Predictors and Consequences of Decision Making in Domestic Violence

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ABSTRACT

The impact of domestic violence upon the individual and society is widespread. Despite this up to 75% of women choose to remain in or return to abusive relationships, a decision that represents significant barriers towards the provision of support, a wider understanding, and criminal justice engagement. This study aimed to explore predictors and consequences of decisions to leave and return to abusive relationships, investigating specifically the components of the Theory of Planned Behaviour, along with patterns of abuse exposure, social support and health.

The study used a survey of 31 women recruited from North West support agencies. Participants completed a survey instrument incorporating measures of patterns of violence, quality of life, mental health, social support and decision making. In addition the study incorporated a semi-structured interview and a cognitive probe task.

The results were analysed using regression models to predict intentions to leave, intentions to return and health and well-being. Significant models were found to support the applicability of the Theory of Planned Behaviour as a framework for understanding decisions to leave (explaining 51% of the variance), with internal perceived behavioural control as the strongest predictor. In contrast, the Theory of Reasoned Action predicted intentions to return. When the contribution of health and abuse were explored, no significant models were found, although depression approached significance as a predictor of decisions to leave. In models predicting health, abuse was the only significant predictor with different components predicting physical and mental health.

Social support was found to interact with abuse to predict physical health.

Findings supported the decision to leave as a complex, evaluative process, influenced predominantly by women's own perceptions of control and capabilities, emphasising the importance of support in this area. The decision to return appeared to be less complex, with findings suggesting an overlap between leaving 'cognitions' and intentions to return. The importance of social support in this population is highlighted in addition to the emotional health of women which should be addressed as part of the support process.

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CHAPTER 1 - INTRODUCTION

<u>Defining Domestic Violence</u>

The definition of 'Domestic violence' (DV) varies across the sources and contexts in which it is referred. It is currently defined by the British government as 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality' (Home Office, 2009). Other sources broaden its definition to emphasise the element of coercive control over another (National Domestic Violence Hotline, 2009, Women's Aid, 2007). Generally agreed and included within many, if not all definitions however, is that DV encompasses a range of behaviours and occurs in all areas of society regardless of age, backgrounds, race, sexualities, gender, religion and lifestyle.

The term 'Intimate partner violence' (IPV) is often used interchangeably with domestic violence but refers specifically to abuse by 'current or former intimate partners' (whether of the same or opposite sex), (Centre for Disease Control & Prevention, CDC). For the purposes of consistency in this study 'domestic violence' will be employed as it is the most commonly used when discussing partner violence.

The dynamics of domestic violence is debated, with a growing body of evidence that different patterns do exist (Frieze & Brown, 1989, Graham-Kevan & Archer, 2003, Johnson, 1995, 2006, Leone, Johnston, Cohan & Lloyd, 2004).

This stems from Johnson's (1995) original typologies of 'patriarchal terrorism'. later revised to 'intimate terrorism' and 'common couple violence', revised to 'situational couple violence' (Johnson, 2006). Patriarchal/Intimate terrorism is theoretically grounded in the work of the feminist perspective and is perhaps the most commonly associated with domestic violence. It is characterised by the need to exert and maintain general control over the relationship, involving the 'systematic use' of not only violence, but economic subordination, threats. isolation and other control tactics' (Johnson, 2005). It escalates in severity over time, and is almost exclusively initiated by the male partner. In contrast 'situational violence', grounded in a family violence perspective does not have its basis in the dynamic power and control (Kelly & Johnson, 2008). There are no relationship wide control behaviours, it is more gender-balanced, occurring from time to time when 'conflict gets out of hand', rarely escalating into serious forms of violence' (Johnson, 1995). As this study's participants were predominantly receiving support from refuges or other agencies, in which victims of 'intimate terrorism' are primarily found (Graham-Kevan & Archer, 2003, Johnson, 1995) it can be assumed that this type of relationship is that to which the data is related.

Prevalence of Domestic Violence

Domestic Violence as defined by the Home Office is an international problem with estimates that 1 in 4 women experience domestic violence in their lifetimes and between 6-10% of women in a given year (Council of Europe, 2002). In England and Wales specifically domestic violence accounts for 16% of all recorded violent crime (Kershaw, Nicholas & Walker, 2008) with one incident

reported to the police every minute (Stanko, 2000), although it is estimated that nearly 40% of domestic violence incidents go unreported (Walby & Allen, 2004). Figures relating specifically to aggression between intimate partners are scarcer, but organisations such as Women's Aid report that 89% of a sample of 868 women receiving refuge based support are victims of this. The National Violence against Women Survey (NVAWS; Tjaden & Thoennes, 2000) estimated that approximately 1.5 million women in the US were victims of sexual or physical assault by an intimate yearly, often with psychological abuse, and verbal abuse being the biggest predictor of all victimisation.

The prevalence of domestic violence towards men is more difficult to estimate due to the extent that it goes unreported. This may be due to feelings of shame or embarrassment, or for many the view that domestic violence is not a crime. Such underreporting is the main methodological difficulty associated with surveys such as the British Crime and National Crime Victimisation, which based on national policing data, suggest women to be at greater risk of domestic violence than men and experience more severe consequences (Mirrlees-Black, 1999, Rennison & Welchans, 2000). Evidence instead appears to support the position of family conflict researchers, that domestic violence is a human rather than gendered problem. Equivocal rates of aggression have been found between partners living in the community (Straus, Gelles & Smith, 1995) and substantial rates of injury to males by their female partners (35% in a meta analysis of 20 studies, Archer, 2000). In addition, a high number of males have reported being exposed to extreme partner violence and coercive behaviours thus fitting an 'intimate terrorism' typology (Hines, Brown & Dunning, 2007).

As female victims of domestic violence are the most readily accessible however, these will form the sample of this study and the literature will focus on women from this point forward. It is important to recognise that this research could equally be carried out with male victims however, which should be given future consideration.

Health Consequences of Domestic Violence

The negative health consequences of domestic violence, both physical and psychological, immediate and chronic, are well documented. In general women exposed to such trauma experience higher incidences of health problems and report a poorer health status (Dutton, Green, Kaltman, Roesch, Zeffiro & Krause, 2006).

Physical Health

Domestic violence has both short and long term physical effects (Campbell, 2002). Migraines, headaches, gastro-intestinal symptoms, musculoskeletal problems, bowel disorders and stroke are just some of the health problems shown to be prevalent in women suffering from domestic violence, many of which are significantly higher than those reported in the general population (Brewer, Roy & Smith, in press). Cardiac problems such as hypertension and chest pain have also been implicated, along with greater day to day impairment in those with diagnosed medical conditions (Dutton et al, 2006). Such poor physical health could stem directly from stress, indirectly through health behaviours, for example smoking and substance abuse, as well as through the

trauma associated with physical abuse. Injury for example is a common effect, with abused women presenting at accident and emergency departments three times more than age and SES matched counterparts (Kahan, Tzur-Zilberman, Rabin, Shofty, Mehoudar & Kitai, 2000).

Mental Health

In the last two decades research has been increasingly focused on the psychological impact of domestic violence. Along with other abuse this has been cited as the most common cause of depression and other mental health difficulties in women (Women's Aid, 2005), with victims between 3 – 5 times more likely than non-victims to suffer from depression, post traumatic stress disorder (PTSD), suicide attempts and substance abuse (Golding, 1999). Studies have also found that abused women suffer from lower self-esteem (Aguilar & Nightingale, 1994, Campbell & Soeken, 1999, Hartik, 1978, Orava, McLeod, & Sharpe, 1996), are more passive (Star, 1978) and are at increased risk of other mental health disorders as characterized by the DSM (Danielson, Moffit, Caspi & Silva, 1998, Rhodes, 1992).

Whether these consequences are a direct result of abuse is just one question in the complex link between victimisation and negative health. Depression in abused women for example has also been associated with other factors, such as the stresses of daily living, children and negative life events (Campbell, 2002). Additionally, characteristics of an individual and prior history may increase the perceptions and negative effects of the abuse experienced. This

should be considered distinct from the effects resulting purely from the type of abuse experienced (Jordan, Nietzel, Walker & Logan, 2004).

Patterns of Domestic Violence and Health

Another area of interest in the link between victimisation and poor health is whether the latter varies as a function of the pattern and severity of abuse experienced. Studies have shown that in general the more severe an experienced traumatic event, the worse the associated effect, particularly with respect to depression (Dutton et al, 2006). This has been supported within research on domestic violence, with depression increasing as the severity of abuse increases (Cascardi & O'Leary, 1992, Dutton, 2006) as well as PTSD symptom levels (Krause, Kaltman, Goodman & Dutton, 2008). Studies demonstrating an improvement in health following the termination of an abusive relationship are also consistent with these findings. Depression for example was found to significantly decrease in abused women following shelter exit, almost diminishing after 6 months (Campbell, Sullivan & Davidson, 1995). This suggests that depression may be proportional to experienced domestic violence and that recovery may be promoted through leaving an abusive relationship.

Consistent with this idea that negative affect may be proportional to experience, a number of studies have found that the type of trauma women are exposed to can contribute specifically to the incidence and severity of symptoms they experience. As this may have important implications for both assessment and interventions, the relationship between various patterns of domestic violence and health outcomes has been identified as a crucial research issue (Dutton et

al, 2006). Unlike the severity of abuse, however there appears to be some ambiguity surrounding this area. Some researchers argue that psychological abuse and sexual violence exert independent health effects, suggesting they both are more predictive of poor mental and physical health than physical violence alone (Campbell, 2002, Campbell & Soeken, 1999b, Dutton et al, 2006, Mitchell & Anglin, 2009), particularly in regards to the development of PTSD symptoms (Dutton et al. 2006). In contrast, Campbell, Kub, Belknap & Templin (1997), found physical violence to be the only abuse type predictive of depression. Other studies have shown a combination of physical and other forms of abuse to increase the risk of health problems more than an individual type (e.g. Mitchell & Anglin, 2002). Thus it appears that various patterns of domestic violence contribute to adverse health symptoms, with the risk increasing with the complexity of abuse. This would be consistent with research on the severity of abuse, and studies implicating multiple traumatic events in the development of PTSD (Mitchell & Anglin, 2009). Further research is needed to assess the contribution of individual patterns however.

Whether such links between victimisation and health are a function of or further mediated by the length of an abusive relationship as well as factors such as the number of previous separations, is also of interest. Reviewing the evidence highlighted already in this section, it is reasonable to assume that the longer a women remains in an abusive relationship (where the abuse is likely to escalate) the worse their health. Evidence has been found to support this, showing a longer duration to be associated with increased negative physical and psychological consequences (Sutherland, Bybee & Sullivan, 1998). As already highlighted however, the dynamics of this relationship are not clear.

Other factors for example a decrease in social support which may result from remaining in an abusive relationship longer, or age, where those in longer relationships are older, may be implicated in this poorer health rather than the abuse alone. Thus such factors should be explored and controlled for where necessary.

As a direct predictor of health, the number of prior separations has received relatively little investigation. The number of separations have been associated with increased loneliness in abused women however (Rokach, 2007) and abuse has been shown to increase in victims who temporarily leave their partners in comparison to those that never leave (Anderson, 2003). Thus in those who have had more previous separations, poorer health might be predicted both by greater resultant loneliness as well as periods of escalation in the pattern of abuse following separation.

The Decision to Leave or Stay

The question of why some women remain in abusive relationships whereas others are able to leave is perhaps the most commonly asked in relation to domestic violence. It is also perhaps the most misunderstood area, a question embedded with many critical and often disparaging implications. It seems logical that women leave relationships that are a danger to them and affect their health and well-being (Campbell, 2002, Dutton et al, 2006, Sackett & Saunders, 1999) as well as that of significant others, particularly their children (Walker, 2000). The complexity of making such a decision however is evident from the research in this area, which suggests it to be an evaluative, 'unfolding' and

repetitive process, involving consideration of many factors that are likely to change over time (Ballantine, 2005, Barnett & La Violette 1993).

The individual nature of such decision making processes may explain differences amongst abused women's relationship duration, which increasing evidence suggests is a far from stable concept (Campbell, Rose, Kub & Nedd, 1998). Many women are able to leave relatively early in the relationship, demonstrating impassivity and intolerance towards their abusers actions and subsequently not returning (Gortner, Berns & Jacobson & Gottman, 1997). Others may leave and return several times before being able to leave permanently (Campbell, Miller, Cardwell & Belknap, 1994, Okun, 1986), often after a critical event which acts as a turning point, or psychological 'breakthrough' where they realise that they are not responsible for the abuse or that the perpetrator will not change (Ballantine, 2005). Campbell et al (1998) described an 'in/out' relationship status which may characterise the current or prior statistics of these women, where an awareness of the relationship problems exist yet despite leaving or planning to leave, an ambivalent attitude still remains towards its end. This may explain the proportion of women who remain in or choose to return to abusive relationships, suggested to range between 24% and 76% (Ballantine, 2005).

The reasoning behind a women's decision to leave or remain with an abusive partner has received a great deal of attention within research, perhaps due to the prevalence and consequences of domestic violence (Rhatigan et al, 2006). A better understanding of these decisions could have important clinical implications, particularly in terms of interventions. Before presenting such

studies however it is important firstly to distinguish between the types of research that has been conducted. A number of studies have researched variables that are thought to be pertinent to the stay/leave decision, attempting to profile characteristics that differentiate women that stay from those that leave. These variables are predominantly psychosocial, examined using both quantitative and qualitative methods (Hendy, Eggen, Gustitus, McLeod & Ng, 2003). Other researchers have focused more specifically upon theoretical models, providing a broad framework and context into which some of these variables may be understood.

Individual Factors

Rhatigan et al (2006) identified 92 studies that had been conducted on this topic and broadly categorised variables into those specific to victims (the most commonly researched), those specific to perpetrators and those pertaining to the relationship as a whole. Although this seems a simple distinction, the complexity of categorising factors is evident from published research with the most common predictors of the stay/leave decision often organised for discussion in differing ways.

Perhaps the most widely agreed distinction is that of, 'internal', 'psychological' or 'personal' factors (Ballantine, 2005, Barnett, 2001, Hendy et al, 2003) in contrast to 'external', 'material', 'situational' or 'environmental' factors (Anderson & Saunders, 2003, Ballantine, 2005, Barnett, 2001, Hendy et al, 2003, Rhodes & McKenzie, 1998). Internal factors emphasise the importance of personal strengths and limitations, emotional stability and values within the individual,

such as fear, commitment to their partner, low self esteem (Hendy et al, 2003) whereas in the latter environmental influences and resources, such as economic dependence, children and social support are seen as fundamental to a woman's evaluative process. In a discussion of key factors, Ballantine (2005) made the further distinction of 'social' and 'barrier' with the former referring to the need to conform to the expectations of relevant social networks and the latter psychological or external 'conditions' evaluated as affecting control over leaving the relationship. For the purposes of discussion, this study will use the broad distinctions of internal/psychological and external/situational factors in relation to victimisation, further subdividing factors where appropriate for clarity. As many of these factors are perceived as 'barriers' it is felt such a category is irrelevant at this stage with the issue perhaps being of a more theoretical nature, that is, perceived behavioural control. Only those factors that will in some way be explored in this study will be discussed.

Internal / Psychological Factors

Personality and Psychopathology

Dominant in early research was the view that abused women were somehow fundamentally different in personality characteristics to non-abused women either innately or as function of their victimisation (Anderson & Saunders, 2003, Rhodes & McKenzie, 1998, Walker, 2000). This was seen as the primary motivation for remaining in or returning to abusive relationships. Using the 'theory of learned helplessness' Walker (1979) proposed that abused women

were victims of a 'battered women syndrome' where repeated abuse led to cognitive and motivational deficits and subsequently less adaptive responses.

Evidence for this view has been supported by studies investigating the relationship between emotional well being and the decision making process. Lerner and Kennedy (2000) found that negative dimensions such as depression, anxiety, sleep disturbance and dissociation were negatively correlated with confidence for leaving and positively correlated with temptation to return, and Arias and Pape (1999) found that those with higher levels of PTSD symptoms had less determination to leave their partners, regardless of the severity of abuse they experienced. Kim and Gray (2008) found that lower levels of fear and higher self esteem predicted increased likelihood of leaving, and Johnson (1992) in a larger study of abused women found that those with negative self-perceptions were most likely to return to the abusive relationship. Sato and Heiby (1992) also indirectly showed that women with depressive symptoms were less likely to look for alternate options and treatment for abuse and may be less aware of signs of physical harm (Clements & Sawhney, 2000).

Although such studies suggest those with worse affect and lower self esteem are less likely to leave and more likely to return to an abusive relationship, the idea that this reflects a state of 'learned helplessness' has been a matter of much debate. The concept of learned helplessness has been heavily criticised for being overly simplistic and pathologising victimised women, as well as being founded in equivocal and often contradictory results, (Rhodes & McKenzie, 1998). As well as the theory disregarding evidence for a bidirectional pattern of violence, the heterogeneity of abused women's personalities is now recognised

and they are no longer regarded as helpless, often demonstrating sophisticated coping strategies in order to protect themselves and their children (Walker, 2009). Instead a women's psychological functioning and adjustment (for example confidence and self esteem) are regarded as more simply 'internal barriers' that 'interfere with their ability to operationalise' their desire to leave (Ballantine, 2005), affecting the appraisal of the relationship and levels of motivation (Katz, Arias & Beach, 2000). Depression and other mental health issues are likely to impact on this further.

Some researchers still argue however that the patterns of psychological profiles seen in abused women are not central to them staying in or leaving an abusive relationship. Such profiles are rather a result of women 'reacting' to their situation and do not induce tolerance (Rhodes & McKenzie, 1998). Interestingly Walker's first study into the battered women syndrome appears to support this view, and not the idea of negative health as a 'barrier', showing that women remaining with their partners demonstrated lower levels of depression than those who had left. This also contrasts with previously discussed findings indicating that depression significantly decreases upon leaving an abusive relationship (Campbell, Sullivan & Davidson, 1995), or as abuse decreases (Cascardi & O'Leary, 1992, Saunders, 1994, Rosewater, 1987). Walker (1979) interpreted this finding as a reaction to terminating the relationship, which presumably would improve as time outside the relationship increased.

Whether the negative mental health and aspects of cognitive functioning shown in abused women are reactions to their experience, and diminish upon leaving a relationship is difficult to determine unless a study measures such variables

prior to, and for a period of time after an abusive relationship. Additionally in terms of decision making, it is difficult to draw conclusions as to whether this poor health and functioning influences the decision to leave or stay, with studies such as Walker's (1979) failing to measure how depression and other defined measures of learned helplessness related to termination choices. Based on other evidence, suggesting levels of confidence and self appraisal to be fundamental in such decisions however, it is likely that personality and psychopathology are internal barriers in this way.

The implication of these conclusions for the present study is that women in abusive relationships are likely to demonstrate poor mental health, specifically depression and self esteem, which is potentially influenced by the severity of abuse and duration of the abusive relationship. This negative affect may impact on women's feelings of confidence and motivation, which are likely to negatively correlate with their intentions to leave.

External / Situational Factors

Economic Resources

It has been suggested that women's economic resources constitute one of the most powerful predictors of the decision to leave an abusive relationship (Anderson & Saunders, 2003) with the general finding that the better position a women is in or feels in economically, the more likely a decision to leave (Frisch & McKenzie, 1991, Gordo, Burton & Porter, 2004, Griffing, Ragin, Sage, Madry, Bingham, & Primm, 2002, Herbert, Silver & Ellard, 1991, Horton & Johnson,

1993, Johnson, 1992, Lesser, 1990, Strube & Barbour, 1983, 1984). The resources considered include family and personal income and employment, housing, expected standard of living, and ultimately dependence felt on ones partner, with Aguirre (1985) showing that 82% of women not relying on their husbands as the sole source of income intended to separate from them. Consequently, interventions, particularly refuge-based, focus on providing advice and resources to meet concerns and development in this area (Pape & Arias, 2000). Thus it is important that where a women's decision making is being evaluated that the influence of these factors is explored.

Social Support

Social isolation is regarded as a common feature of domestic violence, an outcome of either the perpetrators controlling behaviour (Wetzel & Ross, 1983), or the victim's behavioural response (Lamdenburger, 1989). Studies have found that limited actual or perceived social support from family members and others significantly reduces the likelihood of women leaving an abusive relationship (Follingstad, Neckerman & Vormbrock, 1992, Hendy et al, 2003, Horton & Johnson, 1993) as well as increasing the likelihood of them returning (Johnson, 1998). Social support is a multi-dimensional construct and it is likely that different dimensions will have different roles in any decision making process. This may include improving women's confidence, feelings of control, self esteem or levels of happiness (Barnett, 2001) to helping them re-evaluate their situation through influencing or modifying normative values and perceptions of external factors such as economic resources.

Like other factors, social support can also influence the decision to leave an abusive relationship indirectly, by influencing the health of victims. Studies have shown that better social networks can moderate the effects of domestic violence on health (Carlson, McNutt, Choi & Rose, 2002, Coker, Smith, Thompson, McKeown, Bethea & Davis, 2002, Holt & Espelage, 2005, Tan, Baster, Sullivan & Davidson, 1995, Valentine & Feinauer, 1993), which supports the stressbuffering hypothesis that proposes that outcomes of stress, (e.g. affect disturbance) are diminished in those with greater social support (Cohen & Wills, 1985). In a similar capacity Barnett, Martinez and Keyson (1996) also demonstrated a near significant negative relationship between social support and level of self-blame. As studies have shown that both poorer health and attributions made for abuse including the onus of responsibility predict intentions to leave, the role of social support may as much reflect its impact upon other factors as in its direct mediation. Thus whilst the literature does implicate social support as an important contributor to decisions to stay or leave, the investigation of this decision making process needs to take into account the complex role within the process that social support may play.

Structural Characteristics of the Relationship

Length

The length of a relationship preceding decisions to leave has been studied as an objective indicator of women's emotional attachment to their partners (Rhatigan et al, 2006). It may also reflect other influences however such as attributions, commitment, feelings of love, satisfaction, fear (of being alone or

increased violence), health, as well as more external factors such as lack of alternatives, housing options and financial dependence. The length of a relationship is also seen as an important element of theories such as 'psychological entrapment', which suggests that women stay in relationships in order to justify previous investment of attempts to make the relationship work (Brockner & Rubin, 1985). However as yet there is no empirical support for this in victimised samples (Rhatigan, 2006). The evidence for relationship length as a predictive factor in these decisions is mixed. A number of studies have found that a shorter duration increases the likelihood of leaving (Compton, 1989, Hilbert & Hilbert, 1984, Rusbult & Martz, 1995, Strube & Barbour, 1984, Snyder & Scheer, 1981) whereas Rhatigan et al (2006) report 3 studies in their review of this area that found no association. No studies have found that a longer duration is associated with increased intentions to leave.

The inconsistency between these studies is likely to reflect the ambiguous nature of this variable and its operationalisation. It's potential to reflect many other characteristics of the relationship, means that its significant effect (where found) may be due to alternate explanations (confounding variables) and these should be controlled for. Which variables are controlled for when examining the association between relationship length and intentions to leave differ between studies however: Martin et al (2000) (who found a non significant effect of relationship length) controlled for previous separations and economic dependence for example, while Strube and Barbour (1984) controlled for love, onset of abuse, marital status and economic hardship. Secondly, the studies differ in their outcome measures. Martin et al (2000) assessed intentions to leave permanently in women who had already left, whereas Strube and Barbour

(1984) examined intentions to leave in women still in relationships. These are two different concepts, thus it is not possible to compare the significance of predictors.

Duration Since Leaving

The duration since leaving has been studied as a predictor of women permanently leaving their relationships following shelter exit. Studies have typically used the length of a women's shelter stay as the measure of duration. Research appears to support longer stays predicting increased intentions to leave (Anderson & Saunders, 2003) which is consistent with other research that has shown more use of the shelter system to be predictive of intentions of permanent relationship termination (Lesser, 1990). However the duration of residence at the shelter encompasses far more than simply the matter of separation and will introduce many factors that may contribute to women's decisions, for example, new sources of support. This suggests that if found to be a significant predictor, as with relationship length, this variable should be further explored by controlling for other potentially influencing factors. As using shelter stay as a measure of the duration since leaving does not take into account those women who leave without the use of shelter support, it is also important that this variable is measured as the time since leaving the relationship and explored in such a sample.

Duration since leaving may also affect women's intentions to permanently leave indirectly through their mental health. Studies have shown that women who have most recently left an abusive relationship (up to 12 months) have the most

trauma symptoms. As poor emotional health has been hypothesised as a factor affecting a women's decision to leave, there may be greater vulnerability associated with negative affect towards returning or not leaving permanently. This may suggest women that have most recently left may be at more risk of returning to the abusive relationship and not taking the decision to leave permanently.

Prior Separations

Many women leave an abusive relationship several times before leaving permanently (Campbell, Miller, Cardwell & Belknap, 2004, Okun, 1986,). Thus the number of prior separations may be particularly pertinent in the decision to leave. Whether this does reflect a 'progressive process of building up resources' where women become more capable of living independently (Okun, 1986) is not clear, but evidence does suggest a higher incidence of separations increases the likelihood of leaving, generally upon shelter exit (Rhatigan et al, 2006). However, it is highly likely that participant sampling in the majority of studies (i.e. from refuge or agency support), will not encompass women who successfully leave first time without support agency involvement, as well as those lacking the internal / external resources to make putative attempts to leave. For studies recruiting participants receiving refuge or agency support therefore, the failure to include such participants may limit the assessment of how prior separation contributes to models of decision making etc. This in turn, restricts the generalisability of conclusions to women receiving agency or refuge support, and such limitations should be acknowledged where this applies. Furthermore, a narrower range of prior separations may also limit the range of

other factors which might influence decision making, such as internal and external resources (e.g. self efficacy and economic independence). This should also be considered when interpreting the predictive value of this variable.

Exposure to Violence

One of the first articles published on why abused women stay with their partners implicated the frequency and severity of abuse as one of the three major factors of women's decisions to remain (Gelles, 1976). In line with the 'common sense hypothesis' it stated that the 'less severe and frequent the violence' the more likely a women would stay. The literature on this is however equivocal, supporting the stance that 'severity and frequency of violence cannot be considered reliable predictors of relationship termination' (Holtzworth-Munroe, Smutzler & Sandin, 1997). In one review 10 studies supported Gelles hypothesis (Rhatigan et al. 2006), including those suggesting psychological abuse as the most predictive of intentions (Gortner et al, 1997, Rhatigan & Street, 2005). However others have found the opposite association (Johnson, 1992, Pagelow, 1981,) or none (Aguirre, 1985, Johnson, 1992, Okun, 1988, Snyder & Scheer, 1981). Following such findings, it has instead been suggested that a change in the pattern of abuse experienced may be more predictive of a women's intentions. This may be an increase in its frequency or severity which has been shown to be more associated with women terminating abusive relationships than those remaining (Pape & Arias, 2000). In future therefore studies might take into account not only the degree and pattern of abuse but also whether these patterns have escalated.

Educational and Abuse Background

Studies have suggested that previous experience of physical and sexual abuse both as a child and an adult, and a woman's education will influence decisions to leave (Anderson & Saunders, 2003) although the findings in this area are inconsistent. Some early studies suggest that exposure to abuse as a child, whether as an observer or victim, may make women more likely to leave an abusive relationship (Gelles, 1976, Pagelow, 1981, Schutte, Malouff & Doyle, 1988), whereas others report little or no association (Aguirre, 1985, Kim & Gray, 2008, Strube & Barbour, 1984). One study has found that more abuse exposure as a child decreases the likelihood of leaving (Lesser, 1990). Possible reasons for this inconsistency in findings relate again to issues of measurement. Studies vary in their outcome measures, from subjective intentions to leave at shelter exit or after months of counselling, to more objective measures such as length of time apart from partner following shelter exit or length of cohabitation after the first violent incident. Whether an effect is found also seems to depend on how exposure to violence is defined. Proposing the need to distinguish between observing violence and being a victim, Gelles (1976) found that exposure to inter-parental violence was a significant predictor of termination decisions. whereas being a victim of parental abuse was not. Although other studies such as Aguirre (1985) addressed Gelle's concerns and measured different aspects of a person's exposure to violence, these studies have nevertheless gone on to use a single composite violence exposure measure. Thus Aguirre (1985) used 5 items assessing different aspects of witnessing and receiving violence as well as experiences of neglect or experiences of siblings, but collapsed these into a single predictor variable. Such composite measures do ensure a range of

dimensions of violence exposure contribute in analyses, however to allow for valid comparisons between studies, studies need to use the same component measures in their composite measure. Furthermore, studies should also explore the unique contribution of individual violence exposure components, to allow comparison with studies looking at individual components, like Gelles (1976).

Surprisingly, previous experience of an abusive relationship with a partner and the decision to leave has not been investigated. However being a victim of multiple abusive relationships has been shown to predict higher rates of depression and dependent, self-defeating personality disorders (Coolidge & Anderson, 2002), which based on the evidence reviewed for personality and psychopathology may interfere with women's decisions to terminate.

Some studies have shown greater access to education to increase intentions to leave (Frisch & MacKenzie, 1991, Schutte et al, 1988), although others have failed to find any effect (Johnson, 1992, Martin, Berenson, Griffing, Sage, Madry, Bingham et al, 2000). This may be due to differences between samples, in variability of education, or other characteristics that may have a high degree of covariance with education, for example socioeconomic factors such as economic dependence. Thus where education is found to be a significant predictor of intentions to leave or stay, care should be taken to control for other confounding factors.

It is clear through examining individual factors associated with the decision to leave, that there are methodological problems that limit the understanding and generalisability of the findings. These relate to measurement, design and sampling, which Strube (1988) also identified in his review of the area. In addition to variation between samples and differences in how predictor and outcome variables are defined which limit comparisons across studies and conclusions that can be drawn, there is also the fact that most studies are accessing women receiving refuge-based support, using cross sectional designs. As the pattern of violence such women experience has been shown to be almost 'exclusive' in comparison to 'common couple violence' more commonly seen in the general population (i.e. systematic, less reciprocal and based on control, Johnson, 1999) there is a question as to how generalisable the findings are. A reliance on cross sectional design is also problematic, as the reliability of women's responses might be in question if they do not reflect stable dispositions, and are mediated by the immediate context rather than more stable influences. This is not only a feature of studies looking at individual factors however, with the same criticism applying to any cross sectional research in this area.

Theoretical Models

Although identifying individual factors is important in understanding the decision making process, it is argued that without a theoretical framework to place factors in context, they provide little information. Thus the importance of theory

driven research in understanding women's reasons to stay in or terminate abusive relationships is advocated in reviews (Rhatigan et al, 2006, Strube, 1988,). Researchers argue that simply testing more individual factors will be of little benefit in enhancing knowledge in this area and efforts should be concentrated upon engaging in 'theory-driven science' where meanings behind relationships in data can be potentially explored and understood (Rhatigan et al, 2006).

A range of theories have been proposed, dating back to the 1960's. These theories tend to divide into either a psychosocial or sociological approach, where the formers emphasis is on an individual's disposition and interaction with the social environment, and the latter emphasises the importance of social structure. Another distinction, perhaps more useful to answer the question of whether abused women's decisional processes need to be understood using a general or specific set of theories was made by Rhatigan et al (2006). 'Violence-specific' theories that emphasise the negative experiences and consequences of victimised women compared to more general theories that can be applied to decision processes in a range of situations.

The Theory of Reasoned Action / Planned Behaviour

The Theory of Planned Behaviour (TPB; Ajzen, 1985), an extension of the Theory of Reasoned Action (TRA; Ajzen & Fishbein, 1980, Fishbein & Ajzen, 1975) is regarded as a promising approach to explain relationship decisions and assist in the development of interventions (Strube, 1988). Like other general theories of decision making and behaviour, it is concerned with how human

action is guided. It proposes a model that integrates various dimensions of a decision making process and allows subsequent evaluation of the value of each dimension and their influence on behaviour.

According to the TPB three types of considerations are influential in the decision to engage in a type of behaviour, or more importantly the 'intention' to engage in behaviour which is regarded as an 'immediate antecedent' to performing the behaviour in question (Ajzen & Madden, 1986). In its simplest terms the theory proposes that as a general rule people go on to perform behaviours that they intend to perform and do not perform behaviours that they do not intend to (Ballantine, 2005). Thus by measuring the 'intention' we are effectively able to predict actual behaviour where this may not be directly observable (Francis, Eccles, Johnston, Walker, Grimshaw, Foy, et al, 2004).

The theory proposes that intentions are influenced by specific sets of beliefs, which in turn underlie the main components of the theory. First are beliefs held by the individual regarding the likely outcomes of performing the behaviour and the evaluation of these outcomes (how good or bad the consequences would be). These are referred to as 'Behavioural Beliefs', which form an individual's attitude towards the behaviour in question (unfavourable/favourable). Second are beliefs regarding the expectations of important others, i.e. what important others think he or she should do (perceived social pressure). These are referred to as 'Normative Beliefs' and measured with an individual's motivation to comply with these expectations comprises the *subjective norm* to the behaviour in question.

Lastly, not a feature of the TRA, but added to form the TPB in 1985 to account for the fact that intention is more likely to lead to behaviour if the behaviour in question is perceived to be under volitional control (the individual believes they can perform or not perform the behaviour at their own will, Ajzen, 1991), are beliefs regarding ones control over performing the behaviour. As well as the aspect of controllability this also includes the assessment of one's capability to perform the behaviour, i.e. Do I hold sufficient skills / resources? This constructs an individual's perceived behavioural control which, since its addition has been shown to be a valid and substantial addition to the TRA, improving the prediction of both perceived volitional and non volitional behaviour. This is both directly in conjunction with intention compared to intention alone and indirectly as an independent predictor of intention (Ajzen & Madden, 1986, Madden, Ellen & Ajzen, 2004). Thus these 3 variables or psychological constructs act in combination, with the general rule being the more favourable the attitude, stronger the subjective norm and feeling of behavioural control the greater the intention (Ajzen, 1996).

Both the Theories of Reasoned Action and Planned Behaviour have been widely adopted in many areas of research, particularly the prediction of health behaviours (Godin & Kok, 1996). In their meta-analytic review of the TPB, Armitage and Connor (2001) looked at 185 studies conducted prior to 1998. The TPB explained 27-39% of the variance in behaviour and intention, with the added perceived behavioural control component independently explaining significant additional variance. Since then the TPB has demonstrated further utility in a wide range of contexts where understanding behaviour is the focus from exercise intention and motivation in adolescent cancer survivors (Keats,

Culos-Reed, Courneya, McBride, 2006) obese adults (Boudreau & Godin, 2007), and older women (Conn, Tripp-Reimer, Maas, 2003) to driving behaviour (Elliott, Armitage & Baughan, 2007) drug use (Conner & McMillan, 1999) and sexual activity (Villarruel, Jemmott, Jemmott, & Ronis, 2004). Despite this, and its recognised potential value in domestic violence, its applicability in relation to domestic violence and the concept of leaving or staying has received little investigation.

The Theory of Planned Behaviour applied in Domestic Violence

Due to the TPB's increased explanatory power over the TRA for intentions and behaviour, this study will refer to this theory's framework rather than the TRA, initially proposed as promising in the area of domestic violence interventions by Strube (1988). Figure 1 shows a schematic representation, applying the theory and its components to the decision to leave or stay in domestic violence.

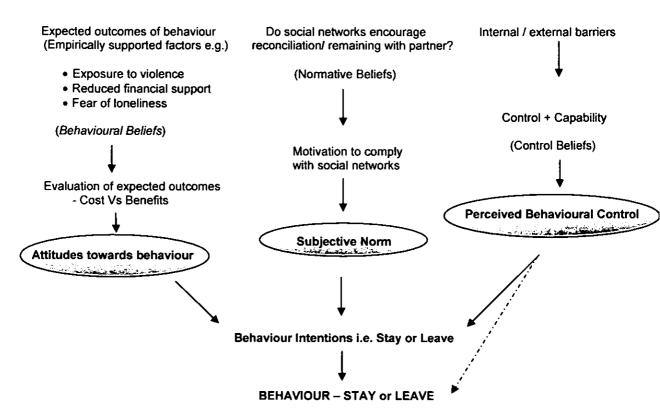


Figure 1. The Theory of Planned Behaviour Applied Within the Field of Decision Making in Domestic Violence

As demonstrated in Figure 1 and identified by Strube (1988) the theory can be easily be applied to the decision to leave an abusive relationship. It reflects the fact that such a decision is complex, and draws upon evaluation of many sources of information and resources, which will have different levels of salience for different women.

Attitudes

One advantage of the model in the context of the decision to leave is that it includes the psychological principle of cost-benefit analysis, inherent in other models applied within this field (i.e. investment theory, psychological entrapment) and seen as an important feature of the decision making process (Strube, 1988). The expected outcomes of leaving (or subsequently returning to) a relationship are critical considerations for a woman facing such decisions, a context in which many of the

empirical factors already discussed could be understood. For example, as demonstrated in Figure 1, women may perceive that leaving a relationship may mean a loss in finance. This would be considered a negative outcome (a 'cost'), and such an evaluation may make them more likely to stay. In contrast, women may perceive the likelihood of social support increasing on leaving the relationship and evaluated as a 'benefit' this may make them more likely to leave. In essence if the costs of terminating exceed the benefits of leaving women will be more likely to stay (Rhatigan, 2006)

Women's health and attributions can also feed into this component allowing for other theories such as learned helplessness to be understood. If a woman perceives their situation as stable, i.e. the abuse not changing, they may be more likely to end the relationship, believing that the costs of remaining in the relationship do not outweigh the rewards. Alternatively as perhaps the learned helplessness theory would posit perceiving the violence as stable or internal may affect women's health (e.g, depression) causing them to evaluate outcomes differently, e.g. 'If I leave I will no longer be worthwhile' (thus seeing the costs as outweighing the rewards). This may subsequently affect their motivation to leave the relationship.

Subjective Norm

A noted advantage of the TPB in relation to other theoretical models in this area is that it accounts for the role of important others in the decision to leave the relationship, which other theories do not acknowledge (Strube, 1988). Social support appears to be a particularly influential factor in the abused woman's decision making process, both directly and indirectly, thus it seems logical that this would correlate with other factors such as attitude to determine ones intentions and ultimately behaviour. Furthermore in

abused women its role in the model may be particularly pertinent due to factors such as isolation or vulnerability that may make them more likely to depend on others for decisions rather than their own judgements. In some cases this could include biased judgements from partners' friends or family, which could be maladaptive. In such cases the impact of such influences on the decision need to be identified (Ballantine, 2005).

Perceived Behavioural Control

As many of the variables (e.g. economic dependence, health, and social support) have the ability to affect a woman's perceived or actual control towards leaving, this component may be particularly influential in the models applicability (Byrne & Arias, 2004). Furthermore, for many women it may be perceived control that particularly determines their course of action. They may express the desire to leave, hold favourable attitudes, and be encouraged by friends and family to do so, but may still feel unable. This may be due to internal perceptions regarding self-efficacy or skills to manage living independently, or more external perceptions concerning opportunities and resources, for example housing, childcare, employment and social support (Ballantine, 2005). Pagelow (1981) found the feeling of being 'trapped' and seeing no way out of their situation was reported by the majority of women remaining in a relationship. Issues such as economic dependence, lack of resources, isolation and having children fed into these feelings of helplessness, which supports Walker's (1979) notion of 'learned helplessness' in abused women. In contrast, but also serving to maintain a women's involvement in an abusive relationship, may be the overestimation of control (that women perceive) over changing the relationship or partner

(Ballantine, 2005). While this supports the importance of perceived behaviour control

as a component of the TPB, it contradicts the hypothesised direction of the relationship, that is the higher the perceived control the stronger the intentions to leave.

Applications of the Theory of Planned Behaviour in Domestic Violence Interventions

Using the model allows the relative importance of each of these individual factors to be identified, which provides a number of points of focus for interventions and their evaluation (Strube, 1988). Strube identified four points within the TRA with a further one stemming from the perceived behavioural control component.

Considering the attitude variable first, interventions could target changing unrealistic beliefs and evaluations that may be held regarding the consequences of leaving a relationship. Women may underestimate or overestimate various outcomes for example, in relation to gaining financial independence or social support. Equally women may hold unrealistic evaluations of such consequences i.e. underestimate potential positives and overestimate negatives, for example finding employment or being alone. In all such cases interventions aimed at educating and informing women about support and opportunities available, (especially in women with a lack of 'general' experience) may be crucial.

Similarly, in regards to perceived behavioural control, support directed at improving a women's self esteem or self-efficacy to alter internal barriers, or support to remove 'external' barriers may be invaluable in generating action. For the subjective norm component, interventions aimed at increasing a women's sense of self reliance may be useful along with exposure to other sources of information where as previously

identified women may be influenced by biased sources, or in addition be unrealistically keen to meet the expectations of others (Strube, 1988).

Existing Studies

As mentioned previously, although the Theory of Planned Behaviour has recognised potential in the investigation of domestic violence and decision making, it has not been the focus of much research. To the authors knowledge two studies have been conducted to investigate the theory's applicability in domestic violence. Only one of these has been published in a peer reviewed journal (Byrne & Arias, 2004).

Byrne and Arias (2004) investigated the utility of both the Theory of Reasoned Action and the Theory of Planned Behaviour to predict 48 sheltered women's intentions to permanently leave or remain with an abusive partner. They found that 56% of the variance in intentions to leave could be explained by the Theory of Reasoned Action, increasing to 69% on the addition of perceived behavioural control thus showing the increased utility of the Theory of Planned Behaviour. In that direct measures used were highly correlated with belief-based measures, the study also shows that women are taking into account a wide range of factors in making their decisions. However, results only partially supported the applicability of either theory, with the subjective norm component not making any significant contribution. Furthermore neither the demographics of the participants or the severity and frequency of abuse experienced was significantly associated with intentions to leave.

Whilst the research addresses an important area, a limitation in Byrne and Arias's study is its cross-sectional design, as it assumes that intentions to leave permanently,

actually translated into a stable behaviour response. Although the correlation between behaviour and intention has been calculated as .47 (Armitage & Conner, 2001) there is still every chance that both women's intentions and behaviour might change. The degree of homogeneity of the sample (all from shelters, predominantly American-European) also limits the generalisability of the findings.

A similar study by Ballantine (2005) aimed to address such concerns by using a longitudinal design and recruiting women from various sources in the community. Ballantine also conducted interviews with a subset of the women to enhance the meaning of the quantitative findings. Results again provided evidence for the utility of both the Theory of Reasoned Action and Planned Behaviour, with the former explaining 49% of the variance in intentions to leave, which increased to 71% by the addition of perceived behavioural control. Thus as with Byrne and Arias (2004) perceived behavioural control significantly enhanced prediction over the TRA, supporting the TPB. Contrary to Bryne and Arias however, this study found all three components to be significant predictors, supporting the relevance of subjective norm. Interestingly however, not tested by Bryne and Arias, even though both the direct and belief based measures were correlated, belief based measures of each of the components did not predict intentions to leave. Thus support for the theory was not found when assessed upon participants' beliefs thought to underlie their attitudes, subjective norm and perceived control.

Importantly Ballatine (2005) also demonstrated that intentions were significantly associated with relationship status at a 6 week follow up which increases confidence in the link between intentions and behaviour. Although using a measure of abuse exposure, this was not explored in relation to women's decisions. Income and ethnicity

were both associated with intentions to leave but did not contribute to its prediction above the theory's components.

Although the sample of 69 women used in Ballantine's study was heterogeneous in terms of age, ethnicity and marital status, it consisted primarily of women that were accessing domestic violence services and were of a low income. Thus like Byrne and Arias findings may not be representative of other demographic groups including women not accessing services. Neither study assessed the theory's applicability in predicting intentions to return.

Returning to Abusive Relationships

Studies indicate that nearly 50% of women receiving some form of support for their abusive relationship are likely to return to their partners (Griffing et al, 2002, Strube, 1998). As such it is surprising that little research has been conducted to identify the reasons behind such decisions. In theory an understanding of the factors that contribute to a decision to stay or leave should show considerable overlap. It is reasonable to assume that such influences that may prevent a woman from leaving a relationship may also cause them to return, while those that encourage them to leave may also dissuade their decision to return.

In the studies that have been conducted, a focus on social and demographic variables such as economic resources, dependence (Aguirre, 1985, Horton & Johnson, 1993) or legal commitments (Strube & Barbour, 1993) is apparent, emphasising the role of external factors in contributing to a women's decision to

return, or as highlighted previously remain in an abusive relationship. Structural characteristics of the relationship, such as the duration and the number of previous separations have also been investigated with inconsistent findings. Some researchers have reported less separations and longer relationships to be more indicative of intentions to return (Snyder & Scheer, 1981) whereas others have not found these to be significant factors (Griffing et al, 2002, Martin, 2000). Psychological factors are influential, with feelings of attachment (Griffing et al, 2002) and attributions made for partners behaviour influencing a women's decision to return (Gordon, Burton & Porter, 2004). This may be due to inaccurate perceptions of future obstacles, suggested by findings that women are not only likely to underestimate their intentions to return (Griffing et al, 2002, Snyder & Fruchtman, 1981) but also the future influence of factors salient to them in the past (Griffing et al, 2002), or the way in which a woman explains the abuse that has happened to her, which subsequently affects forgiveness (Gordon et al, 2004). Limited research appears to have been conducted regarding social support and health as specific predictors of returning. It is perhaps assumed that as predictors of women's intentions to stay or leave, as has been widely shown, they will also contribute to future decisions.

As with the decision to leave, these individual factors can provide some information on women's decisions to return to abusive relationships, but they need to be explored and understood within a theoretical context. Although no studies have examined it, it is clear that the Theory of Planned Behaviour is as widely applicable to this decision as it is with other health behaviours and the choice to leave or stay. Evidence suggests that specific sets of beliefs are influential in the decision to return, i.e. attributions, attachment, economic

resources) thus women are likely to employ a cost benefit analysis involving the components of the theory. How this differs from the decision to leave may only be speculated upon but it may be that subjective norm is more influential as women in refuges may have more sources of support than they had previous to leaving. Conversely, perceived behavioural control may not be as relevant, as for many women returning is likely to be under their volitional control, thus is not an influencing factor in their decisions.

Study Aims

Predictors of Decision Making

The central aim of the study was to test the application of the Theory of Planned Behaviour in relation to women's decisions to leave and return to an abusive relationship. This would allow the exploration of dimensions considered important to women when making such decisions and the subsequent evaluation that these bring about. Based on previous research, it is hypothesised that:

The three components of the Theory of Planned Behaviour (Attitude, Subjective Norm and Perceived Behavioural Control) will significantly predict intentions to leave. Each component will make an independent contribution, with perceived behavioural control significantly improving the prediction over and above the influence of attitude and subjective norms (Theory of Reasoned Action)

2. The three components of the Theory of Planned Behaviour will significantly predict intentions to return. Each component will make an independent contribution. Based on the idea that returning is more under ones volitional control and thus the perceived behavioural control component may not be as relevant, this will not significantly improve the prediction over and above the influence of attitude and subjective norm,

Previous research has also demonstrated the influence that demographic and relationship variables may have on intentions to leave and return. As explored in this study, specifically economic status (income and employment), a victim's background (education, previous exposure to abuse), relationship duration, duration since leaving, previous separations, exposure to violence and social support. Due to the unequivocal support found towards these variables the study hypothesised that:

The Theory of Planned Behaviour components would more accurately
predict both intentions to leave and return than any of these or any other
demographic variables, for example age and ethnicity.

Similarly research has also demonstrated the influence that health, particularly mental health, may have on the decision to leave. Based on previous evidence identified, it is hypothesised that:

 Patterns of poorer health will be associated with decreased intentions to leave and increased intentions to return. Mental health comprising depression, anxiety, stress and self esteem specifically. In addition to the predictors of intentions to leave and return, the study also aimed to explore the relationship between domestic violence and health, in terms of three areas:

- 5. Primarily the study aimed to investigate the effect of decisions upon women's health.
- (a) Specifically, whether there is a difference in the reported physical and mental health between women remaining in an abusive relationship and women that have left. Based on findings on the effects of victimisation, and health as a barrier to leaving, it is hypothesised that those still in abusive relationships will demonstrate poorer health than those who have left. This will be examined through survey instruments of health and a cognitive task designed to measure attentional bias (a proposed indicator of anxiety).
- (b) In addition whether health varies as a function of relationship duration and previous separations will also be examined in this area. Based on existing literature it is hypothesised that more negative health will be reported the longer the duration of a relationship. The more separations that have been experienced in a relationship will also be associated with poorer health.

The effect of abuse on women's health is consistently reported throughout the literature. What is not so clear is the relationship between patterns of violence exposure and affect. Thus this study also aimed to explore the effect of different

patterns of victimisation upon women's reported mental and physical health, hypothesising that:

6. The more frequent and severe the abuse exposure, the worse mental and physical health reported. Based on the literature the strongest associations will be shown between depression, anxiety and self esteem.

A difference in the overall mental and physical health reported will also be predicted by differences in patterns of physical, psychological and sexual abuse.

Lastly, as previously highlighted, social support has been implicated in both the study's areas of predictors and consequences through its direct effect on decision making and its moderation effect of domestic violence upon health.

The study will explore its role in the decision to leave or return as already discussed above. In addition based on previous research the study will also examine its protective role in women experiencing domestic violence. It is hypothesised that:

7. In line with the stress- buffering hypothesis (Cohen & Wills, 1985) the greater a women's social network and availability of support, the less harmful the effect of abuse exposure upon women's health.

CHAPTER 2 - METHOD

Design

A cross sectional design utilizing questionnaire, interview and cognitive probe task methodologies was employed.

Participants

A sample of 31 domestically abused women were recruited from 8 domestic violence support agencies across the Lancashire and Greater Manchester areas. A breakdown of demographic information is provided in Table 1 and a map of the support services where data was collected in Figure 2. Participants averaged 37.4 years of age (SD=10.8) and had on average of 1.2 children (SD =1.1). Twenty eight participants were white (90%) with the remaining three reporting an Asian or Asian British origin. Thirteen participants (42%) left school without any formal qualifications, 7 (23%) had some GCSE's with 6 (19%) having more advanced qualifications. From those who responded 21 (68%) were unemployed at the time of the study citing childcare as the primary reason for this. For 24 participants (just under 75%) who responded, annual income was less than £15,600 with 13 (42%) reporting less than £5,199. In terms of relationship characteristics, 28 participants (90%) were no longer in their relationship, with 16 (52%) at the time of the study residing in a refuge. The average relationship length was 9.2 years (SD = 9.4), with the average duration since leaving being a little over 2 and a half years (32.6 months, SD = 52.7). On average participants had previously separated from their partners twice

(SD = 1.5) with 19 (61%) never previously experiencing an abusive relationship and the remaining 12 (39%) experiencing one. Nineteen (60%) participants had been exposed to parental abuse as a child, with over half of these both witnessing and being the target of such abuse (See Table 2 for a full breakdown of relationship characteristic information).

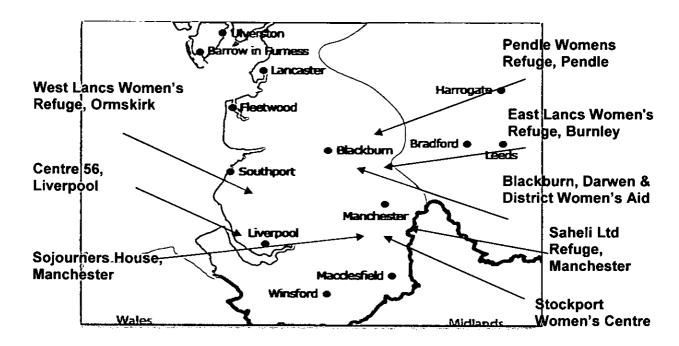


Figure 2. Map showing the 8 domestic violence support services where data was collected.

Eligibility Requirements

In order to participate in the study women must have experienced an intimate partner relationship involving some sort of domestic violence, (physical, psychological or sexual). Women accessing services for violence from a family member other than their partner were not included, and in one case eliminated post hoc from the study when this was evident at interview. Participation also

required the ability to read English due to the amount and length of the questionnaires involved. Women who had reading difficulties only were nonetheless included as there was an option to have the questionnaire read to them.

In accordance with the study's risk assessment document (see Appendix 1) all potential participants were also subject to a risk assessment procedure which included the study's possibility of invoking emotional distress and addressed any pre-existing psychiatric conditions. Where it was felt either by staff at the domestic violence services or the women that participation would be unsuitable for either of these reasons, they were not included.

Prior to data collection, the expectation was that participants would all be, at the time of the study, receiving support from a domestic violence service, (either refuge or non-refuge based) as recruitment was only being carried out in these areas. In some cases however ex service users or women who accessed services sporadically were contacted by managers to attend the recruitment talks and were subsequently included. Additionally three members of staff from participating support organisations who had been involved in domestic violent relationships prior to working at the services volunteered to participate and were also included.

Table 1: Demographic characteristics of participants

	Frequency	Percentage %
Age		
18-29	8	25.9
30-39	<u>1</u> 1	35.5
40-49	8	25.9
50+	4	12.8
Ethnicity		
White	28	90.3
Asian/Asian British	3	9.7
No. of Children under 18 in household		
0	11	35.5
1 or 2	13	42
3+	5	16.1
Education		
	12	41.0
No formal qualifications e.g. GCSEs GCSE's or equivalent	13 7	41.9 22.6
A-Levels/NVQ's	5	16.2
University Degree / Diploma / Postgraduate	1	3.2
Qualification		
Employment		
Employed full time	3	9.7
Employed part time	2	6.5
Out of work for more than 1 year	4	12.9
Out of work for less than 1 year	5	16.1
Stays at home for reasons of parenting/ childcare	8	25.8
Retired	1	3.2
Unable to Work	3	9.7
Income		
Less than £5,199	13	41.9
£5,200 - £10,399	7	22.6
£10,400 - £15,599	4	9.7
£15,600 - £20,799	1	3.2
£20,800 +	2	6.4

Table 2: Relationship characteristics of participants

	Frequency	Percentage %
Relationship Status		
In specified Relationship	3	9.7
Out of specified Relationship	28	90.3
Datationalis Danation		
Relationship Duration		
Less than 12 months	3	9.3
1 – 3 years	9	28.1
4 - 7 years	6	18.9
8 – 10 years	2	6.2
11– 15 years	5	15.7
More than 15 years	6	18.8
(If left) Duration since left Relationship		
Less than 3 months	9	28.2
3 -12 months	9	28.2
13 - 36 months (3 years)	3	9.3
37 – 78 months (6.5 years)	3	9.3
84 months – 120 months (7 -10 years)	3	9.4
148 + months (More than 15 years)	2	6.2
Living Arrangements		
Living in a refuge	16	51.6
Living with Abusive Partner	1	3.2
Living Independently	12	38.7
Living with New Partner	1	3.2
Living with New Faither	· · · · · · · · · · · · · · · · · · ·	3.2
Number of Previous Separations		
None None	7	22.6
Once	9	29.0
Twice	4	12.9
3-5	4	12.9
More than 5*	7	22.6
No. of Previous Abusive Intimate Relationships		
None	19	61.3
One	12	38.7
One	12	30.7
Exposure to Parental Abuse in Childhood		
Never Witnessed or Experienced	12	38.7
Witnessed parental abuse	5	16.1
Target of parental abuse	3	9.7
Both Witness & Target of Parental Abuse	11	35.5

Note * When participants answered 'many times' or 'on and off' to this question this was interpreted as more than the highest individual specified value of 5.

In tables 1 and 2 where frequencies do not add up to 31 and percentages 100, missing values account for the remainder, i.e. participants non-response. In the case of the 'duration since left variable' 2 cases that were still in the relationship were not applicable and thus assigned missing values. One participant although considering herself to still be in the relationship had left temporarily thus was included in this frequency.

Recruitment

28 domestic violence support agencies in the Lancashire and Manchester area were identified through the National Women's Aid website

(http://www.womensaid.org.uk) or recommended by researchers in the area, as potential participating organisations. Eight of these agencies participated in the study (see Appendix 2) with reasons for non-participation including prior commitment to other research, inappropriate timing (e.g. restructuring) or in over half of the cases uncertainty expressed by staff that the women would be able to cope psychologically with engagement in such research.

Each agency was first contacted via telephone to explore potential interest in research participation, following which, a study information sheet (see Appendix 3) introductory letter (see Appendix 4) was sent to explain the project in more detail. Follow up telephone calls were made and meetings were subsequently arranged with interested managers to discuss involvement in the study, including their preferred method of recruitment and data collection and answer any questions they may have. In over half the cases it was decided a talk from the researcher at a refuges house meeting would be the most appropriate way to recruit the women. In such cases house meetings were attended and a brief talk about the study was given along with information sheets about participation

(see Appendix 6). Alternatively where staff felt that recruiting women themselves would be more successful (in particular if contact was being made with past residents), dates were arranged for data collection upon notification that women were available. In one particular organisation, which provided drop in services for women only, two 'recruitment' days where lunch was provided were arranged, where a number of women that used to attend, or currently attended programs at the service were invited to take part in the research.

Materials

Questionnaires

All scales used have been shown to have good levels of internal reliability in clinical and non-clinical populations ranging from .74 - .90. These published reliability scores are shown in Tables 4 and 5 along with the reliability scores for this study's sample.

A Personal Relationships Questionnaire

A personal relationships questionnaire was compiled to measure patterns, severity, and frequency of trauma experienced in the participants current or most recent relationship along with demographic information and percieved social support (see Appendix 7). It consisted of the following 3 sub-scales;

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-Demographic Information

Demographic variables included age, race, gender, number of children aged under 18, education, employment status and annual income. Both education and income were reported using ordinal scales, where participants were asked to describe their education level choosing from 7 statements and their annual houshold/family income (including benefits) from 10. Employment was reported using a nominal scale of 10 categories.

-Revised Conflict Tactics Scales (CTS-2, Straus, Hamb, Boney-McCoy & Sugarman, 1996)

The CTS-2 is the most frequently used scale in studies of family violence (Dwyer, 1999). A 78 item measure it assesses both victimization (v) and perpetration (p) of abuse within intimate partner relationships to resolve conflict. Items comprise 5 sub scales; physical assault (12 items), psychological aggression (8 items), sexual coercion (7 items), negotiation (6 items) and injury (6 items). All except the negotiation scale can distinguish between minor and severe acts. The negotiation scale distinguishes instead between cognitive and emotional aspects of negotiation. Participants are asked to indicate the extent to which they were the victim and perpetrator of each behaviour in the last year on a scale of 0 -7, where 0 = this has never happened to 6 = more than 20 times in the past year. If a behaviour had happened before but not in the past year, participants are asked to circle 7.

As the CTS-2 is scored by adding the mid points for the response categories, i.e. an item score of 4 which indicates 6-10 times in the past year, would be scored as 8 (Straus et al, 1996) the scale was recoded to use these mid point values. Categories 0, 1 & 2 were not changed as their midpoints are the same as their category numbers and following author's recommendations, the midpoint 25 was used for category 6 and Category 7 was scored as 0. For all variables the prevalence as well as the chronicity of acts was calculated (Straus, 1996). The prevalence variable employed a 0 – 1 dichotomy, where a score of 1 meant that one or more acts within the scale had occurred. Chronicity scores were calculated as the sum of scores greater than zero across items within subscales. Overall victimization and perpetration scores were also calculated as the sum of subscale scores.

-Profile of Psychological Abuse (Sackett & Saunders, 1999)

This 21 item self report measure was added to the survey instrument to allow a more comprehensive differentiation between the psychological abuse participants may have experienced. The questionnaire contains four subscales, Jealousy/Control, Ignorance, Ridiculing of Traits and Criticizing Behaviour with evidence of convergent and criterion validity (Sackett & Saunders, 1999).

Participants are asked to indicate how often they experience or did experience each behaviour from their partner, on a 7 point scale, ranging from 0 = Never to 7 = Daily. Items were summed for subscale scores and an overall score. Higher scores indicate a higher frequency of psychological abuse.

-Medical Outcomes Study Social Support Survey (MOS-SSS; Sherbourne & Stewart, 1991)

This 20 item questionnaire used to assess participant's perceived social support was originally developed for patients in the Medical Outcomes study, a 2 year study of patients with chronic conditions. The questionnaire consists of 19 functional support items, 18 of which represent four dimensions of social support (tangible support, affectionate support, positive social interaction, emotional / informational support). It also includes a single item structural support measure which asks participants to identify their number of close friends and relatives. For each functional support item participants are asked to indicate how often each support was available to them if needed, on a five point scale, ranging from 1= None of the time to 5 = All of the time. Scores were averaged across each item for individual subscale scores and summed with the additional functional support item (not included in the subscales) for an overall functional support index score. In each case higher scores indicated higher percieved support. This scales construct validity has been supported in a clinical population (Sherbourne & Stewart, 1991)

A Health and Lifestyle Questionnaire

A health and lifestyle questionnaire was compiled to assess aspects of participant's health, focusing in particular on their emotional well being (see Appendix 8). It consisted of the three following sub-scales;

The DASS-21 is a shortened version of Lovibond and Lovibonds (1995) 42 item measure of anxiety (DASS-A), depression (DASS-D), and stress (DASS-S), (McDowell, 2006) Used in both clinical and non-clinical populations, the DASS aims to provide a broad measure of psychological distress measuring the severity and frequency of core symptoms over the previous week. In the 21 item measure, 7 items measure each of the three main themes, with subthemes in each, for example feelings of dysphoria, hoplessness, anhedonia within the depression scale. Participants are asked to rate the presence of each symptom on a 3 point scale ranging from 0 = Did not apply to me at all to 3 = Applied to me very much, or most of the time. Separate anxiety, depresssion and stress scores are formed by summing the items in each scale. Each of the scales show convergent and discriminant validity, comparable with more well-known and clinically used scales such as the Beck anxiety and depression (McDowell, 2006).

-The Centre for Disease Control and Prevention Health Related Quality-of-Life

Measure (CDC HRQOL-14)

The CDC HRQOL-14 consists of a 4-item Healthy Days Core Module, a 5-item Healthy Days Symptoms Module and a 5-item Activity Limitation Module. The Healthy Days core module includes one item that assesses the participants perceived general health ranging from excellent to poor, two items that assess the number of days within the past 30 of impaired physical or mental health, and one item the number of days of limited activity due to this impaired health. The

Healthy Days symptoms module asks the number of days in the past 30 that symptoms of pain, anxiety, depression, sleeplessnes and energy have been experienced and the Activity Limitations module also assesses limitations in activity due to impairment or health problem. With the exception of the energy item which has the reverse scoring, higher scores in on all items indicate poorer health. The Healthy Days core module has shown to be a valid measure amongst adults and adolescents, in clinical and non clinical populations (Mielenz, Jackson, Currey, DeVellis & Callahan, 2006, Zullig, Valois, Huebner & Drane, 2004).

-The Rosenberg Self-Esteem Scale (RSE, Rosenberg, 1965)

The RSE was chosen as a brief and global measure of self-esteem. It consists of 10 items that measure self worth and self acceptance, on a 4 point scale of 1 = strongly agree to 4 = strongly disagree. Items were scored using a coding of 3 = strongly agree to 0 = strongly disagree with the reverse coding on negatively worded items. Higher scores indicate higher self esteem. Developed for use in a general adolescent population, the scale has shown good construct and convergent validity across different sample groups (Kaplan & Pokorny, 1969, Robins, Hendin & Trzesniewski, 2001).

Decision Making - Model Components

Two versions of a relationship decisions questionnaire were used to assess the components of the Theory of Planned Behaviour, noting a weakness identified in Ballantine's (2005) study; that a separate instrument was not used

for women 'remaining out of the relationship'. This was also the case in Bryne and Arias' (2004) study. Having a questionnaire that is structured in terms of planning to leave a relationship is likely to be confusing to participants if they have already left their partners which may affect accuracy of responses (Ballantine, 2005).

The development of both questionnaires was based upon elements from both Byrne and Arias's (2004) and Ballantine's (2005) instruments constructed specifically to test the application of this theory to abused women's decision making processess, in line with the guidelines set by Ajzen & Fishbein (1980). The first questionnaire was designed for participants who had left an abusive relationship (RDQ1 - see Appendix 9), and asked them to think and answer each component concerning the decision to leave retrospectively (focusing on the last 12 months of the relationship) for example, 'over the last year we were together most people who are important to me thought I should leave my partner'. Each component also assessed decision making in relation to returning but did not specify a time frame. The second questionnaire was designed for participants that were currently in an abusive relationship (RDQ2 see Appendix 10) and assessed womens decisions to remain in or terminate their current relationship in accordance with the theory. This version used a prospective time frame, e.g. 'most people who are important to me think I should leave my partner in the next year'. Using time specific measures is consistent with the guidelines proposed by Ajzen and Fishbein (1980). Furthermore time-specific measures of decision components have been shown to be better predictors of intentions and behaviour (Ballantine, 2005).

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Both questionnaires assessed the main components of the theory, Attitude towards behaviour (A), Subjective Norm (SN) and Perceived Behavioural Control (PBC), as well as Behavioural Intention (I) on a series of 7 point scales using both direct and indirect measures. Direct measures ask participants about their overall perceptions or feelings related to each predictor, for example overall attitude towards leaving. Indirect measures assess specific behavioural beliefs and evaluations that may contribute to each component, for example, perception of loneliness that could predict a womans attitude towards leaving.

-Attitudes towards the behaviour (A)

The direct measure of attitude asked participants to rate leaving their partners on two 7 point scales, ranging from 1 (extremely good) to 7 (extremely bad), and 1 (extremely rewarding) to 7 (extremely punishing) which were then summed. Possible scores ranged from 2 – 14 which were then reversed so higher scores indicated a more positive attitude towards leaving. The same items were used to assess attitudes towards returning to their partner in the RDQ1, again reverse scored to ensure that higher scores indicated a more positive attitude towards returning.

-Belief-based Attitude (BA)

Belief-based attitude was a product of two scales. The first, Behavioural Beliefs, presented participants with 20 possible outcomes of leaving an abusive relationship (8 positive and 12 negative) and measured the extent to which they believed each outcome would occur on a 7 point scale ranging from 1

(extremely likely) to 7 (extremely unlikely). 16 of these outcomes were derived from a 22 item inventory compiled by Byrne and Arias (2004), on the basis of existing qualitative and quantitative data from the literature on why women leave abusive relationships. Items were reviewed for their appropriateness in this study's sample and items were removed that had an american bias, for example 'I will no longer have medical insurance and/or medical care', or were felt to be confusing or not relevant to them by initial participants, for example 'you will have to give up some of the activities you enjoy'. An item 'If I leave my partner in the next year, I will have to experience the hassles and inconveniences involved in getting a separation/divorce' was also amended to refer to 'splitting up', making it more general. On review of the literature it was also felt that other important outcomes were not assessed in the inventory by Byrne and Arias (2004), thus 4 negative items were added (see items 59, 60, 61 & 62, in RDQ1 & 38, 39, 40 & 41 in RDQ2). These items address what the literature has shown to be important and consistent beliefs of leaving an abusive relationship, covering psychological and environmental dimensions that are regarded as key factors in the abused women's decision making process (Ballantine, 2005), and that from attending conferences on domestic violence and consulting with victims, were seen as pertinent and should be included. These dimensions are emotional attachment, lack of alternatives, ability to improve the relationship and status loss.

To measure behavioural beliefs towards returning to their abusive relationship, participants completing the RDQ1 were also presented with the same 20 outcomes, but where an outcome was positive beforehand to reflect leaving, e.g. 'there would be less daily stress in your life', they were made negative to

reflect returning, e.g. there would be more daily stress in your life'. Conversely, where outcomes were negative beforehand to reflect leaving, e.g you would have nowhere else to go', these were made positive to reflect returning, e.g. 'you will no longer feel as though you have nowhere to go'. Participants were subsequently asked to evaluate each of the 20 outcomes of leaving/returning to their relationship, in terms of how positive or negative each would be for them, on a 7 point scale ranging from 1 (extremely bad) to 7 (extremely good).

Prior to scoring, both the behavioural belief and outcome evaluation scales were recoded to ensure a more logical and easier interpretation of scores (Francis et al, 2004). The behavioural belief scales were reverse coded, so higher scores indicated greater likelihood of leaving / returning and the outcome evaluative scales were made bipolar (-3 to +3). Such scoring for attitudes and other evaluative predictor variables is acknowledged as being controversial but is recommended for a number of reasons, in sum to make clear whether the final scores represented an influence against performing the behaviours (Francis et al, 2004).

Each behavioural belief was then multiplied by its corresponding evaluation score with all resulting products summed to create a total attitude score. For example if a and b were behavioural beliefs and e and f outcome evaluations relating to each behaviour;

$$BA = (a \times e) + (b \times f) \dots etc$$

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As there were 20 beliefs, possible total scores ranged from -420 to 420. Positive scores indicated more favourable attitudes to leaving and returning and conversely negative unfavourable.

-Subjective Norm (SN)

Similarily to attitudes, both a direct and indirect belief based measure was used to assess participants subjective norms. Following Ajzen's recommendation that a number of questions should be used to obtain a direct measure of this component (Ajzen, 2006) this study used 3 items. The first asked participants to rate the extent to which they agreed that most important people to them thought they should leave their partner in the next year (Byrne & Arias, 2004) (would have agreed / over the last year for the RDQ1). The second item rated their agreement to which the people in their lives whose 'opinions they value the most' would approve of them leaving their partner (Ballantine, 2005) (would have approved / over the last year for the RDQ1). Both were measured on a scale of 1 (strongly agree) to 7 (strongly disagree). To address Ajzen's (2006) concern that responses to such items in this format may have low variability because important others are often percieved to support desirable behaviours and condemn undesirable behaviours, descriptive norms, i.e. the extent to which important others would perform the relevant behaviour was also measured with the addition of an item 'The people in my life whose opinions I value the most would leave their partner if they were in an abusive relationship'. Participants were asked to agree on a scale of 1 (strongly agree) to 7 (strongly disagree). Item scores were reversed so that higher scores indicated a stronger subjective norm towards leaving and a mean subjective norm score was

calculated. The same items were used to assess subjective norms towards returning to a partner in the RDQ1, again reverse scored to ensure that higher scores indicated a stronger subjective norm towards returning and a mean calculated.

-Belief-based Subjective Norm (BSN)

Belief- based subjective norm was a product of two scales, one assessing normative beliefs and the other the motivation to comply. The former presented participants with eight specific people/persons, for example, mother, friends, children and co-workers, and asked them to rate the likelihood of each thinking they should leave their partner in the next year (did think over the last year for participants answering retrospectively) on a 7 point scale ranging from 1 (extremely likely) to 7 (extremely unlikely) (Byrne & Arias, 2004). Participants were then asked to rate the extent to which they want (wanted) to comply with each referent on the same rating scale. The same items were used to assess attitudes towards returning to their partner in the RDQ1, but with returning as the target behaviour and no time frame.

Similarily to belief based attitude, prior to scoring, both the normative belief and motivation to comply scales were recoded. The former was made bipolar (+3 to -3) to make it clearer whether a higher score indicated a greater pressure / influence to perform the behaviour, and the latter was reverse coded so that higher scores indicated a greater motivation to comply with each source of pressure. Each normative belief was then multiplied by its corresponding motivation to comply score, with all resulting products summed to create a total

subjective norm score. As there were 8 items, possible total scores ranged from -168 to 168. Positive scores indicated a stronger subjective norm towards leaving and for the RDQ1 participants returning and conversely negative scores a stronger subjective norm to stay and where relevant, not return.

-Percieved Behavioural Control (PBC)

Percieved Behavioural Control was measured through a series of statements asssessing both participants general evaluation of their ability to leave their relationship (a direct measure), and more specific, individual barriers seen as relevant in such a decision (an indirect, belief based meaure). Two items assessed womens general evaluation (Byrne & Arias, 2004). Consistent with Ajzens guidelines (2006) that such a measure should assess both confidence in capability to perform the behaviour and controllability about the behaviour, the item 'If you try to leave your partner and end the relationship in the next year, how likely is it that you will be successful?' measured the former on a scale of 1 - 7, ranging from extremely likely to extremely unlikely, and 'the item 'How much control do you have over whether or not you leave your partner and end the relationship?' measured the latter on a scale of 1-7 ranging from no control to complete control. These were asked in retrospective formats for participants no longer in the relationship. The same items were used to assess perceived control over returning to ones partner, simply changing returning as the target behaviour.

Scores on the item assessing capability were reversed so higher scores indicated higher perceived behavioural control over leaving / returning to

partners. Means were calculated across both items to give an overall percieved behavioural control score with possible scores ranging from 1–7.

-Belief Based Perceived Behavioural Control

Consistent with the research by Ballantine (2005), it was deemed important that behavioural control should also be divided into and subsequently assessed in two dimensions, internal and external control, following a review of the literature that both internal (personal skills) and external (environmental) belief barriers were pertinent to abused women's decisions to leave (Ballantine, 2005).

Although as reported by Ballantine, research has shown that a general evaluation of perceived behavioural control is equivalently accurate to an assessment of individual factors, investigating the relative contribution of such factors in this dimension was considered to be important to an understanding of this component in the women's decision making process.

In total 10 'barriers' or control beliefs (Ajzen, 1987) were measured (4 internal and 6 external), each using two types of questions. The first aimed to assess the strength of the control beliefs, that is the importance placed on particular skills or resources that may make it more difficult to leave the relationship, for example, 'I will have to be able to manage on my own' on a 7 point scale ranging from strongly agree to strongly disagree. The second, aimed to assess the power of the beliefs to influence leaving the relationship, by measuring the participants evaluation of their ability to perform each skill or acesss each resource, for example 'In general I can pretty easily manage things on my own' on the same scale.

Like the other belief scales in the questionnaire, both the control belief strength and power scales were recoded prior to scoring. The former was reversed so that higher scores indicated a perceived greater importance of skills/resources that may impede leaving the relationship, and the latter was made bipolar (+3 to -3) so that higher scores indicated a perceived greater ability to perfom the skill or access the resource thus a greater likelihood to leave the relationship. Each control belief was then multiplied by its corresponding evaluation score with all resulting products summed to create a total percieved behavioural control score. In addition scores were calculated for internal and external dimensions. As there were 10 items, possible total scores ranged from -210 to +210. Internal scores ranged from -84 to +84 and external -126 to +126. Positive scores indicated a feeling of control towards leaving and conversely negative scores a feeling of uncontrollability. No belief based measure of perceived behavioural control was used to assess the concept of returning. Using a direct measure only was felt to be sufficient.

-Behavioural Intention (I)

Participants intention to leave their relationship was assessed through the single item 'how likely is it that you itend to leave your partner and end the relationship within the next year' on a scale of 1 – 7, ranging from extremely likely to extremely unlikely. This was asked in a retrospective format for participants no longer in the relationship, 'thinking back to your intentions before you made the decision to leave your partner, how likely was it that you intended to leave the relationship within the next year', using the same scale. Intentions to return to ones partner was also assessed on the same scale, but with

returning as the behaviour and 'at some point' as the given time frame.

Responses were reverse scored so higher score indicated stronger intentions to leave / return.

Semi-Structured Interview

The Semi-structured interview aimed to investigate the participant's abusive relationship history and decision making processes. In particular factors and consequences associated with the decision to stay or leave were discussed. Topics addressed included:

Part 1 - Relationship History & Experiences

- Length of abusive relationship (including length of time since leaving where relevant)
- Living Status (including length of time spent in refuge where relevant)
- Description of relationship
- Breaks in the relationship
- History of previous abusive relationships
- Parents Relationship

Part 2 - Decision Making

- Current decision to leave or stay
- Factors considered (including their importance)
- Beliefs about the consequences of leaving / staying / returning
 (Behavioural Beliefs)
- Intentions to return or leave

Investigating the same topic areas and using the same format, two individual interview schedules were designed and used according to participants relationship status, i.e whether they were currently in or had left the relationship (see appendices 11 & 12 for interview schedules). Questions were adapted accordingly. In each case, although a specific schedule was established the interviewer could ask additional questions and adapt questions as appropriate to the participants responses. A digital recorder was used to record each interview with the participants permission. On the occasions that interviews were conducted over the telephone, a telephone recorder was used.

Study Hardware and Software

A Toshiba T8000 laptop with a screen resolution of 800 x 600 was used to present stimuli and record reponses in the attentional probe task. E-Prime Version 1.1 was used to create the task. A Marantz Professional PMD660 recorder was used in the face to face interviews and a PhonaPart 2 way telephone conversation recorder for telephone interviews.

Experimental Task

The Attentional Probe Task

A computerized attentional probe task (MacLeod, Matthews & Tata, 1986) was presented using E-PRIME to measure attentional bias to threatening information, responses to which have been shown to be associated with clinical

anxiety and anxiety vulnerability (MacLeod, Soong, Rutherford & Campbell, 2007). The task began with a display of instructions which were simultaneously read aloud by the experimenter (see Appendix 13). After a set of practice trials, the main task then began with the appearance of 3 adjascent crosses in the centre of the screen (serving as a fixation point) for 500 ms, followed by pairs of stimulus words (32 threat and 32 neutral) randomly presented 10 mm adjacent to each other for 1.5 seconds. These word pairs consisted of an emotionally negative and an emotionally neutral word. After the words disappeared, arrows were randomly presented, with equal frequency within the threat or neutral word location, pointing again with equal frequency either left or right. Participants were instructed to respond to each arrow presentation by hitting 'z' if the arrow was pointing left and 'm' if the arrow was pointing right. Response latency was recorded. Quicker discrimination of arrows presented at the threat words location would suggest an attentional bias towards threatening stimuli, a common finding in clinically anxious, or vulnerably anxious participants (MacLeod et al, 2007).

The final set of 32 threat words were chosen from an initial pool of 119, differing in emotional valence and compiled under 8 subscales, 7 of which have been associated with concerns in deciding to stay or leave (Hendy et al, 2003). Such subscales, for example, fear of loneliness and poor social support were used as headings to which relevant words were identified, for example, 'isolation' under fear of loneliness. The subscale fear of harm was divided into psychological and physical harm as each are distinct subtypes and would yield different associated words. Words with a strong valence towards threat were chosen by a panel; 2 pertaining to fear of loneliness, 2 financial problems, 4 social

embarassment, 5 social support, 10 fear of psychological harm and 9 physical harm (see Appendix 14). No threat words were identified under 'hopes things change'. Threat words were paired with 32 words emotionally neutral in content (see Appendix 15), chosen by the same panel. In both cases all attempts were made to exclude words of infrequent usage, and match words in each pairing for letter length.

Procedure

Administering the Questionnaires

Two procedures were used to collect the questionnaire data, depending on the preference of staff at the supporting organisations and the women participating. In some cases (especially where women had children), it was preferential that the questionnaires were issued a few days before the experimental task and interview so they could be completed at a suitable pace and returned either directly to the researcher upon the next meeting or given to staff until this time to be kept confidentially. If this was decided, questionnaire packs were issued in that instance or posted to the organisation's manager to administer accordingly. In other cases where participants felt they may need help completing the questionnaires, in terms of reading and where applicable writing, a suitable day was agreed with both the participant and staff for the researcher to collect all the data simultaneously. In all cases, participants were given an envelope, consisting of the 3 questionnaires, another copy of the introduction to the study, and a debriefing form (see Appendix 16 for questionnaire debrief). Each envelope and corresponding questionnaires had a unique pin code written on

them to allow all sources of data to be linked for each participant anonymously. Each envelope also had the pin number on a detachable slip so where preferable, completed envelopes could be handed to staff and participants could bring their pin numbers to the experimental task / interview. For those participants that needed help, the researcher and where available staff read questions and wrote/marked responses if necessary.

Semi-Structured Interviews

Typically, appointments for interviews were made directly between the researcher and the participant at refuge house meetings following the recruitment talk. In other instances where recruitment talks were not given by the researcher, a suitable day was agreed between potential participants and staff and this was relayed to the researcher. In all cases, it was agreed that the interviews would be conducted at the refuges or supporting organisations, in a private room, for reasons of safety and proximity to the participants. All interviews were carried out by the researcher. Participants were read an introduction (see Appendix 17 for interview introduction) and given a consent form to review and sign, which included permission for the interview to be audio-taped (see Appendix 18 for interview consent form). Notes were taken throughout the interview on the interview schedule. At the end of the interview, participants were debriefed (see Appendix 19 for interview debrief) and given a chance to answer to ask questions. Interviews were made into audio files and transcribed within 48 hours by the researcher. Original recordings on the recorder were subsequently deleted.

On two occasions participant's time constraints necessitated that the interview was conducted by telephone with the participants in a place that would ensure privacy. Verbal consent was recorded at the same point prior to the interview as written consent would have been obtained, and then the interviews were recorded directly from the telephone as it would have been face to face.

Attentional Probe Task

Participants completed the task following their interview. A short practice session was given that consisted of 6 trials, using only neutral words that were not presented in the experimental trials. Practice was completed if participants got 4 correct responses. Otherwise participants were given the instructions again and further practice trials until they achieved at least 4 correct responses.

CHAPTER 3 - DATA SCREENING

Subsequent to variable recoding and computation of subscales and total scores, a data screening process was conducted to identify any data errors, missing values and explore the normality of the distribution. No data entry errors were found.

Missing Data

A Missing Values Analysis (without selecting an imputation method) was initially conducted on all questionnaire data including that at the item level and subscale / total scores to identify the percentage of and any patterns of missing data. It should be noted that this excluded 4 participants who had not completed any or only partially completed the questionnaire measurement (sometimes referred to as 'attrition' or 'wave non-response', Graham, Cumsille, Elek-Fisk, 2003). These were excluded as they had substantial portions of missing data that could not be dealt with by imputation, leaving 27 cases in the analysis.

Adopting Tabachnick & Fidell's (2001) general guideline that variables containing more than 5% of missing cases could be potentially problematic and should be further investigated, analyses revealed 6 scales that had items over this threshold (CTS-2, Relationship Decisions, HRQOL, DASS-21, MOSS-SSS, PPA). Upon further investigation it became apparent that the proportion of missing data for 2 of these scales (HRQOL and Relationship Decisions) was largely attributable to two particular aspects of their coding; participants explicit non applicable responses (N/A, prevalent in the relationships decisions

questionnaire) which did not fit into either the quantitative response schema or represent the absence of response as coded by a missing data code, and the 'don't know/not sure' responses in the HRQOL questionnaire which also did not fit into the quantitative schema.

As the remaining scales did not have N/A or don't know response options, all missing data was due to participants not completing those items (item non-response). For the CTS this constituted 6 items displaying a range of 7.4 - 11.4% of missing data. The PPA and DASS-21 both had 7.4% of missing data (1 item each, 2 cases) and the MOS-SSS had 7.4% missing (1 item, 2 cases).

The pattern of this item non response data was inspected using independent sample t-tests where such variables of interest were 'dummy' coded and tested against a number of dependent variables. Despite the 5% threshold set by Tabachnik and Fidell (2001), variables only containing 7.4% of missing data as a general rule were not inspected. Although this percentage is higher than the threshold, the relative frequency of the cases that this figure applies too in this sample size (2 cases) is small enough to ignore (Meyers, Gamst & Guarino, 2005). The results of the t-tests are shown in Table 3.

Table 3 Independent sample t-tests for patterns of non-response data

Dummy Coded Item	Variables sig. < .05	Direction
CTS 3	No. of previous abusive intimate relationships DASS Stress Reaction Time Change	Non-respondents less previous abusive relationships, less stress, greater change in response time between threat & neutral probes
CTS 4	Overall Self-Esteem	Non-respondents lower self esteem
CTS 16	No. of previous abusive intimate relationships	Non-respondents less previous abusive relationships

The small size of the sample and the relative frequencies of the missing values makes interpretation of the missing patterns shown in Table 3 difficult. A bigger sample size would most likely impact on the significance levels found. Perhaps the most important function of identifying the patterns in this instance however is to identify the type of missing data in this study's sample. With reference to Graham et al (2003) 'where the cause of missingness is correlated with the variable (s) containing missing data, but variables representing this cause have been measured and are thus available for inclusion in the missing data model', this is referred to as 'missing at random (MAR) data where all biases to which they may be associated are corrected by their inclusion in the model and subsequently the missingness is 'random'. This was supported by Little's MCAR test on the MVA (Chi-Square = 572.000, DF = 4496, Sig. = 1.000).

The 'random' distribution of the data meant that a statistical procedure could be used to estimate the missing cases. Due to the small sample size of the study, it was felt that this was the most appropriate option. Leaving missing values in

would risk significant attrition of cases from analyses (SPSS excludes cases with missing items from analyses such as regression) as would using other methods such as listwise deletion.

Prior to imputation however N/A responses both in the Relationships Decision and HRQOL scales and 'don't know/not sure' responses in the QOL scale were addressed. Within both scales N/A's could not be simply replaced with statistical procedures as they were not in fact 'missing'. Participants had either indicated a response where they felt they could not fit into the quantitative schema (as in the relationship decisions scale) or followed instructions to omit items where a previous item was answered as 'no' (as in the format of the HRQOL scale). In both cases such values needed to be preserved for analysis.

For the relationship decisions scale it was decided that the most appropriate way of dealing with these values was to use only it's computed subscale scores in the imputation process. A missing data routine would interpret the individual item's N/A codes as missing and impute scores for them, thus distorting the meaning of participants' responses. Where subscale scores had N/A values (for example attitudes to returning for participants still in the relationship), these were noted for reinsertion following imputation. As the HRQOL has no subscales, N/A values were assigned the value of '0' prior to imputation, and reinstated as N/A subsequently. For the item 'Impact of poor physical and mental health', as 0 makes sense in the context of the question (i.e. if participants answer 'none' to the previous items quantifying their poor physical and mental health, it is implicit that days affected will be 0), these values were

not replaced after imputation. The 'Don't know/not sure' value was defined as missing and these were left for estimation by the imputation procedure.

The Estimation Maximisation (EM) method was chosen to replace the data, following it's expressed utility with small amounts of missing cases (Allison, 2002, Tabachnik & Fidell, 2001). Using maximum likelihood and regression procedures EM uses all available variables as predictors for replacements avoiding one of the common problems with regression imputations of deciding which predictors to choose (Allison, 2002). All subscale and total scores (except the relationship decisions as explained above) originally computed were taken out before it was ran and computed afterwards using the new data set's values.

Outliers

Following the missing values procedure, data was screened for both univariate and multivariate outliers. As analysis was to be performed in part on ungrouped data, this was carried out for the sample as a whole (Tabachnik & Fidell, 2001)

Univariate outliers amongst continuous variables (including subscale/total scores) were initially detected using box plots. In total 55 of these were identified across 24 variables leaving 46 variables with no outliers (66%). The number of outliers across the variables ranged from 1 to 6 with seven variables containing 3 or more.

Z scores were then computed for each of the affected variables to examine the extremity of these outlier scores. The recommended threshold for what is

actually considered an outlier using these standardized values differs in the literature, however in this case z scores exceeding 3.29 (P < .001) (Tabachnick & Fidell, 2001) were treated as extreme outliers. Six of these were detected; 4 in the CTS victim (v) and perpetration (p) subscales (sexual coercion (p) had 2, Negotiation (v) and Injury (v) each had 1), 1 in the QOL Impact of Pain variable and 1 in the Total Belief Based Attitude towards leaving variable.

Before deciding whether and how to deal with all outliers data was screened for multivariate outliers by computing each case's Mahalanobis distance with p < .001 as the alpha level (Tabachnik & Fidell, 2001). This revealed no multivariate outliers. Thus it was decided that all outliers (including the extreme) were to be left in the analysis. Although 'unusual' for the population after inspection all were considered to be a legitimate part of the intended sample where constraining answers would not represent the true population.

Normality

To assess the normality of the data's distribution, Z scores were also calculated for skewness and kurtosis. As with extreme outliers, a value of 3.29 was set as the criterion, where any differences shown are significant at p < .001 (Field, 2005). Ten variables had a skewness value above this amount and 7 of these a kurtosis value. These variables are those discussed as having extreme outliers in the previous section, as well as subjective norm towards returning (direct), attitude towards returning (direct), physical assault (perpetration), QOL physical health and QOL sleep. Each of these variables was examined for the nature of non-normality.

All of the CTS variables included in this were positively skewed. This may reflect the experiences of the sample, where for variables such as sexual and physical assault perpetration, injury and partners attempts at negotiation, relatively low scores would be expected, with occasional extreme scores.

The patterns in the remaining variables might also be expected based on their nature. Physical health was positively skewed due to predominantly good physical health in this non-clinical sample whose mean age was less than 40. Belief based attitude towards leaving was negatively skewed, reflecting a generally favourable attitude towards leaving. In all cases therefore no transformations were made. As per the rationale to leave outliers in the data, the data was considered to reflect the sample.

CHAPTER 4 – RESULTS

Preliminary Analyses

Descriptive Statistics and Reliability

Descriptive Statistics and internal reliability scores for all scales except those comprising the Relationship Decisions questionnaire are given in Table 4. This information for the latter is given in Table 5. Internal reliabilities and descriptive statistics obtained in other studies are also reported for each scale to enable comparisons against other populations.

Means, standard deviations and reliabilities relate to the 27 cases (out of the full 31) used in the imputation process. As the remaining 4 cases did not complete any (3 out of these 4) or only partially completed the questionnaires they will be used in the interview and attentional probe analyses only. Internal Consistency (using Cronbach's Alpha) was assessed as a measure of reliability, where values between .7 - .8 are generally seen as acceptable (Field, 2005).

For the Relationship Decisions questionnaire internal consistency is considered an inappropriate reliability indicator for indirect (belief based) measures as it is possible for people to hold both positive and negative beliefs regarding a behaviour (Francis et al, 2004). Although test-retest reliability is recommended in such cases, this was not evaluated in this study due to issues such as anonyminity, time constraints and worries that repeating the questionnaires would be too burdensome for participants. Thus reliability co-efficients are given for the direct measures only.

Table 4: Means, Standard Deviations & Reliability for the CTS-2, PPA, MOS-SSS, DASS-21, HRQOL-14, RSE

Measure and Subscales			Present Sample			Comparable Studies		
	Prevalence %	Mean (SD)	Reliability (a)	Mean after item/s deleted (SD)	Reliability (a) after item/s deleted	Mean (SD)	Reliability (a)	
CTS-2						Najavits, Sonn, W (2004) NC, Straus	/alsh & Weiss s et al (1996) ^N NC	
Negotiation (V)	88.9	24.93 (21.66)	.57	21.96 (20.84)	.67	58. 69(38.22)** 67.1 (39.7)	Not Given	
						Bryne & Ar Straus et	Bryne & Arias (2004) ^D Straus et al (1996) ^N	
Injury (V)	29.6	1.85 (5.20)	.08	0.93 (1.94)	.54	35 (31) ** 6.2 (11.6)	.79	
Sexual Coercion (V)	70.4	15.62 (19.92)	.51	12.26 (18.48)	.66	46 (44) ** 11.8 (14.4)	.80	
Physical Assault (V)	93.6	76.68 (74.48)	.92	<u>-</u>	-	99 (81) 9.3 (18.0)	.93	
Psych Aggression (V)	93.6	80.04 (46.31)	.81	-	-	105 (50) * 15.1 (18.5)	.81	
Overall Victimisation		199.12 (132.35)	.91	191.86 (125.93)	.91	Not Available	Not Available	
						Najavits et al (2004) ^N C, Straus al (1996) ^N NC		
Negotiation (P)	96.3	67.09 (7.86)	.77	•	-	66.08 (42.04) 69.7 (38.8)	.86	
Injury (P)	88.9	15.08 (15.94)	.35	10.00 (11.89)	.42	8.82 (17.18) * 3.6 (6.8)	.95	

Measure and Subscales		,	Comparable Studies				
	Prevalence %	Mean (SD)	Reliability (a)	Mean after item/s deleted (SD)	Reliability after item/s deleted (a)	Mean (SD)	Reliability (a)
CTS-2							
Sexual Coercion (P)	18.5	0.45 (1.37)	.36	0.37 (1.34)	.47	16.60 (19.50)** 12.6 (15.8)	.87
Physical Assault (P)	55.6	11.83 (22.96)	.78	-	-	17.81 (31.36) 9.4 (15.4)	.86
Psych Aggression (P)	96.3	37.20 (27.69)	.63	-	-	38.84 (29.51) 16 (18.8)	.79
Overall Perpetration		131.65 (74.44)	.79	126.50 (73.36)	.80	Not Available	Not Available

	Mean (SD)	Reliability (a)	Mean after item/s deleted (SD)	Reliability after item/s deleted (a)			
PPA					Sackett & Saunders (1999) ^D - Sheltered, Non-sheltered		
Ridicule Traits	25.43 (7.49)	.78	-	_	24.6 (7.1), 20.4 (8.1)	.79	
Criticize Behaviour	13.15 (5.80)	.68	8.49	.72	9.8 (6.1) 9.8 (5.7)	.75	
Ignore	24.49 (6.67)	.63	-	•	22.5 (9.2) 23.3 (8.5)	.80	
Jealous Control	44.75 (15.23)	.88	_	-	40.7 (11.1) 31.7 (12.4)	.85	
PPA Overall	102.56 (30.09)	.93	97.91 (28.68)	.93	115.5 (16.8) * 117.6 (16.8)	Not Given	

Measure and Subscales		Present	Sample		Comparable Studies		
	Mean (SD)	Reliability (a)	Mean after item/s deleted (SD)	Reliability (α) after item/s deleted	Mean (SD)	Reliability (α)	
MOS-SSS					Sherbourne & St	ewart (1991) ^N	
Positive Social Interaction	3.09 (1.37)	.92	-		3.49 (1.3)	.94	
Tangible	2.80 (1.31)	.91	-	<u>-</u>	3.49 (1.43) *	.92	
Emotional	3.46 (1.05)	.93	•		3.48 (1.28)	.96	
Affectionate	2.88 (1.49)	.89	-	•	3.69 (1.42) *	.91	
No. Close Friends/Relatives	3.63 (2.60)	-	-		-	-	
Overall Support	6.06 (2.36)	.96			3.51 (1.71) **	.97	
DASS - 21				· · · · · · · · · · · · · · · · · · ·	Henry & Cra	wford (2005) ^N	
Depression	12.28 (6.10)	.92	-		2.83 (3.87) **	.88	
Anxiety	8.74 (6.14)	.88	-	<u>-</u>	1.88 (2.95) **	.82	
Stress	11.51 (5.41)	.85	-		4.73 (4.20) **	.90	
CDC HRQOL - 14			:		Mielenz, Jackson, Currey, DeVellis & Callahan (2006) ^N C Zullig et al, (2004) ^N N-C		
General Health	3.69 (.91)	-	_	•	3.3 (1.0) * 2.46 (1.0) **	-	

		Present	Sample	· · · · · · · · · · · · · · · · · · ·	Comparable Studies		
Measure and Subscales	Mean (SD)	Reliability (a)	Mean after item/s deleted (SD)	Reliability(α) after item/s deleted	Mean (SD)	Reliability (a)	
Activity Limitation	1.51 (.62)	-	-	_	8.1 (10.4) ** 1.80 (1.27) *	-	
Length of Activity Limitation	1.75 (2.06)	-	-	-		-	
Personal Care	0.82 (.96)	-	<u>-</u>	<u>.</u>		-	
Routine Needs	0.79 (.93)	_		_		-	
Physical Health	6.00 (8.77)	-	-	_	12.2 (11.1) ** 2.08 (1.27) *	-	
Mental Health	15.56 (12.10)	-	_	•	8.7 (10.2) * 2.53 (1.71) **	-	
Unhealthy Days	18.15 (12.27)	.50	•	•			
Impact of Phys/Mental Health	8.58 (10.88)	_	-	_		-	
Pain Impact	3.80 (6.94)	-	-	-	12.2 (11.9) ** Not given	<u>-</u>	
QOL Depression	17.64 (11.76)	-	-	<u>-</u>	8.2 (10.1) ** Not given	-	
QOL Anxiety	17.74 (11.24)	-	-	-	10.0 (10.9) ** Not given	-	
QOL Sleep	15.59 (10.71)	-	-	-	13.4 (11.3) Not given	•	
QOL Energy	12.05 (11.82)	-	-		9.0 (10.4) Not given	-	

		Present	Comparable Studies			
Measure and Subscales	Mean (SD)	Reliability (a)	Mean after item/s deleted (SD)	Reliability after item/s deleted (α)	Mean (SD)	Reliability (α)
RSE					Katz & Beach (2000)	
Overall Self Esteem	12.93 (5.29)	.45	<u> </u>	-	33.4 (5.1) **	.90

Note

* = p < .05, ** = p < .001

CTS2 = Revised Conflict Tactics Scale, PPA = Profile of Psychological Abuse, MOS-SSS = Medical Outcomes Social Support Survery, DASS-21 = Depression, Anxiety & Stress Scales, CDC HRQOL-14 = Centre for Disease and Control Health Related Quality of Life, RSE = The Rosenberg Self Esteem Scale, C = Clinical, NC = Non Clinical, V = Victim, P = Perpetrator

- 1. The HRQOL is an inventory and apart from 1 subscale comprises single items. Thus reliabilities for this measure are only relevant for the one subscale.
- 2. No. of close friends/relatives is only a single item thus a reliability score is not relevant
- 3. Where possible all attempts were made to use comparable values from studies using DV samples in particular. These are denoted by ^D. Where scales had not been used in a DV sample, DV studies had not reported reliabilities for particular subscales or original validation values were available comparable values are given from non DV populations and these are denoted by ^N. Where there are some values for both clinical and non clinical populations (both non-DV, e.g. in the CTS Perpetration & HRQOL scale), C = clinical and is denoted from NC non-clinical by colour
- 4. MOS-SSS comparable mean values were adjusted from Sherbourne & Stewart's (1991) paper to fit the same scaling as used in this study (Sherbourne & Stewart used 0-100 scaling thus all means and S.D's were divided by 20.)
- 5. The RSE comparable mean value was adjusted from Katz & Beach's (2000) paper to fit the same scaling as used in this study (Katz and Beach averaged across items rather than summing thus the mean and S.D values were multiplied by 10)
- 6. The PPA overall comparable mean value was adjusted from Sackett & Saunders paper to fit the same scaling as used in this study (Overall means and S.D's were multiplied by 21 to give summed

Table 5: Means, Standard Deviations and Reliability for the Relationship Decisions Questionnaire (TPB Components)

Subscales		Presei	nt Sample		Comparable Studies		
	Mean (SD)	Reliability (a)	Mean after item/s deleted (SD)	Reliability after item/s deleted(a)	Mean (SD)	Reliability (a)	
					Bryne & A	rias (2004)	
Intention to Leave	5.33 (2.37)	-	-	-	5.28 (2.20)	-	
Intention to Return	2.21 (1.74)	-	-	-	-	-	
Direct Attitude Leave	10.37 (4.22)	.88	-	-	11.54 (3.38)	.72	
Total BB Attitude Leave	70.85 (91.27)	-	-	-	Incomparable	-	
Direct Attitude Return	3.21 (2.50)	.87			-	-	
Total BB Attitude Return	-84.25 (76.34)	-	<u>-</u>	-	-	-	
Direct SN Leave	5.67 (1.15)	.34	6 (1.55)	.94	Incomparable	Not Given	
Total BB SN Leave	52.41(30.24)	-	-	-	Incomparable	-	
Direct SN Return	1.75 (1.00)	.31	4.13	.37	<u>-</u>	-	
Total BB SN Return	-52.83 (38.24)	-	<u>-</u>	_	-	-	
Direct PBC Leave	3.65 (2.05)	.75	<u>-</u>	_	Incomparable	-	

Subscales		Prese	nt Sample		Comparable Studies		
	Mean (SD)	Reliability (α)	Mean after item/s deleted (SD)	Reliability after item/s deleted (α)	Mean (SD)	Reliability (α)	
Total BB PBC Leave	41.96 (63.63)	-	-	-	Incomparable	_	
- Internal	26.41 (49.12)	-	-	-	in toom parable		
- External	15.56 (30.22)	-	-	-			
Direct PBC Return	4.13 (2.01)	.53	-	-	<u>-</u>	-	

<u>Note</u>

TPB = Theory of Planned Behaviour, SN - Subjective Norm, PBC = Perceived Behavioural Control, BB = Belief Based

- 1. Intention to Leave and Intention to Return are constructs both assessed by a single item only thus reliability scores are not relevant
- 2. The concept of returning to an abusive relationship has not yet been assessed using the TPB in any studies thus comparable values cannot be given
- 3. For the Belief Based measure of subjective norm means were not comparable to Byrne & Arias although the same items and scaling was used as they did not use the bipolar scoring system for their evaluative scale.
- 4 For the Belief Based measure of attitude means of both Byrne & Arias & Ballantine were not comparable. This study used items from both previous studies to comprise the scale. In addition both used different scale responses and procedures for scoring (Ballantine used a likert scale of 1-5, and neither used bipolar scoring for the evaluative scale).
- 5. For the direct measure of subjective norm values could not be compared to previous studies. This study used an item from both Ballantine & Byrne & Arias and added an additional item (based on recommendations of Ajzen, 1996).
- 6. The direct measure of PBC could not be compared to Byrne & Arias as they did not identify through their paper or personal communication the items they had used for this measure.
- 7. For the Belief Based measure of PBC total and subscale means were not comparable to those reported by Ballantine (2005) as there appears to be arbitrary exclusion of items from her computed means.

As can be seen from Tables 4 and 5 internal reliability scores varied from between below .1 (initially) to .93.

CTS-2

First examining Table 4, such variability was seen in the CTS-2. Both the physical assault and psychological aggression subscales for both victims and perpetrators demonstrate on average good reliability, with the victims' subscales being particularly high and comparable to those reported by Bryne and Arias (2004). For other subscales reliability was either modest or low, particularly injury and sexual coercion perpetration and injury perpetration where alpha scores were below .4. In such cases inter item correlations were inspected (<.3 being for poorly correlating items, Field, 2005), along with Cronbach Alpha values (i.e. 'if items were deleted'), and the decision was made to delete items that were both poorly correlated and where the scale reliability would be substantially improved by omitting them. Thus items 78, 56 and 16 on negotiation Injury and sexual coercion victim subscales along with items 11 and 47 on the injury and sexual coercion perpetration subscales were deleted generating in general more modest values. Injury and sexual coercion for the perpetrator scale still remained fairly low however (α =.42, α =.47) thus caution should be taken with these scales upon interpretation. Overall victimisation and perpetration reliability scores were not affected by item deletion, still remaining high and new mean scores of all affected subscales were calculated.

PPA

Subscale reliabilities were mostly comparable to (or in the case of Jealous control higher) than those found by Sackett and Saunders (1999) in their original validation of the scale (α >.70). This was with the exception of the 'ignore' subscale which was lower but still remained modest (α = .63). Item 2 on the criticise behaviour subscale was deleted to bring its alpha up to > .70. Again this did not affect the overall subscale score which was very high at α > .9.

MOS-SSS, DASS-21, HRQOL - 14 & RSE

Reliability for both scales was high (>.85) and generally comparable to that previously reported. Reliability for the HRQOL variables could not be calculated with the exception of the 'unhealthy days' 2 item variable as all are assessed by single items. 'Unhealthy days' demonstrated a low alpha value (.50) but as this sub-scale only consisted of 2 items this is perhaps expected. Low reliability was also found for overall self-esteem. On inspection of the inter-correlations between items, 3 were under the recommended .3 thus provided a case for deletion. As alpha values were shown to not be substantially affected by this however these were left in the scale and caution recommended upon analysis of this scale.

Relationships Decision Scale (TPB components)

As shown in Table 5, internal reliability scores for each of the theory's components in relation to leaving were high. Attitude's alpha in particular was much higher than that reported in Byrne and Arias, 2004. Subjective Norm (leave) showed low reliability initially that could be increased substantially by deleting the additional item added to the scale 'The people whose opinions I

value the most would leave their partner if they were in an abusive relationship'. Thus this was deleted and a new mean calculated. Varied reliability was found for the theory's components assessing returning. The measure of attitude again was high, perceived behavioural control moderate and subjective norm low despite deleting an item from the latter measure that showed poor inter-item correlation.

Descriptive Statistics

CTS-2

As shown in Table 4, both prevalence and chronicity values are given for the CTS-2. Prevalence refers to the percentage of the sample that reported experiencing one or more acts within each subscale in the last 12 months, and it is these that the means are based on (Straus et al, 1996). All of the victim subscales were lower (better) than previously reported values for a domestic violence (Bryne & Arias, 2004) or clinical sample (Najavits et al, 2004). Sexual coercion (p) and physical assault (p) were also lower than reported for the clinical sample (Najavits et al, 2004). One sample t-tests showed these effects were significant for all but physical assault (victim and perpetration). Injury (v) was particularly low rather surprisingly and a box plot illustrated wide dispersion of a number of outliers ranging from 3-8 with an extreme value of 26.

Psychological aggression (v) and injury (p) were both significantly higher (worse) than a comparable clinical sample and psychological aggression (p) and negotiation (p) were largely equivocal.

PPA

None of the PPA subscale means were significantly different from comparison data, yet the overall mean scale score was significantly lower (better). Perhaps surprisingly, it was also significantly lower than Straus et al (1996) reported for their general sample. All MOS-SSS subscale means were lower (worse) (affectionate & tangible only significantly) than for a reported general population (Sherbourne & Stewart, 1991) yet again perhaps surprisingly overall support was significantly higher (better). All DASS-21 subscale means were significantly higher (worse) than those reported for a non-domestic violence sample (Henry & Crawford, 2005).

HRQOL - 14

Means for this scale were compared, where information was available, to a clinical and general sample. General health, activity limitation, physical health, mental health, pain impact and depression differed significantly from both. In general variables relating to physical health were lower (better) than the clinical sample, which comprised arthritis sufferers, and variables relating to mental health (i.e. depression/anxiety) were significantly higher (worse). The number of days of poor mental health was also significantly higher (worse) than the non-clinical sample. Reported general health was significantly higher (worse) than both samples. The number of days of poor sleep and lack of energy were also higher (worse) than the reported clinical sample but not significantly. Overall self-esteem was significantly lower (worse) than previously reported for a domestic violence sample (Katz & Beach, 2000).

As evident from Table 5 for most of the TPB variables no comparison data was available due to either scoring differences, or as in the case of returning variables, no previous research. It can be seen however that Intention to leave and attitude towards leaving (direct measure) were comparable to the study by Bryne and Arias (2004) particularly intention to leave where the means and standard deviations are very similar. It is perhaps worth noting that all variable means for returning are low suggesting that these participants in general hold negative beliefs about returning. High standard deviations for all the belief based variables shows there is significant variation within the sample in responses to these measures.

Main Analyses

This section is divided into the two main areas of research. The first and main area is the predictors of decision making which investigated demographic, relationship, health and the TPB variables in prediction of women's intentions to leave and return. The second looks at the predictors of health, (particularly emotional well-being) including the effect of decision making, violence exposure and social support. Originally, as stated in the main hypotheses, it was the studies intention to examine the effect of decision making by comparing health as a function of overall relationship status (stay/leave) yet such a large unequivocal sample split means these would not be valid comparisons. Examining relationship variables (e.g. duration, previous separations) as a predictor of health consequences does allow this to still be examined.

Hypothesis 1

The first hypothesis stated that intentions to leave would be significantly predicted by attitudes, subjective norm and perceived behavioural control towards leaving. Furthermore it was predicted that PBC would improve the prediction of behavioural intention beyond the influence of attitude and subjective norm as in the TRA.

Prior to conducting a regression analyses correlational analyses was performed to examine the degree of association between the TPB variables including those in relation to returning (examined in the next hypothesis). These can be seen in Table 6. As both the direct and indirect measures of each component are assessing the same construct, scores on each are expected to show a positive correlation (Francis et al, 2004). Previous studies have found this (Ballantine, 2005, Byrne & Arias, 2004,), with Byrne and Arias subsequently including only the direct scores in regression models. In this study both measures were only significantly correlated for attitude towards returning. Indirect and direct measures were investigated separately in regression models therefore to examine their relation to intentions.

In terms of the direct measures both a positive attitude and greater subjective norm towards leaving were significantly associated with intentions to leave.

Perceived behavioural control showed virtually no correlation. In contrast both the belief based measures of attitude and subjective norm showed very weak,

non significant associations with intentions to leave yet the total belief based measure of perceived behavioural control (a sum of internal and external beliefs) showed a moderate, marginally significant association, (p = .08). This likely stemmed from internal beliefs, which independently showed a moderate, significant association, suggesting that the greater a woman's perceived internal control and capabilities, the greater the intention to leave.

Although some individual predictors were not independently correlated with behavioural intentions, because of their potential for a shared effect, a series of standard regression analyses were conducted to examine the predictability of the TPB components. Before these and any other regressions were carried out, variables being entered were checked for evidence of multicollinearity (correlations > .7). Where in the one instance this was shown (Table 18) an alternate measure of one of the correlated variables was used, for which multicollinearity did not exist.

It should also be noted here that although the final sample size to be used for analysis was small (N = 27), the decision to conduct multiple regression was based on the results of an a-priori sample size analysis. This calculation was carried out using an online statistical calculator (Soper, 2010), where .05 was set as the alpha level, the desired statistical power level as .08 (conventially \geq .08, Cohen, 1988), and the number of predictors to be entered into models as 3. The anticipated effect size also to be entered into this equation was calculated using the formula $f^2 = R^2 / (1-R^2)$ where f^2 is effect size and R^2 is the expected square multiple correlation (Tabachnik & Fidel, 2001). Based on previous findings in this area where multiple correlations of .69 and .71 have been found

(Ballantine, 2005, Byrne & Arias, 2004,), .60 was used as the R², and thus the anticipated effect size calculated as 1.5. When used in the calculation, with the other set levels, this yielded a result of N = 12 participants. To allow for the fact that in some models 4 predictors may be used, N was also calculated again using the same levels and effect size but adding an extra predictor. This yielded a result of 14 participants. Thus 27 participants were deemed sufficient enough to run regression analyses and find the large effect size anticipated in this study.

Following this therefore, a standard multiple regression was conducted entering the direct measures of attitude subjective norm & perceived behavioural control (see Table 7).

<u>Table 7. Standard Multiple Regression for Direct TPB components & intentions</u> to leave

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Coi Interval	nfidence for B
						:	Lower Bound	Upper Bound
Direct Attitude Leave, Direct SN Leave,	.31	F (3,26) = 4.96,	Direct Attitude	.36	2.20	.04	.01	.40
Direct PBC Leave		p = .01	Direct SN	.46	2.70	.01	.17	1.25

Table 7 shows the overall model was significant, with the direct TPB variables accounting for 31% of the variance in intentions to leave. Attitude and subjective norm were the only significant predictors. Subsequently a hierarchical regression analyses to examine the contribution of PBC beyond the TRA

components was not necessary as the model reveals no independent contribution.

The standard multiple regression analysis was repeated using the belief based measures (See Table 8). Internal PBC and External PBC as subscales of PBC were used rather than the total score to enable their individual contributions to be examined. Results revealed a significant model, accounting for 24% of the variance of intentions to leave. Internal PBC was the only unique contributor.

<u>Table 8. Standard Multiple Regression for Belief Based TPB components & intentions to leave</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Col Interval	nfidence for B
							Lower Bound	Upper Bound
BB attitude leave, BB SN Leave, Internal PBC, External PBC	.24	F (4,26) = 3.01, p = .04	Internal PBC	.62	3.3	.00	.01	.05

Following these results, a hierarchical regression was conducted to investigate the predictability of the theory using the direct measures of attitude and subjective norm and the indirect, internal measure of PBC. It was not envisaged prior to analysis that a model using both direct and indirect measures would be tested, but due to the significance of the belief based measure of PBC in comparison to the non-significant direct measure, it's contribution as a more predictive measure of this component requires testing.

Attitude and subjective norm were entered in the first step and PBC in the second (see Table 9). Results showed that this model predicted significantly more of the variance in intentions to leave than any of the combination of the components so far, explaining 51 %. Step 1 shows that the TRA variables accounted for 35% of the variance, with both significantly contributing. The addition of PBC significantly increased the explained variance and all variables remained significant.

<u>Table 9. Hierarchical Multiple Regression for Direct measures of attitude & subjective norm with a belief based measure of PBC and intentions to leave</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Col Interval	nfidence for B
							Lower Bound	Upper Bound
Direct Attitude, Direct	.30	F (2,24) = 6.48,	Direct attitude	.37	2.18	.04	.01	.40
Subjective Norm		p = .01	Direct SN	.41	2.43	.02	.09	1.15
2. Internal PBC	.51	F (3,26)	Direct Attitude	.43	3.04	.01	.08	.41
		= 9.96, p = .00	Direct SN Internal PBC	.32 .47	2.28 3.37	.03 .00	.05	.94 .04

 R^2 Change = .21, F = 11.34, p < .01

Table 6. Inter-correlations between TPB variables

			Α	Α	ВА	ВА	SN	SN	BSN	BSN	PBC	PBC	Total BPBC	Internal BPBC	External BPBC
		Return	Leave	Return	Leave	Return	Leave	Return	Leave	Return	Leave	Return	Leave	Return	Leave
Intention (I)	Leave	21	.44*	26	.06	15	47*	15	.13	03	.08	.21	34	.48*	05
	Return		78**	.67**	44*	.23	.03	.18	63**	.19	12	26	.00	.07	12
Attitude (A)	Leave			53**	08	03	.18	16	.47*	.04	04	.29	10	11	04
	Return			1	54**	.57**	.04	.02	45*	.29	03	11	16	14	11
Attitude (BA)	Leave					50*	18	.19	.13	.02	13	15	.09	.05	.11
	Return						.17	09	.05	.54**	16	.17	36	37	16
Subjective Norm	Leave							51*	08	.12	26	09	13	.15	53**
	Return								.07	.31	.34	.00	08	23	.20
Belief Based Subjective Norm (BSN)	Leave							-		.20	.17	.01	05	22	.25
	Return										.01	15	44*	50	12
Perceived Behavioural Control (PBC)	Leave											.25	.16	.00	.34
	Return												.16	.16	.08
				·	<u> </u>		1								

^{*}p < .05, ** p < .01

Note: 1. No indirect (belief based) measure of PBC was used in relation to returning

2. Values in italics denote correlations approaching significance

Hypothesis 2

The second hypothesis stated that the three components of the Theory of Planned Behaviour would significantly predict intentions to return, with each component making an independent contribution. PBC however would not improve predictability of the model over and above attitude and subjective norm.

In terms of the direct measures, inter-correlations of the TPB variables (see Table 6) showed that participants' attitude towards returning was the only component significantly associated with intentions to return. This demonstrated a strong, positive relationship suggesting that the more favourable a participants attitude towards returning, the greater their intention to do so. To examine the combined effect of these components and test the applicability of the TPB in relation to returning to an abusive relationship all three components were next entered into a standard regression analyses (see Table 10). This revealed that this model could significantly explain 45% of variance in intentions to return, with attitude being the only unique predictor. As PBC was not an independent predictor, it was not necessary to perform further regression analyses to examine its contribution over the other components.

<u>Table 10. Standard Multiple Regression for Direct TPB components and intentions to return</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Confidence Interval for B	
							Lower Bound	Upper Bound
Direct attitude Return, Direct SN Return, Direct PBC Return	.45	F (3,23) = 7.28, p = .00	Direct Attitude	.65	4.19	.00	.34	1.18

To explore the belief based measures of the return components and intentions to return, correlations were first inspected in Table 6. It must be reiterated here that belief based measures were used for attitude and subjective norm only in this area. Correlations show that neither variable was significantly associated with intentions to return. A regression was conducted to investigate whether in sum the variables predicted the intention to return but as perhaps expected the model was non-significant. Thus the indirect, belief based measures of attitude and subjective norm did not predict intentions to return.

Interestingly however, both direct and belief based measures of the components towards leaving showed significant associations with intentions to return in the correlational analyses of the TPB variables. Specifically, direct and indirect measures of attitude and the indirect measure of subjective norm showed moderate to strong negative associations suggesting that the more favourable an attitude towards leaving and the higher the social perceived pressure to leave, the weaker the intention to return.

Using standard regression analyses intentions to return was subsequently regressed onto the TPB model in relation to leaving using direct measures of attitude, subjective norm and PBC. This revealed a highly significant model (p < .001) accounting for 60% of the variance in intentions to return (AR 2 = .60). Attitude was the only significant individual predictor at p < .01 (β = -.81). In a similar fashion, intentions to return was also regressed onto the TPB model in relation to leaving using belief based measures of attitude, subjective norm & PBC. This model was also significant (p < .01) but explained less of the variance (AR 2 = .38). Belief based attitude no longer showed significance as in the correlations. Subjective norm was the only significant predictor at p < .01 (β = -.55). Thus the direct measure of attitude and the indirect measure of subjective norm significantly contributed to intentions to return. PBC whether measured using direct or belief based assessment was not influential.

Following these results, a standard regression analysis was run entering the direct measure of attitude and the indirect measure of subjective norm for leaving as the predictor variables. As the direct measure of attitude towards returning was also a significant predictor, and there was no correlation between this and the leaving predictors, this was also entered. Results revealed a highly significant model explaining 64% of the variance in intentions to return, with both the leaving variables making unique and significant contributions. Attitude towards returning was no longer a significant predictor (see Table 11).

<u>Table 11. Standard Multiple Regression using a measure of Direct attitude and Belief Based subjective norm to predict intentions to return</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Confidence Interval for B	
							Lower Bound	Upper Bound
Direct Attitude Leave, Direct Attitude Return, Belief	.64	F (3,23) = 14.88, p = .00	Direct Attitude Leave	62	-4.27	.00	36	13
Based SN Leave			Belief Based SN Leave	34	-2.41	.03	04	00

The final results from these analyses may be more clearly demonstrated in figure 3.

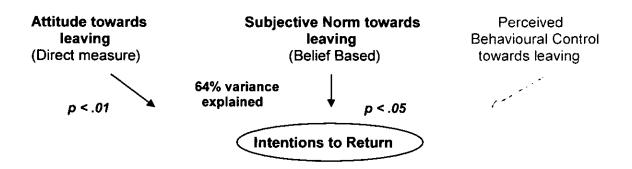


Figure 3. Significant contributors of the TPB that predict women's intentions to return to an abusive relationship

Hypothesis 3

Hypothesis 3 stated that the TPB components would more accurately predict behavioural intentions to leave/return than general demographic variables and relationship variables. Correlations conducted prior to regression analyses appeared to support this view, showing very weak and non significant

associations between any demographic variables and behavioural intentions and only one significant and one marginally significant association between relationship variables and intentions (see Table 12). This was in regards to overall social support and intentions to leave which were positively correlated at a near significance level of p = .07 and the subscale of affectionate support and intentions to leave, significantly and positively correlated. This suggests that the more social support an individual has, in particular in terms of affection, the more likely they are to leave.

<u>Table 12. Correlations between demographic and relationship variables & behavioural intentions</u>

Demographic / Relationship Variables	Intentions to Leave	Intentions to Return
Age	.06	23
Income	.16	.01
Ethnicity	.20	.25
Education	005	11
Employment Status	.15	07
No. of Children in Household	.09	.14
Length of Relationship	.14	24
No. of Previous Separations	.18	17
Duration Since Leaving	.06	.21
No. of Previous Abusive Relationships	.12	04
Exposure to Parental Abuse as a child	.03	. 33
Exposure to Violence		
CTS-2 - Overall Victimisation - Physical Assault - Psychological Aggression - Sexual Coercion - Injury	.07 02 .13 .14 .05	34 32 20 07 23

Demographic / Relationship Variables	Intentions to Leave	Intentions to Return
PPA - Overall	.19	24
Social Support		
- Overall - PSI - Affectionate	.36 .16 .39*	21 21 21
- Tangible - Emotional/Informational	.31 .23	15 18

^{*} p < .05

Note - Values in italics denote correlations approaching significance

As demographic variables were not correlated with the dependent measures it was equivocal as to whether they should be entered into regression analyses with the TPB components. However, a hierarchical regression was run for a cautionary measure on intentions to leave, which revealed no significant contribution of the demographic variables to the model (R² change = .10, p = .31). Thus it can be stated that demographic variables had no direct predictive value upon behavioural intentions in this study.

For further interest as Ballantine (2005) found significant correlations between some demographic variables and the individual TPB components in relation to leaving, correlations were also run to explore this. With leaving as the behavioural intention, the only significant correlation was shown between employment and subjective norm (r = .44, p < .05). Employment also showed an almost significant correlation with attitude (r = .35, p = .08). In contrast with returning as the behavioural intention, the only significant correlation was shown between ethnicity and attitude (r = .70, p = .00).

Similarly, correlations were run to explore the relationship between victimisation variables and the TPB components individually. With leaving as the behavioural intention, the only significant correlation was shown between overall victimisation and attitude (r = .39, p < .05). Correlations approaching significance were shown between physical assault and attitude (r = .34, p = .09), psychological aggression and attitude (r = .35, p = .08), psychological aggression and subjective norm (r = .35, p = .08) and injury and perceived control (r = -.37, p = .06). No significant correlations were shown between any victimisation variables and the TPB components with regards to returning. Correlations approaching significance were shown between overall victimisation and subjective norm however (r = -.36, p = .08) and sexual coercion and attitude (r = -.36, p = .08).

Amongst the social support variables affectionate support showed the strongest association with intentions to leave and as the social support subscales were highly intercorrelated only affectionate social support was entered into the model. A hierarchical regression analyses was conducted (see Table 13) placing this in the first step and adding the TPB model's most predictive components in the second. Affectionate support significantly predicted 12% in the variance of intentions to leave. However when TPB variables were entered, affectionate support no longer remained a significant independent predictor.

Table 13. Hierarchical Regression adding social support to attitude, subjective norm and internal PBC to predict intentions to leave

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Confidence Interval for B	
		:				<u>.</u> _	Lower Bound	Upper Bound
Affectionate Social Support	.12	F (1,26) = 4.37, p = .05	Affectionate Social Support	.39	2.09	.05	.01	1.22
2. Direct attitude leave, Direct SN	.53	F (4,26) = 8.43,	Direct Attitude	.40	2.92	.01	.07	.39
Leave, Internal PBC		p = .00	Direct SN	.30	2.18	.04	.02	.90
	j		Internal PBC	.43	3.10	.01	.01	.04

 R^2 Change = .46, F = 8.47, p < .01

Although a number of variables were weakly associated with intentions to return, the small sample size of this study meant that caution should be taken with regards to the number of predictors entered into regression analyses. As exposure to abuse was a specific area of research in the study and overall victimisation showed the highest correlation, a hierarchical regression was conducted where this was controlled for with the attitude and subjective norm components already shown to best predict intentions to return. This like social support enabled the contribution of victimisation to be examined independently and the hypothesis tested. Table 14 shows that overall victimisation did not contribute significantly to a model of intentions to return, either independently or in the context of the models components. Thus this demonstrates the model's applicability after controlling for overall victimisation.

<u>Table 14. Hierarchical Regression adding overall victimisation to attitude and subjective norm to predict intentions to return</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Coi Interval	nfidence for B	
							Lower Bound	Upper Bound	
1. CTS-2 Overall Victimisation	.08	F (1,23) = 3.01, p =.10							
Direct attitude leave, Belief Based	.64	F (3,23) =	Direct Attitude	62	-4.22	.00	37	12	
SN Leave		14.89, p = .00	Belief Based SN	35	-2.37	.03	04	00	

 R^2 Change = .57, F = 18.44, p < .001

Hypothesis 4

Hypothesis 4 predicted that patterns of poorer health would be associated with decreased intentions to leave and increased intentions to return. Zero order correlations shown in Table 15 revealed in general weak and non-significant associations between any individual health variables and intentions. Depression as measured on the DASS scale showed marginal significance with intentions to leave (p = .07) with the latter becoming weaker as depression was greater.

Table 15. Correlations between health variables and behavioural intentions

Health Variables	Intentions to Leave	Intentions to Return
DASS Depression	35	.05
DASS Anxiety	18	25
DASS Stress	29	11
Self Esteem	.17	.13
QOL Mental Health	09	.05
QOL Physical Health	.07	13
QOL Unhealthy Days	13	.09

Note - Values in italics denote correlations approaching significance.

The pattern of weak non-significant correlations suggested that depression was the only predictor worth considering for entry into a regression analyses. Thus a hierarchical regression was conducted with depression and the TPB components (see Table 16). As the DASS measure of depression was highly correlated with anxiety and stress (over .75), these variables were also effectively being accounted for with the variable without needing to be entered into the equation. Results showed that depression accounted for 9% of the variance in intentions to leave, in a marginally significant model. When added with the theories components in step 2, it remained a non-significant predictor, with each of the components remaining significant. Despite no unique contribution however, variance explained by the overall model (58%) by adding this variable is greater than the models components solely (51%), or in conjunction with social support (53%) (Tables 9 & 13).

<u>Table 16. Hierarchical Regression adding depression to attitude, subjective norm & internal PBC to predict intentions to leave</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Cor Interval		
							Lower Bound	Upper Bound	
1. DASS Depression	.09	F (1,26) = 3.58, p = .07							
2. Direct attitude leave, Direct SN	.58	F (4,26) = 7.5,	Direct Attitude	.42	2.95	.02	.07	.40	
Leave, Internal PBC		p = .00	Direct SN	.32	2.51	.02	.03	.94	
			Internal PBC	.42	2.08	.05	.01	.04	

 R^2 Change = .45, F = 7.88, p < .01

Predictors of Health including the effect of decision making

Correlations between relationship variables (including violence exposure and social support) and reported health are given in table 17.

Table 17. Correlations between relationship variables (including abuse exposure and social support) and reported health

	QOL General Health	QOL Physical Health	QOL Mental Health	QOL Unhealthy Days	Impact of Phys & Mental Health	QOL Depression	QOL Anxiety	QOL Sleep	DASS Depression	DASS Stress	DASS Anxiety	Self Esteem
Relationship Status (Non-Parametric)	11	.12	.01	.05	10	02	01	12	02	27	02	.13
Length of Relationship (Yrs)	21	.36	15	13	16	16	.10	08	00	10	.07	.11
Duration Since Leaving (Mths)	.30	.52**	.07	.09	.07	.02	.07	28	.23	02	.08	.00
No. Previous Separations	18	.10	.35	.24	.13	.38	.48*	.32	26	.33	.34	14
Overall Support	39*	34	08	25	.05	28	26	.14	.01	.11	.01	.29
No. Close Friends/Relatives	34	21	24	34	19	37	39*	09	31	16	28	.63**
CTS Overall Victimisation	.31	.17	.59**	.45*	.46*	.58*	.38*	.64**	.36	.33	.22	35
Physical Assault Psych Aggression Sexual Coercion Injury	.33 .26 .41* .23	.21 .03 .51** .34	.64** .52** .37 .32	.53** .37 .30 .30	.48* .52** .17 .13	.62** .51** .38* .31	.47* .30 .30 .19	.69** .50** .42* .37	.45* .27 .09 .41*	.36 .25 .03 .33	.29 .14 .04 .43*	39* 37 07 30
PPA Overall Victimisation	.15	04	.28	.27	.33	.20	.35	.47*	.29	.21	.32	19

*p < .05, ** p < .01

Note Values in italics denote correlations approaching significance

Hypothesis 5

Hypothesis 5a predicted that women remaining in abusive relationships would demonstrate poorer health than those who had left. As stated previously this could not be tested, as due to sample characteristics a between group analysis could not be conducted. A hypothesis regarding health and relationship duration however (5b) proposed that more negative health would be reported the longer the duration of a relationship. It can be seen from Table 17 that in general variables relating to relationship status (including relationship duration and duration since leaving) were weakly, if at all, associated with reported health. There was a mild association between physical health and relationship duration which was approaching significance (p = .06), with physical health worsening as duration increased and a highly significant association between physical health and duration since leaving, again with physical health worsening as relationship duration since leaving increased. Poorer physical health may reflect the effects of time spent within an abusive relationship, however it is less easy to understand why a longer period of time since leaving is also associated with worse health, unless in both cases these measures might also reflect general aging effects upon patterns of health. Non-significant partial correlations controlling for age supported this suggestion (r = .12, p = .59, r = .36, p = .09). Thus this part of hypotheses 5b was not supported.

In contrast the number of previous separations experienced in the relationship shows marginally significant, moderate, positive associations with mental health, stress and depression, with anxiety reaching significance. This supports

hypotheses 5b, suggesting that as the amount of previous separations from a partner increases, a woman's negative mental health also increases.

Hypothesis 6

Hypothesis 6 predicted that increased exposure to abuse (as measured by scores on the CTS-2 victim subscales and the PPA) would be associated with poorer mental and physical health. In relation to mental health, particularly depression, anxiety and low self esteem would be worse. Correlations shown in table 17 support this with overall victimisation on the CTS-2 showing significant association with more unhealthy days, poorer QOL mental health, greater depression, anxiety and sleep disturbance and marginally significant correlation with greater DASS-21 depression and QOL anxiety, as well as lower self esteem. In addition overall victimisation on the Profile of Psychological abuse is significantly associated with greater sleep disturbance, and approaching significance with anxiety, which increases as abuse increases (p = .07).

Correlations also suggested an association between overall victimisation and the impact of poor physical health. Although reported physical health was not correlated with overall abuse, as measured by either the CTS-2 or PPA, significant relationships were shown between both measures and the impact of physical and mental health (No. of days affected by negative mental and physical health in the 30 preceding study involvement), with more frequent abuse associated with more days affected. CTS-2 overall victimisation was also associated with a greater impact of pain on daily living.

Hypothesis 6 also predicted that overall physical and mental health would differ as a result of patterns of abuse experienced. Correlations suggest that physical assault and psychological aggression on the CTS-2 are most strongly associated with poor mental health, thus supporting this prediction. An increase in physical assault was significantly associated with an increase in all QOL mental health variables (r ranging from .47-.69) and a decrease in self esteem. An increase in psychological aggression was also significantly associated with an increase in QOL mental health variables apart from anxiety (r ranging from .50 - .52) and a marginally significant decrease in self esteem. Being a victim of sexual coercion was the only variable significantly correlated with reported general health.

Hypothesis 7

Hypothesis 7 stated that social support would moderate the effect of domestic violence upon women's health. Specifically the greater a women's social network and availability of support the less harmful the effect of abuse exposure. Interestingly Table 17 shows a number of health variables associated with social support, particularly the number of close friends/relatives a woman reports having, which was significantly associated with greater self esteem and less anxiety. It was also associated with a pattern of less depression, better general health, and fewer unhealthy days which were approaching significance. Overall social support was significantly associated with better general health and approached significance with better physical health. It's role as a moderator however cannot be identified through these associations. This is explored in regression analyses examining its interaction effect.

Structuring these results, a series of hierarchical regression analyses were conducted. For brevity, physical and mental health were chosen as the criterion variables only to be looked at, at this stage. As QOL anxiety (.74), depression (.89) and unhealthy days (.94) all correlated highly with mental health it was felt that these particular aspects were captured within the prediction of this variable. As caution was needed with regards to the number of predictors in any one model, variables were chosen on the basis of the zero order correlations.

-Predicting physical health: Age was entered into the first step as a covariate, to control for the general correlation that is seen between these two variables. The marginally or significant predictors of overall support, sexual coercion and injury were entered into the second step (see Table 18). As the previous partial correlation showed duration of leaving and length of relationship to be a function of age these were not entered as predictors. The results revealed age, social support and sexual coercion were all unique contributors of physical health, explaining 56% of the variance as a model. Age independently explained 17%.

Table 18. Hierarchical Multiple Regression adding age, social support and aspects of victimisation to predict physical health

Variables Entered	Adj. R ²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Co	nfidence for B	
		,					Lower Bound	Upper Bound	
1. Age	.17	F (1, 26) = 6.25, p = .02	Age	.45	2.50	.02	.07	.70	
2. Overall Support, Injury, Sexual	.56	F (4, 26) = 9.30, p = .00	Age Overall Support	.43 35	3.21 -2.61	.00 .02	.13 -2.31	.61 26	
Coercion			Sexual Coercion	.48	3.52	.00	.09	.36	

 R^2 Change = .43, F = 8.46, p = .00

Following previous theory and research that proposes social support as a moderator of the effects of IPV, interaction effects between this and sexual coercion were tested for in a subsequent hierarchical regression. Prior to analysis, each of these predictors were centred to avoid multicollinearity that can arise in interactions (Tabachnik & Fidell, 2001) and a product term representing their interaction created (i.e. social support x sexual coercion). Age was again entered in the first step as a covariate, the centred predictors in step 2 and the interaction term in step 3. Results can be seen in Table 19. As the R² change statistic shows, social support and sexual coercion together explained a significant increase of nearly 40% in the variance of physical health, with each also contributing uniquely. The product of these two variables (the interaction) significantly further increased the variance by 7%, with all variables remaining significant contributors. This additive effect suggests each of these variables has an added effect on physical health when combined. As the beta is negative, suggesting that as this interaction increases, physical health gets better (higher

score denotes poorer physical health), it suggests social support may be moderating the impact of sexual coercion.

<u>Table 19. Hierarchical Multiple Regression examining the interaction effect of social support and sexual coercion on physical health</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Confidence Interval for B	
							Lower Bound	Upper Bound
1. Age	.17	F (1, 26) = 6.25, p = .02.	Age	.45	2.50	.02	.07	.71
2. Overall	.53	F (3, 26)	Age	.46	3.42	.00	.16	.64
Support,		= 10.82,	Overall	31	-2.27	.03	2.17	10
Sexual		p = .00	Support					
Coercion			Sexual	.54	3.98	.00	.12	.39
			Coercion					
3. Overall	.60	F (4,26)	Age	.54	4.13	.00	.23	.70
Support x		= 10.54,	Overall	37	-2.85	.01	2.35	37
Sexual		p = .00	Support					
Coercion			Sexual	.59	4.64	.00	.16	.41
			Coercion					
			Overall	29	-2.15	.04	13	00
			Support x					
			Sexual]		
			Coercion	l		<u> </u>	<u> </u>	L

 R^2 Change (Step 2)= .39, F = 10.69, p < .01 R^2 Change (Step 3)= .07, F = 4.61, p < .05

-Predicting Mental Health: A standard regression was conducted entering previous separations, sexual coercion, physical assault and overall PPA as predictors. Despite overall CTS-2 victimisation also showing a significant association with mental health (see Table 17) its significant subscales were entered instead to allow their independent contributions to be examined. This excluded psychological aggression, which correlated highly with physical assault, thus could not be entered due to multicollinearity. PPA overall was

entered as an alternative measure of psychological victimisation, despite showing a non-significant correlation. Results are shown in Table 20. The model was significant, explaining 33% of variance in mental health. Physical assault was the only significant predictor. The same model was conducted, replacing physical assault with psychological aggression which was also significant, but explained less variance (22%) and demonstrated no unique contributors. This suggests that physical abuse better predicts mental health than psychological abuse in the participants of this study.

Table 20. Standard Multiple Regression adding previous separations, sexual, physical and psychological abuse to predict mental health

Variables Entered	Adj. R ²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Col Interval	onfidence I for B	
							Lower Bound	Upper Bound	
1. No. of Previous Separations, Sexual Coercion, Physical Assault, PPA Overall	.33	F (4, 26) = 4.13, p = .01.	Physical Assault	.55	2.61	.02	.02	.16	

As overall support was not correlated with mental health (see Table 17), its role as a moderator of abuse exposure in this model was not tested.

As per the survey data, a data screening process was conducted on the data obtained for the attentional probe task. As with other reaction time probe stimuli participant responses should fall within expected response parameters.

Therefore responses where the delay was physiologically too short or where there was an excessive delay in responding needed to be omitted. A parameter of 2 standard deviations from the mean (standard protocol) was set as the 'limit' to which any trials that fell below or above this was omitted. Before any deletion however a filter was put in place to examine the nature of these outliers. It was noted that 11 of these trials were from the same participant, and there was no systematic pattern in the responses, i.e. slow responses for both the neutral and threat words when they appeared at both top and bottom locations. As this particular participant was noted to have some difficulty in the comprehension of the task and English was not her first language it was decided that such a slow response time was more likely a product of this. Therefore due to a risk of skewing the data she was omitted from this particular analysis.

Mean reaction times for both threat and neutral words were calculated. These are shown in Table 21.

Table 21. Mean reaction time for Attentional Probe threat and neutral words

	Mean	S.D
Neutral Words	664.98	261.93
Threat Words	668.50	265.76

As demonstrated from the means, there was little difference in reaction time between the threat and neutral words. This was confirmed by a non significant paired sample t-test, t (28) = -.67, p > .05.

The change in reaction time between the two sets of words were then calculated for each participant (Mean = 1.91, SD = 27.37). This gave individual scores and an overall 'affect' score that could be used in further analysis.

Correlations were then run with relationship status and victimisation variables (CTS-2 and PPA subscales) to examine possible predictors of this score, and investigate anxiety in relation to relationship status and hypothesis 6, that victimisation would predict poorer health. Originally as discussed it was intended that an ANOVA or t-test would be used to compare scores based on relationship status, (stay or left) but due to the unequivocal sample size in each group this was not possible.

Overall victimisation and all CTS-2 subscales along with all DASS variables showed no significant associations with reaction time change (p > .05, r ranging from .01 - .25). PPA ridicule was the only significant association, demonstrating a negative relationship (r = -.39, p .05) suggesting that as ridicule victimisation increases, reaction time change decreases. As the formula for calculating reaction time change is *threat word reaction* – *neutral word reaction* this suggests that a negative change score demonstrates a slower response to neutral words, thus a quicker response to threat. Therefore a negative relationship between being a victim of ridicule and reaction time suggests increased hyper-vigilance associated with this type of abuse. Both PPA overall (r = -.35, p = .07) and relationship status (r = -.38, p = .05) were approaching

significance with negative, moderate associations, suggesting that as overall psychological abuse and relationship status increases, reaction time change decreases (increased hyper-vigilance). Relationship status is scored on a dichotomous scale where 1 denotes left the relationship and 2 denotes remains in a relationship.

Following these results a hierarchical regression was conducted placing ridicule in the first step and relationship status in the second to predict reaction time change (see Table 22). Ridicule significantly explained 12% of the variance in change scores, with this being doubled by the addition of relationship status in the second step. Together these predictors significantly explained 24% of the variance, each making significant and unique contributions, as demonstrated by the beta co-efficients. This demonstrates that both some element of victimisation and decision making are influencing the participant's attentional processes. As no difference exists in the reaction time between threat and neutral words (anxiety vulnerability) it cannot be said that these factors significantly influence health and support hypothesis 6, but they go some way in explaining how this vulnerability could be predicted.

<u>Table 22. Hierarchical Regression adding relationship status and ridicule victimisation to predict change in reaction time scores on the Attentional Probe task</u>

Variables Entered	Adj. R²	ANOVA	Sig. Predictor	Beta	t	Sig.	95% Cor Interval	
							Lower Bound	Upper Bound
1. PPA Ridicule	.12	F (1,26) = 4.39, p = 05	PPA Ridicule	39	-2.10	.05	-2.86	03
2. PPA Ridicule	.24	F (2,26) = 4.99,	PPA Ridicule	41	-2.38	.03	-2.85	20
Relationship Status		p = .02	Relationship Status	38	-2.22	.04	-64.23	-2.26

CHAPTER 5 - DISCUSSION

Study Aims

The aim of the study was to explore various predictors of women's decisions to leave and return to abusive relationships. This primarily involved testing whether the decision making process could be placed within the theoretical framework of the Theory of Planned Behaviour, examining the contribution of its various components, in addition to health, demographic variables and abuse alone. Furthermore the study aimed to explore the consequences of such decisions on health and well-being and how health may be predicted by various patterns of abuse and mediated by social support.

Intentions to Leave

Theory of Reasoned Action / Theory of Planned Behaviour

The results of the study support the use of both the Theory of Reasoned Action and the Theory of Planned Behaviour to predict women's decisions to leave abusive relationships. This supports the first part of hypothesis one. Results showed that attitude, subjective norm and perceived behavioural control all significantly predicted intentions to leave explaining 51% of the variance. This is slightly lower than the model's predictability shown in other studies (Ballantine, 2005, 71%, Bryne & Arias, 2004, 69%). This could be attributable to a number of differences between the studies including relationship demographics and cultural differences, for example the length of time out of the relationship. This

was on average 15 days for participants in Bryne and Arias' study compared to only 9 of the participants that had left for less than 3 months in this study.

Ballantine (2005) did not measure this variable but just under half of her sample were still in relationships.

Similar to other studies however, the prediction of behavioural intention to leave was more complex than this. When using only the direct measures as Byrne and Arias did, only attitude and subjective norm were significant predictors, thus supporting the TRA and not the TPB. When belief based measures were used in the analysis however the opposite pattern was seen. Attitude and subjective norm no longer significantly predicted intention, yet internal perceived behavioural control did. Thus it was only when combining these differently measured components, that the whole model was supported. As each component remained significant however it suggested that each were having a unique effect.

This raises a number of issues. Firstly considering the non-significance of the indirect measures of attitude and subjective norm to predict intentions to leave, it may be that they were not accurately measuring salient beliefs that would influence participants decisions to leave. This may be because focus groups were not conducted prior to data collection to elicit these beliefs, which is recommended in the TPB literature and discussed in more detail in this studies limitation section. Beliefs were taken from the existing studies in this area, which may have been less relevant due to cultural differences (Both Ballantine and Byrne and Arias used an American sample). The absence of focus groups also meant that the relevance of each belief could not be identified, thus a large

number of beliefs were used to assess each component. Consequently, the ratio of participants to beliefs made it difficult to find a significant effect (Ballantine, 2005). In addition, the low correlations between direct and belief based measures suggests that the latter may not reflect the underlying structure of the components. As other studies have shown high correlations however and a significant correlation was seen with the direct and belief based measure of attitude to return in this study, it is more likely the beliefs used were not the most representative of attitude and subjective norm in relation to leaving. These issues should be addressed in further research.

The first hypothesis also predicted that perceived behavioural control would significantly improve the prediction of intentions to leave, beyond that explained by attitude and subjective norm. As identified above this was supported, but only when using the belief-based measure of internal PBC, which interestingly explained the most variance in participants intentions. This supports both previous studies in this area and TPB studies dealing with health behaviours (Armitage & Connor, 2001). The contribution of belief based measures of internal PBC suggests that feelings of capability and control towards leaving are very important in the evaluative process, specifically regarding internal factors. Thus participant's thoughts are focused upon whether they will be able to solve problems, make decisions and in general manage easily on their own, where (as displayed by the negative value) a lack of confidence in their capabilities is causing them to remain.

Such a pattern of thinking supports a 'classic model of rationality' which emphasises the role of conscious reflection in decision making and problem

solving. Women are considering the probability of different outcomes, and the value of these outcomes, (i.e. 'I won't be able to make decisions if I'm on my own and this is very important to me'), which models such as the information-processing perspective on decision making (Westen, 2002), and the theory of planned behavior would support. Interestingly, the added importance of internal rather than external factors demonstrates a degree of emotion being used in these decisions where women are assessing the risk of leaving based on how they perceive their capabilities. How reasoning is affected by such emotion has been identified in a number of studies around general thinking, where responses have been deemed 'illogical' (Western, 2002). In this case, the women's thought processes aren't necessarily illogical but the affect (causing them to remain) is. This would be where interventions identified by Strube (1988), such as changing unrealistic evaluations may be beneficial.

This finding also contrasts with Ballantine's (2005) correlational results which emphasised the importance of external barriers, and the subsequent recommendation of allocating resources to deal with external barriers rather than women's confidence in their capability to make decisions.

The failure of the direct measure of PBC to predict intentions contrasts with both Ballantine (2005) and Bryne and Arias (2004), and may be due in part to the differences between the studies, with the majority of participants in the present study having already left the relationship. It may also be related to the use of only 2 questions to assess perceptions of control, which may not have adequately reflected participant's perceptions. Participants may have felt generally in control of leaving the relationship, but lacked confidence in their

capabilities of managing independently, which only came to light when this component was investigated in more depth. This questions the measurement of PBC and whether direct measures are adequately capturing this component. The existing studies suggest it is, but this study indicates that capability should be assessed within the direct measure and results may be different. The predictive value of PBC may increase.

The emergence of attitude and subjective norm as significant predictors supports the Theory of Reasoned Action, showing that participants own attitude towards leaving and their perceived social pressure and motivation to comply influence their intentions to leave abusive relationships. The relative importance of subjective norm particularly (similarly to PBC) is difficult to quantify however as it varied depending on the other predictors used in a model. It's emergence as the strongest predictor when direct measures of the components were used. contradicts studies that have shown subjective norm to be a weaker predictor of intentions than attitudes (Trafimow & Finlay, 1996) or not make any unique contribution (Byrne & Arias, 2004). Findings are instead consistent with studies that have shown subjective norm to be the strongest predictor (Fekadu & Kraft, 2002) and suggests that resources need to be made available in this area. especially where women have little social support, often a common occurrence in such a sample. When entered into a model with an indirect measure of PBC however, previous results are partially supported. Although a unique predictor. thus still inconsistent with the findings of Byrne and Arias (2004) subjective norm has the lowest beta value demonstrating the least contribution. This suggests that participant's feelings of control and capability, as well as their attitude are more influential to the women in the consideration of leaving an

abusive relationship. What significant others think also forms part of their decision process, but primarily their own feelings and concerns are of most importance.

This pattern of thinking is consistent with a cognitive perspective on motivation, namely the 'expectancy-value theory' which states motivation to attain a goal is driven by the value of that goal to a person and the expectation that they can attain it. In this case women's attitudes (which decide the value) and their perceived control over whether they can leave are the fundamental drives behind their decision. It would be interesting to see whether this finding would still be the same with a more ethnically diverse sample. The importance of and motivation to comply with family and community is likely to have a more significant role, where issues such as gender socialisation, shame and honour are reinforced in Asian women for example.

Demographics

Consistent with the results reported by Byrne and Arias (2004), no demographic variables were associated with or predictive of women's intentions to leave. This supports hypothesis 3 which predicted that the TPB would more accurately predict intentions to leave than demographic variables. This also contrasts with the large amount of studies that have shown economic variables, i.e. income and employment status to be strong predictors of women's relationship decisions. As identified however as part of this analysis, one possible explanation is that these variables are still important but in a more indirect role captured by the model. That is, such factors affect women's attitudes towards

leaving, her perceived control and social pressure. This would support the suggestion that empirical factors in this area should be encapsulated within a theoretical framework (Rhatigan et al, 2006). The significant correlations between employment and subjective norm and almost significant correlation between employment and attitude lends some support to this.

It should also be noted however (as identified as a weakness of the study) that current demographic information was used to predict the decision to leave reported retrospectively, due to the 'left' status of the majority of participants. A potential problem is that a participants' financial or employment status could have changed since making the decision to leave. This issue was not relevant with regards to intentions to return however which still showed no association with demographic variables, thus giving more confidence to the findings.

Relationship Variables

Victimisation

Consistent with the study by Byrne and Arias (2004) no CTS-2 subscale scores were significantly correlated with intentions to leave. In addition, no scores on the profile of psychological abuse were correlated. This again supports hypothesis 3 and contrasts both with Gelles (1976) hypothesis and other studies that have shown women to respond to increasing abuse by terminating their relationships (Horton & Johnson, 1993, Gordon et al, 2004, Pape & Arias, 2000) as well as those showing the opposite association (Johnson, 1992, Pagelow, 1981).

It may not necessarily be the case however that this data contradicts the 'common sense hypothesis'. As identified in the analysis of victimisation as a predictor of intentions, similarly to demographics, it may be that the effects of abuse are having a more indirect effect on the decision making process, by affecting attitude, social pressure and perceived behavioural control. It would make sense for example that the more abuse a woman experienced, the more favourable her attitude towards leaving, and the attitudes of others. The significant correlations between overall victimisation and attitude towards leaving and correlations approaching significance between physical assault and attitude, psychological aggression and attitude, psychological aggression and subjective norm and injury and perceived control gives some support to this. This may provide some explanation for the equivocal nature of findings on violence exposure and the decision to leave, supporting the importance of using a theoretical framework to more fully understand such individual factors.

Relationship Characteristics / Previous Experience

The length of participants' relationship, the number of previous separations, duration since leaving, exposure to parental abuse as a child and abuse within a previous relationship did not significantly correlate with intentions to leave further supporting hypothesis 3. Some of these findings are consistent with previous research, for example, studies that have shown no association between termination decisions and child victimisation/observation of parental abuse (Aguirre, 1985, Anderson & Saunders, 2003, Kim & Gray, 2008, Rhatigan et al, 2006, Strube & Barbour, 1984), or relationship length (Frisch &

MacKenzie, 1991, Martin et al, 2000). Others differ, for example the number of previous separations which has shown to be predictive of intentions (Compton et al, 1989, Koepsell, Kernic & Holt, 2006, Schutte et al, 1986).

The non significant correlation between childhood exposure to abuse and intentions is particularly interesting when interpreted within theories of development / attachment. Namely the idea of 'internal working models' (Bowlby, 1969, as cited in Western, 2002) that children's perceptions of their childhood attachment relationships form expectations about close relationships in later life. Utilising this concept and the idea that such expectations form aspects of adult behaviour, the expected pattern would be that women with experiences of childhood parental violence, where they view themselves as 'unlovable' or 'unworthy of love' would have expressed greater intentions to stay. As mental models are representations of how things work, it would also make sense that being an observer of inter-parental violence might form normative expectations, which may also produce tolerance of an abusive relationship. This study found no evidence of either.

It should be noted however that the absence of significant effects both in agreement with studies looking at dimensions such as previous abuse exposure and relationship length, and in contrast to positive findings, such as with the number of separations should be interpreted with caution due to the small sample size in the current study. It may be difficult to find effects because of the limited number of participants even though these measures show a range of variance.

Social Support

The availability of affectionate support reported by participants was a significant predictor of their intentions to leave, accounting for 12% of the variance. This is consistent with studies that have shown the importance of social support on the likelihood of women leaving abusive relationships (Follingstad et al. 1992, Hendy et al, 2003, Horton & Johnson, 1993), but more specifically provides information on the type of support that may be influential in this decision. Having others to provide love and support is seemingly more important than having practical or emotional support, such as that likely to be provided by agencies, practitioners and other more formal networks. As research on the types of support most desired by women is limited in this area (Barnet, 2001) it is difficult to substantiate these results further, as is explaining the function of affectionate support. Further research should clarify this and feed such information into interventions in this area. It may lead to more focus being placed on the role of informal support provided by other women in this situation for example, which as identified by women that have been through this process, is an important resource in recovery (Abraham, 2007).

It should also be noted that affectionate support was no longer a significant predictor when entered into a regression model with the TPB components, supporting hypothesis 3. This should not detract from the meaning and influence that this variable may have. It could simply suggest that the predictive effect of this support is being encapsulated within the theory's components.

That is, influencing a more favourable attitude, perceived social pressure and

feelings of control. It could alternatively be having an effect on women's health, which may also feed into these components.

Health

Whether the poor mental health of participants was related to intentions to leave remains unclear after analysis of the current data. Depression, also highly correlated with anxiety and self esteem, was not found to be a significant predictor of intentions either solely or in combination with the TPB components. Depression did however contribute to the explained variance in intentions to leave more than the components by themselves or in combination with social support, which was itself a significant predictor. Adding another predictor to the model, especially if not significant would perhaps be expected to decrease the models predictability or not have any effect. Coupled with the fact that depression approached significance, a larger sample size may reveal its predictive value. This would support hypothesis 4, previous research that has found depression and other affect variables to be negatively correlated with intentions or confidence towards leaving (Arias & Pape, 1999, Lerner & Kennedy, 2000, Sato & Heiby, 1992) and the view that poor functioning may 'interfere' with decisions to leave (Ballantine, 2005). Whether this is influencing factors such as motivation, confidence, coping styles or attributions was not explored in this study but these could all be relevant. Subsequently whether this reflects a state of 'learned helplessness' in these abused women cannot be determined. The fact that well-being seems to be a reaction to the abuse experienced, which in turn is almost significantly associated with the likelihood to remain is consistent with Walker's (1979) concept of learned helplessness,

although it is not clear whether such a 'reaction' would decrease as abuse decreases. This would need to be investigated in a longitudinal study.

There is also the possibility that the relationship between health and decision making is bidirectional. That is that the lower the intention to leave, the more depressed a woman may get, perhaps feeling as though they are letting themselves or other people down. This may be particularly the case for women who have a pre-existing risk for depression, i.e. those previously exposed to trauma, or with negative self-schemas (Campbell, Kub & Rose, 1996).

Exposure to the abusive situation or feeling trapped may increase the risk of depression, and perpetuate the cycle of reinforcement between this and termination decisions. This is somewhat supported by the finding that the feeling of failure in those with self critical schemas has been shown to trigger depression (Campbell, Kub & Rose, 1996). Failure in this case could be associated with not being able to leave, which coupled with low self esteem (evident in the women in this study) could be influencing levels of affect.

Intentions to Return

Theory of Reasoned Action/Theory of Planned Behaviour

For women who had left their relationships, the intention to return was rated on average as 'quite unlikely'. This is consistent with other studies of women in shelters, showing that the majority intend to permanently separate from their partners despite high levels of past returning (Aguirre, 1985, Griffing et al, 2002). Where women had been separated from their partner for a considerable

period of time (25% over 3 years) there can be a greater degree of confidence between such intentions and future behaviour. This is perhaps less so for women who have more recently separated where the likelihood to return is often underestimated (Griffing et al., 2002, Martin, 2000).

In predicting these intentions nevertheless, results supported the applicability of the Theory of Reasoned Action and hypothesis 2. PBC did not significantly contribute thus the Theory of Planned Behaviour to explain intentions to return could not be supported. Interestingly furthermore, it was participants attitude and subjective norm towards leaving, rather than returning that predicted the most variance, explaining twice that of these components in relation to leaving.

In terms of explaining the failure of PBC to significantly predict intentions, no belief based measure was used to assess this in relation to returning, thus as already suggested with intentions to leave, it may simply be that the direct measure was not sensitive enough to assess this construct. It may also be however that PBC is not a predictive factor of women's decisions to return. As discussed with regards to hypothesis 2, it may be that for many women Internal or external 'barriers', such as those affecting women's intentions to leave, will not be relevant. Women may simply feel in control of whether they return, which for many will be likely, especially if they are not minimising the difficulties they may face in leaving (indicated by the significance of PBC for leaving). Equally they may have received help with these barriers, realising their capabilities and potential.

The predictive utility of the components in relation to leaving to predict intentions to return is difficult to interpret. Participants' thoughts and feelings, as

well as those of significant others (with respect to them leaving the relationship) were more influential in the decision to return than their current attitudes, or those of significant others. Perhaps the most plausible explanation for this concerns clarity that participants may have in regards to the decision to leave, where they have direct experience and its impact is wide ranging. In contrast for many, dealing with decisions to return may represent a more uncertain and hypothetical experience and thus their responses may contain more ambiguity resulting in poorer predictability. In addition, measures used for returning did not specify a time frame in their assessment, for example 'my attitude towards returning to my partner in the *next year* is good / bad'. This may have served to maintain the hypothetical view of the behaviour in question and affect predictability.

Demographics / Victimisation

As with intentions to leave, no demographic or victimisation variables significantly predicted intentions to return. This is inconsistent with previous research suggesting that social and demographic variables influence this decision (Aguirre, 1985, Horton & Johnson, 1993) but supports findings that report no association between intentions to return and exposure to violence (Aguirre, 1985). As with leaving, both demographics and exposure to abuse may have more indirect effects on the decision to return by affecting the reported attitude and subjective norm of the women towards this. Correlations between these variables and the TPB components only partially supported this theory however with only one significant correlation between ethnicity and attitude, and correlations approaching significance between overall victimisation

and subjective norm and sexual coercion and attitude. As attitude and subjective norm towards returning were not predictive of women's intentions to return anyhow, however, it is difficult to determine their effect. Thus these results may suggest that situational factors and exposure to abuse are not associated with participant's decision to return directly or indirectly. This implies that a decision to return is influenced by other factors than experienced abuse, age, ethnicity, education and economic status. Therefore interventions in this area would not need to be tailored according to these factors, and would have generalised applicability across a wide range of women, regardless of their status and experience.

Relationship Variables, Health and Social Support

Other exposure to abuse (parental, previous relationship), relationship duration, duration since leaving and the number of previous separations were not associated with intentions to return. In addition neither were any health variables or social support, which may have been expected based on their association with intentions to leave. These findings are consistent with previous research investigating relationship duration and number of previous separations (Griffing et al, 2002, Martin, 2000). In comparison duration since leaving has received relatively little attention, although a longer refuge stay has been associated with decreased intentions to return (Compton et al, 1989, Hilbert, Kolia & VanLeeuwen, 1997, Snyder & Scheer, 1981) which is not supported by these results.

Health

Depression, Anxiety & Stress

Scores on the DASS-21 scale indicated a very high level of depression amongst participants in comparison to a normative sample, with the mean above the 96th percentile (Henry & Crawford, 2005). Clinically, using the DASS severity ratings (Loviband & Loviband, 1995) the level of depression in the sample is 'severe', which is comparable and slightly higher than a clinical population formally diagnosed with various mood and anxiety disorders (Brown, Chorpita, Korotitsch & Barlow, 1996). Participants mean score on the HRQOL depression scale, although perhaps a less reliable measure, (only consisting of 1 item) was also twice that of a compared clinical sample (Mielenz et al, 2006).

Similarly participants showed high levels of anxiety and stress in comparison to a normative sample, with means above the 95th and 92nd percentile (Henry & Crawford, 2005). Under the DASS severity ratings, anxiety was also rated as 'severe' whilst stress was at the higher end of the 'moderate' scale. This was reflected in comparisons with a clinical sample, with levels of anxiety only slightly lower but interestingly stress considerably lower (Brown et al, 1996). Anxiety as measured on the QOL was significantly higher than that of a clinical sample (Mielenz et al, 2006).

The attentional probe task designed to measure levels of anxiety and anxiety vulnerability, through the assessment of participant's attention towards threatening stimuli, showed no significant difference between attention to

neutral and threat words. This is inconsistent with questionnaire data and studies that have shown high trait anxiety individuals to faster detect words in the vicinity of threat (MacLeod et al. 2007).

Self Esteem

Participants self esteem was considerably lower than that previously reported for a domestic violence sample (Katz & Beach, 2000). Although such findings are consistent with the low self esteem reported in domestic violence populations, the low reliability score for this scale suggests that results should be interpreted with some caution. The low alpha may reflect feelings of confusion with respect to the framing of statements, with both positively and negatively worded items interspersed. As there were a limited amount of items such an effect would be detrimental to the scales reliability. In future research, an alternative scale may be considered.

The poor mental health reported by participants is consistent with previous studies that identified high levels of emotional disturbance in abused women (Golding, 1999). Whether this is a direct effect of the abuse experienced, (supporting the stress model of depression) will continue to be debated between aetiological models, yet it can be somewhat inferred from the results of this study. Positive and mostly significant correlations between overall victimisation and the majority of the mental health measures were found, which may reflect a 'reaction' to the abusive situation. Physical abuse may be the most predictive of this reaction, as indicated by the regression model to be the only significant predictor of mental health. These findings support the hypotheses in relation to

mental health which predicted a negative association between this and abuse, but suggests that a specific definition of abuse should be adopted. Other types of abuse did not show this significant relationship.

The findings also contrast with studies such as Dutton's (2006) that showed psychological abuse to be more predictive of PTSD than physical abuse alone whilst supporting studies such as Campbell, Kub, Belknap and Templin (1997) showing abuse, particularly physical to be a significant predictor of depression.

Physical Health

Participants' physical health was significantly worse than that reported for a normative sample, but significantly better than a clinical sample. Limitation of activity as a function of this poor health and the impact of pain upon daily living were also significantly better than the compared samples. Such results might be expected in such comparisons, with the sample not having any specific ailment, but as previous research suggests, perhaps having higher incidences of health problems than controls or standard estimates (Brewer et al, in press, Dutton, 2006, Porcerelli, West, Binienda &Cogan, 2006). Whether this is attributable to abuse, supporting the hypotheses, is partially supported in this study. Sexual coercion was the only significant victimisation predictor, with age and social support accounting for the remaining variance. This supports studies that have shown sexual and physical abuse to be more predictive of physical health than physical violence alone (Dutton, 2006). Although physical violence was not independently associated with health to a high degree, it is likely to have been

incorporated in the sexual measure. A correlation of .56 between physical abuse and sexual coercion supports this.

While not explored in this study, poor physical health could also be a consequence of the negative mental health that was prevalent in this sample. Studies have shown that PTSD and depression can lead to negative health behaviours, from substance abuse, poor diet, lack of exercise and safe sex to medical adherence and compliance. Such issues, as well as a 'heightened' state as shown in PTSD, may increase the risk of disease, as well as minor infections (Dutton, 2006). In addition, the relationship between all negative health outcomes and the SES of the sample was not explored. Studies have shown the association between abuse and health to be strongest in low income women (Sutherland, Sullivan & Bybee, 2001). As low income women mainly comprised the sample, (less than 10% had an income of £15,600 +) it was not possible to examine this through a comparison of higher and lower income groups.

Social Support & Health

The role of social support as a moderator of the health effects of abuse is partially supported by the results of the study, thus providing partial support for the final hypotheses. Bivariate correlations suggested no association between overall mental health or any of the DASS measures and social support, yet social support was shown to be a significant predictor of physical health.

Furthermore, a significant negative interaction with this and sexual coercion (another independent predictor) suggested it's mediational role, most likely in a

diminishing capacity in line with the stress buffering hypothesis, and other studies that have shown its 'protective role' in domestic violence (Carlson, McNutt, Choi & Rose, 2002) or other stressors such as child abuse and disease (Cobb, 1995, Litty, Kowalski & Minor, 1996,). It should also be noted that significant or marginally significant associations were also shown between social support and other aspects of mental health, for example self esteem, but these were not explored in the scope of this study. The association between social support and psychological abuse therefore should not be entirely discounted.

Implications for Interventions

It seems logical that in contemplating where behavioural interventions based on the TPB may be most effective, consideration should be given to the relative influence shown by the predictor variables. Changing a factor more predominant in women's decisions will increase the likelihood of influencing intentions and behaviour (Ajzen, 1996). As identified earlier, it is difficult to be clear about the exact influence of some of the components, but suggestions can be made based on the results generated.

In terms of PBC, the influence of the internal measure suggests that this should be a specific area of intervention. The failure of PBC as a direct measure to show significance should not have any bearing on the suggestion of help in this area as this may have been attributable to methodological issues. It is clear that when evaluating the decision to leave the participants in this study may have benefited from support to address their perceptions of their capabilities and

control needed to live independently, both of which are likely to have been affected by their relationship. It is not that they are helpless; simply a loss in personal integrity and confidence has challenged their abilities, which needs to be addressed as along with other factors it is, or has been, clearly maintaining their time in the abusive relationship. Drawing parallels between the process of leaving an abusive relationship and experiencing a bereavement, Abraham (2007) supports this idea, suggesting that in contrast to bereavement, in domestic violence it is the practical aspects that become emphasised in the support process and the emotional support is overlooked. Support focusing on increasing confidence, self esteem and bringing a sense of control back to women's lives therefore is crucial.

As attitude and subjective norm were also independent predictors of participant's behavioural intentions to leave and return, interventions should also focus on these areas. One way to approach this would be to attempt to change, or at least address some of the negative beliefs that women may hold in relation to these areas, for example 'If I leave I will not have anywhere to go'. Interventions can attempt to change unrealistic beliefs and evaluations, helping to either reduce them in women overestimating particular consequences or emphasise their importance in women that may underestimate them.

Conversely instead of 'attacking' beliefs, interventions can also work to create new ones. Providing women with information to start this process and educating them so that they may start to question their own beliefs may be all that is needed.

As there was no significant association between the beliefs thought to underpin attitude and subjective norm and the direct measure of these components, it is difficult to suggest that changing the beliefs of participants in this study would influence either area. Furthermore as the current study consistent with Ballantine (2005) showed that the belief based measures of these components were not predictive of intentions, it should be questioned whether focusing on these beliefs would be of any value. Further research using beliefs that have been established as salient would need to explore the link between intentions and thus the implications for support.

In terms of health, the study suggests that as well as focusing on the cognitive processes of women to help them leave or remain out of an abusive relationship, it is important that their mental health is addressed. Depression and low self esteem were very high in this sample. Although not significant predictors of intentions to leave or return, for leaving particularly, depression explained a great deal of variance which as discussed may be feeding into attitude and PBC for example. This would make sense given the finding of low internal PBC and suggests that interventions as well as attempting to change or formulate new beliefs should address this level of affect as a starting point. Changing beliefs may be temporary, but increasing a woman's self esteem and helping her to seek help for her depression if she has not already done so will likely have longer term effects. Such help should be given whether or not this factor is shown as pertinent in decisions. Both are likely to impact on the women's future outside an abusive relationship and may increase the risk of entering into other abusive situations.

Limitations

Sample

Perhaps the main limitation of the study was the small sample size of 31 women (27 for the survey analyses). This reflects the difficulty with both accessing and recruiting this population, and imposed certain limitations, particularly in the regression analyses. Caution had to be taken with the number of predictors entered into models which limited the scope of the models that could be explored. Furthermore a small sample restricted the likelihood that potential predictors would reach significance. Thus variables approaching significance in correlation and regression analyses may be considered of note and, particular attention should be paid to their effect sizes.

This difficulty in recruiting this population also imposed limitations on the samples characteristics and variation, with regards to the original aim of the study. Addressing a criticism of past research in this area, the study originally aimed to gain a wider sample incorporating women remaining in abusive relationships. Thus giving the opportunity for decisional processes, health and social support variables to be compared between women remaining with a partner and women that have left, and prospective data which addresses issues such as memory bias that may occur with retrospective data. Access to women remaining in relationships was extremely difficult to obtain however within the given time period, with only a small number of women recruited. Where access was gained, women in this situation were not as keen to participate through

worries of confidentiality or the tendency to view their relationship in a more positive light than it perhaps was.

Thus as displayed in the demographic information, the majority of participants were women currently residing in refuges, or who had previously lived in refuge accommodation. This presents a potential bias as these are most likely women that are exposed to more extreme forms of abuse (intimate terroism). Their decision processes, particularly if leaving their home and potentially beginning a new life somewhere may be very different to those experiencing less severe abuse or engaging in 'common couple violence'. Furthermore, the majority of the women in refuges were white, Caucasian, had low income and were largely unemployed. Some Asian women willing to participate, particularly those in specific Asian support services, could not be included due to translation demands. Thus the study was accessing a very specific sample of women, and had less variation in terms of ethnicity and income than it had originally hoped.

In addition the willingness of some women to take part in the study could represent a source of bias in this area. It may be that those choosing to participate (which were mainly older women that had been in the refuge for a greater duration or were now living independently) were substantially different in the evaluation of the TPB components to what those opting out of the study would have been. This may be a result of age or experiences. The health and dynamics of social support is also likely to differ from those younger and choosing not to participate, which although being controlled for in certain analyses (e.g. age as a covariate in the effects of domestic violence on health) still limits the variability within these variables and thus generalisability of the

findings pertaining to them. Future research with more time and resources could address these difficulties.

Instruments

Some women expressed difficulty or confusion with the relationship decisions questionnaire, finding it repetitive in places and a little onerous. This was mainly stated with regards to the belief based measures, for example attitude, where a number of similar items were used and participants were asked to rate them for both likelihood and evaluation. In hindsight, fewer items could have been used, particularly for participants answering retrospectively, where they were also required to answer the same questions regarding returning. The most appropriate way to address this and other problems with the belief based measures such as the relevancy of some items, would have been to conduct a focus group with a separate pool of respondents to identify relevant concerns and beliefs (Francis et al, 2004). This may also have proved useful with the assessment of returning, which as the results showed was better predicted by the constructs predicting the decision to leave. Although this provides support for the theory's applicability in this area, identifying beliefs specific to returning may have yielded greater applicability of the theories components and explained greater variance. Unfortunately time and sample limitations meant this was not possible in this study.

Also identified retrospectively as a potential source of bias within the results is that the method of data collection differed amongst participants. This mainly involved the administering of the survey instruments. Those that requested assistance were given help in reading / completing the instruments whilst others completed independently, either in the presence of the researcher, or in their own time. This is also relevant to the interviews, where on 2 occasions these were conducted over the telephone, as opposed to face to face. The main implication of this variance in data collection is that women receiving support with the survey instruments or completing them in the presence of the researcher may not have answered as truthfully as those completing them independently. This may be because of embarrassment, shame of their situation, or guilt if they had also perpetrated violence (e.g on CTS-2 completion). Similarly women taking part in interviews over the telephone may have been in a situation where they felt inhibited to disclose or felt less inclined to talk freely due to the impersonal nature of the telephone.

It was also noticed that women that were able and motivated to complete the questionnaires independently were women predominantly living independently, having received refuge support in previous years, or receiving outreach support, still in the abusive relationship. Although this does not imply that women residing in the refuges were less educated or that the results of the study would be different if women in refuges only comprised the sample, it does perhaps limit the extent that the results can be generalised to a shelter population.

Design

The cross-sectional nature of this study fares the same criticism as that given to the Byrne and Arias study in this area (Rhatigan et al, 2006). Assessing abused women's decision making processes at only one time point is somewhat limited due to their changing and ongoing nature. The importance of certain factors and subsequently the predictive utility of the models components are likely to change throughout the relationship, which a longitudinal design could assess and consider in the implications for intervention. This was not possible in the given time frame but would be a strong advantage in further research.

For the majority of participants, the study also involved retrospective assessment of their decisions to leave their partners. In investigating intentions to leave, this can only be avoided by using solely participants still remaining in relationships, which to the author's knowledge no studies have done to date. Alternatively research could investigate decisions of women to permanently leave their relationships. It was felt that this would be confusing to participants however and may not capture the factors that made them go to the refuge originally. It may rather assess their cognitions in relation to returning. Although this study suggests there may be congruence with these cognitions and those with regards to leaving, there are also differences. Furthermore it suggests that participants may have not seriously left, implying an expectation that they will return.

Attempts were made to manage this retrospective assessment by using a separate instrument for 'left' participants that was worded retrospectively and emphasised the need for them to focus on feelings at the time of making their final decision to leave, not those in hindsight. This was also reiterated during initial briefings to participants. Although it is likely that some memory biases may have occurred, it should be noted that participants expressed vivid memories of their whole experience, particularly their cognitions.

The use of contemporary health and social support assessment as predictors for the retrospectively reported decision making is another weakness of the design. When designing the study, it was envisaged that all participants would be either still in a relationship or only recently left, thus current ratings of affect and support could be reliably associated with current or recent intentions and behaviour. Whilst for many participants at the time of completion retrospective reporting was less than 12 months (65%), for some it was considerably longer (25% >3 years). For these participants a high association between past affect and support and their current situation was assumed in the analyses, which may not have been the case.

Coding

When asking participants to specify the number of previous separations they had experienced from their partner, 22% answered 'many times' or that their relationship had been 'on or off'. In such cases in order to quantify and code this information ordinally for analyses, this was given a value of 'more than 5' by the researcher, as it was interpreted that anything less than this participants would have specified a number. In hindsight both 'many times' and 'on and off' are open to subjective interpretation, where for example a woman in a 3 month relationship may class 3 breaks as 'many'. It would have been more useful to ask participants to quantify their response themselves, using categories of more than 5 or 10 if they couldn't be specific. This should be considered in the future by researchers measuring this subjective variable.

Future Research

Ideally future research would involve a longitudinal prospective study of women who at the time of recruitment were contemplating but had not implemented decisions to leave the relationship. Furthermore it would be valuable if the sample included a group of participants who were contemplating leaving the relationship for reasons other than exposure to domestic violence, to enable comparisons between the two. In both cases it would be important to conduct preliminary studies to develop suitable research materials, i.e. using focus groups to evaluate the operationalisation of the constructs to be tested.

The scope of this research did not enable male victims of domestic violence to be included. As males are equally victims of domestic violence (as discussed in the introduction to the study), it would be interesting to explore the decision making process in such a sample to further test the applicability of the TPB and compare the evaluative process between genders. It has been shown that differences exist between men and women in their perceptions of domestic violence thus it is reasonable to assume that their thought processes with regards to leaving an abusive relationship may differ also. In the 2001 BCS for example it was found that women were more likely to view domestic violence as a crime (64% compared to 94% of men, Walby & Allen, 2004). Attitudes and the views of others may be evaluated much differently by men if they are more likely to 'normalise' their situation.

A focus group with a subset of abused men to identify their most salient beliefs, fears and concerns would need to be conducted prior to this research to ensure

the relevance of the survey instrument. It would also be interesting to explore the health and social support status of male victims and how this may influence their decisions to leave. Social support for example has been shown to be less important to men, (for example in the recovery of depression, Skarsater, 2002) thus both its direct and moderating role as shown in this study may not be relevant in a male sample. It could also be speculated that perceived behavioural control, particularly external may be more relevant in men's decision making as men are perhaps more likely to be influenced by practical factors than emotional and internal.

A number of studies predicting health behaviours have provided evidence towards extending the TPB (Conner & McMillan, 1999, Fekadu & Kraft, 2002, Hamilton & White, 2008, Jackson, Smith & Conner, 2003, Kam, Matsunaga, Hecht & Ndiaye, 2009). Most commonly investigated has been the addition to subjective norm, hypothesising its multidimensionality not fully accounted for by Ajzen's original model. Evidence seems to support this showing increased variance of the model by other norm measures, in particular 'descriptive' norms; the perceptions of others behaviour; whether they are doing it, or would do it if the situation arose (Conner & McMillan, 1999, Fekadu & Kraft, 2002, Rivis & Sheeran, 2003,). This is considered an independent concept from 'injunctive norms' (perceived social pressure) which generally makes up the subjective norm component. Items assessing both types made up the direct measure of subjective norm in this study, which may explain the significance of this component in contrast to studies such as Byrne and Arias (2004) who used injunctive norms only. Analysis did not assess the relative contribution of each however which could be informative in a future study. It would also be

interesting to assess the importance of subjective norm as a function of self categorisation. A distinction has been proposed between 'high' and 'low identifiers' of social groups where norms may be more predictive of intentions for those categorised as high.

Qualitative Data

Interviews were conducted to explore the decision-making process further, adding context and meaning to the survey data. Interviews were conducted with 30 women and subsequently transcribed verbatim. An example of this is shown in Appendix 20. Time constraints and space within the thesis led to the decision to leave these interviews for future analysis and reporting. Such analysis will then be linked with the quantitative data, for example, to support the significance of the internal perceived behavioural control finding. The interviews will identify the type of barriers that may be important to women in the stay/leave decision process and their influence on the final decision. The interviews also aim to explore the nature of the decisions made, i.e. to support the general consensus that it is an ongoing process, occurring over a long period of time; women are fully aware the relationship is abusive and they must leave, yet they are unable to do so due to a variety of factors (Ballantine, 2005). Importantly in interviews conducted by Ballantine, she found that the decision process began after an awareness of being in an abusive relationship. Subsequently this often occurred after a critical event. This seemed to also be a consistent theme emerging from the participants in this study, which will need to be more closely scrutinised. This could have important implications for professionals working in this area as well as related fields, such as mental

health services. Sensitively helping women that may have not yet identified themselves as 'abused', particularly if they see the situation as 'normal', to realise their situation, can help to start the decision process, for which they can receive more professional support.

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Department of Psychology RISK ASSESSMENT FORM (Medium & High Risk, Student Version)

Use this form to risk-assess:

Student: 4

- Off-campus student activities (research, fieldwork, educational visits etc) in medium/high risk environments such as factories, farms, prisons, or remote areas.
- All student activities involving medium/high risk procedures or use of specialist equipment.

For low risk locations and activities, use the appropriate low risk form.

By:

This form should be completed by the staff member responsible for the activity (e.g. the project supervisor), in consultation with the student and a qualified or otherwise competent person (normally a technician or Faculty HSE officer). Completed forms must be countersigned by the Head of Department or the Chair of the Department Health & Safety Committee.

Assessment Undertaken Assessment Verified By:

(Technician or other

	(Staff member)	competent person)			
Name: Jemma Hill	Name:	Name:			
Signed:	Signed:	Signed:			
Date:	Date:	Date*:			
*Note: Risk Assessment is valid for one year from the date given above. Risk Assessments for activities lasting longer than one year should be reviewed annually.					
Countersigned by Head of Dept or Chair of H&S Committee:					
Date:					
AND	(USSS) programs in a program of the control of the	Text Service (Angle Service Se			
Risk Assessment For:					
Activity:					
MSc by Research - 'Predictors and Consequences of Decision Making in Violent					
Relationships'.					
Location of Activity:					
Appropriate 3 rd party venues where participation can be conducted with an assurance of confidentiality. Mainly shelters and outreach support centres. Safe venues will be arranged following risk assessment and the university's procedures will be followed at all times.					

List significant hazards here:	List groups of people who are at risk:	List existing controls, or refer to safety procedures etc:	For risks which are not adequately controlled, list the action needed:	Remaining level of risk (high, medium or low):
Breach of confidentiality leading to the participant's spouse, family, co-workers, or others gaining knowledge of their participation in the study.	Participants	 1a. All materials collected as part of the survey will be anonymous and coded using a unique participant PIN. 1b. Survey materials distributed to participants, and as part of publicising the study will make no reference to domestic violence, but will rather refer to the study as examining personal relationships and decision making and its relation to health and well being. The debriefing sheet will provide details on support services relating to domestic violence but participants are reminded to keep the information in a safe place in case their partner reacts badly. 1c. Where the risk assessment raises significant questions concerning safety and the ability to ensure confidentiality the researchers will explain that they cannot recommend that the person participate, but will explain that should their circumstances change we would review the circumstances with a view to inviting them to participate at a later stage. 		1. Low
Being asked to reflect upon painful, distressing and threatening experiences as part of participation could lead to significant emotional distress.	Participants	2. The nature of the issues being dealt with as part of research into domestic violence means that some participants might encounter strong emotional reactions to the materials they are being invited to respond to as part of the survey. a. Before anyone completes the survey they will have been explicitly briefed on the nature of the study and will have been taken through a risk assessment procedure. This will deal with: i. The likelihood that some participants might have a strong emotional reaction to some of the questions, and that if they feel that this possibility concerns them that they should not participate further;		2. Low

	ii. The importance that anyone who is receiving treatment for a pre- existing psychiatric illness or one resulting from domestic violence may not participate; iii. That participation is completely voluntary and that agreement to take part in the study is not an irrevocable commitment and that they can change their mind at any point;	
Survey responses identify a risk of domestic violence based upon the responses of a participant. Participants	iv. Providing details of sources of support which are available should the participant want to seek help. 3. To ensure participant confidentiality the survey instrument is anonymous, being coded by participant number. This means that at the time of coding it is impossible to identify and contact individuals should their responses suggest a history of domestic violence and no	3. Low
4. During the interview the participant discloses information revealing a significant risk to their safety or that of their children.	evidence of support in place. To address this problem information about accessing support providers will be made available to all who come to the briefing and risk assessment sessions. Furthermore we will provide our contact details should they wish to ask us any questions. 4. Participants will be briefed in the interview that in the event that the researcher is alerted to any significant threat to the participant or their children on the basis of information communicated in the interview, that the researcher is ethically obliged to ensure that this information is brought to the attention of the domestic	4. Low
5. Risks to personal safety Researcher	violence support team, having first consulted the participant. 5. I have read attached safety guidelines and will adopt for lone working. I will have a mobile phone with me and supervisors will be made aware of my exact whereabouts. However, if in spite of all precautions anything occurs that might endanger the safety of me and/or the participant, the activity will be suspended as	5. Low

		appropriate. Any such incidences and unforeseen changes of activity will be reported to my supervisors for recording and assessment.	
6. Normal emergency situations (e.g. fire)	Researcher	I will familiarise myself with fire drill and any other relevant emergency procedures at the activity location.	6. Low
7. Use of electrical equipment	Researcher	Only PAT tested electrical equipment will be used. Any trailing cables etc will be taped down.	7. Low

Continue on another sheet if necessary.

Please pass completed forms to Mike Eslea, Chair, Psychology Dept Health & Safety Committee.

Page 2 of 2

Appendix 2 - Participating Domestic Violence Organisations

1. Blackburn, Darwen & District Women's Aid

P.O. Box 120, Blackburn, Lancashire, BB2 1LG, 01254 55111

2. <u>Liverpool Women & Children's Aid Centre</u> Centre 56, Limited

Liverpool, Merseyside, L2 2DH 0151 727 1355

3. East Lancashire Women's Refuge Association

PO Box 9, Burnley, Lancashire 01282 414130

4. Stockport Women's Centre

Kythera House, 19/21 Greek Street, Stockport, SK3 8AB 0161 355 4455

5. Pendle Women's Refuge

Housing Needs, 2 Duke Street, Colne, Lancashire 01282 661989

6. Saheli Ltd Refuge

PO Box 44, SDO, Manchester, M14 6AA 0161 945 4187

7. Sojurners House

PO:box 79'SWDO, Manchester, M16 8BG

8. West Lancs Women's Refuge

PO Box 16, Glebe Road, Skelmersdale, Lancashire, WN8 6XZ 01695 580049

Appendix 3 - Study Information Sheet for Organisations



Study Information Sheet

The study

The proposed study is aiming to investigate the area of decision making within abusive intimate partner relationships. Specifically we aim to explore the factors involved and subsequently their evaluation in women's decisions to stay, leave and return to abusive relationships, in relation to a psychological theory, concerning planning behaviour. The study will also examine the health consequences that arise from such decisions, focusing particularly on mental health/ emotional well-being.

It is hoped that a better understanding of the complex leave/stay/return decision process could lead to improved services for women. At the end of the study we will be happy to provide a summary of the findings.

Participants

We are looking for women from any background and sexuality to participate in the current study to ensure a broad range of women are represented. Women should generally fall into one of two categories, 1) women that have LEFT their abusive relationship and are currently residing in temporary shelter accommodation, or alternatively living independently in the community and 2) women that have STAYED in abusive relationships and are receiving outreach or floating support. Ideally we are hoping to recruit about 75 participants.

What does participation involve?

Participation in this study will involve completing 3 short questionnaires, covering patterns and severity of abuse, health & well-being and decision making. It will also involve a short semi-structured interview assessing areas of decision making and relationship history and an attentional probe task, which involves participants responding to cues on a computer screen. Overall participation in the study should roughly take 90 minutes and can be scheduled for a mutually convenient time at a place where the participant feels comfortable.

Ethical Issues Considered

The proposed study has been subject to a full ethical review by the departments' ethical committee, including a risk assessment for off campus activities. It is part of a wider programme of research addressing the health implications of intimate partner violence that has been conducted with a number of domestic violence agencies within the North-West. We are fully aware of the highly sensitive nature of domestic violence and all ethical issues have been considered and addressed within the research design, including confidentiality, anonymity, informed consent, right to withdraw and possible distress and discomfort to participants:-

Confidentiality/Anonymity - Participants will be identifiable throughout the study only by a unique Pin used to link the data sources. All the anonymous data will be kept in a locked filing cabinet, to be seen only by myself, my supervisors, and others with a legitimate need to see the data e.g. journal editors. The only exception to absolute anonymity would be in the unlikely instance that the research team were seriously concerned about a participant's safety or that of others (e.g. their children) on the basis of something that was disclosed. In such a case the researcher would communicate their concerns to an appropriate member of the participants support team, and then only after consulting the participant.

Right to Withdraw – Participants can choose to withdraw from the study at any point up until they have completed the last stage. After this time, the unique pin is removed from each data source thus due to anonymity they will be non-identifiable.

Possible Distress/Discomfort – Potential participants will be given a study introduction detailing what the study will involve and highlighting the sensitive nature of some of the questions that will be asked. Participants will be fully debriefed at the end of the study and informed about further sources of support available.

Appendix 4 – Introductory Letter to Organisations

(Manager Name) (Address)

(Date)

Dear (Manager Name)

I am writing to you following my initial phone call to discuss whether your organisation would consider participation in a research project looking at the decision making processes concerning staying in or leaving an abusive relationship, and the consequences of these decisions on health.

Just to recap I am conducting research as a member of a team looking at aspects of Domestic Violence, Health and Wellbeing across the North West with Dr Mark Roy and Dr Gayle Brewer from the Health Psychology Research Group at the University of Central Lancashire.

In our telephone conversation I said I would send you some general information about the project for you to look at with a view to setting up a meeting at which we could take discussions further regarding the practical side of participation and answer any questions you have. I have enclosed that information in this letter.

I am looking to recruit people both who are being supported having left an abusive relationship and those supported through outreach who remain in such. For this project the length of time since support started or since they have left the relationship does not matter, and I would like to recruit anyone who is interested from your client group.

I will contact you later next week to discuss your potential participation. In the meantime please feel free to contact me if you have any queries or would like any further information.

Yours faithfully

Jemma Hill, BSc Domestic Violence Health and Wellbeing Research Programme Health Psychology Research Group School of Psychology UCLAN

Tel: 01772 895174

E-mail: jhill2@uclan.ac.uk

Appendix 5 - Introductory Email to Organisations

Jemma Hill - UCLAN Research Study

From:

Jemma Hill

Subject: UCLAN Research Study

Dear (Manager Name)

Further to our telephone conversation yesterday, please find attached an information sheet regarding our proposed study.

I will contact you early next week to see if you have had chance to consider the project and would be interested in setting up a meeting to discuss your involvement further. In the meantime please feel free to contact me if you have any queries or would like further information.

Kind Regards

Jemma

Jemma Hill -Health Psychology Research Group Department of Psychology Darwin Building University of Central Lancashire Preston PR1 2HE Tel: 01772 895174



Appendix 6: Study Information Sheet for Participants

Study information Sheet

The study

I am investigating the area of decision making within personal relationships and its relation to health and wellbeing. I am looking for women from any background and sexuality to participate in the current study that have either *left a relationship that they are currently receiving agency support for, or are still in a relationship and receiving support.*

I am conducting the study for a Masters degree at the University. The data obtained will be used to write my thesis, and possibly a paper for publication in the future. In either case there will be no reporting of any individual participant's information, with the possible exception of interview quotations. You will be asked for your agreement to this prior to the interview however if you decide to take part.

By combining your responses with those of lots of other participants' I hope to build an overall picture and contribute to an understanding of why certain decisions are made within personal relationships and how these may affect health and wellbeing. In turn this may help to develop ways of helping where personal relationships are affecting health and wellbeing.

Your wellbeing as a Participant

I do not want to put anybody who participates at risk.

This first part of the study asks questions about your behaviour and the behaviour of your partner

(including verbal and physical abuse).

Please think about how your partner would react if he/she found out that you were taking part in this

study and only complete this if you can do so in a safe place.

Also as I will ask you about sensitive topics, such as feelings of depression and anxiety you may

What does it involve?

Participation in this study will involve completing 3 questionnaires, about your current or most recent relationship that you are receiving agency support for, your health & well-being and decision making. It will also involve a short interview and an attentional task. You will not be asked your name, simply given a pin number to link your participation at each stage of the study. You can withdraw at any point up until the end of the study where your pin will be handed in and you will be non-identifiable. The only exception to absolute anonymity would be in the unlikely instance that the research team were seriously concerned about your safety or that of others (e.g. your children) on the basis of something that you disclosed. In such a case the researcher would communicate their concerns to an appropriate member of your support team, and then only after consulting you.

The questionnaires are as follows:

Part 1 addresses relationships and behaviours. It deals with very sensitive topics that you may find distressing (takes about 15 mins)

Part 2 investigates your health and wellbeing, particularly focusing on mental health (takes about 10 mins)

Part 3 investigates decision making, specifically the decision to leave or stay in the relationship you ar receiving support for (takes about 20 minutes)

(Help is available throughout to read questions if preferred).

The attentional probe task will involve you responding to cues on a computer screen and will not take longer than 4 minutes. The interview will involve a series of open and closed questions, regarding the history of your relationship and decisions made within them. This should take no longer than 20 minutes. **Overall participation will take on average 90 minutes.**

Before you begin the study it will be necessary for you to identify to the researcher whether you class yourself as still in a relationship or you have left as this will determine the questions that you are asked. If you feel that you do not fit into either one of these categories, please inform the researcher.

Thank you very much for your help.

Jemma Hill

Appendix 7 - Personal Relationships Questionnaire

Personal Relationships Questionnaire

This section of the questionnaire asks in detail about your personal relationships and in particular about issues such as how you resolve arguments and how you behave towards each other. The questionnaire does contain sensitive questions, such as whether you suffer / have suffered from or used physical or psychological abuse. Even if you do not think that this topic applies to you'l would appreciate your help as I would like to get a wide range of responses. Questions on the first page ask about your age, ethnicity etc, this is because I would like to hear from a wide range of people from a variety of backgrounds.

Although I would like you to attempt each question, you can leave questions blank if you do not wish to answer lif you feel distressed by any of the questions, there are sources of support at the end of the questionnaire. As already stated you can withdraw at any point up until completion of the interview (the final task) that you will also be asked to participate in:

Please read the instructions on the top of each page as the instructions will differ slightly for each questionnaire.

Thank you for taking part. If you have any questions about the study please contact me.

Jemma Hill

Supervisors: Dr Mark Roy / Dr Gayle Brewer

(jhill2@uclan.ac.uk)

(GBrewer@UCLan.ac.uk or MPRoy@UCLan.ac.uk)

01772.8951.74

01772-895173 or 01772-893752

٠.		i	Backgr	round inf	ormation								
1	What is your age?	years											
2	Which one best repre	sents your ethnicity	? (Plea	ase circle)								
	a) White - British - Irish - Any other White background (please specify)	Caribbean - White and Black African - White and Asian	- White and Black Caribbean - White and Black African - White and Asian - White and Asian - Any other Mixed background British - Pakist - Pakist - Bangla Any oth background (please		deshi r Asian and	Brit - Ca - Af - Ar bac	Black or Black tish eribbean rican ny other Black ekground ease specify)	e) Chinese or other ethnic group - Chinese - Any other (please specify)					
4	Are you:		Male			— <u></u> ! —	Female						
5	How many children le	ss than 18 years of	age li	ve in your	househol	d?							
6	Please read the follow college education you					escribes	the highest level	of school and					
	b.I left school with GCSE) c.I left school havi school certifica	school beyond juni out formal qualifica ing gained GCSEs ates) ing gained A levels	tions (i	e.g. er	q f. l d g. i	ualificatio graduate egree/dip	d from University oloma						
7	Which of the following	best describes yo	ur curr	ent emplo	yment sta	itus? (ple	ase circle one)						
	per week) c. Part-time Emp	oloyed for wages (le bloyed for wages in 140hrs per week)			g. S p h. F i. F	itay at ho arenting ull-time s Retired	at of work for more than 1 year ay at home for reasons of renting/childcare II-time student stired liable to work						
8	Please indicate your a one)	nnual household/fa	amily in	ncome from	m all sourc	ces e.g. v	vages, benefits e	etc (please circle					

Relationship Behaviours Questionnaire

No matter how well a couple gets along, there are times when they disagree, get annoyed with the other person, want different things from each other, or just have spats or fights because they are in a bad mood, are tired, or for some other reason. Couples also have many different ways of trying to settle their differences. This is a list of things that might happen when you have differences.

Please circle how many times you did each of these things in the past year, and how many times your partner did them in the past year. If you or your partner did not do one of these things in the past year, but it happened before that, circle "7."

0 = This has never happened.

4 = 6-10 times in the past year.

1 = Once in the past year.

5 = 11-20 times in the past year.

2 = Twice in the past year.

6 = More than 20 times in the past year.

3 = 3-5 times in the past year.

7 = Not in the past year, but it did happen before.

If you are not currently in a relationship, please answer the following based upon the abusive relationship that you are currently receiving help for.

医骨骨骨头的 化重压器分配复数 物 的形容别不匀的物理分词

. a.	Less than £5,199	
b.	£5,200 - £10,399	
c.	£10,400 - £15,599	•
d.	£15,600 - £20,799	
е.	£20,800 - £33,799	
•		

- f. £33,800 £39,999
- g. £40,000 £49,999
- h. £50,000 £69,999
- i. £70,000 £99,999
- j. £100,000 or more

Are you going to answer the survey based on:	(Please circle)
A current relationship.	A previous relationship.
Is/was this relationship with?	(Please circle)
A man.	A woman.

1	I showed my partner I cared even though we disagreed.	0	1	2	3	4	5	6	7
2	My partner showed care for me even though we disagreed.	0	1	2	3	4	5	6	7
3	I explained my side of a disagreement to my partner.	0	1	2	3	4	5	6	7
4	My partner explained his or her side of a disagreement to me.	0	1	2	3	4	5	6	7
5	I insulted or swore at my partner.			2	3	4	5	6	7
6	My partner insulted or swore at me.	0	1	2	3	4	5	6	7
7	I threw something at my partner that could hurt.	0	1	2	3	4	5	6	7
8	My partner threw something at me that could hurt.	0	1	2	3	4	5	6	7
9	I twisted my partner's arm or hair.	0	1	2	3	4	5	6	7

Please circle how many times you did each of these things in the past year, and how many times your partner did them in the past year. If you or your partner did not do one of these things in the past year, but it happened before that, circle 7/.

0 = This has never happened.

1 Once in the past year. 2 = Twice in the past year.

3=3-5 times in the past year.

4 = 6-10 times in the past year.
5 = 11-20 times in the past year.
6 = More than 20 times in the past year.

7 = Not in the past year, but it did happen before.

									
10	My partner twisted my arm or hair.	0	1	2	3	4	5	6	7
11	I had a sprain, bruise, or small cut because of a fight with my partner.	0	1	2	3	4	5	6	7
12	My partner had a sprain, bruise, or small cut because of a fight with me.	0	1	2	3	4	5	6	7
13	I showed respect for my partner's feelings about an issue.	0	1	2	3	4	5	6	7
14	My partner showed respect for my feelings about an issue.	0	1	2	3	4	5	6	7
15	I made my partner have sex without a condom.	0	1	2	3	4	5	6	7
16	My partner made me have sex without a condom.	0	1	2	3	4	5	6	7
17	I pushed or shoved my partner.	0	1	2	3	4	5	6	7
18	My partner pushed or shoved me.	0	1	2	3	4	5	6	7
19	I used force (like hitting, holding down, or using a weapon) to make my partner have oral or anal sex.	0	1	2	3	4	5	6	7
20	My partner used force (like hitting, holding down, or using a weapon) to make me have oral or anal sex.	0	1	2	3	4	5	6	7
21	I used a knife or gun on my partner.	0	1	2	3	4	5	6	7
22	My partner used a knife or gun on me.	0	1	2	3	4	5	6	7
23	I passed out from being hit on the head by my partner in a fight.	0	1	2	3	4	5	6	7
24	My partner passed out from being hit on the head in a fight with me.	0	1	2	3	4	5	6	7
25	I called my partner fat or ugly.	0	1	2	3	4	5	6	7
26	My partner called me fat or ugly.	0	1	2	3	4	5	6	7
27	I punched or hit my partner with something that could hurt.	0	1	2	3	4	5	6	7
28	My partner punched or hit me with something that could hurt.	0	1	2	3	4	5	6	7
29	I destroyed something belonging to my partner.	0	1	2	3	4	5	6	7
30	My partner destroyed something belonging to me.	0	1	2	3	4	5	6	7
31	I went to a doctor because of a fight with my partner.	0	1	2	3	4	5	6	7
32	My partner went to a doctor because of a fight with me.	0	1	2	3	4	5	6	7
33	I choked my partner.	0	1	2	3	4	5	6	7
34	My partner choked me.	0	1	2	3	4	5	6	7
	101							_	

Please circle how many times you did each of these things in the past year, and how many times your partner did them in the past year. If you or your partner did not do one of these things in the past year, but it happened before that, circle 17.7

-0 = This has never happened 4 = 6-10 times in the past year.
1 = Once in the past year 5 = 1/1-20 times in the past year.
2 = Twice in the past year 6 = More than 20 times in the past year.
3 = 3-5 times in the past year.
7 = Not in the past year, but it did happen before.

					_		_		
35	I shouted or yelled at my partner.	0	1	2	3	4	5	6	7
36	My partner shouted or yelled at me.	0	1	2	3	4	5	6	7
37	I slammed my partner against a wall.	0	1	2	3	4	5	6	7
38	My partner slammed me against a wall.	0	1	2	3	4	5	6	7
39	I said I was sure we could work out a problem.	0	1	2	3	4	5	6	7
40	My partner was sure we could work it out.	0	1	2	3	4	5	6	7
41	I needed to see a doctor because of a fight with my partner, but I didn't.	0	1	2	3	4	5	6	7
42	My partner needed to see a doctor because of a fight with me, but didn't.	0	1	2	3	4	5	6	7
43	I beat up my partner.	0	1	2	3	4	5	6	7
44	My partner beat me up.	0	1	2	3	4	5	6	7.
45	I grabbed my partner.	0	1	2	3	4	5	6	7
46	My partner grabbed me.	0	1	2	3	4	5	6	7
47	I used force (like hitting, holding down, or using a weapon) to make my partner have sex.	0	1	2	3	4	5	6	7
48	My partner used force (like hitting, holding down, or using a weapon) to make me have sex.	0	1	2	3	4	5	6	7
49	I stomped out of the room or house or yard during a disagreement.	0	1	2	3	4	5	6	7
50	My partner stomped out of the room or house or yard during a disagreement.	0	1	2	3	4	5	6	7
51	I insisted on sex when my partner did not want to (but did not use physical force).	0	1	2	3	4	5	6	7
52	My partner insisted on sex when I did not want to (but did not use physical force).	0	1	2	3	4	5	6	7
53	I slapped my partner.	0	1	2	3	4	5	6	7
54	My partner slapped me.	0	1	2	3	4	5	6	7
55	I had a broken bone from a fight with my partner.	0	1	2	3	4	5	6	7
56	My partner had a broken bone from a fight with me.	0	1	2	3	4	5	6	7
57	I used threats to make my partner have oral or anal sex.	0	1	2	3	4	5	6	7
58	My partner i used threats to make me have oral or anal sex.	0	1	2	3	4	5	6	7

Please circle how many times you did each of these things in the past year, and how many times your partner did them in the past year. If you or your partner did not do one of these things in the past year abutit happened before that circle 7.

0 = This has never happened:
1 = Once in the past year
1 = Once in the past year
2 = Twice in the past year
3 = 3-5 times in the past year
7 = Not in the past year in the did happen before.

59	I suggested a compromise to a disagreement.	0	1	2	3	4	5	6	7
60	My partner suggested a compromise to a disagreement.	0	1	2	3	4	5	6	7
61	I burned or scalded my partner on purpose.	0	1	2	3	4	5	6	7
62	My partner burned or scalded me on purpose.	0	1	2	3	4	5	6	7
63	I insisted my partner have oral or anal sex (but did not use physical force).	0	1	2	3	4	5	6	7
64	My partner insisted I have oral or anal sex (but did not use physical force).	0	1	2	3	4	5	6	7

65	I accused my partner of being a lousy lover.	0	1	2	3	4	5	6	7
66	My partner accused me of being a lousy lover.	0	1	2	.3	4	5	6	7
67	I did something to spite my partner.	0	1	2	3	4	5	6	7
68	My partner did something to spite me.	0	1	2	3	4	5	6	7
69	I threatened to hit or throw something at my partner.	0	1	2	3	4	5	6	7
70	My partner threatened to hit or throw something at me.	0	1	2	3	4	5	6	7
71	I felt physical pain that still hurt the next day because of a fight with my partner.				3	4	5	6	7
72	My partner still felt physical pain the next day because of a fight we had.	0	1	2	3	4	5	6	7
73	I kicked my partner.	0	1	2	3	4	5	6	7
74	My partner kicked me.	0	1	2	3	4	5	6	7
75	I used threats to make my partner have sex.	0	1	2	3	4	5	6	7
76	My partner used threats to make me have sex.	0	1	2	3	4	5	6	7
77	I agreed to try a solution to a disagreement my partner suggested.	0	1	2	3	4	5	6	7
78	My partner agreed to try a solution I suggested.	0	1	2	3	4	5	6	7

Profile of Psychological Abuse

As much as possible I would like you to disregard the physical abuse that has occurred in the relationship that you have either left or are still in.

The questions that are being asked here should be answered according to the psychological

The questions that are being asked here should be answered according to the psychological or emotional abuse that may have occurred in your current or a recent relationship.

Thus if you are no longer in a relationship as before please answer based on the relationship that you are receiving support for

Please show below how often you have experienced each of the behaviours from your partner by circling either "never," "less than once a month," "once a month," 2–3 times a month;" "once a week," "2–3 times a week," or "daily." If you are not sure of the exact frequency, please give your best estimate.

How often does your partner / did your partner:	Never	Less than once month	Once a month	2 -3 times a month	Once a week	2-3 times a week	Daily
Become angry or upset if you want to be with someone else and not with him?	1	2	3	4	5	6	7
Ask that everything be done in an exact way?	1	2	3	4	5	6	7
Not let you have your mail or telephone calls?	1	2	3	4	5	6	7
Make you account for the time you spend away from him?	1	2	3	4	5	6	7
5. Ignore you when you start to talk?	1	2	3	4	5	6	7
6. Say you're crazy or stupid?	1	2	3	4	5	6	7
7. Become jealous of your friends, family or pets?	1	2	3	4	5	6	7
Put you down if you cry or ask for emotional support?	1	2	3	4	5	6	7
9. Tell you that you are worthless?	1	2	3	4	5	6	7
10. Ask for detailed reports of your activities?	1	2	3	4	5	6	7
11. Ignore your need for help when you're sick or tired?	1	2	3	4	5	6	7
12. Tell you your cooking or cleaning is not right?	1	2	3	4	5	6	7
13. Ridicule the things that you value most in yourself?	1	2	3	4	5	6	7

Please show below how often you have experienced each of the behaviours from your partner by circling either "never," "less than once a month," "once a month," 2-3 times a month," "once a week," "2-3 times a week," or "daily "if you are not sure of the exact frequency, please give your best estimate. If you are no longer in a relationship as before please answer based on the relationship that you are receiving support for.

14. Make critical comments about your work inside or outside the home?	1	2	3	4	5	6	7
15. Check up on you throughout the day?	1	2	3	4	5	.6	7
16. Make the TV, a magazine, the newspaper, or other people seem more important than you are?	1	2	3	4	5	6	7
17. Threaten to hurt pets, friends, or relatives if you don't do what he wants?	1	2	3	4	5	6	7
18. Call you names like "slut" or "whore"?	1	2	3	4	5	6	7
19. Wrongly accuse you of having affairs?	1	2	3	4	5	6	7
20. Refuse to do what was sexually satisfying to you?	1	2	3	4	5	6	7
21. Discourage your plans or minimize your successes?	1	2	3	4	5	6	7

Social Support Questionnaire

Next are some questions about the support that is available to you.

1

About how many close friends and close relatives do you have (people you feel at ease with and can talk to about what is on your mind)? Write the number of close friends and close relatives:

People sometimes look to others for companionship, assistance, or other types of support. How often is each of the following kind of support available to you if you need it? (Circle one number on each line)

1 = None of the time

4 = Most of the time

2 = A little of the time

5 = All of the time

3 = Some of the time

	<u>(1980-1971), 1993, 1993, 1994, 1993, 1987, 1987, 1987, 1987, 1987, 1987, 1987, 1987, 1987, 1987, 1987, 1987, 19</u>		_ ` _		:	
2	Someone to help you if you were confined to bed.	1	2	3	4	5
3	Someone you can count on to listen to you when you need to talk.	1	2	3	4	5
4	Someone to give you good advice about a crisis.	1	2	3	4	5
5	Someone to take you to the doctor if you needed it.	1	2	3	4	5
6	Someone who shows you love and affection.	1	2	3	4	5
7	Someone to have a good time with.	1	2	3	4	5
8	Someone to give you information to help you understand a situation.	1	2	3	4	5
9	Someone to confide in or talk to about yourself or your problems.	1	2	3	4	5
10	Someone who hugs you.	1	2	3	4	5
11	Someone to get together with for relaxation.	1	.2	3	4	5
12	Someone to prepare your meals if you were unable to do it yourself.	1	2	3	4	5
13	Someone whose advice you really want.	1	2	3	4	5
14	Someone to do things with to help you get your mind off things.	1	2	3	4	5
15	Someone to help with daily chores if you were sick.	1	2	3	4	5
16	Someone to share your most private worries and fears with.	1	2	3	4	5
17	Someone to turn to for suggestions about how to deal with a personal problem.	1	2	3	4	5
18	Someone to do something enjoyable with.	1	2	3	4	5
19	Someone who understands your problems.	1	2	3	4	5
20	Someone to love and make you feel wanted.	1	2	3	4	5

Appendix 8 - Health and Lifestyle Assessment Questionnaire

Health and Lifestyle Assessment Questionnaire

This questionnaire asks about aspects of your health, in particular your mental health and emotional, well being thus it does contain sensitive questions. Although I would like you to attempt each question, you can leave questions blank if you do not wish to answer. If you feel distressed by any of the questions, there are sources of support at the end of the questionnaire.

As already stated you can withdraw at any point up until completion of the interview (the final task) that you will also be asked to participate in.

Please read the instructions on the top of each page as the instructions will differ slightly for each questionnaire.

Thank you for taking part. If you have any questions about the study please contact me.

Jemma Hill Super

Supervisors: Dr Mark Roy / Dr Gayle Brewer

(ihill2@uclan.ac.uk)

(GBrewer@UCLan.ac.uk) or MPRoy@UCLan.ac.uk)

01772 895174

01772 895173 or 01772 893752

Please read each statement and circle a number 0, 1, 2, or 3 which indicates how much the statement applied to you over the past week. There are no right or wrong answers. Please do not spend for much time on any one statement.

The rating scale is as follows:

O Did not apply to me at all

2 Applied to me to a considerable degree, or agood part of time.

3 Applied to me very much, or most of the time.

1 I found it hard to wind down 0 1 2 3 2 I was aware of dryness of my mouth 0 1 2 3 3 I couldn't seem to experience any positive feeling at all 0 1 2 3 4 I experienced breathing difficulty (eg, excessively rapid breathing, breathlessness in the absence of physical exertion) 0 1 2 3 5 I found it difficult to work up the initiative to do things 0 1 2 3 6 I tended to over-react to situations 0 1 2 3 7 I experienced trembling (eg, in the hands) 0 1 2 3 8 I feit that I was using a lot of nervous energy 0 1 2 3 9 I was worried about situations in which I might panic and make a fool of myself 0 1 2 3 10 I felt that I had nothing to look forward to 0 1 2 3 11 I found it difficult to relax 0 1 2 3 12 I felt down-hearted and blue 0 1 2 3 <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>						
3 I couldn't seem to experience any positive feeling at all 4 I experienced breathing difficulty (eg., excessively rapid breathing, breathlessness in the absence of physical exertion) 5 I found it difficult to work up the initiative to do things 6 I tended to over-react to situations 7 I experienced trembling (eg., in the hands) 8 I felt that I was using a lot of nervous energy 9 I was worried about situations in which I might panic and make a fool of myself 10 I felt that I had nothing to look forward to 11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 17 I felt that I if was monitored and services and services and services are serviced without any good reason 19 I felt that I if was monitored and services, heart missing a beat)			0	1	2	3
1			0	1	2	3
breamlessness in the absence of physical exertion) 5 I found it difficult to work up the initiative to do things 0 1 2 3 6 I tended to over-react to situations 7 I experienced trembling (eg, in the hands) 8 I felt that I was using a lot of nervous energy 0 1 2 3 9 I was worried about situations in which I might panic and make a fool of myself 10 I felt that I had nothing to look forward to 11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt that I was maniculated.	3		0	1	2	3
6 I tended to over-react to situations 7 I experienced trembling (eg, in the hands) 8 I felt that I was using a lot of nervous energy 9 I was worried about situations in which I might panic and make a fool of myself 10 I felt that I had nothing to look forward to 11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt that I was manifolders 21 I felt that I was manifolders 22 I felt that I was manifolders 23 I felt that I was manifolders 24 I felt that I was manifolders 25 I felt that I was manifolders 26 I felt that I was manifolders 27 I felt that I was manifolders 28 I felt that I was manifolders 29 I felt scared without any good reason 20 I felt that I if was manifolders	4	I experienced breathing difficulty (eg, excessively rapid breathing, breathlessness in the absence of physical exertion)	0	1	2	3
7 I experienced trembling (eg, in the hands) 8 I felt that I was using a lot of nervous energy 9 I was worried about situations in which I might panic and make a fool of myself 10 I felt that I had nothing to look forward to 11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I was rather touchy 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt that I felt was manningless	5	I found it difficult to work up the initiative to do things	0	1	2	3
B I felt that I was using a lot of nervous energy 9 I was worried about situations in which I might panic and make a fool of myself 10 I felt that I had nothing to look forward to 11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I was rather touchy 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt that I felt was manningless.		I tended to over-react to situations	0	1	2	3
9 I was worried about situations in which I might panic and make a fool of myself 10 I felt that I had nothing to look forward to 11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt that I if a was magninglesses	7	I experienced trembling (eg, in the hands)	0	1	2	3
10 I felt that I had nothing to look forward to 11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt that I ife was magningless 21 I felt that I ife was magningless	8	I felt that I was using a lot of nervous energy	0	1	2	3
11 I found myself getting agitated 12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless 21 I felt that life was magningless	9	I was worried about situations in which I might panic and make a fool of myself	0	1	2	3
12 I found it difficult to relax 13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless	10	I felt that I had nothing to look forward to	0	1	2	3
13 I felt down-hearted and blue 14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless	11	I found myself getting agitated	0	1	2	3
14 I was intolerant of anything that kept me from getting on with what I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was meaningless	12	I found it difficult to relax	0	1	2	3
What I was doing 15 I felt I was close to panic 16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless.	13	I felt down-hearted and blue	0	1	2	3
16 I was unable to become enthusiastic about anything 17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless.	14	I was intolerant of anything that kept me from getting on with what I was doing	0	1	2	3
17 I felt I wasn't worth much as a person 18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless.	15	I felt I was close to panic	0	1	2	3
18 I felt that I was rather touchy 19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless.	16	I was unable to become enthusiastic about anything	0	1	2	3
19 I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless	17	I felt I wasn't worth much as a person	0	1	2	3
exertion (e.g., sense of heart rate increase, heart missing a beat) 20 I felt scared without any good reason 21 I felt that life was magningless.	18	I felt that I was rather touchy	0	1	2	3
21 I felt that life was magningless		I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat)	0	1	2	3
21 I felt that life was meaningless 0 1 2 3		I felt scared without any good reason	0	1	2	3
	21	I felt that life was meaningless	0	1	2	3

	Qu	ality of Life Questionnaire
	The second Property	
		are about physical, mental, or emotional health / problems ions you may have in your daily life.
1	Would you say that in general y	your health is: (circle one)
	a. Excellent b. Very Good c. Good	d. Fair e. Poor f. Don't Know / Not Sure

2	Are you LIMITED in any way in any a	ctivities because of any impairment or	health problem? (circle one)
	a. Yes b. No c. Don't Know / Not Sure	If No, please go directly to questi	ion 7
3	If yes, what is the MAJOR impairmen	t or health problem that limits your act	tivities? (Circle One)
	a. Arthritis/rheumatism b. Back or neck problem c. Fractures, bone/joint injury d. Walking problem e. Lung/breathing problem	 f. Hearing problem g. Eye/vision problem h. Heart problem i. Stroke problem j. Hypertension/high blood pressure 	 k. Diabetes l. Cancer m. Depression/anxiety/ emotional problem n. Other impairment / problem o. Don't know/Not sure
4	For HOW LONG have your activities to one and specify if relevant)	peen limited because of your major im	pairment or health problem? (circle
	a. Days b. Weeks c. Months	d. Years e. Don't Kno	ow / Not Sure
5	Because of any impairment or health CARE needs, such as eating, bathing a. Yes b. No c. Don't Know / Not Sure	problem, do you need the help of oth g, dressing, or getting around the hous	
6	ROUTINE needs, such as everyday for other purposes? a. Yes b. No	problem, do you need the help of oth household chores, doing necessary b	ner persons in handling your usiness, shopping, or getting around
	c. Don't Know / Not Sure		

Quality of Life Questionnaire

These questions are about physical, mental, or emotional health / problems or limitations you may have in your daily life.

Please circle and include number of days if applicable.

7	Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?	Number of days	None	Don't Know / Not Sure
8	Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? If you answered 'none' to both questions 7 & 8 please go directly to question 10	Number of days	None	Don't Know / Not Sure
9	During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?	Number of days	None	Don't Know / Not Sure
10	During the past 30 days, for about how many days did PAIN make it hard for you to do your usual activities, such as self-care, work, or recreation?	Number of days	None	Don't Know / Not Sure
11	During the past 30 days, for about how many days have you felt SAD, BLUE, or DEPRESSED?	Number of days	None	Don't Know / Not Sure
12	During the past 30 days, for about how many days have you felt WORRIED, TENSE, or ANXIOUS?	Number of days	None	Don't Know / Not Sure
13	During the past 30 days, for about how many days have you felt you did NOT get ENOUGH REST or SLEEP?	Number of days	None	Don't Know / Not Sure
14	During the past 30 days, for about how many days have you felt VERY HEALTHY AND FULL OF ENERGY?	Number of days	None	Don't Know / Not Sure

Self-Esteem Questionnaire

Below is allist of statements dealing with your general feelings about yourself

If wous trongly acree

If you strongly agree, circle 1 If you agree, circle 2 Lifyou disagree, circle 3 If you strongly disagree, circle 4

1.	On the whole, I am satisfied with myself.	1	2	3	4
2.	At times, I think I am no good at all.	1	2	3	4
3.	I feel that I have a number of good qualities.	1	2	3	4
. 4.	I am able to do things as well as most other people.	1	2	3	4
5.	I feel I do not have much to be proud of.	1	2	3	4
6.	I certainly feel useless at times.	1	2	3	4
7.	I feel that I'm a person of worth, at least on an equal plane with others.	1	2	3	4
8.	I wish I could have more respect for myself.	1	2	3	4
9.	All in all, I am inclined to feel that I am a failure.	1	2	3	4
10.	I take a positive attitude toward myself.	1	2	3	4

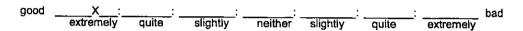
Appendix 9 - Relationship Decisions Questionnaire for 'left' Participants

Relationship Decisions Questionnaire This questionnaire asks you about your intentions, attitudes and beliefs in relation to leaving and returning to the abusive relationship that you are currently receiving helpator. Is would like you to think about the period leading up to your final decision to leave; in particular about the last 12 months you were still together it is important that you focus specifically on this point in time and not show you may be reeling now or what you would have done in retrospect.

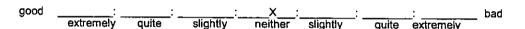
For the questions you will be asked to give your answers on a series of 7 point rating scales. Please make a check mark in the place that best describes your opinion.

For example, if you were asked to rate "the weather in England" on such a scale, the seven places should be understood as follows:

If you think the weather in England is extremely good, then you would place your mark as follows:

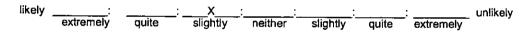


If you think the weather in England is neither good nor bad, then you would place your mark as follows:



You will also be using rating scales with likely-unlikely and agree-disagree as endpoints. These scales are to be understood in the same way. For example:

If you think that it is **slightly likely** that the weather in England is hot in August, you would make your mark as follows:



Please remember to place your marks in the middle of spaces, not on the boundaries and to never put more than one check mark on a single scale.

Although I would like you to attempt each question, you can leave questions blank if you do not wish to answer.

If you have left the particular relationship you are basing these answers on more than once, please answer these questions about your final decision to leave.

1. Thinking b was it that	eack to your you intended	intention I to leave	is before y e your part	ou made t ner and er	he decisior nd the relat	to leave y ionship wi	our partner thin that yea	how likely ar?
likely	:	:		::	<u> </u>	:		unlikely
	extremely	quite	slightly	neither	slightly	quite	extremely	•
1. Having let relationsh	t the relation	ship wh	at is the lik	celihood th	at at some	point you	might retur	n to the
likely	extremely	quite :	slightly	neither	slightly:	quite	extremely	unlikely
Thinking be would you				r before yo wards lea	u made the ving?	decision	to leave you	ır partner how
good	extremely	quite	slightly	neither	slightly	_:quite	: extremely	bad
rewarding	extremely:	quite	slightly	: neither	slightly	quite:	extremely	punishing
Having lef relationsh 4. Returning t	•	·		e your atti	tude to at s	ome point	returning to	o the
good	extremely	quite	: slightly	: neither	: slightly	_:	: extremely	bad
rewarding	extremely :			· 		::		punishing
	extremely	quite	slightly	neither	slightly	quite	extremely	
extent do y together?	please plac p for a year	ey though e a tick , please	ght you sl in the bot answer fo	hould leav x if not ap or the per	e your pa plicable – iod up unt	rtner over n/a) If you il you left	r the last yeu u were not	ear you were in the
Strongly agre	ee 1	2	3	4 5	6	7 .	Strongly	/ disagree

b. Over the la have approve	st year we we do not be standard we were well with the standard we were well as the standard well as the standard we were well as the standard well as the standard well as the standard well as the standard well as the s	ere toget ing my p	her the pe artner.	eople in n	ny life whose	e opinions	I value the mo	st would
Strongly agre	e 1	2	3	4	5 6	7	Strongly dis	sagree
7. The people abusive relati	in my life w ionship	hose opi	nions I val	lue the m	ost would le	eave their p	partner if they	were in an
Strongly agre	e 1	2	3	4	5 6	7	Strongly dis	sagree
8. Over the la	st year we w	ere toget	her most	members	of my famil	y thought	l should leave	my partner.
likely	extremely:	quite	slightly	neithe	r slightly	: quite	extremely	n/a nlikely
9. Over the la	st year we w	ere toget	her my m	other tho	ught I shoul	d leave my	partner.	n/a
likely	extremely	quite	slightly	: neithe	slightly	: quite	extremely	nlikely
10. Over the i	ast year we	were toge	ether my f	ather tho	ught I shoul	d leave my	partner.	n/a
likely	extremely	quite :	slightly	: <u>neithe</u>	r slightly	: quite	extremely	nlikely
11. Over the i	ast year we	were tog	ether my o	close frie	nds thought	l should le	eave my partne	er. n/a
likely	extremely	quite :	slightly	: <u>neithe</u>	r slightly	; quite	extremely u	nlikely
12. Over the l	ast year we	were tog	ether my o	o-worke	rs thought I	shouid lea	ve my partner.	. <u>n/a</u>
likely	extremely	quite	slightly	i <u>neithe</u>	r slightly	: quite	extremely	nlikely
13. Over the i	ast year we	were tog	ether my o	children t	hought I sho	ould leave	my partner.	n/a
likely	extremely	quite	slightly	: neithe	r slightly	: quite	extremely u	nlikely
14. Over the my partner.	last year we	were tog	ether peo	ple in my	church or r	eligious gr	oup thought I	should leave n/a
likely	extremely	<u>quite</u> :	eliabtly	_:	elightly	:	:u	nlikely

extremely	quite	slightly	neither:	slightly	quite	extremely	unlikely
			ing how n	nuch did y	ou want	to you to d	o what
o do what r	nost me	mbers of n	ny family t	hought I s	hould do.		
extremely	quite	slightly	neither	slightly:	quite	extremely	unlikely
to do what n	ny mothe	r thought l	should do	•			
extremely	quite	slightly	:: neither	slightly	quite	extremely	unlikely
o do what m	y father	thought I s	hould do.				
extremely:	quite	slightly	: <u>neither</u> :	slightly	quite	extremely	unlikely
o do what m	ıy close f	riends tho	ught I shou	ld do.			
extremely	quite	:slightly	neither	slightly	quite	extremely	unlikely
to do what r	ny co-wo	rkers thou	ght I shoul	d do.			
extremely:	quite	slightly	:: neither	slightly	quite	extremely	unlikely
to do what r	ny childr	en thought	l should d	o.			
extremely	quite :	slightly	:: neither	: slightly	quite	extremely	unlikely
to do what p	oeople in	my church	or religiou	ıs group th	ought I sl	hould do.	
extremely:	quite :	slightly	:: neither	: slightly	quite	extremely	unlikely
to do what i	my neigh	bours thou	ight I shoul	d do.			
	extremely to do what restremely	extremely quite extremely quite o do what my mother extremely quite o do what my father extremely quite o do what my close f extremely quite to do what my close f extremely quite to do what my co-wo extremely quite to do what my co-wo extremely quite to do what my childr extremely quite	e wanted you to do? To do what most members of mextremely quite slightly to do what my mother thought I sextremely quite slightly to do what my father thought I sextremely quite slightly to do what my close friends thought I sextremely quite slightly to do what my co-workers thought I sextremely quite slightly to do what my co-workers thought to do what my children thought to do what my children thought to do what people in my church	extremely quite slightly neither to do what my close friends thought I should do extremely quite slightly neither quite slightly neither to do what my father thought I should do. extremely quite slightly neither to do what my close friends thought I should extremely quite slightly neither to do what my close friends thought I should extremely quite slightly neither to do what my co-workers thought I should extremely quite slightly neither to do what my children thought I should do extremely quite slightly neither to do what my children thought I should do extremely quite slightly neither to do what people in my church or religious to do what people in my church or religi	extremely quite slightly neither slightly to do what my father thought I should do. extremely quite slightly neither slightly od what my father thought I should do. extremely quite slightly neither slightly od what my father thought I should do. extremely quite slightly neither slightly od what my close friends thought I should do. extremely quite slightly neither slightly to do what my co-workers thought I should do. extremely quite slightly neither slightly to do what my children thought I should do. extremely quite slightly neither slightly to do what my children thought I should do. extremely quite slightly neither slightly to do what my children thought I should do.	ninking back generally speaking how much did you want wanted you to do? To do what most members of my family thought I should do. Extremely quite slightly neither slightly quite to do what my mother thought I should do. Extremely quite slightly neither slightly quite o do what my father thought I should do. Extremely quite slightly neither slightly quite o do what my close friends thought I should do. Extremely quite slightly neither slightly quite to do what my co-workers thought I should do. Extremely quite slightly neither slightly quite to do what my children thought I should do. Extremely quite slightly neither slightly quite to do what my children thought I should do. Extremely quite slightly neither slightly quite to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or religious group thought I stould to do what people in my church or	extremely quite slightly neither slightly quite extremely to do what my mother thought I should do. extremely quite slightly neither slightly quite extremely of do what my father thought I should do. extremely quite slightly neither slightly quite extremely of do what my father thought I should do. extremely quite slightly neither slightly quite extremely of do what my close friends thought I should do. extremely quite slightly neither slightly quite extremely to do what my co-workers thought I should do. extremely quite slightly neither slightly quite extremely to do what my co-workers thought I should do.

Now thinking in the present, having left the relationship, to what extent do you think that the people most important to you would like you to return to the relationship at some point? (please place a tick in the box if not applicable - n/a)

= 4. most per	obie milo ale	ппрога	int to me	minik i 2	HOU	ia ietaiii t	o my pai	rtiter		
agree	. 1	2	3	4	5	6	7	Str	ongly disa	gree
25. The peop partner.	ole in my life	whose o	pinions I v	value the	∍ mo	st would a	pprove o	of me returni	ng to my	
agree	1	2	3	4	5	6	7	Stro	ongly disa	gree
26. The peop	ole in my life	whose o	pinions I v	value the	e mo	st would re	eturn to	an abusive p	artner.	
agree	1	2	3	4	5	6	7	Stro	ongly disa	gree
	mbers of my	family th	ink I shou	uld retur	n to	my partne	r .	·		n/a
likely	extremely	quite	slightly	neithe	; er	slightly	quite	extremely	unlikely	
	er thinks I sh		-	•						n/a
likely	extremely	quite-	slightly	neithe	er :	slightly	quite	extremely	unlikely	
	er thinks I sho	ould retu	rn to my p	oartner.						n/a
likely	extremely	quite	slightly	_: neithe	: er	slightly	quite	extremely	unlikely	
30. My close	friends thinl	c I should	d return to	o my par	tner.					n/a
likely	extremely:	quite :	slightly	_:: neithe	: er	: slightly	quite	extremely	unlikely	
31. My co-w	orkers think l	should 1	return to r	ny partn	er.					n/a
likely	extremely	quite	slightly	_: neithe	<u> </u>	slightly:	quite	extremely	unlikely	
	ren think I sh	ould retu	ırn to my	partner.						n/a
likely	extremely	quite	slightly	_: neithe	: er	slightly	quite	extremely	unlikely	
33. People i	n my church	or religio	ous group	think I s	shou	ıld return t	o my par	tner.		n/a
likely	extremely	quite_:	slightly	: neithe	<u> </u>	slightly	quite	extremely	unlikely	
34. My neig	hbours think	l should	return to	my parti	ner.					n/a
likely	extremely	quite :	slightly	neithe	: er	slightly	quite	extremely	unlikely	

How much do you want to do what these people want you to do?

35.	I want to	do what mo	st mem!	pers of my	family thi	nk I should	d do.	•		n/a
	likely							_		
	шсыу	extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	
36.	I want to	do what my	mother t	hinks I sh	ould do.					n/a
	likely	•								_
•	пкен	extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	
37.	l want to	do what my	father thi	inks I shou	ıld do.				•	n/a
		•								
	likely	extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	Ш
38.	I want to	do what my	close frie	ends think	l should do	o.				n/a
	likely	extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	
39.	I want to	do what my	co-work	ers think !	should do.					n/a
	likely								. 111 1	
	likely	extremely:	quite	slightly	neither	slightly	quite	extremely	unlikely	Ш
40.	I want to	do what my	children	think I sh	ould do.					
	likely								unlikalu	n/a
	школу	extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	
41.	I want to	do what peo	ple in my	church o	r religious	group thinl	k I should	l do.		
	likely	•							unlikely	n/a
		extremely	quite	slightly	neither	slightly	quite	extremely	unikely	
42.	I want to	do what my	neighbo	urs think l	should do					
	likely	4						•	unlikely	n/a
		extremely	quite	slightly	neither	slightly	quite	extremely	dimikely	

Now I'm going to give you a list of consequences that may be associated with ending an abusive relationship. There will be 8 positive consequences and 12 negative consequences. Thinking back to before you left your partner, I would like you rate how likely you thought that leaving your partner would result in each consequence. (Please place a tick in the box if not applicable - n/a)

43.	There	would be le	ess daily	stress in yo	ur life.				
	like	extremely	quite	slightly	neither	slightly	: quite	:extreme	unlikely Ty
44.	You w	vould feel lo	nely.						
	likel	y <u>extremely</u>	quite	: slightly	neither	_:slightly	_: quite	extreme	unlikely ly
45.	You w	ould be able	e to spen	d your mone	ey as you	choose.			
	likel	y extremely	quite	slightly:	neither	::	: quite	extreme	ly unlikely
46.	You v	would have t	rouble su	apporting yo	ourself fina	ancially.			
	likely	extremely	:	::_slightly	neither:	slightly	quite	extremel	_ unlikely y
47.	You v	would have i	more pers	sonal freedo	om.				
	likely	extremely	quite	::	:	:	·	<i>:</i>	unlikely
48.	You w	vould lose s	ome of yo	our friends.					
	likely	extremely	quite	slightly:	neither :	slightly:	quite :	extremely t	ınlikely
49.		children wa							n/a
	likely	extremely:	quite :	: slightly	neither :	slightly	quite:	extremely	ınlikely
50.		would not be							
	likely	extremely	quite:	slightly:	neither :	slightly	quite:	extremely	unlikely
	You w	ould no long	ger have t	to make exc	uses for t	heir behavi	our or fee	el embarras:	sed by your
	likely	extremely:	quite	slightly:	neither :	slightly	quìte :	extremely	unlikely
52.	Your	partner wou	ıld becon	ne angry an	d harm yo	u physicall	у .		
	likely	extremely	quite	slightly	neither:	slightly	quite	extremely	unlikely
53.	You	would have	one less	person to si	upport fina	ancially.			
	likely	extremely	quite	: slightly	: neither	slightly:	quite :	extremely	unlikely

			ould not i	nave a father	r figure.				n/a
li	kely	extremely	quite	slightly	:: neither	slightly	quite	extremely	unlikely
5.Y mo	ou v tion:	vill no longe ally.	er experie	nce your pa	rtner threa	itening you	ս, yelling a	it you, or h	urting you
lil	kely	extremely	quite	:slightly	:: neither	slightly	quite :	extremely	unlikely
6.	The	re would b	e a decre	ase in press	sure from	others.			٠.
lil	kely	extremely	quite	slightly	neither	slightly	quite :	extremely	unlikely
7. `	You	will have t	o experie	nce the has	sles and i	nconveni	ences inv	olved in sp	olitting up.
lil	kely	extremely:	quite	slightly	neither	slightly	: quite	extremely	unlikely
8. Y	ou '	will be sole	ely respo	nsible for ra	ising you	r children.			n/a
lil	kely	extremely	: quite	slightly:	neither	: slightly	quite	extremely	unlikely
9. Y	ou v	would be le	aving son	nebody that	you love.			•	·
lil	kely	extremely:	quite	slightly	neither	slightly	quite :	extremely	unlikely
	Beca hwh		oortant fo	r you to be i	n a relatio	nship with	someone	you would	feel less
lil	kely	extremely:	quite	:	:: neither	slightly	:: quite	extremely	unlikely
l. Y	ou v			here else to		,	4		
lil	kely	extremely:	quite	slightly	:: neither	slightly	quite:	extremely	unlikely
2. Y akı	ou v	would feel l better.	ike you w	ould be givi	ng up cha	nces to fix	your relat	ionship wi	th your partn
lik	cely	extremely:	quite	:: slightly	neither	slightly	:	extremely	unlikely

Again thinking back I would now like you to rate at the time how good or bad you thought each of the outcomes arising from leaving your partner would have been for you.

63. L	_ess	daily stres	s in your l	ife.					
	bad	extremely	quite	: slightly	neither	_: slightly	_: quite	extremely	good
64.	Feel	ing lonely.							
	bad	:		:	:	:	•	•	good
		extremely	quite	slightly	neither	slightly	quite	extremely	good
65.	Bein	g able to s	oend your	money as	you choos	e.			
	bad,	:			<i>:</i>	:	:	:	good
		extremely	quite	slightly	neither	slightly	quite	extremely	0
66.	Not	being able t	to support	yourself fi	nancially.				
	bad	<u></u> ;			: .	:	:	: '	good
		extremely:	quite	slightly	neither	slightly	quite	extremely	3
67.	Havi	ng more pe	rsonal fre	edom.					
	bad		:	:	: .	:	:	:	good
		extremely	quite	slightly	neither	slightly	quite	extremely	9
68. ·	Losi	ng some of	your frier	nds.					n/a
	bad	:	•		•	•			good
	•	extremely	quite	slightly	neither	slightly	quite	extremely	9000 [
69. `	You	r children b	eing safe.						n/a
	bad	٠:			:	•	•	•	good
	•	extremely	quite	slightly	neither	slightly	quite	extremely	9554
70. I	Not I	being able 1	to find and	other partne	er.				
	bad	:	;		;	•	:	:	good
		extremely	quite	slightly	neither	slightly	quite	extremely	9
71. N parti	lo lo ner.	nger havin	g to make	excuses fo	or your par	tners beha	viour or f	eel embarrass	sed by your
	bad.					•			good
	,	extremely .	quite	slightly	neither	slightly	quite	extremely	9000
72 '	You	r partner be	coming a	nany and h	armina vo	ı nhyeicell			
			coming a	ngry ano∙na	arming you	ı pinysicali)	y .		
	bad _.	extremely:	quite	slightly	neither	: slightly	:	:extremely	good
			daire	angriuy	116111161	əngilliy	quite	CAUCILICIA	

73. Having one less			_				
bad: extremely	quite	slightly	:: neither	slightly	quite	extremely	good
74. Your children no	t having a	a father figi	ште.				ا ا
bad :	;	•	: :	•	:	:	good
bad: extremely	quite	slightly	neither	slightly	quite	extremely	
75. No longer experi emotionally.	encing yo	our partner	threatenin	g you, yell	ing at you	ı, or hurting ye	ou .
bad :	:	:	:	•	:	:	good
bad: extremely	quite	slightly	neither	slightly	quite	extremely	Ū
'6. Feeling less pro	essure fr	om others.	•				
bad :: extremely		:	.; 	:	<i>:</i>	<u>:</u>	good
extremely	quite	slightly	neither	slightly	quite	extremely	
7. Experiencing th	ne hassle	s and inco	nvenience	es involved	d in splitt	ing up.	•
bad :			:	•	•	:	good
bad: extremely	quite	slightly	neither	slightly	quite	extremely	9
'8. Being solely res	ponsible	for raising	g your chi	ldren.			_
had .				•			good L
bad: extremely	quite	slightly	neither	slightly	quite	extremely	g000 —
'9. Leaving somebo	dy that y	ou love.					
.	•						
bad: extremely	quite	slightly	neither	slightly	quite	extremely	good
30. Feeling less wor	thwhile.						
had .					•		anad
bad: extremely	quite	slightly	neither	slightly	quite	extremely	good
31. Not having anyw	here else	to go.					
had ·							good
bad: extremely	quite	slightly	neither	slightly	quite	extremely	good
82. Feeling like you	would be	giving up	chances to	fix your re	elationshi	p with your pa	irtner and
make it better.							
bad:		: 	_:	· 	<u>:</u>	-:	good

Sometimes women decide to return to their previous partner. I would now like you to consider the same outcomes as before in relation to if you were thinking about RETURNING to your partner. For each one I give you I would like you rate how likely it is that returning to your partner would result in this outcome.

83.	Ther	e would be	more dail	ly stress in y	our life.					
	likely	extremely	quite:	slightly	neither :	slightly	quite_	extremely	unlikely	
84.	Youv	would no lo	nger feel	lonely.						
	likely	extremely:	quite	slightly:	neither :	slightly	quite	extremely	unlikely	
85.	You	would not b	e able to	spend your	money as	you choos	se.			
	likely	extremely:	quite :	slightly	neither :	slightly	quite	extremely	unlikely	
86.	You	would have	someone	e to support	you finan	cially.				
-	likely	extremely:	quite	slightly	neither	slightly	quite	extremely	unlikely	
87.	You	would have	less per	sonal freedo	m.					
	likely	extremely:	quite	slightly	neither :	slightly	quite	extremely	unlikely	
88.	You	would gain	back frier	nds.						n/a
	likely	extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	
		r children w		-						n/a
	likely	extremely:	quite	slightly	neither	slightly	quite	extremely	unlikely	
				orry about f	_	-				
	likely	extremely:	quite	slightly	neither	slightly	quite	extremely	unlikely	
	You n	may have to	make exc	cuses for yo	ur partner	's behavio	ur or feel	embarrass	ed by yo	our
	likely	extremely	quite	: slightly	: neither	slightly	quite	extremely	unlikely	
92.	You	r partner wo	ould forgi	ve you for le	eaving and	l not be an	gry or ha	rm you phy:	sically.	
	likely	extremely:	quite	slightly	:: neither	slightly	quite	extremely	unlikely	

93. T	ou will have ar	notner pe	rson to sup	ort financ	ашу.				
like	ely: extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	
94. Yo	our children wi	II have a	father figure	١.					n/a
			_					برادياناس	
ике	ely: extremely	quite	slightly	neither	slightly	quite	extremely	unlikely	ليا
95. Yo	ou will experie	nce your	partner thre	atening yo	u, yelling a	at you, or	hurting you	emotio	nally.
like	ely: extremely:	quite	slightly	neither	slightly	quite:	extremely	unlikely	
96. Th	nere will be an	increase	e in pressur	e from otl	ners.				
lika	dv ·		•					unlikely	
inc	ely <u>extremely</u> :	quite	slightly	neither	slightly	quite	extremely	dillikely	
97. Y	ou will not ha	ve to exp	erience the	hassles a	and inconv	eniences	involved i	n splitti	ng up.
like	ely <u>extremely</u> :	<u> </u>	:		:	<i>:</i>	:	unlikely	
	extremely	quite	slightly	neither	slightly	quite	extremely		
98. Yo	ou will have so	omeone 1	to share the	responsi	bility of ra	ising you	r children.		
like	extremely	quite :	slightly:	neither	:slightly	quite	extremely	unlikely	n/a
99. Yo	ou would be wi	ith somet	oody that yo	u love.					
like	ely:		:	: :		: :		unlikely	
	extremely	quite	slightly	neither	slightly	quite	extremely	-	
	Because it's im while.	portant f	or you to be	in a relation	onship wit	h someon	e you woul	d feel m	ore
like	elv		•					unlikely	
1,,,,,	extremely	quite	slightly	neither	slightly	quite	extremely	unine.y	
101. Y	ou will no lon	ger feel a	s though yo	u have no	where to g	0.			
like	ely <u>extre</u> mely	quite	slightly	neither	slightly	:: quite	extremely	unlikely	
	ou would kno it better.	w you ha	ve taken eve	ery chance	to fix you	r relations	ship with yo	our partr	er and
like	elv ·		:	:	:	: :		unlikelv	
	extremely	quite	: slightly	neither	slightly	quite	extremely		

I would now like you to rate how good or bad each of these outcomes that could result from returning to your partner would be for you.

103.	Mor	e daily stres	ss in your	life.						
	bad				•	•	•	•	good	
	544	extremely	quite	slightly	neither	slightly	quite	extremely	9000	
104.	No	longer feeii	ng ionely.							
	bad	 ;		;	_;	; 30.00	_:	extremely	good	
		extremely	quite	slightly	neither	slightly	quite	extremely		
105.	No.	t being able	to spend	money as y	vou choose	e.				
		-	-							
	bad	extremely	:	slightly	:: neither	slightly	:	extremely	good	
		•	1	,				•		
106.	No	t having to s	support yo	ourself fina	ncially.					
	bad	:			: :		:	:	good	
		extremely	quite	slightly	neither	slightly	quite	extremely		
107	u.	vina loon ne	roonal fra							
107.		ving less pe					-			
	bac	extremely		: - liabily	_::	_: clichtly	-: guito		good	
		CAUCINCIA	quite	Silgrilly	Heithei	Silgituy	quite	extremely		
108.	. Ga	ining back f	riends.							n/a
		_							1	Ė
	Dau	extremely	quite	slightly	neither	slightly	quite	extremely	good	L
109	. Yo	ur children	no longer	being safe	_					
							_			<u>n/a</u>
	bad	extremely	quite	slightly	neither	slightly	quite	extremely	good	L
110	. No	t having to	worry abo	ut finding a	another pa	rtner.				
	bad	·:		:	. :	·	:	:	good	
		extremely	quite	slightly	neither	slightly	quite	extremely	-	
444	l Jan	dos 4s male		£		ha.da	f-ali			
	. nav iner.		e excuses	ior your pa	armer s be	naviour or	ieemid ei	nbarrassed by	y your	
	had								good	
	Dau	extremely	quite	slightly	neither	slightly	quite	extremely	good	
	. Yo sica		orgiving y	ou for leav	ing and no	t becomin	g angry a	nd harming yo)U	
Pily		•								
	bad	extremely	quite	: slightly	: neither	: slightly	:	: extremely	good	
		JAN OHION	quito	ongi in y	Holato	ong, my	44110	one official		
113	. Ha	ving anothe	er person	to support	financially					
	bad	_	•						cood	
	Jac	extremely	quite	slightly	neither	slightly	quite	extremely	good	

714. Y	our chilaren n	aving a ta	itner tigure	·-				n/a
ba	ad:	:		<u>:</u> :	: <u></u>	<u>:</u>	<u>:</u>	good
	extremely	quite	slightly	neither	slightly	quite	extremely	٠ ـــ
115. Ex	xperiencing y	our partne	er threate n i	ing you, ye	lling at you	u, or hurti	ng you emoti	onally.
ba	ad :	:		:	i i	:	: .	good
	extremely:	quite	slightly	neither	slightly	quite	extremely	3
116. <i>A</i>	An increase in	n pressur	e from oth	ers				
ba	extremely	:		::		:	:	good
	extremely	quite	slightly	neither	slightly	quite	extremely	
117. N	ot having to	experienc	e the hass	sles and in	convenier	nces invo	lved in splitti	ng up.
ba	ad :	:		;	,	:	:	good
	extremely	quite	slightly	neither	slightly	quite	extremely	J
118. N	ot having to	be solely	responsib	le for raisi	ng your cl	hildren.		n/a
ba	extremely			.:	·	;	· <u> </u>	good
	extremely	quite	slightly	neither	slightly	quite	extremely	<u> </u>
	eing with son		•					
ba	extremely:	quite	slightly	: neither	slightly	quite	extremely	good
	eeling more was ad: extremely			:neither	: slightly	:	: extremely	good
121. N	o longer feeli	ng as thou	ıgh you ha	ve nowher	e else to g	o.		
ba	extremely	quite	slightly	: neither	: slightly	: quite	extremely	good
122. K better.	nowing you h	ad taken (every chan	ce to fix yo	our relation	iship with	your partner	and make it
ba	extremely:		:	.;	:	_:	<u>:</u>	good
	extremely	quite	slightly .	neither	slightly	quite	extremely	
to bef you w	e last sectio ore you mad ould have a applicable –	ie your de greed wit	ecision to	leave you	r partner	, indicate	the extent t	o which
123. A	II things cons	idered I c	an leave m	y current r	elationship	o if I want	to.	
а	igreestrongly	<i>:</i>	:	;	:	:	:	disagree
	strongly	quite	slightly	neither	slightly	quite	strongly	

agree	:	_:	:	:	:	:	disagree
strongly	quite	slightly	neither	slightly	quite	strongly	
In order to leav	e my curr	ent relation	ship I will h	ave to be a	ble to ma	anage on n	ny own.
strongly	quite	_: slightly	neither	slightly	quite	strongly	_ disagree
in general I can	pretty ea	sily manage	things on	my own.			
agree				,			disantee
strongly	quite	: slightly	neither	slightly	quite	strongly	_ 0.329160
In order to leav	e my curre blems.	ent relation	ship, I will I	nave to be a	ible to w	ork out my	own
agreestrongly	;	:	_::	. 	:	_;	_ disagree
strongly	quite	siigniiy	neither	slightly	quite	strongly	
Generally I am	able to wo	ork out solu	tions to my	problems.			•
agreestrongly	: aulta	_:	_;		:	_;	_ disagree
strongly	quite	siigniiy	nemer	slightly	quite	strongly	
In order for me							
agree strongly	quite	slightly	neither	slightly	quite	strongly	alsagree
It is usually eas	•				_		
agree_ strongly	quite	slightly	neither	slightly	quite	strongly	0.009,00
In order to leav ters.	e my curr	ent relation	ship I will h	ave to know	v how to	take care	of financia
agreestrongly	: guito	_: aliabels	_::	:	.;	_;;;;;	disagree
strongly	quite	slightly	neither	slightly	quite	strongly	
Overall, I am co	onfident in	my ability	to handle fi	nancial mat	tters.		
agree_ strongly	: auite	_: slightly	neither				_ disagree
strongly	quite	siightiy	neitner	slightly	quite	strongly	
in order for me or friends.	to leave n	ny current r	elationship	l will need	support	and help f	rom my fa
agreestrongly	; 	_: slightly	_;	;	:	_;	_ disagree
strongly	quite	slightly	neither	slightly	quite	strongly	
If I leave my cuilly and/ or friend	rrent relat ls.	ionship I wi	ill be able to	o get the su	pport an	d help i ne	ed from n
agree	•						disagree
strongly	quite	slightly	neither	slightly	. quite	strongly	uisayi ee

agreestrongly	:		_:	:	·		_ disagree
strongly	quite	slightly	neither	slightly	quite	strongly	
if i leave my cu	rrent relat	ionship, I aı	m quite sur	e I could ge	t a good	job.	
agree	•	:	:	:	:	:	disagre
agreestrongly	quite	slightly	neither	slightly	quite	strongly	
in order for me afford.	to leave n	ny current r	elationship	, I will have	to have	reasonable	housin
agree `	:	:	: .	:	•	:	disagre
agree strongly	quite	slightly	neither	slightly	quite	strongly	· · · · · · · · · · · · · ·
If I leave my cu	rrent relat	ionship, it v	vill be easy	for me to g	et reasor	nable hous	ing that
d.							
agreestrongly	: quite	: slightly	neither	: slightly	quite	: strongly	_ disagre
in order for me	to logyo n	ny ourront r	alationchin	Lwill bave	to find a	ood offerd	lahia ahi
y children.	to leave i	ny current i	eiationsnip	, i will have	to intu g	ood anord	able CIII
agree	:	:	:	: •	:	:	disagre
agreestrongly	quite	slightly	neither	slightly	quite	strongly	
If I leave my cu	rrent relat	ionship, it v	vill be easv	to find goo	d childca	are that I ca	an afford
-		-	-	_			
agreestrongly	quite	slightly	neither	slightly	quite	strongly	_ uisagi e
							*
If I leave my cu	rrent relat	ionship it w	ill be impo	rtant for me	to find n	ny own tra	nsportat
agreestrongly	:	-1:	_:			_:	_ disagre
						•	
If I leave my cu to go.	rrent relat	ionship, it v	vill be easy	for me to g	et transp	ortation to	wherev
agree			•				disaare
agree strongly	quite	slightly	neither	slightly	quite	strongly	_ 0.34916
lu arder for	ta laassa m		-1-41	السال	454 -:	b-l- (fa
s like advice a	to leave r	ny current r elling, finand	elationship cial assista	, I will need nce, food, t	to get se emporar	ome help (y housing)	for exan from so
s like advice a ces agencies.	nd counse	elling, financ	cial assistā	nce, food, t	emporary	y housing)	from so
s like advice a ces agencies.	nd counse	elling, financ	cial assistā	nce, food, t	emporary	y housing)	from so
s like advice and ces agencies. agreestrongly f I leave my cuing like advice and controls.	equite	slightly	ill be able t	slightly	emporary quite	strongly	from so _ disagre
In order for me is like advice as ces agencies. agreestrongly If I leave my cuits like advice as ces agencies. agreestrongly	quite	slightly slightly slonship, I w	neither ill be able total assista	slightly o get the ki	quite quite nds of he	strongly elp I need (y housing)	disagre disagre for exam

Finally please answer the following questions, again based on your thoughts in the last 12 months prior to leaving.

145. If you had tried to leave your partner and end the relationship in the last year, how likely did you think it was that you would be successful?

likely	extremely	quite	_:	slightly :	neither	.: 	slightly	:quite	: unlikely extremely
146. How relations		ntrol did	you	have over	whether	OI	not you	ieft your	partner and ended the
no control		1	2	3	4	5	6	7	complete control
147. If yo be succe		urn to y	our _l	partner and	d restart	the	e relation	ship, hov	v likely is it that you will
likely	extremely	;quite	_;	slightly:	neither	.; <u>.</u> _	slightly	: quite	extremely unlikely
148. How the relat		ntrol do	you	have over	whether	or	not you	return to	your partner and restart
no control		1	2	3	4	5	- 6	7	complete control

Relationship Decisions Questionnaire

illnis questionnaire asks you about your intentions, attitudes and beliefs in relation to staying in and leaving your current relationship:

When asked about feelings and factors involved in your decision to stay, please try and focus specifically on the last 12 months

For the questions you will be asked to give your answers on a series of 7 point rating scales. Please make a check mark in the place that best describes your opinion.

For example, if you were asked to rate "the weather in England" on such a scale, the seven places should be understood as follows:

If you think the weather in England is extremely good, then you would place your mark as follows:

good X : : : : : bad extremely quite slightly neither slightly quite extremely

If you think the weather in England is neither good nor bad, then you would place your mark as follows:

good : : X : slightly neither slightly quite extremely bad

You will also be using rating scales with likely-unlikely and agree-disagree as endpoints. These scales are to be understood in the same way. For example:

If you think that it is **slightly likely** that the weather in England is hot in August, you would make your mark as follows:

likely : X : : : : unlikely extremely quite slightly neither slightly quite extremely

Please remember to place your marks in the middle of spaces, not on the boundaries and to never put more than one check mark on a single scale.

Although I would like you to attempt each question, you can leave questions blank if you do not wish to answer.

likely	:	;		neither:	:	:		unlikely
	extremely	quite	slightly	neither	slightly	quite	extremely	
asked you t	o think abo is leaving?	out leavin	ig your pai	tner in the	next year,	how woul	d you descr	ibe your
Leaving my	partner in t	he next y	ear would	be				
good	evtremely	quite	: elightly	:	;	: auto	: extremely	bad
rewarding	extremely :	quite	slightly	neither	: slightly	quite	extremely	punishing
Thinking now hink that the not applicable	ey think yoι le – n/a)	should	leave your	partner in	the next ye	ar? (plea	se place a ti	ck in the box
wost people	wno are in	nportant	to me thin	K I Should 10	eave my pa	irtner with	nin the next	year.
Strongly agree	e 1	2	3	4 5	6	7	Strongly	disagree
The people i	in my life w	hose opi	nions I val	ue the mos	t would ap	prove of r	ne leaving n	ny partner.
Strongly agree	1	2	3	4 5	6	7	Strongly	disagree
The people i usive relatio	in my life w onship	hose opi	nions I val	ue the mos	t would lea	ave their p	partner if the	y were in ar
Strongly agree	: 1	2	3	4 5	6	7	Strongly	disagree
Most membe	•	-				-	ear. : extremely	unlikely
_	extremely	quite	slightly	neither	slightly	quite	extremely	n/a
My mother t	hinks i sho	uld leave	my partne	er in the ne	xt year.			
likely	extremely	quite	:slightly	:; neither	: slightly	quite	extremely	unlikely
My father th	ninks I shou	ıld leave	my partne	r in the nex	t year.			n/a
likely	extremely	quite	slightly	neither	slightly	quite	extremely	unlikely
My close frie	ends think	l should	leave my p	artner in th	e next yea	r.		[
likely	remely q	uite:	slightly:	neither s	liahtly:	: _	ur extremely	likely n/a
0,11	•		5 ,		J,	•		

1. How likely is it that you intend to leave your partner and end the relationship within the next year?

10. My co-wor	kers think I	should le	eave my pa	rtner in th	e next year				
likely								unlikely	
,	extremely	quite	slightly	neithe	r slightly	quite	extremel	y n	√a
11. My childre	n think I sho	ould leav	e my partn	er in the n	ext vear.				
					•			[
likely	extremely	quite	slightly	neither	slightly	quite	extremely	unlikelyį / r	ı/a
12. People in	my church	or religio	ous group t	hink ! sho	uld leave n	ny partnei	in the next	year.	
likely						,		unlikalv	
incry	extremely	quite	slightly	neither	slightly	quite	_:extremely	dillikely <u>i</u> / n	— ∕a
13. My neighl	bours think	i should	leave my p	artner in t	the next yea	эг.			
likely	. •		:				•	unlikely[\Box
	extremely	quite	slightly	neither	slightly	quite	extremely		
									n/a
Now general	ly speaking	how mud	ch do you v	vant to yo	u to do wha	at these p	eople want y	ou to do	?
14. I want to d	do what mo	st momb	ore of my	family thi	nk I should	4 40		•	
			· ·	_			•	_	
likely	extremely:	quite	:	:: neither	_: slightly	:	_: extremely	unlikely	
		,	3,			4		r	n/a
15. I want to	do what my	mother t	hinks I sho	uld do.					
likely	:		:	:	:	:	•	unlikelvi	
ĺ	extremely	quite	slightly	neither	slightly	quite	extre		∟ n/a
16. I want to d	lo what my t	father thi	nks I shoul	ld do.					
likely					. ,			uplikalul	
incory	extremely	quite	slightly	neither	slightly	quite	extremely	difficely	n/a
17. I want to d	o what my o	close frie	nds think l	should de	o.				
likely	:		:	•	•	•	•	unlikely	
	extremely	quite	slightly	neither	slightly	quite	extremely		∟ n/a
18. I want to d	do what my	co-worke	ers think I s	should do					
likely	•		•		•	•		unlikely	
,	extremely	quite	slightly	neither	slightly	quite	extremely	• 1	∟∟ n/a
19. I want to d	do what my	children	think I sho	uld do.					
likely	:		:	:	:		:	unlikely	
	extremely	quite	slightly	neither	slightly	quite	extremely		n/a
20. I want to	do what pe	ople in n	ny church d	or religiou	s group thi	nk i shou	ld do.		
likely			:	•				unlikely	
	extremely	quite	slightly	neither	slightly	quite	extremely	armery	n/a

lik	ely	extrem	ely :	quite	slightly	neithe	r slightl	y quite	extremel	unlikely y n/a
relations to rate h	hip. ow li	There v kely yo	vill be u thini	8 posi: c it is t	tive conse	quences 3 your pa	and 12 neg	gative cor		an abusive would like you quence. (Please
22. Ther	re wo	ould be	iess d	aily st	ress in you	ır life.				
like	ely	extrem	ely:	quite	slightly	: neithe	r slight	ly quite	extremel	_ unlikely y
23. You v	woul	d feel id	onely.							٠
like	ely	extrem	ely:	quite	slightly	: <u>neithe</u>	r slight	ly quite	extremel	unlikely y
24. You v	woul	d be ab	le to s	pend y	our mone	y as you	choose.			
like	ely	extrem	ely:	quite	slightly	: neithe	r slight	ly quite	extremel	_ unlikely y
•		•			porting yo	•	-			
like	ely	extrem	ely:	quite	:slightly	: neithe	r slight	ly quite	extremel	_ unlikely y
				•	nal freedoi					
like	ely	extrem	ely:	quite	slightly	_: neithe	er slight	ly quite	extreme	_ unlikely y
				-	friends.					[]
like	ely	extrem	ely	quite	slightly	neithe	r slight	ly quite	e extreme	_ unlikely ly n/a
28. You	r chil	idren w	ould b	e safe						
likely	extr	emely	quite	_; _	slightly: _	neither :	slightly	quite	extremely	nlikely
					d another	•				
likely	extr	emely	quite	_; _	slightly : -	neither	slightly	quite:	extremely	nlikely
	vould	d no lor	nger ha	ave to	make excı	uses for l	nis behavio	our or feei		d by your partner
likely	extr	emely:	quite	; _	slightly: -	neither	slightly:	quite:	extremely	nlikely

21. I want to do what my neighbours think I should do.

likely

	ur partner wo	ould beco	me angry ar	nd harm yo	ou physica	lly.			
ikely	extremely	quite	slightly	:: neither	slightly	quite	extremely	unlikely	
32. Yo	u would have	one less	person to s	support fin	ancially.				
ikely	 :		slightly	::		::	- d-omalı	unlikely	
	extremely	quite	slightly	neitner	siigntiy	quite	extremely		
33. You	ır children w	ould not h	nave a fathe	r figure.					
ikely	extremely:	quite	:slightly	::	slightly	::	extremely	unlikely	
34.You emotion	will no long	er experie	nce your pa	rtner threa	atening you	u, yelling	at you, or h	urting you	n/a
	•							umlikalu	
ikely	extremely	quite	:slightly	neither	slightly	quite	extremely	unlikely	
35. Th	ere would b	e a decre	ase in pres	sure from	others.				
ikely	;	:	·	: :		: :		unlikely	
	extremely	quite	: slightly	neither	slightly	quite	extremely		
36. Yo ikely	u will have t	·	slightly				•		
	extremely	quite	slightly	neitner	slightly	quite	extremely		
37. You ikely	ı will be sol	•					· _:	unlikely	Г
-	extremely	quite	slightly	neither	slightly	quite	extremely		'n
38. You	ı would be le	eaving sor	nebody that	you love.					
ikely	extremely	:	:slightly	:	slightly	: auite	:extremely	unlikely	
20 D.	ause it's im								
vorthw	hile.	•	•		•		-		
ikely	extremely	:	:slightly	:	slightly	:	extremely	unlikely	
	Oxacinory	quito	Juguer	110/410	ongnay	quito	Ond Omery		
40. You	ı would not l	have anyw	vhere else to	o go.					
ikely	ovteo mohy	:	: slightly	:	clichtly	:	;	unlikely	
	extremely	quite	slightly	neitner	siigntiy	quite	ехпетегу		
	ı would feel t better.	like you w	ould be giv	ing up cha	inces to fix	your rela	ıtionship wi	th your part	ner a
likely		:	: slightly	<i>:</i>	:	: <u></u>	; <u></u>	unlikely	
-	extremely	quite	slightly	neither	slightly	CHILD	eytremely	•	

avtramaly	_:		i,		:	;	go
extremely	quite	slightly	neither	slightly	quite	extremely	
eeling lonely.							
bad	:	:	:	:	:	:	go
extremely	quite	slightly	neither	slightly	quite	extremely	
Being able to spe	end mone	ey as you c	hoose.				
bad	:	:	:	:	:	:	go
extremely	quite	slightly	neither	slightly	quite	extremely	ŭ
lot being able to	support	yourself fi	nancially,				
bad	; <u> </u>	_:	:	_;	:	extremely	go
extremely	quite	slightly	neither	slightly	quite	extremely	
laving more per	sonal fre	edom.					
bad	_; <u>_</u>	;	:	:	:	:	go
extremely	quite	slightly	neither	slightly	quite	extremely	
	eing safe.					extremely	g
had liainilia ino	•		·	·		·	
badextremely	; quite	slightly	neither	slightly	quite	extremely	3
badextremely				slightly	quite	extremely	3
badextremely	o find and	other partne	er.				
badextremely Not being able to badextremely	o find and	other partno : slightly	er. : neither	: slightly	: quite	: extremely	9
badextremely	o find and	other partno : slightly	er. : neither	: slightly	: quite	: extremely	g
bad_extremely Not being able to bad extremely to longer having ter.	o find and quite	slightly excuses for	er. : neither or your part	: slightly tners beha	; quite viour or f	extremely eel embarrasse	9 d by y
badextremely Not being able to badextremely o longer having	o find and quite	slightly excuses for	er. : neither or your part	: slightly tners beha	; quite viour or f	extremely eel embarrasse	g d by y
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no control	1	2	3	4	5 6	5 7	complete control

84. If you try to leave your partner and end the relationship in the next year, how likely is it that you will be successful?

Appendix 11 – Interview Schedule - Participants who have **left an abusive relationship**

Part 1 - Aim - Contextualise Relationship History

I am going to ask you a number of questions about your experiences in the relationship that you are currently receiving support for and also your experiences in any other previous relationships.

- 1. How long ago did you leave the relationship that you are currently receiving support for?
- 2. And is it since then that you have been residing in the refuge/receiving support from the agency? If not, how long is it that you have been at the refuge/receiving support?
- 3. How long had you been in this relationship?
- 4. In your own words can you give me an outline of your relationship in terms of when you first got together and whether you had any breaks in the relationship, and if so when these were and for how long?
- 5. If so could you tell me about what led you to leave the relationship on those occasions?
- 6. If you have had relationships previous to or after this abusive relationship, did you experience any physical or psychological abuse in any of those relationships? If so could you describe your experiences?
- 7. Sometimes the way we interpret our own relationships is influenced by our experience of our parent's relationship. Could you describe for me your parents relationship in terms of the extent to which they showed affection for each other, who made the important decisions, and whether or not they were ever physically or psychologically aggressive towards each other?

Part 2 - Investigating Decisions to Leave

In this next section I would like to ask you about the process of leaving your most recent partner including your feelings and other factors which may have contributed to your decision to leave. I would like you to think about the period leading up to your decision to leave, in particular about the last 12 months you were still together.

- 8. Can you tell me about your decision to leave? Was it something that you had been considering for a while previously or was there something specific that made you decide that you had to leave when you did?
- 9. In making your final decision to leave what factors did you consider?
- 10. Which of these factors were most important to you and why? Had these factors and their importance changed since you first considered leaving?
- 11. Now think about the consequences of leaving your relationship. When you made your decision what did you think would be the most important positive and negative consequence/s of you leaving? Please could you also explain briefly why these were the most important consequences to you, and again had these changed over time?
- 12. Do you still consider these consequences as important? Has your opinion changed now you have left?

Investigating Intentions to Return

- 13. Do you have any intentions to return to your partner?
- 14. Do you want to return to your partner?
- 15. Are there any circumstances under which you would return to your partner or want to return to him?
- 16. What would you say would be the most important positive outcome of you returning to your partner and the most important negative outcome of you returning to your partner? Please could you explain briefly why these would be the most important consequences to you.

To end -

16. Can you tell me about anything positive that you've gained from the support of the refuge?

Appendix 12 -

Interview Schedule - Participants who remain in a relationship

Part 1 – Aim - Contextualise Relationship History

I am going to ask you a number of questions about your experiences in your current relationship and also your experiences in any previous relationships.

- 1. How long have you been in this relationship? If it has been on and off please give overall time since you started the relationship
- 2. Are you currently living with your partner? If not please could you tell me where you are currently living?
- 3. During your current relationship have you separated from your partner for any period of time due to problems in the relationship? If so could you tell me about what led you to leave the relationship and how long were any periods of separation?
- 4. If you have had periods of separation during your current relationship what led you to decide to return to the relationship?
- 5. If you have had previous relationships to the one with your current partner, did you experience any physical or psychological abuse in any of those relationships. If so could you describe your experiences?
- 6. Sometimes the way we interpret our own relationships is influenced by our experience of our parents relationship to each other, could you describe for me your parents relationship in terms of the extent to which they showed affection for each other, who made the important decisions, and whether or not they were ever physically or psychologically aggressive towards each other?

Part 2 - Investigating Decisions to Stay

In the next section I would like to ask you about the decision to stay with your current partner, including your feelings and other factors which may have contributed to your decision, particularly over the last 12 months you have been together.

- 7. Can you tell me about the decision you have made to stay. Is it something you have been considering over a long period of time, or was there something specific that made you decide to stay?
- 8. In making your final decision to stay what factors did you consider?
- 9. Which of these factors were most important to you and why? Have these factors and their importance changed since you first thought about staying?
- 10. Now thinking about the possible consequences of staying in your relationship. When you made your decision what did you think would be the most important positive and negative consequence/s of you staying? Please could you also explain briefly why these were the most important consequences to you and again had these changed over time?

Investigating Intentions to Leave

- 11. Do you have any intentions to leave your partner?
- 12. Do you want to leave your partner?
- 13. Are there any circumstances under which you would leave your partner?
- 14. What would you say would be the most important positive outcome of you leaving your partner and the most important negative outcome? Please could you explain briefly why these would be the most important consequences to you.
- 15. To end Can you tell me about anything positive that you have gained from the support of the agency?

Appendix 13 - Instructions for the Attentional Probe Task

Screen one:

In this task you will first be presented with the symbol +++ in the middle of the computer screen.

After a few seconds +++ will disappear and be replaced with two words. One will be a little appear where the +++ symbol appeared and one will be just below.

The words will then be replaced with one of two symbols < or >

If < appears you need to press the Z key as quickly as possible.

If > appears you need to press the M key as quickly as possible.

Press the spacebar when you are ready to continue.

Screen two:

Try the following practice screens.

Remember press the \mathbb{Z} key as quickly as possible if the < appears. Or press the \mathbb{M} key as quickly as possible if the > appears.

Press the spacebar when you are ready to continue.

Screen three, four, five and six.

Present practice trials here.

IF selection correct <75% (3 out of 4) THEN continue to screen 8. If selection correct >75% THEN go to screen 7.

Screen 7: You seemed to get a few wrong on that practice trial. Please read the instructions again and have another go at the practice trail. GOTO screen one.

Screen 8:

Press the spacebar to begin this task.

Screen 9

Present trials.

End Screen: Thank you. End.

Appendix 14 - Threat words for Attentional Probe Task

Isolation

Alone

- Homelessness

Debts

Humiliation

Cowering

Crying

Dependent

Disbelieved

Belittled

Controlling

Tormented

Worthless

Stupid

Ignore

Threaten

Shout

Criticise

Punch

Slaps

Bruise

Hospital

Bleeding

Escape

Police

Appendix 15 - Neutral Words for Attentional Probe Task

Apple

Pencil

Window

Magazine

Goldfish

Triangle

Square Teacher

Guitar

Sandwich

Tablecioth

Fluffy

Hairdryer

Aeroplane

Supermarket

Spaghetti

Motorway

Seaside

Fruitcake

Cocktail

Motorcycle

Fashion

Bus .

Trolley

Market

Appendix 16 - Questionnaire Debrief

Thank you for taking part, it is much appreciated.

If you have been distressed by any of the questionnaire items or believe that you need further support, one of these agencies may be able to help. This page can be detached for you reference — however if you are still with your partner and they would react badly to you having this information please ensure that you keep it in a safe place.

General relationship support

Association for Marriage Enrichment

(Workshops for couples, teaching skills for better communication, mutual appreciation, and resolution of conflict.)

Church Cottage North, Sea Lane, Kilve, North Bridgwater, Somerset TA5 1EG

Tel: 01278 741 302

Domestic violence support

Women's Aid

(A national charity supporting a network of over 500 women's domestic and sexual violence services across the UK)

PO Box Bristol 391

BS99 7WS

Tel: 0117 944 4411

http://www.womensaid.org.uk/

Respect

(UK association for domestic violence perpetrator programmes and associated support services)

Tel: 0845 122 8609. This is an information line and does not provide counselling. (Monday and Friday 10am to 1pm and 2pm to 5pm, Tuesday and Wednesday 10am to 1pm and 2pm to 8pm)

Web: www.respect.uk.net.

For more information on support groups go

to: http://www.dfes.gov.uk/marriageandrelationshipsupport/famtxtfr.shtml

If you would like more information about the study please contact me.

Jemma Hill
Room 206
School of Psychology
Darwin Building
University of Central Lancashire
Preston
Lancs
PR1 2HE

Jhill2@uclan.ac.uk 01772 894470

Appendix 17 - Introduction for Interview

Hi thanks for agreeing to take part in the study. Just in case you didn't hear it before, my names Jemma and I'm a student at the University of Central Lancashire. I'm doing this project for my Masters degree, looking at decisions made within personal relationships and the affects of these decisions on health and well-being.

I know you've already filled out some questionnaires and completed a short task on the computer so I really appreciate the time you've put in so far. For this part of the study I would just like to ask you some questions regarding your current or most recent relationship. There are just under 15 questions in total and it shouldn't take longer than 30 minutes. The first five questions will ask you about experiences you may have had and aims to get some information regarding the history of your relationship. The remainder of the questions will focus specifically on aspects of decision making within your relationship.

With your permission I will take some notes and audiotape this session. If you are uncomfortable with this in any way please let me know. The tape will be used to check my notes are accurate and record your answers to the more open ended questions to ensure I do not miss any valuable information. After the analysis is carried out, the tape will be destroyed. I have an agreement for you to sign if you are happy with this.

I would also like to remind you that there will be no identifying information on my notes other than your unique PIN number. This is to ensure your data is anonymous. All the anonymous data will be kept in a locked filing cabinet, to be seen only by myself, my supervisors, and others with a legitimate need to see the data e.g. journal editors. The only exception to absolute anonymity would be in the unlikely instance that the research team were seriously concerned about your safety or that of others (e.g. your children) on the basis of something that you disclosed. In such a case the researcher would communicate their concerns to an appropriate member of your support team, and then only after consulting you.

Please try and be as accurate as possible with your answers, particularly if you are no longer in a relationship and you are answering based on the most recent relationship that you are receiving support for. Some of the questions regarding decision making will ask you to think back to how you were feeling at a specific point in time, thus as with the intentions, attitudes and beliefs questionnaire please try to focus specifically on this time and not how you may be feeling now or what you would have done in retrospect. I will remind you where necessary when I would like you to focus on a particular time.

Some of the questions are of a sensitive nature and will require you to discuss feelings or think about issues that you may not have considered before. There will be support information given to you at the end of the interview and an option to raise any questions about the study. If there are any questions that you do not wish to answer then you do not have to do so, or if at any time you would like to stop the interview please say so. The information that you have provided up until this point including the questionnaires and attentional probe task will not be used if you wish to withdraw.

Appendix 18 – Interview Consent Form

Informed Consent for Anonymous Quotation from my Interview for the Purposes of Academic Publication

I am happy to participate in the interview conducted by the researcher. I understand it will be anonymous (no names will be taken).

I understand the interview will be audio-taped for the researcher to transcribe my answers and that the tape will then be destroyed. I am also happy for the researcher to make any notes.

I understand that it may be necessary when reporting the data for the researcher to use excerpts/quotes from my answers. These quotes will be anonymous. I agree that these quotes may be reproduced for the researcher's thesis as part of her degree programme, and may be used for publication.

Signed

Appendix 19 - Debrief for Interview

That's the end of the interview. Thank you very much.

The answers that you have provided are invaluable and will be used in conjunction with your questionnaire data and performance on the attentional probe task to contribute to an understanding of why certain decisions are made within relationships and how these decisions may affect ones health, in particular ones emotional well-being.

The study is focusing specifically on relationships where abuse is or has been experienced and this may be physical, psychological or both. I am collecting data from individuals that have left or stayed in such relationships with the overall hope that by gaining further insight into the factors and processes involved in relationship decisions and in turn their consequences, it will contribute to an understanding of support that is needed in this area.

Are there any questions that you would like to ask about the study? If you are interested you can receive a copy of my report on the findings of the study by contacting me on the number or by the email address given at the end of the questionnaires.

If you have been distressed by any of the questions that I've asked or you feel like you do need further support in general or in making any decisions, the agency information that was given to you at the end of the questionnaires may be able to offer you some help. I have copies of this information again here if you need it.

I would also just like to stress that the decision to leave, stay or return to a relationship is an individual decision that only you can make. I am fully aware of the complexities of making such a decision and whatever happens I wish you all the best for the future.

Thank you once again for taking part.

Appendix 20 - Example of Interview Transcription

Participant N.O 102

Interview Transcript

Interviewed 10/03/09 Transcribed 12/03/09

INTERVIEWER: How long ago did you leave the relationship that you are currently receiving support for?

PARTICIPANT: Um, 5th January

INTERVIEWER: Is it since then that you have been residing in the refuge?

PARTICIPANT: It is yes. Come straight here.

INTERVIEWER: So how long had you been in this relationship that you are receiving support for?

PARTICIPANT: 3 years.

INTERVIEWER: In your own words can you give me an outline of your relationship in terms of when you first got together and whether you had any breaks in the relationship, and if so when these were and for how long?

PARTICIPANT: I met him on St Patricks day 2006 and he was wonderful. Mr wonderful for 2 years. I couldn't have wished for a better person. Then some of his friends came over from Algeria. That's where he's from. And it just changed. Um he treated me like a dog so we split up um about February last year for about 3 months? Um, stupidly went back. It was 10 times worse than before I left because I'd left and because I'd disrespected him.

INTERVIEWER: So was that the only break that you had?

PARTICIPANT: Yeah.

INTERVIEWER: So if you could you tell me about what led you to leave the relationship on the occasion when you did? When you left for 3 months?

PARTICIPANT: Well he um, I'd just had enough.

INTERVIEWER: There wasn't any specific incident?

PARTICIPANT: No, we'd been fighting. I used to get physical abuse every day but I was used to it. I just woke up one morning and I just didn't want it anymore.

INTERVIEWER: So If you have had any relationships previous to or after this relationship that you've had, did you experience any psychological or physical abuse in these relationships? If so could you describe these experiences for me?

PARTICIPANT: Yes (nervous laugh) the one before the one I just left. Um, I was in the refuge because of him as well. He was psychotic. He raped my niece.

INTERVIEWER: Did he hit you as well?

PARTICIPANT: Yeah.

INTERVIEWER: And any psychological abuse?

PARTICIPANT: Definitely. I think that was the worst part of it actually. Once you've had a slap, the slaps finished in a matter of seconds. But it's the taunting, the names, you're worthless. You do believe it.

INTERVIEWER: So that was the one you were with before?

PARTICIPANT: Yeah. I went out of one. Mind you the one I've just fleed. He was great for 2 years. I couldn't of wished for a nicer person. And then, I know its an excuse now I thought oh it's his friends, He's in with a bad crowd but he's old enough to know what he's doing is wrong. But I didn't see it at the time. I do now and I think...(laughs)

INTERVIEWER: Sometimes the way that we interpret our own relationships is influenced by our experience of our parent's relationship. Could you describe for me your parents relationship in terms of the extent to which

they showed affection for each other, who made the important decisions, and whether or not they were ever physically or psychologically aggressive towards each other?

PARTICIPANT: Well I never saw my parents argue. Never. Um, I mean they probably did but we never saw it. There was, It was like something off a mary poppins film. There was always holding hands and kissing and...it was just always I love you. And, they'd always let us hear that they was, you know how much they loved each other. And well they used to say you know I hope one day you will find someone to love as much as I love your dad. And my dad used to say it about my mum.

INTERVIEWER: So they showed a lot of affection, really loved each other. And you never saw them, they were never physically or psychologically...

PARTICIPANT: Never. And the decision making it was joint I'd say, everything. If my dad had made a decision he would always say to my mum is that ok with you and my mum would do the same with my dad. It was lovely.

Part 2 - Investigating Decisions to Leave

INTERVIEWER: In this next section then I would like to ask you about the process of leaving your most recent partner, including your feelings and other factors which may have contributed to your decision to leave. I would like you to think about the period leading up to your decision to leave, in particular about the last 12 months you were still together.

INTERVIEWER: So could you tell me about your decision to leave? Was it something that you had been considering for a while previously or was there something specific that made you decide to leave when you did?

PARTICIPANT: It was 7 months I were thinking about it. Like I said just the domestic violence, the physical and emotional, um and the sexual assault

INTERVIEWER: In making your final decision to leave what factors did you consider?

PARTICIPANT: My children. Um, I had to get out for these, Not for myself really. I wasn't bothered where I was going, what I was doing. I just wanted to be safe.

INTERVIEWER: which of these factors were most important to you and why? And had these factors and their importance changed since you first considered leaving?

PARTICIPANT: If I had stayed I would have been killed.

INTERVIEWER: So now thinking about the consequences of leaving your relationship, when you made your decision to leave what did you think would be the most important positive and negative consequence/s of you leaving? And why these were important?

PARTICIPANT: Um, well the positive side was like I said, me getting away with my children so he couldn't hurt me. Being able to move on, be happy. The negative side is cause I didn't want to leave, I loved him.

INTERVIEWER: So do you still consider these consequences as important?

PARTICIPANT: Yes.

INTERVIEWER: has your opinion changed now you've left?

PARTICIPANT: Um, um. It, um I don't know. Like I said I love him and I want to be with him, I just can't cause of the safety of my children. So it's just... Just the same. What it all boils down too is just my kids. If I didn't have kids I probably wouldn't even have left.

Investigating Intentions to Return

INTERVIEWER: Do you have any intentions to return to your partner?

PARTICIPANT: No. No chance.

INTERVIEWER: Do you want to return to him?

PARTICIPANT: (Jumping in) I do. I do want to. But the old him.

INTERVIEWER: So the old him? The first two years?

PARTICIPANT: Yeah the first two years. Yeah.

INTERVIEWER: Are there any circumstances under which you would return to your partner or want to return to him?

PARTICIPANT: No. None. Nothing at all would make me go back.

INTERVIEWER: So you've come a long way then in your thinking?

PARTICIPANT: Yeah...It's been hard. Especially when I first came in and if I wanted to go to the shop... When I was with him I had to ask. And when I came here I thought who can I ask if I can go. And it's like, same with having a bath. I've got used to it now. Who do I ask if I can have a bath? I've got to ask somebody cause I've been that used to it, I used to have to ask him if I could brush my hair, if I can have a bath, if I can change my clothes. And it was like 'why are you changing your clothes, oh you're meeting someone'. And then, it was like oh I just wont then. And I used to just sit in my bed. I had a telly in my bedroom. I never came out of my bedroom. Safer. Yeah, but I've got used to it now that I can go to the shop and I don't have to ask.

INTERVIEWER: So what would you say would be the most important positive outcome of you returning to your partner and the most important negative outcome of you returning to him?

PARTICIPANT: There isn't really anything positive. Because I know he's not going to change so I would be going back to the violent partner. Not the prince that I had at first. So there wouldn't be a positive. No.

INTERVIEWER: And the most important negative outcome of you returning?

PARTIC	IPANT: I'd probably be	killed.
	END	