Role of attachment: The relationship between domestic violence and children's behavior problems

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The Role of Attachment: The Relationship Between Domestic Violence

And Children's Behavior Problems

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The Role of Attachment: The Relationship Between Domestic Violence and Children’s Behavior Problems

Abstract

In the last 2 decades there has been a surge of research focusing on the impact that domestic violence has on the children who witness it. Researchers have concluded that these children are at an increased risk of developing a variety of maladaptive behavior problems including anxiety, depression, aggression and other conduct problems. This study was designed to explore whether attachment acted as a mediator or moderator between domestic violence and behavior problems. Participants were 32 mother-child dyads. Mothers completed the CTS, and the CBCL while the children completed the CDI, the RCMAS, the Security Scale and the Coping Strategies Questionnaire. Regression analyses revealed mixed results. Although domestic violence, as measured by the CTS, did not predict child externalizing behavior, it did predict increased levels of internalizing behavior on the CBCL ($R^2 = .127$, $F(1, 29) = 4.215$, $p = .05$) and there was a trend in the prediction of overall child behavior as measured by the CBCL ($R^2 = .102$, $F(1, 29) = 3.287$, $p = .08$). Additionally, secure attachment predicted lower levels of internalizing ($R^2 = .172$, $F(1, 29) = 6.153$, $p = .02$) and preoccupied attachment predicted increased levels of internalizing ($R^2 = .363$, $F(1, 29) = 16.510$, $p < .0005$). The CTS predicted the Security Scale, predicting that the more violence witnessed, the more secure the attachment of the children ($R^2 = .125$, $F(1, 29) = 4.126$, $p = .05$). The mediating relationship between the CTS, the Security Scale and the CBCL total was explored but it was not statistically significant. None of the interactions between domestic violence and attachment significantly predicted behavior problems. Limitations and future directions are discussed.
The Role of Attachment: The Relationship

Between Domestic Violence and Children's Behavior Problems

Social change results when policymakers recognize a significant problem plaguing society. Child development and family violence researchers have long been aware of the difficulties that arise when family violence occurs and have therefore recognized the importance of estimating the number of families that are impacted by domestic violence. Methodological concerns have resulted in a large discrepancy between some of the reports. One of the most noticeable discrepancies is between the statistics in victimization data and the statistics reported by family violence researchers (Jouriles, McDonald, Norwood, & Ezell, 2001). The National Crime Victimization Survey reported that the incidence of intimate violence experienced by women in the US is less than 1 percent (Greenfeld et al., 1998). According to the National Family Violence Survey, (Straus & Gelles, 1990) domestic violence perpetrated by the husband is a problem that impacts over 6.2 million women every year, an incidence rate of 12 percent of American families. Additionally, the National Family Violence Survey reported that although lower, the incidence of severe violence perpetrated by the husband was still significantly higher than the victimization survey with over 3 percent of the homes reporting severe husband to wife violence. Furthermore, research conducted with women who have experienced domestic violence indicates that between 55 and 80 percent of these families have children in the home at the time of the violent incidents (Carlson, 1984; Sinclair, 1985). Unfortunately, researchers have also had a difficult time estimating the number of children involved, with numbers ranging between 10 million to 17.8 million children in the US who witness interparental violence in their lifetimes (Silvern et
al., 1995; Straus, 1992). Despite these figures, researchers have only really begun to investigate the impact that witnessing domestic violence has on these children within the last two decades (Rossman, Hughes, & Rosenberg, 2000).

The exact definition of witnessing domestic violence is a difficult one to delineate. However, Jouriles et al. (2001) indicate that exposure can actually occur in several different forms including:

(a) observing violence, (b) hearing parents fighting and “knowing” that their mother is being hit but not directly observing the violence, (c) observing outcomes of violence (e.g. bruises on their mother, broken furniture) but not necessarily observing or hearing the violence directly, (d) becoming aware of the violence (e.g., their mother or a sibling tells them about it) but not necessarily observing or hearing evidence of it, or (e) living in a household in which the violence occurs but not being aware of it. (p. 19)

The fact that the definition of exposure can be different depending on the question posed may account for the difficulty experienced by researchers when trying to estimate the true number of children who are impacted by interparental violence. Therefore, these children can be a difficult population to identify and study. However, in one study, 90% of the battered women report that their children were in the same room or in the next room at the time the violence occurred (Hughes, 1988).

Research has shown that children who are identified to have been exposed to domestic violence are at a much greater risk of having difficulty throughout their lives and may become perpetrators or victims of domestic violence themselves (Dutton, 1988; Kincaid, 1982). In fact, Markowitz (2001) found that individuals who witnessed domestic
violence as children were more likely to have “favorable attitudes towards violence against spouses” (p. 205) and those who held these favorable attitudes were more likely to engage in aggression against their spouses and their children. Furthermore, it was reported that more than half (55% in one study and 64.5% in another) of children in psychiatric clinics, had witnessed significant domestic partner conflict or domestic violence (Qureshi & Maloney, 1997; Naidoo & Pillay, 1995).

Despite these statistics, most children who witness domestic violence do not develop clinically significant behavior problems or go on to become perpetrators of domestic violence. What is different about these children? What makes them resilient? Researchers propose that the attachment bond between parent and child can serve as a protective or risk factor for a child in many situations (Simon-Thomas, 2000). Although it is generally accepted that adjustment is multidetermined, attachment is one internal factor that can have an effect on behavior (Simon-Thomas, 2000). Just as exposure to domestic partner conflict could lead to an insecure attachment style and to subsequent behavior problems, it was hypothesized that a secure attachment bond can help the child to grow up with less difficulty. The purpose of this research was to determine if the relationship between mother and child mediates or moderates the development of behavior problems.

Effects of Witnessing Domestic Partner Conflict

Although the prevalence of domestic violence is higher than many would assume, it is a difficult topic to isolate and study. Because of this difficulty, many of the studies conducted on this concept tend to focus on less severe marital conflict. Domestic violence and marital conflict are not the synonymous, but it is assumed that the literature
conducted on marital conflict applies to studies involving domestic violence as this may be considered a more severe form of marital conflict. Further, much of the early research refers to marital conflict, which assumes that children are witnessing conflict between their heterosexual biological parents. Although this literature is reviewed here, it is assumed that these findings apply to any conflict between domestic partners. With that understanding in mind, marital or interparental conflict will be referred to as domestic partner conflict.

A substantial amount of research has been conducted in the last 20 years that specifically focuses on children's exposure to domestic partner conflict. One relatively consistent finding is that children who come from homes with high levels of domestic partner conflict are more likely to display a variety of maladaptive behavior problems (e.g., Wolfe, Jaffe, Wilson, & Zak, 1985). In fact, it is estimated that between 35 and 50% of children who have witnessed domestic violence have clinically significant behavior problems (Rossman et al., 2000).

Long, Slater, Forehand, and Fauber (1988) reported that children who come from families where there is a high amount of conflict, before and after divorce, display more anxious and withdrawn symptoms than those who come from families where the conflict has subsided following divorce. Similarly, Johnston, Gonzalez, and Campbell (1987) report that children, whose parents report postdivorce conflict, are more uncommunicative and have more somatic complaints. Adolescents' perception of domestic partner conflict has also been related to teachers' reports of anxious/withdrawn behavior (Wierson, Forehand, & McCombs, 1988). Furthermore, when compared with children without significant domestic partner conflict in their history, children from
families with domestic violence reported that they worry more about their mother and siblings and about their father's abusive behavior (Graham-Bermann, 1996).

Like anxiety, depressive symptoms have also been linked to children who are exposed to domestic violence. McCloskey, Figueredo, and Koss (1995) reported that children who experienced family aggression were more likely to have major depression. Similarly, the development of depression was predicted by domestic partner discord in a study conducting in Israel with economically disadvantaged families (Sternberg et al., 1993). Johnston et al. (1987) also reported that domestic partner conflict significantly contributed to children's depressive symptoms at the time of the custody dispute and 2 years following the resolution. Depressive symptomatology also appears to be more common in these individuals as they become adults. In one retrospective study, college women who witnessed domestic violence as children were more likely to report depressive symptoms then women who did not witness domestic violence as children (Forsstrom-Cohen & Rosenbaum, 1985). Maker, Kemmelmeier, and Peterson (1998) reported similar results with the severity of distress and depressive symptoms increasing as the amount of domestic violence witnessed increased.

The prediction of externalizing disorders has also been a consistent finding in research on domestic partner conflict and domestic violence. Domestic partner conflict has been related to the conduct disorders of children of divorce (Long et al., 1988) and children in other nonclinical samples (Wierson et al., 1988). Aggression and overall child behavior problems were also related to domestic partner conflict in a sample of conduct-disordered girls (Johnston et al., 1987). In addition, Emery and O'Leary (1984) reported that domestic partner conflict was linked to immaturity and delinquency. In his review of
the retrospective studies of early trauma and violence in children’s lives, Rossman (2001) reported that early violence was associated with later dating and domestic partner violence as well as physical abuse of their children. Rossman (2001) also reported that early exposure to domestic violence is a clear predictor of later crime and “current trauma, psychiatric symptoms and distress, self-injurious behaviors, and poorer health” (p. 43).

Researchers have also discovered that domestic partner conflict affects children's cognitive functioning. Long and colleagues (1988) reported that adolescents in the "high conflict group" had significantly lower GPAs than the adolescents in the "low conflict group" or the "intact" control group. In another similar study, Wierson et al. (1988) reported that domestic partner conflict was associated with lower GPAs and lower ratings by the teacher on a measure of cognitive functioning.

The Contribution of Attachment Theory

Bowlby’s (1973) theory of attachment first proposed that separation between mother and child is likely to cause a child to develop an insecure attachment. He later hypothesized that other stressful life events like exposure to family violence can also affect a child’s sense of security (Bowlby, 1984). There are very few studies that have investigated this proposed relationship. However, the researchers that have looked at domestic violence and attachment styles have discovered that the more violence children were exposed to the less secure they were (Posada, Waters, Liu, & Johnson, in press, as cited by Rossman, 2001). In addition, children who witnessed violence were more likely to be insecure when compared to homeless children and children from the community (Ritchie & Miller, 1996, as cited by Rossman, 2001).
In the cases where an infant’s attachment style is disrupted by domestic violence or separation, it may cause him or her to become anxious and fearful, which then leads to behavior problems, defiance and delinquency (Bowlby, 1973). Insecure attachment styles can impact children in many ways and although it may be only one risk factor, its effect can be profound. In the instance of domestic partner conflict, a child's sense of security can be threatened because of the unavailability of his or her parents, (Davies & Cummings, 1994) and in the case of ongoing domestic partner conflict, an insecure attachment style may develop (Koback, 1999). Owens and Cox’s (1997) results support Davies and Cumming’s (1994) assertion that attachment between parents and their children can be threatened by ongoing domestic partner conflict and concluded “chronic marital conflict interferes with sensitive, involved parenting and thereby predicts insecurity in attachment relationships” (p. 152).

Ainsworth (1979) first observed that insecure children responded to their mother’s interactions with them in different ways. Basing her research on Bowlby’s theory of attachment, she created an assessment designed to measure a child’s attachment to his or her caregiver. This assessment procedure (the Strange Situation) evaluated the mother-child dyad by observing the infant’s behavior before, during, and after a separation. This assessment led Ainsworth to hypothesize that there are three different types of attachment that infants develop with their mother including ambivalent, avoidant, and secure (Ainsworth, 1979).

She classified the insecure, ambivalent infants who, because of the uncertainty of their mothers’ response, behaved in angry, resistant ways. These children showed anxiety even before they were separated from their mother, and once reunited they were
“ambivalent with the mother, seeking close contact with her and yet resisting contact or interaction” (Ainsworth, 1979, p. 932). The second type of insecure attachment style, avoidant, was characterized as avoidance of the mother in anticipation of rejection. Avoidant children, according to Ainsworth (1979), “rarely cry in the separation episodes and in the reunion episodes, avoid the mother, either mingling proximity-seeking and avoidant behaviors or ignoring her altogether” (p. 932). She noticed that although these infants did not appear to enjoy being held, they also tended to protest when being put down. Finally, the children who were secure were capable of using their mother as a secure base and appeared to be comfortable exploring their surroundings. Although the secure infants did show distress during separation, upon reunion they actively sought proximity to their mothers (Ainsworth, 1979). Bowlby's theory and Ainsworth's research lead developmental psychologists in new directions, allowing them to explore the implications that attachment styles have on behavior (Cassidy, 1999). Subsequently, many researchers have discovered that a child's sense of security (or insecurity) can predict his or her future adjustment (Thompson, 1999).

Theorists, however, have not always agreed on the stability of attachment styles. Early researchers posited that infants develop internal working models of their relationship with their mother, which in turn affect their behavior later in life (Elicker, Englund, & Sroufe, 1992; Lewis, Feiring, McGuffog, & Jaskir, 1984). This relationship between early attachment styles and later behavior implies that an infant’s attachment style is one that remains constant throughout his or her lifetime. This continuity has not been supported empirically (Lewis, Feiring & Rosenthal, 2000). In fact, Lewis et al. (2000) discovered that in their sample, there was not a continuation of attachment styles
when they tested the child at 1 year, 13 years or at 18 years. Other researchers have suggested that Bowlby's conceptualization of attachment does allow for this discontinuity (van Ijzendoorn, Goldberg, Kroonenberg, & Frankel, 1992). They proposed that Bowlby's "formulation suggests that developing attachments can be disrupted by conditions that limit, impair, or distort the infant's behavior as well as conditions that interfere with adult responsiveness," (van Ijzendoorn et al., 1992, p. 841). Finally, although many researchers point to an insecure attachment style as a predictor of later dysfunctions, Greenberg, Speltz, and DeKlyen (1993) indicate that an infant's attachment is not the only factor that contributes to behavior but that "later parent-child and family relationships" are a necessary component to a child's adjustment, (p. 199). Despite the above, when attachment styles are assessed at the same time as the behaviors, they do predict behavior (Lewis et al., 2000).

Other Factors Contributing to the Development of Attachment Styles

There are several other factors in addition to the level of domestic violence witnessed that should be considered when trying to determine how and why specific attachment styles develop in infants and children. In a qualitative analysis, Bretherton, Biringen, and Ridgeway (1991) describe the mother's feeling of attachment to her child and hypothesize that a toddler who is secure may have developed this attachment style because his or her mother was warm and sensitive and encouraged autonomy in her child. They also proposed an "intergenerational transmission" of attachment styles. Although the researchers did not find the intergenerational transmission hypothesis to be statistically significant, the relationship the mother described with her child correlated with other established assessments of attachment including the Strange Situation, the
attachment story completion task and the Attachment Q-sort (i.e. children who had secure attachment styles had mothers who reported warm, nurturing relationships). Bretherton et al. (1991) thus concluded that the mother’s parenting, in general, had an impact on the child’s attachment style.

Despite the fact that Bretherton and colleagues (1991) failed to find a relationship between the mother’s attachment styles with her parents and the child’s attachment representations, other researchers have found positive correlations between the two. According to Shaver and Hazan (1993), in three different studies, researchers were able to predict the child’s attachment behavior 70-80 percent of the time by classifying the mother’s representation. Additionally, when women’s sense of security with their parents was compared with a measure of security with their partner, researchers discovered that 64% received the same classifications of either secure or insecure (Owens, Crowell, Pan, Treboux, O’Connor, & Waters, 1995). This finding suggests that a parent’s attachment behavior as a child can have an impact on their child’s current representations.

Other maternal characteristics can contribute to a child’s development of specific attachment styles in addition to parental warmth and sensitivity and the parent’s attachment style. van Ijzendoorn and colleagues (1992) conducted a meta-analysis of maternal and child problems in relation to attachment and concluded that negative parental characteristics can also function as a predictor of attachment styles in their children. They found that factors such as mental illness, teenage pregnancy and maltreatment of the mother were significant predictors of the children’s attachment style.
Attachment Styles and Behavior

Researchers generally agree that ambivalent (or resistant) attachment styles are related to internalizing problems (Erickson, Sroufe, & Englund, 1985; Finnegan, Hodges, & Perry, 1996). More specifically, research on the ambivalent attachment style finds that it positively correlates with anxiety, helplessness, and fearfulness (Sroufe, 1983). The relationship between avoidant classification and externalizing behaviors is not as clear. Although there are several studies that have found that children classified as avoidant are more noncompliant, (Erickson et al., 1985), aggressive, disruptive, and dishonest (Finnegan et al., 1996), Fagot and Kavanagh (1990) found no relation between avoidant attachments styles and antisocial behavior. Equally important to the prediction of problem behavior, secure attachment styles have been related to better social adjustment, better academic functioning, and overall more positive outcomes (Bohlin, Hagekull, & Rydell, 2000).

Attachment Styles and Resiliency

What is the link between domestic violence and the development of an insecure or secure attachment style? How do some children maintain a secure attachment style while others are so affected by witnessing domestic violence that their attachment style is threatened? Although the literature may be unclear on these issues, there are two potential factors that allow a child to maintain a secure attachment style when faced with adversity. These include: the age of the child when the violence began and certain characteristics of caregiving by the attachment figure.

Resiliency researchers indicate that for a child to be considered resilient, he or she must be able to cope with a task that is developmentally appropriate (Masten &
Coatsworth, 1998; Rutter, 1990). According to Masten and Coatsworth (1998), attachment to primary caregivers is the developmental task for children in the preschool years. If these children become competent in this task, the attachment relationship between parent and child will serve as a protective factor and the child will be more likely to be resilient when faced with future risk factors. If, however, the child is faced with a major stressor during this crucial time in development, he or she may be unable to develop a secure relationship with the caregiver. Consequently, exposure to domestic violence during the preschool years may threaten the development of a secure attachment. Additionally, children who are exposed to domestic violence after they have mastered the task of developing a secure attachment to their caregivers will be more likely to be resilient to the impact of witnessing domestic violence.

Characteristics of the mother may also serve as risk or protective factors for children who witness domestic violence. Domestic violence experienced by the mother is likely to be a major stressor in her life. Therefore, the stressor of dealing with abuse in the home is likely to impact her parenting by causing her to be less available to her children. However, some mothers manage to maintain a responsive, caring, and attentive relationship with their children despite the turmoil and distress the family is experiencing.

Cassidy (1999) proposed a “caregiving system” that may explain how this is accomplished. The caregiving system describes a set of parenting behaviors that promotes proximity and encourages the attachment between parent and child. These behaviors include parental monitoring, sensitivity, ability to sooth, and responsivity. When the caregiving system is inactive (i.e. the parent is engaged in other activities), the child’s attachment system is activated. This interaction between the parent’s caregiving
system and the child's attachment system can help to explain how the Strange Situation is able to assess a child's attachment. Cassidy (1999) further hypothesizes that the parent and child do not always have the same understanding of "what distance between them is acceptable" (p. 10). If the child's attachment system is activated, but the parent is unable to respond because she has other concerns (i.e. she is in a violent relationship), the child may develop an insecure attachment style. If, however, the mother's caregiving system is activated appropriately by the child's cry for protection, then the child may develop (or maintain) a secure attachment.

Theory and Hypotheses

As noted, the impact of domestic violence on the children who witness it is a relatively new research area (Rossman et al., 2000). However, over the last 20 years, a consistent finding is that witnessing domestic partner conflict (which encompasses domestic violence) has many adverse effects on children and adolescents (e.g., Emery, 1982; McCloskey et al., 1995; Sternberg et al., 1993). Home and laboratory studies reveal consistent findings. In fact, in one study, children who had been exposed to physical violence in the home engaged in "more solicitous behavior toward their mother" when they witnessed a staged argument between their mother and a stranger (Cummings, Pellegrini, Notarius, & Cummings, 1989, p. 1042). There are several theories that attempt to address this relationship between exposure to domestic violence and a child's behavior (e.g. Davies & Cummings, 1994; Grych & Fincham, 1990).

One theory in particular proposed that domestic partner conflict has an effect on children's emotional security, which in turn affects their behavior (Davies & Cummings, 1994). According to Davies and Cummings' (1994) original hypothesis, domestic partner
conflict causes distress in children, which in turn is a threat to their emotional security. In the original conceptualization of the theory, Davies and Cummings proposed that maladjustment in a child was caused by the insecurity they developed by witnessing domestic partner conflict. They hypothesized that the children's sense of emotional security impacts many areas of their lives including their interactions, their behavior and their cognitive functioning. The process by which problem behaviors develop is actually an adaptive response at first. "Children may work to increase their sense of emotional security through behaviors that regulate, reduce, or terminate their parents' conflicts," (p. 390). Unfortunately, these behaviors are reinforced and generalized, fostering maladaptive behaviors in the child.

These researchers along with others (Davies, Harold, Goeke-Morey, & Cummings, 2002) have since refined the emotional security hypothesis. They now acknowledge that other family characteristics (e.g. parental monitoring) may play a role in a child's emotional security. They also further delineate their definition of emotional security to include internal representations, emotional reactivity, and regulation of the exposure to parents' emotions. Additionally, they postulate that the emotional security a child has about domestic partner conflict may be different from the attachment bond between parent and child. However, other researchers have hypothesized that a variety of parent-child variables may affect a child's attachment representations, including domestic partner conflict (Thompson, 1999).

Although there have been several studies which have looked at the relationship between domestic partner conflict and the parent-child relationship (e.g., Forehand et al., 1991; Howes & Markman, 1989; Owens & Cox, 1997), there has been relatively little
done which explicitly addresses the possibility that attachment styles mediate the relationship between the level of domestic violence witnessed by the child and the child's subsequent behavior problems. In addition, there is virtually no literature that looks at the moderating relationship between domestic violence, attachment, and behavior. However, in their new conceptualization of the emotional security hypothesis, Cummings et al. (2002) postulate that "the quality of the relationship between parent and child" may be an important moderator in the relationship between domestic partner conflict and behavior problems (p. 16).

Both the mediator and moderator hypotheses implicate a causal model (Baron & Kenny, 1986). However, the mechanism by which domestic violence impacts children’s behavior problems is different depending on which hypothesis is considered. Specifically, "mediators function as a third variable that may explain the relation between the independent and the dependent variables" (Earleywine, 1993, p. 291). The mediating relationship proposed by Davies and Cummings (1994) indicates that although there is a relationship between the amount of domestic violence witnessed and the child’s behavior problems, this relationship is due to the fact that domestic violence impacts the child’s emotional security which in turn causes behavior problems. This model, therefore, proposes that the relationship between domestic violence and behavior problems is not direct and is only by means of the threat to the child’s emotional security. This study, although not directly addressing a child’s emotional security, attempted to address this model by examining attachment styles potentially acting as mediators.

Moderating variables, on the other hand, act as buffers or enhancers. This indicates that at each level of the independent variable, the impact on the dependent
variable may be different when the moderating variable is considered (Earleywine, 1993). In this case, the moderating hypothesis specifies that attachment styles interact with the level of domestic violence experienced by the mother. This interaction indicates that at each level of attachment style, the impact that domestic violence has on behavior is different. More specifically, attachment styles act as buffers in the relationship between domestic violence and behavior problems. Therefore, this model indicates that a secure attachment style will serve as a protective factor to the child developing behavior problems and that an insecure attachment style will heighten the risk that a child will have behavior problems.

**Hypothesis 1:** Based on the domestic violence and attachment literature and partly on Davies and Cummings' (1994) emotional security hypothesis, it was predicted that children who develop insecure attachment styles while living in a home where domestic violence has occurred, would have significantly more behavior problems than those children who maintain secure attachment styles. This hypothesis focused on attachment styles acting as mediators between domestic violence and behavior problems. More specifically, it is hypothesized that:

1a. children who develop ambivalent (also called preoccupied) coping strategies would be more likely to report anxious and depressive symptoms,

1b. the mothers would report more externalizing behavior problems for the children who endorse more avoidant coping strategies,

1c. children who are capable of maintaining a secure attachment to their mother would have fewer clinically significant behavior problems (i.e. secure attachment
styles would be negatively correlated with internalizing and externalizing behavior problems).

**Hypothesis 2**: It was hypothesized that attachment styles would interact with the level of domestic violence experienced to have an affect on the children’s behavior which would demonstrate the moderating role attachment styles have with domestic violence and behavior problems. Specifically, this hypothesis indicated:

2a. domestic violence would interact with ambivalent attachment styles to produce more internalizing behavior,
2b. domestic violence would interact with avoidant attachment styles to produce more externalizing behavior,
2c. domestic violence would be buffered by secure attachment styles to produce less overall behavior problems.

**Method**

**Participants**

Participants were 32 mother-child dyads. Mothers were between the ages of 25 and 50 (mean = 35.09) and children were between 7 and 12 years old (mean = 9.28). There were 15 boys and 17 girls. The racial make-up of the women in the sample was largely Caucasian (81.2%). Hispanic women made up 12.5% of the sample and the remaining 6.3% were American Indian. All of the dyads participated in a larger, more extensive study of the parent-child relationships of women who have experienced domestic violence. They were recruited from the community with particular emphasis being placed on recruiting from organizations that service women and children in
distress. Finally, 28 of the 32 dyads were recruited from a community in the northwest while the remaining 4 were recruited from a community in the northeast.

The women met a minimum criterion of being in a severely violent domestic relationship. The definition of severe violence was drawn from a study which addressed violence in couples (Jacobson, Gottman, Waltz, Rushe, Babcock, & Holtzworth-Monroe, 1994). The definition of severe domestic violence includes: being pushed, shoved, grabbed, kicked, bitten, or having had things thrown at them at least four times in one year, or being beaten up, threatened with a knife or gun, strangled or forced to perform sexually at least once in a year. Mothers gave consent for participation (Appendix A) for themselves and for their child. Additionally, each child completed an assent form (Appendix B), which gave a brief synopsis of the tasks they were asked to complete.

Materials

Demographics questionnaire

The demographics questionnaire (Appendix C) was designed to ascertain information about the women, their children and their abusive relationship that was not gathered with the measures used in this study. The questionnaire consisted of items that addressed the length of the abusive relationship, the resources used to cope with the relationship, child variables, etc.

Level of Domestic Violence

Conflict Tactics Scale (CTS): The CTS (Straus, 1979) was developed to assess the way in which families resolve conflict (see Appendix D). A 23-item questionnaire, the measure assesses how often the respondent has engaged in several different behaviors within the last year. The measure is also designed for the respondent to indicate how
often his or her partner has engaged in that behavior. The respondent can choose a range of answers between 0 (indicating never occurred) and 5 (indicating that the behavior occurred more than 20 times).

The scale is divided into three subscales, including: Reasoning, Verbal Aggression, and Violence. The items are ordered in such a way that the "correct" ways to resolve conflicts are presented first. This is the Reasoning Scale. An example of such an item is: "Got information to back up my side of things". The Reasoning Scale consists of 4 items and is followed by the Verbal Aggression Scale, which, also consists of 4 items. An example of one of these items is: "Did or said something to spite the other one". The last scale, the Violence Scale, consists of 10 items and an example of this type of item is: "Slapped the other one". Finally, the CTS allows several blank spaces for other types of conflict tactics not already mentioned. For the purposes of this study, only the Violence Scale was used.

Scoring for the CTS is relatively straightforward and requires that the numbers endorsed be added. Straus (1979) reports adequate internal consistency with an alpha of .83 for the Violence Scale in his norm sample. Additionally, concurrent validity was established by obtaining rating of the adult children of respondents. Correlations for concurrent validity were .64 for the Violence Scale. Straus (1979) also reported adequate construct validity. The CTS was normed on a nationally representative sample of 2,143 couples (Straus, 1979). In this sample, the alpha coefficients for this sample were .84 for the total scale and .90 for the Violence scale.
Attachment Styles

Security Scale: Developed by Kerns, Klepac, and Cole in 1996, this measure is designed to assess a child's level of security to his or her attachment figure (see Appendix E). Although it was developed to measure the level of attachment to both mother and father, it will be used only with the mother. The test is a 15-item questionnaire formatted in a way to reduce social desirability and response sets. This is accomplished by using Harter's (1982) format that allows the child to choose between two types of kids and then asks them to decide if this is really true for them or sort of true for them. An example of this type of question is as follows: "Some kids feel better when their mom is around BUT other kids do not feel better when their mom is around." The questionnaire is designed to measure the child's feelings about how available his or her mother is to him or her. It is currently the only self-report measure that was specifically developed to assess secure attachment styles in middle childhood.

Scored on a Lickert-type scale, the scores range from 1 to 4 for each item, 4 being the more secure response and the overall range of possible scores is between 15 and 60. Kerns et al. (1996) report good internal consistency- Cronbach's alpha of .93 and sound test-retest reliability (.75) for their sample of fifth grade students. Additionally, Kerns, Tomich, Aspelmeier, & Contreras (2000) report alphas of children's security with their mother between .64 and .82 for their sample of children who were between the ages of 9 and 12. Both of the preceding samples were with typically developing children. For this sample the alpha was adequate at .81.

Validity for this measure has also been established. Kerns et al. (1996) indicated that a secure attachment is "correlated with motivation, social interaction, and social
relationships but is not predicted to be highly correlated with IQ or physical
development” (p. 459). To establish convergent validity, the authors compared the
Security Scale with measures of each of these variables and concluded that it was, in fact,
correlated with self-esteem, peer acceptance and behavior. Additionally, the authors
found the Security Scale to be negatively correlated with GPA and athletic competence,
establishing some discriminant validity.

*Coping Strategies Questionnaire:* The Coping Strategies Questionnaire (CSQ) is
a 36-item questionnaire (see Appendix F) designed to measure preoccupied and avoidant
coping styles in children who are in middle childhood. Finnegan, et al. (1996) formatted
the measure similarly to the Security Scale, which was adapted from Harter's (1982)
model. Each item describes a situation in which a child is in a distressing situation and
asks the child to decide which would be their most likely response. An example of one of
these items is as follows: "Your mother comes home after being away for a week or two.
Some kids would stop what they are doing and run to greet her with a hug or kiss, but
other kids would not stop what they were doing to greet her. Which is more like you?"

Finnegan et al. (1996) reported alpha coefficients of .86 for the Preoccupied Scale
and .84 for the Avoidant Scale for their sample of children who were between the ages of
8 and 12. Hodges, Finnegan, and Perry (1999) administered this measure to a different
sample and again reported solid internal consistency, with Cronbach's alphas of .84 and
.83 for the Preoccupied and Avoidant Scales, respectively. Kerns et al. (2000) also
reported good internal consistency with alpha coefficients between .74 and .88 for
preoccupied coping with mother and alpha coefficients between .71 and .80 for avoidant
coping with mother. Additionally, Finnegan et al. (1996) re-tested 40 children 2 weeks
after the initial testing and reported correlations for the Preoccupied Scale at .83 and .76 for the Avoidant Scale. All three of the above studies included nonclinically referred children. Internal consistency for this sample was adequate for the preoccupied scale at .80 and low for the avoidant scale at .41.

Discriminant validity for the Avoidant Scale has been demonstrated. Kerns et al. (2000) reported that the Avoidant Scale and the Preoccupied Scale were negatively correlated for mother-child dyads (ranging from -.27 to -.32) and for most father-child dyads (-.22 [NS] for the third grade sample, -.37 for the fifth grade sample and -.43 for the sixth grade sample). The Avoidant scale was also negatively correlated with scores on the Security Scale with correlations ranging from -.45 to -.70. Finnegan et al. (1996) reported a relationship between the Avoidant Scale and externalizing problems demonstrating predictive validity but surprisingly, this was not a consistent finding when this sample was retested (Hodges et al., 1999).

Discriminant validity for the Preoccupied Scale has not been established except in relation to the Avoidant scale (see above). Some degree of predictive validity has been demonstrated by Finnegan et al. (1996) who reported that preoccupied coping strategies do account for a significant amount of variance in relation to internalizing problems (F= 5.98, p< .02) in their sample of 11 year olds. Curiously, this did not hold true one year later (Hodges et al., 1999).

Child Outcomes

Child Behavior Checklist (CBCL): This well-established measure is a checklist designed by Achenbach (1991) and it was developed to assess a variety of potential behavior problems (see Appendix G). Completed by the parent, the CBCL assesses the
child's externalizing and internalizing behavior problems on several dimensions. For the purposes of this study, however, only internalizing, externalizing scaled scores and overall behavior problems were used. The scales are scored by a computer program, which computes the behavior problems endorsed by the parent. The CBCL uses a normalized T score and children who score in the 98th percentile are considered to have clinically significant behavior problems.

The measure is a 113-item checklist that allows the parent to answer on a three-point response scale. The parent is to circle the number that most reflects their child, 0 for not true or not present, 1 for present some of the time and 2 for usually true or present most of the time. The CBCL was designed this way to protect against making a forced choice for ambiguous items. Achenbach reported internal consistency for these scales as good with Cronbach's alpha ranging from .89 for internalizing to .96 for externalizing behavior problems for the normed sample. Additionally, test-retest reliability was also sound, specifically .89 for internalizing, and .93 for externalizing (Achenbach, 1991). The CBCL was normed with a nationally representative sample of non-referred and clinically referred children between the ages of 4 and 18. The alphas for this sample for the CBCL were good with .95 for the overall score, .92 for both the Internalizing and Externalizing Scales.

Revised Children's Manifest Anxiety Scale (RCMAS): The Revised Children's Manifest Anxiety Scale developed by Reynolds and Richmond (1985) is a 37-item self-report questionnaire (see Appendix H). Designed to measure children's internal states of anxiety, the RCMAS assesses worry and oversensitivity, physiological anxiety and social concerns and concentration. In addition to those three subscales, the RCMAS contains a
Lie Scale, which consists of 9 items representing "ideal behavior." The authors of the measure indicate that although a high score on the Lie Scale could represent a child who is "faking good," it also could be indicative of a child who is socially isolated or of parents who have extremely high expectations of their child.

Reynolds and Richmond (1985) report that the RCMAS demonstrates good internal consistency, typically with alpha coefficients between .79 and .85 for their samples. Additionally, when compared with other established measures of childhood anxiety, the RCMAS demonstrated sound convergent validity, with correlations between .78 and .85 for manifest and state anxiety for this norm sample. Discriminant validity has also been adequate when compared with intelligence tests. Finally, test-retest reliability is adequate with a coefficient of .68 for their sample. The RCMAS was normed on clinical and nonclinical samples. Internal consistency for this sample was consistent with that of others at .90.

**Child Depression Inventory (CDI):** The Child Depression Inventory (Kovacs, 1992) is a 27-item self-report measure designed to assess children's state of depression in the last 2 weeks (see Appendix I). For each item, the child is to choose one of three statements which best reflects how he or she feels. An example of one of the items is as follows: "I like being with people, I do not like being with people many times, I do not want to be with people at all." Scored on the Multi-Health Systems Quick Score Form, each option is assigned a scored of 0, 1, or 2 with 2 representing the more depressed response. The overall range of possible scores is from 0 to 54. The CDI scale is converted to a T-score and it is recommended that a score between 60 and 66 be used as a cutoff for clinically significant rates of depression.
Kovacs (1992) reports good internal consistency with alpha coefficients between .71 and .89 for the clinical and nonclinical populations it was normed on. Although test-re-test reliability is lower, typically ranging from .38 to .87 in these samples, Kovacs points out that this is a measure of the state, not trait of depression. In this sample internal consistency was good with an alpha of .91.

Procedure

Upon agreeing to participate in this study, the dyad was asked to complete a number of tasks. Although most of these tasks were not the focus of this study, they may have impacted how the mother and child responded to the measures. First the dyad was asked to play together for a period of 15 minutes and upon completing their play session, they were asked to draw a picture of their family. Once the mother and child finished this aspect of the study, the child was taken to a separate room while his or her mother was interviewed about her violent relationship.

The principal investigator or a trained research assistant accompanied the child to a quiet room to complete the measures. To control for the varying reading capabilities of the children, the questionnaires were read aloud to them. The principal investigator and the research assistants were careful not to maintain eye contact when the child responded to the questions as to allow for a certain level of privacy in their responses. The child was informed that he or she could choose not to answer the questions and that he or she could return to be with his or her mother at any time. Although some children did ask to see their mothers, all of the children completed the measures without difficulties. Once the children completed the measures, they played with a variety of toys that were available while they waited for their mother.
After completing a short semi-structured interview, mothers were asked to fill out a variety of measures relating to her violent relationship and her child's present functioning. Additionally, mothers completed a demographic questionnaire. Once finished, mothers were debriefed and offered a referral list of resources in the community. Mothers were paid $20 in appreciation and children received a small gift.

Results

Demographic statistics are reported in Table 1. The average number of months the since the women had experienced the last violent incident was 20 months. Forty-seven percent of the abusers were the biological fathers of the children and the average family income was between 20 and 25 thousand dollars. Means, medians, standard deviations, ranges, and reliabilities for each of the predictor variables and outcome variables are presented in Tables 2 and 3. Descriptive statistics reveal that the children in this sample did not exhibit clinically significant behavior problems as measured by the CBCL (mean = 59), depression as measured by the CDI (mean = 50), or anxiety as measured by the RCMAS (mean = 53).

Because of the potential for confounding variables, correlations between demographic variables and the outcome measures were explored. Analyses revealed that family income, mother’s education, mother’s race and child’s age and gender were not correlated with any of the outcome measures. Therefore, they were not controlled statistically in the following analyses. Many of the expected correlations between the predictor variables and the outcome variables were not statistically significant (e.g., CTS was not correlated with the CSQ or the CBCL Externalizing Scale). Additionally, correlations between some outcome variables were unexpectedly low and non-significant.
Specifically, children’s internalizing score as reported by the mother on the CBCL did not correlate significantly with the children’s reports of depressive symptoms on the CDI or with children’s reports of anxiety on the RCMAS. However, children’s reports of anxiety did significantly correlate with children’s reports of depression ($r = .366, p < .05$). As a result of this correlation, the CDI and the RCMAS were combined into a composite score. This was accomplished by converting the CDI and the RCMAS into $z$ scores and then summing these scores into one score measuring the child’s report of internalizing characteristics (child report internalizing). The CBCL Internalizing Scale was considered separately.

Table 1

_Descriptive statistics for the sample_

<table>
<thead>
<tr>
<th>Demographics of Sample</th>
<th>8 years (6 months-26 years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average length of time in the violent relationship</td>
<td>8 years (6 months-26 years)</td>
</tr>
<tr>
<td>Average length of time since last violent incident</td>
<td>20 months (2 days-7 years)</td>
</tr>
<tr>
<td>Average family income during the violent relationship</td>
<td>$20,000-$25,000</td>
</tr>
<tr>
<td>Percentage of women who:</td>
<td></td>
</tr>
<tr>
<td>had at least a high school degree</td>
<td>74 percent</td>
</tr>
<tr>
<td>were involved in a violent relationship (at the time of study)</td>
<td>22 percent</td>
</tr>
<tr>
<td>still has contact with their violent partner</td>
<td>47 percent</td>
</tr>
<tr>
<td>had been involved in more than one violent relationship</td>
<td>68 percent</td>
</tr>
<tr>
<td>indicated that reports to CPS were made</td>
<td>34 percent</td>
</tr>
<tr>
<td>Percentage of children who:</td>
<td></td>
</tr>
<tr>
<td>were female</td>
<td>53 percent</td>
</tr>
<tr>
<td>were the biological children of the abuser</td>
<td>47 percent</td>
</tr>
<tr>
<td>have ongoing contact with the abuser</td>
<td>44 percent</td>
</tr>
</tbody>
</table>

Regression analyses (See Table 4) were run to determine if the CTS Violence Scale predicted child behavior outcome. The CTS Violence Scale did not predict the CBCL Externalizing Scale or the composite internalizing score. The CTS Violence Scale
did predict mothers’ reports of internalizing on the CBCL ($R^2 = .127, F(1, 29) = 4.215, p = .05$). There was also a trend in the prediction of the CBCL total from the CTS Violence Scale ($R^2 = .102, F(1, 29) = 3.287, p = .08$). When considering attachment, the CTS Violence Scale predicted the SS ($R^2 = .125, F(1, 29) = 4.126, p = .05$). This prediction was not in the direction proposed. In fact, children who witnessed more domestic violence were more secure than children who witnessed fewer incidents of domestic violence. The CTS Violence Scale did not predict the CSQ Preoccupied or Avoidant Scales.

Table 2

*Descriptive statistics for the predictor measures*

<table>
<thead>
<tr>
<th>Measure or Scale</th>
<th>Mean</th>
<th>Median</th>
<th>Standard Deviation</th>
<th>Range</th>
<th>Reliability $\alpha$</th>
</tr>
</thead>
<tbody>
<tr>
<td>CTS Violence Scale</td>
<td>26.47</td>
<td>25</td>
<td>14.21</td>
<td>3 - 54</td>
<td>.90</td>
</tr>
<tr>
<td>Security Scale</td>
<td>50.35</td>
<td>53</td>
<td>7.93</td>
<td>29 - 60</td>
<td>.81</td>
</tr>
<tr>
<td>CSQ Preoccupied</td>
<td>14.23</td>
<td>14</td>
<td>7.01</td>
<td>3 - 27</td>
<td>.80</td>
</tr>
<tr>
<td>CSQ Avoidant</td>
<td>2.71</td>
<td>2</td>
<td>2.56</td>
<td>0 - 8</td>
<td>.41</td>
</tr>
</tbody>
</table>

(CTS- Conflict Tactics Scale; CSQ- Coping Strategies Questionnaire)

Regression analyses further revealed that the CSQ Avoidant Scale did not significantly predict the CBCL Externalizing Scale. The CSQ Preoccupied Scale did not predict mothers’ reports of internalizing on the CBCL. However, there was a strong affect on the composite internalizing score ($R^2 = .363, F(1, 29) = 16.510, p < .0005$). The SS did not correlate with or predict any of the CBCL scales. Finally, the SS did predict the internalizing composite score in a negative direction, indicating that the more secure the child, the less internalizing behavior ($R^2 = .175, F(1, 29) = 6.153, p = .02$).
Table 3.

**Descriptive statistics for the outcome measures**

<table>
<thead>
<tr>
<th>Measure or Scale</th>
<th>Mean</th>
<th>Median</th>
<th>Standard Deviation</th>
<th>Range</th>
<th>Reliability α</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBCL Total</td>
<td>59.03</td>
<td>61</td>
<td>12.74</td>
<td>29 - 82</td>
<td>.95</td>
</tr>
<tr>
<td>CBCL Internalizing</td>
<td>59.16</td>
<td>60</td>
<td>12.41</td>
<td>39 - 87</td>
<td>.92</td>
</tr>
<tr>
<td>CBCL Externalizing</td>
<td>56.81</td>
<td>58</td>
<td>11.73</td>
<td>32 - 80</td>
<td>.92</td>
</tr>
<tr>
<td>RCMAS</td>
<td>52.56</td>
<td>54</td>
<td>14.67</td>
<td>18 - 87</td>
<td>.90</td>
</tr>
<tr>
<td>CDI</td>
<td>49.84</td>
<td>46</td>
<td>13.17</td>
<td>35 - 98</td>
<td>.91</td>
</tr>
</tbody>
</table>

(CBCL- Child Behavior Checklist; RCMAS- Revised Children’s Manifest Anxiety Scale; CDI- Child Depression Inventory)

**Mediating Hypotheses**

Although the CTS Violence Scale did not predict the CBCL total at an alpha of .05, there were significant predictions at the .10 level. Additionally, the CTS Violence Scale did predict the scores on the SS. Because of the small sample size, the mediating hypothesis was considered despite the lack of statistical significance at an alpha of .05. A hierarchical regression analysis was conducted with the CBCL total as the dependent variable and the CTS Violence Scale entered in the first block and the Security Scale entered in the second block. Neither variable contributed to the prediction of the CBCL total. Finally, although the CTS Violence Scale did significantly predict child internalizing as measured by the CBCL, it did not predict preoccupied coping. Therefore, preoccupied attachment did not appear to mediate the relationship between domestic violence and internalizing behavior.
### Table 4.

**Regression analyses**

<table>
<thead>
<tr>
<th>Analyses</th>
<th>R²</th>
<th>ΔR²</th>
<th>ΔF</th>
<th>df</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Analysis 1: DV= CBCL Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTS</td>
<td>.102</td>
<td>.102</td>
<td>3.287</td>
<td>1</td>
<td>.080*</td>
</tr>
<tr>
<td>SS</td>
<td>.057</td>
<td>.057</td>
<td>1.695</td>
<td>1</td>
<td>.203</td>
</tr>
<tr>
<td>CTS, SS</td>
<td>.129</td>
<td>.129</td>
<td>1.996</td>
<td>2</td>
<td>.155</td>
</tr>
<tr>
<td>CTS X SS</td>
<td>.132</td>
<td>.003</td>
<td>1.315</td>
<td>3</td>
<td>.291</td>
</tr>
<tr>
<td><strong>Analysis 2: DV= CBCL Externalizing</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTS</td>
<td>.017</td>
<td>.017</td>
<td>.490</td>
<td>1</td>
<td>.489</td>
</tr>
<tr>
<td>SS</td>
<td>.017</td>
<td>.017</td>
<td>.481</td>
<td>1</td>
<td>.494</td>
</tr>
<tr>
<td>CSQ Avoidant</td>
<td>.003</td>
<td>.003</td>
<td>.071</td>
<td>1</td>
<td>.792</td>
</tr>
<tr>
<td>CTS, CSQ Avoidant</td>
<td>.035</td>
<td>.035</td>
<td>.486</td>
<td>2</td>
<td>.620</td>
</tr>
<tr>
<td>CTS X CSQ Avoidant</td>
<td>.036</td>
<td>.001</td>
<td>.322</td>
<td>2</td>
<td>.809</td>
</tr>
<tr>
<td><strong>Analysis 3: DV= CBCL Internalizing</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTS</td>
<td>.127</td>
<td>.127</td>
<td>4.215</td>
<td>1</td>
<td>.049**</td>
</tr>
<tr>
<td>SS</td>
<td>.027</td>
<td>.027</td>
<td>.767</td>
<td>1</td>
<td>.389</td>
</tr>
<tr>
<td>CSQ Preoccupied</td>
<td>.058</td>
<td>.058</td>
<td>1.713</td>
<td>1</td>
<td>.201</td>
</tr>
<tr>
<td>CTS, CSQ Preoccupied</td>
<td>.226</td>
<td>.226</td>
<td>3.938</td>
<td>2</td>
<td>.032**</td>
</tr>
<tr>
<td>CTS X CSQ Preoccupied</td>
<td>.257</td>
<td>.031</td>
<td>1.101</td>
<td>1</td>
<td>.304</td>
</tr>
<tr>
<td><strong>Analysis 4: DV= Composite Internalizing Score</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTS</td>
<td>.024</td>
<td>.024</td>
<td>.723</td>
<td>1</td>
<td>.402</td>
</tr>
<tr>
<td>SS</td>
<td>.175</td>
<td>.175</td>
<td>6.153</td>
<td>1</td>
<td>.019**</td>
</tr>
<tr>
<td>CSQ Preoccupied</td>
<td>.363</td>
<td>.363</td>
<td>16.510</td>
<td>1</td>
<td>.000***</td>
</tr>
<tr>
<td>CTS, CSQ Preoccupied</td>
<td>.368</td>
<td>.368</td>
<td>8.139</td>
<td>2</td>
<td>.002***</td>
</tr>
<tr>
<td>CTS X CSQ Preoccupied</td>
<td>.370</td>
<td>.002</td>
<td>.082</td>
<td>1</td>
<td>.777</td>
</tr>
<tr>
<td><strong>Analysis 5: DV= SS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTS</td>
<td>.125</td>
<td>.125</td>
<td>4.126</td>
<td>1</td>
<td>.051**</td>
</tr>
<tr>
<td><strong>Analysis 6: DV= CSQ Avoidant</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTS</td>
<td>.051</td>
<td>.051</td>
<td>1.546</td>
<td>1</td>
<td>.224</td>
</tr>
<tr>
<td><strong>Analysis 7: DV= CSQ Preoccupied</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTS</td>
<td>.015</td>
<td>.015</td>
<td>.446</td>
<td>1</td>
<td>.510</td>
</tr>
</tbody>
</table>

**Notes:**

CTS-Conflict Tactics Scale; SS-Security Scale; CSQ-Coping Strategies Questionnaire; CBCL-Child Behavior Checklist

* Correlation is significant at the 0.10 level (2-tailed).

** Correlation is significant at the 0.05 level (2-tailed).

*** Correlation is significant at the 0.01 level (2-tailed).
Moderating Hypotheses

As stated above, there were several main effects between the predictor variables and the outcome variables. The moderating hypotheses were tested by entering both the predictor variables in the first block of the regression equation and the interaction between the variables in the second block. These analyses revealed that none of the interactions were statistically significant. Specifically, analyses were run to test the interaction between the CTS Violence Scale and the SS. This interaction did not have an affect on the CBCL Internalizing or Externalizing Scales or the CBCL total. Regression analyses were also run to test the interaction between the CTS Violence Scale and CSQ Preoccupied Scale. There was no relationship between this interaction and the CBCL Internalizing Scale or the composite internalizing score. The third moderating hypothesis involved the CTS Violence Scale and the CSQ Avoidant Scale. This interaction did not significantly predict the CBCL Externalizing Scale. Finally, because the CTS Violence Scale and the SS were correlated ($r = .353$), variables were centered to ascertain if the interaction was masked by the correlation between variables. This was accomplished by subtracting the mean from each score, which reduced the correlations between the variables. These regression analyses were not statistically significant.

Discussion

The purpose of this study was to explore the impact of the parent-child relationship when considered in the context of domestic violence and child maladjustment. Specifically, the goal of this study was to explore whether the attachment between mother and child acted as a catalyst between domestic violence and child behavior problems or if it acted as a buffer/vulnerability variable. A mediating hypothesis
proposed that domestic violence acted on child outcome only by way of the attachment between mother and child. More specifically, it was hypothesized that domestic violence was related to child maladjustment because it impacted a child’s sense of security, which, in turn, impacts his or her behavior. A moderating hypothesis proposed that a secure attachment would act as a buffer between domestic violence and child outcome and that an insecure attachment would act as a vulnerability factor. That is, children who witness domestic violence and have secure attachments would be protected from the adverse consequences of the violence. Further, children who have insecure attachment (ambivalent or avoidant) would be more vulnerable to the effects of domestic violence. The results of tests of these hypotheses are addressed below.

The results were discrepant from the hypotheses and the existing literature on domestic violence and child functioning. Most surprisingly, domestic violence as measured by the CTS did not significantly predict child externalizing as measured by the CBCL or child internalizing as measured by the CDI and the RCMAS. Furthermore there was only a trend in the prediction of overall behavior of the child as measured by the CBCL. The CTS did however, predict child internalizing as reported by the mother on the CBCL. The CTS did not predict the insecure measures of attachment but did predict the measure of security. Additionally, the CSQ Preoccupied Scale positively predicted the child’s reports of internalizing behavior and the SS negatively predicted the child’s reports of internalizing. Finally, there was no mediating or moderating relationship found between domestic violence, attachment, and behavior.

The lack of a statistical relationship between domestic violence and externalizing behavior was in stark contrast to the plethora of research that has found otherwise. In
fact, Davies et al. (2002) went as far as to say that testing the relationship between marital conflict and behavior problems is no longer needed because it “has reached the point of diminishing returns” (p. 1). Additionally, in his review of the literature, Emery (1982) concluded that although the research findings were mixed for domestic partner conflict resulting in child internalizing behavior problems, there was a consistent finding for child externalizing behavior problems. In this sample, domestic violence was related to child internalizing behavior. Despite the mixed findings in the literature about domestic partner conflict and internalizing behavior, many researchers have reported relationships between domestic violence and depression (McCloskey et al., 1995) and anxiety (Long et al., 1988; Wierson et al., 1988).

Although the relationship between domestic violence and insecurity does not have as much empirical support as the relationship between domestic violence and maladaptive behavior, it was surprising that there was no statistical relationship. The level of domestic violence did not predict preoccupied or avoidant coping strategies. Further, domestic violence did predict secure attachments in a positive direction: children who were exposed to greater levels of domestic violence were more likely to have secure attachments.

These results, specifically the CTS positively predicting the SS, were surprising given that the literature in this area would lead us to the opposite conclusions. There are three potential reasons for these findings. The first may simply be that this is an anomaly of this sample- that this sample possessed characteristics that are unusual and that have not been addressed in other studies. The second potential explanation is that the measure used to assess security in this study is not testing the construct that it purports to measure.
Specifically, the SS may not be measuring a child’s level of security with his or her mother but some other parent-child relationship construct. However, the SS did demonstrate some predictive validity with the child’s report of internalizing. The third explanation may be that this finding is reliable and accurate. This last explanation would require modification of domestic violence theories.

There was some support for the relationships between attachment and behavior. As noted, secure attachment as measured by the SS, was negatively related to child’s report internalizing. This finding is consistent with much of the research in this area which indicates that children who have secure attachment styles are better adjusted on many levels including their experiences of social anxiety (Bohlin, et al., 2000) and other internalizing behavior. Additionally, preoccupied attachment was positively related to the child’s report of internalizing. This relationship has also been supported in the literature. In fact, children who have preoccupied attachments are more likely to be withdrawn, feel helpless and have low self-esteem than avoidant or secure children (Sroufe, 1983; Lewis et al., 1984).

It is important to note that although the mediating relationship considered here is similar to that proposed by Davies, Cummings, and colleagues, this theory was not specifically tested in this study. Recently, Davies et al. (2002) have further developed and reformulated the emotional security hypothesis. In fact, they indicate that when the theory was first proposed in 1994, it required “further conceptual refinement and reformulation in both precision and scope” in order to test it (Davies et al., 2002, p. 5). These researchers now postulate that a child’s emotional security is made up of more than the attachment between parent and child. Although the researchers concede that the
attachment relationship is important when considering a child’s adjustment, they hypothesize that there are other family environmental factors that should be considered in the model. Further, they propose that children develop an emotional security specifically surrounding domestic partner conflict, which may be independent of the security they feel with their parents in general.

The moderating hypotheses also did not receive support in this study. Specifically, a secure attachment did not interact with domestic violence to predict child behavior. Further, preoccupied attachment did not interact with domestic violence to predict internalizing and avoidant attachment did not interact with domestic violence to predict externalizing.

**Implications**

The results of the present study are somewhat unclear and replication should be considered. Although the intent of this research was to advance the application of attachment theory to clinically relevant issues, more research should be conducted in this area to further clarify the role of attachment between domestic violence and behavior problems. The results of this study should also be considered when researchers are proposing that the relationship between domestic violence and child behavior problems is absolute. In fact, an important variable that should be considered when addressing this question is the length of time the women are out of the relationship. The relationship between domestic violence and attachment styles should also be explored with other assessments of attachment to address the difficulty experienced with the Coping Strategies Questionnaire and the Security Scale. Although the present study will add to the considerable amount of research conducted in the area of domestic violence and the
impact on children, there needs to be further refinement of the methodology before the results should be considered for application. It is hoped that the results could aid interventionists in the conceptualization of childhood difficulties when considered in the context of domestic violence by stressing the relationship variable between mother and child.

Limitations

One of the most surprising results of this study was that neither domestic violence nor avoidant attachment predicted child externalizing behavior as measured by the CBCL. As noted, the relationship between domestic partner conflict and externalizing behavior is a consistent finding (Grych & Fincham, 1990). One potential cause for this lack of relationship may be the fact that the average amount of time since the women in this study experienced the last violent incident was 20 months ago. Researchers have indicated that the longer the children have been out of the violent home, the better they adjust (Rossman, 2001). Although the relationship between avoidant attachment and child externalizing has not been as well established (Fagot & Kavanagh, 1990), other researchers have found a relationship between avoidant attachment and acting out behavior (Erickson et al., 1985; Finnegan et al., 1996). Of course something that should not be overlooked when considering this finding is the fact that the CSQ Avoidant Scale had extremely low internal consistency (.41) in this sample. This difficulty with the CSQ Avoidant Scale could certainly affect the construct validity of the measure.

The measures used were one of the largest difficulties of this study. There are the problems associated with having a single source for reports of domestic violence and externalizing behavior. In addition, there is only one measure of externalizing behavior
(CBCL) and because of perceptual bias, mothers may not be able to accurately identify all the problems the child may experience. If we were able to obtain an external assessment of the violence in the home or a teacher's report of the child's behavior, we might have had results that were consistent with the literature on domestic violence and the children who witness it. Although the CBCL is the most widely used assessment device to measure child behavior problems, (Rossman et al., 2000) and it has been determined to correlate with other measures of child behavior problems, data from multiple assessment devices may have aided in the discovery of the proposed relationships.

The measures used to determine attachment styles may be problematic because they are relatively new measures and their validity has yet to be established. Unfortunately, there are virtually no other self-report measures that assess attachment in middle childhood and although the Security Scale appeared to be adequate and reliable in this sample, the Coping Strategies Questionnaire did not. The Security Scale yielded good reliability in this study and it did demonstrate some predictive validity (the SS predicted lower levels of internalizing behaviors). However, individuals who scored high on the Security Scale were more likely to have witnessed more violence in their homes.

Another potential limitation of this study is the fact that the measures of attachment styles are self-report. Researchers have hypothesized that self-report may not be the most accurate way of obtaining a child's true attachment style and that in depth interviews and observation may paint a more accurate picture. It is important that these limitations be considered and addressed with future research. Using multiple measures of
a child's functioning (i.e., teacher report or observation) and conducting a detailed interview with the child about his or her relationships may begin to address these issues.

The results that were obtained should be interpreted with caution. Although the findings of this study were not consistent with the literature on domestic violence and the adjustment of children who witness it, much of the research on these topics has reported relationships between these variables. Although there was some support for attachment styles predicting behavior, research indicates that behavior problems are multiply determined and attachment styles are only one risk factor (Davies et al., 2002). In addition, one cannot infer causality without manipulating an independent variable and controlling for outside factors. Unfortunately with this population this type of study would not be possible or ethical.

In addition, because the majority of the participants were recruited from a small community in Montana, one must be careful must be when attempting to generalize to other populations. However, although this may not generalize to other populations, women who live in smaller communities are understudied and are significantly impacted by domestic violence. Another potential limitation was that there was no comparison group and it is difficult to know if the results obtained were specific to this group. Finally, this was a small sample size and these results may not replicate with a larger more representative sample. Future researchers should also include mother-child dyads from different geographical areas, dyads that report no history of domestic violence as well as have larger samples.

Finally, more recent research in the field of attachment has revealed a third type of insecure attachment style. This type of attachment is characterized by fearful and odd
behavior and is frequently seen in children who have been abused. Given the high incidence of child abuse in domestically violent homes, children in this study were at an increased risk of developing a disorganized attachment style. Unfortunately, there is no assessment device for this attachment style with this age range. However, this attachment style may be unlikely given that the children in this sample appeared to be relatively well adjusted.

Conclusions

The children in this sample were well adjusted considering the difficulties they have experienced. Surprisingly, domestic violence as measured by the CTS predicted internalizing behavior problems but not externalizing behavior problems. This finding was inconsistent with the literature on domestic violence and the children who witness it. There was some support for the relationship between attachment and behavior problems. Specifically, preoccupied attachment predicted internalizing behavior problems. Unexpectedly, secure attachment predicted more internalizing behaviors. Contrary to the hypotheses, there was no statistical support for the mediating or moderating models. The failure to find the proposed relationship may be due to several difficulties with this study including poor measurement devices and a small sample size. Despite this failure, these relationships do warrant further investigation potentially with more sensitive assessment tools. The results of this study add to and in some ways contradict the substantial literature on the impact that witnessing domestic violence has on children. It is hoped that these relationships will be further explored to ascertain whether the proposed relationship does exist.
References


Psychology, 32(3), 457-466.


Appendix A

Consent for Participation

1. The purpose of this project is to investigate the experience of women and their children in violent relationships, focusing particularly on the impact of violence on women's parenting and children's resiliency and good outcomes.

2. You will be asked to play with your child and complete a family drawing together, as well as to respond to a series of questionnaires and a brief interview regarding your relationship with your violent partner and the impact of this experience on you, your child, and your parenting behaviors. With your consent, the play session will be videotaped for future coding by the researcher and trained research assistants; however, the videotape will be destroyed within one year. You will receive $20 in recognition of your time and effort and your child will receive a small gift.

3. All information gathered for research purposes will be kept confidential. Confidentiality will be maintained throughout this process by assigning a code number to your records. However, if you or your child discloses information about harm to self, others, child abuse, or elder abuse, a report to DFS will have to be made.

4. If you wish, you may receive the results of the overall project upon its completion by calling the Psychology Department at 243-4521.

5. This project aims to better understand the impact of domestic violence on mothers and their children, looking specifically at the mother-child relationship's influence on positive outcomes for children. You may not directly benefit from participation, but your involvement may help in the development of assistance programs for women and children in such relationships.

6. Your involvement in this project is entirely voluntary. You may withdraw at any time without any prejudice or loss of money.

7. If you have any questions about this project, you can speak with David Schuldberg, Ph.D., Christine Fiore, Ph.D. or Katy Lynch, M.A. at 243-4521. If you feel the need for any counseling or support, referrals will be made to:
   The YWCA Battered Women's Shelter
   The YWCA Women's and Children's Support Groups.

8. Although this research does not entail any physical contact and risk of physical injury is considered minimal, the University of Montana extends to each research participant the following liability information: "In the event that a participant is physically injured during the course of this research, he or she should individually seek appropriate medical treatment. If the injury is caused by the negligence of the University or any of its employees, the participant may be entitled to reimbursement or compensation pursuant to the Comprehensive State Insurance Plan established by the Department of the Administration under the authority of the M.C.A., Title 2, Chapter 9. In the event of a claim for such personal injury, further documentation may be obtained from University Legal Counsel."
I UNDERSTAND EACH OF THE ABOVE ITEMS, AGREE TO PARTICIPATE IN THIS PROJECT, AND CONSENT FOR MY CHILD TO PARTICIPATE IN THIS PROJECT.

Signature of Participant ________________________________ Date ________________

I, ________________________________ also consent to have the play session videotaped.

Signature of Participant ________________________________ Date ________________
Appendix B

Child Assent Form

I understand that I will be asked to play and draw a picture with my mother, and be asked to talk about my family and my feelings. I know that I can stop participating at any time if I don’t want to continue. I agree to be videotaped with my mother during the play session. I understand that the videotape will be destroyed within one year of my participation. All information will remain confidential; however if I talk about hurting myself or others or child abuse, the interviewer may have to tell my mom and tell the authorities.

__________________________  __________________________
Child's signature                   Date
Appendix C

Demographic Questionnaire

We would like some general background information about you, your child, and your violent partner. If the violence occurred in a past relationship, please provide information about that partner and your relationship (as long as your child (who is participating in this study) was exposed to this relationship).

Relationship Information

1. Are you currently married, living as a couple, or dating someone who has shoved, slapped, hit, or kicked you, or physically hurt or threatened you in some other way? (Check one).
   ____ No, not currently  ____ Yes, living as a couple
   ____ Yes, married  ____ Yes, dating

2. a. If yes, how long have you been in this relationship?
   _____ Years  Less than a year? _____ Months  ____ Not applicable
   b. If yes, have you ever left your violent partner? ____ Yes  ____ No
      How many times have you left your violent partner? _____

3. a. In the past, have you ever been married, living as a couple, or dating someone who has shoved, slapped, hit, or kicked you, or physically hurt or threatened you in some other way? **Please refer to your most recent past violent relationship to which your child was exposed.** (Check one).
   ____ No, not in the past  ____ Yes, was married, but now separated
   ____ Yes, was married but now divorced  ____ Yes, dating
   b. If yes, how long were you in this relationship?
   _____ Years  Less than a year? _____ Months  ____ Not applicable
   c. If yes, did you ever leave your violent partner? ____ Yes  ____ No
      How many times did you leave your violent partner? _____
   d. Have you been in other violent relationships in the past?  ____ Yes  ____ No
      If yes, how many? _____

If the violent relationship you have discussed occurred in the past, and you answered “yes” to Question 3a, please continue. If you are currently in the violent relationship and answered “no” to Question 3a, please skip Questions 4 and 5 and continue with Question 6. If you have been involved in more than one violent relationship in the past, please refer to the most recent one when answering these questions.

4. How long were you in that violent relationship?
   _____ Years  Less than a year? _____ Months

5. How long ago did that relationship end? (Check one)
   ____ Less than 1 month ago  ____ 1 to 2 years ago
   ____ 1 month to 6 months ago  ____ 2 to 3 years ago
   ____ 6 months to 1 year ago
If over 3 years ago, how many years ago did the relationship end? _____Years

6. How long ago did the last violent incident occur? (Please fill in one blank with a number).
   _____Days ago   _____Months ago   _____Years ago

7. Where were you/are you living at the time of the violence (Check one).
   _____In a town/city   _____Out in the country   _____Both

8. a. Do you still have contact with your violent partner?   _____Yes   _____No
   If you answered "no" to this question, please skip 8b-f and go on to #9.
   b. If yes, how often do you still have contact? (Check one).
      _____Daily   _____Once every couple of months
      _____4 to 5 days per week   _____Once every 6 months
      _____2 to 3 days per week   _____Once a year
      _____Once a week   _____Once every 2 years
      _____Once a month   _____Less often: Please specify _____________
   c. If yes, how would you rate your level of stress surrounding these meetings?
      1  2  3  4  5
      Not Somewhat Moderately Very Extremely
      Stressful Stressful Stressful Stressful Stressful
   d. If yes, how would you rate your level of fear surrounding these meetings?
      1  2  3  4  5
      Not Somewhat Moderately Very Extremely
      Fearful Fearful Fearful Fearful Fearful
   e. Is violence still involved?   _____Yes   _____No
   f. For what reasons do you still have contact with your violent partner? (Check all that apply).
      _____Child custody arrangements
      _____Financial reasons
      _____Legal reasons
      _____Choose to see him
      _____He insists on contact

Personal Information

9. What is your current age? ___________

10. Your education completed? (Check one)
    _____8th grade or less
    _____Some high school/GED
    _____High school graduate
    _____Some college/ vocational school
    _____College graduate
    _____Some graduate school
    _____Graduate degree
    Your violent partner’s education?
    _____8th grade or less
    _____Some high school/GED
    _____High school graduate
    _____Some college/ vocational school
    _____College graduate
    _____Some graduate school
    _____Graduate degree

11. Are you currently employed?
    (Check one)
    _____Yes, full-time
    _____Yes, part-time
    _____Homemaker
    _____No, unemployed
    Is/was your violent partner employed?
    (Check one)
    _____Yes, full-time
    _____Yes, part-time
    _____Homemaker
    _____No, unemployed
12. If the violence occurred in the past, were you employed at that time? (Check one).
   _____ Yes, full-time  _____ Yes, part-time  _____ Homemaker
   _____ No, unemployed  _____ Student only  _____ Student and employed

13. What is/was your occupation (at the time of the violence)? ______________________________

14. What is/was your violent partner’s occupation (at the time of the violence)? ______________________________

15. What is/was your own annual income before taxes during your violent relationship?
   (Check one)
   _____ None
   _____ $5,000 or less
   _____ $5,001 to $10,000
   _____ $10,001 to $15,000
   _____ $15,001 to $20,000
   _____ $20,001 to $25,000
   _____ $25,001 to $30,000
   _____ $30,001 to $35,000
   _____ $35,001 to $40,000
   _____ $40,001 to $45,000
   _____ $45,001 to $50,000
   _____ More than $50,000

   If you do not know your annual income, how much do/did you make per hour? ____________

   How many hours per week do/did you work? ______________________________

16. What is/was your annual family income before taxes during your violent relationship?
   (Check one)
   _____ None
   _____ $5,000 or less
   _____ $5,001 to $10,000
   _____ $10,001 to $15,000
   _____ $15,001 to $20,000
   _____ $20,001 to $25,000
   _____ $25,001 to $30,000
   _____ $30,001 to $35,000
   _____ $35,001 to $40,000
   _____ $40,001 to $45,000
   _____ $45,001 to $50,000
   _____ More than $50,000

17. Who is/was the primary breadwinner during your violent relationship? (Check one)
   _____ You  _____ Your violent partner  _____ Other

18. Your race? (Optional, please check all that apply)
   _____ White  _____ African-American
   _____ Hispanic  _____ Asian
   _____ American Indian  _____ Other

19. Your violent partner’s race? (Optional, please check all that apply)
   _____ White  _____ African-American
   _____ Hispanic  _____ Asian
   _____ American Indian  _____ Other

20. Have you accessed any of these resources for yourself in dealing with your violent relationship? Circle the number that best applies
   1 = Not at all
   2 = Very little
   3 = Somewhat
   4 = Often
   5 = Very much
21. How helpful were each of these resources? Circle N/A if you did not seek services from this resource. Circle the number that best applies.

1 = Not helpful  
2 = Somewhat helpful  
3 = Helpful  
4 = Very helpful  
5 = Extremely helpful

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<th>Resource</th>
<th>1</th>
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<th>3</th>
<th>4</th>
<th>5</th>
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<td>a. Friends?</td>
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<td>b. Family?</td>
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<td>c. Legal Services?</td>
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<td>d. Police?</td>
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<td>e. Counseling/Therapy?</td>
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<td>f. Shelter (BWS)?</td>
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<td>4</td>
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<td>g. Support groups?</td>
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<td>4</td>
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<td>h. Church?</td>
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<td>i. Financial?</td>
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<td>j. Medical?</td>
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<td>2</td>
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<td>4</td>
<td>5</td>
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<td>k. Vocational/Job-related help?</td>
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<td>2</td>
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<td>l. Crisis help?</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>5</td>
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<tr>
<td>m. Neighbor?</td>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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</table>

22. If you did not access some or all of these supports, please indicate reasons why you did not.

23. How many children do you have? ___________

If any, what are their ages? _______ _______ _______ _______ _______ _______ _______ _______ _______

Child Questions

Please answer the following questions for your child who is also participating in this study.
24. What is this child’s age?__________

25. What is this child’s gender? ____Male ____Female

26. Is/was your abuser the biological father of this child? ____Yes ____No

27. Does your child have ongoing contact with his/her father? ____Yes ____No

27b. If yes, how often do they have contact? (Check one)

- Daily ______ Once every couple of months
- 4 to 5 days per week ______ Once every 6 months
- 2 to 3 days per week ______ Once a year
- Once a week ______ Once every 2 years
- Once every 2 weeks ______ Less often: Please specify ______
- Once a month ______________________________

27c. If yes, are these visits supervised? ____Yes ____No

28. Please estimate the quality of your child’s relationship with his/her biological father.

- Very close
- Close
- Somewhat close
- Not close
- No relationship

29. If your abuser was not your child’s biological father, please describe his relationship to your child.

- Step-father
- Other (please specify)____________________
- Mother’s boyfriend/partner ______________________________

29b. Does your child have ongoing contact with this abuser? ____Yes ____No

29c. If yes, how often do they have contact? (Check one)

- Daily ______ Once every couple of months
- 4 to 5 days per week ______ Once every 6 months
- 2 to 3 days per week ______ Once a year
- Once a week ______ Once every 2 years
- Once every 2 weeks ______ Less often: Please specify ______
- Once a month ______________________________

29d. If yes, are these visits supervised? ____Yes ____No

30. Please estimate the quality of your child’s relationship with your abuser.

- Very close
- Close
- Somewhat close
- Not close
- No relationship

31. How old was your child when your partner began to abuse you? _________

32. If you have left your abusive partner, how old was your child when you left? _________

33. Approximately how long were you with your violent partner during your child’s lifetime?
34. Did your child witness the violent episodes between you and your partner? Yes No
   If yes, to what degree did your child witness the following forms of abuse?
   1 = Not at all
   2 = Very little
   3 = Somewhat
   4 = Often
   5 = Very much

   a. Yelling
   b. Shoving
   c. Slapping
   d. Pushing
   e. Hitting
   f. Kicking
   g. Threatening with a knife
   h. Threatening with a gun
   i. Threatening with other weapon
   j. Sexual Assault
   k. Other (specify)
   l. Other (specify)

35. What do you think are/were the effects of the exposure to the violence on your children?

36. Have there been any reports made to Child Protective Services regarding your child? Yes No
   If yes, please answer the following questions. If no, please go on to question #37.
   36a. How many reports have been filed? _________
   36b. How many of these reports were substantiated? _________
   36c. What did the report(s) charge? (Please check all that apply)
       Physical abuse
       Sexual abuse
       Emotional abuse
       Neglect
       Other (please specify)

36d. Who was stated to be responsible for the abuse?

36e. How long was your child exposed to this abuse? _______________________________

36f. Has your child received medical treatment for this abuse? Yes No

36g. Has your child received psychological treatment for this abuse? Yes No

37. Have you talked to your child about the domestic violence? Yes No
   If yes, what did you tell them about the violence? ___________________________________
38. Has your child received any services due to the exposure to the violence?

- None
- Support groups
- Shelter activities
- Therapy/counseling
- Foster care/group home placement
- School counseling
- Other: Please specify

__________________________________________________________________
Appendix D

Conflict Tactics Scale

No matter how well a couple gets along, there are times when they disagree on major decisions, get annoyed about something the other person does, or just have spats or fights because they are in a bad mood or tired or for some other reasons. They also use different ways of trying to settle their differences. Please read the list below of some things that you and your spouse/partner might have done when you had a dispute.

If you are in your violent relationship, Please circle the number of times you or your partner did the following during the past year. If you have left your violent relationship, please circle how often or your partner did the following during any one year of your relationship. Circle “Ever?” if it did not happen during that year but happened at any time prior to or after the year you are describing.

1. Discussed the issue calmly.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

2. Got information to back up (your/his/her) side of things.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

3. Brought in or tried to bring in someone to help settle things.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

4. Argued heatedly, but short of yelling.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

5. Insulted, yelled, or swore at each other.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

6. Sulked and/or refused to talk about it.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

7. Stomped out of the room or house (or yard).
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

8. Cried.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?

9. Did or said something to spite the other one.
   YOU: Never 1 2 3-5 6-10 11-20 20+ Ever?
   PARTNER: Never 1 2 3-5 6-10 11-20 20+ Ever?
<table>
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<tr>
<th></th>
<th>YOU:</th>
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<th>PARTNER:</th>
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<tr>
<td>10. Threatened to hit or throw something at the other one.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>11. Threw or smashed or hit or kicked something.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>12. Threw something at the other one.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
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<tr>
<td>13. Pushed, grabbed, or shoved the other one.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
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<td>14. Slapped the other one.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
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<tr>
<td>15. Kicked, bit, or hit with a fist.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>16. Hit or tried to hit with something.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>17. Beat up the other one.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>18. Threatened with a knife or gun.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>19. Used a knife or gun.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>20. Forced the other one to perform sexually against his or her will.</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>21. Other:</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
<tr>
<td>22. Other:</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
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</tr>
<tr>
<td>23. Other:</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
<td>11-20</td>
<td>20+ Ever?</td>
<td>Never</td>
<td>1</td>
<td>2</td>
<td>3-5</td>
<td>6-10</td>
</tr>
</tbody>
</table>
Appendix E

Security Scale

Now we are going to ask you some questions about you and your mom. We are interested in what kind of person you are like. First let me explain how these questions work. Each question talks about two kinds of kids, and we want to know which kids are more like you. Here is a sample question.

Really | Sort of | Really | Sort of
--- | --- | --- | ---
True for me | True for me | True for me | True for me

Some kids would rather play outdoors. BUT Other kids would rather watch T.V.

What I want you to decide first is whether you are more like the kids on the left side who would rather play outdoors, or more like the kids on the right side who would rather watch T.V. Do not mark anything yet, but decide which kid is more like you and go to that side of the sentence. Now, decide whether that is sort of true for you, or really true for you, and you check that box.

For each sentence you will only check one box, the one that goes with what is true for you, what you are most like.

Now we are going to ask you some questions about you and your mom.

1. Really | Sort of | Really | Sort of
--- | --- | --- | ---
True for me | True for me | True for me | True for me

Some kids find it easy to trust their mom. BUT Other kids are not sure if they can trust their mom.

2. Really | Sort of | Really | Sort of
--- | --- | --- | ---
True for me | True for me | True for me | True for me

Some kids feel like their mom butts in a lot when they are trying to do things. BUT Other kids feel like their mom lets them do things on their own.

3. Really | Sort of | Really | Sort of
--- | --- | --- | ---
True for me | True for me | True for me | True for me

Some kids find it easy to count on their mom for help. BUT Other kids think it is hard to count on their mom.
<table>
<thead>
<tr>
<th>#</th>
<th>Statement 1</th>
<th>Statement 2</th>
<th>Statement 3</th>
<th>Statement 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
<tr>
<td></td>
<td>Some kids think their mom spends enough time with them.</td>
<td>BUT</td>
<td>Other kids think their mom does not spend enough time with them.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
<tr>
<td></td>
<td>Some kids do not really like telling mom what they are thinking or feeling.</td>
<td>BUT</td>
<td>Other kids do like telling their mom what they are thinking or feeling.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
<tr>
<td></td>
<td>Some kids do not really need their mom for a lot of things.</td>
<td>BUT</td>
<td>Other kids need their mom for a lot of things.</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
<tr>
<td></td>
<td>Some kids wish they were closer to their mom.</td>
<td>BUT</td>
<td>Other kids are happy with how close they are to their mom.</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
<tr>
<td></td>
<td>Some kids worry that their mom does not really love them.</td>
<td>BUT</td>
<td>Other kids are really sure that their mom loves them.</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
<tr>
<td></td>
<td>Some kids feel like their mom really understands them.</td>
<td>BUT</td>
<td>Other kids feel like their mom does not really understand them.</td>
<td></td>
</tr>
</tbody>
</table>
10. Really True for me
    Sort of True for me

    Some kids are really sure that their mom would not leave them. BUT Other kids sometimes wonder if their mom might leave them.

11. Really True for me
    Sort of True for me

    Some kids worry that their mom might not be there when they need her. BUT Other kids are sure their mom will be there when they need her.

12. Really True for me
    Sort of True for me

    Some kids think their mom does not listen to them. BUT Other kids do think their mom listens to them.

13. Really True for me
    Sort of True for me

    Some kids go to their mom when they are upset. BUT Other kids do not go to their mom when they are upset.

14. Really True for me
    Sort of True for me

    Some kids wish their mom would help them more with their problems. BUT Other kids think their mom helps them enough.

15. Really True for me
    Sort of True for me

    Some kids feel better when their mom is around. BUT Other kids do not feel better when their mom is around.
Appendix F

The Coping Strategies Questionnaire

What Am I Like With My Mother?

These questions are about how you are with your mother. However, some kids do not live with their real mother. If you are one of these kids, please answer the questions about someone you think of as a mother.

PRACTICE STORY

One day at school you get your test back from your teacher and you see that you scored a low grade on the test. When you get home, your mother can tell that you feel badly and she asks if you want to talk about it. Some kids would want to talk about it, but other kids would want to be left alone. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
</table>

Some kids would want to talk to her about it. BUT Other kids would want to be left alone.

1. Your family moves to a new neighborhood. Some kids would want to explore their new neighborhood a little on their own, but other kids would stay home unless their mother could go with them. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
</table>

Some kids would want to explore a little on their own. BUT Other kids would stay home unless their mother could go with them.

2. Your mother takes you to the doctor's office for a check-up. While you are sitting in the waiting room, she says she is going to run an errand and will be back to pick you up later. Some kids would not care if their mother left them waiting alone, but other kids would prefer that their mother wait with them. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
</table>

Some kids would not care if their mother left them alone to wait. BUT Other kids would prefer that their mother wait for them.
3. You and your mother go to a carnival one evening. Some of the rides look a little scary but they look fun and exciting too. You want your mother to go on some of the rides with you, but your mother says she is tired and just wants to sit on a bench and watch. Some kids would go on the rides alone, but other kids would not go on the rides alone. Which is more like you?

<table>
<thead>
<tr>
<th>Really for me</th>
<th>Sort of for me</th>
<th>Really for me</th>
<th>Sort of for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>True</td>
<td>True</td>
<td>True</td>
</tr>
</tbody>
</table>

Some kids would go on the rides alone. BUT Other kids would not go on the rides alone.

4. You get sick and have to spend a few days in the hospital. Some kids would want their mother to spend the whole time with them in their hospital room, but other kids would not mind if their mother just visited them once or twice a day during visiting hours. Which is more like you?

<table>
<thead>
<tr>
<th>Really for me</th>
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<th>Really for me</th>
<th>Sort of for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>True</td>
<td>True</td>
<td>True</td>
</tr>
</tbody>
</table>

Some kids would want their mother to spend the whole time with them. BUT Other kids would not mind if she just visited them during visiting hours.

5. You have been at summer camp for two weeks and many kids in your section have received letters or phone calls from their mothers. You have not received any letters or phone calls from your mother. Some kids would not care that they have not heard from their mother, but other kids would be disappointed that they have not heard from their mother. Which is more like you?

<table>
<thead>
<tr>
<th>Really for me</th>
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<th>Really for me</th>
<th>Sort of for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>True</td>
<td>True</td>
<td>True</td>
</tr>
</tbody>
</table>

Some kids would not care that they have not heard from their mother. BUT Other kids would be disappointed that they haven’t heard from their mother.

6. You are at the movies with your mother and you have to go out to the bathroom. When you come back in the movie it is so dark that you cannot find your mother. Some kids would calmly look for their mother, but other kids would look for their mother and be very upset until they found her. Which is more like you?

<table>
<thead>
<tr>
<th>Really for me</th>
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<th>Sort of for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>True</td>
<td>True</td>
<td>True</td>
</tr>
</tbody>
</table>

Some kids would calmly look for her and not be too worried. BUT Other kids would look for her and be upset until they found her.
7. You and your mother are visiting a new shopping center to see what it is like. Your mother suggests that the two of you explored the center together. Some kids would only want to explore it on their own, but other kids would not mind exploring it with their mother. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
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<tbody>
<tr>
<td>Some kids would only want to explore it on their own.</td>
<td>BUT Other kids would not mind exploring with their mother.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. You and your mother go to the movies. When you get into the theater, you see that it is crowded and you cannot find two seats together. Some kids would be sorry that they cannot sit with their mother, but other kids would prefer to sit away from their mother anyway. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
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9. You and your mother drive to Missoula to explore a new mall. When you get there your mother suggests that you explore on your own for an hour and then meet up with her at a particular store. Some kids would not explore a new mall without their mother, but other kids would explore a new mall alone. Which is more like you?

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Some kids would not explore the new mall without their mother.</td>
<td>BUT Other kids would explore the new mall without her.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10. One day you have a problem with a friend at school. When you get home, your mother can tell that you are upset and starts talking to you about it. Some kids would feel comfortable talking to their mother about their feelings and problems, but other kids would just want their mother to leave them alone. Which is more like you?

<table>
<thead>
<tr>
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<th>Sort of True for me</th>
</tr>
</thead>
<tbody>
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<td></td>
<td></td>
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11. You have to go to the doctor for a check-up and you are in the waiting room with your mother. You mother wants to leave you at the doctor’s office while she does some shopping. Some kids would be upset and try to make their mother stay, but other kids would not be so upset and would not try to make their mother stay. Which is more like you?

<table>
<thead>
<tr>
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<th>Sort of True for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some kids would be upset and try to make their mother stay.</td>
<td>BUT</td>
<td>Other kids would not be so upset and not try to make their mother stay.</td>
<td></td>
</tr>
</tbody>
</table>

12. One day at school the teacher tells the class about a new class project, a class play, and asks everyone to decide overnight if they want to play a part in it. The teacher suggests that kids discuss being in the play with their mother before deciding whether to be in it. Some kids would not want to discuss being in the play with their mother before deciding. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
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<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some kids would not want to discuss it with their mother before deciding.</td>
<td>BUT</td>
<td>Other kids would want to discuss it with her before deciding.</td>
<td></td>
</tr>
</tbody>
</table>

13. You want to learn how to do something on a computer, and you are having trouble learning how to do it. Your mother knows a lot about computers and offers to help you. Some kids would not want any help from their mother, but other kids would let their mother give them some help. Which is more like you?

<table>
<thead>
<tr>
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14. You are at the movies with your mother and you have to go out to the bathroom. When you come back in the movie it is so dark that you can’t find your mother. Some kids would calmly look for their mother and not be too worried, but other kids would look for their mother and be very upset until they found her. Which is more like you?

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<td>Some kids would calmly look for her and not be too worried.</td>
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<td>Other kids would look for her and be upset until they found her.</td>
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</table>
15. You and your mother are visiting a new shopping center to see what it is like. Your mother suggests that the two of you explore the center together. Some kids would only want to explore it on their own, but other kids wouldn't mind exploring it with their mother. Which is more like you?

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<tr>
<td>Some kids would only want to explore it on their own.</td>
<td>Other kids wouldn't mind exploring with their mother.</td>
</tr>
</tbody>
</table>

16. You and your mother go to the movies together. When you go into the theater, you see that it is crowded and you can't find two seats together. Some kids would be sorry that they couldn't sit with their mother, but other kids would prefer to sit away from their mother anyway. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
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<tr>
<td>Some kids would be sorry they can't sit with their mother.</td>
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</tr>
</tbody>
</table>

17. Your class is going to Washington, D.C. on a field trip for several days. Your mother has agreed to go along as a room mother. But the day before your class is supposed to go, your mother decides that she is too busy to go along on the trip. Some kids would still want to go with their class on their trip even if their mother didn't go, but other kids would not want to go on the trip if their mother didn't go. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some kids would still want to go if their mother didn't go.</td>
<td>Other kids wouldn't want to go if their mother didn't go.</td>
</tr>
</tbody>
</table>

18. On the way home from school a bully stops you and threatens you. This makes you upset and afraid. When you get home you talk to your mother about it. Some kids would stay close to their mother and talk about it for a long time, but other kids would talk to their mother for a short time and then get over it. Which is more like you?

<table>
<thead>
<tr>
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<td>Some kids would stay close to their mother and talk about it for a long time.</td>
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</tr>
</tbody>
</table>
19. One day you and your mother go to the zoo. Your mother says that because she has not seen you much lately, she would like the two of you to look at the animals together. Some kids would be willing to look at the animals with their mother, but other kids would rather look at the animals alone and meet up with their mother later. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
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</tr>
</tbody>
</table>

20. Your mother has to stay in the hospital for some tests. Some kids would want to visit their mother in the hospital, but other kids wouldn’t care if they didn’t see their mother for a few days. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
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21. You and your mother drive to Missoula to explore a new mall. When you get there your mother suggests that you explore on your own for an hour and then meet up with her at a particular store. Some kids wouldn’t explore a new mall without their mother, but other kids would explore a new mall alone. Which is more like you?

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</tbody>
</table>

Some kids would be upset and try to make their mother stay. BUT Other kids wouldn’t be so upset and would not try to make their mother stay.

24. One day at school the teacher tells the class about a new class project, a class play, and asks everyone to decide overnight if they want to play a part in it. The teacher suggests that kids discuss being in the play with their mother before deciding whether to be in it. Some kids wouldn’t want to discuss being in the play with their mother before deciding, but other kids would want to discuss it with their mother before deciding. Which is more like you?

<table>
<thead>
<tr>
<th>Really</th>
<th>Sort of</th>
<th>Really</th>
<th>Sort of</th>
</tr>
</thead>
<tbody>
<tr>
<td>True</td>
<td>True</td>
<td>True</td>
<td>True</td>
</tr>
<tr>
<td>for me</td>
<td>for me</td>
<td>for me</td>
<td>for me</td>
</tr>
</tbody>
</table>

Some kids would not want to discuss it with their mother before deciding. BUT Other kids would want to discuss it with their mother before deciding.
25. Your mother comes home after being away for a week or two. Some kids would stop what they are doing and run to greet her with a hug or a kiss, but other kids would not stop what they are doing to greet her. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
</tbody>
</table>

Some kids would stop to greet her with a hug or a kiss. **BUT** Other kids wouldn't stop to greet her.

26. There is a after-school sports team that you really want to join, but you realize that you don’t know anyone on the team. You ask your mother to go to the try-outs with you. She says she can drive you there but can’t stay there with you. Some kids would go only if their mother could stay during try-outs, but other kids would go even if their mother couldn’t stay. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
</tbody>
</table>

Some kids would go only if their mother could stay. **BUT** Other kids would go even if she couldn’t stay.

27. One day you came home from school upset about something. Your mother asks you what the problem is. Some kids wouldn’t want to talk with her about it, but other kids would want to discuss it with her. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
<tbody>
<tr>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
</tbody>
</table>

Some kids wouldn’t want to talk to her about it. **BUT** Other kids would want to talk to her about it.

28. You and your mother are at a busy shopping mall in Missoula, and suddenly you can’t find your mother. You are upset, but a little later you find each other. Some kids would stay worried for a long time that they might get separated again. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
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</thead>
<tbody>
<tr>
<td>Really True for me</td>
<td>Sort of True for me</td>
</tr>
</tbody>
</table>

Some kids would soon get over being upset. **BUT** Other kids would stay worried that they might get separated again.
29. You want to learn how to do something on a computer, and you are having trouble learning how to do it. Your mother knows a lot about computers and offers to help you. Some kids would not want any help from their mother, but other kids would let their mother give them some help. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
</table>

Some kids would not want any help from their mother. BUT Other kids would let their mother give them some help.

30. One day at school the teacher misunderstands something you did and scolds you for it. You become upset. Some kids would stay very upset until they talk to their mother about it, but other kids wouldn’t be so anxious to talk to their mother about it. Which is more like you?

<table>
<thead>
<tr>
<th>Really True for me</th>
<th>Sort of True for me</th>
</tr>
</thead>
</table>

Some kids would stay upset until they talked to their mother about it. BUT Other kids wouldn’t be so anxious to talk to her about it.
Appendix G

Child Behavior Checklist

Below is a list of items that describe children and youth. For each item that describes your child now or within the past 6 months, please circle the 2 if the item is very true or often true of your child. Circle the 1 if the item is somewhat or sometimes true of your child. If the item is not true of your child, circle the 0. Please answer all items as well as you can, even if some do not seem to apply to your child.

1. Acts too young for his/her age
2. Allergy (describe)
3. Argues a lot
4. Asthma
5. Behaves like opposite sex
6. Bowel movements outside toilet
7. Bragging, boasting
8. Can't concentrate, can't pay attention for long
9. Can't get his/her mind off certain thoughts; obsessions (describe)
10. Can't sit still, restless, or hyperactive
11. Clings to adults, too dependent
12. Complains of loneliness
13. Confused or seems to be in a fog
14. Cries a lot
15. Cruel to animals
16. Cruelty, bullying, or meanness to others
17. Day-dreams or gets lost in his/her thoughts
18. Deliberately harms self or attempts suicide
19. Demands a lot of attention
20. Destroys his/her own things
21. Destroys things belonging to his/her family or others
22. Disobedient at home
<table>
<thead>
<tr>
<th>No.</th>
<th>Behavior Description</th>
<th>0</th>
<th>1</th>
<th>2</th>
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</thead>
<tbody>
<tr>
<td>23.</td>
<td>Disobedient at school</td>
<td></td>
<td></td>
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<tr>
<td>24.</td>
<td>Doesn’t eat well</td>
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<td>25.</td>
<td>Doesn’t get along with other kids</td>
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<td>26.</td>
<td>Doesn’t seem to feel guilty after misbehaving</td>
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<td>27.</td>
<td>Easily jealous</td>
<td></td>
<td></td>
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<tr>
<td>28.</td>
<td>Eats or drinks things that are not food—don’t include sweets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(describe)</td>
<td></td>
<td></td>
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<tr>
<td>29.</td>
<td>Fears certain animals, situations, or places other than school</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>(describe)</td>
<td></td>
<td></td>
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<tr>
<td>30.</td>
<td>Fears going to school</td>
<td></td>
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<td>31.</td>
<td>Fears he/she might think or do something bad</td>
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<td>32.</td>
<td>Feels he/she has to be perfect</td>
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<tr>
<td>33.</td>
<td>Feels or complains that no one loves him/her</td>
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<td>34.</td>
<td>Feels others are out to get him/her</td>
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<td>35.</td>
<td>Feels worthless or inferior</td>
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<tr>
<td>36.</td>
<td>Gets hurt a lot, accident-prone</td>
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<tr>
<td>37.</td>
<td>Gets in many fights</td>
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<tr>
<td>38.</td>
<td>Gets teased a lot</td>
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<tr>
<td>39.</td>
<td>Hangs around with others who get in trouble</td>
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<tr>
<td>40.</td>
<td>Hears sounds or voices that aren’t there</td>
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<td></td>
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<tr>
<td></td>
<td>(describe)</td>
<td></td>
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<tr>
<td>41.</td>
<td>Impulsive or acts without trying</td>
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<td>42.</td>
<td>Would rather be alone than with others</td>
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<tr>
<td>43.</td>
<td>Lying or cheating</td>
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<td>44.</td>
<td>Bites fingernails</td>
<td></td>
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<tr>
<td>45.</td>
<td>Nervous, highstrung, or tense</td>
<td></td>
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<tr>
<td>46.</td>
<td>Nervous movements or twitching (describe)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(describe)</td>
<td></td>
<td></td>
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<tr>
<td>47.</td>
<td>Nightmares</td>
<td></td>
<td></td>
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</tbody>
</table>
48. Not liked by other kids 0 1 2
49. Constipated, doesn’t move bowels 0 1 2
50. Too fearful or anxious 0 1 2
51. Feels dizzy 0 1 2
52. Feels too guilty 0 1 2
53. Overeating 0 1 2
54. Overtired 0 1 2
55. Overweight 0 1 2
56. Physical problems without known medical cause:
   a. Aches or pains (not stomach or headaches) 0 1 2
   b. Headaches 0 1 2
   c. Nausea, feels sick 0 1 2
   d. Problems with eyes (not if corrected by glasses) 0 1 2
   e. Rashes or other skin problems 0 1 2
   f. Stomachaches or cramps 0 1 2
   g. Vomiting, throwing up 0 1 2
   h. Other ________________________________ 0 1 2
57. Physically attacks people 0 1 2
58. Picks nose, skin, or other parts of body (describe)____________________ 0 1 2
59. Plays with own sex parts in public 0 1 2
60. Plays with own sex parts too much 0 1 2
61. Poor school work 0 1 2
62. Poorly coordinated or clumsy 0 1 2
63. Prefers being with older kids 0 1 2
64. Prefers being with younger kids 0 1 2
65. Refused to talk 0 1 2
66. Repeats certain acts over and over; compulsions (describe)__________________________ 0 1 2
67. Runs away from home 0 1 2
68. Screams a lot 0 1 2
69. Secretive, keeps things to self 0 1 2
70. Sees things that aren’t there (describe)_________________________ 0 1 2

71. Self-conscious or easily embarrassed 0 1 2

72. Sets fires 0 1 2

73. Sexual problems (describe)_________________________ 0 1 2

74. Showing off or clowning 0 1 2

75. Shy or timid 0 1 2

76. Sleeps less than most kids 0 1 2

77. Sleeps more than most kids during day and/or night (describe)_________________________ 0 1 2

78. Smears or plays with bowel movements 0 1 2

79. Speech problem (describe)_________________________ 0 1 2

80. Stares blankly 0 1 2

81. Steals at home 0 1 2

82. Steals outside the home 0 1 2

83. Stores up things he/she doesn’t need (describe)_________________________ 0 1 2

84. Strange behavior (describe)_________________________ 0 1 2

85. Strange ideas (describe)_________________________ 0 1 2

86. Stubborn, sullen, or irritable 0 1 2

87. Sudden changes in mood or feelings 0 1 2

88. Sulks a lot 0 1 2

89. Suspicious 0 1 2

90. Swearing or obscene language 0 1 2

91. Talks about killing self 0 1 2

92. Talks or walks in sleep (describe)_________________________ 0 1 2

93. Talks too much 0 1 2

94. Teases a lot 0 1 2
95. Tempter tantrums or hot temper
96. Thinks about sex too much
97. Threatens people
98. Thumb-sucking
99. Too concerned with neatness or cleanliness
100. Trouble sleeping (describe)
101. Truancy, skips school
102. Underactive, slow moving, or lacks energy
103. Unhappy, sad, or depressed
104. Unusually loud
105. Uses alcohol or drugs for nonmedical purposes (describe)
106. Vandalism
107. Wets self during day
108. Wets the bed
109. Whining
110. Wishes to be of opposite sex
111. Withdrawn, doesn't get involved with others
112. Worries
113. Please write in any problems your child has that were not listed above
Appendix H

Revised Children’s Manifest Anxiety Scale

WHAT I THINK AND FEEL

Here are some sentences that tell how some people think and feel about themselves. Read each sentence carefully. Circle the word “YES” if you think it is true about you. Circle the word “NO” if you think it is not true about you. Answer every question even if some are hard to decide. Do not circle both “YES” and “NO” for the same sentence. There are no right or wrong answers. Only you can tell us how you think and feel about yourself. Remember, after you read each sentence, ask yourself, “Is it true about me?” If it is, circle, “YES.” If it is not, circle “NO.”

1. I have trouble making up my mind. 
   YES \ntag{NO}

2. I get nervous when things do not go the right way for me. 
   YES \ntag{NO}

3. Others seem to do things easier than I can. 
   YES \ntag{NO}

4. I like everyone I know. 
   YES \ntag{NO}

5. Often I have trouble getting my breath. 
   YES \ntag{NO}

6. I worry a lot of the time. 
   YES \ntag{NO}

7. I am afraid of a lot of things. 
   YES \ntag{NO}

8. I am always kind. 
   YES \ntag{NO}

9. I get mad easily. 
   YES \ntag{NO}

10. I worry about what my parents will say to me. 
    YES \ntag{NO}

11. I feel that others do not like the way I do things. 
    YES \ntag{NO}

12. I always have good manners. 
    YES \ntag{NO}

13. It is hard for me to get to sleep at night. 
    YES \ntag{NO}

14. I worry about what other people think about me. 
    YES \ntag{NO}

15. I feel alone even when there are people with me. 
    YES \ntag{NO}

16. I am always good. 
    YES \ntag{NO}

17. Often I feel sick in my stomach. 
    YES \ntag{NO}

18. My feelings get hurt easily. 
    YES \ntag{NO}

19. My hands feel sweaty. 
    YES \ntag{NO}

20. I am always nice to everyone. 
    YES \ntag{NO}

21. I am tired a lot. 
    YES \ntag{NO}
22. I worry about what is going to happen. YES NO
23. Other people are happier than I. YES NO
24. I tell the truth every single time. YES NO
25. I have bad dreams. YES NO
26. My feelings get hurt easily when I am fussed at. YES NO
27. I feel someone will tell me I do things the wrong way. YES NO
28. I never get angry. YES NO
29. I wake up scared some of the time. YES NO
30. I worry when I go to bed at night. YES NO
31. It is hard for me to keep my mind on my schoolwork. YES NO
32. I never say things I shouldn’t. YES NO
33. I wiggle in my seat a lot. YES NO
34. I am nervous. YES NO
35. A lot of people are against me. YES NO
36. I never lie. YES NO
37. I often worry about something bad happening to me. YES NO
Appendix I

Child Depression Inventory

Kids sometimes have different feelings and ideas. This form lists the feelings and ideas in groups. From each group of three sentences, pick one sentence that describes you best for the past two weeks. After you pick a sentence from the first group, go on to the next group. There is no right or wrong answer. Just pick the sentence that best describes the way you have been recently.

Item 1.
____ I am sad once in a while.
____ I am sad many times.
____ I am sad all the time.

Item 2.
____ Nothing will ever work out for me.
____ I am not sure if things will work out for me.
____ Things will work out for me o.k.

Item 3.
____ I do most things o.k.
____ I do many things wrong.
____ I do everything wrong.

Item 4.
____ I have fun in many things.
____ I have fun in some things.
____ Nothing is fun at all.

Item 5.
____ I am bad all the time.
____ I am bad many times.
____ I am bad once in a while.

Item 6.
____ I think about bad things happening to me once in a while.
____ I worry that bad things will happen to me.
____ I am sure that terrible things will happen to me.

Item 7.
____ I hate myself.
____ I do not like myself.
____ I like myself.

Item 8.
____ All bad things are my fault.
____ Many bad things are my fault.
____ Bad things are not usually my fault.

Item 9.
____ I do not think about killing myself.
____ I think about killing myself but I would not do it.
____ I want to kill myself.
Item 10.
   ______ I feel like crying every day.
   ______ I feel like crying many days.
   ______ I feel like crying once in a while.

Item 11.
   ______ Things bother me all the time.
   ______ Things bother me many times.
   ______ Things bother me once in a while.

Item 12.
   ______ I like being with people.
   ______ I do not like being with people many times.
   ______ I do not want to be with people at all.

Item 13.
   ______ I cannot make up my mind about things.
   ______ It is hard to make up my mind about things.
   ______ I make up my mind about things easily.

Item 14.
   ______ I look o.k.
   ______ There are some bad things about my looks.
   ______ I look ugly.

Item 15.
   ______ I have to push myself all the time to do my schoolwork.
   ______ I have to push myself many times to do my schoolwork.
   ______ Doing schoolwork is not a big problem.

Item 16.
   ______ I have trouble sleeping every night.
   ______ I have trouble sleeping many nights.
   ______ I sleep pretty well.

Item 17.
   ______ I am tired once in a while.
   ______ I am tired many days.
   ______ I am tired all the time.

Item 18.
   ______ Most days I do not feel like eating.
   ______ Many days I do not feel like eating.
   ______ I eat pretty well.

Item 19.
   ______ I do not worry about aches and pains.
   ______ I worry about aches and pains many times.
   ______ I worry about aches and pains all the time.

Item 20.
   ______ I do not feel alone.
   ______ I feel alone many times.
   ______ I feel alone all the time.
Item 21.
____ I never have fun at school.
____ I have fun at school only once in a while.
____ I have fun at school many times.

Item 22.
____ I have plenty of friends.
____ I have some friends but I wish I had more.
____ I do not have any friends.

Item 23.
____ My schoolwork is alright.
____ My schoolwork is not as good as before.
____ I do very badly in subjects I used to be good in.

Item 24.
____ I can never be as good as other kids.
____ I can be as good as other kids if I want to.
____ I am just as good as other kids.

Item 25.
____ Nobody really loves me.
____ I am not sure if anybody loves me.
____ I am sure that somebody loves me.

Item 26.
____ I usually do what I am told.
____ I do not do what I am told most times.
____ I never do what I am told.

Item 27.
____ I get along with people.
____ I get into fights many times.
____ I get into fights all the time.