** In many respects, the information elicited from the 50 respondents in this study corroborated descriptions in the literature of battered women and their spouses. With regard to violence in their families of origin, as reported by the women interviewed, 58% of the abusive partners and 23% of the women came from families characterized by violence. These statistics closely replicate those reported in other studies of violent families. While family income was not directly assessed here, levels of education attained by both partners ranged from high school through graduate training, and attests to the fact that domestic violence is not unique to any one social economic group of individuals. Although alcohol and drugs were reported by a number of subjects to play a major role in their partners' abusive tendencies, their use cannot be assumed to explain incidents of domestic violence as the women in this sample were as often as not abused when their partners were sober. Subjects did not give the impression that they benefitted from, or enjoyed the abuse. Their reasons for remaining with their partners focused on concerns for their children, their partners' promises to change, and their lack of alternatives or places to go. Most women suffered from little support from families and friends, and their men generally discouraged them from communicating with or spending time with other people. Most men
were portrayed as possessive and jealous, and were often described as having "macho" mentalities. All of the above is congruent with descriptions of battered women and their partners in the existing literature on domestic violence.

There were several dimensions on which the women interviewed here appeared to deviate from the "classic profile" of a battered woman. While both partners in a violent relationship have been described as adherents of traditional sex-role stereotypes, many women in this sample appeared to shun the conventional roles expected of them. In addition, they did not see the abuse as normal or justified. While most women admitted that they generally felt helpless within their relationships, it is difficult to assess the veridicality of the learned helplessness phenomenon as it applies to this sample, since all of them eventually managed to take action and leave.

Self-blame has often been cited as a characteristic of battered women. What is not clear from the literature is whether the battered women who have been interviewed sense that they may contribute in some way to their victimization, but do not feel morally at fault. Unfortunately, the notion that women may perceive a contingency between aspects of themselves and their abusers' actions is probably a controversial point, and may seem counterproductive to those who are attempting to aid the cause of battered women. Historically, wife-abuse was assumed by many to be the fault of the woman either because she was thought to be masochistic or because she was believed to have provoked the abuser (e.g., Davidson, 1977; Martin, 1978). Researchers and
practitioners in the area of domestic violence are therefore concerned that victims of abuse, as well as the general public, do not assume through ignorance of the problem that the abuse is always the woman's fault. Women have no doubt been discouraged from taking the position that they in some way contributed to their abuse.

The current findings do suggest, however, that some women may be able to identify a positive characteristic within themselves which they perceive as in part responsible for, or as providing the occasion for, their partners' abuse. The ability to perceive this relationship appears to facilitate coping, in that it fosters a sense of control and predictability. More attention should be paid by researchers and practitioners alike to the variety of ways in which women can take responsibility for their victimization. It may do a disservice to some women to discourage this perspective if it does in fact serve a positive function.

A related finding from this research that may prove to be useful to counselors of victims is the distinction made between being the cause of versus the occasion for abuse. In fact, this distinction may prove to be particularly relevant to victims of rape. When rape victims say, "It's my fault," it seems likely that they are not blaming themselves for their assailant's actions, but rather they are blaming themselves for not having done more to avoid being the occasion for crime. The question, "Why me?" reflects the victims' efforts to understand why they were an occasion for an action that was caused by someone else.
Such an interpretation could clarify the tendency toward self-blame in rape victims, and provide a more focused response for counselors of these individuals.

The issue becomes more complex with battered women, in that they are often persuaded by their partners' assertions that were it not for their personal shortcomings, there would be no violence. The statement, "It's my fault," therefore seems to carry with it a greater variety of meanings for victims of wife assault than it does for victims of rape. The knowledge that her partner had abused other women, or had "a violent personality" would be likely to comfort the woman who blamed herself for her abuse, more so perhaps than would telling a rape victim that her assailant had a history of rape offenses. To the extent that a battered woman is inclined to find fault with herself, she would be comforted by any information that suggested that the cause of her partner's violence resided in him.

Finally, one issue that has emerged in this research that has received little, if any, attention in the literature on domestic violence is whether blaming one's partner is an adaptive strategy. There are too few data from this study to draw any firm conclusions in this regard. The data do suggest, however, that blaming one's partner may not have adaptive consequences, in that this tendency is associated with returning to an abusive situation and is not related to a sense of well-being on the woman's part. The issue is a complex one. On the one hand, it is suggested that an abused woman should search for the cause of the violence not within herself, but within her
partner; on the other hand, it is suggested that she may benefit psychologically if she does not blame him. Since a number of studies have demonstrated the negative consequences that may be associated with blaming another, strategies should perhaps be developed by counselors of battered women to deal effectively with this conflict.

Battered women: Those who have left versus those who have not. The responses and comments of the women interviewed here made it clear that their perceptions of and reactions to their situation had not remained stable over the course of their relationships. A number of women stated that had they been interviewed before they left their partners, their responses would have been quite different from those they gave after having left. One implication to be drawn from these comments is that important differences may exist between battered women who have left and those who have not. This is an important consideration with regard to the generalizability of results from this sample of women to other victims of domestic violence.

Several dimensions on which these groups of women might differ are worth noting. The first concerns the range and types of responses on the major variables of interest in this study: affect, attributions of blame, and coping. It is conceivable that battered women who have not left their partners would be, for example, more depressed than those who had managed to extricate themselves from their situations. Further, the extent to which they blamed their partners and themselves might be expected to differ. For instance, women who have not left may
blame themselves more than women who have left. Finally, if coping were to be measured among women still in their relationships, the criteria used to assess how effectively they were dealing with their situation would probably differ in a number of respects from the criteria used in this study.

It has been reported (Fine, 1979) that battered women tend to hold an exaggerated estimate of the commonness of domestic violence. This tendency was not in evidence among the women interviewed here, which may indicate that women who get out of their relationships do not view their abuse as normal. In addition, perceptions of the violence as avoidable might characterize women in abusive relationships more so than it does women who have left. And finally, the same personal dispositions that women who have left tend to evaluate positively, may be seen in a more negative light by those women who stay. For instance, women in abusive relationships who feel that they are outspoken by nature may feel that this contributes to the discord in their relationships, and may consequently feel guilty and stay.

The possible differences between abused women who stay and those who leave their relationship raise two important issues. The first concerns issues of generalizability, particularly for those interested in the interpersonal dynamics of domestic violence. It would seem important to recognize that the characteristics of those women studied, if measured after they have left, may differ in important ways from other battered women. Second, attempts should be made to explore whether these
differences reflect characteristics which do in fact change with time. If this were the case, this knowledge could be utilized by counselors of battered women still involved with their partners, to foster a change of perspective or to offer alternative ways of perceiving themselves, their partners, and the abusive relationship.
1. Before the data collection for this research was completed, an additional goal of the thesis included follow-up interviews with subjects one month after the initial interview. The major objective of this follow-up was to obtain longitudinal data that would permit an analysis of the causal relationship between attributions and affect, as well as an assessment of temporal shifts in attributions. However for reasons that in retrospect seemed very sensible, most women who did not return to their partners preferred not to have their whereabouts known, and those who returned wished no further contact with the interviewer. It was only with the help of the shelter counselors that it was possible to find out, for most women, whether or not they had returned to their previous situations.

2. An attempt was made to assess the reliability of these interpretations of subjects' responses to the contingency question. A blind rater evaluated the comments of 23 of the 28 subjects who indicated by scoring three or above on a 5-point scale that there was some relationship between themselves and their partner's abuse. (Five of the 28 subjects did not provide additional comments.) The rater was asked to indicate for each response whether it seemed to reflect a characteristic about which the woman felt positive, negative, or whether the response
was ambiguous. In addition, the rater was asked whether the responses could be categorized, and if so, how the general categories could be labeled. The correlation between the rater's assessments and the interviewer's assessments was .88. Further, the rater indicated two major categories of responses: independence, and "direct in expression of feelings and thoughts."
Reference Notes


References


Bulman, R.J. & Wortman, C.B. Attributions of blame and coping in


Gelles, R.J. No place to go: The social dynamics of marital violence. In M. Roy (Ed.), *Battered women: A*


Heider, F. The psychology of interpersonal relations. N.Y.: Wiley, 1958.


Waites, E.A. Female masochism and the enforced restriction of


Zuckerman, M. & Lubin, B. Manual for the multiple affect
APPENDIX A

Interview Schedule
**Interview Schedule**

Name ________________________________

Age ______ Ethnicity ____________________ Education ______

Marital Status ___________________________ Age married ______

How long ______

# children _________________ Ages __________________________

Education ___________________________ Employment __________________________

Abuser's relationship ____________________ Age ______

Abuser's education ______________________ Employment ________________________

When did you leave home?
How long at shelter?
Why did you leave?
Have you left before? __________________

(If so, why did you go back?)

When was the last time you were abused?

Length of abuse:  
less than 1 yr ______
1 to 5 yrs ______
6 to 10 yrs ______
over 10 yrs ______

# of abusive incidents:  
less than 5 ______
5 to 10 ______
over 10 ______

Frequency of abuse:  
less than 1/month ______
one/month + ______

When abuse began:  
Before marriage ______
First year of relationship ______
After first year ______

Type of abuse:  
throwing things
pushing, shoving
slapping
kicking, hitting with fist
hit with object
threatened with weapon
used weapon

Extent of abuse (most severe injury):  
hospitalization required
severe (broken bones) - required MD
minor but sought MD
no medical help required

Which beating did you feel was the worst? When did it happen?
Interview schedule (continued)

To what extent could you talk about the violence/your relationship with your partner?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>not at all</td>
<td>completely</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

With other people?

| 1 | 2 | 3 | 4 | 5 |

Did your partner talk with other people about it?

Did your partner encourage/discourage you to have friends?

What were your sources of emotional support during this relationship?

To what extent do you think the abuse was normal, expected?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>not at all</td>
<td>normal</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Was there violence in your family when growing up?

Was there violence in your partner's?

To what extent did you fight back?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>never</td>
<td>all the time</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Were you violent first?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>never</td>
<td>all the time</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you ever sought help from a therapist/counselor?

To what extent were alcohol and drugs a contributing factor to the abuse?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>never</td>
<td>all the time</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

To what extent have you made up your mind whether to stay away or to go back?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>not at all</td>
<td>sure</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
How much do you blame your partner for the violence?

1  2  3  4  5
not at all  completely

How much do you blame yourself?

1  2  3  4  5

How much do you blame the rest of the world (e.g., society, partner's upbringing, your upbringing) for your being abused?

1  2  3  4  5

How much do you blame yourself for any specific instances of violence that you can recall?

1  2  3  4  5

To what extent do you think your partner was violent because of something about you, some particular trait that you have or ways in which you acted? (e.g., too submissive, outspoken, independent)

1  2  3  4  5

After the first violent episode, how much did you blame yourself?

1  2  3  4  5

To what extent did you feel helpless in your situation?

1  2  3  4  5

To what extent did feelings of guilt keep you from leaving (or send you back)?

1  2  3  4  5

How justified do you think your partner was in beating you?

1  2  3  4  5

What do you think it was about your partner that caused him to abuse you?

To what extent do you think the violence could have been avoided? (because you changed, or your partner did, or your circumstances were different)

1  2  3  4  5
not at all  could have been avoided
Interview schedule (continued)

How much influence/control do you feel you have over what happens to you in the future (do you feel competent, can stand on your own feet)?

1  2  3  4  5
none

What do you think causes battering in general?

How happy are you now (not at this moment, but at this stage of your life)?

1  2  3  4  5
not at all happy

Considering the best and worst things that could happen to you in your lifetime, where does your present situation fit into the scale?

1  2  3  4  5
worst

What do you plan to do now?
APPENDIX B

Measures of Affect
Beck Depression Inventory (Short Form)

A. (Sadness)
3 I am so sad or unhappy that I can't stand it.
2 I am blue or sad all the time and I can't snap out of it.
1 I feel sad or blue.
0 I do not feel sad.

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

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

D. (Dissatisfaction)
3 I am dissatisfied with everything.
2 I don't get any satisfaction out of anything anymore.
1 I don't enjoy things the way I used to.
0 I am not particularly dissatisfied.

E. (Guilt)
3 I feel as though I am very bad or worthless.
2 I feel quite guilty.
1 I feel bad or unworthy a good part of the time.
0 I don't feel particularly guilty.

F. (Self-dislike)
3 I hate myself.
2 I am disgusted with myself.
1 I am disappointed in myself.
0 I don't feel disappointed in myself.

G. (Self-harm)
3 I would kill myself if I had the chance.
2 I have definite plans about committing suicide.
1 I feel I would be better off dead.
0 I don't have any thoughts of harming myself.

(Continued . . .)
Beck Depression Inventory (continued)

H. (Social withdrawal)
3 I have lost all of my interest in other people and don't care about them at all.
2 I have lost most of my interest in other people and have little feeling for them.
1 I am less interested in other people than I used to be.
0 I have not lost interest in other people.

I. (Indecisiveness)
3 I can't make any decisions at all anymore.
2 I have great difficulty in making decisions.
1 I try to put off making decisions.
0 I make decisions about as well as ever.

J. (Self-image change)
3 I feel that I am ugly or repulsive-looking.
2 I feel that there are permanent changes in my appearance and they make me look old or unattractive.
1 I am worried that I am looking old or unattractive.
0 I don't feel that I look any worse than I used to.

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

L. (Fatigability)
3 I get too tired to do anything.
2 I get tired from doing anything.
1 I get tired more easily than I used to.
0 I don't get any more tired than usual.

M. (Anorexia)
3 I have no appetite at all anymore.
2 My appetite is much worse now.
1 My appetite is not as good as it used to be.
0 My appetite is no worse than usual.
Mood Inventory

Each pair of words describes a feeling and its opposite (or close to it). Place a mark through the line in the place that best describes how you feel right now.

<table>
<thead>
<tr>
<th>(pleasure)</th>
<th>(arousal)</th>
<th>(dominance)</th>
<th>(pleasure)</th>
<th>(arousal)</th>
<th>(dominance)</th>
<th>(pleasure)</th>
<th>(arousal)</th>
<th>(dominance)</th>
</tr>
</thead>
<tbody>
<tr>
<td>happy</td>
<td>nonaggressive</td>
<td>in control</td>
<td>dissatisfied</td>
<td>not calm</td>
<td>awed</td>
<td>contented</td>
<td></td>
<td></td>
</tr>
<tr>
<td>aggressive</td>
<td>relaxed</td>
<td>sad</td>
<td>elated</td>
<td></td>
<td>not tranquil</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>stimulated</td>
<td>hostile</td>
<td>not homeless</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>not hostile</td>
<td></td>
<td>controlling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>controlling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>angry</td>
<td>not angry</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>annoyed</td>
<td>pleased</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>at ease</td>
<td>excited</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>calm</td>
<td>not nervous</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>nervous</td>
<td>influential</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>influenced</td>
<td>nonanxious</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>anxious</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>satisfied</td>
<td>dissatisfied</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>depressed</td>
<td>elated</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>frenzied</td>
<td>sluggish</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>joyful</td>
<td>downhearted</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>in control</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sad</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>melancholic</td>
<td>contented</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>relaxed</td>
<td>not relaxed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>dull</td>
<td>jittery</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>not calm</td>
<td>calm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>awed</td>
<td>important</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>tranquil</td>
<td>not tranquil</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>hopeful</td>
<td>despairing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Continued . . .)
<table>
<thead>
<tr>
<th>(arousal)</th>
<th>(dominance)</th>
<th>(pleasure)</th>
<th>(arousal)</th>
<th>(dominance)</th>
</tr>
</thead>
<tbody>
<tr>
<td>wide awake</td>
<td>dominant</td>
<td>bored</td>
<td>unaroused</td>
<td>guided</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sleepy</td>
<td>submissive</td>
<td>relaxed</td>
<td>aroused</td>
<td>autonomous</td>
</tr>
</tbody>
</table>
## Affect Frequency Checklist

How many times in the last week have you had these feelings?

<table>
<thead>
<tr>
<th>Feeling</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>anxious &amp; worried</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>calm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>tense &amp; agitated</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>furious</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>helpless</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>angry</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>frustrated</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>afraid</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sad</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>depressed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>happy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>guilty</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>optimistic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX C

Measure of Coping
Measure of Coping

1. Disoriented
   Does not want to face the reality of the situation
   May not talk at all or may talk about the situation but without much coherence

2. Expects the situation to change miraculously
   Expects counselors or others to take care of the situation and her

3. Reluctant to do things for self
   Not able to list needs, priorities
   Suggestions made to her are dismissed too readily as impossible

4. Beginning to realize it is up to her to act
   (but may be scared of responsibility)

5. Starting to be motivated
   Realizes she has options, and that she doesn't have to let the situation take control of her

6. Starts to pursue specific ideas—at least in conversation with counselors
   Can prioritize needs
   Has a clearer idea of what she wants (e.g., whether to go back or not)
   Sets goals, but may be unrealistic at this point

7. Pursues courses of action but easily frustrated and may give up if not succeeding immediately
   (e.g., counseling session with partner did not go well; can't find housing)

8. Actively pursues specific courses of action and sticks to them
   (e.g., counseling, temporary restraining order, divorce, job)
   Goals more realistic

9. Has made specific plans and feels clear, comfortable with future
   Knows limits of what can and cannot be accomplished
APPENDIX D

Case Histories
Case History #1: Diana H.

Diana H. was 26 years old and had been living with her partner, Sam, for about one year. She had a six-month old infant with her in the shelter at the time of the interview. Sam was 38, in school full-time and was just short of completing requirements for a B.A. degree. He sold insurance part-time. Diana had completed her B.A. and had some teacher's training. The couple met at a Christian singles club and started living together shortly thereafter. There was no history of violence in Diana's family, while Sam, his siblings and his mother were all abused by his father. In their year together Diana recalled about 10 incidents of physical abuse on Sam's part, although he abused her verbally on a day-to-day basis. The focus of this abuse were Sam's repeated accusations that Diana could do nothing right; everything that went wrong was her problem; he did not like to hit her but if she wouldn't make so many mistakes he wouldn't have to reprimand her. (As he said, according to Diana, "How do you survive making so many mistakes?") She acknowledged that she had a problem with low self-esteem, and he contributed to it. He lectured her constantly and often pulled her hair or jabbed her violently to get her attention. She had been kicked, slapped, bruised, and pushed to the floor when pregnant. Sam also became increasingly more aggressive after the birth of their child.

Diana felt that Sam was self-satisfied with his aggressive behavior. Alcohol was not a factor in his abusive tendencies and in fact seemed to make him more mellow than usual. She loved
him, but was afraid of him, and he caused her more fear by threatening to take away the child and cause her more serious harm if she continued to displease him. She did not consider herself to be "battered", had never left before, and acknowledged that her situation sounded worse in the telling of it than she had initially perceived it to be. Sam had finally persuaded Diana to go to counselling for "her problems", and it was the counselor who urged her to leave her partner as quickly as possible. With regard to interview questions, she perceived no contingency between aspects of herself and the abuse, rated her situation as the worst that could happen to her, and was moderately depressed on the BDI. Although she admitted that she would be crazy to return to Sam, and said she planned not to, she went back home after spending 12 days in the shelter.

Case History #2: Sharon L.

Sharon L. left her husband and home and travelled 2,000 miles to come to the shelter; she had a brother living in the area and felt that had she stayed in her home town her husband would have found her. She was 29 years old, her husband Henry was 27, and both had two years of college. He was an unemployed musician, they had been together for three years and had one child. There was no violence in her family of origin, but Henry's father had abused his mother. Sharon had left before but had been talked into going back; she had also felt constrained at the time because she was pregnant. She estimated that her husband was violent about three to four times per month, that alcohol was often a contributing factor, and that his constant
mental and verbal abuse were often far worse than the physical violence. She had been hit, kicked, pushed down stairs, and once Henry had threatened to throw her out of a window. On one occasion while she sat with her child in her lap, her husband pointed a gun at her and repeatedly pulled the trigger.

Although Henry apologized to her for the abuse, he also argued that she deserved it. He made it difficult for her to have contact with other people, and Sharon often stayed in the house for days at a time waiting for bruises to go away. She said that she used to blame herself a lot although she did not know what she was doing wrong, but Henry had convinced her that their problems were due to her inadequacies. In Sharon's view, Henry wanted a wife who was "totally submissive and old-fashioned," and she felt his violence stemmed from the need to prove himself a man. Sharon was moderately depressed on the BDI, felt that this was the worst situation that could happen to her, and also believed there may have been some contingency between aspects of herself and her husband's abuse. She stayed in the shelter for one month, and then moved into an apartment with her child.