

# PSYCHOLOGICAL AND ENVIRONMENTAL FACTORS ASSOCIATED WITH PARTNER VIOLENCE

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*This article presents a brief summary of the literature on variables associated with cessation or continuation of partner violence with the aim of generating two conceptual models: psychological and environmental. Toward this goal, the authors first examine existing theoretical models of women's influence on partner violence. Second, they review psychological and environmental variables associated with women's influence on partner violence. To capture the richness and complexity of factors involved in partner violence, the two models include multifaceted constructs such as psychological difficulties, resilience, and partner violence. The conceptual models are designed to provide a framework for developing research that will enhance the understanding about women's influence on the course of partner violence and, in turn, will inform interventions aimed at helping women reduce violence in their lives.*

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**Key words:** *partner violence, battered women, psychological difficulties, resilience, environmental factors*

PARTNER VIOLENCE is a monumental public health concern, with millions of women being severely assaulted annually in the United States. Although many battered women eventually leave abusive partners in an effort to curtail partner violence, women's first attempts are of-

ten unsuccessful—and even after leaving, partner violence may continue in the form of stalking, threats, and physical assault. Thus, it is important to identify factors that are associated with women's success in curtailing partner violence. Toward this end, in the present article, we briefly review the available theoretical and empirical knowledge of psychological and environmental factors that are associated with women's ability to influence partners' violence. On the basis of this review we generated two conceptual models, psychological and environmental, with the aim of providing a conceptual framework that will help guide future empirical

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### KEY POINTS OF THE RESEARCH REVIEW

- Approximately 2 million women in the United States are severely assaulted annually by partners.
- Only a few longitudinal studies exist that examine the course of partner violence over time.
- More sensitive and contextualized definitions are needed for better research and understanding of partner violence.
- Although research has typically focused on altering the batterer's behavior, victims can serve as active agents of change to curtail partner violence.
- Both psychological (e.g., problem-solving skills) and environmental (e.g., domestic violence shelters) factors influence a victim's ability to curtail partner violence.

investigations as well as guide the development of multimodal, context-sensitive interventions to promote women's personal safety. These models will be described below.

### THE SCOPE OF THE PROBLEM

Approximately 2 million women in the United States are severely assaulted (e.g., kicked, bitten, hit with a fist) annually by partners, and as many as 30% of marriages are classified as physically aggressive (Straus & Gelles, 1990). Although substantial numbers of both men and women are victims of partner violence (O'Leary et al., 1989), the medical and psychological consequences of such violence for women are particularly severe. Indeed, 95% of individuals seeking medical attention for domestic assault are women (Schwartz, 1987), and an alarming 30% to 40% of women's emergency room visits are for injuries related to partner violence (e.g., Stark, Flitcraft, & Frazier, 1981). Moreover, women are more likely to be severely assaulted or killed by a male partner than by other perpetrators (Bachman & Staltzman, 1994; Browne & Williams, 1993). The high cost of partner violence on women's psychological and physical well-being includes depression, post-traumatic stress disorder (PTSD), increased physical symptoms, and

somatic complaints (e.g., Cascardi, O'Leary, Lawrence, & Schlee, 1995; Follingstad, Brennan, Hause, Polek, & Rutledge, 1991; Stets & Straus, 1990). Moreover, many women are impeded in their efforts to curtail partner violence and restore their physical and emotional well-being. Various theoretical models have been advanced to illuminate psychological and environmental factors associated with continued abuse. Despite many rich and compelling conceptual developments, mechanisms associated with women's success in curtailing partner violence remain unclear.

### BATTERED WOMEN AS ACTIVE CHANGE AGENTS

Over the past two decades, a wide range of legal sanctions (e.g., restraining orders) and social interventions (e.g., battered women's shelters) have been initiated to assist battered women. Dovetailing with these developments are accounts of battered women as active agents in terminating violence (e.g., Bowker, 1986; J. C. Campbell, Rose, Kulb, & Daphne, 1998; Gondolf, 1988). Research has demonstrated that although many battered women eventually leave abusive partners in an effort to curtail partner violence (e.g., Strube, 1988), women's first attempts are often unsuccessful (J. C. Campbell, Miller, Cardwell, & Belknap, 1994; Herbert, Silver, & Ellard, 1991; Okun, 1986; Schwartz, 1988; Strube & Barbour, 1984). Furthermore, even after leaving, partner violence may continue in the form of stalking, threats, and physical assault (J. C. Campbell et al., 1998; Kurz, 1996; Sullivan, Campbell, Angelique, Eby, & Davidson, 1994; Wilson, Johnson, & Daly, 1995). Thus, many women are unable to free themselves of partner violence, underscoring the importance of illuminating factors that may help or hinder women's efforts to curtail partner violence. A number of theories have been proposed to understand both psychological and environmental factors that play a role in the continuation of abusive relationships, including attachment theory (traumatic bonding; D. G. Dutton & Painter, 1993), learned helplessness theory (Walker, 1984), survivor theory (Gondolf & Fisher, 1988), social exchange theories

(Strube, 1988), Stockholm Hostage Syndrome (Graham, Rawlings, & Rimini, 1988), and investment models (Rusbult, 1993). Despite these conceptual and empirical developments, the mechanisms associated with women's success in curtailing partner violence remain unclear.

Because men are usually doing the battering, one may wonder whether the exploration of mechanisms involved in the curtailing of the violence are best examined through studying batterers rather than victims. Undoubtedly, the study of batterers is crucial for understanding how to decrease partner violence, and many experts devote their efforts in this direction. However, the view that women may influence change justifies focusing on women's perspectives about their efforts to curtail the battering. Moreover, the limited success in currently available interventions to train batterers to curtail battering emphasizes the urgent need to develop psychological and environmental interventions that will facilitate women's agency in reducing partner violence. Such interventions will be informed by elucidating the factors that aid or hinder women's efforts to curtail the violence.

## THE COURSE AND EFFECTS OF PARTNER VIOLENCE: A BRIEF LITERATURE REVIEW

### *Cessation of Partner Violence*

Several retrospective studies of battered women, along with a few longitudinal investigations, form the basis of current knowledge about the course of partner violence over time. Some retrospective studies suggest linear increases in severity of violence (e.g., Pagelow, 1981; Walker, 1984), whereas others indicate increases in severity during the initial years of marriage followed by stabilization (e.g., Follingstad, Hause, Rutledge, & Polek, 1992). Prospective studies reveal a more complex picture—some indicate reduction of violence (e.g., J. C. Campbell et al., 1998; Feld & Straus, 1990; Jacobson, Gottman, Gortner, Berns, & Shortt, 1996), and others indicate stability (O'Leary et al., 1989). Importantly, cessation of violence

appears least likely to occur in severely aggressive men (only 10% to 25% of severely aggressive men; Jacobson et al., 1996; Quigley & Leonard, 1996). Moreover, even when physical violence decreases, emotional abuse may persist (Jacobson et al., 1996). This bleak outlook for women whose partners are severely aggressive, coupled with data on the limited effectiveness of treating batterers (Fagan, 1996; Gondolf, 1997; Rosenfeld, 1992), further underscores the importance of understanding factors associated with women's ability to curtail partner violence.

### *Psychological Correlates of Partner Violence: Difficulties and Resilience*

The study of psychological correlates of partner violence can be described as both new and controversial (M. A. Dutton, 1992a). As noted by M. A. Dutton (1992a, p. 52), its recency stems from cultural acceptance of woman abuse, which prevented recognition that it could produce significant and deleterious psychological consequences. Alternatively, concerns about blaming or holding battered women accountable for their partners' violence deter a focus on psychological difficulties associated with partner violence. Therefore, though research on the psychological impact of partner violence is important, researchers must be sensitive to the various interpretations of their research. To this end, several longitudinal studies have carefully initiated the exploration of the psychological difficulties resulting from partner violence (e.g., J. C. Campbell et al., 1994; R. Campbell, Sullivan, & Davidson, 1995; D. G. Dutton & Painter, 1993; Sullivan et al., 1994; Tan, Basta, Sullivan, & Davidson, 1995). These studies have focused mostly on depression or PTSD. However, experts have noted that the effects of partner violence are complex (e.g., Battered Woman Syndrome; M. A. Dutton, 1992b; Walker, 1984). Indeed, cross-sectional studies

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revealed a variety of psychological difficulties associated with partner violence, including PTSD, substance abuse, anxiety, and depression (e.g., Astin, Ogland-Hand, Coleman, & Foy, 1995; Follingstad et al., 1991). A weakness of these existing studies tends to be the focus on one or two emotional consequences of partner violence.

Several researchers have emphasized that not all battered women manifest psychological difficulties (e.g., Bowker, 1993; Hoff, 1993). Many are quite strong and healthy, using available resources and coping strategies to curtail the violence (Bowker, 1986; Gondolf & Fisher, 1988). These observations have led to the study of factors thought to mitigate the devastating effects of partner violence, including self-esteem (J. C. Campbell et al., 1994; D. G. Dutton & Painter, 1993), self-efficacy (Sullivan et al., 1994), self-care (J. C. Campbell et al., 1994), and general

**we draw heavily from these rich integrative models, as well as from empirical research, to construct two complementary models that will examine the separate effects of psychological (e.g., attachment) and environmental (e.g., tangible resources) factors on cessation of violence, using cross-sectional methodology.**

quality of life (Sullivan et al., 1994; Tan, Basta, Sullivan, & Davidson, 1995). These studies have underscored the importance of examining the critical role of resilience and strength in developing an understanding of partner violence. We will further examine personal strengths by developing and evaluating a hypothetical construct of resilience and by suggesting a relationship between resilience, psychological difficulties, and the course of partner violence.

#### *Psychological and Environmental Models of Partner Violence: A Summary of Viewpoints*

Theorists in the area of partner violence have long understood that a multitude of factors influence the form and degree of partner violence. Given this complexity, the field of partner violence is often characterized by disparate and

sometimes competing views (Gelles & Loseke, 1993). Some researchers have emphasized the importance of environmental factors in understanding the cessation of partner violence (Strube & Barbour, 1983, 1984; Sullivan, Basta, Tan, & Davidson, 1992; Sullivan et al., 1994). They argue that the resources available to the battered woman (e.g., employment away from home, advocacy services) directly decrease general distress and/or bolster the ability to cope with the partner abuse (e.g., Tan et al., 1995). Other researchers (e.g., D. G. Dutton & Painter, 1993; Rusbult, 1993; Strube, 1988) have emphasized psychological factors, arguing that attachment to the batterer, learned helplessness, lack of self-esteem, and power imbalance serve to maintain the abusive relationship.

Still other theorists have argued for an integration of various perspectives, advocating an ecological approach that accounts for the direct and indirect influence of social and psychological factors on partner violence (e.g., M. A. Dutton, 1992b, 1996; Edleson & Tolman, 1992). One of the most comprehensive ecological models was proposed by M. A. Dutton (1992b, 1996), who argued that a battered woman's response to abuse must be considered in a broad social, political, economic, and cultural context. M. A. Dutton (1992b) suggested that the relationship between partner abuse, its psychological effects, and strategies to escape, avoid, or survive are mediated by several factors, including personal strengths, positive aspects of the relationship, historical factors, learned factors, medical factors, institutional responses, tangible resources, social support, and additional life stressors. In a more recent exposition of her theory, M. A. Dutton (1996) expanded the model, suggesting a nested approach that focuses on the complex interaction of economic and tangible resources, personal history, personal networks, linkages between personal networks, the larger community, and the societal and cultural ethos. In the model proposed in this article, we draw heavily from these rich integrative models, as well as from empirical research, to construct two complementary models that will examine the separate effects of psychological (e.g., attachment) and environmental (e.g., tangible resources) fac-



tors on cessation of violence, using cross-sectional methodology.

A number of longitudinal studies have examined factors related to, and predictive of, partner violence. However, they have not revealed the relative importance of different factors in the cessation of partner violence. This is because many studies were based on relatively small samples, limiting the number of predictors that they could examine. Consequently, many of the studies have focused on one or a few narrowly defined variables. Furthermore, not all studies have focused on partner violence as the outcome variable; outcomes have varied among studies, including depression (R. Campbell, Sullivan, & Davidson, 1995), attachment (D. G. Dutton & Painter, 1993), decision to leave (Strube & Barbour, 1983, 1984), living arrangement (Snyder & Scheer, 1981), relationship status (e.g., Jacobson et al., 1996), and battering status (J. C. Campbell et al., 1994). Moreover, studies often used convenience samples (e.g., through newspaper advertisement, partner violence shelters), thus limiting the generalizability of the findings. Recognizing these limitations, many experts have emphasized the critical need to expand our knowledge about the course of partner violence and the factors influencing this course (Holtzworth-Munroe, Smutzler, & Sandin, 1997; Jacobson et al., 1996; National Research Council, 1996).

## TOWARD PREDICTIVE MODELS OF WOMEN'S INFLUENCE ON PARTNER VIOLENCE

### *Unique Contributions of the Proposed Models*

The proposed models will further our understanding of factors influencing partner violence in several major ways. First, we propose complex constructs, each encompassing several variables—namely, psychological difficulties, resilience, and partner violence—rather than a few unidimensional measures. Partner violence and the factors associated with it are multifaceted phenomena that require multiple indicators to capture their complexity.

Additionally, it is important to elucidate factors that directly influence three constructs: partner violence, psychological difficulties, and resilience. Accordingly, another contribution of the proposed models is the integration of available theoretical concepts and empirical data to examine, via two coherent models, the relationship of selected psychological and environmental factors to partner violence, psychological difficulties, and resilience. The examination of both psychological and environmental factors will afford a more thorough understanding of how women can influence partner violence. Each of these models should, therefore, yield knowledge about the relative influence of key variables on the course of partner violence and the paths through which such influence occurs. Separation of the psychological and environmental models will help identify the unique contributions of each domain and discern the strongest elements in each. Ultimately, this strategy will help advance the integration of psychological and environmental factors into a parsimonious nested model. Indeed, it can be argued that a model integrating both factors will offer the greatest explanatory power.

### *Suppositions Guiding the Proposed Models and Limitations*

We presume that partner violence results in a variety of psychological difficulties (such as anxiety and depression) and that resilience is a stable characteristic, reflecting one's hardiness in the face of adversity that buffers the psychological impact of partner violence. We hypothesize a variety of relationships among psychological and environmental correlates of our three key factors: psychological difficulties, resilience, and partner violence.

Constructs, in contrast to situation-specific measures of behavior, were selected for our models as correlates of our key outcome: curtailing of partner violence. We hypothesize that in the long run some factors will be helpful to women in their attempts to curtail violence, whereas others will be harmful. This departs somewhat from the traditional literature on battered women, in which much research has tar-

geted identifying specific actions taken by battered women in specific situations to curtail the violence. This perspective is guided by the assumption that women's behavior must be considered within the context of the battering to avoid, among other things, mislabeling their effort as dysfunctional (e.g., Snell, Rosenwald, & Robey, 1964) rather than as useful efforts to avert or delay violent incidents. This strategy provides insights into the inter- and intrapersonal dynamics that characterize battering relationships and can best be accomplished via qualitative research (D. G. Dutton, 1996; Patton, 1990). However, idiographic data do not allow for strong inferences about factors that increase the success of women's efforts to curtail violence. For example, feeling angry in the context of an abusive episode may give a woman the strength she needs to call the police or go to a shelter. In contrast, the global tendency to react with anger to life events is probably counterproductive. Our focus on nomothetic variables reflects an interest in developing a generally applicable understanding of partner violence, rather than idiographic analysis.

### THE RELATIONSHIP BETWEEN PSYCHOLOGICAL DIFFICULTIES AND RESILIENCE

We begin with the hypothesis that partner violence and psychological difficulties interact in a vicious cycle, whereby partner violence produces psychological difficulties that, in turn, impede the victim's ability to curtail future violence. We further propose that intra-personal resources, i.e., resilience, temper the negative psychological impact of partner violence and, thereby, indirectly enhance the victim's ability to curtail future violence. The three elaborated concepts are discussed below.

#### *Construct of Partner Violence*

In the past decade, discourse regarding improvements in definition and measurement of partner violence has moved the field toward developing more sensitive and contextualized approaches (Gelles & Loseke, 1993; Holtzworth-Munroe et al., 1997; Marshall, 1997;

Straus & Gelles, 1990). In particular, the mere counting of aggressive behavior at best underestimates and at worst distorts the meaning of partner violence against women. These concerns have driven the field toward considering a larger array of dimensions in conceptualizing measures of partner violence. Indeed, many have argued (e.g., Straus, 1990; Vivian & Langhinrichsen-Rohling, 1994) that adding information about the context and impact of partner violence will result in a more complete and gender-sensitive representation. We adopt the view that partner violence is an attempt to achieve control via acts of aggression (Pence & Paymar, 1993), a view that calls for a multifaceted construct of partner violence. In addition to improved measurement of partner violence, the field also calls us to move beyond global measures as a reasonable proxy for presence of partner violence. As Campbell and Soeken (1999) suggested, dichotomous measures of being in or out of the relationship, or being violence free versus still abused, do not adequately capture the magnitude or complexity of partner violence. We therefore propose a construct of partner violence that includes physical assault (both sexual and nonsexual), emotional abuse, perceived threat, and psychological reactions to the abuse.

*Physical and emotional abuse.* Currently, there are many measures of physical aggression (e.g., pushing, slapping, hitting, rape) and verbal or emotional abuse (e.g., insults, degradation) against a partner. In the proposed models, physical and emotional abuse represent related but distinct phenomena and, therefore, should be examined separately. Factor analytic studies that reveal these aspects of abuse load on different but correlated factors (e.g., Caulfield & Riggs, 1992; Pan, Neidig, & O'Leary, 1994). Moreover, most batterers abuse their partners emotionally (Follingstad, Rutledge, Berg, & Hause, 1990; Stets, 1990), severity of battering is highly correlated with severity of emotional abuse (Hudson & McIntosh, 1981), and verbal aggression predicts future physical aggression (Malmuth, Linz, Heave, & Barnes, 1995; Murphy & O'Leary, 1989; O'Leary, Malone, & Tyree, 1994).

Severity of physical abuse is also associated with psychological difficulties such as PTSD and depression (e.g., Astin, Lawrence, & Foy, 1993; Cascardi & O'Leary, 1992; Houskamp & Foy, 1991). As noted earlier, even when physical aggression decreases, emotional abuse often continues, becoming a proxy for physical abuse by reminding women that they can be beaten at any time (Jacobson & Gottman, 1998; Jacobson et al., 1996). Indeed, 72% of battered women stated that emotional abuse had a more negative impact on them than physical abuse (Follingstad et al., 1990). The impact of emotional abuse has been demonstrated by its relationship to increased risk for depressive symptoms (Arias, Lyons, & Street, 1997). Notably, the psychological impact of emotional abuse has only recently been studied, indicating that emotional abuse adds to the damaging effects of physical abuse (e.g., Aguilar & Nightingale, 1994; Marshall, 1997; Tolman & Stoops, 1997).

*Perceived threat.* The proposed variable associated with partner violence is perceived partner-related threat. Battering relationships have been frequently described as fear provoking and unpredictable (e.g., Browne, 1987; Murphy & Cascardi, 1993; Tolman, 1989; Walker, 1984). The battered woman's perception of threat within the relationship is likely to be a reflection of fear of her partner. This perceived threat includes not only fear for the victim's own safety, but also for the safety of her children, family, and friends (J. C. Campbell, 1995). Fear of the batterer, documented in several studies (e.g., Cantos, Neidig, & O'Leary, 1993; O'Leary & Curley, 1986), is often focused on bodily harm (Cascardi et al., 1995) and is related to depression and PTSD (Cascardi et al., 1995; Cascardi, O'Leary, & Schlee, 1997). Importantly, it may influence decisions to remain in the abusive relationship, because leaving is perceived to increase risk of harm (Jacobson & Gottman, 1998).

*Psychological reactions to the abuse.* Separate from discrete episodes of physical and emotional abuse is the woman's perception of being intimidated and coerced (Stark & Flitcraft, 1991). Thus, to arrive at a more complete insight

into the nature of the abuse, the abuse-related perceptions of battered women should be measured separately from the actual abusive behaviors. As noted by Smith, Tessaro, and Earp (1995), psychological reactions to being abused should focus on women's continuous perceptions of susceptibility to physical and psychological danger, loss of power, and loss of control in a relationship with an abusive partner. These psychological reactions have been shown to discriminate between battered and nonbattered women (Smith et al., 1995).

### *Psychological Difficulties*

Battered women suffer from a variety of psychological difficulties (Follingstad et al., 1992; Marshall, 1997). Accordingly, Walker (1993) described the "battered woman syndrome" as a complex pattern of PTSD-like symptoms resulting from partner violence. Others (e.g., M. A. Dutton, 1992b) have proposed a wider range of psychological consequences, including general anxiety, depression, and substance abuse. Most evaluations of psychological consequences of partner violence have focused on a particular diagnosis (e.g., PTSD) or set of symptoms (e.g., depressive symptoms). Studies that focus on more than one diagnosis have either examined each individually (e.g., Gleason, 1993) or have limited their scope to PTSD and depression (e.g., Cascardi et al., 1997), and most have been cross-sectional. In the proposed models, we include four indices of psychological difficulties that have been found associated with traumatic experiences in general, and partner violence in particular: PTSD, depression, anxiety, and substance abuse.

Severity of physical abuse is also associated with psychological difficulties such as PTSD and depression.

we include four indices of psychological difficulties that have been found associated with traumatic experiences in general, and partner violence in particular: PTSD, depression,

**PTSD.** The rate of PTSD among battered women is extremely high (e.g., Houskamp & Foy, 1991; Kemp, Green, Hovanitz, & Rawlings, 1995; Kemp, Rawlings, & Green, 1991; Saunders, 1994) and significantly more prevalent than in a community sample (Gleason, 1993). Importantly, PTSD was found related to battering rather than to marital distress per se (Astin et al., 1993, 1995). Notwithstanding the similarity between PTSD symptoms and symptoms prevalent in battered women, the application of the PTSD construct to this population is problematic. A diagnosis of PTSD entails the termination of the trauma and the associated threat. Therefore, chronic and continuous symptoms, such as extreme fear, are thought to reflect an impediment in the mechanisms underlying natural recovery (i.e., emotional processing; Foa & Riggs, 1993). Thus, chronic PTSD symptoms are pathological. When the trauma is ongoing and the perceived threat is therefore real, as is the case in battering, spontaneous fear reduction is not expected, and the trauma-related symptoms are not clearly pathological. In the proposed models, we will focus on severity of PTSD symptoms and not on the presence or absence of a diagnosis.

**The ability to employ these strategies to buffer against the effects of repeated abuse can be reflective of general resilience.**

women (J. C. Campbell, 1989; Christopoulos et al., 1987). Furthermore, severity of depression has been found related to severity of abuse (e.g., Campbell & Lewandowski, 1997; Cascardi & O'Leary, 1992; Follingstad et al., 1992; Gelles & Harrop, 1989).

**Anxiety.** Many studies have documented elevated anxiety in battered women (Follingstad et al., 1991; Gelles & Straus, 1988; Kemp et al., 1995; Kerouac, Taggant, Lescop, & Fortin, 1986). Further evidence for the relationship between bat-

tering and anxiety comes from studies examining prevalence of anxiety disorders—battered women evidence higher prevalence in comparison to the general population of women (Gleason, 1993).

**Substance abuse.** Research has focused primarily on patterns of substance abuse in the batterer rather than the victim (e.g., Hotaling & Sugarman, 1986; Kantor & Straus, 1989). Typically, however, when victims abuse substances, they do it concurrently with the batterer (Telch & Lindquist, 1984). In comparison to nonviolent, maritally distressed couples, violent couples report more substance abuse (Coleman, Weinman, & Hsi, 1980; Telch & Lindquist, 1984). Whereas some early studies found low rates of alcohol abuse in victims (e.g., Eberle, 1982; Labell, 1979), more recent studies indicate high rates of substance abuse compared to nonvictims (Gleason, 1993; Watson et al., 1997).

### *Resilience*

Deeply imbedded in models of empowerment, personal strength, and agency (e.g., Bowker, 1983, 1986; Gondolf & Fisher, 1988; Lempert, 1996) is the conceptualization of battered women as active help-seekers. Indeed, battered women use a wide range of strategies to escape, avoid, and protect themselves (J. C. Campbell et al., 1998). The ability to employ these strategies to buffer against the effects of repeated abuse can be reflective of general resilience. One notion of resilience is the ability to adjust or recover in the face of major life stressors (Floyd, 1996); thus, this can be viewed as a protective factor against the development of psychological difficulties. Current knowledge does not provide clear guidelines for how to operationalize resilience in general and in the study of battered women in particular. Integrating theoretical and empirical literature on battered women with studies suggesting that optimism, self-esteem, flexibility, and physical health may converge to indicate resilience. We hypothesize that these factors may reflect resilience in battered women. Support for this view comes from studies of large community samples, in which self-esteem and optimism were



found to be predictive of physical (e.g., Peterson, Seligman, & Vaillant, 1988) and mental health (Cederblad, Dahlin, & Hagnill, 1995; Dutts, Burke, Taams, & Passchier, 1997; Fitzgerald, Tennen, Affleck, & Pransky, 1993). Another related concept is cognitive flexibility, that is, the ability to perceive different aspects of events (Foa & Jaycox, 1999). Indeed, this concept may be understood through the stable characteristic of monitoring (Miller, 1996). As noted below, optimism, self-esteem, and cognitive flexibility are all related to physical health (which is conceptually an important aspect of resilience); thus, general physical health should also be included under this construct.

*Optimism.* Although not specifically studied in battered women, optimism, defined as the general tendency to take a hopeful view of life circumstances, has been found positively associated with health-related outcomes. It is predictive of positive lifestyle changes in cardiac patients (Shepperd, Maroto, & Pbert, 1996), positive coping in rheumatoid arthritis patients (Brenner, Melamed, & Panush, 1994), and better recovery following coronary surgery (Scheier, Matthews, Owens, & Magovern, 1989). Optimism also serves to immunize against depression (Bromberger & Matthews, 1996; Seligman, Reivich, Jaycox, & Gilham, 1995). Thus, optimistic individuals seem to be especially resilient.

*Self-esteem.* Various defined, self-esteem generally means confidence in one's competence and worthiness. Several studies have indicated that high self-esteem is associated with decreased vulnerability to psychological symptoms such as depression (e.g., Fontaine & Jones, 1997; Tarlow & Haaga, 1996). In marital relationships, individuals with low self-esteem are vulnerable to depression, and increasing self-esteem lowers depression (Beach, Sandeen, & O'Leary, 1990). Women who have been battered showed low self-esteem (e.g., Aguilar & Nightingale, 1994; Mitchell & Hodson, 1983), and severe abuse was related to low self-esteem (Cascardi & O'Leary, 1992).

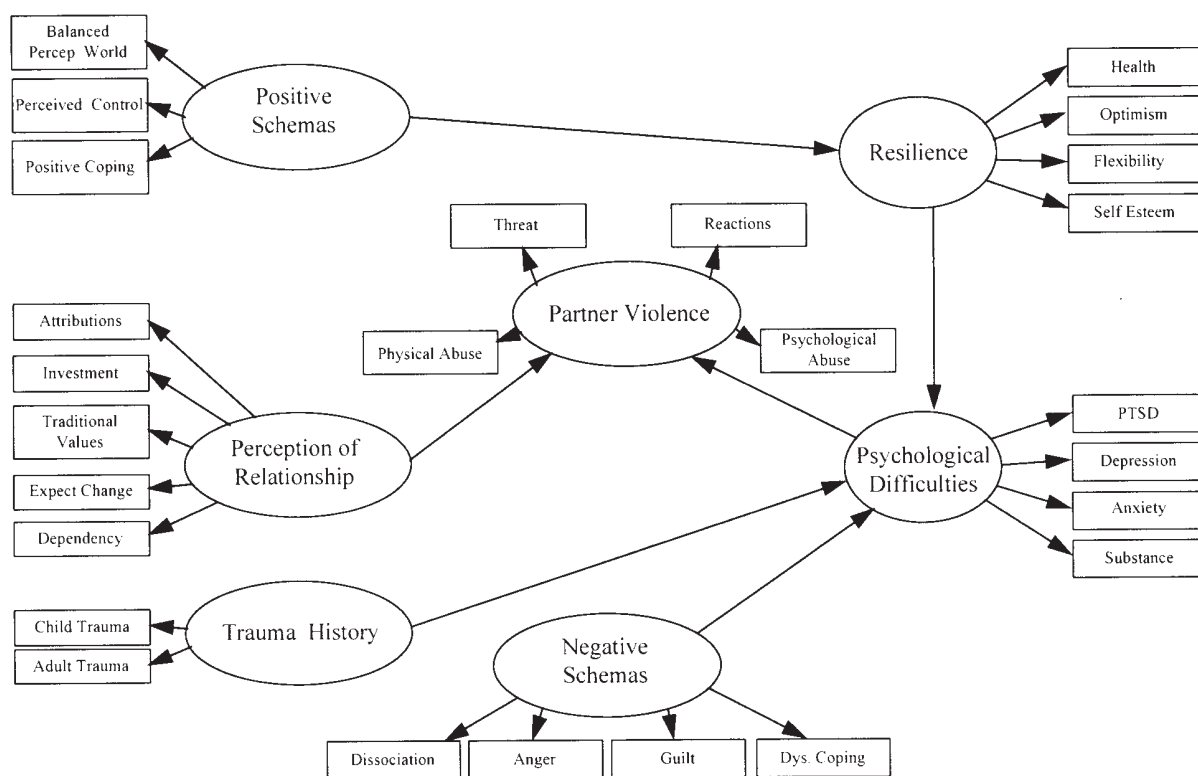
*Flexibility.* A key dispositional variable that reflects flexibility in reacting to stressful life

events is the extent to which individuals engage in monitoring, that is, typically attending to and amplifying threatening experiences (Miller, 1996). Extensive research with this construct shows that high monitors exhibit a less flexible cognitive-emotional response to life stressors, characterized by (a) exaggerated perceptions of their own vulnerability, (b) lowered perceptions of control and self-efficacy, (c) heightened levels of concern and worry, and (d) greater needs for certainty and reassurance (Miller, 1995). This profile, in turn, is associated with less effective ability to problem solve under threat (Miller, Mischel, O'Leary, & Mills, 1996; Miller, Shoda, & Hurley, 1996; Chiu, Hong, Michel, & Shoda, 1995) and with lower self-assessments of health, poorer adherence to recommended regimens, and slower recovery (Miller, Green, & Bales, 1998; Miller, Fang, Diefenbach, & Bales, in press; Shoda et al., 1998). Thus, monitoring appears to be a risk factor for low resiliency in the face of life stressors. Low monitoring may be an adaptive characteristic for battered women because it will enhance their ability to function in the face of continuous stressors.

*Health.* It has been well documented that poor physical health is related to poor coping (e.g., Aldwin, 1994). In the proposed models, physical health is conceptualized as a relatively stable characteristic that is an important component of resilience. Support for this notion comes from studies in which health was related to optimism (e.g., Peterson et al., 1988) and impaired physical health was associated with poor psychological health (Middleton & Byrd, 1996). Women victims of partner violence demonstrate impaired physical health (e.g., Follingstad et al. 1991; Jaffe, Wolfe, Telford, & Austin, 1986; McCauley et al., 1996), and a positive association between health problems and continuation of violence has been demonstrated (Campbell & Soeken, 1999).

## HYPOTHESIZED PSYCHOLOGICAL MODEL

To further our understanding of factors implicated in the cessation or continuation of partner violence, we propose a psychological model that includes factors hypothesized to



**Figure 1: Proposed Psychological Model of Women's Influence on the Cessation of Partner Violence**

NOTE: Percep = perception; Dys. = dysfunction; PTSD = post-traumatic stress disorder.

affect psychological difficulties and resilience (see Figure 1).

Guided by previous theory and research in the field of partner violence, as well as by our work on the course of natural recovery from rape and nonsexual assault (Amir, Foa, & Cashman, 1998; Foa & Riggs, 1993; Foa & Rothbaum, 1997), the proposed model asserts that in addition to degree of victimization, psychological difficulties will be exacerbated by two factors:

prior trauma history and negative cognitive schemas. Resilience, on the other hand, will be increased by one factor: positive cognitive schemas. Perception of relationship with partner will be positively related to partner violence. Below we discuss each of the variables in the model.

Although trauma history may not predict partner violence, research indicates a relationship between childhood traumatization and later psychological

### *Trauma History*

Several theorists (e.g., M. A. Dutton, 1992b; Walker, 1984) have suggested that prior trauma history, either childhood sexual abuse or other uncontrollable life events, may exacerbate the psychological distress associated with battering. Although early studies reported high prevalence rates of childhood trauma among battered women (e.g., Hilberman & Munson, 1977-1978; Walker, 1983), recent studies did not find such elevated incidence in battered, compared to nonbattered, women (Hotaling & Sugarman, 1990). Although trauma history may not predict partner violence, research indicates a relationship between childhood traumatization and later psychological difficulties (e.g., Astin et al., 1995; Briere & Runtz, 1988; Ellis, Atkeson, & Calhoun, 1981; Kemp et al. 1995; Riggs, Dancu, Gershuny, Greenberg, & Foa, 1992). Thus, prior trauma may increase risk for later psychological difficulties attendant to partner violence. In the

proposed psychological model, we propose a relationship between trauma history, battering, and psychological difficulties.

### *Negative Schemas*

Cognitive schemas (e.g., Epstein, 1991; Foa & Riggs, 1993; Neisser, 1987) are often defined as stable dispositions that influence perceptions about the world and the self. The related concepts of cognitive styles (e.g., Carver, Scheier, & Weintraub, 1989; Folkman & Lazarus, 1980) are conceived in general as being either adaptive (i.e., positive) or maladaptive (i.e., negative). Although, as noted earlier, this distinction is often inappropriate in the context of specific episodes of partner violence, general cognitive styles have been associated with psychological difficulties or well-being. Studies examining battered women (M. A. Dutton, Burghardt, Perin, & Chrestman, 1994) as well as other trauma survivors (e.g., Amir et al., 1998; Riggs et al., 1992) have indicated that certain cognitive schemas predict posttrauma difficulties such as posttraumatic stress symptoms. We include four variables related to negative schemas that are hypothesized to be related to psychological difficulties: anger, guilt, maladaptive coping, and dissociative symptoms.

*Anger.* M. A. Dutton (1992b) suggests that anger, either covert (e.g., "hot" negative thoughts) or overt (e.g., impulsive outbursts), is a common response of battered women. For some women, suppressed (i.e., covert) anger may lead to somatic symptoms and chronic depression. Conversely, the expression of anger, in the short term, may help the women take needed steps toward ending the violence (M. A. Dutton, 1992b). However, Jaycox and Foa (1996) suggest that the general tendency to react to life events with anger, either covert or overt, promotes emotional distancing from the traumatic memories and thereby hinders recovery. Indeed, in assault victims, anger was found to be positively related to PTSD (Feeny, Zoellner, & Foa, 1998; Hyer et al., 1986; Riggs et al., 1992; Woolfolk & Grady, 1988). Anger also hampers response to treatment for PTSD (Foa, Riggs, Massie, & Yarczower, 1995). Given that battered women may experience

both suppressed and expressed anger, both concepts should be examined.

*Guilt.* Notably, most battered women do not blame themselves for the abuse (Cascardi & O'Leary, 1992; Holtzworth-Munroe, 1988). However, when they do, psychological difficulties often emerge, and they are less likely to leave the abusive relationship (Frieze, 1979; Prange, 1985). Furthermore, guilt is prevalent among trauma victims in general (Burgess & Holstrom, 1979; Symonds, 1979) and has influenced some theoretical accounts of PTSD (e.g., Janoff-Bulman, 1979; Kubany, 1994). Guilt has also been found to mediate the relationship between assault severity and PTSD (Amir et al., 1998; Kubany & Manke, 1995; Riggs et al., 1992).

*Maladaptive coping.* Among women assault victims, maladaptive coping strategies such as denial and avoidance have been implicated in the development of psychological difficulties (Valentiner, Foa, Riggs, & Gershuny, 1996). Relatedly, compared to nonbattered women, battered women have exhibited a problem-solving style characterized by passivity (Finn, 1985), and are more likely to generate avoidant responses (Claerhout, Elder, & Manes, 1982; Lanius & Jensen, 1987). In one study, cognitive avoidance among battered women in shelters was found related to depression (Mitchell & Hodson, 1983).

*Dissociative symptoms.* Whereas a number of experts posit the presence of dissociation in battered women (e.g., Walker, 1989), only one study examined dissociation in this population, finding increased levels of psychological abuse to be related to dissociation (Marshall, 1997). Dissociative symptoms are common during or after a trauma and are associated with PTSD (e.g., Cardena & Spiegel, 1993; Koopman, Classen, & Spiegel, 1994; Marmar et al., 1994). Female assault victims exhibit more dissociation than nonvictims, and highly dissociative victims are more likely to report childhood sexual abuse (Dancu, Riggs, Hearst-Ikeda, Shoyer, & Foa, 1996). In addition, level of dissociation is related to PTSD diagnosis and severity (Amir et al., 1998; M. G. Warshaw, Fierman, Pratt, & Hunt, 1993).

### *Positive Schemas*

Conceptual and empirical research suggest that in contrast to the negative cognitive schemas discussed above, certain cognitive strategies protect against the development of psychological difficulties following a traumatic experience. We hypothesize that the presence of these styles enhances resilience—and resilience, in turn, buffers against the exacerbation of psychological difficulties. The positive schemas construct includes three variables: balanced perception of the world, positive coping, and perceived control. All are hypothesized to be positively related to resilience.

*Balanced perception of the world.* Several trauma researchers maintain that cognitive schemas have a central role in a victim's reaction to a traumatic event (Foa & Rothbaum, 1997; Horowitz, 1986; Janoff-Bulman, 1992). Foa and Riggs (1993) suggest that flexible, balanced cognitive schemas protect against development of PTSD, and that individuals with PTSD have a more negative view of the world than those without PTSD. Support for this hypothesis was reported by Foa, Ehlers, Clark, and Tolman (1999): Trauma victims with PTSD exhibited a more negative view of the world than did traumatized individuals without PTSD and non-traumatized individuals; the latter two groups did not differ from one another. Similarly, among battered women, a more negative view of the world and the self has been found related to increased psychological difficulty (M. A. Dutton et al., 1994).

*Problem solving.* Carver et al. (1989) found that active coping was associated with higher levels of optimism and self-esteem. J. C. Campbell et al. (1998) demonstrated that battered women use a variety of active coping responses in an attempt to decrease the violence. Interestingly, women engaging in active planning were less likely to be involved in long-term abusive relationships than those with less active planning (Follingstad et al., 1992). Although causality cannot be inferred from these findings, we hypothesize that active planning will increase a woman's resilience.

*Perceived control.* In the general population, an internal locus of control is more adaptive than an external one (e.g., Evans, 1981; Haworth, Jarman, & Lee, 1997). Several researchers have argued for the importance of perceived control in recovery from a stressor (e.g., Foa, Zinbarg, & Rothbaum, 1992; Folkman, 1984). Indeed, perceived control has been found related to PTSD severity (Kushner, Riggs, Foa, & Miller, 1993; Solomon, 1990). As would be expected from these findings, length of violence was related to higher external locus of control (Cheney & Bleker, 1982). Also, women who had left an abusive relationship had greater perceived control than those who did not, and perceived control was positively related to self-esteem and negatively to psychological difficulties, moderating the relationship between self-esteem and violence (O'Neill & Kerig, 1998). A relationship between perceived control and well-being was also found by Follingstad et al. (1991) and by Cohen and Edwards (1988).

### *Perception of the Relationship*

In the proposed model, we will also explore the relationship between perception of the relationship to partner violence. Five variables are proposed to be part of the perception of partner relationship: dependency, expectancy to change, traditional relationship beliefs, investment, and attributions about violence. The first four are hypothesized to have positive weight and the last one a negative weight.

*Dependency.* A common explanation for why battered women stay in abusive relationships is dependency (e.g., Pagelow, 1981; Strube & Barbour, 1983, 1984). Emotional dependency of battered women on their male partners is correlated with increased violence in the relationship (Kalmuss & Straus, 1990). Moreover, women who stated that they "love their partner" were likely to stay in the relationship (Strube & Barbour, 1983, 1984).

*Partner will change.* Another reason commonly reported for staying in an abusive relationship is the belief that the partner will change



or reform (Pagelow, 1981; Roy, 1977; Strube & Barbour, 1983).

*Traditional sex role beliefs.* These beliefs have been associated with staying in an abusive relationship (e.g., Schwartz & Mattley, 1993; Warren & Lanning, 1992), but the available findings are equivocal (Hotaling & Sugarman, 1986). In a recent study, a positive association between traditional beliefs and partner violence has emerged (Apt & Hurlbert, 1993).

*Investment.* Investment or commitment to a relationship is lower among battered women who are less satisfied with their relationships and who have better economic alternatives (Rusbult & Martz, 1995). In addition, investment has been found to be predictive of remaining in, and returning to, an abusive partnership (Rusbult & Martz, 1995).

*Attributions about violence.* A woman's attributions about the violence also seem to play a role in staying in a violent relationship. The majority of women do not blame themselves for the violence in their relationships (e.g., Bograd, 1988; Cantos et al., 1993; O'Leary, Curley, Rosenbaum, & Clarke, 1985). However, women may make unstable attributions about the violence, assuming that it will not happen again (Holtzworth-Munroe, 1988; Holtzworth-Munroe, Jacobson, Fehrenbach, & Fruzzetti, 1992). Women who, in contrast, make stable attributions about partner violence often express a desire to leave the relationship (e.g., Frieze, 1979).

In summary, the psychological model includes four constructs: trauma history, negative schemas, positive schemas, and perception of relationship. We propose that variables representing these constructs influence partner violence both directly and via their effects on psychological difficulties and resilience factors.

## HYPOTHESIZED ENVIRONMENTAL MODEL

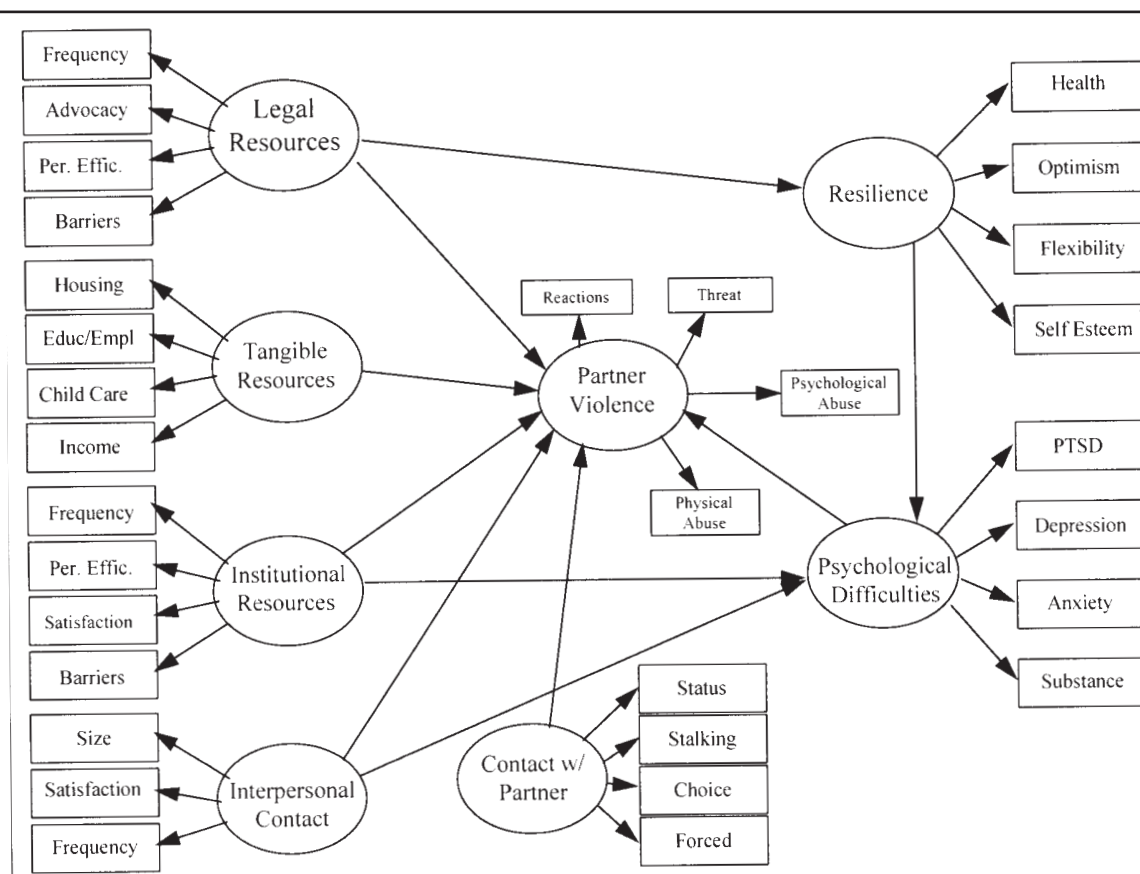
To further understand factors implicated in the cessation or continuation of partner violence, we also propose an environmental model that includes variables hypothesized to affect

psychological difficulties and resilience (see Figure 2).

This model is based on the commonly held hypothesis that environmental factors facilitate reduction in partner violence. There are five constructs in the proposed environmental model. We hypothesize that tangible, interpersonal, legal, and institutional resources have direct negative relationships to partner violence; contact with abusive partner, on the other hand, has a direct positive relationship to partner violence. We also suppose that interpersonal and institutional resources will have direct effects on psychological difficulties and that legal resources will influence resilience.

*Contact with abusive partner.* This construct consists of four variables: relationship status, frequency of partner contact by choice, frequency of imposed partner contact, and stalking. In our proposed model, this construct refers to contact with all partners who have perpetrated some form of psychological or physical aggression against the woman within a designated time. This definition takes into account the fact that even in the absence of contact with the target partner, some women may leave one violent partner only to begin a new relationship with another violent partner. Campbell and Soeken (1999) found that the vast majority of women had one (99%) and not two (1%) abusive partners across 2 years. One related construct is relationship status where the decision to leave an abusive partner typically serves as a proxy for termination of partner violence (Herbert et al., 1991; Schwartz, 1988; Strube & Barbour, 1984). Though leaving may curtail partner violence, it is not equivalent to cessation of violence. Indeed, women are at highest risk for violence (Schwartz, 1988) or for being murdered by their partner (Daly & Wilson, 1988) when they take steps to separate. Even after terminating the relationship, contact with the

... the psychological model includes four constructs: trauma history, negative schemas, positive schemas, and perception of relationship.



**Figure 2: Proposed Environmental Model of Women's Influence on the Cessation of Partner Violence**

NOTE: Per. Effic. = personal efficacy; Educ/Empl = education/employment; PTSD = post-traumatic stress disorder.

batterer—by choice (e.g., social contact), by imposition (e.g., by financial obligations, child custody battles), or in the form of stalking—may increase the likelihood of continued violence. J. C. Campbell et al. (1998) also found that battered women perceive their relationship as a continuum of degree of involvement rather than in or out. The proposed model posits that continued contact with an abusive partner will increase partner violence, which in turn will increase psychological difficulties.

### *Tangible Resources*

In the proposed model, we hypothesize that access to an adequate level of tangible resources (i.e., income, housing, child care, and employment) will be negatively related to partner violence. Sullivan et al. (1992) found that most battered women require numerous interrelated

resources to establish independent lives, including income, employment, and housing. Prospective and correlational studies indicate that lack of economic resources, education, and job skills promote return to an abusive partner (Frisch & MacKenzie, 1991; Gondolf, 1988; Hofeller, 1982; Kalmuss & Straus, 1990). Furthermore, women who were employed, who reported less economic hardship, and who had somewhere else to go were more likely to leave an abusive relationship (Strube & Barbour, 1984). Some women who try to take action to curtail battering experience significant difficulty in accessing adequate child care, and this difficulty may hinder their efforts (Hoff, 1993). As noted above, whereas leaving may not ensure decreased partner violence, leaving without subsequent contact is more likely to result in decreased partner violence than remaining with an abusive partner (Feld &

Straus, 1990); however, leaving requires tangible resources. Thus, we hypothesize in our proposed model that access to and adequacy of tangible resources will be negatively related to partner violence.

### *Interpersonal Resources*

The construct of interpersonal resources contains three dimensions in three social domains: network size, frequency, and quality of contact with family, friends, and neighbors. These resources are hypothesized to have direct effects on psychological difficulties and partner violence. Size of social network is positively related to frequency of, and satisfaction with, social contact (e.g., Munch & McPherson, 1997; Oxley, 1981; Sudman, 1988). Limited social contacts are associated with increases in psychological difficulties among low-income single mothers (Olson, Kieschnick, Banyard, & Ceballo, 1994), psychiatric patients (Cornelis, Ameling, & de Jonghe Institution, 1989), and representative community samples (Geoge, Blazer, Hughes, & Fowler, 1989). Conversely, social contact decreases psychological difficulties. Descriptive studies of battered women suggest that many have substantial social contact (e.g., Bowker, 1993), and that social contact is negatively related to partner violence and resultant psychological difficulties. Bowker (1983) found that social disclosure (i.e., disclosure of violence to neighbors, friends, and relatives) helped to prevent continued violence. Importantly, battered women who reported positive perceived support blamed themselves less for the violence (Zimet, Dahlem, Zimet, & Farley, 1988). Greater satisfaction with social support was found to be positively associated with short- and long-term psychological well-being, and negatively correlated with depression in cross-sectional studies (Tan et al., 1995). Moreover, frequency and quality of contact with members of the social network predicted decreases in depressive symptoms of battered women 6 months after leaving a battered woman's shelter (R. Campbell et al., 1995). Other studies show that lack of social contact, or isolation resulting from the batterer's control, erodes self-worth and places women at

risk for depression (e.g., D. G. Dutton & Painter, 1993; Murphy & Cascardi, in press). Thus, in the environmental model, we hypothesize that larger social networks increase frequency of social contact—and frequent, satisfying contact will be negatively correlated with partner violence and psychological difficulties.

### *Legal Resources*

In the proposed model, legal resources are captured by four variables: barriers to legal support (e.g., fear), frequency of use, perceived effectiveness, and advocacy of legal interventions. Legal interventions are sanctions to deter future violence and are defined as police arrest, restraining orders, and prosecution. We hypothesize that barriers are negatively related to legal resources, whereas frequency, perceived effectiveness, and advocacy are positively related to them. We hypothesize that decreased legal resources will increase partner violence and decrease resilience. Conversely, increased legal resources will be negatively related to partner violence, and positively related to resilience.

The model predicts that high use of legal interventions perceived as effective and provided with strong advocacy and respect will decrease partner violence and increase resilience. These hypotheses are derived from the literature on legal interventions, which shows that under optimal conditions, police arrest, restraining orders, and prosecution can deter future violence. Accordingly, Sherman and Berk (1984) found that arrest resulted in less recidivism than separation or mediation, and mandatory arrests are related to women's satisfaction with police assistance (Jaffe et al., 1986). With respect to restraining orders, a relatively high adherence by the batterer was reported (Chaudhuri & Daly, 1992). In a controlled study, Ford and Regoli (1992) found that victims who were permitted to drop charges but did not do so felt less victimized than were other victims. Furthermore, most women seemed satisfied with the results of police and legal support (Hofeller, 1982; Horton, Simonidos, & Simonidos, 1987). The concept of advocacy, adapted from proce-

dural justice theory, suggests that persons treated by authorities with dignity and respect rate their experiences as more fair and satisfactory (Lind & Tyler, 1988). We extend this to battered women. When effective, legal resources seem to enhance resilience by giving the battered woman more power to reduce partner violence, via leaving or enforcing change within the relationship (D. G. Dutton, Hart, Kenned, & Williams, 1992).

In this model, we also hypothesize that barriers to use (negative experiences of legal interventions and fear of intervention) will increase partner violence. Partners who are unemployed or have a history of prior arrests are not likely to be deterred by the threat of arrest (Sherman, Smith, Schmidt, & Rogan, 1992). Thus, the women of these partners may be unlikely to perceive legal intervention as effective and may also perceive more barriers. Police may also intervene in a manner that fails to treat domestic violence seriously and may deter future use (Kantor & Straus, 1990). Though some studies show that restraining orders can be helpful, Baker (1997) found that they can sometimes increase violence; therefore, due to fear of retaliation and lack of perceived use, battered women may be deterred from using the legal system. Furthermore, few cases against batterers are prosecuted in the criminal justice system. And often, pretrial interventions, such as probation and counseling, are of limited effect (D. G. Dutton, 1995).

### *Institutional Resources*

In the hypothesized model, institutional resources are comprised by four variables: barriers (e.g., fear), frequency of use, perceived effectiveness, and satisfaction with institutional interventions. We propose that barriers will be negatively related and the remaining variables positively related to this construct. The model asserts that high institu-

tional resources will ameliorate psychological difficulties as well as partner violence. Institutional resources include medical (e.g., emergency room), domestic violence (e.g., shelter, support group), mental health (e.g., counseling), social services, and clergy.

Battered women engage in a wide range of actions to curtail partner violence (Bowker, 1983; Gondolf & Fisher, 1988). Berk, Newton, and Berk (1986) found that help-seeking actions, combined with the use of emergency shelter, limited new incidents of violence. Furthermore, Tutty (1996) reported that a shelter follow-up program was perceived by battered women leaving the shelter as central in their not returning to an abusive relationship. Services such as shelters, crisis lines, and counseling services were rated as effective (Bowker, 1993) and helpful most of the time (Gordon, 1996).

Although institutional interventions have the potential to decrease violence and ameliorate psychological difficulties, they also have the potential to further victimize the women—and in doing so, may create barriers to continued use. Bowker (1993) concluded that the length of time it takes battered women to free themselves of partner violence is related, in part, to the absence of support from traditional social interventions. For example, medical personnel may fail to assess violence and to recommend referrals that can help cease the violence (e.g., Kurz & Stark, 1988; C. Warshaw, 1993). Clergy (Bowker & Maurer, 1986) or mental health professionals may blame victims for their abuse, which may produce feelings of helplessness, alienation, and isolation, thus decreasing future use (i.e., create barriers) and increasing psychological difficulties. Although not directly studied in battered women, barriers may also include fear of use and lack of awareness, as these factors prevent help-seeking behavior (e.g., Becker, 1990; Weissfeld, Brick, Kirscht, & Hawthorne, 1989).

In summary, we have proposed an environmental model that includes five constructs: contact with partner, tangible resources, interpersonal resources, legal resources, and institutional resources. The model hypothesizes that all five factors directly influence partner

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violence. It further hypothesizes that interpersonal and institutional resources also influence partner violence via their effects on psychological difficulties, and that legal resources influence resilience.

## CONCLUSIONS

In this article, we focused on variables found related to partner violence that could be anchored to an integrative conceptual framework. The conceptual framework we proposed includes complementary psychological and environmental predictive models that together embed partner violence in a broad psychosocial context. The identification of factors involved in the cessation of partner violence is critical for the success of our society in curtailing such violence. Such research can be influential on several levels of intervention. First, it will inform policy makers on what changes should be insti-

tuted, and thus, where to most effectively allocate societal resources. For example, should efforts be focused on increasing legal protection, or should we give priority to provision of housing? Second, it will assist in the development of psychological interventions that will increase women's ability to become an effective agent in their attempts to lead violence-free lives. For example, should we focus on reducing psychological disturbances, or should we concentrate on bolstering resilient factors?

Because research on partner violence is a relatively young field, there is a scarcity of knowledge on the relative importance of the different psychological and environmental factors that have been implicated in partner violence. The examination of both psychological and environmental factors within comprehensive models affords a more thorough understanding of how battered women can influence the course of partner violence.

## IMPLICATIONS FOR PRACTICE, POLICY, AND RESEARCH

- Broad contextual definitions of variables of interest are crucial for increased understanding of partner violence.
- Definitions of partner violence should include not only physical aggression but also factors such as psychological abuse, perceived threat, and perceived loss of power or control.
- Both resilience factors (such as self-esteem or optimism) and psychological difficulties (such as depression and posttraumatic stress disorder) should be studied.
- Both environmental and psychological factors influence a woman's ability to curtail partner violence.
- Access to and effectiveness of factors in the environment such as legal (e.g., protection from abuse orders), tangible (e.g., employment), institutional (e.g., clergy), and social (e.g., supportive friends and family) resources need to be assessed.
- Psychological factors, such as perception of the relationship (e.g., expectancy for change), and cognitive styles, such as perceived control or guilt, also need to be assessed.
- Most important, the focus on women's ability to curtail partner violence is not intended to further propagate the notion that victims are to blame for their battering, but rather to further understand how to help women curtail violence in their lives.

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