

Abused Women's Cognitive Beliefs Associated  
with Readiness to Terminate the  
Relationship

by

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## CHAPTER I

### INTRODUCTION

The Surgeon General's Report (1985) stated that domestic violence is a priority public health issue of our time because of the toll it takes on the health and welfare of the entire family. The wife abuse aspect of domestic violence deserves further attention for several reasons. First, FBI statistics revealed that 2 to 4 million women were beaten by their spouses or partners in 1988 and these figures were projected to increase (U. S. Department of Justice). Second, the wife abuse problem reaches across all cultures, socioeconomic levels, races and ethnicities, and educational levels. Third, societal efforts and financial allocations continue to be less intense for women victims in comparison to efforts aimed at either child or elder abused victims. Without a doubt, society has been slower to react to the wife abuse problem. Perhaps this is associated with a societal norm, which Straus (1976) described as implicit and unrecognized, that permits a man to hit his woman partner. Overall, wife abuse is less well understood by society and its members than child or elder abuse; those who would help children or elders are not as inclined to deal with and to extend assistance to an adult who stays in a relationship despite the recurrence of abuse.

“Why do women stay in abusive relationships or conversely, why don't they leave?” Since research on wife abuse began almost twenty years ago, this has been one of the most frequently asked questions. It may seem contradictory that women stay in relationships or leave only to return when they know battering will recur, yet they do. The purpose of this study was to explore the possibility that abused women stay in their relationships because they are not ready to terminate the relationship; specifically, they are not ready to leave permanently based on what they know and believe.

Theory, research, and practice suggest that whether a woman leaves the relationship may involve an underlying process of becoming psychologically ready, which is a state of being willing to terminate the relationship. Termination readiness is influenced by the abused woman's beliefs. Such beliefs as self-esteem, self-efficacy, sex role orientation, the magnitude of abuse, and social support have been implicated as factors that influence termination (Giles-Sims, 1983; Hotaling & Sugarman, 1986; Limandri, 1985; May, 1986; Mitchell & Hodson, 1983; Straus, Gelles & Steinmetz, 1980; Walker, 1979, 1983), and were explored in this study as they interrelated with readiness to terminate the relationship.

Cognitive dissonance theory (Festinger, 1957) was the guiding framework for this study since it seemed possible that women who were involved in abusive relationships were likely to experience inconsistencies in their beliefs (cognitive dissonance) about others and themselves to the point that termination readiness would be imminent. Therefore, termination readiness was explored as it was interrelated with self-esteem, self-efficacy, sex role orientation, the magnitude of abuse, and social support beliefs.

#### Significance to Nursing

The significance of the research to nursing is threefold. First, it is likely that nurses will have the initial contact with women who are involved in abusive relationships who seek health care services. The nurse's responsibility is to identify these women and facilitate their resolution of the problem. Second, nurses have missed opportunities they have had to identify and intervene with victims of domestic violence (Drake, 1982; Kurz, 1986; Stark & Flitcraft, 1983; Tilden & Shepard, 1987). Yet recent research revealed that nurses can make a difference in assisting abused women. Tilden and Shepard (1987) increased the identification rate of women who suffered from wife abuse by almost three times its former rate in their clinical intervention study with emergency department nursing staff. Third, theory building is

in embryonic stages with regard to the problem of abused women, especially with regard to what factors influence termination readiness. New knowledge in this area could enhance practice and might ultimately enhance people's health.

#### Scope of the Wife Abuse Problem

Wife abuse is a social problem of major proportions. According to FBI statistics an estimated 2 to 4 million women are abused every year (U.S. Department of Justice, 1988). Further, domestic violence knows no age, race, cultural or socioeconomic barriers. The prevalence of family violence in general, and wife abuse in particular is a reflection of a general acceptance of violence in the American culture (Straus, Gelles, & Steinmetz, 1980; Straus & Gelles, 1986).

The cost of domestic violence can be counted in human and economic terms. The National Crime Survey (1981) annual report indicated that 21,000 hospitalizations, 99,800 days of hospitalization, 39,900 visits to physicians, and 28,700 emergency visits were associated with domestic violence. Stark and Flitcraft (1983) estimated that one of every four women who goes to the emergency department does so because she has been assaulted by an intimate other. Another human cost is that children who are raised in violent homes tend to perpetuate the cycle (Giles-Sims, 1983; Straus, Gelles, & Steinmetz, 1980; Walker, 1979, 1983). Further, violence affects the safety and welfare of people who respond to domestic violence calls; 20 % of the police fatalities occur when answering domestic violence calls (Hilberman, 1980). The economic drain to society as a whole is evidenced by the fact that in the state of Oregon, taxpayers may pay as much as thirty-six thousand dollars per month for police to respond to family disturbances. Health care delivery services may also bear the brunt of these costs. The total annual national health care costs approximate forty-four million dollars. Indirect costs amount to almost two hundred thousand dollars in lost days from work (National Crime Survey, 1981). In an evaluative study conducted on

emergency room services in a Northwest urban area, an estimated cost of emergency medical services to domestic violence victims was seventeen thousand dollars per month (Multnomah County Family Violence Project, 1980). The intangible costs that the abused woman suffers is also high. It may be too costly to have friends because her partner threatens to kill them. Feeling stigmatized, she may refrain from seeking help from friends or formal helping services (May, 1986). The enormity of the wife abuse problem and the costs associated with it may also influence the abused woman's readiness to terminate the relationship.

#### Definition of Wife Abuse

According to the literature (Campbell & Humphreys, 1984; Deschner, 1984; Gayford, 1975; Straus, Gelles, & Steinmetz, 1980; Walker, 1979), abuse is characterized as a pattern of repeated physical attacks, multiple blows, and deliberate harmful actions that one person inflicts on another while involved in an intimate relationship. Also implied in these relationships is an element of nonphysical verbal repudiation. For purposes of this study, the term wife abuse was defined as a husband or man partner's willful, forceful, and repeated physical attacks on his wife or partner. The term wife abuse versus woman abuse was used because it more obviously denotes violence in a dyadic relationship. Further, the term wife abuse framed the problem as a political one that exists in the context of a patriarchal society.

#### Background of the Wife Abuse Problem

The origins of domestic violence provide insight about how societal norms can preserve and perpetuate the problem (Dobash & Dobash, 1979; Pagelow, 1981; Stark & Flitcraft, 1983). In particular, history depicts women as possessions of men, subservient to men's will, and powerless. Additionally, women were responsible for the family's happiness. Within this context, research and treatment tended to focus on women as the source of the problem.

The intrapersonal ills of the violent couple were emphasized in early research (Snell, Rosenwald, & Robey, 1964). However, abused women ultimately received more attention than the batterers because it was rationalized that such women must be neurotic or otherwise imbalanced to stay in abusive relationships. The implication from early works was that abused women were at fault; domestic violence was their problem because they were not able to make their families happy and satisfied. This served to perpetuate abuse because as long as domestic violence was viewed as an individual's problem, society did not have to claim responsibility. There was little community assistance available, family and friends told the woman to try again, and health professionals were either doing the same or ignoring the presence of the problem completely. This meant that the woman had few, if any, options for terminating the relationship even if the abuse did become unbearable. Further, if she had come to the conclusion over a period of time that she needed to change her original beliefs about commitment and family life, under these circumstances, she could find no one to reinforce her new beliefs. This would inhibit termination readiness because there was little, if any, validation from others for her shifting beliefs about terminating the relationship.

Later studies focused on self-esteem and self-image as intrapersonal variables which seemed to be related to whether to terminate the relationship. Walker (1979, 1983) also applied the learned helplessness theory as an explanation for why women stayed even when options were available. The learned helplessness theory holds that an abused woman learns that outcomes are uncontrollable by her responses; no matter what she does or does not do, the abuse occurs and therefore she loses her motivation to act.

Societal forces such as the women's movement prompted researchers to integrate sociocultural variables into research studies on the problem of wife abuse. In the last

decade, important progress has been made toward understanding the social causes of domestic violence rather than blaming the individual woman. Dobash and Dobash (1979) studied over one thousand police records of assaults in two cities in Scotland. They viewed the patriarchal structure as a fundamental cause of wife beating and stated that as long as the social context is not taken into account, wives will be blamed for their own victimization. In their nationally representative random sample of 2,143 intact American families, Straus, Gelles, and Steinmetz (1980) found that marital inequality is related to higher levels of wife beating. This corroborated the Dobashes' findings. Yllo (1984) also suggested that higher abuse occurred with marital inequality. Societal norms undoubtedly contribute to the wife abuse problem and may also influence the abused woman's cognitive dissonance about her readiness to terminate the relationship.

Social support began to receive attention in the 1980's with regard to the research on abused women. In studies such as those by Giles-Sims (1983), Limandri (1985), Mitchell and Hodson (1983, 1986), and McKenna (1985), evidence was accumulating that social support seemed to have an effect on the abused woman's health, help seeking behavior, and termination behavior. These findings point toward further study with abused women since an implication is that an optimal social support system can validate one's beliefs and may also play a critical role in readiness to terminate the relationship.

May (1986) conducted a qualitative research study using a grounded theory approach (Stern, 1980) to explore readiness to terminate the relationship. A convenience sample of Northwest area 20 abused women from shelters and transient housing were interviewed. Social support themes were prominent in the findings. Self-esteem, self-efficacy, magnitude of abuse, sex role orientation, and intergenerational transmission of family violence also were themes that emerged from



the data in association with readiness. While these themes were preliminary findings based on a small convenience sample, they do seem to support the findings in previous research studies.

### Summary

In summary, study of domestic violence has moved away from strictly psychoanalytic explanations, toward the social context within which families are embedded. However, it is unclear as to how self-esteem, self-efficacy, sex role orientation, the magnitude of abuse, and social support effect the abused woman's readiness to terminate the relationship. Using a cognitive dissonance theory framework (Festinger, 1957), this study explored how these variables contributed to abused women's readiness to terminate the relationship.

## CHAPTER II

### REVIEW OF LITERATURE AND CONCEPTUAL FRAMEWORK

An analysis of the literature is presented as it relates to: (a) abused women's readiness to terminate the relationship, and (b) cognitive beliefs including sex role orientation, magnitude of abuse, self-esteem, self-efficacy, and social support beliefs influencing termination readiness. A conceptual framework based on cognitive dissonance theory concludes this chapter.

#### Readiness to Terminate the Abusive Relationship

Researchers of wife abuse have sought to clarify why women involved in an abusive relationship do not leave, or if they do leave, why many return to that relationship. It seems contradictory that women stay in abusive relationships or leave only to return an average of 4 to 6 times (Strube & Barbour, 1983) when they know battering will recur. There are implications from previous studies such as May's (1985, 1986, 1988), that abused women stay in the relationship or return to it because, initially, they are unaware of dissonance and therefore may not be ready to leave permanently. In time, termination readiness may become more of a reality for some, since dissonance prevails and consonance in their beliefs can no longer occur.

The concept of readiness to terminate the relationship was explored by May (1985) in a qualitative study that involved interviewing a convenience sample of abused women, shelter staff, and nonvictim lay people (n = 10). Themes which emerged from the qualitative data included realizing the seriousness of the problem. For example, women stated that "there was fear for my life and the life of my children," and "the beatings got more serious." There was a sense of personal vulnerability. For example, women stated that, "I feel much more vulnerable because nothing I do matters anymore." There were implications that women were weighing

the costliness of the options. For example, women stated that “I didn’t want to uproot the children, they need their father,” or “I have no money and everything I own is in that house and I’ll just lose it all.” One shelter staff person explained, “I think it takes a combination of internal factors (personal resources) to get her out of there, and external factors (support system resources) to keep her out.”

May's (1985) findings appeared epistemologically linked to Rosenstock's (1966) theory of psychological readiness which states that readiness involves a mental state of willingness to take action after perceiving that a serious problem exists to which one is vulnerable, and the benefits of action outweigh the costs. For the abused woman then, termination readiness is a state of being willing to terminate the relationship. The critical attributes of the concept of readiness to terminate the relationship include the woman's evaluation of the problem to which she is vulnerable and whether it is serious for her. Then she weighs her options in relation to what she knows about her situation. Her knowledge of the situation is based on her beliefs about self and others. If the benefits of termination outweigh the costs of termination, she reaches a state of willingness to take action; she is ready to terminate. Implicit in this definition is the ongoing cognitive process of evaluating beliefs in relation to her situation, the timing element surrounding leaving, and the possibility that she may become more or less ready in association with this cognitive process depending upon the intensity of dissonance it creates for her and the extent to which she receives new information about her situation.

Walker (1979) interviewed 120 abused women in an effort to gain insight into why these women do not leave their relationship. She theorized that a battering cycle explains this phenomenon. The cycle has a tension building phase, an acute battering phase, and a loving aftermath (honeymoon) phase. Of these, the last phase is most

contributory to continuation of the relationship. The occurrence of the beating is so traumatic to both partners that each is anxious to rationalize and deny what has happened. Since he is truly contrite, she may choose to forgive him. If the couple stays together at this point, they will repeat the cycle. While the time interval between violent episodes may vary, abuse will happen again; the pattern is set and the cycle continues (Gelles, 1976, 1980; Straus, Gelles, & Steinmetz, 1980; Walker, 1979). Studies such as Drake's (1982) descriptive study of 12 abused women who were admitted as emergency patients, corroborated the cycle theory. However, some studies, most notably the work of Dobash and Dobash (1979) found that the cycle was evident in only 14 % of the 109 cases that they interviewed. These findings raise some questions as to what other processes are occurring. Perhaps readiness to terminate the relationship actually underlies the dynamics of the cycle. As the cycle continues, the woman begins to appraise her cognitions. Based on an evaluation of her cognitions, she may assume the blame for the violent outburst, or minimize the magnitude of abuse in the event that she's been exposed to this as a part of her childhood history, and make excuses for him as to why it happened. This evaluation process may influence her readiness to terminate the relationship.

Rounsaville and Weissman (1977) investigated reasons why abused women leave an abusive relationship and found that the severity of the abuse, type of abuse, fear of being killed, the partner's having hit the children, and the assistance of others such as police, family, and medical service providers correlated significantly with a wife leaving the abusive relationship. Further, many researchers (Gelles, 1976, 1980; Pagelow, 1981; Pfouts, 1978; Walker, 1979) found that fear of the unknown, low self-esteem, hope in the relationship, a feeling of powerlessness, isolation, and the socialization of men and women into rigid sex roles were common denominators in the

lives of abused women. These factors may motivate abused women to weigh their options with regard to leaving, and depending upon their evaluation, they may decide to stay.

Pfouts (1978) studied four groups of abused wives using the social exchange theory framework. The groups included those who stayed in the relationship permanently, those who lived with one abusive partner after another, those who separated early, and those who separated later. Regardless of the group, the abused women used a cost-benefit analysis approach to decide whether they should stay in the relationship. The benefit factors related to staying included financial security, material possessions, advantages for the children, social approval, and fulfilling a commitment to partner/family, and good times with the partner. The cost factors of staying included pain and emotional trauma of the physical abuse, verbal cruelty and debasement, social humiliation, and adverse effects on the children. The level of satisfaction of possible alternatives were then compared with the assessed level of satisfaction with the above noted factors and a decision was made about leaving. This study implied that abused women are active processors of information who make decisions with deliberate intention. Further, the study findings suggested that these women make an effort to evaluate both personal and situational variables in relation to an outcome action. However, the concept of readiness to terminate the relationship was not explored specifically.

Other studies (Deschner, 1984; Gelles, 1980; Hilberman, 1980; Pagelow, 1981; Strube & Barbour, 1984) that explored demographic characteristics of abused women indicated that age, number of children, employment status, and personal income influence the decision to leave the relationship. Those women who were older, had a

job, and had income independent of their partner were more willing to risk leaving. The risk-taking behavior which occurs as a sense of self-efficacy builds in abused women may shift their personal cognitive beliefs. This shift in beliefs can facilitate termination readiness.

Strube and Barbour (1984) conducted a prospective study of factors related to a woman's decision to leave an abusive relationship. A questionnaire was completed by a convenience sample of 251 abused women. These women were in a relationship at the time of data collection and were followed-up three months later. The 177 women who left the relationship were more likely to be employed, to have been in a relationship of shorter duration, to have tried a greater number of other coping strategies to alleviate the abuse, viewed themselves as less economically and emotionally dependent, were less believing that he would change, and were more supported. These findings imply that there were changes in the women's personal and social beliefs. These changes may facilitate termination readiness and make it more conducive for them to leave and stay away.

Landenberger (1987), in her phenomenological study of 30 abused women shelter residents, found that abused women seemed to progress through four phases as they tried to extricate themselves from abusive relationships: binding, enduring, disengaging (they self-identify as being abused at this phase), and then recovery. These findings implied that time is necessary to work through what they know about their situation prior to actually terminating the relationship.

NiCarthy (1987) interviewed thirty-three abused women who successfully "got away." She found a variety of factors which seemed to contribute to leaving. However, regardless of the factors, leaving a partner required a complex decision. It

seemed that while a single factor triggered leaving, it was often the last link in a chain of events that occurs over a period of time. In other words, deciding to leave is not as abrupt a phenomenon as it may appear, nor is it a simple process involving only one incident. NiCarthy's (1987) findings indicated that it is necessary for the woman who is in an abusive relationship to take her time and become ready to leave. May (1988) found that abused women who were more ready to terminate the relationship move from denial of the problem and a hope that the partner will change, to ambivalence and a self-questioning about the seriousness of the problem, towards a personal rebuilding of self. Esteem and support from others were integral parts of this process.

The identification of self as involved in an abusive relationship seems to be an important step toward leaving. Based on years of clinical experience with family violence, Elbow (1978) stated that an abused woman who begins to plan a life that is exclusive of her partner, to invest in herself as a person, and to objectify the abusive situation to the extent that she sees incidents of abuse not as isolated entities but as part of a pattern, is more ready to leave the abusive situation. However, Elbow did not test this empirically.

Blixseth's (1987) personal account of her experience in an abusive relationship illustrated that a complex process is involved in leaving. Initially, Blixseth (1987) stated that it takes time for the woman to acknowledge the problem and self-identify as abused. Then, she begins to engage in a cognitive evaluation process with regard to her beliefs. At the same time, she might be encountering various obstacles when seeking help from a society that has little understanding of the wife battery problem. Finally, Blixseth (1987) suggested that support from others is essential for the personal rebuilding process.

In their descriptive study to explore women's ways of knowing, Belenky, Clinchy,

Goldberger, and Tarule (1986) interviewed 131 women who were returning to school to complete their education. They found that women's ways of knowing involved the ability to express their thoughts and feelings which Belenky et al. (1986) referred to as "finding a voice." They discovered that women in their sample moved through five stages as they learned to articulate their voices: silence, received knowledge, subjective knowledge, procedural knowledge, and constructed knowledge. Acquiring new knowledge involved evaluating their beliefs and making the necessary changes in their beliefs as part of the self-development process. Although they did not apply their findings to abused women, one could do so. Termination readiness might be effected by whether women in abusive relationships can find such a voice.

In summary, termination does not happen as a random or spontaneous action. Rather, the abused woman has been processing information about herself and her situation at some level since the first abusive incident. In time she considers whether there is a problem to which she is vulnerable and whether it is serious for her. Then she weighs her options in relation to what she knows and believes about her situation; these include her financial security, safety assurance of herself and/or the children, assistance from others, personal resources and skills, fears of the unknown, and loss of material possessions. As she evaluates and makes changes in her cognitive beliefs, and the benefits of termination outweigh the costs of termination, she reaches a state of willingness to take action. She is ready to terminate. A woman may move slowly toward becoming ready, and/or back and forth between unreadiness and more readiness. Associated with the cognitive dissonance, there may be a series of temporary departures from the situation until she finally terminates the relationship. The abused woman who becomes more ready to terminate the relationship, sees the relationship for what it is as her cognitions change. The intensity of cognitive dissonance will



depend upon how consistent her personal and social beliefs are. The greater the termination readiness, the more evidence there should be of a shift in what she believes about herself and her social situation and her need to seek out others who provide information that confirm these new beliefs. Termination readiness may be enhanced or inhibited depending upon her personal and social beliefs.

Abused women's personal and social belief variables that are relevant in this study include sex role orientation, the magnitude of abuse, self-esteem, self-efficacy, and social support. These variables have been consistently identified in association with abused women's termination of the relationships. However, none have been studied specifically in relation to termination readiness from a cognitive dissonance theoretical framework which holds that dissonance in personal and social beliefs is motivation for making changes in cognitions and taking action to regain consonance in cognitions. Nor have these variables been studied in interrelationship with termination readiness. To the extent that these personal and social beliefs change in relation to leaving, they may influence readiness to terminate the relationship.

### Cognitive Beliefs

#### Sex Role Orientation

Sex role orientation is defined as a gender specific behavioral guideline that is based on the established cultural norms of a society. This guideline provides individuals with the culturally acceptable content of the various social roles of men and women (Pleck, 1983). Based on this definition, a woman who is a wife/partner would know that she would have to perform certain tasks, to fulfill certain obligations, and to enjoy certain benefits or endure certain consequences based on what she has learned as a part of the socialization to sex role orientation. A woman's primary role has been that of wife/partner and mother. One of the man's roles has been to "keep her in her place." Therefore, even as women assume career roles and have

responsibilities outside the home, they are reminded, with acts of violence if necessary, by their husbands/partners (and a patriarchal society), that their first responsibility is to their family. Walker (1983) found that while both men and women held traditional views themselves as a result of their upbringing, the abused women reported that their husbands/partners were more traditional in their sex role orientation than they were. How abused women's beliefs about sex role orientation may affect termination readiness remained unknown.

The society's patriarchal structure supports men's dominance over women and this has led to the high incidence of all forms of men's violence against women (Dobash & Dobash, 1979). Straus (1977) stated that physical force is the ultimate resource to keep people in subordinate positions, and men use this to "keep women in their place." Yllo (1984) conducted a secondary analysis of data from Straus, Gelles, and Steinmetz's (1980) national probability study to determine the relation between the status of women, the balance of marital power, and violence against wives. Findings confirmed hypotheses that violence was high in families where a patriarchal authoritarian structure existed. Further, when the pattern of marital power is inconsistent with the socially accepted pattern of women's status, wife beating is most common. These findings reinforce that the violent interactions that take place in the privacy of the home are influenced by sociocultural and structural factors.

According to Walker (1983), "women do not remain in battering relationships because of their psychological need to be a victim but, rather, because of the overt or subtle encouragement by a sexist society" (p. 82). As one abused woman in May's (1988) study said, "If I could understand why I'm his property and he's not mine, maybe we could get along better." However, people's attitudes are changing. There are many common interest groups such as the State Coalitions against Domestic

Violence, National Coalition for Family Rights, and grassroots community groups in the United States working to revise laws to become more consistent with changing societal attitudes. These laws acknowledge women as people with rights, and have imposed stricter punishments for batterers. Eleven American states have mandatory arrest laws which require police to arrest batterers. For example, in Duluth, Minnesota, recent laws have resulted in a 47 % decrease in the number of domestic violence calls (Campbell & Humphreys, 1984).

Ambivalence still exists in the implementation of these new laws as evidenced by the tendency to issue lenient sentences or suspended sentences to the batterers. According to Viano (1983), implementation of social policy which has been approved in aggregate is very difficult because implementation ultimately rests with an individual who has his or her own inherent biases. This may explain why it is not uncommon for a judge to make a public statement about the abused woman in the process of issuing the sentence to a batterer, implying that the abused woman is really to blame. The media sensationalizes some of these court cases such as the Nussbaum/Steinberg case in New York, which allows any woman who is abused to hear these message of her responsibility for the abuse. Society sends these mixed messages to abused women leaving them unsure of what roles and responsibilities they have, and of whether they have the right to be free from assault and battery in their own homes. However, the newly changing societal attitudes in the form of legal sanctions may create dissonance in the abused women's beliefs about their roles and responsibilities, and this may influence readiness to terminate the relationship.

In summary, societal norms influence the societal structure, the family, and the individual family members. These norms dictate the family members' roles and the

acceptability of violence as a part of family life. The abused woman's belief in her sex role orientation may influence her readiness to terminate the relationship.

### Magnitude of Abuse

The magnitude of abuse is defined as the woman's beliefs about the severity and frequency of the abuse (Hudson & McIntosh, 1981). Many researchers documented the intense nature of abuse in an interpersonal relationship. Straus, Gelles, and Steinmetz's (1980) national study of a random sample of 2143 intact families identified abusive patterns. Specifically, they found that abuse recurred, tended to increase in frequency, and tended to worsen in severity in those who stayed together. Straus and Gelles' (1986) study a decade later, found that the incidence of reported abuse decreased slightly. They cautioned that the findings of a decreased incidence reflected information from married couples only and their responses might have been related to social desirability or a telephone survey approach. Further, when it is considered that Straus and Gelles (1986) found that there were almost 2 million reports of wife abuse annually, wife abuse is still responsible for a major proportion of women's injuries. A more recent study by Straus and Stets (1988), which included a random sample of married and cohabiting couples, found that violence in cohabiting couples was more severe.

Dobash and Dobash (1979) interviewed 109 abused women to identify the extent of their injuries and found that 91 % had injuries beyond bruises which included broken bones, trauma to the head and skull, miscarriages in those who were pregnant and a host of other internal injuries. Drake (1982) found similarly extensive injuries in her study of 12 abused women who sought help from a hospital emergency room setting.

The magnitude of the injuries may also be associated with the point in time where a woman self-identifies as abused and begins to realize the gravity of her

situation. Blixseth (1987) described the many injuries she had suffered during the course of her ten year marriage to an abusive husband. She “explained away” these injuries to herself and others until she had a broken nose. It was at this point that she self-identified as abused since she had previously told herself that she was not an abused woman until she had a broken bone. Blixseth's (1987) account suggested that the magnitude of abuse becomes meaningful as the abused woman's cognitive beliefs become dissonant. As she changes her beliefs about the reality of the situation, this change may influence the abused woman to become more ready to terminate the relationship.

Walker (1979) defined nonphysical abuse as a term referring to coercive, manipulative, or other power-related behaviors promoting one person's needs while neglecting the needs of the other. According to Walker (1979), nonphysical abuse encompassed four dimensions: economic deprivation, social humiliation, social isolation, and verbal battering. These dimensions serve to undermine abused women's self-esteem and overpower them.

Hoffman (1984) studied psychological abuse by spouses and live-in lovers. She concluded that psychological abuse is sufficiently threatening to the women to engender a belief that their capacity to work, to interact in society, or to enjoy good health has been threatened.

From clinical experience, it is not uncommon for abused women to talk about how the yelling and verbal “attacks,” the “put-downs,” the verbal “blows,” and the threats to kill them may be more injurious than the actual physical attacks. One woman in May's (1988) study said, “I have been emotionally and mentally abused for years in my marriage.” Further, they feel that the emotional “blows” are not as telltale as the bruises or broken bones that heal, therefore they are often ignored by others.

For example, one woman stated, “since he is mostly emotionally abusive, and I usually have no physical evidences, people want to put blinders on or just say, ‘well that’s Harry’.” Indeed, most studies have defined and measured abuse in terms of physical injuries without measuring the nonphysical abuse that is an implicit element of physical abuse. The probable reason for this is the lack of adequate instruments to measure nonphysical abuse (Hudson & McIntosh, 1981). However, this dimension can provide a fuller understanding of the magnitude of abuse. Patterns of physical and nonphysical abuse may contribute to an abused woman’s readiness to terminate the relationship and awaited investigation.

In summary, the magnitude of abuse is women’s beliefs about the severity and frequency of abuse including physical and nonphysical abuse. As they become aware of the reality of the situation and dissonance in these beliefs occur, they may be motivated to leave the relationship. How abused women’s beliefs about the magnitude of abuse relate to readiness to terminate the relationship warranted further investigation.

### Self-Esteem

According to Coopersmith (1967), a person’s self-esteem is a judgment of worthiness that is expressed by the attitudes one holds toward the self. Self-esteem is developed early in life based largely on the way people are treated by significant others. It provides a mental set that prepares the person to respond according to expectations of success, acceptance, and personal strength. This set of both positive and negative beliefs about the self is then used when facing the world. The extent to which a person views the self as “good and valuable” has its inception in what society dictates as culturally acceptable. A person may view themselves worthy, successful,

significant, and capable at work, or in other social situations but not at home as can be the case with abused women.

In a patriarchy such as exists in this society, women's sense of worth is still largely derived by successful performance of domestic work and family service regardless of success in other roles. The impact on self-esteem of being an abused woman relates in part to the status of women in this society. Prejudicial attitudes toward women results in many forms of discrimination and a feeling on the part of women that they are inferior. These beliefs can be in operation at the family level as well and can precipitate a woman's risk for becoming victimized. Being abused by their husbands or partners is "a powerful statement of [their] worthlessness" (Dobash & Dobash, 1979, p.125). The fact that our society is fairly accepting of violence as a main thread in their fabric, may further undermine the woman's self-esteem.

Many of the descriptive studies (Landenberger, 1987; Limandri, 1985; May, 1986, 1988; NiCarthy, 1987; Walker, 1979) and personal accounts (Blixseth, 1987) of women noted the low self-esteem of those involved in abusive relationships. Such comments from respondents in May's (1988) study as, "One day at a time I hope my self-esteem will grow enough to know that I deserve better," and "I feel my self-worth comes only from being with my partner" exemplify how abused women's self-esteem can be affected. Self-esteem seems to fluctuate during the course of the relationship as well. NiCarthy (1987) found that women's sense of their self-esteem may be at its lowest at that "rock bottom" point, but improves as the woman becomes more certain that she must "get out." Blixseth (1987) also discussed this change in her own self-esteem.

Self-esteem can be temporarily affected by various life events (Norris & Kunes-Connell, 1985). However, an overall sense of self-esteem remains relatively

constant (Coopersmith, 1967). Even with experimental momentary raising or lowering of self-esteem as Aronson's (1959; 1962; 1968) studies demonstrated, people are generally unwilling to accept evidence that they are better or worse than they themselves have initially decided. Therefore, people generally resolve any dissonance between the evidence and their judgment in favor of the general judgment that they previously made about their self-esteem. However, these findings experimented with short-term raising and lowering of self-esteem. Perhaps a more long-term systematic lowering of self-esteem, such as the abused woman may receive from her abusive partner, may tend to destroy her self-esteem, at least in the home and family environment. Depending upon her self-esteem as she enters the relationship, and her exposure to positive supporters who help her build her self-esteem and her self-efficacy, she may experience more dissonance in her beliefs about herself, others, and the ultimate act of terminating the relationship. The changes in her beliefs about self-esteem may increase her readiness to terminate the relationship. However, the relationship between self-esteem and termination readiness has not been adequately studied.

In summary, self-esteem is a perceived sense of self-worth based on feedback received from others about their enactment of culturally acceptable roles and responsibilities. Abused women's beliefs can change as a result of this feedback. Dissonance may increase as these changes occur and may influence readiness to terminate the relationship.

### Self-Efficacy

Self-efficacy theory was introduced by Bandura (1977) to explain what activities a person might engage in, how much of an effort a person would expend, and how long a person would persevere in the face of adversity in order to produce a successful



outcome. According to Bandura (1977), successful performance is a function of the difficulty of a task, the relative extinguishability of expectations by disconfirming experiences, and the range of activities in which the person feels competent. This latter function is validated from past successes and failures in completing various activities and enables people to generalize the extent to which they will be successful in new situations. Bandura, Adams, Hardy, & Howells (1980) conducted a study on generalizability and found that self-efficacy gained from mastery of experiences with one situation generalized to other similar situations. However, Bandura et al. (1980) cautioned against using a fixed set of items as an all-purpose measure because it may not have specific relevance for the domain being studied. Sherer, Maddux, Mercandante, Prentice-Dunn, Jacobs, and Rogers (1982) offered an alternative perspective. They stated that an individual's past experiences with success and failure in a variety of situations should result in a general set of expectations that the individual carries into new situations. These generalized expectancies should influence the individual's expectations of mastery in the new situations.

Self-efficacy is one of many dimensions which contributes to self-esteem (Coopersmith, 1967; Franks & Marolla, 1976). While self-efficacy and self-esteem are related concepts, they are distinct enough to justify exploring them individually as they might influence an abused woman's termination readiness. Self-efficacy primarily concerns beliefs about one's abilities and sense of potency while self-esteem primarily represents an attitude about one's overall self-worth.

Blixseth (1987) implied that becoming ready to terminate the relationship involves learning to change the way an abused woman thinks of herself and her abilities to follow through on actions in spite of the obstacles she may face. May's (1986, 1988) findings suggested that self-efficacy is salient with regard to termination

readiness. Abused women who seemed ready to terminate the relationship employed “self-talk” techniques telling themselves, “I can do it (leave), I know I can no matter what it takes!”

The literature on self-efficacy suggested that self-efficacy is intact when people think that they have an inner strength that enables them to exert power and control in their social environment. Decreased and/or negative social interactions such as abused women experience, can diminish their sense of power and control and alter their perceptions of their self-efficacy. A person who is regularly told that she cannot do anything right may choose to adjust her beliefs to be consistent with that of her “validator(s),” especially if the situation in which she is involved is one that she is still invested in maintaining. Additionally, her low level of confidence may impede the pursuit of terminating the relationship. For example, Blixseth (1987) revealed her process of preparing to leave as one that involved building self-esteem and self-efficacy. As she recited positive affirmations to herself she began to feel more powerful. Although she did not have a confidante to validate her changing beliefs, she suggested that choosing a person who listens without passing judgment is invaluable in building self-esteem. Indeed, both self-esteem and self-efficacy are enhanced by the presence of significant others who are positive supporters. Taylor, Bandura, Ewart, Miller, & Debusk (1985) hypothesized that cardiac patients who had a social support system may be more efficacious than those who did not. The dyads were assigned to one of the two experimental groups or to the control group. Those patients whose spouses participated most fully in the patient’s rehabilitation program had significantly more self-efficacy. The investigators concluded that the rehabilitation of cardiac patients could be enhanced or reduced by whether the spouse believed in the patient’s efficacy.

In summary, self-efficacy is a sense of self-potency that one has with regard to taking a particular action and following through for a successful outcome. This may be more complicated for abused women who may change their efficacy beliefs to reduce dissonance by ending the relationship. Abused women's beliefs of their self-efficacy and its relationship to termination readiness remained unknown.

### Social Support

Dimond and Jones (1983) suggested that the definitions of social support, although diverse, do converge on several points. Socially supportive relationships consist of generally positive interactions, a perceived feeling of belonging to a group where a relatively free exchange occurs, and a sense of mutuality with one another. In more specific terms, House (1981) described social support as encompassing four dimensions: emotional concern, instrumental aid, information and advice, and appraisal for self-evaluation.

Many studies have noted the value of social support systems to health (Broadhead, 1983; Cassel, 1974; Cobb, 1976; Gottlieb, 1981; Hays, 1986; Hirsch, 1979; 1980; Lin, Simeone, Ensel, & Kuo, 1979; Nuckolls, Cassel & Kaplan, 1972). The value of social support seems to be in its direct and mediating effects on health. An implication from these studies is that those who have optimal social support systems tend to lead healthier lives.

Of late, those who study social support have also noted its darker side; namely, that conflict is an inherent part of people's social support systems (Sandler & Barrera, 1984; Tilden & Galyen, 1987; Tilden, 1985). An implication from these studies is that costs as well as benefits of social support need to be considered in the scope of research studies that include social support as a study variable.

Human attachments are organized as systems of support consisting of a structural

component and a functional component. The structural component refers to the properties of the overall network such as size, density, temporality, and multidimensionality. Social network studies have found that optimal networks are larger in size, have many nodes with some degree of density within each node, and have members who can be cited as interacting with a person in more than one way. Conversely, very dense, constricted networks tend to be more conflictual and less positively supportive (Hays, 1986; Hirsch, 1979, 1980). Hirsch (1980) studied 34 women in transition and found that those with dense networks were not as psychologically well adapted as those who had loose-knit networks. He concluded that high density networks put more normative pressure on members to maintain existing roles, thereby providing less support for individuals interested in effecting major changes. May (1986) found that abused women's social support networks were characterized by imbalance, stress, and conflict. McKenna (1985) studied the social network of 112 abused women in an urban area and found that it was dense with family members and found that networks were constricted due to a loss of friends. Mitchell and Hodson (1983) found that social networks of abused women were constricted and dense, and their network members were highly interconnected with their partners. They suggested that network analysis may be useful in understanding the availability of social support for abused women.

According to Hays (1986), the length of the relationship (temporality) seems to influence the qualitative aspect of the social network. Hays (1986) found that as people knew each other longer, there was an increase in the depth and breadth of interpersonal exchange with more self-disclosure and mutual caring. However, Hays (1986) also noted that there was a tendency towards an element of interpersonal conflict associated with temporality.

Multidimensionality is the extent to which network members provide various tangible and intangible aids. Multidimensionality is an important source of social network satisfaction and promotes diversity and personal growth, according to Hirsch (1979; 1980). Those who had multidimensional relationships had a greater likelihood of satisfactory social exchange in more than one way.

It would seem reasonable that a network that was larger in size, more loosely knit, with more multidimensional relationships, and relationships of a longer duration would be criteria for an optimal network structure for abused women as this structure would allow for personal growth and support of changes in beliefs. Further, Mitchell and Trickett (1980) noted that it is usually a combination of these structural characteristics that contributes to psychological adaptation. McKenna (1985) studied the social support network characteristics and developed these structural characteristics into a composite variable and related it to psychological well-being. McKenna (1985) found a positive trend between the network structure composite variable and psychological well-being. Whether a network structure composite variable is related to termination readiness remained unknown.

The functional component of the social support system refers to the quality of the individual relationships such as the interpersonal support and the interpersonal conflict that is perceived within the network. The role that significant others play in a domestic violence situation may influence abused women to leave the relationship. Gelles (1974) suggested that the very thing that may facilitate leaving the relationship, namely a social support system, is what the abused women lack. Walker (1983) confirmed earlier research that indicated that social isolation was a common denominator of domestic violence. More evidence of the importance of significant others emerged in a later study by Herrenkohl, Herrenkohl, and Toedter (1983). They

found a relationship between parents who abused their children and their own prior exposure to abuse as children. However, one factor that helped subjects avoid use of violence in the present family situation was positive support from others. Giles-Sims' (1983) study described how the intergenerational transmission of violence may be ended when families with violent histories affiliate with people without such a history who give support freely and nonjudgmentally. Mitchell and Hodson (1983) found that abused women who have an empathic confidante who was independent of the partner were significantly healthier than those who did not. They also suggested that a social support system may enable the abused women to leave the relationship, and they recommended further study in this area.

May (1986) found that abused women's expectations of support seemed to be influenced by a past history of their social support network and the environment in which they were reared, and that parents served as inadequate role models for establishing and maintaining an adequate social support network. Abused women's expectations of support also seemed to be influenced by their need to talk and have someone who has experienced the problem listen to them nonjudgmentally. With regard to leaving, positive supporters seemed to act as a trigger for leaving whereas conflictual supporters seemed to deter it.

Limandri (1986) shed further light on social support and the abused woman. Although social support was not statistically significant in predicting help-seeking patterns, a positive correlational trend was noted. Further, qualitative data from indepth interviews of abused women revealed that these women tended to vacillate between help-seeking and isolation depending on the increased stress of the relationship and the need to decrease the stress by contacting others. Limandri (1985) suggested that positive regard from helpers may be instrumental in women's ability to leave the relationship.

Interpersonal conflict seems to be a factor in abused women's social networks. Tilden (1988) compared a group of medical auxiliary wives to a group of battered women on levels of support, reciprocity, and conflict. She found statistically significant differences with battered women having lower support, lower reciprocity, and higher conflict than the medical wives.

In summary, a number of critical characteristics about abused women's social support systems have surfaced as a result of a variety of studies. Namely, the characteristics of abused women's social support system seem to influence them in terms of whom they will seek out for help, how they perceive the helpers, and whether or not they will terminate the relationship. Social support may be influential in breaking the intergenerational transmission pattern and appears to be implicated in abused women's readiness to terminate the relationship. However, a mechanism of action is unknown. The structure and function of abused women's social network need to be further investigated since a dense, constricted network that is also conflictual may be inhibitive of termination readiness. Further, depending upon the dissonance among the abused woman's beliefs, an abused woman may constrict or expand her network, she may have networks with different compositions, and she may view them as more or less conflictual.

#### Summary

Studies of abused women should be interpreted cautiously because of convenience sampling (except Straus, Gelles, & Steinmetz, 1980; Straus & Gelles, 1986), self-report information, and variation in definitions and methods. However, converging evidence suggests that the factors which have been consistently identified in abused women's termination of the relationships include sex role orientation, self-esteem, self-efficacy, the magnitude of abuse, and social support. Abused women's sex role orientation has its roots in societal norms. As long as violence is

considered culturally acceptable, abused women's beliefs about their roles and responsibilities may influence their readiness to terminate the relationship. In a patriarchal society, abused women may still believe that their self-esteem and self-efficacy are largely derived by successful performance of domestic work, and this may influence their readiness to terminate the relationship. Because violence is culturally acceptable and because abused women may have been exposed to violence as a part of her family upbringing, their beliefs about the magnitude of abuse may influence readiness to terminate the relationship. Abused women's social support systems, which tend to mirror societal expectations, may continue to inform them about the responsibilities of their roles and this can influence their readiness to terminate the relationship.

Progressing towards readiness to terminate the relationship means that abused women have recognized the gravity of the abusive situation in terms of its seriousness, its risk, and its costs. This takes time and may never occur if they can maintain consonance in their cognitive beliefs (sex role orientation, magnitude of abuse, self-esteem, self-efficacy, and social support) with regard to their situation. However, as the abusive relationship continues and as dissonance in cognitive beliefs continues despite their attempts to regain and maintain consonance, it is more likely that they will become ready to terminate the relationship. The relationship of these cognitive beliefs to readiness to terminate the relationship remained unconfirmed by research and justified further investigation.

### Conceptual Framework

Cognitive theory holds that human beings continually perceive and interpret themselves, others, and the environment. The goal of the cognitive process is



consonance between cognitions which includes the beliefs that are maintained about oneself, one's environment, and one's behavior. People want to take actions that are consonant with their cognitions. However, information sources to which people are continually exposed may make this difficult, and dissonance may occur. The dissonance is accompanied by a feeling of discomfort and people are motivated to regain consonance (Festinger, 1957).

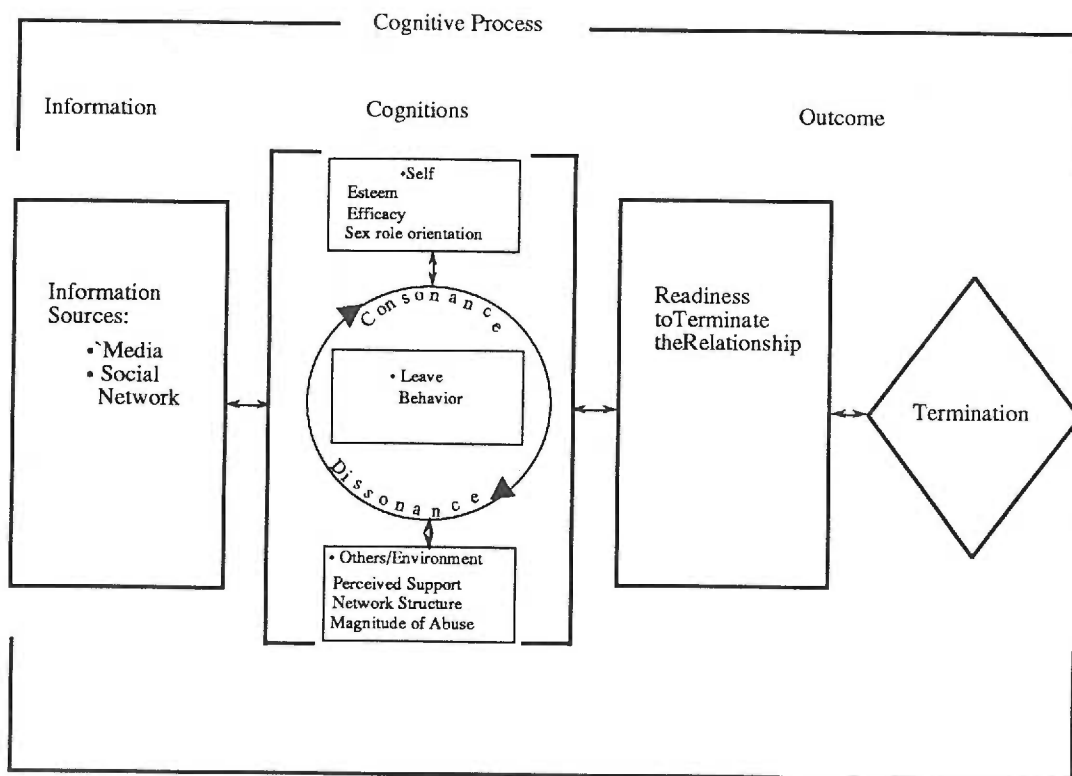
Festinger's (1957) cognitive dissonance theory strives to provide an explanation of what people will do when they become aware that there are inconsistencies in their cognitions. Specifically, cognitive dissonance theory postulates that a person who perceives dissonance attempts to regain consonance by making the following cognition changes: a change in self, a change in others and the environment, and a change in behavior. Those changes perceived as least difficult are made first. The effort and time it takes to reduce dissonance depends upon the intensity of the dissonance and the extent of change required. The willingness to take action can be facilitated or inhibited depending upon the interrelationship of the cognitions.

Cognitive dissonance theory is the framework of this study because abused women who are involved in abusive relationships may experience dissonance which might influence termination readiness. Figure 1 presents a conceptual schema of the abused women's cognitive beliefs and termination readiness using a cognitive dissonance framework. Information that abused women receive may lead from consonance in their beliefs to dissonance in their beliefs about self-esteem, self-efficacy, sex role orientation, social support, the magnitude of abuse, and ultimately, their belief in whether they should leave. Dissonance motivates the abused women to evaluate these cognitions and make changes in beliefs about themselves, others, the environment, and their behavior in order to maintain

consonance. Any changes that they make in one or all of their beliefs may have an effect on the outcome of readiness to terminate the relationship and actual termination. The precise nature of the relationship of these variables to readiness to terminate the relationship remained unknown. However, depending upon the interrelationship of her beliefs, readiness to terminate the relationship may be inhibited or facilitated.

Figure 1

Conceptual Schema of Abused Women's Cognitive Beliefs and Termination Readiness



In summary, cognitive dissonance theory may serve to explain why women might stay in the abusive relationship, and why their readiness to terminate the relationship may remain low. Further, it can help to explain why their readiness increases over

time as dissonance mounts in intensity despite efforts to minimize it. Abused women who become ready to terminate the relationship perceive that the abuse is a recurring pattern, the situation is serious, and the benefits to termination outweigh the costs of termination. Eventually the mounting discomfort that is created by continued inconsistency in their beliefs, despite their attempts to regain consonance, acts as a motivator to increase readiness to terminate the relationship and actual termination.

#### Purpose of Study

This study focused on the relationship of self-esteem, self-efficacy, sex role orientation, social support, and the magnitude of abuse to readiness to terminate the relationship in a sample of abused women in the Northwest regional area.

#### Research Question 1

Do self-esteem, self-efficacy, sex role orientation, perceived social support, and the magnitude of abuse relate to abused women's readiness to terminate the relationship?

#### Research Question 2

Is there a relationship between social network structure characteristics (size, density, temporality, multidimensionality) and readiness to terminate the relationship?

#### Research Question 3

How do abused women describe factors that relate to readiness to terminate the relationship?

## CHAPTER III

### METHODS

Described in this chapter are the methods used in this study of abused women's self-esteem, self-efficacy, social support, sex role orientation, and the magnitude of abuse cognitive beliefs and how these variables contributed to abused women's readiness to terminate the relationship. The chapter includes a discussion of the research design, sample and setting, and data collection methods.

#### Research Design

This study used a nonexperimental design and was exploratory in nature (Pollitt & Hungler, 1984). Information was obtained from a sample of abused women to discover interrelationships that exist among the following variables: self-esteem, self-efficacy, sex role orientation, social support, the magnitude of abuse, and readiness to terminate the relationship.

#### Sample and Choice of Setting

Data were collected in a metropolitan area in the Northwest region of the United States from abused women in domestic violence shelters, transient hotels for women, and support groups. In addition, to attract abused women who resided in the community but who did not use the previously mentioned services, flyers were posted in selected social service agencies, women's health clinics, area shelters, and three college campus bulletin boards. Advertisements were placed in two local newspapers that featured a personals section. Finally, a snowball sampling technique was used to obtain additional study participants from natural leaders in the community and women who had participated in the study. This approach to recruitment aimed to maximize the opportunity to reach a broader, more representative segment of the population of interest (Moser and Kalton, 1972). A numerical coding system was

used to identify and track the findings of each of the subgroups of the sample (see Appendix A).

The size of the sample of abused women was determined by using Cohen and Cohen's (1975) formulas for power analysis when multiple regression analysis is planned. The estimated sample size to achieve statistically significant ( $\alpha = .05$ ) results with a level of power at .80 if the  $R^2 = .25$ , was calculated to be 81 participants. A moderate-to-large effect size of  $f^2 = .20$  was expected (see Appendix B).

The criteria for inclusion of participants in the study served as a means of control of extraneous variables and included: (a) involvement in an intimate heterosexual relationship currently or within the past six months; (b) identification of self as having been abused by an intimate partner two or more times; (c) ability to read, write, and speak English; and (d) age of 18 years or older.

#### Data Collection

Quantitative data were collected from 86 abused women who completed a series of questionnaires. Qualitative data were collected in interviews with a subsample of 20 of these 86 abused women. Several researchers (Haase & Myers, 1988; Jick, 1983; Van Maanen, 1983) stated that the empirical-analytic paradigm emphasizes confirmation of theory by explaining, and the human science paradigm emphasizes discovery and meaning by describing. Triangulation of two types of data facilitated an understanding of termination readiness which neither alone could provide.

#### Procedures for Data Collection

Standardized data collection procedures were followed (see Appendix C). A protocol was used for: (a) phone contacts and letter follow-ups with shelter staff and support group facilitators; (b) in-person contacts with potential participants at shelters

and support groups; (c) phone contacts with potential subjects; and (d) mail-out contacts with shelter staff and potential subjects at these shelters.

Staff at the shelters and support group facilitators were contacted by phone and by letter follow-up to explain the study and ask for permission to approach the women residents or the women who attended their support groups. Upon receipt of agreement from these contacts, potential study participants were approached at the shelter and support group meetings. At the shelters, women were informed about the study and invited to participate toward the end of the house meetings. Recruitment at the support group meetings involved two phases over a two week period. First, the group facilitator asked the group for permission to allow recruitment of group members for this study. At this time, groups were informed about the investigator and the purpose of the study from the group facilitator who read from a fact sheet that was mailed to her. Second, if permission was granted, women were informed again about the study and invited to participate toward the end of the following week's meeting. Recruitment toward the end of these meetings allowed those women who were ineligible or who did not want to participate to leave.

The average shelter stay ranged from 10 days to two weeks. Therefore, a two week return schedule to each shelter was followed. Additionally, women who entered the shelter during the two week interim were given a flyer of notification about the study at the time of intake (see Appendix D). Support group staff were asked to distribute the flyers to any new support group members. A return schedule to support groups was not planned since membership was fairly stable. The flyer provided potential participants with information on how to contact the investigator if interested in participating in the study.

When the potential participants initiated contact by phone, eligibility to participate was determined and a meeting time was scheduled. An answering machine message

was used to encourage potential study participants to leave a message with a safe number where they could be reached.

Finally, staff from two shelters agreed to allow their residents to be recruited by mail only since they were concerned about maintaining strict confidentiality with regard to their residents. Therefore, it was necessary to provide a mail-out protocol which duplicated the in-person protocol (see Appendix E).

### Instruments

The questionnaire booklet (see Appendix F) contained: The Termination Readiness Index (May, 1988), the Tilden Interpersonal Relationships Inventory- interpersonal support and interpersonal conflict subscales (Tilden, 1988), the Index of Spouse Abuse- the physical and nonphysical abuse subscales (Hudson & McIntosh, 1981), the Index of Sex Role Orientation (Dreyer, James, & Woods, 1981), the Self-Efficacy Scale- the global subscale (Sherer et al., 1982), and the Self-Esteem Inventory (Coopersmith, 1987). The Interpersonal Relationships Inventory social network list was combined with Hirsch's (1979) and Norbeck's (1981) salient network analysis questions and organized into a matrix format. The desirability subscale of the Personality Research Form- E (Jackson, 1984) was used to measure social desirability since the relationship between social desirability and some of the instruments used in this study was unreported and/or unclear. The booklet concluded with a demographic section.

To create a booklet that would be well received by the respondents and to optimize the response rate, marketing principles regarding product packaging were used (Kotler, 1984). The average time for completion of these instruments in the booklet was 42 minutes. Table 1 depicts the study concepts, each variable that was measured, and the instrument that measured the variable. An operational definition of the study variables is included with the following description of each of the instruments. A complete definition of terms can be found in Appendix G.

Table 1

Concepts, Variables, and Measures

Concept	Variable	Measure
Termination readiness	Termination readiness score	May Termination Readiness Index
Social support	Interpersonal support score	Tilden Interpersonal Relationships Inventory
	Interpersonal conflict score	Tilden Interpersonal Relationships Inventory
	Network structure index score	Support Network Map
Magnitude of abuse	Physical abuse score	Hudson & McIntosh Index on Spouse Abuse
	Nonphysical abuse score	Hudson & McIntosh Index on Spouse Abuse
Sex role orientation	Sex role orientation score	Dreyer, James, & Woods Index of Sex Role Orientation
Self-efficacy	Global self-efficacy score	Sherer & Maddux Self-Efficacy Scale
Self-esteem	Self-esteem score	Coopersmith Self-Esteem Inventory
Social desirability	Social desirability score	Jackson Desirability Scale- Personality Research Form

Termination Readiness Index (TRI). The TRI (May, 1988) was developed to measure an abused woman's readiness to terminate the relationship based on her perception that a problem exists to which she is vulnerable, that is serious, and that has more costs than benefits. Instrument development of the TRI included two pilot studies to establish evidence of reliability and content and construct validity (May, 1985, 1988). The TRI has been tested with 44 abused women from shelters and support groups who self-selected to participate. The TRI is a 16-item attitudinal questionnaire with a 6-point Likert-type additive scale. High scores indicate high termination readiness. The internal consistency reliability for the 16-item TRI scale was .82. The TRI was assessed for validity using a theory testing approach. The



prediction was supported inferring that the TRI is a valid measure of abused women's readiness to terminate the relationship.

Tilden Interpersonal Relationship Inventory (IPRI). The Tilden Interpersonal Relationships Inventory (Tilden, 1988) is a multidimensional measure of interpersonal relationships with three 13-item subscales measuring support, reciprocity, and conflict. The reliability of the IPRI was demonstrated in multiple studies. Average internal consistency reliability for the support subscale is .92; reciprocity subscale is .83; and conflict subscale is .91. Two week test-retest stability was  $r = .91$ . A principal components factor analysis with varimax rotation ( $n = 340$ ) confirmed the presence of two main factors; support and conflict. The IPRI was also assessed for construct validity using the approaches of contrasted groups, theory testing, and multitrait-multimethod. Multitrait-multimethod analysis failed to support construct validity of the reciprocity subscale. Otherwise, predictions were supported inferring that the IPRI is a valid multidimensional measure of interpersonal relationships. The IPRI is a 5-point Likert-type scale. High scores on each subscale indicate high support, reciprocity, and conflict. Subscales are separate, not additive. Three total subscale scores are derived by adding the respondents' ratings of the respective subscales of 13 items each. Only the support and conflict subscales were administered in the present study.

Social Network Map. Structural properties of the abused women's network were assessed with items modified from Hirsch (1979), Norbeck (1981), and Tilden (1988) and were organized into a matrix map format. Respondents' could list up to 12 members on the map. Economy of effort was a consideration, therefore, 12 was chosen as it was the mean number of network members in previous studies (Limandri, 1985; McKenna, 1985). These properties included: size, temporality,

multidimensionality, and density. Size was determined by counting the total number of members listed on the network list, temporality was determined by averaging the length of time each subject reported knowing each of the twelve members listed on the network map, and multidimensionality was determined by averaging the different kinds of support provided by each of the twelve members listed on the network map. Density was calculated by using Hirsch's (1979) formula (see Appendix H).

Index of Spouse Abuse (ISA). The ISA was developed by Hudson and McIntosh (1981) to identify both physical and nonphysical abuse. A principal components factor analysis with varimax rotation ( $n = 398$ ) confirmed the presence of these two factors. The ISA is a 30 item 5-point Likert-type additive scale with higher numbers corresponding to higher frequency and severity of abuse. ISA items are weighted to denote the level of severity of various forms of abuse. Internal consistency reliability for ISA physical and ISA nonphysical subscales were .90 and .91 respectively. The ISA was tested for construct validity. Predictions were supported lending evidence of validity of the ISA as a measure of physical and nonphysical abuse. Both physical and nonphysical subscales were administered in this study using the formula specified by Hudson and McIntosh (see Appendix H).

Self-Efficacy Scale (SES). The SES was developed by Sherer et al. (1982) to assess an individual's generalized expectation of taking action even in the presence of adverse circumstances. The SES has two subscales, the general self-efficacy subscale and the social self-efficacy subscale. Both subscales have adequate internal consistency reliability estimates of .86 and .71 respectively. The SES was tested for construct validity using a theory testing approach. Predictions were supported inferring that the SES is a valid measure of one's expectation of personal ability to initiate and persist in behavior. The SES is a 5-point Likert-type additive scale. A

higher score is indicative of higher self-efficacy. Only the global self-efficacy subscale scores were used in this study.

Index of Sex Role Orientation (ISRO). Dreyer, Woods, & James (1981) developed the ISRO which measures women's sex-role orientation. The ISRO contains three subscales: duality of family responsibilities and a career, male/female division of household responsibilities, and women's work roles outside the home. A split-half reliability estimate of .92 and test-retest stability estimate of .62 (30 day time period) was reported. Validity of the ISRO as a measure of traditional versus modern views of women's roles in contemporary American society was inferred based on supported predictions from contrasted groups validity testing. The ISRO is a 16-item 5-point Likert-type additive scale. The higher the score, the more nontraditional the person's sex role orientation. Only the total ISRO score was used in this study.

Self-Esteem Inventory (SEI). The SEI adult form (Coopersmith, 1987) was designed to measure evaluative attitudes toward the self in social, family, and personal areas of experience. There are four subscales measuring the general self, social self, home, and occupational/ academic. The adult form is used with persons aged sixteen and above and consists of 25 dichotomous items adapted from the School Form. The school form items were deductively derived and extensively tested for validity on children 15 years of age or younger. Changes in the items are minimal between the School form and the Adult form and the correlation between the two forms is high:  $r = .80$ . The internal consistency reliability estimate for the adult SEI across age, ethnicity, and gender subgroups ranged from .79 to .85. There was no validity testing reported for the adult form. The SEI is an additive scale with one total score. A high score is indicative of high self-esteem. Only the total SEI score was used in this study.

Social Desirability. The Personality Research Form- PRF-E (Jackson, 1984) measures the tendency for subjects to respond desirably or undesirably. Items which reflected psychopathology were deleted (Jackson, 1984). The PRF-E desirability subscale is a 16-item true/false social desirability additive scale with one total score. A high score indicates a tendency to present a favorable picture of the self. The KR-20 reliability estimate for the 16-item scale ranges from .52 to .68.

#### Recruitment and Interview Method

Qualitative data about termination readiness were sought from a subsample of the study participants. To yield a subsample that was representative of the range of termination readiness, a visual analog (Scott & Huskisson, 1979) was used. The visual analog served as a screening device to stratify the subsample into less ready (0 mm to 33.3 mm), more ready (33.4 mm to 66.6 mm), and highly ready (66.7 mm to 100 mm) levels. All 86 study participants were given a questionnaire booklet and a visual analog. The visual analog was on a separate piece of paper so the rating could be easily scanned when respondents returned them with the completed questionnaire booklet. All respondents were asked to complete the visual analog prior to opening the questionnaire booklet. Each respondent was instructed to draw a vertical mark through the 100 mm line to denote where they believed they were (from low to high) with regard to readiness to end the relationship (see Appendix I). Thus, on the basis of the visual analog rating, some study participants were invited to participate in an interview. Twenty subjects who ranged from lower to higher readiness participated in an interview. Every successive study participant in each category of termination readiness was invited.

The focused interview (Merton, Fiske & Kendall, 1960) was used to illuminate the experience, in the fullest sense, by discovering the meaning which leaving had for the respondent. With this method, respondents were the experts of the situation; they

informed the investigator. During the interview process, the respondents were asked about their situation, how ready they felt about terminating the relationship, and their opinions about factors that they believed would contribute to termination readiness. The semi-structured interview schedule for this phase of the study (see Appendix J) was designed to: (a) build rapport by first gaining a sense of what the relationship was like for the respondent, how this compared with what she expected, and what she thought about her relationship at the point of the interview; (b) elicit the respondent's process of becoming ready to terminate the relationship; and (c) focus on factors that she described in relation to readiness to terminate the relationship. Questions and probes were designed to maintain the focus on the process and to discover more about the meaning of the readiness process and the factors involved in termination readiness for the respondent.

#### Protection of Human Study Participants

There were distinct ethical issues that were considered since study participants were being solicited from vulnerable groups to complete a questionnaire booklet and some were asked to participate in an interview. With regard to the interview, Cowles (1988) and Munhall (1988) stated that the researcher is the main "tool" of qualitative research and as such the potential exists for biased questions, unasked questions, and influencing the respondents. Additionally, the nurse researcher must view consent as a process that is open to re-negotiation between the researcher and the participant, especially when sensitive areas are being explored as in this study. Further, the nurse researcher must be prepared to risk participant attrition if a participant's welfare seems jeopardized by continuing the research process. The investigator of this study worked with abused women in shelters for eight years and felt fully prepared to handle the issues associated with interviewing a sample of abused women. This investigator has had many years of data collection experience and women have been eager to

volunteer and pleased to contribute. In return, they have had the opportunity to talk about their situation and validate their beliefs. Other researchers have also found this to be the case in working with abused women (Limandri, 1985; McKenna, 1985; Walker, 1983).

Several measures were taken to maintain confidentiality. Respondents were anonymous and code numbers were assigned to questionnaires and audiotapes for data analysis purposes only. All data were kept in a locked closet and audiotapes were erased after transcription was completed. All respondents signed consent forms which were kept in a separate file away from the questionnaire booklets and audiotapes. During the interviews, respondents gave only their first names. They were asked to fill out an envelope with a safe permanent address so that thank-you letters and study summaries could be sent to them. These envelopes were placed in a separate file in a locked cabinet. This study was reviewed and approved by the Oregon Health Sciences University Committee on Human Research (see Appendix K).

#### Remuneration to Study Participants

Payment to participants for time spent participating in a research study has met with much controversy in the literature. The concern is that researchers are bribing participants and findings may be affected. The most common form of "payment" seems to be a copy of the study summary. However, this study drew its participants from a population that is typically in a "down and out" position with problems that include inadequate tangible and intangible aids. Therefore, a remuneration which aimed to provide an emotional "lift" was used. The investigator offered a wallet-sized packet of positive affirmation cards and a letter of thanks as a token of appreciation for participation in this study. In addition, participants also received a study summary.

## Summary

This study employed an exploratory nonexperimental design to answer the research questions about the relationship that sex role orientation, magnitude of abuse, self-esteem, self-efficacy, and social support had to readiness to terminate the relationship; the relationship of social network structure characteristics to readiness to terminate the relationship; and, how abused women described factors that relate to readiness to terminate the relationship. Cognitive dissonance theory (Festinger, 1957) served as a guideline for the selection of the variables expected to influence abused women's readiness to terminate the relationship. Sample size was determined *a priori* using Cohen and Cohen's (1975) power analysis formula. The sample of abused women was nonprobabilistic. Eighty-six abused women were recruited from shelters, support groups, and community solicitation to participate in the study. Triangulation of quantitative and qualitative data collection procedures facilitated the understanding of readiness to terminate the relationship. Data collection commenced with the approval of the study by the Oregon Health Sciences University Committee on Human Research. Data collection procedures took the sensitivity of the subject matter and the vulnerability of the sample into consideration. Confidentiality was maintained by using code numbers on questionnaires and securing data in a locked place.

## CHAPTER IV

### RESULTS

The purpose of this chapter is to report findings. Data analysis procedures for quantitative and qualitative data are described. A description of the sample is provided prior to the data analysis of the research questions.

#### Sample Description

The study sample consisted of 86 women from a Northwest region metropolitan area who defined themselves as abused by a husband or man partner currently or within six months. All women reported recurrent physical abuse and emotional abuse.

The sample was derived over a six month period in 1989. One hundred and thirty-one women were approached and 106 were eligible to participate. The response rate from the eligible pool of women was 81 % (n = 86). Table 2 depicts the number of respondents comprising the total sample who completed the questionnaires only, and the response rate categorized by source. This table also illustrates the number of respondents in the subsample who responded to an interview after completing a questionnaire booklet, and the response rate categorized by source.

Table 2

Number of Subjects Categorized by Source and Response Rate

Source	Number of Sources	# of Respondents in Large Sample (n=86)	Response rate (%)	# Respondents in Subsample (n=20)	Response Rate (%)
Shelters	5	43	92	6	15
Support groups	3	27	55	1	4
Community solicitation		16	60	13	81



Characteristics of some of those 26 women who were ineligible are known. One woman completed a questionnaire with a notation that the abusive relationship was terminated 8 years ago. Eleven women who responded to the personal advertisement were ineligible because they reported emotional but not physical abuse ( $n = 7$ ); they were in a lesbian relationship ( $n = 1$ ); the abuser was a parent or other relative ( $n = 1$ ); or their involvement in the relationship exceeded the six month time period ( $n = 2$ ). Both eligible and ineligible women were given appropriate referral information prior to concluding the conversation.

A frequency distribution of the characteristics of the sample is displayed on Table 3 (see Appendix L). Participants had a mean age of 32.6 years and a mean education of 12.7 years. The majority of respondents were white (87 %). Eighty-two percent were married or partnered at the time of the study and 79 % had children. The average number of children was two and almost half of the mothers had children of pre-school age. Slightly more than one-third of the women were employed. Sources of income for unemployed women were welfare assistance (35 %), and husband/partner (24 %). A major portion of the respondents reported residing in the metropolitan area although some reported residing in a more rural area. Fifty-three percent of the respondents reported that they never saw their parents hitting one another. In contrast, 84 % responded affirmatively to the presence of violence in their husband/partner's family of origin. On Table 4, the demographic characteristics of the study participants are compared to samples of abused women in other studies. The breadth of backgrounds of abused women is evident on this table. As can be seen, the characteristics of the study sample are very similar to that of other groups of abused women.

Table 4  
Comparison of Abused Home from Selected Studies (%)

Variable	Study number*					
	1	2	3	4	5	6
Mean age	29.9	25.0	29.1	32.2	31.0	32.6
Ethnicity						
Caucasian	77.9	64.0	94.0	80.0	68.0	87.0
Black	14.1	22.0	-	6.0	16.1	8.0
Hispanic	3.7	10.0	-	8.0	8.9	4.0
Asian	.9	1.0	3.0	-	2.7	-
Other	3.4	4.0	3.0	6.0	4.5	1.0
Marital Status						
Married	-	72.0	61.0	24.0	30.4	50.0
Separated/divorced	29.0	10.0	13.0	65.0	55.0	17.0
Cohabiting	-	13.0	26.0	-	12.5	32.0
Other	-	2.0	-	9.0	1.8	1.0
Occupation						
Unemployed	67.7	56.0	8.0	48.0	48.2	37.0
Education						
< High school	30.6	39.0	29.0	12.0	13.3	5.0
High school with some college	60.8	56.0	67.0	65.0	67.0	86.0
College/postgraduate	8.6	5.0	-	23.0	19.7	9.0

Note: \*1 = Pagelow (1981), n = 350; 2 = Stacey & Shupe (1983), n = 542; 3 = Giles-Sims (1983), n = 31; 4 = Walker (1984), n = 403; 5 = McKenna (1985), n = 112; 6 = May (1990), n = 86.

#### Analysis of Quantitative Data

The sample was derived from shelters, support groups, community solicitation, and one segment of the sample was derived by mail. Since the differences in methods might result in differences in subjects, a series of t-tests was conducted comparing the four respective groups with one another on each of the cognitive beliefs mean scale scores for a total of 36 t-tests. T-test analysis was chosen instead of ANOVA because of the unequal number of subjects in each group. There were no statistically

significant differences between the groups, therefore the participants were combined into one group for analysis.

### Multiple Regression Analysis

Research question 1 was, “Do self-esteem, self-efficacy, social support, magnitude of abuse, and sex role orientation relate to abused women’s readiness to terminate the relationship? Standard multiple regression was chosen to explore the interrelationship of the set of independent variables (interpersonal support, interpersonal conflict, self-esteem, self-efficacy, sex role orientation, physical and nonphysical abuse) with the termination readiness dependent variable. It was considered premature to conduct hierarchical multiple regression analysis since there was no theoretical basis for ordering the variables (Pedhazur, 1982). Multiple regression analysis assumes that instruments used to measure the variables are reliable, that low correlations between independent variables exist, that the variables have a normal distribution, and that there is linearity of the variables. Therefore, these assumptions were tested prior to regression analysis.

Reliability estimates for each of the study instruments are displayed on Table 5.

Table 5

### Reliability of Scales

	Cronbach’s reliability coefficient alpha
Index of Sex Role Orientation	.79
Self-Esteem Inventory	.86
Index of Spouse Abuse - physical abuse subscale	.82
Index of Spouse Abuse - nonphysical abuse subscale	.85
Interpersonal Relationship Inventory - support subscale	.91
Interpersonal Relationship Inventory - conflict subscale	.91
Self-Efficacy Scale - global subscale	.79
Termination Readiness Index - general subscale	.93
Personality Research Form - desirability subscale	.64

The reliability coefficient alphas met acceptable levels and were comparable to previously reported reliability estimates for these scales except for the PRF, which was marginally acceptable for use in research (Nunnally, 1978).

Each of the study variables was submitted to zero-order correlations and is displayed in Table 6. Multicollinearity was not a problem since there were no correlations between independent variables that were higher than .58 (Nunnally, 1978).

Table 6

Zero-Order Correlations

	Sex Role Orientation	Self- Esteem	Self- Efficacy	Inter. Support	Inter. Conflict	Physical Abuse	Nonphysical Abuse	Desirability
Termination Readiness	.23***	.20****	.05	.24***	-.13	.28**	.25***	.05
Sex Role Orientation		.17	.26***	.05	-.05	-.15	-.08	.09
Self-Esteem			.51*	.44*	-.50*	.03	.01	.68*
Self-Efficacy				.17	-.10	.01	.08	.53*
Interpersonal Support					-.26***	-.02	-.01	.35**
Interpersonal Conflict						-.09	-.02	.40*
Physical Abuse							.58*	.05
Nonphysical Abuse								.00

p<.001\* p<.01\*\* p<.05\*\*\* p<.1\*\*\*\*

Scatterplots between each pair of variables indicated linear relationships.

Frequency distributions indicated skewing of the dependent variable scores in relation to each of the independent variable scores. Because no one category of termination readiness (low, moderate, high) contained more than 80 % of the participants and multiple regression is a robust statistic with respect to some deviation from normality (Pedhazur, 1982; Tabachnik & Fidell, 1983), log transformations were not performed.

Standardized residuals were analyzed and two extreme outliers were omitted from data analysis using Pedhazur's (1982) criteria as a guideline. Thus the quantitative data analysis was conducted on a sample size of 84.

To identify demographic variables upon which to partial, the zero-order correlations for continuous variables, such as age and total years of education, were assessed for their relationship with termination readiness. There were no statistically significant correlations between any of the continuous demographic variables and termination readiness.

Categorical demographic variables, such as employment status and the length of time respondents stayed away from their husband/partners, were submitted to crosstabulations and statistical tests of association. One categorical demographic variable ( the length of time respondents stayed away from their husband/partners) was associated with the TRI at a statistically significant level (Chi-square = 3.6,  $p = .05$ ,  $df = 1$ ;  $\Phi = .24$ ).

Forced multiple regression analysis was performed using the CRUNCH (1987) statistical package. Initially, the number of days respondents stayed away from their husband/partners was dummy coded and forced into the multiple regression equation as the first step to control for its effects. Then, the unique contribution in termination readiness that can be explained by sex role orientation, interpersonal support, interpersonal conflict, physical abuse, nonphysical abuse, self-esteem, and self-efficacy operating jointly was calculated. This set of cognitive beliefs variables was forced into the second step.

A multiple regression equation containing all the variables explained 31 % of the variance in termination readiness. The control variable accounted for 4 %. Physical abuse, nonphysical abuse, sex role orientation, interpersonal support,

interpersonal conflict, self-esteem, and self-efficacy operated jointly to account for an additional 27 % of the variance of termination readiness at a statistically significant level. However, only the length of time away from the husband/partner, sex role orientation, physical abuse, and interpersonal support were statistically significant. Thus, this set of cognitive beliefs contributes significantly to termination readiness with this sample. Table 7 summarizes the multiple regression analysis results.

Table 7

Multiple Regression Analysis - Abused Women - Independent Variables with Dependent Variable (n=84)

Dependent Variable - Termination Readiness										
Step	Variables	b wt.	Beta	SE	Multiple R	R <sup>2</sup>	R <sup>2</sup> Change	SS	MSS	F
1					.20	.04	.04	3.91	3.91	3.6***
	Staying Away	.410***	.184	.211				85.61	1.07	
2					.56	.31	.27	26.92	3.37	4.0*
								62.59	.858	
					Adj. R <sup>2</sup>	.25				
	Sex Role	.554**	.284	.202						
	Inter. Support	.248***	.205	.123						
	Inter. Conflict	.038	.029	.154						
	Physical Abuse	.015**	.296	.006						
	Nonphysical Abuse	.008	.153	.006						
	Self-Esteem	.005	.109	.006						
	Self-Efficacy	-.205	-.107	.233						

Constant = .492

Note: CRUNCH uses the error term of the step which has the most variables to test the significance of R-square change

\*p<.001    \*\*p<.01    \*\*\*p<.05

### Network Structure Analysis

Research question 2 was, “Is there a relationship between social network structure characteristics and readiness to terminate the relationship? An analysis of the abused women’s network structures was conducted. Frequencies were performed on the network structure variables. Unlike the minimal amount of missing data for the questionnaires in the booklet, the missing data for the network structure variables were moderate. The statistics of the network structure were based on a response rate range of 69 (81 %) to 76 (87 %) of the sample except with regard to size which was based on a 100 % response rate. Structural variables were skewed but not to the extent that log transformations were necessary (Tabachnik & Fidell, 1984). Table 8 (see Appendix M) details the network structure characteristics of size, overall network density, specific density of the network with regard to the husband/partner, temporality, multidimensionality, frequency of contact, and the effect of support loss. Network size was derived from Tilden’s Network List (1988) which could accommodate a list of up to 25 names. Size ranged from 1 to 23 network members with a mean network size of 9.7 members per woman.

Density, temporality, and multidimensionality mean scores were calculated from a network map matrix which could accommodate up to 12 of the possible 25 network members listed on the network list. First, overall and specific densities were calculated (see Appendix H for formulas). Overall density ranged from 10.6 % to 100 % with a mean overall density of 67.3 % per woman. The specific density percentage of the respondents’ network members who also knew the husband/partners ranged between 0 % and 100 % with a mean specific density of 79.7 % per woman. The average temporality ranged from 1.5 to 31.5 years with a mean relationship length of 11.9 years per woman. The average multidimensionality ranged from 0 to 10 activities per network members with a mean of 2.7 activities per network member, per woman.

Multidimensionality also was divided into tangible and intangible categories.

Fifty-five percent of the aid consisted of such intangible aids as emotional support, a listening ear, and positive feedback. Frequency of contact per month was converted to the mean number of times each subject had visit, phone, and letter contact with network members every month. The average frequency of contact ranged from 2 to 30 times per month with a mean contact per month of 13.6 times per woman. Additionally, 39.7 % of the respondents had contact with at least one of their network members on a daily basis. The daily contacts tended to be their children and newly acquired friends.

The respondents also reported on network constriction within the last year and the degree to which that affected them. Approximately 91 % of the sample reported network member loss within the past year with loss of friends explaining most of the constriction (69 %). Of those who responded affirmatively to losing network members, 71.4 % claimed that this loss in support affected them moderately to a great deal. Table 9 depicts the percentage of network members by source. Families and husband/partners appeared to be the predominant sources of support. However, husband/partners may not actually offer the support that these findings would indicate since completion of the network map required that respondents list their husband/partners in order to obtain a measure for specific density.

Table 9

Sources of Support for Abused Women

<u>Source Category</u>	<u>Percentage</u>
Husband/Partner	91.7
Family	57.8
Friends	32.1
Work Associates	4.9
Service providers	2.2
Other	3.0



For abused women, a network structure that is larger in size, with more multidimensional relationships, relationships of longer duration, and less density would be optimal (McKenna, 1985; Mitchell & Trickett, 1980). These network structure characteristics comprised the network structure index (NSI).

To assess the relationship of each of the network structure characteristics with termination readiness and the NSI with termination readiness, two phases of analysis were necessary. During the first phase, the sample scores were divided into thirds, and assigned a value of 1 (low), 2 (moderate), or 3 (high) for size, temporality, and multidimensionality depending upon the extent to which each of the respondent's network structure characteristics were less or more optimal. Overall density was reverse coded since a lower density would be valued at 3 and vice versa as density increases. Thus, four network structure index variables were created. Frequency distributions were performed on these new variables and slight skewing was noted. The means for size, density, temporality, and multidimensionality were 2.0, 1.8, 1.6, and 1.7 respectively.

Scatterplots were performed between each of the newly created network structure variables and termination readiness to test the assumption of linearity. Results indicated that linearity was apparent. Each of these variables was assessed for their relationship with termination readiness using Pearson product moment zero-order correlation analysis. There were no statistically significant correlations when each was paired with termination readiness.

During the second phase of assessing for the relationship of network structure characteristics with termination readiness, the network structure index score for each subject was created by summing size, temporality, multidimensionality, and density scores. Total scores could range from 4 to 12 with 12 indicating that the network

structure is most optimal. Table 10 depicts the NSI scores which ranged from 5 to 11 with a mean score of 7.2 per woman. The NSI scores were submitted to Pearson product moment zero-order correlation analysis paired with termination readiness. No statistically significant correlation existed between the NSI and termination readiness scores.

Table 10  
Frequency Distribution of Network Structure Index (NSI)

NSI Score	Percentage
5-6	24.4
7-8	51.4
9-10	21.3
11	2.9

Finally size, density, temporality, and multidimensionality structural characteristics were submitted to Pearson product moment zero-order correlation analysis each paired with network functional components of interpersonal support and interpersonal conflict. None of the correlations were statistically significant except for the statistically significant correlations of interpersonal support with size ( $r = .31$ ,  $p < .01$ ) and multidimensionality ( $r = .39$ ,  $p < .001$ ) respectively. Thus, neither network structure characteristics nor the network structure index correlated significantly with termination readiness. Further, when network structure characteristics were submitted to correlation analysis with the network functional variables of interpersonal support and interpersonal conflict, only size and multidimensionality correlated positively at a statistically significant level with interpersonal support.

#### Analysis of Qualitative Data

Research question 3 was, "How do abused women describe factors that relate to

readiness to terminate the relationship?" A focused interview was conducted with a subsample of twenty abused women. Scores on the visual analog measure, which was used as a screening tool to derive a subsample that ranged from low to high termination readiness, ranged from 0 mm to 100 mm with a mean of 74.2 mm. Those interviewed ranged from low to high termination readiness in the same proportions as the large sample. The number of those in the total sample that scored low, moderate, and high readiness were 12 (14 %), 16 (22 %), and 48 (56 %) respectively. Therefore, the number of those selected in the subsample that scored low, moderate, and high readiness were 3 (15 %), 5 (25 %), and 12 (60 %) respectively. The visual analog scores were correlated with the termination readiness scores using Pearson's product moment zero-order correlation analysis to assess its validity as a screening tool. There was a statistically significant relationship between the visual analog measure of termination readiness and the TRI score ( $r = .80, p < .000$ ) thus providing some evidence for its validity.

The focused interviews were tape recorded and a modified verbatim transcription of each interview was entered into a computerized interview data form as shown in Appendix N, and later printed out for review. The data form categorized each respondent's description of her situation into several areas including her thoughts and beliefs about the process of becoming ready to terminate the relationship, and factors that inhibit and facilitate termination readiness. A list of these factors was compiled during the transcript review process. Illustrations of a particular factor (and their addresses- i.e., ID number, page, and line) were highlighted according to a color coded system. Each illustration was further categorized according to their exemplification of facilitation or inhibition of termination readiness.

The results from the qualitative data analysis confirmed that abused women's termination readiness is a process that takes time and energy to identify the abuse in

their relationships, weigh the options, increase self-awareness, and change cognitive beliefs. The following example illustrates this.

"I think [termination] readiness is a process. It just can't be overnight- you have to choose friends that will help you, you have to build your personal resources up like I'm trying to do now by going to college!"

Further, the respondents described how commitment to their husband/partners, the seriousness of the beatings, their self-esteem, their inner strength, and people they turned to for help contributed to termination readiness. Additional variables were also described by respondents which were not part of the quantitative model. All variables described by the respondents fit logically under three larger constructs which emerged from the qualitative data. These constructs, which were interrelated, were couple relationship trajectory, dissonance development and reduction attempts, and personal and social beliefs changes.

The couple relationship trajectory construct seemed to involve four phases: deference to the man, enmeshment, separation, and autonomy. During the deference and enmeshment phases, the respondents tended to place emphasis on dedicating themselves to making the relationship work. Termination readiness, therefore, was lower as the women attempted to reduce dissonance in an effort to maintain the relationship. During the next two phases, respondents seemed to place emphasis on creating a vision for themselves that excluded their husband/partners. Termination readiness, therefore, was higher with dissonance reduction efforts now directed toward separation and autonomy.

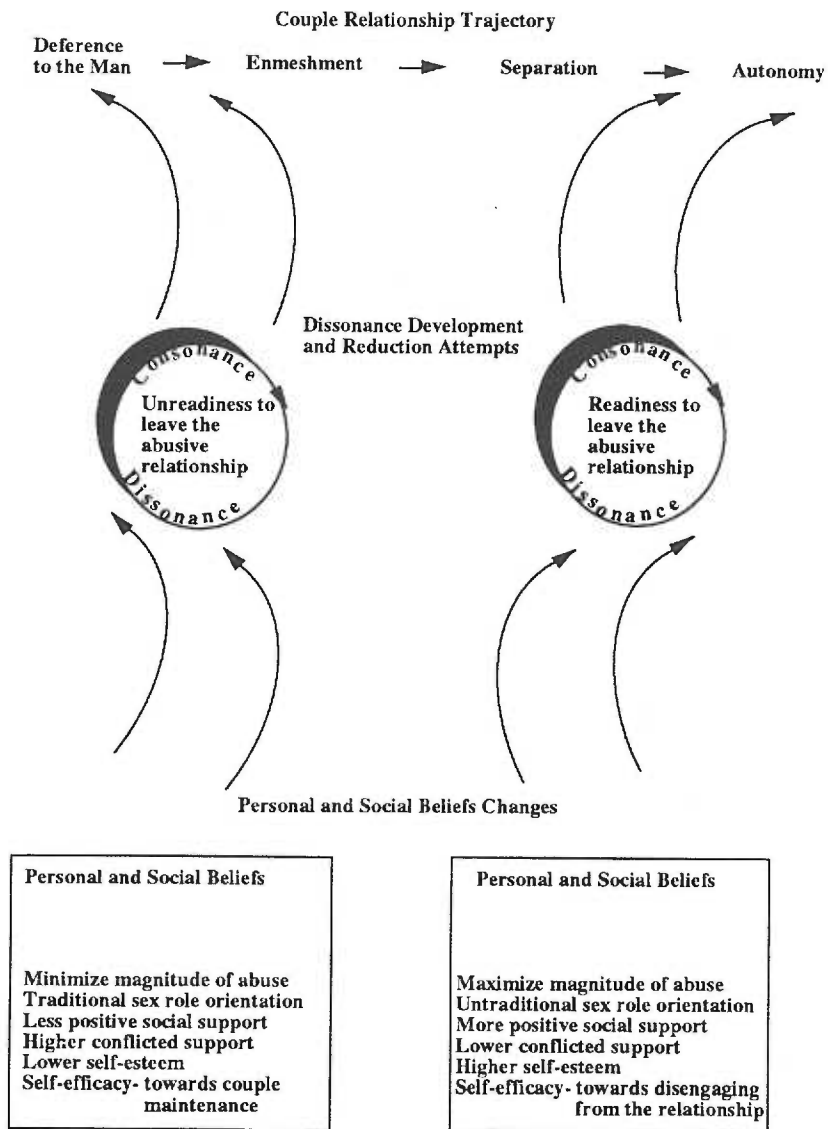
The abuse in the respondents' relationships seemed to serve as the basis for dissonance development. When there was an awareness of emotional and cognitive incongruence, attempts at reducing dissonance involved believing the abuse was minimal while they were committed to couple maintenance and termination readiness was lower. Conversely, attempts at reducing dissonance involved recognizing the extreme

magnitude of the abuse and changing their commitment to attaining autonomy and termination readiness was higher.

Personal and social beliefs were negatively effected when beliefs were changed to accomodate the abusive situation and to maintain consonance. Personal and social beliefs were positively effected when beliefs were changed to accomodate an autonomous perspective and to maintain consonance. Figure 2 depicts the conceptual model of these constructs.

Figure 2

Conceptual Model



First, the couple relationship trajectory is discussed. Next, dissonance development and reduction attempts are discussed. Finally, personal and social beliefs are discussed

### Couple Relationship Trajectory

Deference to the man. Respondents characterized the beginning of their relationship to be based on deference to the man. This deference seemed to be associated with a traditional sex role orientation which was ingrained from childhood and reinforced by society. During this initial phase of the couple relationship, most of the respondents reported believing that they had a responsibility to perform certain tasks, to fulfill certain obligations, and to enjoy certain benefits or consequences based on what they had learned as a part of the gender specific role socialization. The respondents felt obligated to attain the ideal standards for family living including maintaining family cohesiveness. These beliefs seemed to inhibit termination readiness. Examples follow.

“I thought, I’ll get married, I’ll be a perfect wife, the perfect mother, and we’ll have a nice house- the ideal standard. He’d come home and yell and holler and I’d take it and didn’t complain and I would try to be nice- even later when he beat me. Be the good wife and calm him down and try to make him happy wondering why I was failing because I couldn’t.”

“I’ve been trying to serve everybody. I believe in two parents staying together [for the kids]...”

Traditional sex role orientation beliefs during this beginning phase of the trajectory prevailed for some even when they had careers and perceived themselves as self-assured and independent. Respondents tended to focus their energy on relationship maintenance often assuming additional responsibilities and adapting their behavior. The power inequity and the negative effect that traditional beliefs can have on self-esteem is evident in these examples as well.

“I was working [employed] full time. I had to come home and cook dinner and keep things running smoothly emotionally and take care of our son. I was always the one working to fix what was wrong.”

“I was raised old fashioned. I was raised that the husband is the be-all and end-all and he had the total say in the household. What he says goes whether you like it or not. His is the final authority. I became very independent and self-assured but when I got married, that was wiped out... It took me years to build up my self-esteem and in one month [after marriage] it was gone.”

Traditional sex role orientation beliefs seemed to limit these respondents’ perceptions of their options. A traditional sex role orientation also allowed for the possibility of abuse in a partnership or marriage, especially when abuse was a by-product of theirs and/or their husband/partners’ childhood experiences which inhibited termination readiness. This is illustrated in the following examples.

“I think because of the marriage commitment, I think that’s why I’m even still with him. I am ready to hold up my part of the bargain...I forgave him [the abuse] because I married him, you know, for better or for worse until death do us part... “

“...I grew up watching my Dad abuse my Mom and she never said anything. She never even called the police. So she put up with it and I think that’s what I did. When I met him [husband] everything went downhill... He [husband] had a miserable childhood too.”

Enmeshment. Some of the respondents described how they had merged with their husband/partners and felt as if they were “one unit.” It was evident that enmeshment was a dimension of the trajectory when some respondents described how dependency needs were a main characteristic of the relationship during the beginning phase of the trajectory. For example:

“I feel sorry for him. I feel like I raised him. He’s dependent on me. He doesn’t know how to depend on himself. When I left him before, he tried to kill himself!”

“I look upon myself as a co-dependent person that looks for people to take care of. I think the caretaking enabling behavior that women are socialized into can be an inhibiting factor [to termination readiness].”

Respondents sacrificed outside relationships to focus additional energy on maintaining their marriage/partnership. The tendency for some to depend on one another for support to the exclusion of others seemed to accompany enmeshment and is demonstrated in the following examples.

“I’ve been ready [to terminate the relationship]. It’s just that I get lonely or something and he provides some kind of support.”

“We moved away from all of my contacts and I really didn’t have access to friends or professional help anymore. I turned more to him for support.”

The absence of personal boundary setting also occurred as a part of enmeshment. Some of the respondents described how their husband/partners violated their personal space. For some respondents, this was viewed as normal and reportedly had repercussions in terms of self-esteem development. An illustration of the absence of personal boundaries follows.

“I set some boundary lines up. It seemed like I had to keep changing them and gradually he violated all of them...The [inner] strength allows you to put up the lines...you get this strength from being nurtured and taught about this as a child [I never got it].”



“I don’t know who I am or what I’m supposed to do because I grew up in such a fractured household... I thought all this stuff was normal since I grew up with it. I thought all this happened in everybody’s family but that no one talked about it just like I didn’t talk about it.”

Separation. Beyond enmeshment, there is evidence of a movement towards a self-versus an other-orientation while some respondents correspondingly began to consider the aspects of reducing the enmeshment and disengaging from the man. This movement seemed to facilitate termination readiness. Based on respondents’ descriptions, it seemed as if separation from the significant other began as a cognitive event rather than an actual physical removal of the self from the situation as this example shows.

“I haven’t physically gotten out of the situation but the situation has changed. I have changed. The whole perspective has changed but still, he has the same problems. He has never dealt with his problems and I’m beginning to see that he has problems. It’s not just me, it’s him too.”

Rehearsals seemed to be a part of the separation process serving as a drill for leaving the relationship. Rehearsals were characterized by how respondents would disengage from the relationship including developing plans which detailed such things as how they would obtain a restraining order, train for a job, build financial security, return to school, attend counseling sessions, and protect and nurture their children. Plans were self- rather than other-oriented. A few respondents described how they rehearsed separation through journal writing. Examples follow.

“I’m planning things...I began to pull away months before I actually tried...I’ve decided to let go and move ahead...”

“Sometimes I think I’ve come a long way. I have a lot of insight into myself...I do a lot of introspection and a lot of journal writing, which I was careful not to let him find, and I knew I was miserable...I began to do reading and as I read, and I also talked to people at the crisis line, I was able to tolerate less. This was responsible for my shifting beliefs.”

“I see that it’s [abuse] affecting my daughter. She doesn’t have such a good opinion of herself.”

Infidelity seemed to facilitate termination readiness as described by a few of the respondents. The discovery of infidelity may provide additional insight about their situation. An illustration follows.

“I cannot handle being cheated on...that was the start of my loss of trust for him. This was a pattern with him. If he lied and got caught, he became defensive and accusatory.”

Autonomy. A sense of autonomy seemed to occur with disengagement. The focus on the self and the feeling of autonomy seemed to be accentuated after a traumatic event of some kind that shattered and changed their perceptions about long held beliefs. These events seemed to facilitate termination readiness further.

“I almost killed myself [because of the situation] and ended up on a psychiatric unit. I began to realize that I could take more charge of things. I realized I could control my own life.”

“I began to see myself as a separate unit...that’s important because I used to see us as one unit.”

“Along the way I discovered some things about myself. I didn’t really see the strengths I had at first... I think I’m growing up a little bit. It’s time for me, it’s time for me [smiled and laughed softly].”

“I am changing my traditional beliefs...I want to be a good role model for my children.”

Some respondents felt as if they needed to devise a means of keeping their distance or maintaining a barrier of some kind to help them maintain separateness and autonomy. They were aware that they had to make an effort to stay away from the abuser as these examples indicate.

“He says he’s going to try and kill me. So, that means I don’t place myself in stupid situations. I don’t agree to meet him anywhere; I don’t go to a couple of people’s places because they are friends of both of ours; I don’t go to my brother’s because he believes we [she and husband] should get back together.”

“I feel weaker now, knowing that I’m leaving the shelter. I need to stay away from him and avoid all contact with him.”

“To get out of town and stay away from him would make me more ready...”

#### Dissonance Development and Reduction

Dissonance development and reduction attempts emerged as another major construct. Respondents described the development of dissonance as an awareness that what they knew and felt about the abusive situation was inconsistent. There was a sense of confusion about the abusive relationship as is evident in the following statements.

“...My ideas started getting confused with other people’s ideas and my morals and standards went down. I started smoking again and hanging out with all his friends (in bars). I was making choices that weren’t the choices I used to make.”

“There is a thing about being ready and not being ready- definitely. I call this process the transition of confusion. You start weighing your options when it gets bad [abuse]- ‘If I go here what will I do, or if I go there what will I do?’”

“I’ve thought about leaving him since [10 months prior to the interview] when he beat me so bad that I was in bed for a week. I’m afraid of him but I’m not ready to leave yet...Basically, I still love him but I find that hard to believe because he’s been so terrible to me.”

Dissonance reduction efforts involved making changes in their cognitions about the abusive situation. One tactic was to view the physical and nonphysical abuse as minimal. This tended to occur in the early enmeshment phase of the relationship and termination readiness seemed inhibited. Examples follow.

“He would grab me and get a little rough and he wouldn’t let up when he tickled me- he kept at it until I was in tears but I didn’t see it as abuse...It wasn’t clicking. I wasn’t really afraid of him.”

“When I dropped the law suit against my husband, I decided that I was not ready to end my relationship with him. I decided that he just yells- that’s his nature. I can deal with it.”

When dissonance continued despite reduction attempts, and as the magnitude of abuse continued to escalate, respondents seemed to move toward disengagement. Some traumatic event tended to occur at this time also. Respondents attempted to reduce dissonance by seeing the relationship for what it was, including the magnitude of the physical and nonphysical abuse, and its effects on their lives and their children’s lives. Respondents began to view previously tolerable conditions as untenable and termination readiness seemed to increase. Examples follow.

“I was scared to leave because I didn’t have a job, no money, no where to go, and he did provide some support which was better than having absolutely nothing. But the tension [abuse] was getting worse so I said that’s it. I can’t take it and left! I didn’t feel capable of surviving but I had to do it [leave].”

“...This is the abuse [nonphysical] that really drives me crazy!...he yells and screams all the time. He also hits me but the yelling is constant!..I think the verbal abuse is a precursor to the physical abuse and it’s at least as devastating!..”

“When he physically abused me, I didn’t really think of it as physical abuse. I only connected it as a threat to the kids. When I did leave, it was because I was afraid for their safety.”

A belief that her health was being affected by involvement in the relationship, seemed to facilitate termination readiness in one of the respondents. She said:

“I have a stomach problem. Being in this [abusive] situation is making it worse. I’m having to re-evaluate my situation. I don’t know if it is worth it to go through all this pain.”

#### Personal and Social Beliefs Changes

Changes in personal and social beliefs encompassed the concepts of self-esteem, self-efficacy, and social support beliefs. A discussion of each of these beliefs follows.

Self-esteem. Generally, self-esteem remained lower during the early enmeshment time and increased as respondents began to disengage. All respondents felt that a self-esteem deficit was an artifact of society’s view of women as inferior to men, how they were reared as children, and/or their current relationship situations. Almost half of the respondents described the presence of abuse in their families of origin. All of the respondents reported that their husband/partners had abusive families of origin. These historical events seemed to define the parameters for their current relationships.

Examples follow.

“I had a terrible childhood. Both of them [parents] sat around and drank. I think we [she and her husband] were attracted to each other because we had similar backgrounds.”

“I was emotionally and sexually abused as a child. My mother’s favorite sentence to me was, ‘why can’t you do anything right?’”

Respondents repeatedly associated self-esteem deficits with the deference and enmeshment phases early in the relationship trajectory. When commitment to maintaining the relationship prevailed, respondents lowered their self-esteem beliefs in order to reduce dissonance. Termination readiness seemed inhibited and tended to suppress their feelings. At times, self-efficacy beliefs were described as if synonymous with self-esteem, perhaps because of the strong association between feelings of competence and self-acceptance. Examples follow.

“I don’t have any confidence and self-esteem [used to prior to marriage] so I haven’t reached out to others... [Recalls] I used to be extroverted but he beat me down, and then I began to feel nervous around others, wondering why they would want to talk with me.”

“I had a low self-esteem to begin with and it didn’t take much for him to make it worse...I started gaining weight...I let my appearance go...I got depressed... I started on this negative self-talk cycle.”

“I had to stuff it [anger about the situation]... I couldn’t acknowledge it...”

Respondents’ self-esteem became stronger as they began to disengage from the relationship. However, the transition was difficult and respondents frequently described it as emotionally painful. Disengagement seemed to trigger a feeling that respondents had “hit rock bottom” in the relationship and their long held beliefs were shattered. However, they now accomplished by focusing more on a self-orientation. Some

described a belief that their self-esteem was “coming back,” and termination readiness seemed higher. Examples follow.

“ I see [termination] readiness as a process involving your self-esteem. You have to take each thing a step at a time and mentally prepare yourself. I’d say well, I love him and I got to give the boys a home, but on the other hand, I look at what he’s done to me. You just sort of have to balance the scales and figure out how much to put up with before you become ready. Finally, you just say I don’t deserve this and something snaps inside.”

“I refused to put up with things any longer. I have tried to adapt to his way but I just can’t any longer. I’ve got more self-esteem now than I’ve ever had because I realized that I can accomplish something like with school!”

“I’m proud of myself and my strengths...Self-esteem makes me realize that I am a person, too.”

“I think my self-esteem is very much improved. I am working on where my lacks are. It’s taken years. I do feel like I’m still working on my self-confidence but I can do anything I want to do.”

Self-efficacy. Self-efficacy was described by half of the respondents as a sense of control, heightened confidence levels, and determination to stand by the decisions they made with regard to their relationship. Self-efficacy was associated with commitment and personal responsibility in the enmeshment phase. When respondents felt committed to the relationship, they felt that their management of the situation could change their relationship for the better because of their efforts. Termination readiness seemed inhibited during this time. An example follows.

“I decided that I had to stay with my husband... He has a chronic illness and I couldn’t just leave him! I am working it all out.”

When respondents described what seemed like more of a commitment to separate towards autonomy, women were able to recognize how their strengths could be used to benefit themselves and termination readiness seemed higher. Examples follow.

“...I’ve learned to do a lot of things on my own...  
I got the strength to leave from somewhere. I  
knew I felt used and that gave me the strength...  
I did know I could take care of myself... Yes, I’m  
ready to end this thing- I’m gonna do it!”

“When things look bad I feel vulnerable but I just  
tell myself that I’ve been through it before and I can  
do it again. If one door shuts for me, I’ll open another  
and try something different.”

Social support. The structural and functional components of the respondents’ social network emerged as a major concept. All of the respondents described social support from friends, family, professional and/or shelter service providers. Respondents described the unhealthy effects of not having at least one listening and nonjudgmental person to whom they could turn when times were difficult. Examples follow.

“I’m depressed. I sometimes think that maybe he’s  
right- maybe I am stupid and ugly. I’m just worthless  
as a human being. There’s no one else around here  
to say, hey, this person’s crazy, you’re not.”

“...Maybe I would have been out of this relationship  
much sooner if I could have talked to people about this.”

There were many belief changes about support from others. When respondents were in the enmeshment phase of the trajectory, they were inclined to avoid others who might offer unwanted advice about leaving their relationship. When leaving is not considered as an option, information from others to this effect is seen as conflicted support and is avoided. In fact, support is sought from someone who can confirm the



success of a relationship like theirs. These tactics reduce dissonance and inhibit termination readiness. Thus, respondents tended to view others, especially others in similar situations, as conflicted support. An example follows.

“I went there [shelter] but I felt different from the others. Everyone kept talking about leaving their husbands. I was different. I was not like them...”

“...I was looking desperately at the time for someone who could tell me that it [the relationship] would work. That they had been through all this and it all worked out in the end. I didn't relate well to those who seemed more ready to end their relationships. I can't say that they didn't affect me though [planted some seeds].”

Conflicted support also occurred when some respondents, who were attempting to separate, contacted the people to whom they usually turned for assistance. They found resistance to change from these people. This could inhibit termination readiness. An example follows.

“A lot of people and family members have turned on me because I left this wonderful [contorted face and synical voice tone] man, and because I have gotten so much stronger.”

In the more emotionally painful transition to disengagement, termination readiness could have been inhibited by nonsupportive responses of professionals or para-professionals. The following statements of respondents regarding responses of professionals and para-professionals illustrate the devastating effect these support providers can have.

“I called a crisis line one night. He beat me up and I left in the car. I stopped at this store...to use the phone...the crisis line [contact] told me to call back in the morning. I needed help now!” (took this woman six months to call anyone for help again).

“The counselors [a man and a woman] we went to didn’t know about domestic violence, I guess. They seemed so routine and impersonal and they kept looking at their watches. After a while, they told us we were doing good and they discharged us.” (presently in the shelter again because his abuse worsened).

Conversely, professional support could have a positive impact on termination readiness. The following examples illustrate that for respondents who were considering termination, positive support from a professional could be very affirming.

“The community health nurse came after the baby was born, and after three months, I confided in her and she helped me.”

“When I called the police, the woman cop was supportive of me. He [partner] tried to fool her but she saw right through him!”

Staying at a shelter can be a positive support experience. Some of the women described the shelter as a safe place, a place for meeting women who have been through similar situations, and a place for meeting friends with whom they could share support when they left the shelter. The following example illustrates this.

“I have never felt this safe in my life, and the support, I have never had the support before.”

Positive changes in their beliefs about social support came for many respondents during the disengagement aspect of the trajectory. They described an awareness that they needed others beyond their husband/partners. During this phase, supporters were characterized as those who helped them face the problem and work with them in the healing process, which was consonant with new beliefs and higher termination readiness as these examples illustrate.

“Getting ready [to terminate the relationship] takes some strengthening. When you’re stuck, its nothing but despair, your energy is low, work suffers, health suffers, and you’re an emotional basket case. Somehow, with others’ help, you start healing and building energy, and it comes together [said with a smile and a gleam in her eye].”

Many respondents described how key people were the turning point for them. The support from these people facilitated their termination readiness. The following example illustrates this.

“What I’m really finding helpful is to associate with a few good positive thinking people to talk to. They’re like role models for me...being with people who are positive, drug free, and future-oriented helps.”

Respondents described how positive support could help them ventilate their long suppressed feelings. The feedback from others seemed to provide some of these respondents with the opportunity to identify a feeling and accept it. An example follows.

“It wasn’t until I started getting feedback from my women’s group that I started getting angry that he tried to choke me...When everyone else was getting angry as I told them what he did, I thought, why did it take me so long to realize I was angry?”

Religion also served as a positive support as described by a few respondents. It seemed to provide them with a strength from which to draw to surmount the obstacles of terminating an abusive relationship. An illustration follows.

“The emotional strength and love I get from the church helps me get through this [termination readiness process].”

A special case of support was described by a small number of respondents. Validation from others seen on television seemed to help these respondents label their situation and might facilitate termination. Examples follow.

“I was watching the Donahue show and this woman said that if your husband hits you, you are an abused wife. That’s when it clicked with me because I was kind of making light of it.”

“All the media attention on family violence has got to make it easier to become ready to terminate the relationship.”

#### Summary

In summary, with regard to quantitative findings, 86 study participants completed instruments measuring sex role orientation, self-esteem, self-efficacy, magnitude of abuse, social support, and termination readiness. A multiple regression equation containing all study variables explained 31 % of the variance in termination readiness. The cognitive beliefs set of variables uniquely accounted for 27 % of the variance in termination readiness which provided evidence for the contribution that this set of variables made in predicting termination readiness with this sample. There were no statistically significant findings between network structural characteristics and termination readiness.

With regard to the qualitative findings, a subsample of 20 abused women from the total sample representing a range of levels of termination readiness, were interviewed. Three main constructs emerged from the qualitative data in relation to termination readiness. These interrelated constructs were the couple relationship trajectory, dissonance development and reduction attempts, and personal and social beliefs changes. These constructs illuminated how these abused women became ready to end their relationships.

The early phases of the couple relationship trajectory, which encompassed deference to the man and enmeshment phases, were denoted by their need to attain the ideal standard of family living, provide the children with two parents, isolate themselves from others, and allow their husband/partner to invade their personal space even if it meant submitting to abusive behavior. If the respondents were committed to the relationship, they reduced dissonance by minimizing the abusive situation and changed their beliefs accordingly. Termination readiness tended to be inhibited.

The later phases of the couple relationship trajectory, which encompassed separation and autonomy phases, were denoted by respondents' increasing need to become self-oriented, rehearse events necessary to end the relationship, work through a traumatic turning point towards new self-beliefs, and see themselves in a new light. If respondents were committed to disengagement, dissonance reduction efforts involved admitting to the magnitude of the abuse and the impact on theirs and their childrens' lives. Termination readiness tended to be facilitated.

These qualitative findings corroborated the quantitative findings in that sex role orientation, self-esteem, self-efficacy, social support, and the magnitude of abuse were subsumed within the three constructs. Further, the qualitative data illuminated how the process involved in shifting cognitive beliefs could influence termination readiness.

Finally, there were additional variables such as childrens' safety, financial security, anger expression, health status, infidelity, and religious beliefs that were described by some of these respondents in relation to termination readiness. Less is known about these variables since they emerged with less frequency than did the others.

## CHAPTER V

### DISCUSSION

The purpose of this chapter is to present the interpretations of the findings and to discuss the theoretical and practical implications of the findings for nursing. Contrasts and similarities between the findings of this study and previous research are examined.

#### Sample Description

A convenience sample of 86 women from shelters, support groups, and the community-at-large participated in this study. The support groups had the lowest response rates, probably because they purposefully gather to share problems and they do not want anything to interfere with their group process. The women ranged from low to high in termination readiness, however, the distribution was skewed towards higher termination readiness. Those who were higher in termination readiness were probably more receptive to participating in a study such as this. Two extreme outliers were omitted from quantitative data analysis since they would influence the correlation matrix and the regression line, and bias the findings (Pedhazur, 1982).

Consistent with the literature (Gelles, 1976; Giles-Sims, 1983; Limandri, 1985; May, 1988; McKenna, 1985; Pagelow, 1981; Stacey & Shupe, 1983; Straus, Gelles, & Steinmetz, 1980; Walker, 1980, 1984), sample demographics in this study provided further evidence that abused women come from various socioeconomic backgrounds, age groups, educational levels, racial/ethnic origins, geographic locales, and employment statuses. Comparing this sample with those of previous studies, this sample had higher mean age, higher educational level, and lower unemployment level. These differences suggest that abused women who decide to end their relationships may have an advantage in establishing their independence and reaching their goals. Another difference with this sample is that there were higher percentages of cohabiting

couples. This finding could point to a need for increased professional support since Straus and Stets (1988) found that the magnitude of violence is worse in cohabiting couples compared to married couples.

A large percentage of the sample did not seek shelter when they left their husband/partners. This may be explained in part by several of the women in the interview subsample who said that they did not think they were the “type” to stay in a shelter and would not think of doing so. One abused woman who did go to a shelter, at the persistence of a confidante, was pleasantly surprised. However, negative experiences were also reported because of unsavory neighborhoods or philosophical differences. It appears that some of these abused women harbored stereotypes about shelter “types” and shelter stay experiences. According to Epstein, Russell, and Silvern (1988) shelters are not to be construed as a homogenous group of service providers. In a nationwide survey of 111 shelters, there were a variety of structures and ideologies available. These findings suggest that available services are not appealing to all segments of the population. To provide effective services, providers need to have an understanding of the marketplace, and the consumers must have an understanding of what is available to meet their needs (Kotler, 1988).

Two demographic items which asked respondents about their present relationship duration and number of times they left the present relationship were thought to have an influence on termination readiness. However, their influence could not be assessed because they were determined to be unreliable as worded after noting contradictory responses on the support network map. Therefore, these items were omitted. The reported mean time of 10.4 days per shelter stay was consistent with the literature (Strube & Barbour, 1984) suggesting that shelter stays of this sample were not shorter.

Demographic questions designed to elicit data about intergenerational transmission of violence yielded results which indicated that violence was a factor in

families of origin in at least half of the women in this sample and for four-fifths of their husband/partners. These findings confirm those of some researchers (Finkelhor, 1988; Hotaling & Sugarman, 1986; Walker, 1984), but partially refute others (Herrenkohl, Herrenkohl, & Toedter, 1983; Stark & Flitcraft, 1985) who acknowledged its occurrence, but found intergenerational transmission to be less prevalent in their study samples. The definitional variations of violence may explain the existing confusion about the extent to which families of origin contribute to the perpetuation of violence in subsequent generations (Giles-Sims, 1983; Straus, Gelles, & Steinmetz, 1980; Walker, 1979, 1983).

#### Theoretical Model

Triangulation captured a more holistic portrayal of termination readiness and the variables which inhibited and facilitated it as several researchers suggested with regard to this method (Haase & Myers, 1988; Jick, 1983; Van Maanen, 1983). Using a cognitive dissonance theoretical framework (Festinger, 1957), social support, self-efficacy, self-esteem, magnitude of abuse, and sex role orientation were defined as personal and social beliefs that could become dissonant for women who are involved in abusive relationships, thus motivating changes or shifts in these beliefs to reduce dissonance and regain consonance. While there was still a commitment to sustaining the couple relationship, these changes would generally result in less positive feelings about self and others and lower termination readiness. In time, some women who could not reduce dissonance while staying in the abusive relationship, would reduce dissonance by shifting beliefs about self and others in a more positive direction and moving towards autonomy and higher termination readiness.

Social support, self-efficacy, self-esteem, magnitude of abuse, and sex role orientation cognitive belief variables had moderate to low correlations with



termination readiness. Yet in combination, this set of variables accounted for 27 % of the variance in termination readiness. This variance exceeded the predicted amount of variance that was estimated for this set during *a priori* planning using power analysis (Cohen & Cohen, 1975). Additionally, the magnitude of the physical abuse, sex role orientation, and interpersonal support were statistically significant cognitive beliefs predictors that seemed to make the most contribution to termination readiness which suggests further analysis and streamlining of the model.

Qualitative data corroborated these quantitative results and illuminated how these respondents changed their cognitive beliefs and the effect these changes had on termination readiness. Quantitative and qualitative findings provided evidence for the interrelationship of personal and social beliefs to termination readiness and supported the theoretical model. A discussion follows of the quantitative findings of each of the cognitive belief variables and their importance to termination readiness in relation to research question one. Next, network structure characteristics and their importance to termination readiness are discussed in relation to research question two. Finally, respondents' descriptions of factors and their importance to termination readiness led to the emergence of three main constructs. These constructs and the variables subsumed within them are discussed in relation to research question three.

### Cognitive Beliefs

#### Social Support

The effectiveness of a social network in supporting an individual partially depends on its functional components. Two functional components of perceived support that were explored in this study are interpersonal support and interpersonal conflict.

Interpersonal support. The quantitative findings revealed that interpersonal

support was a statistically significant predictor of termination readiness with this sample. Additionally, it contributed to the variance of termination readiness when operating jointly with other cognitive belief variables. Subjects who perceived that there was someone who would be nonjudgmental, affirming and available to give aid among other things, tended to be higher in termination readiness. This finding is consistent with May's (1986, 1988) findings suggesting the importance of positive social support to termination readiness, and Mitchell and Hodson's (1981, 1983) findings suggesting that social support may be related to ending the abusive relationship. This study's finding also is consistent with the literature on social support in general (Brandt & Weinert, 1981; Cassel, 1976; Cobb, 1976; Hays, 1986; House, 1981; Mitchell & Trickett, 1980; Tilden, 1988; Weiss, 1974) which converges on social support's contribution to more desirable outcomes. The quantitative finding of this study provides further evidence for the importance of interpersonal support to termination readiness.

Interpersonal conflict. The quantitative findings revealed that interpersonal conflict was not a statistically significant predictor of termination readiness with this sample, although interpersonal conflict contributed to the variance of termination readiness when operating jointly with other cognitive beliefs variables. The lack of statistically significant findings is inconsistent with May's (1986, 1988) findings which suggested that termination readiness was inhibited when a feeling of embarrassment, a sense of stigma, a reluctance to self-disclose, or friction from the support network was present, and vice versa. Since interpersonal conflict with someone in their networks may be present on both ends of the termination readiness continuum, it may be more important to consider the source of the interpersonal conflict and the intensity of the dissonance experienced. For example, if interpersonal conflict were perceived as coming from outside sources such as family members, or insensitive

professional/para-professional service providers, dissonance reduction may be achieved by staying in the relationship, especially if the husband/partner is comparatively lower in interpersonal conflict at that time. Thus, termination readiness would be inhibited.

There is also a possibility that interpersonal conflict is a suppressor variable since the simple correlation and the standardized regression coefficient have opposite signs (Tabachnik & Fidell, 1983). In this case, interpersonal conflict would contribute to the variance in termination readiness, but it would also mask the effects of other variables. This suggests that interpersonal conflict should be partialled out in any subsequent data analysis of the quantitative model.

#### Self-Efficacy

The quantitative findings revealed that self-efficacy was not a statistically significant predictor of termination readiness in this sample, although it did contribute to the variance of termination readiness when operating jointly with other cognitive beliefs. The lack of statistically significant findings is inconsistent with May's (1986, 1988) findings which suggested that termination readiness was influenced by an accompanying belief of inner strength and the capabilities to act. A partial explanation may be the use of a general efficacy measure. Sherer et al. (1982) concluded that a general measure would apply across situations. In this case, perhaps a measure which was situation specific for termination was needed since it appeared that these women could feel efficacious if they decided to stay in the relationship as well as to end the relationship. Outcome expectancy, a related concept (Bandura, 1977), might predict termination and should be examined in a future study. This concept is defined as a person's estimate that a given behavior will lead to certain outcomes. With women who are involved in abusive relationships, they would need to

know that if they ended the relationship, they would achieve the expected reward of their freedom from abuse. The literature is replete with examples detailing that abused women who contemplate leaving the relationship have to expend a great deal of effort and persevere under adverse circumstances in order to have a successful outcome. Outcome expectancy was not measured by the Self-Efficacy Scale and perhaps it is a critical variable with this population. By increasing self-efficacy and outcome expectancy, the likelihood of achieving consonance by becoming more ready to terminate the relationship is increased.

There is also a possibility that self-efficacy is a suppressor variable since the standardized regression coefficient is larger than the absolute value of the simple correlation with termination readiness, and the simple correlation and the standardized regression coefficient have opposite signs (Tabachnik & Fidell, 1983). Therefore, while it may contribute to the overall variance of termination readiness, it also may mask the effects of other cognitive belief variables. This suggests that self-efficacy should be partialled out in any subsequent analysis of the quantitative data.

#### Self-Esteem

The quantitative findings revealed that self-esteem was not a statistically significant predictor of termination readiness with this sample, although it did contribute to the variance of termination readiness when operating jointly with other cognitive beliefs variables. The lack of statistically significant findings is inconsistent with May's (1986, 1988) findings that lower self-esteem could inhibit termination readiness since abused women did not believe that they deserved a better situation than they had, or that they deserved any help, and vice versa. The complexity of this construct may not have been completely captured by the Self-Esteem Inventory, which was a dichotomous measure. Further, this measure may also fail to capture the aspect of the domain of self-esteem that is specific to women. The possibility also exists that

the true effects of self-esteem with regard to termination readiness may have been suppressed by self-efficacy.

### Magnitude of Abuse

Magnitude of abuse focused on the severity and frequency of physical and nonphysical abuse. Each is discussed for its importance in the quantitative model.

Physical abuse. The quantitative findings revealed that physical abuse was a strong predictor of termination readiness with this sample. Additionally, it operated jointly with other cognitive variables to contribute to the variance of termination readiness. This is consistent with the literature (May, 1986, 1988; Straus, Gelles, & Steinmetz, 1980; Straus & Hotaling, 1986) which suggested that as severity and frequency of physical abuse increased, abused women would be more likely to leave. This study's finding suggests that as the magnitude of physical abuse is fully realized, termination readiness is facilitated.

Nonphysical abuse. The quantitative findings revealed that nonphysical abuse was not a statistically significant predictor of termination readiness with this sample, although it did operate jointly with other cognitive belief variables to contribute to the variance of termination readiness. This finding is contradictory to May's (1986, 1988) findings which suggested that constant verbal repudiation influenced termination readiness. Since verbal repudiation can occur on both ends of the termination readiness continuum, perhaps it is more important to examine the source of the abuse as was discussed with interpersonal conflict. The nonphysical abuse variable may have been suppressed by interpersonal conflict which would mean that its true effect on termination readiness was masked.

### Sex Role Orientation

The quantitative findings revealed that sex role orientation was a strong predictor of termination readiness with this sample. The findings are consistent with

May's (1986, 1988) and Walker's (1983) findings which suggested that role socialization is inherent in women as a result of family of origin socialization and societal expectations and this would influence their decision to leave. This study's finding suggests the powerful part that sex role orientation plays in relation to termination readiness. Less traditional sex role orientation cognitive beliefs are associated with termination readiness.

In summary, the quantitative findings revealed that interpersonal support, interpersonal conflict, self-efficacy, self-esteem, physical abuse, nonphysical abuse, and sex role orientation cognitive beliefs operated jointly to contribute to the variance of termination readiness at a statistically significant level. Further, interpersonal support, physical abuse, and sex role orientation cognitive beliefs were statistically significant predictors of termination readiness. There is also some indication that interpersonal conflict and self-efficacy acted as suppressor variables in the multiple regression equation. The effects of self-esteem and nonphysical abuse on termination readiness might be masked by these suppressor variables.

#### Staying Away from Husband/Partner

Staying away from the husband/partner was a demographic variable that was partialled because of its statistically significant relationship with termination readiness. Staying away from the husband/partner accounted for 4 % of the variance. It is logical and intuitively appealing that staying away from the husband/partner would relate to termination readiness. Its effect would need to be considered in future studies with termination readiness.

#### Social Desirability

The Social Desirability Subscale of the PRF was used because the extent to which social desirability would influence responses on the questionnaires was unclear.

Interpersonal support, interpersonal conflict, self-esteem, and self-efficacy were correlated at a statistically significant level with social desirability. This suggests that the responses to items on these questionnaires may be effected by the respondents' tendency to respond in a socially desirable manner. However, Tilden (1988) reported that interpersonal support was not significantly correlated with social desirability, and interpersonal conflict had a low correlation with social desirability as measured by the Marlowe-Crowne Social Desirability Short Form (Strahan & Gerbasi, 1975). Since the reliability estimate for the social desirability subscale was only marginally psychometrically acceptable, doubt is raised as to the reliability of this subscale.

#### Social Network Characteristics

Network characteristics including size, network constriction, composition of relationship sources, needs for tangible and intangible aids, frequency of contact, density, temporality, and multidimensionality provided a profile of these subjects' social network characteristics and will be discussed as they compared to other studies, and as they related to termination readiness. Then the network structure index and its importance to termination readiness is discussed.

Network structure. None of the network structure characteristics were statistically significantly correlated with termination readiness. However, the findings of these subjects' social networks revealed that, as a group, they have a broad range of variability in structural characteristics. These findings refute Gelles' (1974) findings that battered women are socially isolated, and support more recent findings that battered women's social support systems are variable in nature (Limandri, 1985; May, 1988; McKenna, 1985).

In comparison to previous studies such as McKenna's (1985), this sample had a similar composition of relationship sources, needs for tangible and intangible aids, and

frequency of contact. The size range and mean network size was somewhat smaller with a greater percentage of network constriction than that of the abused women in McKenna's (1985) study. Network constriction primarily was due to friendship loss. Correspondingly, the variety of network sources of support was more limited. When the network size was larger, perceived interpersonal support was higher which is consistent with the literature (Hays, 1986; Hirsch, 1979, 1980) and provides further evidence that when there are more people in the network, there is more of an opportunity to have someone who can assist in a positive way. Higher interpersonal support was significantly related to termination readiness as well. However, since there was no correlation between size and termination readiness, it would seem that size creates a greater likelihood of positive support from someone, but it is the someone, perhaps just one person, that may facilitate termination readiness.

The findings for the overall network density of these subjects reflected close-knit ties among the members. However, it contradicted McKenna's (1985) finding of a lower overall density in her sample of women where abuse was known. It also contradicts the overall density of a study sample where abuse was unknown (Hirsch, 1979). This findings of this study suggest less opportunity for support of changing cognitive beliefs.

Temporality and multidimensionality findings reflected that overall, relationships were of shorter duration with a lesser degree of multidimensionality. This suggests less opportunity for honest disclosure and personal growth. When multidimensionality was higher, interpersonal support was higher. This finding is consistent with Hirsch (1979, 1980) and Hays (1986). However, since there was no direct correlation between multidimensionality and termination readiness, it would seem that the positive support characteristics of the provider of various activities, rather than the activities themselves, was more important with regard to termination readiness.



Thus, while these subjects had a range of variability with regard to network structure characteristics, none contributed significantly to termination readiness. A profile of these structural characteristics indicated that respondents had a moderately sized social network that was higher in density, and lower in temporality and multidimensionality. Therefore, while there was more opportunity for positive assistance, the higher density and the lower temporality and multidimensionality would indicate that for the most part, the network would deter changes in these respondents. Further, these respondents turned to family members for support, probably, in part, because network constriction of friends was high. When the respondents had a higher network size and multidimensionality, perceived interpersonal support was higher. However, with regard to termination readiness, the characteristics of the person or persons, who also may have provided a number of tangible and intangible aids, seemed more relevant than the network size or multidimensionality.

Network structure index. The composite network structure index, which was calculated by summing the sample's values for size, density, temporality, and multidimensionality, was not statistically significantly correlated with termination readiness. There are several reasons that may explain why neither the individual network structure characteristics nor the network structure index were significantly correlated with termination readiness. First, despite the instructions for completing the map and the visual example of how to complete the network map, there was a moderate amount of missing data which may have compromised the validity of the reported data. Second, subjects were instructed to list up to twelve members on a network map versus instructing them to identify those network members who actually provided social support exchanges. Wellman (1981) stated that when social network analysis identifies important social relationships, it is erroneous to assume that all such

linkages involve the provision of social support. Indeed, many of the subjects listed members and then responded that they had no contact with them nor did they turn to them for support. According to Pedhazur (1982), measurement errors such as this could result in an attenuation of the correlation. Therefore, there would be less of a relationship with termination readiness than might otherwise exist if measurement error were eliminated. Third, the network structure index variables were assigned values between 1 and 3 depending on the range of sample scores on each of the variables. This assignment may have been too restrictive and this could attenuate a relationship. Finally, Mitchell and Trickett (1980) theorized that it is a combination of structural characteristics that may contribute to psychological adaptation. Indeed, McKenna (1985) found a positive trend in the relationship between the network structure composite variable and psychological well-being. However, psychological adaptation and psychological well-being are different concepts than termination readiness. While there may be some overlap, changes in psychological adaptation and well-being may precede higher termination readiness. There may be a quantifiable trend noted in the former variables prior to evidencing any with the latter.

Thus, the abused women in this sample seemed to have a social network that was less than optimal according to the literature on network criteria for healthy outcomes (Hays, 1986; Hirsch, 1979, 1980; Mitchell & Trickett, 1980). In addition, findings from this study fail to provide evidence that structural characteristics act in combination to promote desired outcomes (McKenna, 1985; Mitchell & Trickett, 1980). Considering the potential that the findings from this study were influenced by measurement error, the effects of network structure characteristics on termination readiness need further exploration.

Qualitative data provided further explanation of the quantitative findings. The interrelated constructs of the couple relationship trajectory and social and personal

beliefs changes, and dissonance development and reduction attempts illuminated the termination readiness process.

#### Couple Relationship Trajectory and Social Support System Beliefs

When the couple was in the early phases of the relationship trajectory, and dissonance developed, social support beliefs were such that if others were sought, it was for validation that the couple would be able to "work things out." Therefore, dissonance reduction efforts included use of the social support system to confirm couple maintenance. Termination readiness was inhibited to the extent that they received such confirmation. For example, those to whom the respondents turned for help were perceived as conflicted support, if the person or persons contradicted the belief system the respondents had at the time. If respondents perceived interpersonal conflict from someone, he or she could be excluded from the network. This could lead to more constricted networks with the abused women's increasing reliance on their husband/partners for support. However, even if the network was constricted, the respondents perceived interpersonal support if those to whom they turned for help were nonjudgmental and respected them even if they were not ready to terminate their relationships. Therefore, the social support system also may have been used for emotional support.

As described by these respondents, the social support system seemed to be validation for the couple, but more importantly, validation for the self. If even one person was nonjudgmental and understanding, this support seemed to be the impetus for trying on new beliefs and seeing how they fit which seemed to lead to higher termination readiness.

In the later phases of the couple relationship trajectory, when dissonance developed, these respondents described reducing dissonance by seeking others who would confirm their new beliefs, provide more validation for the self, and aid them in

the separation and autonomy phases of the trajectory. New beliefs tended to include a less traditional sex role orientation and a perception that they, as individuals, were as important or perhaps more important than the couple relationship.

Based on quantitative and qualitative findings, the possibility exists that there is a combination of network structure and function characteristics among abused women that can inhibit or facilitate termination readiness which differs from those identified in the literature as optimal. However, the question arises, who is the best person for abused women to contact or avoid since interpersonal conflict may arise, and for what kind of support, and at what levels of termination readiness? A mismatch of these elements of enacted support, type of support, and timing of support could influence termination readiness. For example, at some point, the need for only one individual to whom they could turn for emotional support, seemed essential to facilitating termination readiness. However, there may be additional structural and/or functional components that would be necessary to continue facilitating termination readiness. Further, the enacted support from one or more women who have been in a similar situation may be critical at one point, whereas at other points in time this kind of enacted support may inhibit termination readiness.

#### Couple Relationship Trajectory and Personal Beliefs

Sex role orientation. The personal belief system tended to be less conducive to termination readiness when dissonance reduction efforts were directed toward couple maintenance. Sex role orientation tended to be more traditional. The preservation of the couple and the family was of higher importance than the needs of the self during early phases of the couple relationship trajectory. Respondents were able to reduce dissonance by believing that the presence of abuse was a possibility to the extent that the ideal standard for family living was not attained. Also, termination readiness was

lower. Respondents also seemed to believe that their identity was achieved by being a couple or a family unit. Some respondents described co-dependency and boundary issues which seemed to be integral with both self-esteem and sex role orientation. Co-dependent behaviors foster an outer-directedness and can lead to a denial of self-needs and expression of feelings including anger, such as many of these respondents explained. At some point, as respondents described movement towards separation, sex role orientation seemed to be less traditional. In operation with shifting beliefs about self and others, these respondents felt that they had needs which could supercede the couple relationship.

Based on quantitative and qualitative findings, sex role orientation seemed to be a powerful cognitive belief which influenced termination readiness in this sample. The potent effect is probably due to consistent messages from family and society about role expectations to the point where traditional beliefs become an automatic response to handling the abusive situation.

Self-esteem. Based on descriptions from these respondents, self-esteem appeared to be lower during the early phases of the couple relationship trajectory and termination readiness seemed inhibited. When dissonance about the abusive situation developed, respondents reduced this by making changes in their beliefs about who they were and what they deserved, in order to maintain the couple relationship. Self-esteem beliefs seemed to operate closely with sex role orientation and social support beliefs since self-identity comes, in part, from others. When self-esteem beliefs were lower, the likelihood of social network constriction was increased. Some women reported that professionals and/or informal support members seemed insensitive to their needs. Further, if they were seeking validation for their own changing beliefs, the lack of validation would have been injurious to their self-esteem.

Consequently, they tended to stay with their partners and felt unsupported. This insensitivity from others may necessitate further changes within the woman and inhibit termination readiness. Conversely, those people who are supportive and sensitive to respondents' needs regardless of the respondents' termination readiness level can facilitate termination readiness.

Anger seemed to act as one vehicle for increased self-awareness of the importance of fulfilling self-needs and thereby upholding dignity and self-esteem. Many of the respondents described confronting their long suppressed anger independently or with the help of others and as they did so, dissonance reduction efforts were directed toward separation, and termination readiness seemed to increase. The power that the respondents seemed to feel as they expressed their anger was also evident. They were in awe of the feelings it created in them.

For these respondents, the need to voice their feelings and share their voices with others was exemplified often and seemed to be an integral part of their self-development process as Belenky et al. (1986) found, and their way of knowing that they were more ready to terminate the relationship. Applying the Belenky et al. (1986) framework, there is some evidence in this study to suggest that abused women who were in the silence stage had relatively no voice. Respondents seemed to have difficulty knowing what their beliefs were and accepted voices of authority for direction. They made statements like, "...I did what he said to do..." Those respondents who were in the received knowledge stage relied on others to communicate and used other's words to communicate what they know. Their statements were characterized by such phrases as, "...He says it was my fault..." Those respondents who were in the subjective stage of knowledge began to draw on their intuition more and to voice their feelings about the situation primarily to themselves.

This stage was characterized by statements like, "... I said to myself...", or " I haven't told anybody about this- you're the first..." The procedural knowledge stage is characterized by systematic analysis of what is observable. It is the voice of reason. During this stage, some respondents voiced their feelings about their situation to others, made detailed plans, and sought connections with others. The following statements characterized this stage. "...I was so proud of myself that I told him...", or "...It feels good to talk with others like me and to be able to help each other..." The final stage is constructed knowledge. This stage emphasizes that the knower is an intimate part of the known and able to integrate different ways of knowing to build new knowledge. It was difficult to find statements from this subsample to illustrate how they integrated the voices. One respondent who might be transitioning into this stage said, "...I'm beginning to really see and to feel what I have been through. This is helping me build a new life- all my beliefs have changed and I am acting in a way that is consistent with my beliefs. It's hard because there are a lot of obstacles and chances for me to shift back to the old way, but I'm trying. I have professional help and friends that care and I'm on my way!"

While quantitative findings were not very informative about self-esteem, qualitative findings suggest that women in abusive relationships need an inner focus orientation to enable a connection with their feelings, their self-worth, and their potential to move towards healthy change. Further, they may also need others to validate their feelings and support their shifting beliefs with regard to termination readiness. However, this needs further exploration with regard to termination readiness.

Self-efficacy. Another personal belief, which some respondents regarded as synonymous with self-esteem, was self-efficacy. Self-efficacy was described on both ends of the termination readiness continuum. However, when respondents described

self-efficacy in relation to early phases of the couple relationship trajectory, dissonance reduction efforts focused on their belief that they could control the abusive situation and work things out for everybody. Women described how they balanced the family, kept things stable, put others and themselves aside for their husband/partners, and felt sure that their husband/partners were so needy of them (and vice versa, in some cases) that they could not survive alone. Termination readiness was lower. However, as some of these respondents moved toward the later phases of the couple relationship trajectory, they became angry that what they did was never enough, and they tended to make a choice to direct their strengths and capabilities to the benefit of developing themselves as a "separate unit" independent of their husband/partners. Termination readiness seemed higher and they seemed optimistic about the outcome for which they had so often rehearsed. According to Bolen (1984), women who learned to live from the premise that their choices in life do matter become choicemakers and heroines shaping who they will become (Bolen, 1984). This change in self-efficacy beliefs tended to be operating in conjunction with other personal and social beliefs.

Qualitative findings supplemented the understanding of self-efficacy beliefs obtained as a result of quantitative analysis. These findings suggest that women can use their efficacious feelings to their own advantage during the separation and autonomy phases of the couple relationship trajectory and in the move towards higher termination readiness.

#### Dissonance Development and Reduction Efforts

The abusive situation served as the basis for dissonance development. If respondents were committed to the couple relationship, they reduced the incongruence between their thoughts and feelings by changing personal and social beliefs. There seemed to be a tendency to minimize the abuse since they did not perceive other



options for their lives. As the dissonance intensity increased despite efforts to reduce it, there seemed to be an increasing willingness to admit to the magnitude of abuse and its effects on their children's and their lives, including their own deteriorating health status as one respondent reported, and their children's lives. Child safety seemed to supercede anything else and acted as prime motivation for leaving. These respondents also see their husband/partners' unsavory behaviors, such as infidelity which a few respondents reported, as an act of betrayal that could not be condoned. The dissonance was reduced by disengaging, and termination readiness was increased. These findings suggest that dissonance occurs both while involved in the relationship and attempting to stay, and while disengaging from the relationship. However, the reduction efforts will result in more or less positive feelings about the self and others depending upon these respondents' phase of the couple relationship trajectory.

Significant traumatic event and dissonance reduction. Some of the women described a significant emotional or traumatic event that shattered long held beliefs and seemed to accentuate for these respondents that separation and autonomy was necessary. The literature on wife abuse refers to these events as triggers for leaving the relationship which vary from one woman to another (NiCarthy, 1986). The implication is that the trigger acts as the last straw whereupon the abused women leave the relationship. This study's findings suggest that while so called trigger events appeared periodically throughout the relationship, if termination readiness was low and dissonance reduction efforts were directed toward the couple maintenance, the events were not meaningful for these abused women. However, as old beliefs change, the occurrence of these events assumed some meaning, magnified in importance, and signaled a move toward disengagement and higher termination readiness. As Bolen (1979) noted in her theoretical paper of synchronicity and the self, "when the pupil is ready, the teacher will come" (p. 77). This recalls the sentiments of one abused woman

who said, “if I had seen the problem years ago. Oh, well, I guess you just see it when you’re ready.” Termination readiness involves a change in inner beliefs and attitudes and then a parallel traumatic event occurs. It is at this time that plans and visions are internalized and then voiced outwardly for further self-development. These respondents tended to be in the later phases of the couple relationship trajectory. During the later phases, dissonance in beliefs, a change to new beliefs, and a consistency in these new beliefs about self and others are interrelated with higher termination readiness. Quantitative and qualitative findings thus provide evidence for the support of the theoretical model which guided this study.

### Summary

The demographic characteristics of the 86 women in the convenience sample demonstrated the heterogeneity of the group and some changing demographic trends. These findings imply a need to analyze the marketplace to meet consumers’ needs.

Qualitative findings corroborated the quantitative findings in that sex role orientation, self-esteem, self-efficacy, social support, and the magnitude of abuse seemed to fit logically under three larger interrelated constructs: couple relationship trajectory which began with deference to the man and progressed to autonomy; dissonance development and reduction attempts which focused on minimizing or magnifying abuse depending on the trajectory phase these respondents were experiencing; and personal and social beliefs changes in a more or less positive direction depending on the trajectory phase these respondents were experiencing. Further, qualitative findings illuminated how the process involved in changing cognitive beliefs could influence termination readiness.

Based on quantitative and qualitative findings, more traditional sex role orientation beliefs tended to be less conducive to termination readiness when dissonance reduction efforts were directed toward couple maintenance. Respondents

were able to reduce dissonance by believing that abuse might be present when ideal family standards were not met. Co-dependency and enmeshment also occurred.

Nontraditional sex role orientation beliefs were more conducive to termination readiness when dissonance reduction efforts centered on the self with fulfillment of self-needs and roles that superceded the needs of the couple and the family.

Quantitative findings were not informative about self-esteem. However, qualitative findings suggest that abused women can lower self-esteem progressively to reduce dissonance when women perceive that their identities and sense of worth are best achieved via couple maintenance, and it is not until these women describe an inner focus, which enables a connection with their own feelings and potentialities, that termination readiness becomes more enhanced. Further, there is a need for others to validate abused women's feelings and support their changing beliefs with regard to termination readiness.

Quantitative findings were not informative about self-efficacy. However, qualitative findings suggest that if respondents decided to stay in their relationships, they could reduce dissonance by believing that they could make their relationships work and make the abuse abate. As dissonance about abuse kept mounting, some respondents could only reduce it by using what inner strengths they had to help themselves gain autonomy.

Quantitative and qualitative findings revealed the complex nature of social support which has structural components such as size, density, temporality, and multidimensionality, and functional components such as interpersonal support and interpersonal conflict which operate in combination. Quantitative findings were only informative with regard to interpersonal support's positive correlation with termination readiness. However, qualitative findings revealed that interpersonal conflict was a factor as respondents described different people and aids that were supportive

or conflictual at different levels of termination readiness. Therefore, the possibility exists that there is a combination of network structure and function characteristics among abused women that can reduce dissonance and facilitate termination readiness. The question arises, who is the best person or persons for abused women to contact or avoid and at what levels of termination readiness? A mismatch of these elements could facilitate or inhibit termination readiness.

Quantitative and qualitative findings indicated that as the magnitude of physical abuse increased, termination readiness increased. Qualitative findings suggested that if personal and social beliefs could be changed to accommodate the situation, the relationship was maintained and physical and nonphysical abuse were minimized. As dissonance intensity increased despite efforts to reduce it, there seemed to be more willingness to recognize the magnitude of abuse and the impact it had, and termination readiness increased. Finally, additional variables emerged in the qualitative data which were not measured in the quantitative model but could also contribute to termination readiness. Religiosity, anger expression, child safety, financial security, infidelity, and health status were described by the respondents although less is known about how these variables acted to influence termination readiness since they emerged with less frequency than others.

### Implications and Recommendations

There are many implications and recommendations which involve nursing theory, research, and practice that are apparent outcomes of this study. The implications and recommendations for each of these dimensions of nursing follow.

#### Nursing Theory

The data provide some evidence for cognitive dissonance theory as a useful framework in explaining the impact of personal and social beliefs in these respondents' termination readiness. If dissonance reduction efforts can be accomplished while

staying in the relationship, old beliefs continue to prevail as an integral part of the abused women's thought processes, and termination readiness is lower. For those in the early phases of the couple relationship trajectory, a change in beliefs may be in a negative direction toward maintaining a traditional sex role, decreasing sense of self-esteem, minimizing the abuse, and constricting their network to reduce dissonance. However, if dissonance mounts despite their efforts, some women's beliefs may shift toward a more positive, healthy direction, at which point the continuance of the relationship seems less tenable, and termination readiness increases. It is as if there were a restructuring of their thought processes and a different way of knowing. Termination readiness was higher when abused women fully realized and articulated the following: the magnitude of abuse was severe and harmful; more nontraditional beliefs about sex role orientation; beliefs about social support were positive; the belief that they were worthy human beings; and the belief that they could end the abusive relationship, had the determination to do so despite the obstacles, and would reach a desirable outcome. Further, it seemed that it was cognitive belief factors working in combination which maximized the effect on termination readiness. Cognitive dissonance theory framework needs further testing.

#### Nursing Research

Further quantitative analysis could be conducted on the current data using hierarchical multiple regression to streamline the theoretical model. Further analysis could be conducted on the type of support, timing of support, and enacted support across different phases in the trajectory and levels of termination readiness for purposes of developing support pattern intervention protocols for each level. Additional analysis could be conducted to develop intervention protocols for categories of stages of knowledge and personal and social beliefs, across phases of the trajectory and levels of termination readiness.

This study should be replicated using the cognitive dissonance theory framework and a sample with more equal proportions of subjects across low, moderate, and high termination readiness. In particular, the abused women from the lower end of the continuum seemed to have a different perspective, based on the outliers, and should be recruited in higher numbers despite the time and effort it would take to do so. This study also could be replicated but with the addition of measuring the additional variables that emerged in the qualitative data. Replication studies also should include revision and expansion of the network map and the demographic section. The categorical demographic variables should be converted to continuous variables when possible. A follow-up study of this sample could be conducted to identify those women in the study who actually terminated their relationships since most respondents agreed to future contact with the investigator. Intervention studies could be designed using newly developed intervention protocols as treatments with abused women. There are many researchable questions about abused women's ways of knowing. A qualitative research design would be a useful way to approach these questions since there is currently no information about them with this population, yet there is some evidence accumulated in this study to suggest their importance for abused women.

There is also an implication for a market research study. Women in this subsample had misconceptions about shelters. Additionally, service providers were not necessarily conveying the message to the abused women consumers that they were there just for them. Further, demographic trends and social forces seem to be changing which can create both opportunities and consequences in the marketplace. Every effort must be made to target segments of the market, identify their needs, and offer services to meet each segment's needs. A marketplace study would involve surveying consumers' attitudes and needs, and various social services' offerings and how they compare and contrast with each other. The aim would be to keep women and children

from “falling through the cracks” because of service gaps, mistreatment by service providers, or misconceptions.

### Nursing Practice

It is evident from this and other studies by May (1985, 1986, 1988) that there are different levels of termination readiness. Further, there is evidence from this study that there are different phases which these respondents moved through and depending on the phase, termination readiness was inhibited or facilitated. Therefore, different intervention strategies could be necessary to meet the needs at different levels. The potential still exists that any interventions could create dissonance and foster negative beliefs about self and/or others. Therefore, the nurse needs to be sensitive to this and frame interventions accordingly.

To disseminate information about the study findings, an inservice education program could be packaged which captures the study findings about cognitive beliefs and termination readiness, and distributed to hospitals, shelters, and various social agencies. This program might include guidelines for practice with abused women such as the indicators of levels of readiness, the support pattern protocols, the use of positive self-talk strategies, and permission-giving to women in abusive situations to connect with their feelings and express their anger, in particular. Current patient or client admissions protocols could be expanded to reflect levels of termination readiness and appropriate interventions. Nursing histories should include more specific information about abused women’s patterns of social support including who provides them with what types of support, when in terms of levels of termination readiness, and are they satisfied? A discrepancy analysis could then be performed between the actual pattern of support and the ideal pattern of support according to the developed protocols. Nursing practice based on these findings may also be directed towards working specifically with shelters and other relevant services in designing social support programs for women residents.

## Study Summary

### Introduction

One of the biggest social problems of our time is family violence (Surgeon General's Report, 1985; U.S. Department of Justice, 1985). Wife abuse is an aspect of family violence that deserves further attention since the problem magnitude is such that 2 to 4 million women from all socioeconomic backgrounds, educational levels, nationalities, and ages are abused every year (Straus, Gelles, & Steinmetz, 1980; Straus & Gelles, 1986). Further, wife abuse is less well understood by society and its members than child or elder abuse. Those who would help children or elders are not as inclined to deal with and to extend assistance to an adult who stays in a relationship despite the recurrence of abuse.

Since research on wife abuse began almost twenty years ago, the question, "why do women stay in abusive relationships or conversely, why don't they leave?" has been one of the most frequently asked questions. It may seem contradictory that women stay in relationships or leave only to return when they know battering will recur, yet they do. The possibility existed that she stays because she is not ready to terminate (termination readiness) the relationship based on what she knows and believes about herself and others. The focus of this study was on wife abuse and abused women's termination readiness.

### Conceptual Framework

Cognitive dissonance theory (Festinger, 1957) provided the guiding framework for the study since it seemed likely that women who stay in abusive relationships are likely to experience inconsistencies in beliefs (dissonance) with regard to staying or ending the relationship. This theory holds that people who become aware of dissonance in their beliefs (cognitions) about themselves, others, and their actions, are motivated to reduce dissonance and regain consistency (consonance) by making



changes in their cognitions. Those changes perceived as least difficult are made first. The effort and time it takes to reduce dissonance depends upon the intensity of dissonance and the extent of change required. The outcome can be facilitated or inhibited depending upon the interrelationship of the cognitions. Abused women may stay permanently based on the interrelationship of their beliefs, they may leave temporarily and return to stay a while longer, or they may become aware of a growing dissonance among their beliefs that makes it untenable to remain in the relationship any longer, they see it for what it is, and their termination readiness increases.

Theory, research, and practice suggested that whether women leave the abusive relationship may involve an underlying process of becoming psychologically ready, and this process is influenced by their beliefs. Such personal and social beliefs as self-esteem, self-efficacy, sex role orientation, magnitude of abuse, and social support have been implicated as variables that could influence termination readiness. (Giles-Sims, 1983; Hotaling & Sugarman, 1986; Limandri, 1985; May, 1986; Mitchell & Hodson, 1981, 1983; NiCarthy, 1987; Straus, Gelles & Steinmetz, 1980; Walker, 1979, 1983). However, none of these beliefs had been studied specifically in relation to termination readiness using a cognitive dissonance theoretical framework.

#### Background Literature

The literature provided a means of conceptualizing sex role orientation, self-esteem, self-efficacy, magnitude of abuse, and social support beliefs as cognitions which may influence the abused woman's termination readiness. Sex role orientation has its roots in societal norms (Pleck, 1983). As long as violence is considered culturally acceptable (Dobash & Dobash, 1979; Straus, Gelles & Steinmetz, 1980; Walker, 1983; Yllo, 1984), abused women's beliefs about their roles and responsibilities may influence their termination readiness. In a patriarchal society, abused women may still believe that their self-esteem and self-efficacy are largely

derived by successful performance of domestic work (Blixseth, 1987; Bandura, 1977; Coopersmith, 1987; NiCarthy, 1987) and this may influence their termination readiness (May 1986, 1988). Because violence is culturally acceptable and because abused women may have been exposed to violence as a part of their family upbringing (Giles-Sims, 1983; Straus, Gelles & Steinmetz, 1980), their beliefs about the magnitude of abuse, both physical and nonphysical abuse, may influence readiness to terminate the relationship (May, 1986, 1988). Peoples' social support systems contribute to health (Cassel, 1967; Cobb, 1969; Weiss, 1974) across populations including the abused women population (Limandri, 1985; May, 1985, 1986, 1988; McKenna, 1985; Mitchell & Hodson, 1981, 1983). Literature also suggests that social support has a darker conflictual side which can thwart positive change towards a healthier lifestyle (Barerra, 1980; Rook, 1984; Tilden & Galyen, 1987). Social support systems tend to mirror societal expectations, and may continue to inform abused women about the responsibilities of their roles, their feelings about their image and their sense of potency. Specifically, interpersonal support, interpersonal conflict, and network structure characteristics could influence their termination readiness (May, 1988). The purpose of this study was to focus on these cognitive beliefs and their association with abused women's readiness to terminate the relationship.

### Research Design

The research design was nonexperimental and exploratory. It was a retrospective study designed to answer research questions about the relationship that sex role orientation, magnitude of abuse, self-esteem, self-efficacy, and social support had with readiness to terminate the relationship; the relationship of social network structure characteristics with readiness to terminate the relationship; and, how abused women described factors that related to readiness to terminate the relationship.

### Sample Description

A sample size of 81 abused women, was calculated *a priori* using power analysis (Cohen & Cohen, 1975). Elaborate recruitment protocols were developed to optimize the likelihood of participation. Eligibility criteria were also established. The convenience sample consisted of 86 abused women from shelters, support groups, and community solicitation from a Northwest metropolitan area. The demographic characteristics depict the sample as a heterogenous group. Findings implied that there were changing demographic trends in comparison to other studies which is suggestive of the need for more thorough analysis of the marketplace. The sample ranged from low to high levels of termination readiness, with some negative skewing. Two outliers were eliminated and quantitative analysis was conducted on a sample size of 84 (Pedhazur, 1982).

### Data Collection Procedures

Triangulation of quantitative and qualitative data collection procedures facilitated the understanding of termination readiness. For the quantitative method, each subject was given a booklet containing six instruments. Permission for use was obtained by those who developed the instruments. The instruments were: the Termination Readiness Index (May, 1988), the Tilden Interpersonal Relationships Inventory (Tilden, 1988), the Index of Spouse Abuse (Hudson & McIntosh, 1981), the Index of Sex Role Orientation (Dreyer, Woods, & James, 1981), the Self-Efficacy Scale (Sherer & Maddux, 1982), and the Self-Esteem Inventory (Coopersmith, 1987). The social network list from the Interpersonal Relationships Inventory was combined with Hirsch's (1979) and Norbeck's (1981) salient network analysis questions and organized into a matrix format. The desirability subscale of the Personality Research Form-E (Jackson, 1984) was used to measure social desirability since the relationship

between social desirability and some of the instruments used in this study was either unreported or unclear.

Data collection commenced with the approval of the study by the Oregon Health Sciences University Committee on Human Research. All data were treated confidentially. In situations that warranted further follow-up, women were given referral information. Women who participated in the study received a token of appreciation and a study summary for participation in the study.

### Quantitative Methods

With regard to analytic procedures for the quantitative data, internal consistency reliability was performed on each instrument and all had acceptable psychometric properties, although the social desirability subscale reliability estimate was marginal. Frequency distributions, scattergram analysis, correlations, and t-tests were performed. The lack of statistically significant findings on t-tests on all study variable scores between each of four groups from which participants were recruited confirmed that the study participants could be combined into one group.

### Results

Standard multiple regression analysis was used (CRUNCH, 1987). Termination readiness (dependent variable) was regressed on the set of sex role orientation, self-esteem, self-efficacy, interpersonal support, interpersonal conflict, physical abuse and nonphysical abuse cognitive belief variables after controlling for the one demographic variable of women staying away from their husband/partners longer that was associated with termination readiness. A multiple regression equation containing all study variables explained 31 % of the variance in termination readiness. The set of cognitive beliefs variables uniquely accounted for 27 % of the variance of termination readiness. Length of time away from husband/partner, physical abuse, sex role orientation, and interpersonal support were statistically significant.

### Qualitative Methods

For the qualitative method, 20 abused women were recruited from the total sample that were representative of different levels of termination readiness in the same proportion as the total sample. The focused interview method (Merton, Fiske, & Kendall, 1960) was used to illuminate the process of termination readiness. A semi-structured interview guide was designed to establish rapport, elicit responses about becoming ready to terminate, and focus on factors relevant to termination readiness. Interviews were tape recorded and transcribed using a modified verbatim format.

### Results

Respondents described factors that were part of the quantitative model. Additional variables were also described by respondents. All described variables fit logically under three larger interrelated constructs which emerged from the qualitative data. These constructs were couple relationship trajectory, dissonance development and reduction attempts, and personal and social beliefs changes. The couple relationship trajectory encompassed deference to the man, enmeshment, separation, and autonomy phases. If the respondents were committed to relationship maintenance, they reduced dissonance by minimizing the abusive situation and changed their beliefs accordingly. Termination readiness was inhibited. If respondents were committed to disengaging from the relationship, dissonance reduction efforts involved admitting to the magnitude of the abuse and the impact on their and their childrens' lives and changing their beliefs in a more positive direction. Termination readiness was facilitated.

### Discussion

Quantitative and qualitative findings converged on several main points with regard to cognitive beliefs and termination readiness. First, depending upon the phase in the couple relationship trajectory and their termination readiness, social support could be seen as positive or conflicted which suggests that different support strategies would be

necessary at different times in the trajectory in order to facilitate termination readiness. A combination of social network function and structure characteristics for different phases is needed that differs from what the literature qualifies as optimal, but which nonetheless may be optimal for abused women. Second, sex role orientation was a powerful predictor of termination readiness. In later phases of the trajectory, less traditional beliefs about self and family also tended to encompass more positive feelings about the self independent of the husband/partner. Third, self-esteem is a multidimensional construct which reflects dimensions that seemed to be unique for women, such as expression of anger as one means of building self-esteem, and finding their voices as a way of knowing they are ready to end the relationship. There seemed to be a need to make an inner connection with the self and an outer connection with others as a part of the self-esteem development process. Fourth, efficacious behaviors seemed to be dependent on the decision that was made about staying or leaving the situation. Efficacy could be present in either situation. During the later phases of the trajectory when termination readiness was also increasing, inner strengths and capabilities were self- versus other-oriented and a positive outcome expectancy was envisioned. Fifth, the abuse in the situation served as the basis for dissonance development. Dissonance occurred both while involved in the abusive relationship and attempting to stay, and while disengaging from the relationship. Finally, a significant traumatic event seemed to accentuate the dissonance, shatter old beliefs, and serve as additional motivation to readiness to end the relationship. Additional variables emerged in the qualitative data which were not analyzed in the quantitative model but could also contribute to the variance in termination readiness. The limitations of the study include an inability to make inferences to the larger population.

## Implications

Implications for theory, practice, and research are many. There is some evidence to indicate that a cognitive dissonance theoretical framework is useful in explaining the impact of cognitive beliefs on termination readiness. Further research on the current data set is indicated including hierarchical multiple regression to streamline the model, and further quantitative and qualitative analysis to answer research questions that were beyond the scope of this study. Future research should include replication of this study with various revisions and additions which will improve upon the current design. Intervention studies could also test the newly developed protocols on social support with regard to each level of termination readiness. A market study is indicated based on the demographic trends and various prevailing social forces. In the practice arena, there needs to be a packaging and distribution of the knowledge gained from this study since it seems likely that there are different levels of termination readiness which each require intervention strategies focusing on social support, esteem and efficacy building, and role changes.

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Appendix A

Coding System for Tracking Study Participants

Appendix A

Coding System for Tracking Subjects

<u>ID #</u>	<u>Recruitment location</u>
101-199 (odd) 100-198 (even)	Shelter Raphael House Hillsboro Shelter Safe Place- Vancouver, WA
200-299	Support groups
300-399	Shelter Mail-outs to: Clackamas Shelter Woman's Place- Eugene, OR YWCA- Seattle, WA
400-499	Community solicitation classified ads women's health clinic word-of-mouth natural leader referrals

Appendix B

Power Analysis Formula

## Appendix B

### Power Analysis

Null hypothesis: B will account for no variance in Y beyond what A accounts for

Alternate hypothesis: Specified alternate hypothetical value= effect size (ES) =  $f^2$

Formula for calculating n given that:

alpha = .05

power = .80 (probability of rejecting null)

$k_B = 7$

$k_A = 3$

$L = 14.35$

$f^2 = .20$  (moderate to large effect size)

$$n = \frac{L}{f^2} + k_A + k_B + 1$$

$$= \frac{14.35}{.20} + 3 + 7 + 1$$

$$= 81$$

Formula for calculating the unique variance that B accounts for beyond A when f is moderate to large (.20) and the error is 1-R (.75)

$$f^2 = \frac{sR^2}{1-R^2}$$

$$= \frac{(.75)(.20)}{1-.75^2}$$

$$= (.75)(.20) = .15 \text{ (15\%)}$$

Cohen & Cohen (1975, pp. 144-145)

Appendix C

Administration Protocols

## Appendix C Phone Protocols

To shelter staff (contacts):  
Introduction of self

Hello. This is Barbara May. I have worked with you before in my nursing research with a battered women population. (If I haven't I'll revise this part). As you may recall, I am a nurse and a doctoral student at Oregon Health Sciences University in Portland. I am now ready to continue my research on the beliefs which the women have about their situation which may have an influence on their readiness to terminate their abusive relationships. I am hoping I can work with you again since I will need to have a sample of 82 participants who will fill out a questionnaire booklet. Of this sample, I'd also like to interview a sub-sample of about 20 women.

Study Data Collection Procedures

If you agree that we can work together, I think that the procedure we used last time worked well based on staff feedback and the women's comments to me.  
Procedure: I'll send you a fact sheet which you can bring to the women when you ask them if they want to participate in this nursing study. The fact sheet will describe the study, explain that it's voluntary, and that all responses are confidential, and that it will take about 35-40 minutes to complete. I'll contact you again after the meeting and if they agreed, we can set up a meeting time.

Debriefing time

Last time, most of the women wanted to talk after responding to the booklet. This seemed to work to the women's benefit and I would be willing to do this again. Or, if this time is inconvenient for the debriefing part, I can come back. I would also be willing to conduct an inservice on a topic of interest to the women in exchange for your/their help.

Closing

Depending upon responses above:  
Thank you very much for listening to me. I understand why it won't work at this time, but there may be a time again in the future when we can. I'll look forward to that opportunity. Good day to you.

OR

Thank you very much for considering this proposal. I'll send you what you have requested and call you back next week to see what you've decided.

OR

Thank you very much for allowing me to come to your facility. I'll send you the fact sheet and call you after the meeting and we'll plan from there.

## Appendix C

### Protocol

Date

Dear,

As per our phone conversation, I am sending you a brief fact sheet about my study so you can inform the staff about me, and that I will be there to ask the women if they want to participate. I will call you in the next week to schedule meeting times. This is really great of you to consider my request and I appreciate it. I assure you that I am very sensitive to these women's needs and am only interested in treating them with dignity and respect.

About the researcher:

- Has worked with women's shelters in Montana and Oregon (Raphael House) for the past eight years.
- A registered nurse and a graduate nursing student at the Oregon Health Sciences University.
- Has a sincere interest in providing better service to women; needs to study things further.

About the study:

- Womens' participation in this particular study may help to gain a better understanding of what women's feelings are when they think about staying or ending a relationship where shoving, slapping, hitting or some other abuse is occurring.

Participants'  
Commitment:

- Time: should take about 35-40 minutes to complete a questionnaire booklet.
- Consent: participation is voluntary. No consequences if they choose not to participate.
- Confidential: No names are used. No identifying information will be used.

If women  
are agreeable:

- Ms. May will come to a designated group meeting, speak to the group, answer any questions, and distribute the booklets. If they are willing and there is time, they may fill out the booklet upon the time of distribution.

Thanks again for your help. My phone number is: 222-6154 (H). My address is: 709 SW 16th #311, Portland, OR 97205.

Sincerely,



## Appendix C

### Administration Protocol

**The questionnaire packet will be administered to abused women by Investigator May with the following explanation:**

- Purpose of the research project: "I have worked with women in shelters for years. I am sincerely interested in getting a better understanding of women's beliefs about what is going on in relationships where shoving, slapping, hitting or other abuse is occurring so that nurses can be more effective in meeting the needs of women in the future."
- Invitation to participate: "You are invited to participate in this research project. Any information you can provide will be a big contribution and very much appreciated."  
  
"All information is strictly confidential. Your participation is voluntary."
- Informed consent form: "Please read the consent form. If you agree to to participate, please sign the form."  
(This form will be placed in a separate brown envelope **AWAY** from their booklets. If they say they feel uncomfortable signing their last name on the consent form, explain that the form serves to "officially" inform them about what they are participating in and is also evidence that they are participating freely. Just tell them the last name is optional).
- Time commitment: "It should take you about 35-40 minutes to complete the booklet."
- Procedures for collecting the booklets from women: Give them the consent form and booklet, and ask them to complete the consent forms, the visual analog, and the booklet and return it. Also ask them to address the envelope if they wish to have a copy of the study results. Place any identifying information in a place that is away from the booklet.
- Fielding questions: At conclusion of participation in the study.

My thanks to you for helping me collect this information: Barbara May, RN, MN  
Oregon Health Sciences University, School of Nursing- L456, Portland, OR 97201

## Appendix C

### Phone Protocols

#### One-to-one contact (woman calling investigator):

Investigator: Hello. Thank you very much for calling to schedule an interview. Can we talk for a few minutes or do we need to be quick about arranging our interview meeting time, date, location?

I will follow her lead and respond accordingly

#### One-to-one contact (investigator calling woman):

Investigator: Hello (if it's a man's voice, either hang up or pretend I have dialed a wrong number, depending upon what has been decided earlier between the investigator and the woman).

This is Barbara May, is (state first name) there? (Go on immediately, or wait until she reaches the phone).

Confirm that it is she, chat a little if it's safe, and set up a meeting time, date, location.

#### Message for the phone answering machine:

Investigator: This is Barbara May's home. I can't come to the phone right now but thank you for calling and I would like to talk with you. Please leave your name, when you called, a message, and a phone number where you can be reached. If there are specific times that you will be there please let me know this so I can call back at those times. Thanks again for calling and I will get back to you!

Appendix D

Flyer and Advertisements

## Women

Are you in a relationship with a man who. . .

- Hits, shoves, slaps or hurts you in some way?
- Calls you names and regularly insults you?
- Makes you feel fearful?

I am a doctoral student in nursing at Oregon Health Sciences University and I am doing a study to get a better understanding of how you feel about your situation. I would like to talk with you about your situation. Whatever you share with me will be strictly confidential.

My name is Barbara. You can contact me by calling 222-6154. If I'm not there, **please** leave a message on the machine, and it is likely that I will be able to call you back within the hour.



## Appendix D

### Newspaper Advertisement

#### Willamette Week and This Week Ad:

**Women:** Does your man yell, shove, slap, or hurt you? Would talking help? Volunteers needed for a strictly confidential interview. A doctoral nursing student at OHSU who's worked many years with women in this situation is conducting a research study to gain a fuller understanding of how you feel about your situation. Call Barbara 222-6154. Thanks.

Appendix E

Fact Sheet

Appendix E  
Fact Sheet

Hello. I would have preferred being there in person, but due to the confidential location of the shelter, I could not be. Therefore, I will be explaining my reason for contacting you in the form of this fact sheet. I am very sensitive to abused women's needs and am only interested in treating you with dignity and respect. Therefore, this fact sheet provides you with information about myself and my study entitled, "Cognitive beliefs associated with abused women's readiness to terminate the relationship," so you can feel fully informed about what you will be participating in.

About the researcher:

- Has worked with women's shelters in Montana and Oregon (Raphael House in Portland) for the past 8 years. Is a nurse (RN).

About the study:

- Your participation in this particular study may help to gain a better understanding of what women's feelings are when they think about staying or ending a relationship where shoving, slapping, hitting or some other abuse is occurring. Whether or not you are ready to end this relationship with your husband or partner, I'd like to hear what women like yourself have to say.

Participants' commitment:

- **Time-** should take about 40 minutes to complete a questionnaire booklet. If you also want to participate in an interview, it would take an additional hour. The meeting times and locations are very flexible- It would be entirely up to you as to where and when the meeting would take place.
- **Consent-** participation is voluntary. No consequences if you don't participate.
- **Confidential-** No names are used anywhere on the survey.

If agreeable to participating, follow these instructions:

- You must be 18 years old or older, must be able to read English, must have been partnered or married (within the past 6 months) to a man who hit you.
- Sign one consent form (with real or made-up name) and keep one for yourself.
- Complete the one page question first which is a separate piece of paper that is right behind the consent forms, then respond to the survey.
- Place an address on the white envelope if you'd like the survey results sent to you.
- On the inside back cover, let me know whether your partner or husband grew up in a household where he experienced abuse or saw his parents/guardians hitting each other. And, indicate how long you have been separated from him.

If you have any questions:

- My number is on the questionnaire and I also included a business card. Call collect. Thank you in advance for participating. Your responses may help nurses be more effective care givers of women in abusive relationships.

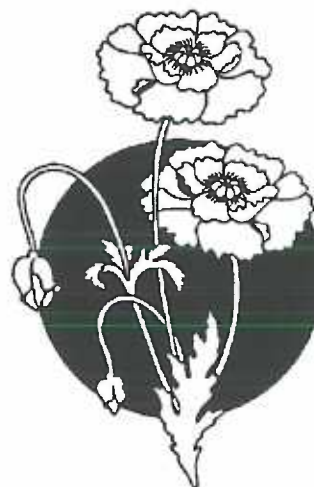
Sincerely,

Appendix F

Instruments and Scoring Information



*A survey for women who are  
or have been in abusive situations...*



*Dear Friend,*

*During my many years of work in womens' shelters and in my nursing practice, I have learned much from women who are involved in relationships where their partners have shoved, slapped, hit, or hurt them in some way. This new knowledge enabled me to become a better service provider. However, there is still much to learn about what happens in relationships such as yours so that nurses can be more effective in meeting needs when you or other women like you seek our help.*

*You can help by responding to the questions in this booklet. Your responses will be kept strictly confidential. I understand that you may have many things on your mind right now but your voluntary participation in this research study, which should take 40 minutes, may help nurses help you and others someday, so please try.*

*Thank you sincerely,*

*Barbara May, RN, MN, Doctoral Student  
Oregon Health Sciences University  
Portland, OR 97205*

## Appendix F

### Index on Sex Role Orientation (ISRO) Dreyer, James, & Woods

**Instructions:** This questionnaire is a series of statements about your personal attitudes. Each statement represents a commonly held belief. Read each statement and decide to what extent it describes you. There are no right or wrong answers. Please indicate your own personal feelings about each statement below by placing an **X** in the numbered box that best describes your attitude or feeling. Please be very truthful and describe what you really believe.

	STRONGLY DISAGREE	DISAGREE	NO OPINION	AGREE	STRONGLY AGREE
1. Women should take care of running their homes and leave running the country up to men.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
2. Most women who want a career should not have children.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
3. A preschool child is likely to suffer if his mother works.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
4. Having a job means having a life of your own.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
5. A girl proves she is a woman by having a baby.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
6. A woman should not let bearing and rearing children stand in the way of a career if she wants it.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
7. Except in special cases, the wife should do the cooking and housecleaning and the husband should provide the family with money.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
8. A woman should have exactly the same job opportunities as a man.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
9. Women are much happier if they stay at home and take care of their children.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

Appendix F

	STRONGLY DISAGREE	DISAGREE	NO OPINION	AGREE	STRONGLY AGREE
10. A working mother can establish just as warm and secure a relationship with her children as a mother who doesn't work.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
11. Women should be concerned with their duties of child rearing and house tending, rather than with their careers.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
12. Although women hold many important jobs, their proper place is in the home.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
13. I approve of a woman providing the financial support for the family while the husband does the household chores.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
14. Men and women should be paid the same money if they do the same work.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
15. I could not respect a man if he decided to stay at home and take care of his children while his wife worked.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
16. A woman should realize that just as she is not suited for heavy physical work, there are also other jobs that she is not suited for, because of her mental and emotional nature.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

## Appendix F

### Self-Efficacy Scale Sherer & Maddux

**Instructions:** This questionnaire is a series of statements about your personal attitudes and traits. Each statement represents a commonly held belief. Read each statement and decide to what extent it describes you. There are no right or wrong answers. You will probably agree with some of the statements and disagree with others. Please indicate your own personal feelings about each statement below by placing an **X** in the numbered box that best describes your attitude or feeling. Please be very truthful and describe yourself as you really are, not as you would like to be.

	DISAGREE STRONGLY	DISAGREE MODERATELY	NEUTRAL	AGREE MODERATELY	AGREE STRONGLY
1. When I make plans, I am certain I can make them work.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
2. One of my problems is that I cannot get down to work when I should.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
3. If I can't do a job the first time, I keep trying until I can.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
4. When I set important goals for myself, I rarely achieve them.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
5. I give up on things before completing them.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
6. I avoid facing difficulties.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
7. If something looks too complicated, I will not even bother to try it.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
8. When I have something unpleasant to do, I stick to it until I finish it.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
9. When I decide to do something, I go right to work on it.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

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	DISAGREE STRONGLY	DISAGREE MODERATELY	NEUTRAL	AGREE MODERATELY	AGREE STRONGLY
10. When trying to learn something new, I soon give up if I am not initially successful.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
11. When unexpected problems occur, I don't handle them well.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
12. I avoid trying to learn new things when they look too difficult for me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
13. Failure just makes me try harder.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
14. I feel insecure about my ability to do things.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
15. I am a self-reliant person.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
16. I give up easily.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
17. I do not seem capable of dealing with most problems that come up in my life.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

**Appendix F**  
**Coopersmith Inventory (SEI)**

**Directions:** Below is a list of statements about feelings. If a statement describes how you usually feel, put an **X** in the column "**LIKE ME.**" If a statement does not describe how you usually feel, put an **X** in the column "**UNLIKE ME.**" There are no right or wrong answers. Begin at the top of the page and mark all 25 statements.

	LIKE ME	UNLIKE ME
1. Things usually don't bother me.	[ ]	[ ]
2. I find it very hard to talk in front of a group.	[ ]	[ ]
3. There are lots of things about myself I'd change if I could.	[ ]	[ ]
4. I can make up my mind without too much trouble	[ ]	[ ]
5. I'm a lot of fun to be with.	[ ]	[ ]
6. I get upset easily at home.	[ ]	[ ]
7. It takes me a long time to get used to anything new.	[ ]	[ ]
8. I'm popular with persons my own age.	[ ]	[ ]
9. My family usually considers my feelings.	[ ]	[ ]
10. I give in very easily.	[ ]	[ ]
11. My family expects too much of me.	[ ]	[ ]
12. It's pretty tough to be me.	[ ]	[ ]
13. Things are all mixed up in my life.	[ ]	[ ]
14. People usually follow my ideas.	[ ]	[ ]
15. I have a low opinion of myself.	[ ]	[ ]
16. There are too many times when I would like to leave home.	[ ]	[ ]
17. I often feel upset with my work.	[ ]	[ ]
18. I'm not as nice looking as most people.	[ ]	[ ]
19. If I have something to say, I usually say it.	[ ]	[ ]
20. My family understands me.	[ ]	[ ]
21. Most people are better liked than I am.	[ ]	[ ]
22. I usually feel as if my family is pushing me.	[ ]	[ ]
23. I often get discouraged with what I am doing.	[ ]	[ ]
24. I often wish I were someone else.	[ ]	[ ]
25. I can't be depended on.	[ ]	[ ]

Appendix F

On the lines below, please list the people who are important to you (including husband/partner, people at work, school, neighbors, shelter, support groups, church). Use only their first names or initials. For each person, state their relationship to you. Please list your husband or partner (boyfriend) as person<sub>1</sub> even if you are separated from him presently. **The lines are numbered for your convenience only**, since you'll be asked questions about each person in the next section. There is no correct number that you should have listed here. Whether you list 1 or up to 20, respond to the next set of questions according to this number. Also, the numbers do not mean that person<sub>1</sub> is a better person than person<sub>3</sub> or person<sub>4</sub> or person<sub>2</sub>.

EXAMPLE	
Person	Relationship
1 <u>BOB</u>	<u>HUSBAND</u>
2 <u>JAN</u>	<u>SISTER</u>
3 <u>MARY</u>	<u>NEIGHBOR</u>

YOUR LIST

Person	Relationship
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____
11 _____	_____
12 _____	_____
13 _____	_____
14 _____	_____
15 _____	_____
16 _____	_____
17 _____	_____
18 _____	_____
19 _____	_____
20 _____	_____

Appendix F

These next questions ask you to describe "Who knows who" among the people you listed.

- 1) In the *first column*, place the first names or initials on the line that corresponds with their number as in the previous section.
- 2) *Go across each of the other columns* and place the first names or initials on the line that corresponds with their number as listed in the previous section.
- 3) *Now go down the second column* and compare person<sub>2</sub> with each person listed in the first column. If person<sub>2</sub> knows any of the people in the first column, place an "X" in the corresponding box. If person<sub>2</sub> does not know any people in the first column, place a "O" in the corresponding box. Just skip over the grey boxes. No mark is necessary there.
- 4) *Repeat this process noted above* for person<sub>3</sub> (column 3) through person<sub>12</sub> (column 12). If you only had person<sub>1</sub> and person<sub>2</sub>, leave the rest of the squares blank.
- 5) *Respond to columns 13, 14, and 15* for each person listed in column 1.

Column 1	Column 2	Column 3	Column 4 - Column 12	Column 13	Column 14	Column 15
List each significant person in your life (Just list first 12 even if you had more in the previous section)	Person <sub>2</sub>	Person <sub>3</sub>	Person <sub>4</sub> - Person <sub>12</sub>	How long have you known each person on the list (days, months, years)	How frequently do you usually have contact (phone calls, visits, letters) with each person on the list (daily, weekly, monthly, a few times a year, once a year)	What do you turn to each of these people for (information, advice, emotional support, emergency, positive feedback, loans, transportation, help with chores, babysitting, fun/recreation)
Person <sub>1</sub> <u>BOB</u>	X	X	-	4 years	Daily - 100% together	emotional support, info, advice
Person <sub>2</sub> <u>JOAN</u>		O	-	3 weeks	weekly	emotional support, info
Person <sub>3</sub> <u>MARY</u>	X		-	2 months	weekly	emotional support, info
Person <sub>4</sub>	-	-	-			



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Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	Column 8	Column 9	Column 10	Column 11	Column 12	Column 13	Column 14	Column 15	
List each significant person in your life (just list first 12 even if you had more in the previous section)	Person <sub>1</sub>	Person <sub>2</sub>	Person <sub>3</sub>	Person <sub>4</sub>	Person <sub>5</sub>	Person <sub>6</sub>	Person <sub>7</sub>	Person <sub>8</sub>	Person <sub>9</sub>	Person <sub>10</sub>	Person <sub>11</sub>	Person <sub>12</sub>	How long have you known each person on the list (for example, the number of days, months, years)	How frequently do you usually contact (phone calls, visits, letters) each person on the list (daily, weekly, a few times a year, once a year)	What do you turn to each of these people for (information, advice, support, emergency, positive feedback, love, inspiration, help with choices, babysitting, babysitting)
Person <sub>1</sub>															
Person <sub>2</sub>															
Person <sub>3</sub>															
Person <sub>4</sub>															
Person <sub>5</sub>															
Person <sub>6</sub>															
Person <sub>7</sub>															
Person <sub>8</sub>															
Person <sub>9</sub>															
Person <sub>10</sub>															
Person <sub>11</sub>															
Person <sub>12</sub>															

Please go to next page

During the past year, have you lost any important relationships due to moving, a job change, divorce or separation, death, or some other reason?

- \_\_\_ 1. No
- \_\_\_ 2. Yes

If Yes:

Please check the category of persons who are no longer available to you.

- \_\_\_ spouse or partner
- \_\_\_ family members or relatives
- \_\_\_ friends
- \_\_\_ work or school associates
- \_\_\_ neighbors
- \_\_\_ health care providers
- \_\_\_ counselor or therapist
- \_\_\_ minister/priest/rabbi
- \_\_\_ other (specify) \_\_\_\_\_

Overall, how much of your support was provided by these people who are no longer available to you?

- \_\_\_ 1. none at all
- \_\_\_ 2. a little
- \_\_\_ 3. a moderate amount
- \_\_\_ 4. quite a bit
- \_\_\_ 5. a great deal

## Appendix F

### Interpersonal Relationships Inventory Tilden

**Instructions:** Most relationships with people we feel close to are both helpful and stressful. Below are statements that describe close personal relationships. Please read each statement and mark an X in the box that best fits your situation. There are no right or wrong answers.

These first statements ask you to disagree or agree.

	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE
1. I know someone who makes me feel confident in myself.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
2. Some people I care about share similar views with me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
3. There is someone I can turn to for helpful advice about a problem.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
4. I can talk openly about anything with at least one person I care about.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
5. There is someone I could go to for anything.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
6. Some people in my life are too pushy.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
7. I can count on a friend to make me feel better when I need it.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
8. There is someone in my life who gets mad if we have different opinions.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

## Appendix F

These first statements ask you to disagree or agree.

	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE
9. It's safe for me to reveal my weaknesses to someone I know.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
10. Someone I care about stands by me through good times and bad times.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
11. I have the kind of neighbors who really help out in an emergency.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
12. There is someone I care about that I can't count on.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
13. If I need help, all I have to do is ask.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
14. I have enough opportunity to talk things over with people I care about.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

These next statements ask you how often something happens

	NEVER	ALMOST NEVER	SOMETIMES	FAIRLY OFTEN	VERY OFTEN
15. I have enjoyable times with people I care about.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
16. I spend time doing things for others when I'd really rather not.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

Appendix F

These next statements ask you how often something happens

	NEVER	ALMOST NEVER	SOMETIMES	FAIRLY OFTEN	VERY OFTEN
17. Some people I care about invade my privacy.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
18. I am embarrassed by what someone I care about does.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
19. Someone I care about tends to take advantage of me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
20. Some people I care about are a burden to me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
21. I wish some people I care about were more sensitive to my needs.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
22. People I care about make me do things I don't want to do.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
23. There is tension between me and someone I care about.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
24. I have trouble pleasing some people I care about.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
25. At least one person I care about lets me know they believe in me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
26. Some people I feel close to expect too much from me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

## Appendix F

### The PRF Form- E Jackson

**Directions:** This questionnaire has a series of statements which one might use to describe oneself. Read each statement and decide whether or not it describes you. If you agree with a statement or decide that it does describe you answer **TRUE**. If you disagree with a statement or feel that it is not descriptive of you, answer **FALSE**. Answer every statement either true or false, even if you are not completely sure of your answer.

	TRUE	FALSE
1. I am quite able to make correct decisions on different questions.	[ ]	[ ]
2. My life is full of interesting activities.	[ ]	[ ]
3. If someone gave me too much change I would point it out.	[ ]	[ ]
4. I get along with people at parties quite well.	[ ]	[ ]
5. I am glad I grew up the way I did.	[ ]	[ ]
6. I am always prepared to do what is expected of me.	[ ]	[ ]
7. I am one of the lucky people who could talk to my parents about my problems.	[ ]	[ ]
8. I am careful to plan for my distant goals.	[ ]	[ ]
9. I am never able to do things as well as I should.	[ ]	[ ]
10. I believe people tell lies any time it is to their advantage.	[ ]	[ ]
11. I would be willing to do something a little bit unfair to get something that was important to me.	[ ]	[ ]
12. I did many very bad things as a child.	[ ]	[ ]
13. I often question whether life is worthwhile.	[ ]	[ ]
14. My daily life includes many activities I dislike.	[ ]	[ ]
15. Many things make me feel uneasy.	[ ]	[ ]
16. I find it very difficult to concentrate.	[ ]	[ ]

## Appendix F

### Index of Spouse Abuse (ISA) Hudson & McIntosh

**Instructions:** This questionnaire is designed to measure the degree of abuse you have experienced in your relationship with your partner. It is not a test so there are no right or wrong answers. Answer each item as carefully and accurately as you can by placing an **X** in the numbered box that corresponds with your experience.

	NEVER	RARELY	OCCASIONALLY	FREQUENTLY	VERY FREQUENTLY
1. My partner belittles me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
2. My partner demands obedience to his whims.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
3. My partner becomes surly and angry if I tell him he is drinking too much.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
4. My partner makes me perform sex acts that I do not enjoy or like.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
5. My partner becomes very upset if dinner, housework, or laundry is not done when he thinks it should be.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
6. My partner is jealous and suspicious of my friends.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
7. My partner punches me with his fists.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
8. My partner tells me I am ugly and unattractive.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
9. My partner tells me I really couldn't manage or take care of myself without him.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
10. My partner acts like I am his personal servant.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
11. My partner insults or shames me in front of others.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

Appendix F

	NEVER	RARELY	OCCASIONALLY	FREQUENTLY	VERY FREQUENTLY
12. My partner becomes very angry if I disagree with his point of view.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
13. My partner threatens me with a weapon.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
14. My partner is stingy in giving me enough money to run our home.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
15. My partner belittles me intellectually.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
16. My partner demands that I stay home to take care of the children.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
17. My partner beats me so badly that I must seek medical help.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
18. My partner feels that I should not work or go to school.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
19. My partner is not a kind person.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
20. My partner does not want me to socialize with my female friends.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
21. My partner demands sex whether I want it or not.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
22. My partner screams and yells at me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
23. My partner slaps me around my face and head.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
24. My partner becomes abusive when he drinks.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]



Appendix F

	NEVER	RARELY	OCCASIONALLY	FREQUENTLY	VERY FREQUENTLY
25. My partner orders me around.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
26. My partner has no respect for my feelings.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
27. My partner acts like a bully towards me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
28. My partner frightens me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
29. My partner treats me like a dunce.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]
30. My partner acts like he would like to kill me.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]

**Appendix F**  
**TRI**  
**May**

**Instructions:** This questionnaire was developed specifically for women who have been shoved, slapped, hit or hurt in any way by their husbands/partners. These questions ask you to describe feelings that you have about whether or not you are ready to end this relationship.

On a scale from 1 to 6, with 1= **STRONGLY DISAGREE** and 6= **STRONGLY AGREE**, place an **X** in the numbered box that best describes you. Please make an effort to answer all questions. There are no right or wrong answers. An example question follows.

**Example:** On a scale from 1 to 6, with 1 being equal to **Strongly Disagree** and 6 being equal to **Strongly Agree**. Circle the number that best describes you for each question.

	STRONGLY DISAGREE			STRONGLY AGREE		
I feel that I can protect myself if I stayed in my relationship with my partner.	1	2	3	4	5	6
	[ ]	[ ]	[ ]	[ ]	[X]	[ ]

Box number **5** has an **X** in it. This means that the person feels that she could protect herself quite well.

These questions ask you how you feel right now.

	STRONGLY DISAGREE			STRONGLY AGREE		
1. I feel that my husband/partner would stop hurting me if I stay in my relationship.	1	2	3	4	5	6
	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
2. I feel my relationship with my husband/partner is generally good so I don't think about ending my relationship.	1	2	3	4	5	6
	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
3. I feel ready to risk some people being mad at me when I think about ending my relationship with my husband/partner.	1	2	3	4	5	6
	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
4. I feel that whenever I hear of someone else getting hurt by her husband/partner, I realize that it could happen to me again.	1	2	3	4	5	6
	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

Appendix F

	<b>STRONGLY DISAGREE</b>			<b>STRONGLY AGREE</b>		
5. I feel things can only get worse if I stay in the relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
6. I feel ready to risk the loss of all my belongings if I end my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
7. I feel ready to risk the threat of financial security when when I think about ending my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
8. I feel I am ready to let go of my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
9. I feel ready to do anything it would take to end my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
10. I feel ready to risk the unknown things out there when I think about ending my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
11. I feel that I could be a more productive person at home and/or work if I end my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
12. I feel my life would be seriously threatened if I don't end my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
13. I feel I would gain control over my own life if I end my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
14. I feel ready to risk asking others to help me when I think about ending my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]

Appendix F

	STRONGLY DISAGREE			STRONGLY AGREE		
15. I feel ready to risk making it on my own when I think about ending my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
16. I feel I have a lot to gain by ending my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]

If you have/had any children living with you and your partner, go to questions 17, 18, and 19. Check here \_\_\_\_\_ if these questions do not apply to you. If you have no children, please go to the next page. Thanks.

	STRONGLY DISAGREE			STRONGLY AGREE		
17. I feel worried about the safety of my children if I stay in my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
18. I feel my children would be better off when I think about ending my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]
19. I feel ready to risk taking on the responsibilities of raising my children when I think about ending my relationship with my husband/partner.	1 [ ]	2 [ ]	3 [ ]	4 [ ]	5 [ ]	6 [ ]

**There are just a few more questions on some characteristics about you and your family members.**

1. Your age in years \_\_\_\_\_

2. Marital status at present. Circle the one that best describes you:

- 1. SINGLE (NEVER MARRIED)
- 2. PARTNERED BUT NOT MARRIED
- 3. MARRIED
- 4. DIVORCED
- 5. SEPARATED (Describe \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_)

6. WIDOWED

4. Circle the one that best describes your situation:

- 1. EMPLOYED
- 2. UNEMPLOYED
- 3. HOMEMAKER
- 4. RETIRED
- 5. STUDENT-EMPLOYED
- 6. STUDENT-UNEMPLOYED

6. TOTAL NUMBER OF SCHOOL YEARS COMPLETED: \_\_\_\_\_

7. Number of children you have LIVING WITH YOU in each age group: (IF NONE, WRITE "0" ON THIS LINE) \_\_\_\_\_

- \_\_\_\_\_ UNDER 5 YEARS OF AGE
- \_\_\_\_\_ 5 TO 9
- \_\_\_\_\_ 10 TO 14
- \_\_\_\_\_ 15 TO 19
- \_\_\_\_\_ 20 AND OVER

9. Circle the geographic location that best describes your most recent residence:

- 1. URBAN
- 2. SUBURBAN
- 3. RURAL

3. Circle the one that best describes you.

- 1. ASIAN
- 2. BLACK
- 3. HISPANIC
- 4. WHITE
- 5. NATIVE AMERICAN INDIAN
- 6. OTHER (Describe \_\_\_\_\_)
- 7. PREFER NOT TO ANSWER

5. Circle the one that best describes your situation:

- 1. FINISHED GRADES 0-8
- 2. FINISHED GRADES 9-11
- 3. FINISHED HIGH SCHOOL
- 4. SOME COLLEGE
- 5. FINISHED COLLEGE (Specify major \_\_\_\_\_)
- 6. FINISHED GRADUATE SCHOOL

8. Source of income (Circle all that apply)

- 1. EMPLOYMENT
- 2. GOVERNMENT ASSISTANCE
- 3. LOAN/SCHOLARSHIP/STIPEND
- 4. AILMONY
- 5. CHILD SUPPORT
- 6. OTHER (SPECIFY) \_\_\_\_\_

10. Are you staying at a shelter or any other form of transitional type housing right now?

- 1. NO
- 2. YES---->If yes, how long? \_\_\_\_\_ days  
If yes, how many times before now  
have you done this? \_\_\_\_\_ times

11. Have you ever stayed at a shelter in the past?

- 1. NO
- 2. YES

Appendix F

12. I have left the present relationship

\_\_\_\_\_ times:

1. 0 TIMES
2. 1-2 TIMES
3. 3-4 TIMES
4. 5-7 TIMES
5. GREATER THAN 7 TIMES

14. I have been involved in my present relationship:

1. LESS THAN 1 YEAR
2. 1-2 YEARS
3. 3-5 YEARS
4. 6-9 YEARS
5. GREATER THAN 9 YEARS

16. While you were growing up, have you seen your parents/guardians hitting one another?

1. NEVER
2. OCCASIONALLY
3. QUITE A BIT
4. ALMOST ALL THE TIME

13. When I left, I stayed away from the relationship for \_\_\_\_\_ days on the average:

1. 0 DAYS
2. 1 DAY
3. 2-5 DAYS
4. 6-10 DAYS
5. 11-15 DAYS
6. GREATER THAN 15 DAYS

15. While you were growing up, have you heard your parents/guardians yelling at one another?

1. NEVER
2. OCCASIONALLY
3. QUITE A BIT
4. ALMOST ALL THE TIME

## Appendix F

### Scoring Information

#### Index of Sex Role Orientation

Computer code items 4, 6, 8, 10, 13, and 14 as (1=1), (2=2), (3=3), (4=4), (5=5)

Computer code items 1, 2, 3, 5, 7, 9, 11, 12, 15, and 16 as (1=5), (2=4), (3=3), (4=2), (5=1).

#### Self-Efficacy Scale

Computer code items 1, 3, 8, 9, 13, and 15 as (1=1), (2=2), (3=3), (4=4), (5=5)

Computer code items 2, 4, 5, 6, 7, 10, 11, 12, 14, 16, and 17 as (1=5), (2=4), (3=3), (4=2), (5=1).

#### Self-Esteem Inventory

Computer code items 2, 3, 6, 7, 10, 11, 12, 13, 15, 16, 17, 18, 21, 22, 23, 24, 25, (unlike me)=1

Computer code items 1, 4, 5, 8, 9, 14, 19, 20, (like me)=1

Note: Total sum is multiplied by 4 to place it on a 100 point scale.

#### Interpersonal Relationships Inventory

Support scale= 1 to 5, 7, 9 to 11, 13, 14, 15, and 25

Conflict scale= 6, 8, 12, 16 to 24, and 26

All items scored as (1=1), (2=2), (3=3), (4=4), (5=5).

#### Desirability subscale of the Personality Research Form

Items coded as 1 to 8 (true)=1

Items coded as 9 to 16 (false)=1

#### Termination Readiness Index

All items coded as (1=1), (2=2), (3=3), (4=4), (5=5), (6=6) except items 1 and 2 which are reverse coded.

Appendix G

Operational Definitions



## Appendix G

### Definitions

#### Definition of Terms

Readiness to terminate an abusive relationship is a state of being willing to take action to terminate an abusive relationship based on the realization that there is a problem which exists that is serious and she is vulnerable to, and based on what she knows about herself and others she weighs the options and decides she is ready to terminate her relationship. It will be measured by the Termination Readiness Index (May, 1985-88).

Cognitions- are beliefs the abused woman has about herself, others in the environment, and her actions. These are prone to shifts when they become inconsistent with one another.

Dissonance- is an inconsistency in an abused woman's beliefs which motivates a person to take action to regain consistency.

Consonance- is a consistency of an abused woman's beliefs.

Information source- Information from any source such as television, radio, printed materials, social network members, that the abused woman receives that influences cognitions. It is assumed that the abused woman will receive information as a part of everyday life experiences. It will not be measured directly in this study.

Self-esteem- is a belief that the abused woman has about her sense of worth as a person. It will be measured by the Self-Esteem Inventory (Coopersmith, 1967).

Self-efficacy- is a belief that the abused woman has about her individual potency and her ability to commit to an action such as termination and persevere in the face of adversity. It will be measured by the Self-Efficacy Scale (Maddux & Sherer, 1982).

Sex role orientation- is the beliefs the abused woman has about the responsibilities of her role based on the socialization process. It will be measured by the Index of Sex Role Orientation (Dreyer, James, & Woods, 1982).

Social support system- is the beliefs the abused woman has about her network members (friends', family members', service providers'), to provide her with tangible and intangible aids. The social support system comprises functional (qualitative aspects of the network), and structural ( size, density, temporality, multidimensionality aspects of the network) components. The functional component will be measured by Tilden's Interpersonal Relationships Inventory (Tilden, 1988). The structural component will be measured by an adaptation of the Social Support System Map (Hirsch, 1979) and three questions from the Norbeck Social Support Questionnaire (1981).

Magnitude of abuse- Beliefs about the physical and emotional injuries incurred from another (partner/husband). It will be measured by the Index of Spouse Abuse (ISA).

Termination- is the ultimate action taken after an abused woman becomes ready as associated by shifts in cognitive beliefs. She leaves the relationship permanently and never returns.

Appendix H

Formulas for Density and Index  
of Spouse Abuse Scores

## Appendix H

### Formulas

A percentage of density was determined by using the following formula:

$$\% \text{ Density} = \frac{X}{[N(N-1)/2]}$$

X= the number of pairs of people who know (by name and direct contact) each other  
N(N-1)/2= the total number of possible pairs

Example: If there were 10 X's on the 6 x 6 matrix (6 people listed as network members- see Appendix F), the density of this woman's network would be:  $10/[6(6-1)/2]= 67\%$

To ascertain whether the woman knew any network members independent of her husband/ partner, a percentage overlap was calculated. The following formula was used.

$$\% \text{ overlap with husband/partner} = \frac{X}{N-1}$$

X= the number of abused women's network members known (by name and direct contact) to partner.

N-1= the total number of people in the network minus 1 (the husband/partner).

Example: If there were 5 total network members listed additional to the husband/partner, and her partner knew all of them, the percent of overlap with the partner would be:  $5/5= 100\%$ . Based on this, this woman has a dense network with no confidants independent of her partner.

Formulas for deriving the ISA scores:

- Assign a 0 to any missing item (I), and assign a 0 to the item weight (W). This has the effect of using the mean for that item.
- Compute a product score (P) for each item:  $P= (I)(W)$
- Compute the minimum possible sum-score:  $MIN= \sum W$
- Use the general formula:  $S= (\sum P - MIN)(100)/[(MIN)(4)]$  to compute the ISA- physical and nonphysical scores, respectively.

Appendix I  
Visual Analog

Appendix I  
Visual Analog

**Instructions:** Place a straight vertical line ( | ) through the horizontal (—) line which goes from low to high readiness to indicate where you feel you are with regard to readiness to end your relationship with your husband/partner. There is no right or wrong answer.

Readiness to End the Relationship

Low—————High

Appendix J

Interview Schedule

## Appendix J

### Interview Schedule

#### FOCUS (ILLUMINATE SITUATION)

You agreed to talk with me about your situation to help me get a better understanding of what happens to a woman who is in a situation such as yours. So, I would like to begin by getting a sense of your situation with your husband/partner. Could you tell me, in your own words, what it is/was like for you to live with someone who hurts you.

Probes: Have you ever left/thought about leaving?  
Have you ever thought about ending (permanently leaving) your relationship?

#### READINESS

Over the years in talking with women in a situation such as yours, some women have talked about being ready, and others have talked about not being ready to end the relationship. I would like to get a real appreciation of what readiness means to you. Could you tell me, in your own words, what your thoughts are about your readiness to end the relationship?

Probes: (The extent to which these probes are used will depend upon how the individual abused woman responds to the first questions).

Is there a process involved in "getting ready" ? Describe  
What thoughts go through your mind during this process?  
Is there a sense of weighing your options along the way? Describe.  
Do you feel like you are/were in danger?  
Did impending danger or the feeling that you were becoming more vulnerable seem to change your feeling of readiness?  
Do you ever feel like you are contradicting yourself- i.e., "believing in one thing (deserve better than this) and doing another (stay in relationship)?" Describe.  
Can you think of anything (personal beliefs about yourself or about the people you know) that may make you less ready to terminate?  
Can you think of anything (personal beliefs about yourself or about the people you know) that may make you more ready to terminate?

Appendix K

Approval for Human Subjects Research





OREGON  
HEALTH SCIENCES UNIVERSITY

3181 S.W. Sam Jackson Park Road, L106, Portland, Oregon 97201-3098 (503) 279-7784/7887

*Research Services*

DATE: June 14, 1989

TO: Barbara May, MN L456

FROM: Bernard Pirofsky, M.D., Chairman *Dr. Pirofsky/ma*  
The Committee on Human Research

SUBJECT: ORS# 2417  
TITLE: Abused Women's Cognitive Beliefs Associated with Readiness to Terminate the Relationship.

This confirms receipt from you of the revised consent form(s), and/or answers to questions, assurances, etc., for the above entitled study.

It satisfactorily meets the recommendations made by the Committee on Human Research at its recent review. The proposal to use human subjects is herewith approved. It is suggested that the date of this memo be placed on the top right corner of the first page of the consent form. This is the approval date of this revised consent form.

Although Committee approval has been given, it should not be considered as acceptance by the University for performance of the study. Studies funded by external sources must be covered by an agreement signed by the sponsor and the Board of Higher Education.

If this project involves the use of an Investigational New Drug, a copy of the protocol must be forwarded to the Pharmacy and Therapeutics Committee, Dr. Emmet Keefe, Chairman.

The Institutional Review Board is in compliance with the requirements in Part 56, Subchapter D, Part 312 of the 21 Code of Federal regulations published January 27, 1981.

Thank you for your cooperation.

wp:rcfapp 5/89

*Schools:  
Schools of Dentistry, Medicine, Nursing*

*Clinical Facilities:  
University Hospital  
Doernbecher Children's Hospital  
Child Development and Rehabilitation Center  
University Clinics*

*Special Research Divisions:  
Vollum Institute for  
Advanced Biomedical Research  
Center for Occupational  
Disease Research*

Appendix L

Sample Demographic Characteristics

## Appendix L

## Demographic Characteristics

Table 3

Frequency Distribution of Sample Demographic Characteristics

	Percent of Sample
Race	
Black	8
Hispanic	4
Native American	1
White	87
Marital status	
Married	50
Partnered	32
Divorced	12
Other	6
Age (Years)	
18-22	6
23-32	46
33-42	41
43-52	7
Education completed	
8th grade	5
9-11 grade	22
12th grade/GED	17
Some college	47
Finished college	7
Finished graduate school	2
Geographic location of residence	
Urban	47
Suburban	34
Rural	19

Table Continues

Appendix L

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	Percent of Sample
<hr/>	
Age of children living with subject	
< 5 years of age	50
5-9 years of age	17
10-14 years of age	9
15-19 years of age	20
> 19 years of age	4
Employment status	
Employed	35
Unemployed	37
Homemaker	20
Other	8
Source of income	
Employment	36
Government assistance	35
Loans/stipend	3
Child support/alimony	2
Other	24
Length of time stay away (Number of Days)	
0	3
1	5
2-5	12
6-10	17
11-15	10
> 15	53
Women's parents hitting	
Never	53
Occasionally	29
Quite a bit	13
Almost all the time	5

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Table Continues

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	Percent in Sample
Women's parents yelling	
Never	20
Occasionally	29
Quite a bit	27
Almost all the time	24
Partner's family of origin abuse	
No	2
Yes	84
Don't know	14

---

## Appendix M

### Network Structure Characteristics

Appendix M  
Network Structure Characteristics

Table 8

Frequency distribution of network structure characteristics

	Percentage
Size (# of Network Members)	
1	1.2
2-5	17.4
6-10	47.0
11-15	17.4
16-20	14.6
> 20	2.4
Overall Density (%)	
0-20	9.1
21-40	10.5
41-60	14.6
61-80	29.4
81-100	36.4
Specific Density of Network Who	
Knew Husband/Partner (%)	
0-20	4.6
21-40	5.6
41-60	9.0
61-80	23.0
81-100	57.7

Table continues

## Appendix M

	Percentage
Temporality (Years)	
1-5	19
6-10	32
11-15	21
> 15	28
Multidimensionality (# of Activities)	
0-2	66.7
3-5	26.6
6-8	5.4
≥ 9	1.3
Frequency of contact (Per Month)	
0-5	13.3
6-10	21.0
11-15	27.7
16-20	23.0
21-25	12.3
26-30	2.7
Support loss effect (Rating Scale of 1 to 5)	
None at all	9.9
A little	18.3
Moderate amount	29.6
Quite a bit	21.1
A great deal	21.1



Appendix N

Interview Data Form

INTERVIEW DATA FORM

Subject ID:

Date:

Demographics:

Interview setting:

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8

Description of woman's situation

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Variables surrounding leaving or thoughts of leaving

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Appendix N

Variables surrounding ending the relationship

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Description of thoughts about becoming ready to terminate

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Variables surrounding readiness (enhancing)

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Variables surrounding readiness (inhibiting)

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## Abstract

### Abused Womens' Cognitive Beliefs Associated With Termination Readiness

Wife abuse is a social problem of major proportion and is deserving of study to add to nursing's knowledge base. This study focused on beliefs that contributed to abused womens' readiness to terminate the relationship since the possibility existed that women were not leaving these relationships because they were not ready based on their beliefs. An exploratory nonexperimental design was used to answer the three research questions: (a) what is the relationship of sex role orientation, magnitude of abuse, self-esteem, self-efficacy, and social support cognitive beliefs to termination readiness? (b) what is the relationship of social network structure characteristics to termination readiness? and (c) how do abused women describe factors that relate to termination readiness? Cognitive dissonance theory provided a guiding framework. The convenience sample consisted of 86 women who were recruited from shelters, support groups, and the community. Participants were a heterogenous group. Triangulation of quantitative and qualitative data collection procedures facilitated an understanding of termination readiness. Data collection commenced upon approval by Oregon Health Sciences University Committee for Human Research. Quantitative data were collected with 6 established measures and 1 new measure. Standard multiple regression analysis was performed. Termination readiness was regressed on the cognitive beliefs set of variables. A multiple regression equation containing all study variables explained 31 % of the variance of termination readiness. The cognitive beliefs set of variables uniquely accounted for 27 % of termination readiness. Overall, length of time away from husband/partner, physical abuse, sex role orientation, and interpersonal support were statistically significant. Qualitative findings corroborated quantitative findings and illuminated the termination readiness process with regard to changing cognitive beliefs. There were no statistically significant correlations between network structure characteristics and termination readiness. Implications for theory, practice, and research include evidence that cognitive dissonance theory is useful in explaining the impact of cognitive beliefs on termination readiness. Future replication of this study, secondary analysis of the data, a market analysis study, and development and testing of intervention protocols are needed since it seems likely that there are different levels of termination readiness which require intervention strategies.