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Abstract approved:

Violence against women as a social issue has received much attention since mid-1970s. As battered women have sought help, researchers have been able to identify characteristics common to most victims in an abusive relationship. The present study investigated the level of self-esteem and the level of reported death anxiety in abused and nonabused women.

Moreover, previous research regarding battered women has been conducted primarily with subjects drawn from shelters for battered women. In view of this potential limitation, the present research also was designed to expand the generality of research findings to include

a sample of battered women drawn from a nonshelter population. Thus, level of death anxiety was evaluated in three distinct samples: battered women in shelters, battered women not in shelters, and nonbattered women.

The results indicated that higher levels of death anxiety were associated with abused women in the general population. Death anxiety scores of abused women in shelters and nonabused women in the general population did not differ. The level of self-esteem was found to be higher for nonabused women than for abused women which is consistent with previous research.

Relationship of Self-Esteem and Death Anxiety in Battered Women

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CHAPTER 1

INTRODUCTION

At a very early age most children are taught the world they live in can be a very dangerous place. Children are admonished to look both ways before they cross the street, not to accept candy from strangers, and to never get in a car with a stranger. Girls are taught to avoid bars, dark alleys, and walking alone at night because rapists lurk out there. The prevalence of crime in our society underscores the importance of these warnings. Society also teaches that "people are not for hitting" and "one is responsible for one's own actions." Inherent in these teachings is the assumption that if one follows the rules and is careful one will be safe.

Unfortunately, these teachings fail to reach their mark in the very institution meant to be our haven—the home. For many women in an intimate relationship the home is not a safe place. Paradoxically, many of these women choose not to leave this situation; they remain only to receive physical abuse.

Violence against women as a social or a psychological issue did not receive much attention in the professional literature until the mid 1970s. Even then the attention

afforded this issue was largely a byproduct of the grass root efforts of the feminist movement (Straus, 1980; Walker, 1989). The statistics on violence against women in an intimate relationship assessed since the 1970's are staggering. A conservative estimate suggests that each year in the United States six million women are beaten by their intimate partner (Straus, 1990). Stuart and Campbell (1989) feel that a tremendous amount of violence takes place within an intimate relationship, the very relationship integral to human existence.

During the last decade, two major social science perspectives have emerged regarding battered women. The first view is the feminist perspective, which is the postion held by battered women advocates. The battered women's movement, led by feminist activists, was the first group to directly identify the issue of intimate violence and make it visible. Their primary focus is the relationship between partners and the unequal balance of power in an intimate relationship. The feminist researchers contend that marital violence is one method of control that males try to exercise over female partners; anger and psychological abuse are also common and extremely effective means of control (Kurz, 1989). In support of this contention, it can be seen that our society has

permitted and condoned the use of physical force as a means of controlling wives:

The first law in the United States to recognize a husband's right to control his wife with physical force was an 1824 ruling by the Supreme Court of Mississippi permitting the husband to exercise the right of moderate chastisement in case of great emergency (Brown, 1987, p. 166).

This injunction with its subjectiveness gave license to physical abuse in an intimate relationship and it was not until 1871 in Alabama that wife beating was made illegal. The court of Alabama stated at that time:

The privilege, ancient though it be, to beat her with a stick, to pull her hair, choke her, spit in her face or kick her about the floor, or inflict upon her like indignities, is not now acknowledged by our law. (T)he wife is entitled to the same protection of the law that the husband can invoke for himself (Brown, 1987, p. 167).

While our American judicial system does not permit a husband to strike his wife, much of our society still feels that abuse is a family matter and change has been excruciatingly slow.

The battered women's movement also has been instrumental in promoting numerous reforms in the legal,

governmental, and social service responses to battered women (Pagelow, 1981). By providing statistical data, feminist researchers have played a critical role in making marital violence a social issue (McHugh, Koeske & Frieze, 1986).

The second perspective regarding battered women to emerge during the last decade is family systems analysis. This perspective, which views the family as a system, believes that it is the family, not the relationship between spouses, that is the cause of wife abuse (Gelles, 1985; Giles-Sims, 1983). The family systems perspective cites three major causes of violence in families. first cause is the privacy that society has traditionally allowed families, coupled with outside stressors such as low income, and/or having several children. Second, society accepts violence as a coping skill to resolve conflict in families. Third, families socialize children into violence by the practice of physical punishment (Gelles & Straus, 1988). Straus (1980) concluded that the more autocratic a household is, the most likely abuse will be shown. In contrast, lower amounts of battering are associated with more democratic households.

Family systems researchers over the last decade have written extensively on what they classify as spouse abuse. They contend that 12.8% of husbands commit violent

acts toward their wives, while 11.7% of wives commit violent acts toward their husbands (Straus, Gelles & Steinmetz, 1980). These data do not reflect the differential power of the batterer. Men are more powerful and aggressive than women (Straus, 1980), while women usually agress in self-defense (Saunders, 1986).

Of the two theoretical positions, the feminist perspective is the most critical of the traditional masculine-feminine roles that accompany instances of intimate violence. According to this viewpoint, male-female relationships are structured by the unequal distribution of power, with males having the upper hand (Benzel & York, 1988; Walker, 1989). A woman's plight is aggravated by the socialization of sexually stereotypical roles that make assertive action problematic (Walker, 1979). Walker (1978) believes that women are socialized to adapt and submit. Such reactions form a central core of the woman's inability to leave an abusive relationship. In contrast, men are socialized to outwardly express their anger and aggression. However, submission on the part of battered women often results in a label of mental illness (Benzel & York, 1988).

Demographic and Psychological Characteristics of Abused Women

Demographics

Walker (1983) reported women in the 25-34 year old range had the highest incidence of abuse (52%), while women in the 35-44 year old range were the next most frequently abused group (19%). Eighty percent of the abused women were Caucasian, 8% Hispanic, 6% Black, and 4% Native American.

Walker (1983) also evaluated the relationship between educational level and abuse. She reported that 12% of the abused women had less than a high school education and only 25% had completed high school. Forty percent of the abused women had taken some college education courses, while 23% had completed college.

Walker (1983) reported on social class of family origin of the abused women; she found that 45% came from the middle class, while 35% came from the working class.

General Psychological Characteristics

Walker and Browne (1985) proport that "battered women's affective, cognitive, and behavioral responses often become distorted by their single focus on survival" (p. 186). They often display fearfulness, passivity, learned helplessness, anxiety and/or hypervigilance because

of the possibility of future attacks. Characteristic of battered women is lower self-esteem, social isolation, and traditionalism (Blackman, 1990). While these characteristics may suggest the presence of a personality disorder, they appear to be temporary personality factors that are manifested because of the unpredictability of the abuse (Browne, 1980; Rosewater, 1982). This contention is supported by Walker's (1983) study of violent and non-violent relationships. Half of the 200 subjects in this study reported having been in both non-violent and abusive relationships. Thus, these subjects were able to act as their own control group. These women reported that their thinking, feelings and actions were entirely different with a non-violent partner. it appears that the women's responses were in direct relationship to the mood of the partner and not the result of an underlying pathology (Rosewater, 1987; Walker, 1983).

As more battered women have sought help, researchers have identified characteristics common to most victims of an abusive relationship (Benzel & York, 1988). These characteristics include being fearful and depressed, having a low self-concept, and displaying difficulty in making decisions independent of the partner.

Consequently, battered women may be incapable of expressing

or defending themselves and tend to be self-conscious and overly sensitive to criticism.

Level of Self-Esteem

Comparisons of battered and non-battered women have shown differentials in level of self-esteem. In all instances lower, levels of self-esteem were reported by the samples of battered women (Burk, Stets, & Pirog-Good, 1988; Campbell, 1989; Walker, 1989). Additionally, Campbell (1989) reported that battered women also scored lower than non-battered controls on self-care agency, self-blame, depression and control in the relationship.

The theory of learned helplessness (Walker & Browne, 1985) has been used to account for the lower level of self-esteem displayed by battered women. Learned helplessness was first discovered in the animal research laboratory by Seligman (1975). The dogs in Seligman's experiments refused to learn new, adaptive responses following the application of inescapable electric shock. Likewise, women in an abusive relationship also fail to perceive or attempt to use confrontational or escape behaviors even though these potentially effective alternatives seem obvious to outside observers. As is the case in the laboratory or in the abusive relationship, one learns that effort does not produce results, therefore effort is not expended. Battered women who exhibit learned

helplessness tend to see their plight in life as being beyond their control; they react with passivity and helplessness. The result of such conditioning is a decrease in self-efficacy and self-esteem (Walker, 1979).

Once abuse has been initiated, the lowered selfesteem that it engenders may initiate a circular, and
decidedly negative, reaction. Burke, Stets, and Pirog-Good
(1988) believe that level of self-esteem may be a
determinant of acceptance of aggression; therefore, those
individuals with lower self-esteem may be more likely
to accept aggression. The intimacy shared and the
acceptance of aggression makes women in a battering
relationship even more vulnerable (Douglas & Strom, 1988).
Consequently, an abused woman may develop an inflated
view of the batterer's power and a decreased perception
of her own self worth and or efficacy. Is it any wonder
that a battered woman feels that "she can't win" no matter
what she does (Pfouts, 1978).

Death Anxiety

Death anxiety, a fundamental sense of powerlessness over one's environment, is a topic that has been of interest to professionals for nearly six decades (Sadowski, Davis, & Loftus-Vergari, 1979). The operational definition of fear of death is an "emotional reaction involving subjective feelings of unpleasantness and concern based

on contemplation or anticipation of any of several factors related to death" (Hoelter, 1979, p. 996).

Death anxiety is present in nearly all human beings to some degree. Much of expressed fear of death depends on early life experiences. Unfortunately, the early and continued life experiences for battered women often lead to defenses that are maladaptive and that interfere with their life. Death anxiety can and does take many forms and can be very motivating or can be paralyzing. A battered woman's fear of actual physical death can serve as a motivator to leave the relationship or a paralyzer, when the fear of being alone is so powerful that she minimizes the situation in order to keep the relationship intact. Yalom (1980) stated that the maladaptive cognitions of the battered woman tempers her fear that she is "alone in an indifferent world" (p. 26). Research in the area of death anxiety and battered women is meager, primarily consisting of literature reviews (Weingourt, 1985).

Much of the research in this area has focused on the relationship between selected personality characteristics and death anxiety. For example, death anxiety has been shown to be positively related to such states as depression (Gilliland & Templer, 1985; Templer, 1970), external locus of control (Sillman, 1981; Trent, Glass, & McGee, 1981), general anxiety (Gilliland & Templer,

1986; Nogas, Schweitzer & Grumet, 1974), manifest anxiety (McGregor, 1990), and self-esteem (Buzzanga, Miller, Perne, Sander & Davis, 1989; McGregor, et al., 1991). In the context of the present study, it is noteworthy that death anxiety consistently has been shown to be higher in women than men (Koob & Davis, 1977; Templer, Lester & Ruff, 1974), regardless of the level of self-esteem. Thus, a relationship between level of death anxiety and the battered woman seems likely.

Yalom (1980) cited two basic life styles that stem from an attempt to ward off death anxiety. One life style involves a belief in one's own indestructibility. This sense of indestructibility far surpasses just feeling and hoping, but merges into a conviction of immortality, power, and control; the higher the sense of immortality, the lower the level of death anxiety. The second life style is one that places unswerving trust in an all powerful force that nurtures and protects the individual. The greater this trust, the lower the level of death anxiety. Obviously, either of these two life-styles, when used to excess, can result in a potentially stifling and painful existence.

Weingourt (1985) supports Yalom's life-style theory and further suggests that battered women overuse the second life-style by devoting their existence to preserving

a relationship that provides the woman with the security she needs by acquiescing to the needs and wants of the Inherent in this second life-style is the fear of being abandoned and alone in the world. This fear makes change very difficult. Preservation of the relationship entails greater trust and devotion to the abuser and should result in less expressed death anxiety. Weingourt's view, however, leaves one with an interesting dilemma regarding the level of death anxiety battered women are predicted to display. On the one hand, it is predictable that the greater trust and devotion given to the abuser should result in less expressed death anxiety. However, one should not forget that battered women are in the midst of a very painful and degrading relationship. Many battered women are caught up in the present situation and in their feelings of hopelessness and helplessness. Others live life day by terrifying day just existing and functioning in a very concrete manner unaware that there are any options available to them. Hence, higher levels of death anxiety engendered by the relationship also are predictable.

Rationale For the Present Study

It is interesting to note that previous research regarding battered women has been limited to the use of subjects drawn from shelters/safe houses specifically

designed for this population. In view of this potential limitation, the present research was designed to expand the generality of the research findings to include a sample of battered women drawn from the nonsheltered, general population. Thus, three samples of subjects were tested: a sample of battered women drawn from shelters, a sample of battered women drawn from a non-sheltered population, and a group of non-battered women. Through the evaluation of self-esteem in each sample, the present study was to ascertain similarities and/or differences between the two samples of battered women, as well as provide a replication of the previously reported selfesteem differential that exists between battered and non-battered women. Finally, completion of a death anxiety scale provided an indication of the respective levels of this variable for the three groups under investigation.

CHAPTER 2

METHOD

Sample

Twenty-eight women from battered women's shelters in the midwest volunteered to participate in the present study. Additionally, 157 women enrolled in undergraduate psychology classes at a regional midwestern state university volunteered to serve as participants. Each woman completed am informed consent form at the beginning of the study.

Testing Instruments

A self-administering questionnaire booklet consisting of a demographic information form; Form R of The Conflict Tactics Scale (CTS)(Straus, 1979); Form A of The Texas Social Behavior Inventory (TSBI)(Helmreich & Stapp, 1974) and Templer's Death Anxiety Scale (DAS)(Templer,1970) was prepared. The test booklet consisted of a cover sheet, demographic sheet, CTS, TSBI, and the DAS. The questionnaire booklet was set up the same for all subjects (shelter and nonshelter).

The demographic information form was used to ascertain relevant characteristics of all subjects. This form

consisted of marital status, length of relationship, race, children, education, income, and age (see Appendix A).

Form R of the CTS consists of 19 questions that pertain to the use of reasoning tactics, verbal aggression, and physical aggression. The CTS items (see Appendix B) are arranged in perceived order of severity with each item being rated on a Likert scale ranging from 1 (once) to 6 (more than 20 times). Item G (cried) was not used in the analysis. Straus (1980) found that subjects were upset when this item was omitted, since it was felt that crying was a way of coping that was frequently used. However, Straus (1980) reccomends not including Item G in data analysis because it does not fit into the three groups of the CTS which are: reasoning tactics, verbal aggression, and physical aggression. Internal consistency and reliability of the CTS has been addressed by item-to-total score correlations of r = .70 to .87 and Alpha Coefficients of .62 to .88 for violence resolution strategies (Fitts, 1979).

Form A of the TSBI (Helmreich & Stapp, 1974) was used to measure self-esteem and social competence (See Appendix C). The TSBI consists of 16 Likert-like items.

Each item is rated from 0 (low self-esteem) to 4 (high self-esteem). Thus, the highest score possible is 64.

The DAS was used to ascertain expressed fear of death. The DAS consists of 15 true-false statements that pertain to the individuals reported fear of death and dying (see Appendix D). Scores range from 0 to 15, with 0 indicating the lowest expressed fear of death, and 15 indicating the highest expressed fear of death. The test-retest reliability of the DAS is .83 (Templer, 1970).

Procedure

Test administration for the samples from battered women's shelters took place during the initial interview at the time of admission to each respective shelter, or during scheduled group counseling sessions. Informed consent forms were presented (See Appendix E), and subjects were instructed that the information in this study pertained to personality characteristics and that all information would be strictly confidential. Participation in this study was voluntary. The consent forms were collected and the Test Administration Instructions (Appendix F) were read. Subjects who wished to participate then were presented the Questionnaire Booklet (see Appendix G). While a time limit was not imposed, all subjects completed

the test booklets within 20 minutes. Testing at the shelter was conducted over a two-month period.

Test administration for the sample of college women took place during regular class sessions. As with the shelter sample, subjects were instructed via a script, and informed consent forms were signed prior to distribution of the test booklets (see Appendix H). The informed consent forms were collected prior to administering the test booklet, and those subjects who did not wish to participate were excused from class. Although no time limit was imposed, all subjects completed the test booklets within 20 minutes.

CHAPTER 3

RESULTS

Prior to further analysis, the subjects were divided on the basis of CTS responses, into groups that had experienced no abuse, physical abuse, and/or verbal abuse. Items A through H on The Conflict Tactics Scale ranged from A (discussed the issue calmly) to H (did or said something to spite you) and represented the Verbal Abuse categories. Scoring from 0 to 48 on this scale yielded the nonabuse (no physical abuse) category. Items I through S on The Conflict Tactics Scale ranged from I (threatened to throw something at you) to S (used a knife or fired a gun) represented the physical abuse category. Scoring from 1 to 66 yielded the physical abuse category. and nonshelter samples were analyzed accordingly, and the procedure yielded the following groups: shelter abused group (SAB) consisting of 24 physically abused women from the battered women's shelters; college abused group (CAB), consisting of 44 physically abused women from the college sample; college nonabused group (CNAB), 113 nonabused women from the college sample. The 4 shelter subjects who reported only verbal abuse were excluded from further analysis.

Visual inspection of the demographic variables for

all subjects was completed. The inspection indicated that groups CAB and CNAB were composed primarily of single women while married women predominated in group SAB.

The average age range of the SAB and both CAB and CNAB was between 18 and 24 years of age.

Further visual inspection indicated that income and educational level were comparable for all subjects whether shelter or college. Length of the relationship was not analyzed in the present study. Subjects were primarily caucasian so race was not used in the analysis.

Subjects were assigned to the CAB, SAB, and CNAB groups on the basis of the Conflict Tactics Scale (CTS) responses. The mean Texas Social Behavior Inventory (TSBI) scores for the three samples were Group SAB= 36.25, Group CAB = 38.59, and Group CNAB = 41.65 (see Table 1). Analysis of these data yielded statistical significance for the groups effect; $\underline{F}(2, 177) = 4.316$, \underline{p} .014. Subsequent Newman-Keuls tests indicated that the self-esteem of Group CNAB was significantly (\underline{p} .01) higher than that of the two other groups, which did not differ reliably.

A Death Anxiety Scale (DAS) score was calculated for each subject. The mean DAS scores for the three

samples were Group SAB = 6.96, Group CAB = 9.41, and Group CNAB = 7.63 (See Table 2). Analysis of these data yielded significance for the groups effect, $\underline{F}(2, 178)$ = 5.16, \underline{p} .01. Subsequent Newman-Keuls tests indicated that the death anxiety of Group CAB was significantly (\underline{p} .01) higher than that of the two other groups, which did not differ reliably.

Mean TSBI Scores and Standard Deviations of SAB, CAB, & CNAB Groups.

<u>M</u>	SD	<u>N</u>
38.59	9.18	44
36.25	9.53	20
41.65	7.74	113
		38.59 9.18 36.25 9.53

Mean DAS Scores and Standard Deviations

Table 2

Death Anxiety	<u>M</u>	SD	<u>N</u>
CAB	9.41	2.92	44
SAB	6.96	3.25	20
CNAB	7.63	3.07	113

CHAPTER 4

DISCUSSION

The results of the current study indicate that there are differences in self-esteem and death anxiety between abused and nonabused women. Additionally, the present study expands our knowledge in this area by including a sample of battered women from a nonsheltered population.

Self-Esteem

Through the evaluation of self-esteem in each sample, the present study sought to ascertain similarities and differences between the two samples of battered women and provide a replication of the previously reported self-esteem differential between battered and nonbattered women. The findings indicate that the self-esteem of the nonabused group (Group CNAB) was significantly higher than that of both groups of abused women (Group SAB and CAB). This result supports previous research (Walker, 1979) showing that stressful, violent relationships produce negative psychological consequences. Low self-esteem seems to typify a woman whose husband or significant other physically abuses her (Martin, 1976; Pizzey, 1974)

Thus, whether one is in a shelter or not, having

been abused is associated with lower levels of self-esteem. However, the results indicate that there is no difference in self-esteem between women currently in an abusive relationship (Group CAB) and those who are receiving crisis intervention in a shelter/safehouse setting (Group SAB). These results replicate data reported by Walker (1983).

This result can be explained by understanding that for self-esteem to be elevated to a point where abuse is no longer a possibility usually requires a therapeutic process that is insight oriented in nature. This process, however, can neither begin when women are in an abusive relationship nor during crisis intervention. The battered woman must feel less threatened and be at liberty to begin to focus on herself. This consideration might explain why there is no differentiation between women seeking help and those who have not (Weingourt, 1985).

Death Anxiety

Weingourt's (1985) review indicates that therapists can begin to help the battered woman examine some "basic conflicts that are an outgrowth of client "confrontations with the givens of existence" (p.23). One such "given" is death anxiety.

The present data indicate that the sample of abused

college women (Group CAB) reported the highest level of death anxiety. The finding that abused women in shelters did not differ from the nonabused college women was unexpected. It was hypothesized that being in a battering relationship would increase the level of expressed death anxiety for both shelter and nonshelter subjects due to the fear of abuse and the ongoing nature of domestic violence.

One possible explanation for the obtained pattern of results suggests that the act of seeking help may reduce the expressed death anxiety of the sheltered group whereas subjects in the nonsheltered abused group are trying to cope with the abuse on their own. This explanation is supported by Brown (1980) who reported "that a large percentage of women tended to withdraw, to hide the incident from others, and to avoid seeking outside help" (p. 635). Similarily, Pearlin and Schooler (1978) found that people who used avoidant strategies, such as selective ignoring, when dealing with abuse in a relationship were more likely to experience emotional distress.

The similarity between the present data and that reported by Buzzanga, Miller, Perne, Sander, and Davis (1989) is also noteworthy. The investigation found the

mean death anxiety of a group of low self-esteem college women to be 9.91, a figure that is comparable to the mean of Group CAB (9.41) in the present study.

Limitations of the Present Study

The positive results notwithstanding, the present study was confronted by several limiting factors. The most apparent limitation was number of subjects comprising the shelter abused sample (20) as compared to the college abused sample (44). Also, the nonabused sample was much larger (113) than either abused sample. Larger samples of abused subjects would have provided potentially more stable and representative measure of self-esteem and death anxiety.

The present study also is limited by such demographic variables as age and educational level. Specifically, no attempt was made to match subjects in the three groups under consideration on these variables. Hence, it is conceivable that these demographic factors may have influenced the present data. However, the fact that these factors have not been reported as relevant variables in the death anxiety and self-esteem literature argues against their importance.

Finally, the current study failed to clearly distinguish between subjects that experienced minor abuse

and those that experienced severe abuse. This particular limitation might perhaps affect the level of self-esteem and level of death anxiety expressed by each subject.

Directions for Future Research

For nearly two decades, research in the area of violence in an intimate relationship has focused on personality characteristics to explain the behavioral aspects of women who are abused. This research represents an attempt to bring the area of abusive relationships into a more scientific arena.

Future research might explore the present cognitive attributions or explanatory style of each subject. How each woman perceives events in her life, coupled with the self-report nature of questionnaires, underscores the importance of cognitive attributions and self-introspection necessary to accurately assess self-esteem and death anxiety.

The life experiences of the CAB, SAB, and CNAB groups was another variable that was not examined in the present study. Factors such as duration of the abuse, number of attempts to leave the abusive situation, social support systems available, comprehensive abuse history (pre & post abuse), and abuse as a child were not considered.

Further investigation of the life experience of each group are warranted.

It is apparent that many people have difficulty understanding the dynamics of abuse that exists in our society. Future research of battered women must answer in some satisfactory way the question that most often arises when battered women are discussed and that is, "why does she stay?"

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Appendix A Demographic Information Form

Questionnaire 1

Demographic Information Form

lease	Circle:		Male	/ Fem	ale	Age _
	a. b. c. d.	l Status Married Single Separated Divorced Widow Homosexual Relationship				
	Length a. b. c. d.	of relationship either marr No current relationship less than 6 months 1 to 5 years 5 years or more	ied or s	single.		
		Self) White Black Hispanic Asian American Indian Other			Partne a. b. c. d. e. f.	White Black Hispanic Asian American Indian Other
•	Childre a. b. c. d. e.	en None 1 2 3 4 or more				
•	Educa a. b. c. d.	tion Less than high school High school diploma Some college College degree Masters or graduate educat	ion			
•	Incoma. b. c. d.	e Under \$5,000 a year \$5,000 to \$10,000 \$10,000 to \$25,000 Above \$25,000				

Appendix B The Conflict Tactics Scale

COLUMN III HAS IT EVER HAPPENED

> 1 = Yes2 = No

Questionnaire 2

No matter how well a couple (married, dating, or living together) gets along, there are times when they disagree, get annoyed with the other person, or just have spats or fights because they are in a bad mood or tired or for some other reason. They also use many different ways of trying to settle their differences. I'd like for you to answer the following questions about what you and your partner might do when you have an argument. Please answer the following statements A through S. Under column I, answer how you would react during an argument. Under column II answer how your partner would react during an argument. If you answer never to either column I or II then continue and answer column III. I would like you to tell me how many times in the past 6 months each tactic has occurred, (once, twice, 3-5 times, 6-10 times, 11-20 times, more than 20 times, or never. Please circle 0-6 for each column.

COLUMN I	COLUMN II
SELF	PARTNER
in past year	in past year
1= Once	1= Once
2= Twice	2= Twice
3= 3-5 times	3= 3-5 times
4= 6-10 times	4=6-10 times
5= 11-20 times	5= 11-20 times
6= More than 20	6= More than 20
0= Never (don't read)	0= Never (don't r

COZUMITA	
PARTNER	
in past year	
1= Once	
2= Twice	
3= 3-5 times	
4= 6-10 times	
5= 11-20 times	
6= More than 20	
0= Never (don't read)	

		0= Never (don't read)															
A.	Discussed an issue calmly							6				3				0	
B.	Got information to back up your/his/her	side of things	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
C.	Brought in, or tried to bring in, someone	e to help settle things	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
D.	Insulted or swore at him/her/you		1	2	3	4	5	6	0	1	2	3	4	5	6	0	
E.	Sulked or refused to talk about an issue		1	2.	3	4	5	6	0	1	2	3	4	5	6	0	
F.	Stomped out of the room or house or ya	ard	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
G.	Cried		1	2	3	4	5	6	0	1	2	3	4	5	6	0	
H.	Did or said something to spite him/her/y	ou .	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
Ī.	Threatened to hit or throw something at	him/her/you	1	2 [.]	3	4	5	6	0	1	2	3	4	5	6	0	
ſ.	Threw or smashed or hit or kicked some	ething	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
K.	Threw something at him/her/you		1	2	3	4	5	6	0	1	2	3	4	5	6	0	
L.	Pushed, grabbed, or shoved him/her/you		1	2	3	4	5	6	0	1	2	3	4	5	6	0	
M.	Slapped him/her/you	•	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
N.	Kicked, bit, or hit him/her/you with a fir	st	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
O.	Hit or tried to hit him/her/you with some	ething	1	2	3	4	5	6	0	1	2	3	4	5.	6	0	1
Ρ.	Beat him/her/you up	1	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
Q.	Choked him/her/you		1	2	3	4	5	6	0	1	2	3	4	5	6	0	1
R.	Threatened him/her/you with a knife or	gun	1	2	3	4	5	6	0	1	2	3	4	5	6	0	
S.	Used a knife or fired a gun		1	2	3	4	5	6	0	1	2	3	4	5	6	0	1

Appendix C

The Texas Social Behavior Inventory

Questionnaire 3

ANSWER THE FOLLOWING QUESTIONS AS THEY PERTAIN TO YOU

THIS WER	THE TOLLOWIN	NO QUESTIONS AS	TILL TEKTAIN	10 100		
 I am not likely to speak to people until they speak to me. 						
a Not at all characteris- tic of me	b Not Very	c Slightly	d Fairly	Very much character- istic of me		
2. I would des	scribe myself as so	elf-confident.				
a Not at all characteris- tic of me	b Not Very	Slightly	d Fairly	Very much character- istic of me		
3. I feel confi	dent of my appear	rance.				
a Not at all characteris- tic of me	b Not Very	c Slightly	d Fairly	Very much character- istic of me		
4. I am a good	d mixer.					
a Not at all characteris- tic of me	b Not Very	c Slightly	d Fairly	Very much characteristic of me		
5. When in a	group of people, l	I have trouble thinking	of the right things	to say.		
a Not at all characteris- tic of me	b Not Very	c Slightly	d Fairly	e Very much character- istic of me		
6. When in a suggestions		I usually do what the o	thers want rather t	han make		
a Not at all characteris- tic of me	b Not Very	c Slightly	d Fairly	Very much character- istic of me		
7. When I am	in disagreement	with other people, my	opinion usually pro	evails.		
a Not at all characteris- tic of me	b Not Very	c Slightly	d Fairly	e Very much character- istic of me		
8. I would des	scribe myself as o	ne who attempts to ma	ster situations.			
a Not at all characteris- tic of me	b Not Very	c Slightly	d Fairly	Very much character- istic of me		

9.	Other people	look up to me.			
Not at charactic of	teris-	b Not Very	c Slightly	d Fairly	e Very much character- istic of me
10.	I enjoy social	gatherings just to	be with people.		
Not at charactic of	teris-	b Not Very	c Slightly	d Fairly	Very much character- istic of me
11.	I make a poin	at of looking other	people in the eye.		
Not at charac tic of	teris-	b Not Very	c Slightly	d Fairly	e Very much character- istic of me
12.	I cannot seem	to get others to no	otice me.		
Not at charactic of	cteris-	b Not Very	c Slightly	d Fairly	e Very much character- istic of me
13.	I would rathe	r not have very mu	ch responsibility fo	or other people.	
Not at charactic of	cteris-	b Not Very	c Slightly	d Fairly	e Very much character- istic of me
14.	I feel comfort	table being approac	thed by someone in	a position of author	ority.
Not as charac tic of	cteris-	b Not Very	c Slightly	d Fairly	Very much character- istic of me
15.	I would descr	ribe myself as indec	cisive.		
Not a charactic of	cteris-	b Not Very	c Slightly	d Fairly	Very much character- istic of me
16.	I have no dou	ibts about my socia	al competence.		
Not a charactic of	cteris-	b Not Very	c Slightly	d Fairly	e Very much character- istic of me

Appendix D The Death Anxiety Scale

Questionnaire 4

Please circle the following statements True or False as they apply to you:

1.	I am very much afraid to die.	True	False
2.	The thought of death seldom enters my mind.	True	False
3.	It doesn't make me nervous when people sit and talk about death.	True	False
4.	I dread to think about having to have an operation.	True	False
5.	I am not at all afraid to die.	True	False
6.	I am not particularly afraid of getting cancer.	True	False
7.	The thought of death never bothers me.	True	False
8.	I am often distressed by the way time flies so very rapidly.	True	False
9.	I fear dying a painful death.	True	False
10.	The subject of life after death troubles me.	True	False
11.	I am really scared of having a heart attack.	True	False
12.	I often think about how short life really is.	True	False
13.	I shudder when I hear people talking about a World War III.	True	False
14.	The sight of a dead body is horrifying to me.	True	False
15.	I feel that the future holds nothing for me to fear.	True	False

Appendix E Informed Consent Form

CONSENT FORM

Please carefully read the following paragraph and sign below if you are in agreement.

The purpose of the present study is to asess the attitudes
and perceptions of women in Midwestern Kansas. If you
choose to participate, you will be asked to fill out
a questionnaire booklet which will require approximately
20 minutes. If you do not wish to participate, you may
be excused. Your answers will remain confidential.
If for any reason during the session you are uncomfortable,
you may discontinue participation. I (print name)
have read and understand
the preceding information and agree to participate in
this study.

Signature of Participant/Date

Appendix F Test Administration Script

Test Administration Script

My name is, and I am
a graduate student in Psychology at Emporia State
University. For my thesis I am investigating the attitudes
of women in Midwestern Kansas. Your participation will
be very beneficial to the study. If you choose to
participate, please sign and return the consent forms.
Your answers will remain confidential, with only myself
having access to them. Please do not sign the test
booklet. Begin as soon as you receive the booklet
according to the directions given. You may begin as
soon as you receive your packet.



"lember

I, Helen M. Hanson, hereby submit
this thesis / report to Emporia State University as partial
fulfillment of the requirements for an advanced degree.
I agree that the Library of the University may make
available for use in accordance with its regulations
governing materials of this type. I further agree that
quoting, photocopying, or other reproduction of this
document is allowed for private study, scholarship
(including teaching) and research purposes of a nonprofit
nature. No copying which involves potential financial
gain will be allowed without written permission of the
author.
Tdelen M. Hanson

Signature of Author
5-11-93
Date
Relationship of Self-Esterm and Death ansity in Battered
Title of Thesis/Research Project
Signature of Graduate Office Staff Member
- may 13, 1992

Date Received