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**ADULT MALE ASSAULTIVE BEHAVIOR AND
CORRELATES WITH THE MMPI-2**

by

Tom G. Lanning

**A Dissertation
Submitted to the
Faculty of The Graduate College
in partial fulfillment of the
requirements for the
Degree of Doctor of Education
Department of Counselor Education
and Counseling Psychology**

**Western Michigan University
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ADULT MALE ASSAULTIVE BEHAVIOR AND CORRELATES WITH THE MMPI-2

Tom G. Lanning, Ed.D.

Western Michigan University, 1995

This study was descriptive in nature and examined the relationship between demographic variables, Minnesota Multiphasic Personality Inventory-2 (MMPI-2) variables, and levels of violence as measured by the Conflict Tactics Scale (CTS) (Straus, 1979). The research sample consisted of 44 males entering a treatment program for male batterers. All participants completed a research protocol during a required assessment consisting of: (a) a General Information Sheet, (b) the MMPI-2, and (c) the CTS. The CTS was the only instrument administered solely for research purposes.

The MMPI-2 data were used to construct a sample composite mean profile. MMPI-2 data were also divided into the subsets of: (a) participants with a prior legal history and (b) participants with no legal history. Profiles were constructed using each subgroup's mean T scores and were compared for substantial differences. All variables were placed in a correlational matrix and Pearson product-moment coefficients of correlations were calculated using the Statistical Package for the Social Sciences (SPSS).

The correlational analysis produced 20 statistically significant coefficients of correlation between MMPI-2 variables and levels of violence significant at $p < .01$. The only demographic variable of statistical significance ($p < .01$) was educational level. The MMPI-2 composite mean profile lacked clinically significant elevations ($\geq 65T$) on any standard scale, selected Supplementary Scale or any Content Scale. Inspection of subgroup profiles revealed no clinical

elevations on any MMPI-2 scale, no difference between either subgroup, and neither subgroup differed substantially from the sample's composite mean profile. There were findings of defensiveness and subclinical elevations on the Pd and Pa scales in the composite mean profile.

Although MMPI-2 variables had statistically significant correlations with levels of violence at the $p < .01$ level, none of the corresponding coefficients of determination ($r^2 = 34\%$ to 15%) indicated sufficient strength to act as predictor variables. However, the MMPI-2 scales may serve as marker variables representing psychological characteristics shared by certain elements of the overall population of batterers.

The results suggest psychological characteristics of batterers include defensiveness, impulsivity, suspicion and mistrust, and interpersonal alienation as salient factors. Along with the psychoeducational material offered in batterer treatment programs, these psychological characteristics should be addressed with equal attention to effect change in this population.

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Tom G. Lanning

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CHAPTER I

INTRODUCTION

Background of the Problem

American culture contains past and current episodes of violence which occur across diverse contexts. Whether violence is random or representative of planned actions, the occurrence of violence raises concern regarding the issue of personal safety. The assumption of personal safety has been greatest within the home which has long been considered a “safe haven.” For many women and children, the assumption of safety has not been well founded (Saunders & Browne, 1991; Viano, 1990).

Past cultural norms tacitly approved of family violence as a matter of “private business” (Davis, 1992). Violence by males toward intimate partners has a long history and has occurred within a broad context of social, cultural, political and legal factors (Archer, 1994; Davis, 1992; Straus, Gelles & Steinmetz, 1980; Viano, 1992). Currently, violence within the family occurs at high levels. Women and children have a greater statistical risk of being either physically and/or sexually victimized by persons living inside the home than by individuals outside of the home (Saunders & Browne, 1991). Acts of violence within the family have been primarily perpetrated by males (Frude, 1994). The awareness of physical violence perpetrated by males within a relationship context as a social problem has increased over the last 15 years and has led to increased reporting. Many states have adopted legislation that defines these acts of

violence as a crime that requires both legal and social sanctions (Lyon & Mace, 1991).

Some theories account for the prevalence of male violence within relationships due to long standing cultural norms (Davis, 1992; Dobash & Dobash, 1979; Viano, 1992). Other views correlate male violence with the existence of particular personality characteristics (Hamberger & Hastings, 1986; Hamberger & Hastings, 1988; Hastings & Hamberger, 1988; Vassel-Augenstein & Ehrlich, 1992). Other perspectives purport that male violence in relationships can be attributed to the presence of external variables such as unemployment, alcohol and drug abuse, and environmental stress (Snyder & Fruchtmann, 1981; Wetzel & Ross, 1983). Still others utilize systemic variables to describe the sequence of violent interactions among intimates (Frude, 1994; Pressman, 1987). Regardless of the theoretical perspective, the use of physical violence by males in a relationship context presents a risk to others in the immediate environment (Saunders & Browne, 1991).

Male batterers are a heterogeneous population (Dutton, 1988; Hamberger & Hastings, 1986). Classification of batterer subgroups has relied primarily on research typologies. These tend to be descriptive in nature and are clinically useful to differentiate types of batterers, but their use can be confusing (Saunders, 1992a). For example, depending on the typology employed, as few as two and as many as six categories are described (Saunders, 1992b).

The typologies in existence present some significant problems. Some are based upon anecdotal clinical information and are of heuristic value, but they lack empirical support (Elbow, 1977). Second, clinical data from batterers has been used to construct some typologies, but these data tend to minimize the frequency and severity of violence (Browning & Dutton, 1986; Straus, 1979; Tolman & Bhosley, 1991). Third, some empirically based typologies, have

relied upon small samples making generalization difficult (Saunders, 1992a).

Fourth, there is a low degree of congruence and a high degree of overlap between the various abuser “types” which are delineated. Many categories share similar characteristics, but the labels vary depending on the specific researcher.

The fifth, and most significant difficulty, relates to the lack of a consistent research definition. Although prior research findings are referenced in subsequent efforts, no specific typology has been used consistently (Saunders, 1992a).

Prediction of physically violent behavior is inherently difficult (Monahan, 1981). Prediction of a batterer’s future potential for violence has often relied on a typology to identify the “type” of offender and the associated probability of repeat violence (Saunders, 1992b). Second level information has been gained by the identification of personality variables which correlate with a high probability for acts of violence (Hamberger & Hastings, 1986; Hastings & Hamberger, 1988). Prediction has, at times, been enhanced by determining the previous use of violence and the presence of external factors which correlate with increased probability for aggressive behavior (Goodwin, 1994; Saunders, 1992b).

Males use of physical violence toward intimate partners has occurred over generations (Gelles, 1979). For over a decade, the physical assault of intimate partners by males has been the focus of research efforts (Straus, 1990). Only recently, have these physical assaults been recognized as a pertinent social problem. This recent recognition is reflected, most prominently, by changes in the manner the legal system is mandated to respond to the crime of domestic assault (Kurz, 1993). Although much effort has been exerted into understanding the dynamics of this behavior, the males who perpetrate the violence present many challenges. It was a goal of this work to contribute to the further understanding of the characteristics of men who batter.

Statement of the Problem

Identification and classification of batterers is imprecise and lacks uniformity (Archer, 1994; Saunders, 1992b). Investigators are in consensus that appropriate classification of batterers is necessary for more efficacious treatment and for improved prediction of future behavior (Saunders, 1992a; 1992b). Development of empirically supported variables which are associated with male physical violence in relationships may increase the accuracy of identification of batterers, assist in determining risk to potential victims and may indicate batterers require differential forms of treatment (Saunders, 1992a; 1992b; Vaselle-Augenstein & Ehrlich, 1992).

Classification, treatment and prediction related to male batterers are emerging areas. The prediction of probability for future violent behavior may be improved in two ways. The first is to increase the uniformity in identifying specific types of batterers and develop actuarial models for prediction of future violence associated with each type. The second method is to develop empirically supported variables which correlate with the use and severity of violence in relationships. The present study has contributed to the second area. Considering the risk involved to victims, the development of these types of variables is a primary issue. Improved accuracy in prediction of batterers future behavior is necessary to increase the safety of potential victims.

Purpose of the Study

The primary emphasis of this research was to identify demographic and psychological characteristics of men who have engaged in differential levels of physically violent behavior toward intimate partners. To accomplish this goal, correlations between batterer demographic variables, psychological variables

derived from the Minnesota Multiphasic Personality Inventory-2 (MMPI-2) and the reported level of violence as measured by the Conflict Tactics Scale (CTS) were examined for statistical significance.

There are inherent difficulties associated with identification, classification and prediction of behavior of a heterogeneous group such as male batterers. These difficulties are increased by the lack of accurate assessment tools for this population (Saunders, 1992b). The research findings contributed to the existing body of knowledge regarding the development of empirically supported variables associated with physically violent behavior. The study also offered practical clinical implications to clinicians who work with batterers regarding both the assessment and treatment of the population. An indirect, but important, purpose of any research related to physical violence within a relationship context was to assist in increasing the levels of safety for women and children (Viano, 1992).

Theoretical Rationale

The body of literature related to men who use physical violence within a relationship context suggests three conclusions. The first is that male batterers represent a heterogeneous population both demographically and psychologically (Coleman, 1980; Gondolf, 1985; Saunders, 1992a). The second conclusion is that batterers possess identifiable personality characteristics which are often seen across clinical and research settings (Gondolf, 1985; Hamberger & Hastings, 1988; Vassel-Augenstein & Ehrlich, 1992). The third conclusion is that specific subgroups exist within the overall population of batterers (Gondolf, 1987; Saunders, 1992a).

The majority of the recent research with batterers has progressed along two avenues. One branch of investigation has acknowledged the diverse psychological heterogeneity of the population, but has attempted to describe

salient personality characteristics which correlate with physical violence within relationships. Hamberger and Hastings (1988) propose that the investigation of batterer personality variables will assist in effective identification and intervention. These shared psychological characteristics often represent identifiable psychopathology (Vaselle-Augenstein & Ehrlich, 1992).

The other approach has been the development of typologies. Many of these tend to be highly descriptive and serve to differentiate subgroups of abusers (Saunders, 1992a). Some typologies advanced have varying degrees of empirical support (Hastings & Hamberger, 1988; Hamberger & Hastings, 1986; Saunders, 1992a). However, many are based on clinical observation and have primarily heuristic value (Elbow, 1977). It has been suggested that the empirical evidence may only distinguish between dominant and dependent types of batterers. Other proposed categories may represent a developmental stage of battering rather than a distinct type (Saunders, 1992a).

Definition of Terms

To assist with conceptual clarity and to improve consistency of definition, there were three terms defined for the purpose of this study. Although the terms defined have common usage, the listed definitions were specific to the research.

Batterer

The term, batterer, used in the study refers to a male who uses any type of physical violence within the context of an intimate relationship. Physical violence is, subsequently, defined. The term batterer is used descriptively and does not imply the social connotations which are attached in its common usage.

Physical Violence

The term, physical violence, used in the study refers to any physical behavior that, minimally, results in physical contact or that places a substantial threat in the mind of the victim. This term includes the minimal legal definition of Domestic Violence Assault and Battery which is “any unwanted touch.” The term physical violence includes, but is not limited to, the behaviors of burning, using weapons, strangling, physically forcing sexual intercourse, choking, hitting, kicking, biting, throwing or hitting with objects, pushing, shoving, restraining or grabbing. Consistent with the legal definition, threat with a weapon is included.

Level of Violence

The term, level of violence, used in the research refers to a batterer’s report of physically violent behaviors as measured by the Violence index of the Conflict Tactics Scale (Straus, 1979). The level of violence was expressed numerically and represented the sum of endorsed items across a range of physical behaviors. Higher totals on the CTS indicate higher levels of physical violence. The limitations of batterer self report data were recognized.

Research Questions

For the purpose of the study, research questions were generated to investigate whether batterers differentiated based on demographic variables and psychological variables obtained from the Minnesota Multiphasic Personality Inventory-2 (MMPI-2). The existence of variables that correlated with the level of violence was of primary interest. The following research questions were proposed for study:

1. Are there significant differences between any MMPI-2 scale scores obtained by batterers with a prior legal history and those with no prior legal history?
2. Are there specific demographic variables which significantly correlate with the reported level of violence used within a relationship context?
3. Are there MMPI-2 scales which significantly correlate with the reported level of violence used within a relationship context?

Research Hypotheses

To address the research questions, the following omnibus hypotheses were developed as the focus of research. The testable null hypotheses are presented in Chapter IV.

Research Hypothesis 1. There will be demonstrated differences between MMPI-2 scores obtained from participants with a prior legal history and MMPI-2 scores obtained from participants with no prior legal involvement that exceed $p < .01$.

Research Hypothesis 2. There will be correlations between demographic variables obtained from the sample and the measured level of violence that exceed $p < .01$.

Research Hypothesis 3. There will be correlations between the MMPI-2 scale scores obtained from the sample and the measured level of violence that exceed $p < .01$.

Delineation of the Research

The study was descriptive and addressed the demographic and psychological characteristics of male batterers. The purpose of the research was to determine if statistically significant correlations existed between batterer

demographic variables or psychological variables obtained from the MMPI-2 and the level of violence as measured by the CTS.

The batterers under study were voluntary participants obtained from a pool of males entering a batterers treatment program located in a small midwestern community with a surrounding population of approximately 225,000 (U.S. Bureau of the Census, 1990). All participants had engaged in physical violence directed toward a female partner and had been legally adjudicated for the offense. During the program's intake procedure, all individuals were offered an opportunity to participate in the study. All batterers were presented with a written explanation of the research. The purpose of the study and its requirements were verbally explained prior to obtaining informed consent. All participants signed a statement of informed consent acknowledging agreement for inclusion of their data in the research. Pursuant to Human Subjects Institutional Review Board (HSIRB) policy and procedures, an individual's decision to participate in the research was independent from any decision regarding program participation.

The program's required intake procedure consisted of a structured clinical interview and psychological testing. All research participants additionally completed the Conflict Tactics Scale (CTS) (Straus, 1979). The CTS was verbally administered with standard instructions and participant responses were anonymous. The additional time requirement for participants was between 10 and 15 minutes. The three items in a participant's research protocol consisted of: (1) a General Information Sheet, (2) the MMPI-2, and (3) the Conflict Tactics Scale (CTS). All data collection items were coded with an individual research identification number. After the study's data collection phase, all items were scored and subject to statistical analysis.

Limitations of the Study

A primary limitation of the study is the use of batterer self report data regarding the frequency and severity of past physical violence. Batterers tend to under report the severity and frequency of assaults (Browning & Dutton, 1986; Edleson & Byrgger, 1986). The tendency to minimize severity and frequency of assaults may have been exacerbated as data were collected during an intake session required by a mandated treatment program. A purposeful sample was gathered for the study. As such, the techniques of randomization or stratification were not employed. This type of sample creates a limitation with generalization of the study's findings. Generalization should only be made to comparable groups of batterers. Batterers with different demographic characteristics may present different psychological characteristics than the sample used for study. The third limitation relates to the instrumentation. The CTS has been widely used to assess rates of violence in many settings and uses self report. However, due to the tendency of batterers to under report violent acts, the CTS may not accurately assess actual rates of violence.

Summary

In Chapter II, selected literature regarding batterers is reviewed. The literature encompasses rates of incidence for physical assaults, medical consequences, cultural trends, sociological and psychological perspectives of male batterers and current typologies of batterers. In Chapter III, sample characteristics, instrumentation, procedures and data analysis are elaborated. In Chapter IV, results of data analysis and testing of null hypotheses are presented. Discussion of the results, clinical implications of findings, limitations of the results and recommendations is offered in Chapter V.

CHAPTER II

REVIEW OF SELECTED LITERATURE

Incidence of Relationship Violence

The incidence of violence between partners in relationships has become commonplace. The Council on Scientific Affairs (1992) estimated between two and four million women are assaulted by their partners each year. The 1975 National Family Violence Survey (NFVS) used the Conflict Tactics Scale (CTS) to measure the incidence of relationship violence (Straus, 1979; Straus, 1989). The NFVS findings estimated that over six million women are assaulted each year. This does not reflect the incidence of unreported assaults in marital or cohabiting relationships (Straus, 1991). The 1985 National Family Violence Resurvey based on 6,002 families expressed violence in rates reported per 1000 couples. Assaults by husbands in the 18 to 24 age group occurred at a rate of 271 assaults per 1000 couples. Assaults by husbands in the 25 year old or older group occurred at a rate of 104 assaults per 1000 couples (Straus, 1990b).

The CTS has been criticized for providing only a frequency count of behaviors without accounting for the antecedents or intents of physical violence within a relationship (Rhodes, 1992). In a review of the NFVS findings, McNeely & Robinson-Simpson (1987) suggested men and women assault each other with an equal frequency. Straus (1993) suggested that current research findings indicate women may assault with a frequency rate similar to men, but that female assaults cause far less injury.

Physical violence by females is, most often, less severe and less injurious (Straus, 1979; Straus, 1989; Straus & Gelles, 1990). Violence perpetrated by women is more often defensive in nature and is likely to occur within a context of ongoing male abuse (Viano, 1992). Many cases of female initiated violence are due to anticipatory variables and represent a “pre-emptive strike” by the woman (Dobash, Dobash, Wilson & Daly, 1992; Saunders, 1986). Gelles (1979) has described female initiated assault as “protective reaction violence” when a female perceives herself as the probable target of abuse. Straus (1993) indicated that assaults by women will often place themselves in danger of more severe retaliation by their partners.

Medical Consequences of Relationship Violence

Within a relationship context, physical violence by males is more likely to have negative consequences for the victim than female physical violence (Gelles, 1979). Male violence results in more severe injuries and a higher need for emergency medical treatment (Straus & Gelles, 1990). A National Institute of Mental Health Survey estimated that 21% of all women seeking emergency room surgical services were battered. Stark and Flitcraft (1989) cite battering as the single greatest cause of injury by women seeking emergency room treatment. Approximately 50% of the injuries to women seeking emergency medical treatment occur within the context of abuse. Randall (1992) estimated that between 22% and 35% of women visiting emergency rooms in the United States have symptoms associated with physical abuse. Walker (1984) examined 400 residents and non-residents of women’s shelters. After the worst episode of physical violence, 46 perceived the need for medical treatment. Of this number, only two thirds sought treatment. The physical violence that causes these injuries is perpetrated by males and, most often, occurs within a context of

ongoing verbal or physical intimidation. (Archer, 1994; Dobash et al. 1992, Frude, 1994).

Sociological Perspectives on Relationship Violence

Several theories that address long-standing social factors have been proposed to explain and understand the use of physical violence within a relationship context. The past cultural norms of male dominance and male social power are central to these theoretical frameworks (Straus, 1991).

Feminists have advanced the Patriarchal Theory of family violence. This position asserts that long-standing cultural norms of male dominance, male authority and male power have condoned and promoted violence against women (Archer, 1994; Dobash & Dobash, 1979; Frude, 1994; Straus 1976; Straus & Gelles, 1990; Viano, 1992). The Patriarchal Theory views the male use of violence is a form of coercive control of others in a family setting and as a method of maintaining dominance in a power hierarchy (Gelles, 1993).

Gelles (1983) proposed the Exchange or Social Control Theory of marital abuse. The theory addresses marital violence from a cost-benefit analysis perspective. In theory, violence will continue to be used for obtaining any goal as long as the goal outweighs any associated cost to the perpetrator. Gelles summarized, "People hit and abuse other family members because they can" (Viano, 1992).

The Resource Theory proposes that power differentials between males and females can be attributed to the traditional norm of men contributing a higher aggregate value of resources to a household. In the past, the higher level of resource contribution resulted in males assuming a position of greater decision making power regarding the allocation of household resources. The elevated level of decision power resulted in and, subsequently, reinforced dominant male

attitudes and the perception of male superiority (Viano, 1992; Warner, Lee & Lee, 1986).

Social Learning theory postulates that behaviors are acquired through a cyclical learning process. The process of behavioral acquisition involves observation of environmental models, implementation of preliminary behaviors and subsequent revision of behaviors based on environmental feedback. Social Learning Theory received attention when it proposed an explanation for the intergenerational transmission of family violence referred to as the “cycle of abuse” (O’Leary, 1988).

The “cycle of abuse” suggests that aggressive attitudes and behaviors are transmitted from one generation to the next. Violent interactional styles are established as a norm in the family of origin. Aggression and/or physical violence used by environmental models to resolve interpersonal conflicts are established as an accepted model of conflict resolution. These models of conflict resolution are learned by children and are manifested in similar social contexts at a later time. Consequently, males who experience abuse or who are exposed to high levels of family violence are more probable to use violence later in life (O’Leary, 1988). Pressman (1987) found that eighty percent of men who either witnessed or were victims of physical violence repeat the pattern of abuse.

Individual Perspectives on Relationship Violence

Aggression in the human species is proposed as a basic drive and is an integral component of most psychological theories (Viano 1992). The “normalcy” of aggression was the basis of earlier perceptions of male batterers and, many times, assisted in many situations of abuse being overlooked or minimized. Physical violence in a relationship context perpetrated by men who

lacked overt signs of a mental disorder was viewed as a normal male trait of aggression (Gelles, 1993a).

Until the mid 1980s, men who used physical violence within relationships were described as “normal males” who shared similar psychological problems with other men. Their primary deficits were viewed as a low level of coping skills (Smith, 1984). The primary focus of assessment and treatment for male batterers was on external and social factors such as alcohol abuse, drug abuse, unemployment, poverty, and sex role stereotyping that were viewed as causative agents for physical violence. Little attention was devoted to the role of personality characteristics. Psychopathology was believed to be present in only a small percentage of male batterers (Weitzman & Dreen, 1982; Wetzel & Ross, 1983).

Currently, the predominant view of male batterers is they are a heterogeneous group both demographically and psychologically. Although not present in all cases, many batterers display high levels of psychopathology (Hastings & Hamberger, 1988; Hamberger & Hastings, 1986; Vaselle-Augenstein & Ehrlich, 1992).

Clinical observation and empirical data suggests identifiable personality characteristics in batterers (Dowerty, 1983; Gondolf, 1987). Men who engage in physical violence within relationships are consistently described as having excessive needs for power and control over their partners. Typically, their need for control encompasses every aspect of family life (Archer, 1994; Bernard & Bernard, 1984; Coleman, 1980; Gondolf, 1985; Saunders, 1992b).

Batterers often have excessively rigid sex-role expectations and need to be dominant in a relationship (Dutton, 1988; Follingstad, Rutledge, McNeil-Harkins & Polek, 1992; Gondolf, 1985). Male batterers often expect females to fulfill both the nurturing role of a mother and the sexual role of a wife (Pressman,

1987). In a review of assault sequences, Dobash and Dobash (1984) found that the smallest assertion of female independence was often responded to with retaliation of psychological abuse or physical violence. They concluded that any female initiated action perceived by the male as a “challenge” to his authority functioned as a primary antecedent to male assaults.

The power needs in batterers often stem from feelings of inadequacy in close relationships (Allen, Calsyn, Fehrenbach & Benton, 1989; Coleman, 1980; Gondolf, 1985). Batterers tend to have a high level of dependence on their partners. Characteristically, this dynamic of dependence is dealt with by ambivalence (Bernard & Bernard, 1984; Bowlby, 1984). Although batterers have a need for psychological closeness, a relationship perceived as too close raises an internal fear of losing control (Dowerty, 1983). The dynamics of an abusive relationship violence will often cause a female to withdraw and align with others. The woman’s alignment with others, typically children, and the male’s perception of separation will increase the male’s use of behaviors designed to control the female (Pressman, 1987). Physical violence and coercive tactics are instrumental behaviors used by batterers to avoid abandonment anxiety associated with either actual or perceived separation (Coleman, 1980; Weitzman & Dreen, 1982).

Many male batterers have difficulty with intimacy and boundaries. Bowlby (1984) viewed batterers as undifferentiated from their family of origin. The tentative posture batterers assume in relationships often leads to pervasive feelings of jealousy and insecurity (Allen et al., 1989; Gondolf, 1985). Mauro, Cahn, Vitaliano, Wagner, and Zegree (1988) found that batterers display higher levels of suspicion, as measured by the Minnesota Multiphasic Personality Inventory (MMPI), than male non-batterers.

Poor communication skills are another salient characteristic of men who use physical violence within relationships. Male batterers lack verbal assertiveness skills and do not articulate needs well. Verbal aggression and physical violence are used to compensate for these deficits (Maiuro et al., 1986). On the FIRO-B, male batterers displayed difficulty with expression of affection, a generalized discomfort with others, low levels of interpersonal trust, and deficits in relationship skills (Allen et al., 1989; Gondolf, 1985).

Difficulties with managing anger and aggressive feelings is a consistent clinical finding among men who use physical violence within relationships. These difficulties are manifested as either excessive impulsivity or as rigid control of negative impulses (Coleman, 1980; Dutton, 1988). In a review of MMPI research, Vaselle-Augenstein and Ehrlich (1992) concluded male batterers consistently exhibit problems with impulse control.

Many batterers are capable of delaying aggressive feelings and displacing them on a "safe target" in a secondary setting. There are numerous clinical accounts of males assaulting partners instead of coworkers, waking up victims to assault them or taking time to aim blows that will leave little visible damage (Coleman, 1980; Elbow, 1977; Gondolf, 1985).

The factors of difficulty with impulse control, a batterer's capacity for delay, and the instrumentality of violent behaviors have been used to dichotomize types of male physical violence within relationships. Archer (1994) proposed the categories of "hostile violence" and "instrumental violence." "Hostile violence" is the discharge of aggressive feelings through physically violent behavior. The negative feelings that originate in one setting are directed toward a "safe target" in another context. The capacity to delay aggressive impulses is required for this type of violence.

“Instrumental violence” involves goal directed aggression. Male batterers who use this type of physical violence, often, have complete control of the household and their partner (Archer, 1994). Instrumental violence consists of a pervasive pattern of physical violence and psychological abuse which has been referred to as a “reign of terror.” The batterer’s “reign of terror” establishes himself as the dominant family member in the family system with his needs, wants and desires being of primary importance. Others in the household either meet his needs or avoid arousing his anger in an attempt to avoid being victimized (Archer, 1994; Frude, 1994; Goodwin, 1994; Vaselle-Augenstein & Ehrlich, 1992).

A common clinical observation of male batterers is a reduced capacity to experience guilt. Male batterers express “bad feelings” related to an assault when external consequences, such as arrest or loss of a spouse, are imminent (Coleman, 1980). On the basis of Millon Clinical Multiaxial Inventory (MCMI) profiles, Hastings and Hamberger (1986) concluded male batterers lack empathy. The lowered ability to understand the impact their behavior has on others is frequently seen in clinical settings (Pressman, 1987). Batterers fail to understand the reciprocity of the rights of others, especially those who are perceived as “weaker” (Viano, 1992).

Research findings by Hastings & Hamberger (1988) suggest male batterers deny and minimize low level aggressive feelings to themselves and to others. They often ignore physiological and cognitive signs associated with the emotional response of anger (Gondolf, 1985). Most male batterer treatment programs report high levels of defensiveness among participants (Saunders, 1992b). The defensiveness is often manifested by minimizing the severity of the assault, projecting blame on the victim and denying responsibility for the assault (Coleman, 1980; Hotelling & Sugarman, 1986; Weitzman & Dreen, 1982).

As a group, batterers report high levels of generalized dissatisfaction with their lives (Hotaling & Sugarman, 1986). Although the needs for power and control over other family members are consistently reported, batterers often feel powerless over the course of their lives. Empirical findings with male batterers suggest low self-concepts, high levels of hostility, depression and anxiety (Dowerty, 1983; Elbow, 1977; Gondolf, 1985; Saunders, 1984; Vassel-Augenstein & Ehrlich, 1992).

Typologies of Men Who Use Relationship Violence

The literature related to batterers suggests a dichotomy of both identifiable personality characteristics and a wide degree of psychological diversity (Dutton, 1988; Gondolf, 1987). One approach to reconciling the dichotomy presented by male batterers has been the construction of typologies. Research findings suggest that various subtypes of batterers exist who share similar within group characteristics, but who differ substantially between groups (Saunders, 1992a; 1992b).

An initial classification of male batterers was developed from Megargee's (1973) work related to criminal offenders that found an empirically supported dichotomy between "overcontrolled" and "undercontrolled" offenders. Subsequently, this finding became the basis for the MMPI's Overcontrolled Hostility scale (O-H). The categories of undercontrolled and overcontrolled were generalized to male batterers.

Elbow (1977) proposed four types of batterers based on clinical observation. The first type is the "controller" who attempts to establish feelings of personal adequacy through control of his mate. The second type is the "defender" who is highly dependent and exhibits behavior that is designed to defend against loss. Elbow's third type is the "approval seeker." The goal of

the “approval seeker’s” abuse is to reinforce an inadequate self image. The last type is the “incorporator” who has difficulty establishing boundaries between himself and his mate.

Steinmetz (1978) theorized two types of men who use physical violence within a relationship context. The first type engages in “mutual” abuse due to perceived provocation from his partner. Steinmetz’s second category engages in more severe abuse of his victim with the element of provocation being absent.

Mott-McDonald (1979) proposed a “hitter” versus “batterer” dichotomy. The “hitter” assumes higher levels of responsibility for the assault, is aware of precursors to the assault and will, often, warn the victim of an impending attack. “Batterers” project blame for the assault on the victim. The episodes of violence by “batterers” are more severe, more frequent and occur with little warning.

Batterers who are aggressive across multiple contexts tend to use more severe physical violence in relationships and possess more dominant traits than men who use violence specifically within a family context (Dutton, 1988; Saunders, 1992a; Vaselle-Augenstein & Ehrlich, 1992). The “family only” type is more dependent and verbalizes more regret for his actions (Gondolf, 1987; Saunders, 1992a).

Snyder and Fruchtmann (1981) performed a cluster analysis of abuse factors reported by residents of a women’s shelter that resulted in five identifiable patterns of abuse. The most predominant factor associated with frequent physical abuse and severe injury was alcohol abuse by the male batterer.

In a small descriptive study, Caesar (1986) used the MMPI to provide empirical support for three types of abusers. The categories supported included: (1) the “tyrant” who lacked remorse and used fear to control his partner, (2) the “exposed rescuer” who felt remorse and had a high need for others to be

dependent on him, and (3) the “non-exposed altruist” who inhibits feelings of anger and is ambivalent regarding internal feelings of dependence (Saunders, 1992).

Hamberger and Hastings (1986) utilized MCMI profiles from male batterers to develop three primary types of abusers. Factor analysis yielded the categories of: (1) the schizoid/borderline, (2) the narcissistic/antisocial, and (3) the dependent/compulsive. However, the largest pure category comprised only 16% of the total sample.

Gondolf (1987) proposed three categories based on the reports of 550 woman’s shelter residents. The first type is the “typical batterer” who is similar to the “family only” or dependent abuser. Gondolf’s “typical batterer” uses less severe violence and appears to experience feelings of remorse. The “typical batterer” is not likely to have either an extensive legal history or a primary substance abuse problem. The second type is the “sociopathic” (7% of the sample) who is distinguished by an extensive arrest record, the use of violence across contexts and substance abuse difficulties. The “sociopathic” abuser has the highest probability to inflict severe injuries. Additionally, this type is most likely to abuse children and has a higher probability of sexually abusing female partners. Gondolf’s third type was the “antisocial” batterer. This type uses extreme physical violence and has the second highest probability of inflicting serious injury.

Saunders (1992) concluded the typologies constructed to date represent two dimensions of batterers regardless of the number of categories. Their primary dimensions are dependency and dominance. His research resulted in a three tiered typology consisting of: (1) the family-only aggressor (Type 1), (2) the generalized aggressor (Type 2), and (3) the emotionally volatile aggressor (Type 3). The Type 1 batterers tend to engage in the least severe violence.

They are non-assertive, attempt to avoid conflict and suppress emotions. Type 2 batterers display the highest levels of dominance and engage in severe violence across multiple contexts. This type of batterer has the most rigid sex-role expectations and has low levels of self-esteem. Type 3 batterers engage in the highest degree of psychological abuse and have the highest fear of abandonment. This type of batterer experiences periodic depression, holds somewhat rigid sex-role attitudes and tends to be dissatisfied with life.

Summary of the Literature

The literature reviewed indicates that violence within a relationship context has a high rate of incidence and the consequences to the victims of this form of physical violence can be extreme. There are many perspectives that attempt to explain the use of physical violence by male batterers. These use factors that range from long standing sociological factors to individual psychopathology. It is apparent from a review of the literature that the “roots” of this type of physical violence are multifaceted and are not likely to be fully understood by the use of a singular factor. The literature suggests that understanding the phenomena of male battering may require that multiple perspectives be merged to provide a more complete understanding and comprehensive explanation.

Due to the history of males using physical violence and the multifaceted nature, physical violence within a relationship context is not likely to be eradicated and potential risk for victims will remain. The merging of perspectives may assist in developing better methods to differentiate types of batters and understanding their associated dynamics. In turn, this may lead to more precise classification, improved prediction and improved methods of treatment for batterers.

CHAPTER III

METHOD

Introduction

The purpose of the study was to describe demographic and psychological characteristics of male batterers. Sample mean scores and a composite sample mean profile of the Minnesota Multiphasic Personality Inventory (MMPI-2) scale scores was developed. The MMPI-2 scale scores were differentiated into subgroups across the demographic variable of past legal history and mean profiles were developed for each subgroup. All profiles were compared for substantial differences. Correlational analysis using Pearson product-moment coefficients was conducted on specified demographic variables or psychological variables from the MMPI-2 to determine statistically significant correlations with the level of violence reported by batterers. For purposes of this study, level of violence was measured by the Conflict Tactics Scale (CTS).

Sample

The sample for the study consisted of 44 male batterers who were in the entry process of a domestic violence treatment program. All batterers had been legally adjudicated under the parameters of recent domestic violence laws for physically violent behavior toward a female partner. All batterers had been placed on probation and were mandated to attend counseling as a probation condition. The domestic violence treatment program was one available treatment option. All batterers participated in the study voluntarily. Pursuant to Human

Subjects Institutional Review Board (HSIRB) policy and procedures, an individual's decision to participate in the research was independent from any program decision regarding recommendations for treatment. The study's protocol was reviewed by the full committee of the HSIRB on February 15, 1995. Final approval for the research protocol was granted on February 23, 1995 (see Appendix A).

The crime of Domestic Violence Assault & Battery and its varying degrees of severity is defined by MCL 750.81 and MCL 750.81a of the Michigan Penal Code (see Appendix B). Effective July 1, 1994, the Michigan Penal Code and the corresponding Code of Criminal Procedures were amended by legislation (Special Edition: Domestic Violence Update, 1994). The county where the research was conducted had implemented parallel arrest and prosecution policies for responding to domestic assaults which preceded the statutory changes by approximately one year.

Categorization by legal standards tends to be highly inclusive. The legal definition of domestic violence assault and battery is based on the behavior of any unwanted touch. The range of behaviors encompassed under the legal standards includes behaviors of low lethality and/or injury and of high lethality and/or injury. The most inclusive legal term to cover the expanse of behaviors is assault and battery.

The literature on physical violence within a relationship context suggests that aggressive behaviors occur along a continuum of severity. Many men arrested for physical violence within a relationship possess a range of aggressive behaviors. Most often, the behavior or behaviors involved in a specific assault sequence do not, necessarily, represent the entire aggressive behavioral repertoire. Behaviors with higher potential for injury and/or lethality are often implemented after lower level behaviors fail to produce desired results (Archer,

1994; Snyder & Fruchtmann, 1981; Straus, 1979; Straus, 1989). The majority of males entering treatment programs admit to use of physical violence beyond the incident of arrest (Gondolf, 1985; Saunders, 1984).

Legal definitions create a broad pool of participants who display extreme behavioral diversity. One challenge in the study was the participant's behavioral diversity. Although the research sample displayed a wide range of behaviors, all participants shared the commonality of engaging in physical violence toward a relationship partner.

Instrumentation

The research protocol required the administration of three instruments for data collection. These were: (1) a General Information Sheet to collect demographic information (see Appendix C), (2) the Minnesota Multiphasic Personality Inventory-2 (MMPI-2), and, (3) the Conflict Tactics Scale (CTS) (see Appendix D). Due to copyright laws restricting inclusion, the MMPI-2 is not reproduced in the Appendices.

Demographic Data

Demographic variables were collected on all participants by the completion of a General Information Sheet. The information collected consisted of gender, age, race, socioeconomic status, employment status, marital status, legal status and highest level of education completed. Additionally, participants were asked to respond regarding past marital status, past legal status and prior involvement in either psychological treatment or substance abuse treatment.

Abuser Personality

The MMPI-2 is a 567 item forced choice personality inventory and provides a quantitative evaluation of a respondent's level of defensiveness, of temporally stable personality characteristics and of current emotional status and adjustment. The 2,600 subject normative group reflects the overall population (Graham, 1990). The MMPI-2 incorporated the Supplementary Scales from the original instrument. In addition, the MMPI-2 contains 3 new validity scales and 15 new content scales (Butcher, 1992; Graham, 1990). During the restandardization process, a high degree of continuity was maintained between the MMPI and the MMPI-2 to insure the integrity of the instrument's research base (Graham, 1990).

The original MMPI was a 566 item forced choice personality inventory. It was one of the most widely researched measures of personality (Butcher, 1992). Previous research with the MMPI has addressed psychological assessment and categorization of criminal justice populations (Megargee, 1973).

The MMPI-2 results for participants in the study were reported as both raw scores and as T scores. The participant's raw scores for each scale were derived by calculating the sum of responses endorsed in the scoring direction. The raw scores were K corrected and the K corrected raw scores were converted into either uniform or linear T scores for each scale. The T scores were used to construct individual clinical profiles for each participant. Scale scores equal to or greater than 65T are clinically significant (Graham, 1990).

Each research participant's clinical profile was reviewed by an independent rater to determine validity. Judgments regarding profile validity were made on the basis of standard decision rules (Butcher, 1992; Graham,

1990). These following types of profiles were eliminated from the study:

(a) Profiles where 30 or more items had been omitted; (b) Profiles that suggested random responding by a moderate elevation on the L scale (T score of 50 to 60), an extreme elevation on the F scale (T score is 100 or greater), and, a mid range score on the K scale (T score is approximately 50); (c) Profiles which indicated an all true response set by an extremely elevated score on the F scale (T score above 100), mid range elevations on the L scale and the K scale (T score below 50), and, where the clinical profile was extremely elevated on the right side with scale 6 and scale 8 being most pronounced; and (d) Profiles which suggested an all false response set marked by simultaneous elevations on scales L, F, and K. Additionally, in an all false response set, the scales on the left side of the profile would be elevated.

Profiles marked by an extreme V-shaped validity configuration were reviewed in light of the individuals educational level (Graham, 1990). Profiles were eliminated from the research study which lacked sufficient validity. MMPI-2 profiles that indicated positive self presentation or moderate to high levels of defensiveness were included as defensiveness is a characteristic of male batterers (Coleman, 1980; Weitzman & Dreen, 1982; Wetzel & Ross; 1983). Although a defensive or positive self presentation response set results in reduced elevations on all scales (Graham, 1990), these profiles were included to obtain information regarding batterers level of defensiveness.

For the study, scores from the standard scales (3 basic validity scales and the 10 clinical scales) and the 15 Content scales were subject to data analysis. Scores from 10 selected Supplementary scales were included in the data analysis. The 3 new validity scales were not included for analysis due to their experimental nature and the lack of a sufficient empirical base (Graham, 1990).

Extent of Interpersonal Violence

A participant's past level of violence was measured by the Conflict Tactics Scale (CTS). The CTS assesses tactics used by individuals to resolve intrafamilial conflict by recording the frequency of various behaviors within the last year. The original version was designed to assess conflict tactics in any family dyad. The CTS used a factorial model to develop items that measured the theoretical constructs of Verbal Reasoning, Verbal Aggression and Violence. The Verbal Reasoning index contained behaviors representative of rational discussion and reasoning. The Verbal Aggression scale included either verbal or nonverbal actions which hurt the other person in a symbolic manner. The Violence Scale involved behaviors where any degree of physical force is used. The factor analysis yielded a fourth factor labeled "Wife-Beating." The core of this factor was two items which have a high potential for injury or fatality (Straus, 1979; Straus, 1990).

For the study, Form N of the CTS was used. Form N was designed to be administered in a face to face interview and was, specifically, designed to assess conflict tactics in the conjugal role. It has a greater focus on tactics of Verbal Aggression and of Violence by discarding one Verbal Reasoning item. Two items for Verbal Aggression and three items for Violence were added.

Form N of the CTS has a low rate of refusal to answer items and does not result in high levels of antagonism. Its acceptability to respondents is related to the face to face administration and the presentation of behaviors as occurring within the context of disagreements. Acceptability to respondents is heightened by beginning with items with a high level of social acceptability. Items are arranged in a hierarchical order with a gradual shift in item content to increasing levels of coercion and social deviance (Straus, 1979; Straus, 1990).

The Alpha coefficients of reliability for Form N of the CTS were computed for all possible dyads using a sample of 2,143. In the Husband to Wife dyad, the Reasoning Scale has a coefficient of .50, the Verbal Aggression scale has a coefficient of .80 and the Violence scale has a coefficient of .83. Correlations for concurrent validity are low for the Reasoning scale ($r = .19$), but are acceptable for the Verbal Aggression scale ($r = .51$) and the Violence scale ($r = .64$). The lowered reliability and validity coefficients for the Reasoning scale are due to a small number of items (3) which comprise the scale.

The author of the CTS cites that construct validity is supported by:

- (a) success of the CTS in obtaining comparably high rates of socially undesirable acts of physical and verbal aggression as are structured in-depth interviews,
- (b) the CTS data is consistent with empirical data regarding the extent that patterns of violence are correlated across generations, and (c) the data from the CTS is consistent with empirical findings regarding the current theories of spousal abuse (Straus, 1979). Since its development, the CTS is one of the most widely research instruments for examining aggression in relationships (Saunders, 1992b; Goodwin, 1994).

Each CTS scale was scored by calculating the sum of the code values within the category. This numerical sum represented the raw score for the scales of Verbal Reasoning, Verbal Aggression and Violence. A standardized score on a 0 to 100 scale was calculated for each scale by dividing the raw score by the maximum possible score, multiplying by 100 and rounding to the nearest integer. Percentile scores were obtained by comparing the raw scores to data from the 1985 national sample (Straus, 1990).

Although the Violence scale was of primary interest in the study, the Verbal Aggression scale for each participant's questionnaire was also scored.

In the research, a total score for the instrument (Combined Score) was calculated by adding the Verbal Aggression score and the Violence score. The total raw score was divided by the maximum possible total score to convert it to a standard score.

The Combined Score was used to reflect overall levels of violence. Batterers are more likely to admit to the more socially acceptable acts of verbal aggression and to minimize the less socially acceptable acts of physical violence (Coleman, 1980; Straus, 1979). The Verbal Aggression score, the Violence score and the Combined Score from the CTS were subject to data analysis. Prior to data analysis, a priori assumptions regarding the data were not made.

Procedure

All potential participants for the study were referred to a domestic violence program for men. The program is a psychoeducationally based 24 week treatment group for males who had been legally adjudicated for using physical violence toward an intimate partner. The treatment procedures of the program address sociocultural aspects of male violence, difficulties with management of anger and development of alternative skills and behaviors for conflict resolution. The program was developed in conjunction with a countywide domestic assault intervention program. The countywide task force consisted of representatives from the prosecutors office, probation departments, victim services and women's shelters. Development of the program model and its implementation as a primary treatment component for the county's response to domestic violence was approved in June, 1993.

All batterers were ordered to some form of treatment by a judicial official. In an initial meeting with a probation agent, the batterer was referred to the program and provided with general program information, a specified date for

contact and a release of information was executed. The release of information allowed disclosure of the police report to the program. The batterer was responsible to arrange an intake session with program staff. All batterers who contacted the program were informed of the required intake session, the intake's general purpose, cost and time considerations, and the potential length of group participation.

The program's standard intake procedure required a face to face structured clinical interview, completion of an orally administered behavior checklist consisting of abusive and physically violent behaviors and administration of the MMPI-2. The purposes of the intake session were to: (a) determine an individual's appropriateness for program services, (b) determine the level of risk they present to others, and (c) screen for primary mental health problems and/or substance abuse problems which would preclude program participation. Decisions regarding program participation or non-participation were based on interview data, responses to the behavioral checklist, the MMPI-2 profile and a review of the police report.

There was an artificially high rate of inclusion into the program as all referrals had been adjudicated for domestic violence assault and battery. Individuals could be excluded from the program for: (a) primary mental health problems which require specific treatment; (b) primary substance abuse problems which require specialized treatment; and (c) an isolated aggressive incident of low lethality, (i.e. physically violent behaviors which have little potential for causing injury), where the level of future risk to others is low and which appeared directly related to a current life stressor. Individuals who are determined to present a substantial risk to others required exercising the Duty to Warn (American Psychological Association Ethics Committee, 1992). Individuals judged as inappropriate for group services due to exclusion criteria or

who would benefit more from other services were referred to either community or private agencies.

The study's procedures closely paralleled the program's intake procedure. Attempts were made to avoid increasing the level of intrusiveness beyond that currently required. Upon arrival for the intake session, the program's procedures required that all individuals complete standard initial paperwork consisting of: (a) program face sheet, (b) demographic information sheet, (c) financial questionnaire, (d) notice of confidentiality, (e) duty to warn statement, (f) recipient rights form, (g) medical survey, (h) needs assessment, and (i) an authorization to disclose information.

A program clinician then conducted a structured interview with each batterer. During the interview, the basic areas of a batterer's life, including (a) use of substances, (b) history of psychological or substance abuse treatment, (c) military service, (d) financial condition, (e) employment status and history, (f) marital history, and (g) family of origin, were addressed. Primary attention was given to the factors of: (a) the specifics of the current assault, (b) legal history, (c) past use of violence in other contexts, (d) use of corporal punishment with children, (e) availability of weapons, (f) current methods of anger management, and (g) screening for homicidal or suicidal ideation. The potential participant's police report and legal history were available for review during the interview.

The past use of violence in a relationship context was examined by an orally administered behavior checklist. Following the structured interview, the MMPI-2 was administered. Individuals who identified themselves as having poor reading skills were administered the MMPI-2 with an audio tape.

For the study, the following modifications were established in the standard intake procedure. Along with the initial standard forms and

information, all batterers were provided with a written explanation of the study's purpose and its requirements, (see Appendix E). The standard intake paperwork was completed and the structured interview was conducted as described. At the point in the structured interview where the behavior checklist would be normally administered (see Appendix F), the program clinician verbally explained the purpose of the research and the requirements for all potential participants. The clinician answered any questions related to the research. All individuals who consented to participate signed a statement of informed consent (see Appendix G) to acknowledge authorization for use of their data. If a batterer declined participation, the clinician administered the standard behavior checklist and proceeded with the intake. All research participants were administered the Conflict Tactics Scale during the interview in place of the behavior checklist.

The CTS response form, a letter sized envelope and a large sized mailing envelope all labeled with a research identification number were given to each participant. Administration was standardized using written instructions attached to each CTS response form. A sample item was constructed to insure that participants understood how to code responses. Each CTS item was read to the participant and participants were asked to record the frequency of listed behaviors both over the last year and during their lifetime. The rating scale was at the top of each page of the CTS to facilitate responding and participant responses were coded anonymously on the form.

When completed, participants placed the CTS form in the envelope provided and sealed the envelope. Following the interview, all participants were administered the MMPI-2 and the standard behavior checklist as a self-report measure. If a subject did not complete testing on the interview date, all assessment instruments, including the sealed CTS form, were stored in the large sized mailing envelope identified with the subject's research identification

number. All attempts were made to have participants complete research instruments on the interview date.

Program staff photocopied the General Information Sheet and the MMPI-2 answer sheet to eliminate identifying information and coded these items with the subject's research identification number to compile the research protocols. The participant name and code number were entered on a master list. Originals of the assessment instruments were placed in the participant's clinical file.

Each completed research protocol consisted of: (a) the photocopied and coded General Information Sheet, (b) the photocopied and coded MMPI-2 answer sheet, and (c) a sealed envelope containing the CTS. All data collection items were marked only with a research identification number and were maintained in a sealed large sized mailing envelope also identified by the same research identification number. Data collection items were removed for scoring or tabulation after a decision regarding program involvement was determined. After scoring or tabulation, all data collection items were returned to the research file and maintained. All incomplete research protocols were eliminated from the study. The participant's signed statements of informed consent and the master code list were maintained in separate secure files.

Data Analysis

This study was descriptive in nature and described psychological and demographic characteristics of a purposeful sample of male batterers. Its purpose was to identify variables that either differentiated batterers into subgroups or that correlated with reported levels of violence. Analysis of the data determined if significant subgroups existed across a demographic variable. Data analysis determined if any of the instruments produced psychological or

demographic variables that would assist in the identification of batterers and their levels of violence.

The first treatment of the data compiled variables for a descriptive analysis that defined the research sample's composition. Determining the parameters of the sample was necessary to determine limitations of the research results and conclusions.

The second treatment of the data was to develop a composite profile from the sample's mean MMPI-2 T scores. The MMPI-2 data were divided into the categories of participants with past legal history (PLS) and participants with no prior legal involvement (No PLS). Mean T scores for the standard scales, for selected Supplementary Scales and for all Content Scales were calculated. Comparisons were made between the three sets of means.

The third level of data analysis determined if correlations existed between the independent variables and the dependent variable. The demographic variables and data from the MMPI-2 functioned as independent variables. The level of violence as measured by the Violence scale from the CTS functioned as the dependent variable. The Statistical Package for the Social Sciences; Extended (SPSSx) was used to insert participant scores in a correlational matrix and to calculate Pearson product-moment coefficients of correlation for each set of paired variables. The SPSSx program used a two tailed t-test to determine statistical significance at the $p < .05$ and the $p < .01$ levels. The level of $p < .01$ was established as the required level for statistical significance in the study. The findings of statistical significance and testing of the Null Hypotheses are presented in Chapter IV.

A review of all statistically significant coefficients was conducted to determine their meaning related to the study's purpose. The conclusions of the

study and implications of statistically significant findings are addressed in Chapter V.

CHAPTER IV

RESULTS

The Sample

The sample for study consisted of male batterers who had been adjudicated for physically violent behavior toward a female partner. As a result, all participants were on probation and were mandated to attend counseling as a condition of court involvement. Data were collected from participants during a required intake session for a domestic violence treatment program located in a midwestern community of approximately 225,000. The data were collected from intake sessions conducted between February 23, 1995 and June 1, 1995; research participation was voluntary.

Between the above mentioned dates, 62 persons were potential participants. Initially, 51 batterers (82%) agreed to participate in the study with the total number in the final sample being 44 (86%). Seven participants provided either incomplete or invalid data and were removed from the sample. An inspection of the demographic data for these seven participants indicated a high degree of similarity to the final sample. Inspection of the data indicated their demographic characteristics did not differ substantially from the sample's demographic characteristics used in the final analysis.

Participants in the sample ranged from age 21 to age 46 with a mean age of 30.3 years and a median age of 30 years. The modal age in the sample was 36 years, but this comprised only 9% of the sample.

As shown in Table 1, the sample was racially diverse. African Americans were over represented compared to the overall racial composition in the county where the study was conducted. The percentage of whites was slightly under represented in the sample compared to the county's general population statistics. Although the percentage of Hispanic individuals in the sample was small, it was roughly equivalent to the statistics of the county where the research took place.

Table 1
Racial Composition of Batterers (*N*=44)

Racial Category	Number	Percent
White	33	75%
African American	10	23%
Hispanic	1	2%

In Table 2, a listing by number and percentage of participants in the subgroups of participants with a prior legal history (PLS) and participants with no legal history (No PLS) is presented.

In Table 3, the total percentage of participants maintaining a partner relationship was determined by combining the categories of co-habiting and married. Participants in a partner relationship comprised a total of 44% of the sample. The percentage of participants who are either divorced or separated (22%) is higher than countywide statistic reported in the 1990 Census.

The sample varied in reported employment status. In Table 4, it is shown that 75% of the sample maintained some level of employment. The 11%

Table 2
Legal History of Batterers (N=44)

Group	Number	Percent
Prior Legal History (PLS)	24	55%
No Prior Legal History (No PLS)	20	45%

Table 3
Marital Status of Batterers (N=44)

Reported Marital Status	Number	Percent
Single	15	34%
Widowed	0	0%
Married	13	30%
Separated	5	11%
Co-habiting	6	14%
Divorced	5	11%

of the sample listed as unemployed is higher than the general unemployment statistic for the county where the research was conducted.

In Table 5, the levels of educational attainment in the sample vary widely, but many categories are similar to general county statistics. The 78% of

Table 4
Employment Status of Batterers (*N*=44)

Employment Status	Number	Percent
Unemployed	6	11 %
Employed Part Time	7	16%
Employed Full Time	26	59%
Disabled	4	9%
Student	2	5%

Table 5
Levels of Educational Attainment (*N*=44)

Educational Level	Number	Percent
Less than 9th Grade	1	2%
Less than 12th Grade	9	20%
GED	8	18%
High School Graduate	10	23%
College Courses, No Degree	14	32%
Two Year Degree	0	0%
Four Year Degree	2	5%

the sample with educational levels greater than high school graduation or its equivalent was slightly lower the 1990 reported county statistic. The 22% of the sample with less than a high school education is higher than the general statistic listed for the county where the study took place.

As seen in Table 6, the sample's income distribution was skewed to the left due to an extremely high percentage of individuals in the sample reporting a low socioeconomic status (SES). Of the participants in the sample, 64% reported an income level of less than \$20,000. Reasons for the over representation of low SES will be addressed in Chapter V.

Table 6
Reported Income of Batterers (N=44)

Reported Income Level	Number	Percent
Under \$5,000	10	23%
\$ 5,000-\$10,000	13	30%
\$10,000-\$20,000	5	11%
\$20,000-\$30,000	10	23%
\$30,000-\$40,000	5	11%
\$40,000-\$50,000	0	0%
\$50,000-\$60,000	1	2%
Over \$60,000	0	0%

Although some demographic categories are higher than the norms for the county where the research was conducted, many are comparable. The category most over represented in the sample was lower SES individuals. Based on the

overall dispersion of demographic characteristics, there were no indications to believe this sample was not representative of the overall population of batterers.

Reported Levels of Violence

Levels of violence were measured by the Conflict Tactics Scale (CTS). Raw scores and standardized scores for the Verbal Aggression scale, Violence scale and a Combined CTS score were calculated using the non-weighted method (Straus, 1979). The Combined Score was specific to this study.

In Table 7, the similarity in the standard deviations for Verbal Aggression and for Violence indicated similar variability in participant scores. The standard deviation of the Combined Score suggests slightly more variability in participant scores.

Table 7
CTS Scores for Batterers (*N*=44)

CTS Scale	Raw Score	<u>SD</u>	Standardized Score
Verbal Aggression	22.27	7.68	62
Violence	9.11	7.52	19
Combined CTS Score	31.39	12.55	37

Comparison of the scores, listed in Table 8, to the 1985 data from the National Family Violence Resurvey (NFVR), indicates the 18 to 24 year old group of batterers in the sample had a Verbal Aggression score at the 75th percentile and a Violence score at the 97th percentile.

Table 8
CTS Scores for Batterers in the 18 to 24 Year Old Group (N=12)

CTS Scale	Raw Score	Percentile
Verbal Aggression	18	75th
Violence	9	97th
Combined Score	27	NA

In Table 9, the CTS raw scores for batterers in the 25 years and older age group are listed. The 1985 NFVR data were used to determine the percentiles for the 25 years and older group for the categories of Verbal Aggression and Violence.

Table 9
CTS Scores for Batterers in the 25 Years and Older Age Group (N=32)

CTS Scale	Raw Score	Percentile
Verbal Aggression	24	89th
Violence	9	92nd
Combined Score	33	NA

The 25 years and older group of batterers in the sample reported scores on the Verbal Aggression scale at the 89th percentile and on the Violence scale at the 92nd percentile. The reported scores from both age groups in the sample

for study equate to high percentiles compared to the normative sample (Straus, 1990). No normative data were available for the Combined Score as it is specific to the research.

Personality Characteristics

Inspection of individual Minnesota Multiphasic Personality Inventory-2 (MMPI-2) profiles, prior to data analysis, revealed a substantial number of profiles suggestive of either a defensive or positive self presentation response set. The mean L scale raw score of the sample was 5.48 with a standard deviation of 2.69. Given the educational and socioeconomic level of the sample, higher than average scores were expected. The sample's mean raw L score was almost one standard deviation higher than the average L scale raw score of 3 listed in the MMPI-2 normative data (Graham, 1990). The mean raw L score of the sample was considered slightly high.

To determine the percentage of profiles with an elevated T score on the L scale a criterion of $L > 64T$ was set. Analysis revealed 36% of the sample had an L scale T score of clinical significance ($\geq 65 T$). Criteria of $L > 60T$, $F < 48T$ and $K > 60T$ were set to determine the percentage of profiles with a positive self presentation response set; considering the profiles used in the sample, 16% exceeded this criteria.

MMPI-2 data were used to determine the mean T score for each standard scale which are listed in Table 10. The sample's composite mean profile is shown Figure 1.

The highest T scores in the composite mean profile were on the Pd Scale, (Psychopathic Deviate), with a T score of 61 and on the Pa Scale, (Paranoia) with a T score of 60. Although these subclinical elevations are descriptive of personality features, none of the T scores in the composite mean profile met the

Table 10
Mean Standard Scale T Scores for the Sample

Scale	L	F	K	Hs	D	Hy	Pd	Mf	Pa	Pt	Sc	Ma	Si
T Score	59	54	51	53	55	53	61	47	60	52	55	54	48

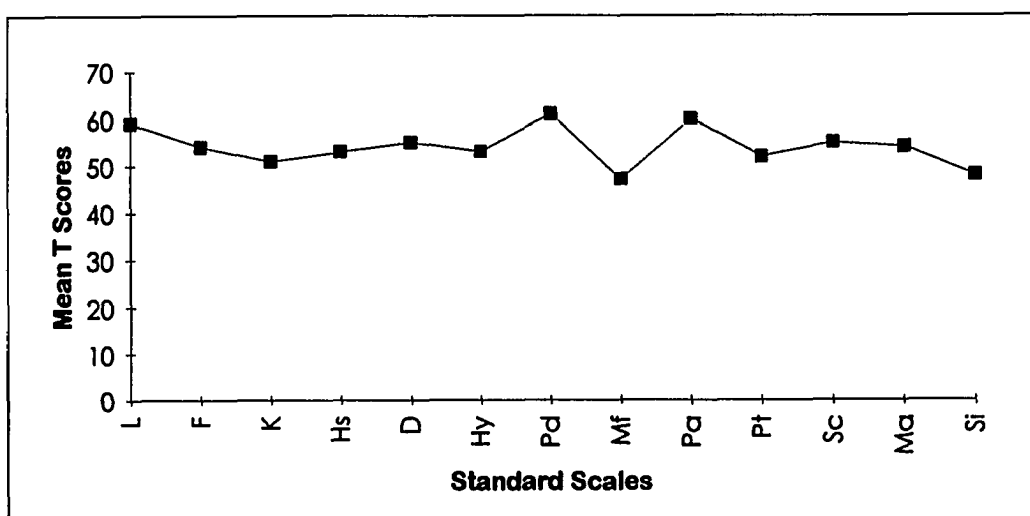


Figure 1. Sample Composite Mean Profile: Standard Scales.

required level for clinical significance ($\geq 65T$). As indicated in Table 10, the L scale had a subclinical elevation of 59T.

Correlational Analysis

The primary focus of this study was the characteristics of men who have used physical violence toward an intimate partner. All demographic variables, MMPI-2 variables and CTS scores were placed in a correlational matrix and analyzed using Statistical Package for the Social Sciences; Extended (SPSSx) at

Western Michigan University. Pearson product-moment correlation coefficients were calculated for each set of paired variables and levels of significance were determined using a two tailed t-test. The Pearson product-moment correlation coefficients (r) of primary interest to the study were those between each demographic variable or MMPI-2 variable subject to data analysis and the level of violence represented by CTS Violence scale score. The coefficients of correlation and the corresponding level of statistical significance were used to either accept or reject the Null Hypotheses developed for study.

Correlation coefficients between MMPI-2 variables and the CTS Scales at the $p < .01$ level of significance are listed in Table 11. The MMPI-2 variables are ranked according to the strength of the correlation coefficients that indicated a relationship between an MMPI-2 variable and the Violence category. The coefficients of determination (r^2) for each Pearson product-moment correlation are also listed. The coefficients of correlation listed in Table 11 became the basis for accepting or rejecting Null Hypothesis 3 (H_{03}). The more stringent level of significance ($p < .01$) was chosen to reduce the potential of Type I errors, but this decision does increase the probability of failing to reject a false Null Hypothesis (Type II error).

Treatment of the Null Hypotheses

In order to examine the validity of the research hypotheses stated in Chapter I, each research hypothesis was converted to a Null Hypothesis for the purposes of statistical testing. The Null Hypotheses are discussed by the order of most significant findings to least significant findings. All three Null Hypotheses developed for statistical testing contained multiple variables. Due to the multiple variables contained within each Null Hypothesis, two of the three Null Hypotheses were unable to be either categorically accepted or rejected. To

Table 11

MMPI-2 Variables and the CTS Violence Scale: Correlation
Coefficients Significant at the $p < .01$ Level

MMPI-2 Variable	Pearson Product-Moment Correlation Coefficient	Coefficient of Determination
MAC-R	.58 ($p < .01$)	34%
Re	-.56 ($p < .01$)	31%
F	.54 ($p < .01$)	29%
Pd	.54 ($p < .01$)	29%
FAM	.51 ($p < .01$)	26%
Sc	.48 ($p < .01$)	23%
Si	.48 ($p < .01$)	23%
DEP	.47 ($p < .01$)	22%
ANG	.47 ($p < .01$)	22%
SOD	.45 ($p < .01$)	20%
TRT	.45 ($p < .01$)	20%
A	.45 ($p < .01$)	20%
GM	-.44 ($p < .01$)	19%
ASP	.43 ($p < .01$)	18%
HEA	.43 ($p < .01$)	18%
LSE	.42 ($p < .01$)	18%
WRK	.42 ($p < .01$)	18%
ANX	.42 ($p < .01$)	18%
Do	-.40 ($p < .01$)	16%
L	-.39 ($p < .01$)	15%

address the problem, Sub-Null Hypotheses were developed for each set of paired variables contained within the more encompassing Null Hypothesis. For the sake of clarity, the specific Sub-Null Hypothesis was stated, the relevant statistical data were listed and the decision regarding either acceptance or rejection of the Sub-Null Hypothesis was indicated. Additionally, a statement was made regarding the type and strength of correlation between the two paired variables. Decisions regarding the strength of coefficients of correlation were established with a committee member and were as follows: (a) correlation coefficients that ranged from 1.00 to .707 were considered strong, (b) coefficients in the range of .706 to .50 were judged as moderate, and (c) correlation coefficients less than .50 were judged to be weak as the corresponding shared variance was less than 25 % ($r^2 < 25\%$).

Null Hypothesis 3

Null Hypothesis 3 (H_{03}) stated that correlations between the MMPI-2 scales scores obtained from the sample and the measured level of violence will not exceed $p < .01$. Based on results of the data analysis, Null Hypothesis 3 was unable to be either categorically accepted or rejected due the multiple variables contained within H_{03} . The Sub-Null Hypotheses for H_{03} are listed that state the relationship between each MMPI-2 scale and the measured level of violence. The statistical data are presented and the Sub-Null Hypothesis is either accepted or rejected based on the data obtained.

Sub-Null Hypothesis 3-1

The correlation between the MMPI-2 L Scale (Lie) and the measured level of violence will not exceed $p < .01$. Based on a statistically significant correlation coefficient of $r = -.39$ ($p < .01$), the Sub-Null Hypothesis was

rejected. The correlation coefficient ($r = -.39$) between the L scale and the measured level of violence suggests a weak negative relationship between these two variables.

Sub-Null Hypothesis 3-2

The correlation between the MMPI-2 F Scale (admission of problems) and the measured level of violence will not exceed $p < .01$. Based on a statistically significant correlation coefficient of $r = .54$ ($p < .01$), the Sub-Null Hypothesis was rejected. The correlation coefficient ($r = .54$) between the L scale and the measured level of violence suggests a moderate positive relationship between these two variables.

Sub-Null Hypothesis 3-3

The correlation between the MMPI-2 K Scale (Correction Scale) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.31$) did not meet the required level of statistical significance ($p < .01$), therefore, the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-4

The correlation between the MMPI-2 Hs Scale (Hypochondriasis) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .33$) did not meet the required level of statistical significance ($p < .01$), therefore the Sub- Null Hypothesis was accepted.

Sub-Null Hypothesis 3-5

The correlation between the MMPI-2 D Scale (Depression) and the measured level of violence will not exceed $p < .01$. The correlation coefficient

($r = .27$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-6

The correlation between the MMPI-2 Hy Scale (Hysteria) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .14$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-7

The correlation between the MMPI-2 Pd Scale (Psychopathic Deviate) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .54$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .54$) between the Pd scale and measured level of violence suggests a moderate positive relationship between these two variables.

Sub-Null Hypothesis 3-8

The correlation between the MMPI-2 Mf Scale (Masculinity- Femininity) and the measured level of violence will not exceed $p < .01$. The correlation coefficient obtained ($r = .29$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-9

The correlation between the MMPI-2 Pa Scale (Paranoia) and the measured level of violence will not exceed $p < .01$. The correlation coefficient

($r = .18$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-10

The correlation between the MMPI-2 Pt Scale (Psychasthenia) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .35$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-11

The correlation between the MMPI-2 Sc Scale (Schizophrenia) and the measured level of violence will not exceed $p < .01$. Based on a statistically significant correlation coefficient of $r = .48$ ($p < .01$), the Sub-Null Hypothesis was rejected. The correlation coefficient ($r = .48$) between the Sc scale and the measured level of violence suggests a weak positive relationship.

Sub-Null Hypothesis 3-12

The correlation between the MMPI-2 Ma Scale (Hypomania) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .29$) did not meet the required level of statistical significance ($p < .01$), therefore, the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-13

The correlation between the MMPI-2 Si Scale (Social Introversion) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .48$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .48$) between the Si scale and the

measured level of violence suggests a weak positive relationship between these two variables.

Sub-Null Hypothesis 3-14

The correlation between the MMPI-2 Supplementary Scale A (Anxiety) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .45$ ($p < .01$), the Sub-Null Hypothesis was rejected. The correlation coefficient ($r = .45$) between the A scale and the measured level of violence suggests a weak positive relationship between these two variables.

Sub-Null Hypothesis 3-15

The correlation between the MMPI-2 Supplementary Scale R (Repression) and the measured level of violence will not exceed $p < .01$. The correlation coefficient obtained ($r = -.11$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-16

The correlation between the MMPI-2 Supplementary Scale Es (Ego Strength) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.28$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-17

The correlation between the MMPI-2 Supplementary Scale MAC-R (MacAndrew Alcoholism Revised) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of

$r = .58$ ($p < .01$), the Sub-Null Hypothesis was rejected. The correlation coefficient ($r = .58$) between the MAC-R scale and the measured level of violence suggests a moderate positive relationship.

Sub-Null Hypothesis 3-18

The correlation between the MMPI-2 Supplementary Scale O-H (Overcontrolled Hostility) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.23$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-19

The correlation between the MMPI-2 Supplementary Scale Do (Dominance) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = -.40$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = -.40$) between the Do scale and the measured level of violence indicates a weak negative relationship between these two variables.

Sub-Null Hypothesis 3-20

The correlation between the MMPI-2 Supplementary Scale Re (Social Responsibility) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = -.56$ ($p < .01$), the Sub-Null Hypothesis was rejected. The correlation coefficient ($r = -.56$) between the Re scale and the measured level of violence suggests a moderate negative relationship between these two variables.

Sub-Null Hypothesis 3-21

The correlation between the MMPI-2 Supplementary Scale GM (Masculine Gender Role) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = -.44$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = -.44$) between the GM scale and the measured level of violence indicates a weak negative relationship.

Sub-Null Hypothesis 3-22

Correlations between the MMPI-2 Supplementary Scale GF (Feminine Gender Role) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .16$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-23

The correlation between the MMPI-2 Supplementary Scale PK (Post-Traumatic Stress Disorder) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .32$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-24

The correlation between the MMPI-2 Content Scale ANX (Anxiety) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .42$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .42$) between the ANX scale and

the measured level of violence indicates a weak positive relationship between these two variables.

Sub-Null Hypothesis 3-25

The correlation between the MMPI-2 Content Scale FRS (Fears) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .12$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-26

The correlation between the MMPI-2 Content Scale OBS (Obsessiveness) and the measured level of violence will not exceed $p < .01$. The correlation coefficient obtained ($r = .35$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-27

The correlation between the MMPI-2 Content Scale DEP (Depression) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .47$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .47$) between the DEP scale and the measured level of violence indicates a moderate positive relationship between these two variables.

Sub-Null Hypothesis 3-28

The correlation between the MMPI-2 Content Scale HEA (Health Concerns) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .43$ ($p < .01$), the Sub

Null Hypothesis was rejected. The correlation coefficient ($r = .43$) between the HEA scale and the measured level of violence indicates a weak positive relationship between these two variables.

Sub-Null Hypothesis 3-29

The correlation between the MMPI-2 Content Scale BIZ (Bizarre Mentation) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .23$) did not meet the required level of statistical significance ($p < .01$), therefore, the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-30

The correlation between the MMPI-2 Content Scale ANG (Anger) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .47$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .47$) between the ANG scale and the measured level of violence indicates a weak positive relationship between these two variables.

Sub-Null Hypothesis 3-31

The correlation between the MMPI-2 Content Scale CYN (Cynicism) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .38$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-32

The correlation between the MMPI-2 Content Scale ASP (Antisocial Practices) and the measured level of violence will not exceed $p < .01$. Based on

the statistically significant correlation coefficient of $r = .43$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .43$) between the ASP scale and the measured level of violence indicates a weak positive relationship between these two variables.

Sub-Null Hypothesis 3-33

The correlation between the MMPI-2 Content Scale TPA (Type A) and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .36$) did not meet the required level of statistical significance ($p < .01$), therefore, the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 3-34

The correlation between the MMPI-2 Content Scale LSE (Low Self-Esteem) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .42$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .42$) between the LSE scale and the measured level of violence indicates a weak positive relationship between these two variables.

Sub-Null Hypothesis 3-35

The correlation between the MMPI-2 Content Scale SOD (Social Discomfort) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .45$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .45$) between the SOD scale and the measured level of violence indicates a weak positive relationship.

Sub-Null Hypothesis 3-36

The correlation between the MMPI-2 Content Scale FAM (Family Problems) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .51$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .51$) between the FAM scale and the measured level of violence indicates a moderate positive relationship between the two variables.

Sub-Null Hypothesis 3-37

The correlation between the MMPI-2 Content Scale WRK (Work Interference) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .42$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .42$) between the WRK scale and the measured level of violence indicates a weak positive relationship between the two variables.

Sub-Null Hypothesis 3-38

Correlations between the MMPI-2 Content Scale TRT (Negative Treatment Indicators) and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = .45$ ($p < .01$), the Sub Null Hypothesis was rejected. The correlation coefficient ($r = .45$) between the TRT scale and the measured level of violence indicates a weak positive relationship.

There were a total of 38 Sub-Null Hypotheses contained within H_0 , that tested the relationships between 38 MMPI-2 variables and the level of violence as measured by the CTS. Of the total number of Sub-Null Hypotheses tested by

the data obtained, 18 were accepted. The 20 Sub-Null Hypotheses that were rejected indicate a statistically significant relationship ($p < .01$) between the paired variables for each Sub-Null Hypothesis.

Null Hypothesis 2

Null Hypothesis 2 (H_{02}) stated that correlations between demographic variables obtained from the sample and the measured level of violence will not exceed $p < .01$. Based on the results of data analysis, Null Hypothesis 2 was unable to be either categorically accepted or rejected due the multiple variables contained within H_{02} . In a manner similar to that used with H_{03} , each Sub-Null Hypothesis for H_{02} is listed and the relationship between each demographic scale and the measured level of violence is stated. The statistical data are presented and each Sub-Null Hypothesis is either accepted or rejected based on the data obtained.

Sub-Null Hypothesis 2-1

The correlation between participant age and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = .21$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 2-2

The correlation between participant race and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.14$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 2-3

The correlation between participant income level and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.30$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 2-4

The correlations between participant educational level and the measured level of violence will not exceed $p < .01$. Based on the statistically significant correlation coefficient of $r = -.40$ ($p < .01$), the Sub-Null Hypothesis was rejected. The correlation coefficient ($r = -.40$) between educational level and the measured level of violence suggests a weak negative relationship between these two variables.

Sub-Null Hypothesis 2-5

The correlation between participant employment status and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.11$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 2-6

The correlation between participant marital status and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.09$) did not meet the required level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Sub-Null Hypothesis 2-7

The correlation between participant past legal status and the measured level of violence will not exceed $p < .01$. The correlation coefficient ($r = -.22$) did not meet the level of statistical significance ($p < .01$) and the Sub-Null Hypothesis was accepted.

Null Hypothesis 1

Null Hypothesis 1 (H_{01}) stated that differences between MMPI-2 scale scores obtained from participants with a prior legal history and MMPI-2 scale scores obtained from participants with no prior legal involvement will not exceed $p < .01$. To test H_{01} , the MMPI-2 data were divided into subsets of participants with past legal history (PLS) and participants with no prior legal history (No PLS). Mean T scores for the standard scales, for selected Supplementary Scales and for the Content Scales for each group were calculated. Profiles were constructed for each subgroup.

In Table 12, the mean standard scale scores for the sample, the PLS group and the No PLS group are listed. In Figure 2, the subgroup profiles are displayed simultaneously. As evident in Table 12, there are no clinically significant T scores ($\geq 65T$) in the sample mean, the PLS group mean or the No PLS group mean on the standard scales. The highest elevation is a T score of 63T by the PLS group on the Pd scale. By inspection of Figure 2, there are no substantial differences between the PLS group and the No PLS group and neither group differed from the composite mean profile.

In Table 13, the mean Supplementary Scale T scores for the sample, the PLS group and the No PLS group are listed. In Figure 3, the Supplementary Scale profiles for each group are contrasted by simultaneous display.

Table 12

Mean Standard Scale T Scores for the Sample,
the PLS Group and the No PLS Group

Group	L	F	K	Hs	D	Hy	Pd	Mf	Pa	Pt	Sc	Ma	Si
Sample	59	54	51	53	55	53	61	47	60	52	55	54	48
No PLS	58	51	54	52	52	51	58	47	59	52	55	55	48
PLS	59	57	50	55	57	55	63	47	61	52	55	53	49

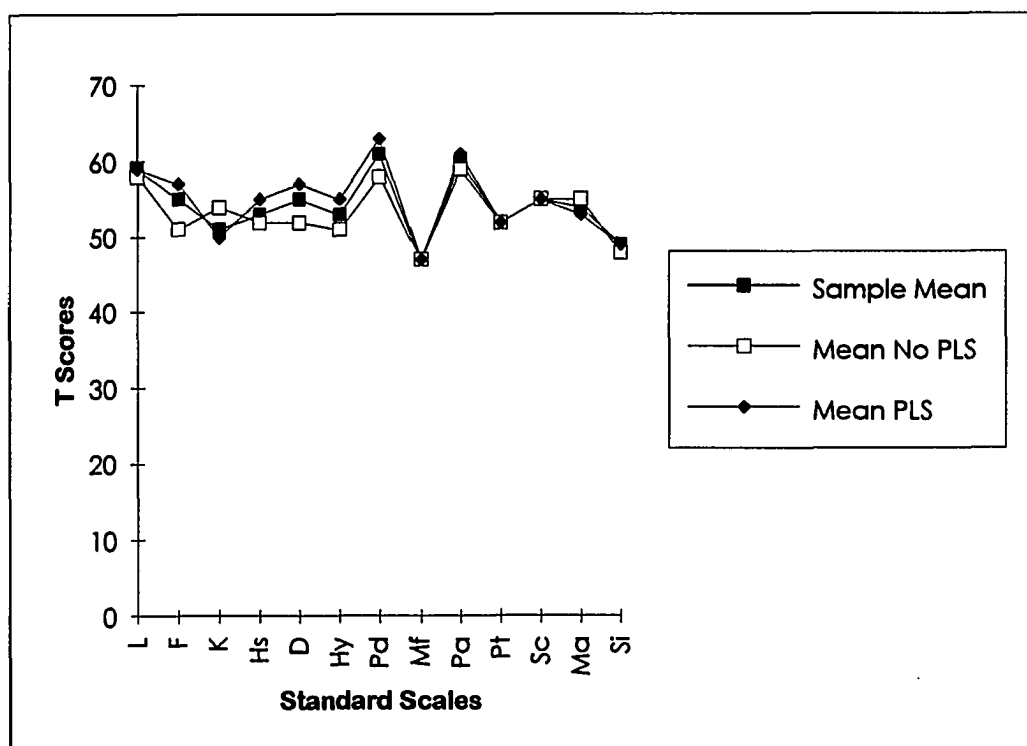


Figure 2. Comparative Standard Scale Profiles for the Sample, the PLS Group and the No PLS Group.

Table 13
Mean Supplementary Scale T Scores for the Sample,
the PLS Group and the No PLS Group

Group	A	R	Es	MAC-R	O-H	Do	Re	GM	GF	PK
Sample	50	53	47	58	58	42	47	46	48	52
No PLS	50	53	48	55	58	42	47	47	50	50
PLS	50	53	46	61	58	42	44	47	46	54

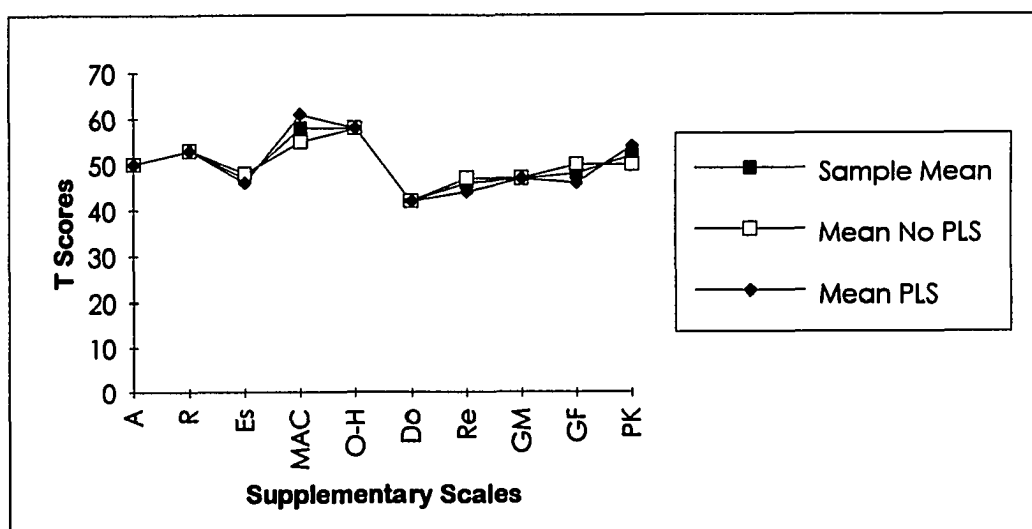


Figure 3. Comparative Supplementary Scale Profiles for the Sample, the PLS Group and the No PLS Group.

As shown in Table 13, there are no clinically significant elevations ($\geq 65T$) by either the PLS group or the No PLS group on the Supplementary Scales. The simultaneous display of the profiles in Figure 3 reveals no substantial difference between the subgroups or between either subgroup and the composite mean profile on the MMPI-2 Supplementary Scales.

Table 14 contains mean Content Scale T scores for the sample, the PLS group and the No PLS group. The profiles for the Content Scales are displayed simultaneously in Figure 4. Inspection of Table 14 reveals no significant elevations by either subgroup on any Content Scale. Inspection of Figure 4 suggests no substantial difference in T scores between the subgroups or between the subgroups and the sample's composite mean on the Content Scales.

By contrasting the scores in Table 12, Table 13 and Table 14, there is minimal divergence in the scores of the two subgroups and neither subgroup differs substantially from the sample's mean scores. The obvious congruence is clear in the simultaneous display of the standard scales, the Supplementary Scales and the Content Scales across all MMPI-2 scales by the PLS group, the No PLS group and the sample. By inspection of the data in this form, Null Hypothesis 1 (H_{01}) was accepted.

Summary

Analysis of the demographic characteristics obtained indicated that the sample was comparable to the overall population of the county where the study was conducted in many categories. The categories that were either over or under represented could have been expected and reasons for either over or under representation will be discussed in Chapter V.

Two Null Hypotheses (H_{02} and H_{03}) were unable to be categorically accepted or rejected. Within H_{02} , the only demographic variable that correlated significantly ($p < .01$) with measured levels of violence was educational level. Under H_{03} , there were 38 MMPI-2 variables tested of which 20 were statistically significant at the $p < .01$ level. The relative meaning of the statistically significant correlations as well as implications regarding their use will be explained in Chapter V.

Table 14

Mean Content Scale T Scores for the Sample, the PLS Group and No PLS Group

Group	ANX	FRS	OBS	DEP	HEA	BIZ	ANG	CYN	ASP	TPA	LSE	SOD	FAM	WRK	TRT
Sample Mean	54	52	48	54	52	52	52	52	52	47	48	48	54	50	54
Mean No PLS	52	51	49	53	48	52	48	50	51	45	47	47	52	48	52
Mean PLS	56	52	48	55	56	52	55	54	53	48	49	48	55	52	54

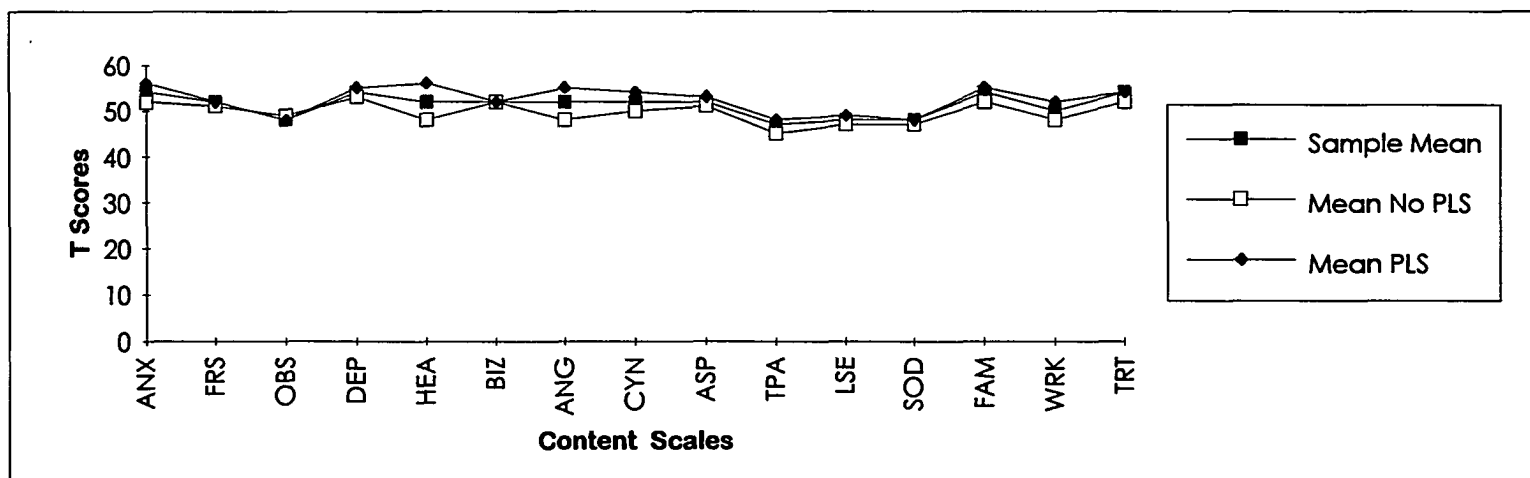


Figure 4. Comparative Content Scale Profiles for the Sample, the PLS Group and the No PLS Group.

Null Hypothesis 1 (H_{01}) was accepted as the two subgroups in the study did not differ substantially on any MMPI-2 scale. Inspection of the subgroup profiles showed no substantial difference. Inspection of the sample composite mean profile indicated a considerable level of defensiveness within the sample and indicated the existence of general personality characteristics that may specifically relate to the use of violence. These findings and their implications will be presented in detail in Chapter V.

CHAPTER V

SUMMARY, DISCUSSION, AND RECOMMENDATIONS

Summary

This study was descriptive and was designed to examine the relationship between demographic variables, psychological variables and levels of violence reported by males entering a treatment program for male batterers. The study's research protocol consisted of a General Information Sheet, the Minnesota Multiphasic Personality Inventory (MMPI-2) and the Conflict Tactics Scale (CTS). The General Information Sheet was used to collect demographic data, the MMPI-2 was used to measure psychological variables and the level of physical violence was measured by the CTS (Straus, 1979). The instruments in the research protocol were completed during the required intake procedure prior to entry in the batterer treatment program. The CTS was completed solely for use in the study as all other instruments used were part of the standard intake procedure.

All potential participants had been adjudicated for assaulting an intimate partner and had been mandated to attend treatment. Initially, 51 batterers volunteered from a pool of 62 potential participants who were assessed between February 23, 1995 and June 1, 1995. Seven participants provided either incomplete or invalid data and were removed resulting in a final sample *N* of 44 participants. All batterers involved in the study were voluntary participants. The dispersion across the demographic categories of age, race, income levels, level of educational attainment, employment status, marital status and prior legal

history gave no indications this sample was not typical of the overall population of batterers.

Data obtained from research instruments were analyzed to describe the sample's characteristics. The MMPI-2 data were used to construct a composite mean profile that yielded no clinically significant elevations ($> 65T$) on any standard scale, selected Supplementary scale or any Content Scale. The MMPI-2 data were divided into the subsets of participants with a prior legal history and participants without a legal history. Inspection of profiles revealed no considerable difference in any of the MMPI-2 scale scores between the two groups and neither subgroup differed substantially from the sample's composite mean profile. All demographic data, all MMPI-2 scores and all CTS scores were placed in a correlational matrix. The Statistical Package for the Social Sciences; Extended (SPSSx) was used to perform correlational analysis and 20 statistically significant correlations ($p < .01$) were generated. The significance level of $p < .01$ was established as the criterion to reject Null Hypotheses. Null Hypothesis 3 (H_{03}) that stated relationships between MMPI-2 variables and the measured level of violence and Null Hypothesis 2 (H_{02}) that stated relationships between demographic variables and the measured level of violence were tested by the construction of Sub-Null Hypothesis for each set of paired variables.

Discussion

The sample obtained for study was similar to countywide population statistics in many demographic categories. The 11% of the sample who reported being unemployed was only slightly higher than the 7.2% countywide figure. The 75% of the sample employed in the work force was comparable to the 75.8% countywide level (U.S. Bureau of the Census, 1990). An educational level of greater than a high school education was reported by 78% of the sample

and was comparable to the county figure of 83.4% (U.S. Bureau of the Census, 1990).

The sample for study differed substantially from countywide population statistics in the following demographic categories. In the sample, 30% report being married compared to the countywide figure of 54%. Additionally, 22% of the sample report a status of divorced or separated which is substantially higher than the countywide figure of 7%. Whites comprised 75% of the sample compared to the 88% listed in the census data. The sample over represents African Americans at 23% compared to the county statistic of 8% of the population (U.S. Bureau of the Census, 1990). This discrepancy may have been, in part, due to a higher number of arrests that occurred in urban areas of the county where the percentage of African American residence is higher than the surrounding rural areas.

The most extreme discrepancy between sample characteristics and countywide population characteristics was the level of reported income. In the sample, 53% reported an income level under \$10,000 while the same level of income comprised only 14% of the county population (U.S. Bureau of the Census, 1990). The sample contained 2% reporting income levels over \$40,000. The comparable countywide figure for the same income category indicated 43% of the population are above this level (U.S. Bureau of the Census, 1990).

There were several possible reasons for the over representation of lower socioeconomic (SES) individuals in the sample. One possible reason was the referral process to the program. Individuals mandated to attend counseling were given alternative choices. Individuals of higher SES possess the economic resources to obtain private individual therapy or marital counseling. A second possible reason for the over representation was a reporting factor. Individuals entering the program were informed that fees were based on income levels. A

prior review of program data indicated that reported income levels often differed substantially from income levels obtained when individual's verified their level of income with either tax returns or information from their employer. It was not uncommon for individuals to report lower than actual levels of income in an attempt to obtain reduced fees. A third possible reason was that lower socioeconomic status is an established risk factor for physical assault (Saunders, 1993). Because low SES is a risk factor, it would increase the probability of individuals with low SES committing more assaults and lead to the expectation that lower SES individuals would be over represented in the sample.

Personality Characteristics

The MMPI-2 findings in the study indicate that psychological defensiveness was a primary characteristic of batterers in the sample. The sample's composite mean T score on the L scale was 59T and, although not clinically significant, it suggested a moderate to high level of defensiveness. The L Scale mean raw score of 5.48 (SD 2.69) was almost one standard deviation above the average raw score of 3 reported in the MMPI-2 normative data (Graham, 1990).

To assess defensive response sets in the sample, a data subset with a criterion of $L > 64$ was established. The criterion was met or exceeded by 36% of the profiles in the sample. Additionally, criteria of $L > 60T$, $F < 48T$ and $K > 60T$ were used to extract a second subset from the sample that displayed either a positive self presentation or defensive response set. The criteria of $L > 60T$ was used as it approximated six scored items. Six endorsed items is greater than one standard deviation from the MMPI-2 normative data for the L Scale. Given the demographic characteristics of the research sample combined with other criterion in the set, the criterion of $K > 60T$ indicates either positive

self presentation or defensiveness. Use of this criteria resulted in a 16% subset emerging from the sample data. Both percentages suggested defensiveness as a primary characteristic of the sample. Several authors have previously reported defensiveness as a salient characteristic of male batterers (Coleman, 1980; Hastings & Hamberger, 1988; Hotaling & Sugarman, 1986; Saunders, 1992b).

The characteristic of defensiveness in batterers is, in part, displayed due to the low level of social acceptability for their actions (Straus, 1979). A traditional component of male batterers defensiveness has been to project blame on their victims and, thus, alleviate themselves from total responsibility for the assault (Yllo, 1993). Male batterers tend to minimize both their assaults and do not readily admit to life problems (O'Leary, 1993). The type of defensiveness seen in male batterers is, most likely, learned and represents a long standing response style toward others. Because the level and type of defensiveness exhibited by male batterers appears to be acquired over time, then one of the primary goals of treatment programs is to effectively address defensiveness and assist the batterer in taking responsibility for his behavior (Tolman & Bhosley, 1991). Openness to feedback from the environment and assuming personal responsibility for the violent behavior, is a primary determinant in ending abusive and/or violent interactions.

The correlational analysis yielded 20 MMPI-2 variables that correlated with measured levels of violence at statistically significant levels ($p < .01$). The statistically significant MMPI-2 variables indicate personality traits shared by some members of the total population of male batterers. The MMPI-2 variables with the strongest positive correlations were the MAC-R supplementary scale, the F scale, the Pd scale and the FAM Content Scale. The MMPI-2 variable with the strongest negative correlation was the Re supplementary scale.

The MAC-R Supplementary scale is designed to measure personality traits of individuals who are alcohol dependent. The correlation coefficient ($r = .58$) between the MAC-R score and the level of violence indicated a moderate positive relationship. The coefficient of determination ($r^2 = 33\%$) suggests that there is a 33% shared variance in participant scores accounted for by the relationship between the MAC-R scale and the measured levels of violence.

The connection between alcohol abuse and physical violence within the population of batterers has been well documented in the literature. Flanzer (1993) suggested a causal connection between alcohol abuse and battering. In a review of literature, he reported that alcoholic batterers tend to have a limited frustration tolerance, tend to blame others and have high levels of impulsivity. Gelles (1993b) suggested that, although alcohol and drug use often correlate with family violence, the connections are linked to multifaceted social factors and to pre-use personality factors.

The F scale is associated with an individual's response set and with general levels of psychopathology. Some of the content dimensions within the F scale are antisocial attitudes and/or behaviors, hostility and paranoid thinking (Graham, 1990). The F scale and measured levels of violence had a correlation coefficient of $r = .54$. The coefficient of determination ($r^2 = 29\%$) indicates a 29% shared variance between scores on the F scale and measured levels of violence.

The correlation coefficient ($r = -.46$) between the F scale and the MAC-R scale was statistically significant ($p < .01$). The correlation coefficient indicated a weak negative relationship between the F scale and the MAC-R scale and suggested that elevations may not be simultaneously present. The negative correlation between these two variables was consistent with Flanzer's (1993)

report that alcohol abusers tend to project blame and do not acknowledge problems.

The Pd scale has known behavioral correlates of physical acting out, legal difficulties, poor marital adjustment and self centrism (Graham, 1990). The coefficient of correlation ($r = .54$) indicates a moderate positive relationship between the Pd scale and measured levels of violence. The shared variance ($r^2 = 29\%$) between the Pd scale and measured levels of violence was 29%. The subclinical elevation of the Pd scale displayed in the composite mean MMPI-2 profile was consistent with Vaselle-Augenstein and Ehrlich's (1992) review of MMPI research that identified problems with impulse control as a consistent characteristic of men who engage in physical violence within relationships.

The FAM Content Scale and measured levels of violence had a moderate positive correlation ($r = .51$) that was statistically significant ($p < .01$). The coefficient of determination ($r^2 = 26\%$) suggests that 26% of the variance in participant scores can be accounted for by the relationship between the FAM Content Scale and measured levels of violence.

The FAM Content Scale also has a strong positive correlation ($r = .70$) with the Pd scale. This may be due to the high number of items within the Pd scale that reflect familial discord (Butcher, 1992). This strong positive correlation between the FAM Content Scale and Pd scale suggests that the FAM Content Scale is an identifiable subset of the Pd scale positively endorsed by certain batterers.

High scores on the Re scale (Social Responsibility) suggest a deep concern over moral problems, a strong sense of justice and high internal standards (Graham, 1990). The correlation coefficient $r = -.56$ ($p < .01$) indicates a moderate negative relationship between high Re scores and measured levels of violence. In the sample, the Re scale and L scale had a statistically

significant ($p < .01$) correlation coefficient ($r = .60$). It is possible that endorsement of Re items was part of a positive self presentation response set. The interpretation of high Re scale scores being correlated with lower levels of violence may be misleading.

There were several other MMPI-2 variables of statistical significance ($p < .01$) that suggested shared characteristics among certain batterers. Many of these have been consistently reported in the literature. These characteristics included interpersonal alienation and estrangement from others ($r = .48$), elevated levels of internal anger ($r = .47$), feelings of depression ($r = .47$), resistance to psychological treatment ($r = .45$), feelings of social discomfort ($r = .45$), feelings of anxiety and pessimism ($r = .45$; $r = .42$), stereotypic male role attitudes ($r = -.44$), antisocial personality traits ($r = .43$), health concerns ($r = .43$), low self esteem ($r = .42$), negative attitudes toward work ($r = .42$), dominance ($r = -.40$), and unsophisticated defensive characteristics ($r = .39$). Although statistically significant, all correlation coefficients were under .50 with corresponding coefficients of determination ($r^2 < 25\%$). Due to the low levels of shared variance between paired variables, it is probable that the listed characteristics are not shared among all batterers. Instead, the MMPI-2 variables are more likely to represent shared psychological characteristics and, therefore, be displayed only by some subsets of male batterers.

Although 20 MMPI-2 variables had statistically significant correlation coefficients at the $p < .01$ level, their meaning must be tempered by reviewing the corresponding r^2 which ranged from 34% to 15%. The coefficients of determination lack sufficient strength for the MMPI-2 variables to be considered predictor variables. It may be more circumspect to view the MMPI-2 variables as marker variables that represent characteristics frequently displayed by some elements of the overall population of batterers.

The sample's composite mean profile lacked clinically significant elevations ($\geq 65T$), but contained subclinical elevations on the Pd scale and the Pa scale. In light of the known suppression effect of high L scores to lower clinical scale elevations, the subclinical elevations in the composite mean profile may be more consequential and, therefore, more descriptive of personality variables (Graham, 1990).

The lack of clinically significant elevations in the composite profile was consistent with previous MMPI research which failed to discover a typical batterers profile (Hale, Zimestrad, Duckworth & Nicholas, 1988). The lack of a batterer's profile both in the literature and in the findings of this study suggests two alternative conclusions. The first is that the use of physical violence within a relationship context is a behavioral aberration that exists across multiple psychological factors. The second, and more plausible conclusion, is that physical violence is related to identifiable psychological factors that are not shared by the total population of batterers. Instead, these psychological factors may be clustered among subgroups of batterers. The clustering of factors was not addressed in the design of the study, but the statistically significant MMPI-2 variables suggest the presence of identifiable psychological characteristics that can assist in identification.

The subclinical elevation of the Pd scale suggested that batterers in the sample may engage in impulsive acting out, experience family and marital difficulties, seek immediate gratification of impulses, act without considering consequences, have limited frustration tolerance, are insensitive to the needs and feelings of others, do not experience deep emotional responses, may act in aggressive ways and may agree to attend therapy to avoid more unpleasant consequences (Graham, 1990). The failure to understand reciprocity of rights with others or a lack of empathy has consistently been reported in the literature

(Hamberger & Hastings, 1986; Viano, 1992). Previous findings indicate that batterers act impulsively, have a high need for authority in relationships and have difficulties with impulse control (Dutton, 1988; Vaselle-Augenstein, 1992). The finding that the total sample and both subgroups displayed a subclinical Pd elevation suggested that the descriptors for this scale may be consistent traits seen in many male batterers.

The subclinical elevation of the Pa scale suggested that batterers in the research sample have a paranoid orientation toward life, tend to rationalize and blame others, have difficulty with trust issues, are suspicious of the motives of others and commonly feel angry and resentful (Graham, 1990). The finding of a subclinical Pa elevation was consistent with previous research findings that batterers have low trust levels and experience pervasive feelings of jealousy (Allen et al., 1989; Gondolf, 1985). Zegree (1988) found that batterers scored consistently higher on the Pa scale of the original MMPI than did controls. The finding that the total sample and both subgroups displayed a subclinical Pa elevation suggested that the descriptors listed above may be a consistent trait seen in many male batterers.

The similarity of the MMPI-2 scale scores obtained from participants with a prior legal history and those obtained from participants with no prior legal involvement is consistent with the literature which suggests a high degree of psychological heterogeneity that batterers display as a group (Coleman, 1980; Gondolf, 1985; Hale, et al., 1988). The consistency between the two subgroups in the research indicated that dividing batterers by a single variable, such as presence or absence of legal history, does not yield significant results, thus analysis across a unidimensional variable does not seem to successfully differentiate subgroups.

Demographic Characteristics

In the sample data, there was a weak negative relationship between educational level and measured violence. This relationship may be the corollary of a known risk factor. Saunders (1993) found that low educational levels are correlated with a prominent probability for assault. Although this variable is statistically significant ($p < .01$), the coefficient of determination ($r^2 = 16\%$) indicates the relationship between educational level and level of violence represented a shared variance of only 16%. The discriminatory power of educational level should be considered minimal. The prevalence of physically violent behavior toward an intimate partner appears to occur across all demographic variables analyzed in this study.

Clinical Implications

The finding of defensiveness as a salient characteristic has important implications for clinicians who assess batterers or who conduct groups designed to treat male batterers. Assessment of batterers should be conducted with the characteristic of defensiveness in mind. The prevalence of psychological defensiveness found in the study suggests a need to both assess the level of defensiveness with psychometric instruments and the need to obtain corroborative information (police reports, reports of a spouse, etc.) in assessing a batterers level of violence. Clinicians should attend to the presence of personality characteristics known to be associated with impulsivity, acting out, mistrust of others and feelings of estrangement as well as the past history of physical violence. Although substance abuse is not present in all cases, based on the results of the study a review for this factor should be routine.

The prevailing models for batterer treatment groups have a psychoeducational base and many use an open ended entry process. These groups attempt to help men identify psychological and physical abuse, learn alternative skills for coping with emotional arousal and learn alternative non-abusive tactics of conflict resolution. A primary element of treatment is for the batterer to assume responsibility for his behavior (Tolman & Bhosley, 1991).

Defensiveness among batterers tends to be a highly resilient psychological characteristic and the ability to accept responsibility for behavior is directly related to the level of defensiveness being effectively addressed. Based on the research findings related to defensiveness and the personality characteristics suggested by the subclinical elevation of the Pa scale, conducting these groups with an open entry process seems to be contraindicated. It is usually difficult to establish feelings of membership among members in mandated groups. Open groups tend to reduce the feeling of group membership, tend to have lower levels of group cohesion and do not facilitate disclosure as well as closed groups (Yalom, 1975). Based on the findings of the study and on two years of personal experience working with male batterers, treatment groups with an open entry may deliver psychoeducational material. The ability to address the characteristically high level of defensiveness among batterers, which is a prerequisite to establishing change, will be difficult.

Although closed groups with batterers are more difficult to conduct, especially in the early stages due to the high levels of resistance and defensiveness, the group dynamics of membership, group cohesion and disclosure are more easily established in a closed group. Closed groups can deliver similar psychoeducational material as open entry groups. However, the more potent group dynamics that exist within a closed group are required to

effectively address the resilient type of defensiveness displayed by batterers and to, ultimately, effect change.

A secondary issue for the treatment of male batterers is the issue of alcohol and drug abuse as a potential variable often associated with an assault sequence. Whether as a “key agent” as postulated by Flanzer (1993) or as a “contributory variable” as stated by Gelles (1993b), the role of alcohol abuse may vary. Its presence in this population and the need for attention to the use of substances can not be disputed.

Limitations

There are limitations recognized with this research. One limitation was the use of self report data from batterers. Batterers are known to under report actual levels of physical violence (Browning & Dutton, 1986; Edleson & Byrigger, 1986). This tendency may have affected responses to the CTS. Contrasted to the 1990 census data, the sample was considered generally representative of the geographic area. Generalization of any finding should only be made to other groups of batterers that share characteristics similar to the demographics of the sample.

Recommendations

The research findings indicated the existence of shared psychological variables by some members in the overall population of male batterers. These may assist in identifying personality characteristics of some batterers that correlate with the use of violence. The statistically significant variables found in this study lack sufficient strength to serve as predictor variables. It is recommended that other types of data analysis continue to be used to support subgroups of batterers. If empirically based subgroups continue to be

supported, the statistically significant MMPI-2 variables found in the study may gain a higher predictive value. Specific MMPI-2 variables may serve as marker variables for particular subgroups of batterers.

APPENDICES

Appendix A
Protocol Clearance From the Human Subjects
Institutional Review Board

Human Subjects Institutional Review Board



Kalamazoo, Michigan 49008-3899
616 387-8293

WESTERN MICHIGAN UNIVERSITY

Date: February 23, 1995

To: Lanning, Tom G.

From: Richard Wright, Interim Chair

Re: HSIRB Project Number 95-01-08

Richard A. Wright

This letter will serve as confirmation that your research project entitled "The relationship between male assaultive behavior and the MMPI-2" has been **approved** under the **full** category of review by the Human Subjects Institutional Review Board. The conditions and duration of this approval are specified in the Policies of Western Michigan University. You may now begin to implement the research as described in the application.

Please note that you must seek specific approval for any changes in this design. You must also seek reapproval if the project extends beyond the termination date. In addition if there are any unanticipated adverse or unanticipated events associated with the conduct of this research, you should immediately suspend the project and contact the Chair of the HSIRB for consultation.

The Board wishes you success in the pursuit of your research goals.

Approval Termination: Feb 23, 1996

xc: Betz, Robert, CECF

Appendix B
Summary of Michigan Domestic Violence Laws:
Enacted July 1, 1994

Summary of Michigan Domestic Violence Laws, Enacted July 1, 1994

Domestic Violence Assault & Battery

Type of Offense: Misdemeanor

Maximum Sentence: 93 days which requires fingerprinting of suspect

Assault is constituted by any unwanted touch.

Victim must be the spouse, former spouse, household resident or former resident or have a child in common with the suspect.

Domestic Violence Assault & Battery: Second Offense

Type of Offense: Misdemeanor

Maximum Sentence: One year

Assault is constituted by any unwanted touch.

Prior case must have resulted in a conviction within the previous two years for an assaultive crime including: Assault & Battery, D.V. Assault and Battery, Aggravated Assault, D.V. Aggravated Assault, Felonious Assault Assault with Intent to do Great Bodily Harm, Assault with Intent to Maim or Assault with Intent to Murder

Victim must be the spouse, former spouse, household resident or former resident or have a child in common with the suspect.

Domestic Violence Assault & Battery: Third Offense

Type of Offense: Felony

Maximum Sentence: Two Year

Assault is constituted by any unwanted touch.

Prior cases must have resulted in two or more convictions within the previous five years for assaultive crimes including: Assault & Battery, D.V. Assault and Battery, Aggravated Assault, D.V. Aggravated Assault, Felonious Assault Assault with Intent to do Great Bodily Harm, Assault with Intent to Maim or Assault with Intent to Murder

Victim must be the spouse, former spouse, household resident or former resident or have a child in common with the suspect.

Domestic Violence Aggravated Assault

Type of Offense: Misdemeanor

Maximum Sentence: One Year

Assault has resulted in a serious or aggravated injury

Victim must be the spouse, former spouse, household resident or former resident or have a child in common with the suspect.

Appendix C
General Information Sheet

Research ID Number: _____

GENERAL INFORMATION SHEET

Please complete the following. For each question you should check at least one item.

Sex: ☐ Male
☐ Female

Race: ☐ African American

☐ Hispanic

☐ Oriental

☐ Native American

☐ White

☐ Other: _____

Age: ☐ under 18
☐ 18 - 25
☐ 25 - 35
☐ 35 - 45
☐ 45 - 60
☐ over 60

Highest Level of Education Completed:

☐ less than 9th grade

☐ more than 9th, no diploma

☐ G.E.D.

☐ High School Diploma

☐ college courses, but no degree

☐ Associates Degree

☐ Four Year Degree

☐ Post Graduate Study

Yearly Income:

☐ under 5,000

☐ 5,000 to 10,000

☐ 10,000 to 20,000

☐ 20,000 to 30,000

☐ 30,000 to 40,000

☐ 40,000 to 50,000

☐ 50,000 to 60,000

☐ 60,000 to 80,000

☐ over 80,000

Current Marital Status

☐ Single

☐ Married

☐ Living with a female

☐ Separated

☐ Divorced

☐ Widowed

Current Employment Status:

☐ Unemployed

☐ Employed Part-time

☐ Employed Full-time

☐ Disabled

☐ Student

Number of Past Marriages or Living-Together Relationships: _____

Current Legal Status

☐ Currently on Probation or Parole

☐ None of the above

Number of times you have been in any type of Counseling: _____

Past Legal Status

☐ Probation/Parole in the past

☐ Incarcerated in the Past

☐ Number of Past Arrests

☐ None of the above

Number of times you have received any type of Substance Abuse Treatment: _____

Appendix D
Conflict Tactics Scale: Form N

Instruction Sheet

Detach Instructions and give CTS to Subject: Read Instruction Sheet to Subject

No matter how well people get along, there are times when they disagree on major decisions, get annoyed about something the other person does, just have spats or fights because they're in a bad mood or are tired or argue for some other reason. People also use many different ways of trying to settle their differences. On the front page, look at the sample item.

Read to Subject

**During arguments, disagreements or conflicts, how often have you:
Deliberately changed the facts of a situation to end a conflict or argument.**

On the first line, you would indicate how often you may have used this behavior within the last year. On the second line, you would indicate how often it has occurred with any intimate partner during your lifetime.

To rate how often a behavior has happened, you would use the rating scale with the numbers 0 - 6 listed. For example: If you have never done the behavior, circle 0; if you have done it one time, circle 1; if you have done it two times, circle 2; if you have done the behavior 3-5 times circle the number 3; if you have done it 6-10 times circle the 4; if you have done it 11-20 times circle the 5; and if you have done it more than 20 times circle the number 6. Do you have any questions about how you are to mark the items?

Have subject respond to Sample Item

On the next pages of this questionnaire are ways that you may have acted during disputes. Remember, this questionnaire is not part of your assessment and it will have no effect on you being involved in the program, so please answer as honestly as possible. As I read each item, please circle the number that applies to you. You can refer to the rating scale at the top of each page. When we are done, you will put your answer sheet in the small envelope and seal it. Then place the small envelope in the large brown envelope. Do you have any questions?

Pause

- 1.) If there are questions, respond to them. Then, have subject turn page.**
- 2.) If no questions, then have subject turn page.**

Instruct Subject to turn the page and Read each item to the Subject

Conflict Tactics Scale: Form N

Use the following scale to chose the correct number for each item. The rating scale is on the top of each page to make it easier to refer to as you answer each item. Keep in mind that your responses are anonymous and will not be used in your assessment. Please answer as honestly as possible.

Rating Scale

0 -----	1 -----	2 -----	3 -----	4 -----	5 -----	6
Never	Once	Twice	3 to 5 Times	6 to 10 Times	11 to 20 Times	More than 20 Times

Sample Item:

During arguments, disagreements or conflicts, how often have you:

Deliberately changed the facts of a situation to end a conflict or argument.

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

Please wait to begin until you are told.

Research ID Number: _____

Rating Scale

91

0 -----	1 -----	2 -----	3 -----	4 -----	5 -----	6 -----
Never	Once	Twice	3 to 5 Times	6 to 10 Times	11 to 20 Times	More than 20 Times

During arguments, disagreements or conflicts, how often have you:

1.) Discussed the issue calmly

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

2.) Got information to back up your side of things

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

3.) Brought in or tried to bring in someone to help settle things

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

4.) Insulted or swore at the other one

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

5.) Sulked and / or refused to talk about an issue

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

6.) Stomped out of the house, the room or the yard

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

7.) Did or said something to spite (hurt or anger) the other person

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

8.) Threatened (verbally or nonverbally) to hit or throw something at the other person.

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

9.) Threw, smashed, kicked or hit something (such as a wall, door, lamp, table, etc.)

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

Rating Scale

0	1	2	3	4	5	6	92
Never	Once	Twice	3 to 5 Times	6 to 10 Times	11 to 20 Times	More than 20 Times	

10). How often have you threw any object at your partner.

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

11.) Pushed, grabbed, or shoved the other person

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

12.) Slapped the other person

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

13.) Kicked, bit or hit your partner with a fist (or backhand)

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

14.) Hit or tried to hit the other person with something (i.e. lamp, telephone, table leg, etc.)

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

15.) Beat up the other person (multiple blows of any type)

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

16.) Threatened (directly or indirectly) with a knife or gun

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

17.) Used a knife or a gun toward the other person (includes display of weapon)

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

18.) Other Behaviors: _____

within the last year 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

during any relationship 0 ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 6

Conflict Tactics Scales; Form N (Straus, 1979).

This completes this research questionnaire. To insure the anonymity of your answers, please place it the small envelope and seal it. Thank you.

Appendix E
Research Study Information for Participants

RESEARCH STUDY INFORMATION

My name is Tom Lanning and I am working on a doctoral degree in Counseling Psychology from Western Michigan University. One requirement is to perform research and report the results in a dissertation. The Evaluation & Consultation Center has given me permission to ask if you will consider being in this study. Participating in the study is voluntary and requires your consent to use specific information from your assessment.

Purpose of the Study

This study is attempting to identify factors in men who have used any type of physical force in a relationship. It attempts to find out if any commonalities or differences exist between different types of men and their use of physical force.

General Requirements

You must give consent for specific information from the assessment to be used as research data. This includes:

- 1.) A photocopy of the General Information Sheet.
- 2.) A photocopy of the answer sheet from your psychological testing.
- 3.) A confidential questionnaire about behaviors used in conflicts.

All items will be marked only by a research number and will be kept separate from the assessment information. Research items will not be reviewed until after a decision about your program involvement is determined. Your choice about participating in the study is confidential and will have no affect on assessment recommendations, on your program involvement or on your probation/parole.

About this Study

- 1.) Participation is voluntary and consent may be withdrawn at any time;
- 2.) Participation or non-participation has no effect on being involved in the program;
- 3.) Participation and any information gathered will be confidential;
- 4.) Research findings will be statistically analyzed and will not identify you; and,
- 5.) The results of the study will be published in a dissertation.

I hope you will consider being involved. This study will be explained further during the assessment. If you are willing to participate, you will be asked to sign a consent form that will be reviewed. Thank you for considering this information. If you have any questions, please leave me a message at (616) 349-5552.

Tom Lanning, M.A., Doctoral Candidate

Appendix F
Instructions for Introducing Research

Intake - Page 5

(Rel HX cont.)

Have the following been issues in current/past relationships:

_____ Alcohol Use _____ Child Abuse _____ Physical Violence
 _____ Drug Use _____ Infidelity _____ Money
 _____ Verbal Abuse _____ Jealousy _____ Sexual Issues

CHILD MANAGEMENT

Methods of discipline: _____

Manner of reacting to children when angry: _____

VIOLENCE HX

During your life have you used physical violence with:

Siblings: _____

Former Partners: _____

Friends/Relatives: _____

Strangers: _____

INFORM CLIENT OF RESEARCH AT THIS POINT IN INTERVIEW

- 1.) Present and explain Informed Consent form: If willing have Subject sign
- 2a.) If declines; orally administer IBC
- 2b.) If agrees; Administer Conflict Tactics Scale per Written Instructions
- 3.) Client records responses on scale anonymously
- 4.) When complete CTS should be placed in numerically coded research envelope
- 5.) Photocopies of MMPI-2 and General Information sheet coded with Research ID # to be placed in large envelope upon completion of assessment

Appendix G
Statement of Informed Consent

**Western Michigan University
Department of Counselor Education & Counseling Psychology**

Principal Investigator: Robert Betz, Ph.D. Research Associate: Tom Lanning, M.A.

STATEMENT OF INFORMED CONSENT

I understand that I am being asked to participate in a descriptive study being conducted by Tom Lanning for his doctoral dissertation titled "The Relationship Between Male Assaultive Behavior and the MMPI-2". I understand that the study is attempting to describe commonalities and differences in men who are arrested for assaultive behavior. I understand that the information used in the research will be maintained for three years in a secure location per federal regulations.

I further understand that my involvement in the study is voluntary and I may withdraw my consent without penalty at any time. This means:

- 1.) My choice to participate or not participate **will not** affect recommendations regarding my program involvement;
- 2.) If I choose to withdraw from the study at any time, this **will not** affect recommendations regarding my program involvement; and,
- 3.) My choice regarding participation or any decision to withdraw from the study **will not** be communicated to court agents and, therefore, **will not** affect my probation or parole.

Requirements to Participate

I understand that being a participant in this study requires my permission to use specified information I provide as research data. I understand that this information is gathered as part of the standard assessment required by the Domestic Violence Program for Men (DVP). **Specifically, my permission for use covers the information listed immediately below:**

- 1.) Non-identifying information from the **General Information Sheet** such as age, income level, marital status, educational level and employment status; and,
- 2.) Information from psychological testing that is limited to my answer sheet to the **MMPI-2**. My answer sheet used in the study **will not** be identified by my name.

I understand that participation also requires completion of a questionnaire called the Conflict Tactics Scale. The additional time required is approximately 10 to 15 minutes beyond that required by the standard assessment procedures. **My answers to this questionnaire are confidential and will not be used as part of my assessment.**

I understand that the term "research items", as used in this consent form, specifically means a photocopy of the General Information Sheet, a photocopy of my MMPI-2 answer sheet and the Conflict Tactics Scale.

Confidentiality

I understand that the confidentiality of information provided will be protected as follows:

- 1.) As a participant, I will be assigned a research number which will identify all information I provide for the study. My name and number will be on a master list that will be destroyed when the research is concluded.
- 2.) The General Information Sheet will be photocopied to eliminate my name and marked only with my research number.
- 3.) The answer sheet from the MMPI-2 will be photocopied to eliminate my name and marked only with my research number.
- 4.) The Conflict Tactics Scale will be marked only with a research number and is used only for the research. I will place and seal it in an envelope without any review.
- 5.) All research items will be marked only by a research number. Research items will be placed and sealed in an envelope marked only by a research number. This will make up the research file.
- 6.) The envelope will remain sealed and research items will not be reviewed for the purposes of the study until a decision about program involvement has been made.
- 7.) The originals of the General Information Sheet and the MMPI-2 answer sheet will be placed in the clinical file maintained by the program.

Summary of Involvement

My signature below indicates that I understand the following:

- 1.) My participation is voluntary and is given without any coercion or pressure. It may be withdrawn without any penalty as described above. Any choice regarding participation or withdrawal will not be communicated to any court agent.

- 2.) My participation is independent from decisions about program involvement. Research items will not be reviewed until an assessment decision is determined.
- 3.) Participation will allow specified information from the assessment to be used as research data and requires completion of an additional questionnaire.
- 4.) The information provided will be confidential and all research items will be marked only with a research number. Research data will be maintained for three years.
- 5.) The information provided will be statistically analyzed and published in a dissertation. My name will not appear in any publication related to the study.

Although there are no direct benefits for participation, my participation may help determine common factors or differences in men who have used any type or level of physical force. It may help in developing better ways to assess men who use various degrees of physical force and who may be at risk for arrest.

I understand that as in all research, there may be unforeseen risks to the participant. If an accidental injury occurs, appropriate emergency measures will be taken. However, no compensation or treatment will be made available to the subject except as otherwise stated in this consent form.

My signature below indicates my voluntary agreement to participate in the above mentioned research study. Further, it signifies that I have not been pressured or coerced in any manner to participate and that my choice regarding participation will have no negative affects on either my program involvement or my probation/parole.

I understand that if there are questions, I can contact Tom Lanning at 349-5552 or his faculty advisor, Dr. Robert Betz at 387-5105. I may also contact the Chair of the Human Subjects Institutional Review Board at 387-8293 or Western Michigan University's Vice President for Research at 387-8298 if questions or problems arise during the course of the study.

Participant

Date

Appendix H
Letter of Permission for Use of the Conflict Tactics Scale

FAMILY RESEARCH LABORATORY

University of New Hampshire
126 Horton Social Science Center
Durham, NH 03824

Murray A. Straus, Co-Director
Phone (603) 862-2594
FAX (603) 862-1122

2 August 1995

Tom Lanning
50343 M-43
Bangor, Michigan 49006

Dear Mr. Lanning

I am responding to your inquiry about using the Conflict Tactics Scales (CTS).

Permission. If you requested permission to use the CTS, this letter is my permission for you to use the Conflict Tactics Scales (CTS).

Test Manual. Much new information has become available since the original paper on the CTS which was published in 1979. I therefore prepared a test manual which includes a revised version of the 1979 paper and a number of other chapters, together with a 33 page bibliography of studies using the CTS. A table of contents is attached. The cost is \$25 including postage and packaging.

When a report of your study is available, I would appreciate being sent a copy. I will add it to the bibliography of research using the CTS.

I hope your study goes well.

Sincerely,



Murray A. Straus
Professor of Sociology and Co-Director,
Family Research Laboratory

Enclosure: CTS Manual Table of Contents or CTS Manual
CTS Publications Order Form

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