IMPACT OF INTIMATE PARTNER VIOLENCE ON SURVIVORS’ WORK-RELATED SELF-EFFICACY EXPECTATIONS AND OUTCOME EXPECTATIONS

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IMPACT OF INTIMATE PARTNER VIOLENCE ON SURVIVORS’ WORK-RELATED SELF-EFFICACY EXPECTATIONS AND OUTCOME EXPECTATIONS

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Dissertation

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ABSTRACT

The purpose of the present investigation was to answer the calls from numerous authors and extend counseling psychology’s focus on the vocational needs of survivors of intimate partner violence (IPV) by investigating the relationship between psychological/emotional victimization and work-related self-efficacy expectations and work-related outcome expectations. Consistent with previous research (Albaugh & Nauta, 2005; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, 2006; Chronister, Linville, & Kaag, 2008; Chronister & McWhirter, 2004; Chronister & McWhirter, 2006), the present study uses Bandura’s Social Cognitive Theory (SCT) (1977, 1982) as its theoretical framework. More specifically, this investigation conceptualizes the verbal and psychological forms of interpersonal violence as a form of Bandura’s (1977, 1982) verbal persuasion learning experience. The overall aim of this examination was to determine whether the verbal and psychological aspects of IPV are related to a survivor’s work-related efficacy expectations, outcome expectations, and goals. Such research is consistent with Counseling Psychology’s historic attention towards vocational guidance and social justice, and could lead to interventions to enhance the lives of survivors of IPV.

Data from 117 survivors of IPV residing in domestic violence shelters were used. All participants completed the self-report measures of IPV (i.e. Psychological Maltreatment of Women Inventory-Short Form; Tolman, 1999, Severity of Violence
Against Women Scale; Marshall, 1992) and work-related self-efficacy expectations and outcome expectations (WRSEQ; author composed, WROEQ; author composed). Participants also completed a 25-item demographic questionnaire which included an item assessing the length of participants’ relationship (chronicity of abuse) and three items regarding their intentions to engage in work behaviors (work goals). The present data failed to show that psychological/emotional victimization significantly predicted survivors’ work-related self-efficacy expectations or work-related outcome expectations, even when chronicity of abuse was considered. Results of the exploratory analyses did support SCT in that work-related self-efficacy expectations and outcome expectations predicted work goals. The results also found that work-related outcome expectations mediated the relationship between chronicity of abuse and work goals and that older participants reported less positive expectations about the consequences of job-seeking and working than did younger participants. These findings also support the ideas underlying SCT.
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CHAPTER I
INTRODUCTION

The discipline of Counseling Psychology has consistently, from its inception until today, focused on vocational guidance and social advocacy (American Psychological Association, 1999; Committee on Definition, Division of Counseling Psychology, 1956; Fouad et al., 2004; Meara & Myers, 1999; Super, 1955; & Whiteley, 1984). For example, in 1999, the American Psychological Association (APA) recognized vocational counseling as a unique and important service provided by counseling psychologists (APA, 1999), and at the 2001 National Counseling Psychology Conference in Houston, counseling psychologists reaffirmed social justice as a fundamental part of their identity and as a central feature of the field’s current mission (Baker & Subich, 2008; Fouad et al., 2004). Survivors of Intimate Partner Violence (IPV) represent a disenfranchised group with significant vocational challenges and these persons need the attention and support of counseling psychologists. Thus, the present study’s focus on investigating vocational constructs with survivors of IPV is consistent with the field’s historic attention towards both vocational guidance and social advocacy, and contributes to Counseling Psychology’s social justice mission.
Intimate Partner Violence

It is difficult to obtain accurate IPV prevalence statistics, as there are many challenges associated with assessing IPV. Researchers use terms related to IPV in various ways and have used different terms to describe the same IPV behaviors. Health data sources provide information only on IPV incidents that result in injury and for which victims seek medical attention. Similarly, many health care providers do not ask patients about IPV and likewise, patients seeking medical attention for IPV-related injuries may not report the true cause of their injuries. Criminal justice data are limited by the accuracy and reliability of police reports (Lipsky & Caetano, 2009). Also, many IPV statistics are most likely underestimates of violence by intimate partners, as they are based on self-report, often do not include non-English speaking or low socioeconomic status women, are primarily based on the reports of women in heterosexual relationships, do not include homeless or incarcerated women, and include only those willing to report (Browne, 1993; Goodman, Koss, Fitzgerald, Russo, & Keita, 1993).

Regardless of these limitations, the literature to date does suggest some IPV trends. Intimate partner violence (IPV) against women permeates society, crossing lines of ethnicity, age, sexual orientation, and socioeconomic status (Goodman, Koss, Fitzgerald, Russo, & Keita, 1993). Intimate partners provide the greatest risk of assaults for women. An estimated 2-3 million women are assaulted by male partners each year, and 21-39% of women experience IPV as adults (Bradley, Smith, Long, & O’Dowd, 2002; Briere & Jordan, 2004; Browne, 1993; Goodman, Koss, Fitzgerald, Russo, & Keita, 1993; Hage, 2006). General population surveys also suggest that IPV occurs more frequently among African American partners and, to a lesser extent, Hispanic partners,
compared with European American partners. However, in some of these studies, the racial and ethnic differences decreased or disappeared when controlling for other factors such as class, family income, and age of respondent (Lipsky & Caetano, 2009).

Further, IPV is a multifaceted construct, and can be physical, sexual, verbal, psychological, and/or financial (e.g., making partners ask for money, taking away paychecks). The focus of the present investigation is primarily on the verbal and psychological aspects of IPV (hereinafter referred to as psychological/emotional victimization) including: intense criticism, put-downs, verbal harassment, denial of access to resources, restriction of freedom, intimidation, and the implicit or explicit threat of the loss of something (e.g., children) (Browne, 1993; Chronister, Wettersten, & Brown, 2004; Goodman, Koss, Fitzgerald, Russo, & Keita, 1993). Recently, researchers have emphasized the importance of focusing on emotional and psychological abuse (Stark, 2007; Williamson, 2010). Williamson (2010) and Stark (2007) argued that these seemingly small or insignificant abuses lead survivors to believe their abuser’s notion of reality rather than trusting their own senses, thus severely impacting survivors’ psychological well-being and senses of self.

Similarly, survivors of IPV have repeatedly reported that it is the nonphysical impact of violence that is the most difficult both to identify and to address. Survivors contend that emotional and psychological abuse erodes a woman’s self-esteem, self-confidence, and self-respect (Williamson, 2010). The long-lasting impact of psychological and emotional abuse was evidenced by research conducted in Finland, which found that survivors of psychological/emotional abuse experienced high levels of fear, depression, and other problems ten years after the abuse by their romantic partner.
had ended (Heiskanen & Piispa, 1998). Psychological/emotional victimization has been associated with the following psychological outcomes: shock, denial, withdrawal, numbing, fear, depression, difficulty with decision-making, hopelessness, low self-esteem, and learned helplessness (Browne, 1993; Briere, & Jordan, 2004; Bowen, 1982). Both psychological/emotional victimization, as well as the mental health outcomes of IPV, impact all areas of survivors’ lives. This investigation sought to better understand the impact of IPV on survivors’ work lives.

Intimate Partner Violence and Work

The impact of IPV on women’s work lives has been relatively neglected in the professional literature. Many scholars have argued that career research with survivors of IPV is needed (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Wettersten, & Brown, 2004; Chronister, & McWhirter, 2006; Gianakos, 1999; Wettersten, Rudolph, Faul, Gallagher, Trangsrud, Adams, Graham, & Terrance, 2004). Although the research to date is limited, the extant literature does illustrate the impact of IPV on various aspects of survivors’ work experiences.

Research has shown that IPV interferes with work behavior. The literature to date suggests that women involved in violent relationships are often late for work, have difficulties concentrating on their assigned tasks due to the conflict at home, are harassed at work by their partner, and are regularly not allowed to leave their home by their partner (Wettersten et al., 2004). As a result, these women often have difficulty obtaining jobs, maintaining jobs, and getting promoted. IPV similarly interferes with survivors’ ability to receive necessary job skill training, positive evaluations by supervisors, and
wage increases (Chronister, & McWhirter, 2003; Chronister, Wettersten, & Brown, 2004; Wettersten et al., 2004).

An investigation by Browne, Salomon, and Bassuk (1999) illustrated IPV’s impact on women’s capacity to maintain work. They found that women who had experienced physical violence by a partner within the prior twelve months had 1/3 the odds of working at least 30 hours a week for at least 6 months than did women who had not experienced abuse. A 2005 study by Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, and Farnsworth also demonstrated the impact of intimate partner violence on survivors’ work lives. The investigators interviewed 13 survivors of intimate partner violence residing in shelter. Several of the woman reported feeling like their work life had been interrupted by their abuser’s controlling actions. The women also expressed feeling like they needed to quit their jobs due to their partner’s “out-of-control behaviors” (p.461).

The literature also suggests that IPV affects survivors’ work self-concept and self-efficacy. Bowen (1982) argued that survivors of IPV may begin to internalize the negative messages of their abusive partner and begin believing that they have no skills or job experience. Survivors of IPV may start to insist that they cannot succeed in either work or education and may discredit any experience they have (Bowen, 1982; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000). Wettersten et al. (2004) conducted a qualitative study with ten survivors of domestic violence, all of whom were residing in a shelter at the time of the research. The participants described general feelings of lowered self-esteem, self-confidence, and self-concept regarding work. Two participants
explained that “their lowered self-concept was related to having to completely change their identity in order to escape their abuser” (Wettersten et al., 2004; p. 453).

The isolation that is typically associated with IPV also impacts survivors’ work experiences and work identity. The isolation connected to IPV limits the opportunities for survivors to be exposed to work role models. This lack of exposure may restrict opportunities to succeed at educational and career-related tasks and may create self-doubt regarding one’s ability to accomplish certain tasks (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister & McWhirter, 2003). Survivors of domestic violence also have limited opportunity to participate in career searches, job education, and goal planning activities (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Linville, & Kaag, 2008; Chronister, & McWhirter, 2003; Chronister, & McWhirter, 2004).

Finally, the financial stability and economic independence that are a function of stable, successful employment cannot be ignored in the discussion of the impact of IPV on work, as the literature to date suggests that not only do women who recently leave an abusive partner often need money, but also that the lack of economic resources is a major factor in women’s decisions to remain/return to abusive relationships (Briere, & Jordan, 2004; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Browne, 1993; Chronister, Brown, O’Brien, Wettersten, Burt, Falkenstein, & Shahane, 2009; Gelles, 1976; Hofeller, 1980; & Okun, 1986). Survivors of domestic violence have financial concerns that are unique and specific to the violence they experienced.

Gelles’ 1976 study with 41 families in which women had been beaten by their husbands illustrated that the fewer resources and the lesser power held by the wives impacted their decision to remain in the abusive relationship with their husband. In a
1980 study by Hofeller, 58% of the female participants indicated that they stayed with their abusive partner because they felt like they could not support themselves on their own. In a study of 300 female shelter residents, results suggested that the greater the woman’s income in relation to her partner’s, the greater the likelihood that she would eventually end the abusive relationship (Okun, 1986).

Chronister, Wettersten, and Brown (2004) argued that economic independence is a key ingredient in fostering a battered woman’s sense of personal power and control. Career counseling provides an opportunity for counseling psychologists to empower survivors of domestic violence and assist them in becoming financially independent. Indeed, women in violent relationships have suggested that career knowledge is an important part of making a new start and essential to economic independence (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000).

To summarize, there is a lack of literature regarding the implications of IPV for female survivors’ working lives. The limited descriptive research to date does seem to suggest that IPV creates contextual barriers (e.g., isolation, job restrictions, job distractions, physical injuries) that impede survivors’ work experiences, as well as promoting diminished self-efficacy regarding one’s abilities to successfully obtain and maintain work (Chronister & McWhirter, 2004). It is imperative to better understand the relationship between IPV and work among survivors of partner violence, as financial independence plays important role in survivors’ decision to leave abusive relationships and in the potential continuation of abuse. “Clearly, women who perceive they have few or no marketable skills and limited access to employment will likely see alternatives
inside the marriage as being more rewarding and less costly than alternatives outside the relationship” (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000, p. 252).

Bandura’s Social Cognitive Theory Applied to Work and IPV

A sociocognitive framework has been acknowledged as valuable in conceptualizing and addressing the career concerns of oppressed groups (Chartrand & Rose, 1996; Chronister & McWhirter, 2003; Chronister & McWhirter, 2004, & Morrow, Gore, & Campbell, 1996). More specifically, the constructs of self-efficacy expectations and outcome expectations from Bandura’s (1986) Social Cognitive Theory have been suggested as useful in responding to the career concerns of survivors of IPV (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister & McWhirter, 2003; & Chronister & McWhirter, 2004).

Bandura’s Social Cognitive Theory defines self-efficacy expectations as “the conviction that one can successfully execute the behavior required to produce the outcome” (Bandura, 1977, p. 193). More simply, self-efficacy expectations are the beliefs an individual possesses regarding her or his ability to do something. According to Bandura, self-efficacy expectations affect the initiation and persistence of behavior, as well as how long individuals will sustain effort in managing stressful situations (Bandura, 1977, 1986). Bandura (1977) explained that “people fear and tend to avoid threatening situations they believe exceed their coping skills, whereas they get involved in activities and behave assuredly when they judge themselves capable of handling situations that would otherwise be intimidating” (p. 194). High self-efficacy regarding a particular task
will therefore result in an individual eagerly approaching the activity, whereas low self-efficacy will lead to avoidance of the behavior (Bandura, 1977, 1986).

Self-efficacy was initially applied to career development by Hackett and Betz (1981) and has since been applied to various work behaviors including career decision-making (Niles & Sowa, 1992), education and job preference (Lent, Brown, & Hackett, 1994), career exploratory behavior (Blustein, 1989), and job decidedness (Taylor & Betz, 1983). More recently, self-efficacy has been applied to the career issues of survivors of IPV (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister & McWhirter, 2003; & Chronister & McWhirter, 2004).

Bandura (1977, 1982, 1986) postulated that efficacy expectations are developed and/or changed through four major sources of information, or types of learning experiences: performance accomplishments (e.g., personal mastery experiences, successes), vicarious experiences (e.g., seeing others perform specific activities), emotional arousal (e.g., physiological states, emotions), and verbal persuasion (e.g., criticism or encouragement from others). It has been argued that learning experiences that enhance work-related self-efficacy expectations may be limited for survivors of IPV (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister & McWhirter, 2003; & Chronister & McWhirter, 2004).

For example, recent literature suggests that the isolation that is often associated with IPV may decrease a survivor’s opportunities to experience Bandura’s personal performance accomplishments and vicarious learning experiences related to work (e.g., lack of exposure to role models engaged in career pursuits; personal success experiences at work), which in turn may create self-doubt regarding her ability to accomplish work
tasks (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister & McWhirter, 2003). Chronister and McWhirter (2003) also contended that the physical states resulting from IPV (e.g., intense feelings of fear and anxiety, physical injuries of abuse) may decrease survivors’ self-efficacy regarding successfully finding/keeping a job (Chronister & McWhirter, 2003). Lastly, it has been argued that the verbal and psychological abuse associated with IPV may negatively influence a survivor’s beliefs about her ability to succeed at a job (Chronister & McWhirter, 2003). Chronister and McWhirter (2003) emphasized that

the criticism, blaming, and systematic denigration that typically accompany domestic violence are a powerful source of verbal persuasion that the woman is incompetent across numerous, if not all, domains. She may believe that she cannot succeed in school or in the career area of interest because she is stupid, ‘crazy,’ and incapable (p. 419).

Also predictive of behavior, according to Bandura (1977), are one’s outcome expectations, about which he stated “an outcome expectancy is defined as a person’s estimate that a given behavior will lead to certain outcomes” (p. 193). In other words, “outcome expectations refer to personal beliefs about the consequences of performing particular behaviors” (Chronister & McWhirter, 2004, p. 171). Research consistently has found a strong relationship between career-related self-efficacy and outcome expectations (Gainor & Lent, 1998; Lopez, Lent, Brown, & Gore, 1997; Smith & Fouad, 1999). Thus, when self-efficacy expectations regarding work are low, expectations regarding the benefits of working typically are low as well, and both are likely to relate to the person’s ultimate work goals and behavior.
Outcome expectations for career behaviors among survivors of IPV have begun to be researched (Chronister, Linville, & Kaag, 2008; Chronister & McWhirter, 2003, 2004), and this literature suggests that survivors’ outcome expectations for work-related activities may be influenced by the response or anticipated response of the abuser (Chronister & McWhirter, 2003, 2004). Chronister and McWhirter (2004) explained that the battered woman whose abuser has repeatedly told her that she will never get a job may also believe that even if she does actually get a job the outcome will be that the abuser harasses her in the workplace, damages her reputation and work performance, and she will be fired (p. 171).

Chronister and McWhirter (2003) further argued that the negative outcomes of IPV “may not only restrict battered women’s pursuit of personal and professional interests and lower their self-efficacy expectations but may also lower their expectations for positive outcomes in future career pursuits” (p.420).

Chronister and McWhirter’s (2003, 2004) postulations about the impact of IPV on outcome expectations regarding work were supported in the 2008 qualitative investigation by Chronister, Linville, and Kaag. This examination sought to better understand the contextual barriers and supports that affect survivors’ career development and ability to access career counseling services. The participants included 11 survivors living in nonshelter settings who participated in a specific community-based career counseling intervention. One participant provided specific feedback regarding how IPV impacted her expectations of work. The participant explained that
I think it would be pointless to even try to have a career. ‘Cause in a domestic violence situation, you don’t have money, you don’t get to keep money and you don’t get to buy stuff. It all goes to them [the abuser]. So for me it’s pointless. It’s just gonna get taken away. I worked my butt off to get it all taken away (p. 351).

The present investigation conceptualizes psychological/emotional victimization as a form of Bandura’s (1977) verbal persuasion learning experience. Thus, of interest is the impact of this type of “verbal persuasion” on the work self-efficacy expectations and outcome expectations of survivors of IPV. This conceptualization is consistent with earlier literature (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister & McWhirter, 2003; Chronister & McWhirter, 2004). A fundamental goal of this examination was to extend the current IPV career literature and empirically investigate the potential impact of psychological/emotional victimization associated with IPV on survivors’ work-related self-efficacy expectations (e.g., survivors’ confidence in their ability to look for a job, complete a job interview, regularly attend work and perform job tasks) and work-related outcome expectations (i.e., survivors’ beliefs about the consequences of finding and maintaining employment).

Work-Related Self-Efficacy and Outcome Expectations Among Survivors of IPV

As suggested earlier, career research with survivors of IPV is limited (Albaugh & Nauta., 2005; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Wettersten, & Brown, 2004; Chronister, & McWhirter, 2006; Gianakos, 1999; Wettersten, Rudolph, Faul, Gallagher, Trangsrud, Adams, Graham, & Terrance, 2004). There are only a handful of empirical investigations that have examined IPV in relation to career decision-making skills, readiness, and behavior (Albaugh & Nauta, 2005; Brown,
Reedy, Fountain, Johnson, & Dichiser, 2000; Browne, Salomon, & Bassuk, 1999; Chronister, & McWhirter, 2004; Chronister, Linville, & Kaag, 2008; Wettersten et al., 2004) and even fewer investigations have studied the work-related self-efficacy expectations and outcome expectations of survivors of IPV (Albaugh & Nauta, 2005; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, & McWhirter, 2004).

There is speculation, however, that IPV may negatively affect survivors’ self-efficacy regarding their ability to successfully seek and maintain employment and their beliefs about the consequences of work (Bowen, 1982; Chronister, & McWhirter, 2003; Chronister, Wettersten, & Brown, 2004; Gianakos, 1999). Additionally, career interventions and developmental models designed for this population include components that aim to increase survivors’ work-related self-efficacy expectations and outcome expectations (Chronister, 2006; Chronister & McWhirter, 2006; Gianakos, 1999; Ibrahim & Herr, 1987). Despite these speculations, career interventions, and developmental models, research looking at the relationship between IPV and self-efficacy expectations and outcome expectations is just emerging in the psychological literature.

Brown, Reedy, Fountain, Johnson, and Dichiser’s (2000) empirical investigation showed that unemployed survivors of IPV had lower career decision-making self-efficacy than did employed survivors. Although this study supported the relevance of examining self-efficacy expectations with survivors of IPV, it did not actually examine the potential effect of IPV on efficacy expectations. Rather, the authors compared the career decision-making self-efficacy expectations among employed and unemployed survivors of IPV. The study also did not investigate the relationship between IPV and work-related
outcome expectations, or the association between work-related self-efficacy expectations and outcome expectations.

Subsequently, Chronister and McWhirter (2004) found that abuse history was not significantly related to vocational skills self-efficacy or outcome expectations among a group of 74 European American and ethnic minority survivors of IPV. However, Chronister and McWhirter did not distinguish among types of partner violence, did not account for length of abuse, and used numerous measures that were constructed for the purpose of the study.

In contrast to the findings of Chronister and McWhirter (2004), the 2005 study by Albaugh and Nauta did find a relationship between IPV and self-efficacy expectations. Albaugh and Nauta (2005) investigated the association between college women’s experience with violence from intimate partners and career decision self-efficacy. This was the first examination of the relation of specific types of IPV (e.g., physical, sexual, psychological) to career decision self-efficacy. The results indicated that psychological aggression, physical assault, and injury were not significantly related to career decision self-efficacy, but sexual coercion was significantly negatively associated with participants’ confidence in their ability to accurately self-appraise their abilities, select goals, and problem solve career decision-making challenges. The results also suggested, however, that participants’ self-efficacy regarding obtaining occupational information and planning for the future was unrelated to any form of IPV (Albaugh & Nauta, 2005).

Albaugh and Nauta (2005) argued that “given that sexual coercion was related to career decision self-efficacy in a way that was different from the other forms of violence, it may be productive to examine associations between specific forms of violence and self-
efficacy among battered women as well” (p. 302). Albaugh and Nauta (2005) also maintained that the differences between college students and shelter residents including age, level of education, degree of social isolation, financial dependence, and developmental stage of career decision-making, warrant an investigation to determine if specific forms of IPV are related to self-efficacy expectations in shelter populations (Albaugh & Nauta, 2005). As with Brown, Reedy, Fountain, Johnson, and Dichiser’s (2000) study, Albaugh and Nauta (2005) did not look at the relationship between IPV and work-related outcome expectations, or the association between work-related self-efficacy expectations and outcome expectations.

To summarize, with the exception of two empirical investigations (Albaugh & Nauta, 2005; Chronister & McWhirter, 2004), the relationship between IPV and work-related self-efficacy expectations and outcome expectations among survivors has been assumed and has gone relatively untested. The little research that has been conducted has been flawed with fuzzy definitions of self-efficacy and outcome expectations, the application of experimental instrumentation, imprecise definitions of intimate partner violence, and has not accounted for the impact of length of relationship. Albaugh and Nauta (2005) recently found that IPV was related to work-related efficacy expectations in a sample of female college students when forms of violence were specified, and they suggested that researchers examine the association between specific forms of violence and self-efficacy among battered women. Therefore, investigating the relationship between psychological/emotional victimization and work-related self-efficacy expectations and outcome expectations among a sample of survivors of IPV is consistent with recent calls for research.
Summary

The purpose of the present investigation was to answer the calls from numerous authors and extend counseling psychology’s focus on the vocational needs of survivors of intimate partner violence by investigating the relationship between psychological/emotional victimization and work-related self-efficacy expectations and outcome expectations. Consistent with previous research (Albaugh & Nauta, 2005; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, 2006; Chronister, Linville, & Kaag, 2008; Chronister & McWhirter, 2004; Chronister & McWhirter, 2006), the present study uses Bandura’s Social Cognitive Theory (1977, 1982) as its theoretical framework. More specifically, this investigation conceptualizes the verbal and psychological forms of interpersonal violence as a form of Bandura’s (1977, 1982) verbal persuasion learning experience. The overall aim of this examination was to determine whether the verbal and psychological aspects of IPV are related to a survivor’s work-related efficacy expectations, outcome expectations, and goals. Such research is consistent with Counseling Psychology’s historic attention towards vocational guidance and social justice, and could lead to interventions to enhance the lives of survivors of IPV.
Chapter one established that intimate partner violence (IPV) against women is a significant social concern, impacting all areas of survivors’ lives, including and most relevant to this investigation, survivors’ work lives. It also illustrated that attending to the work needs of survivors of IPV is consistent with Counseling Psychology’s historic attention towards both vocational guidance and social advocacy, contributes to the field’s social justice mission, and could lead to interventions that enhance the lives of survivors of IPV.

This chapter provides a critical review of the literature pertaining to the present study. It begins with a description of the empirical investigations that have explored IPV in relation to general career constructs such as decision-making skills, readiness, and behavior. Next, the chapter reviews the literature that proposes IPV’s negative influence on survivors’ self-efficacy regarding their ability to successfully seek and maintain employment and their beliefs about the consequences of work. The career interventions and developmental models designed for IPV survivors that include components which aim to increase survivors’ work-related self-efficacy expectations and outcome expectations are explored subsequently. A review of the empirical literature examining specifically the relationship between IPV and work-related self-efficacy expectations and
outcome expectations follows. Finally, the chapter concludes with the specific questions being asked in the present study which focus on the need to explore the relation of a specific type of IPV, psychological/emotional victimization, to survivors’ work-related self-efficacy expectations and outcome expectations.

IPV’s Impact on Work Behavior

As already suggested, although the research regarding the influence of IPV on survivors’ work lives is limited, the extant literature does illustrate the relation of IPV to survivors’ career decision-making skills, readiness, and behavior. This literature is relevant to the present investigation, as it demonstrates IPV’s significance to work behavior.

In 1999, a longitudinal investigation by Browne, Salomon, and Bassuk examined the impact of recent partner violence on poor women’s capacities to maintain work over time. More specifically, Browne et al. (1999) questioned whether poor women at risk of intimate partner violence were less likely to maintain work than were poor women who did not experience abuse. Data for this investigation were gathered from the Worcester Family Research Project (WFRP). The study involved a 10-12 hour baseline interview and two hour follow-up interviews at 12 and 24 months after the baseline (Browne, Salomon, & Bassuk, 1999).

Two hundred and eighty five single women participated in the study. Participants included both homeless women (recruited from homeless shelters) and low-income housed women (recruited from a local Public Welfare Office). Their average age was 29 years. The sample was relatively diverse in terms of race/ethnicity (42% non-Hispanic
white; 32% Puerto Rican; 17% black; and 8% from other ethnic backgrounds) and on average these women had completed high school or received a G.E.D. The participants had an average of two children and 67% of the women had never been married (Browne, Salomon, & Bassuk, 1999).

Browne, Salomon, and Bassuk (1999) reported that all interviews were conducted by “highly trained women professionals” (p. 404) either at a private interviewing space in the homeless shelter, at the project office, or at the women’s homes (if housed). Physically violent actions by intimate male partners were assessed during the initial follow-up interview with the physical aggression scale of the Conflict Tactics Scales (CTS; Straus, 1979, 1990). This instrument assessed physically violent actions by intimate male partners during the time between the baseline and initial follow-up interview (i.e., 12 months after the baseline). Data were analyzed using both a more general definition of physical aggression and a more restrictive definition of physical violence. A modified version of the Personal History Form (Barrow, Hellman, Lovell, Plapinger, Robinson, & Struening, 1985) was used at all three interviews to obtain employment history information (Browne, Salomon, & Bassuk, 1999).

Browne, Salomon, and Bassuk (1999) also assessed for the impact of possible covariates based on evidence from earlier empirical literature of a relationship between these variables and violence. Sociodemographic factors included housing status, age, race/ethnicity, educational level, marital status, number of children, monthly income, and employment history prior to the first interview. Psychological distress was measured by the Brief Symptom Inventory (BSI; Derogatis, 1993). Mental health services utilization was assessed by asking participants whether they had spoken with a medical or mental
health professional about nerves or emotions in the past 6 months or had been hospitalized for a mental health problem in the past year. Substance problems included problematic drinking and/or drug use. Problematic drinking was defined as four or more drinks per day, two to three times per week for the past year or six or more drinks on at least one occasion during the last six months. Illegal drug use was defined as use of any drug except marijuana. The Physical Functioning Scale of the Short-Form Health Survey (Ware, Snow, Kosinski, & Gandek, 1993) was utilized to measure participants’ physical health. The resources needed to obtain and keep work included whether participants received child care, transportation, job training, job placement services, or additional education during the year prior to the interview. Sources of income were defined as benefits received within the last year from the following programs: Aid to Families with Dependent Children (AFDC), food stamps, Women, Infant, and Children (WIC), Supplemental Security Income (SSI), and housing or child care subsidy. Childhood experiences of out-of-home placement included living in foster care, an adoptive home, an institution, or being sent to live with a family member. Childhood experiences of physical violence were assessed with the CTS, and childhood sexual abuse was defined as “any kind of sexual advance or unwanted sexual experience” by any adult or older individual before the age of eighteen. The covariates were assessed during the baseline and initial follow-up interviews (Browne, Salomon, & Bassuk, 1999).

A lagged analysis was conducted, using violence histories in the first follow-up interview to predict employment status during the period between the first and second follow-up interview. The results suggested that women who had experienced recent physical aggression/violence at the first follow-up interview were less than half as likely
to work at least 30 hours per week for six months or more during the period between the first and second follow-up interviews compared to women who did not experience violence during this time. Additionally, women who had experienced recent physical violence were about one fifth as likely to work full-time for six months or more (Browne, Salomon, & Bassuk, 1999).

Data analyses also revealed that women who had been assaulted by romantic partners at the first follow-up interview demonstrated significantly higher levels of emotional and medical distress, medical hospitalizations, and substance abuse problems. Browne, Salomon, and Bassuk (1999) used logistic regression modeling to rule out the possibility that these variables were covariates that accounted for the relationship between employment status and recent aggression by a male partner. This analysis revealed that recent experiences with physical aggression/violence continued to predict a participant’s reduced capacity to maintain work when accounting for the just mentioned variables. Mental health variables, as well as job training, use of job placement services, and past employment also continued to strongly predict work history (Browne, Salomon, & Bassuk, 1999).

A strength of this study is that it investigated the work experiences of a population, survivors of intimate partner violence, that is underrepresented in the extant literature and would benefit from vocational assistance. The sample size was large and relatively diverse, increasing the generalizeability of the results. Another strength of this investigation was the set of criteria used for instrument selection; these included prior use with people of color and with low-income or homeless populations, ease of administration in shelter settings, and demonstrated validity and reliability.
A primary limitation of the investigation, however, is the narrow focus of intimate partner violence. First, the investigators only considered physical acts of violence by romantic partners as abuse, ignoring the potential impact of verbal and emotional abuse on women’s ability to maintain work. The overall impact of IPV on survivor’s ability to maintain work may have increased significantly if other forms of violence (e.g., verbal, psychological, sexual) were assessed. Second, the authors only assessed for violence in heterosexual relationships. It is unclear if the same results would be found for women in lesbian relationships. Finally, there was no consideration of the overall chronicity of the violence as only that IPV which occurred during the follow-up period was considered in the analyses.

The importance of this study for the career literature in general, and specifically for the present investigation, is that it is consistent with other speculation and research (Bowen, 1982; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Linville, & Kaag, 2008; Chronister, & McWhirter, 2003; Chronister, Wettersten, & Brown, 2004; & Wettersten et al., 2004) that IPV impacts survivors’ work experiences. More specifically, it demonstrated that recent IPV is associated with a decreased likelihood that survivors’ can successfully maintain a work schedule. Browne, Salomon, and Bassuk (1999) argued that these results illustrate the importance of interventions for working with survivors of intimate partner violence on issues regarding the impact of abuse on women’s capacity to maintain work. Browne, Salomon, and Bassuk (1999) suggested that “further analysis of the mechanisms by which recent partner violence affects women’s ability to work should be conducted” (p. 422). The present study’s exploration of the
impact of IPV on survivor’s work-related self-efficacy expectations and outcome expectations answers this call.

Subsequently, Wettersten, Rudolph, Faul, Gallagher, Trangrud, Adams, Graham, and Terrance (2004) conducted a qualitative examination to gain a broader understanding of the impact of domestic violence on the working lives of women in shelter. Ten women residing in a domestic violence shelter participated in the study. The participants ranged in age from 20-47 years old, with a mean age of 35. Participants were somewhat diverse in terms of race/ethnicity (i.e., 50% Native American, 40% European American, 1% Latina), education (i.e., 50% reported taking some college or technical courses, 20% had a high school diploma or G.E.D., 1 had a tenth-grade education, 1 had a technical school degree, and 1 was a doctoral candidate), and employment status (i.e., 40% unemployed, 60% employed). Ninety percent of the participants had children. Participants completed an interview at the shelter with one or two researchers. Semi-structured interviews based on current literature lasted 55-100 minutes and focused on the vocational needs of women in shelter. Participants also completed the Beck Depression Inventory-Second Revision (BDI-II; Beck, Steer, & Brown, 1996) (Wettersten, Rudolph, Faul, Gallagher, Trangrud, Adams, Graham, & Terrance, 2004).

Consensual qualitative research (CQR) methods were used to analyze interview data and revealed information regarding the women’s perceptions of the impact of domestic abuse on their work experiences. Participants reported receiving mixed messages about work from their abuser (e.g., work/don’t work), and noted that these mixed messages were a constant source of conflict. One woman explained that “I mean, in the morning he could say ’I don’t want you working anymore,’ and by afternoon, well,
‘we need you to work,’ you know, and, it’s like, well, yeah, so just kept working” (Wettersten et al., 2004, p. 452).

Participants also described having to deal with their partner’s jealousy about work and experiencing harassment at work. Participants talked about the abusers accusing them of infidelity, constantly calling them at work, forcing the participant to be late for work, and coming to work to monitor the participant’s work environment (Wettersten, Rudolph, Faul, Gallagher, Trangrud, Adams, Graham, & Terrance, 2004). One participant indicated

it really bothered him that I’d work. He’d call me there all the time, you know…there’s a phone call and this is like every half hour…so I think if my bosses didn’t like me they’d probably have fired me because he called so much during the day (p. 452).

Participants also reported experiencing difficulty concentrating at work as a result of the abuse. Participants described the abuse impacting their concentration in two primary ways. First, they talked about having difficulty concentrating as a result of a recent physically or emotionally violent experience with their partner (Wettersten, Rudolph, Faul, Gallagher, Trangrud, Adams, Graham, & Terrance, 2004). One woman commented

because sometimes I’d go to work and I’d be so upset from arguing with him or something I’d just, I’d feel like I’d just want to cry, you know. Or we had a fight the night before and he hit me. He never left bruises anywhere that anybody could see. I was always hidden. So I was in pain too, and it made it hard. I had to call in sometimes because I was in too much pain to even walk or, you know to go in, you know, or I was too upset (pp. 452-453).
Second, participants talked about having trouble concentrating at work due to experiencing anticipatory fear about future abuse (Wettersten, Rudolph, Faul, Gallagher, Trangrud, Adams, Graham, & Terrance, 2004). One woman explained

I would try to figure out what I should do next, what I should say, what I shouldn’t say. All this stuff going in my mind. And so sometimes I would forget to do some things like with the customer’s order or stuff like that and just the fact that it’s always like that (p. 453).

Many of the women also indicated that the abuse either directly or indirectly caused them to miss work. Participants described being unable to attend work due to physical pain from an abusive encounter. They also reported that they would miss work because they would have to stay home with their children, even when their abusive partners were unemployed (Wettersten, Rudolph, Faul, Gallagher, Trangrud, Adams, Graham, & Terrance, 2004). One woman explained

I lived with a man who used to beat me up so bad that I would lose a job. You won’t go to work all beat up. You know, your face all, black eyes and your hair pulled out and stuff (p. 453).

Lastly, participants talked about their work self-concept changing in a negative way in response to the violence. The women described a general feeling of lowered self-esteem or self-confidence. They also reported that specific work skills were impacted by the abuse (Wettersten, Rudolph, Faul, Gallagher, Trangrud, Adams, Graham, & Terrance, 2004). One gave the following description regarding how IPV lowered her work-related self-esteem:
Oh yes, oh yes because it would just, like um, a tape recorder for example. You know it just played over and over….The job I had would really kept [sic] me busy, but every once in a while it would like if I took a, from a smoke, if I took a smoke break, I would go out and start thinking about it and go back upstairs and then have to get rid of that crap to go back to working. So I mean that it was, I had to work myself into a better mood I guess…because then my self-esteem was starting to go down the toilet (p. 453).

Participants also were asked about the meaning they ascribed to work. Participants defined work as a means of achieving self-sufficiency needs, an event that accomplishes something, and an event that is enjoyable. The participants were also asked about their work goals, and the authors reported that they were clearly able to articulate their work interests, had a definite idea about what they wanted and did not want regarding work, and expressed both immediate and long-term work goals. The women reported their lack of basic living necessities as the major barrier to achieving their work goals. They also reported that shelter services were an important resource in obtaining work (Wettersten, Rudolph, Faul, Gallagher, Tranrud, Adams, Graham, & Terrance, 2004).

As with the previous study, a strength of the Wettersten et al. (2004) investigation is its focus on the impact of IPV on work for a population, survivors of IPV, that is underrepresented in the professional literature. Another strength of the Wettersten et al. study is the focus on women residing in a domestic violence shelter. Women residing in shelter as a result of intimate partner violence are a sub-population of domestic violence survivors. There are approximately 2,000 shelter programs throughout the United States, providing services to around 300,000 women and children per year (Ham-Rowbottom, Gordon, Jarvis, & Novaco, 2005; Johnson & Zlotnick, 2009; National Coalition Against
Domestic Violence, 2008). The literature to date suggests that survivors in shelter have lower incomes, less education, and more children compared to survivors not in shelter. Thus, survivors of IPV residing in shelter are especially in need of interventions designed to assist them in seeking stable employment and increasing their financial stability. Intimate partner violence research also indicates that survivors in shelter receive more frequent and more severe abuse and have also engaged in more help-seeking behaviors than non-shelter survivors (Gondolf & Fisher, 1988; Ham-Rowbottom, Gordon, Jarvis, & Novaco, 2005).

A limitation of the study is that the sample was not very generalizeable towards all women who experience IPV. The sample was limited to women residing in a single shelter. The sample also was small and seemed more educated than the average shelter population. Another limitation is that although the authors proposed a relationship between domestic violence and the ability to maintain and sustain stable employment, and a relationship between domestic violence and survivor’s self-concepts, these relationships were not empirically tested. Wettersten et al. (2004) argued that Domestic violence directly impacts both a woman’s vocational (and general) self-concept and her actual ability to work…Generally speaking, the moderating influence of domestic violence on a woman’s vocational self-concept and actual ability to work is negative and proportionate to the degree and intensity of psychological and physical violence experienced (p. 458).

The Wettersten et al. (2004) investigation emphasized the many ways IPV interrupts survivors’ work experiences, which is consistent with other speculation (Bowen, 1982; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Linville,
& Kaag, 2008; Chronister, & McWhirter, 2003; Chronister, Wettersten, & Brown, 2004). Further, Wettersten et al. (2004) illustrated that survivors are able to clearly articulate their work interests and goals and therefore are likely to be able to participate in a career counseling intervention. The Wettersten et al. (2004) study also suggested a more specific explanation for how IPV impacts a survivor’s ability to work (i.e., through decreasing her self-concept). Again, although this relationship was not actually tested in the Wettersten et al. (2004) investigation, it does illustrate the importance of exploring more specifically how IPV interferes with survivor’s work behaviors.

Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, and Farnsworth (2005) also sought to gain a better understanding of the personal and work lives of survivors of IPV in shelter. Brown et al. (2005) used consensual qualitative research and semi-structured interviews with 13 female survivors of IPV. Participants had a median age of 33 years, and had at least one minor child. They were diverse in terms of education (i.e., 62% completed some college or vocational training, 15% finished high school, 23% completed either grade 9 or 11) and employment status (i.e., 69% unemployed, 23% part-time employed, 8% full-time employed). Women were from two different shelters and answered questions pertaining to their shelter residency, substance abuse history, work and/or career behaviors, history of assistance from law enforcement and the legal system, and expectations for their future (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, & Farnsworth, 2005).

Following the procedures outlined for consensual qualitative research, Brown et al. (2005) identified six domains from the data analysis: shelter residency experience, substance abuse history, beliefs and values, work/career history and expectations, social
support/resources, and future expectations (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, & Farnsworth, 2005). The results that are most relevant to the present investigation are reported below.

Results suggested that, in general, the participants felt that the shelters were supportive and expected the shelters to assist them in seeking employment and becoming financially stable. The women talked about the shelters educating them about IPV and also normalizing and validating their abuse experiences. Nine of the participants emphasized the importance of counseling and requested continued therapy beyond shelter residency (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, & Farnsworth, 2005).

Typical responses from the participants (i.e., 12/13) suggested that the survivors expected to work. Eight of the participants indicated that the abuse from their partner negatively affected their work life. These participants described their work life being interrupted by their partner’s control tactics. The women also talked about feeling forced to quit jobs because of their partner’s lack of support and out-of-control behavior (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, & Farnsworth, 2005). One participant explained:

well, like I said he wouldn’t let me have a car even to go to work and then he’d get mad and then I wouldn’t have a ride to work, so I would either get fired or have to quit my job eventually (p. 461).

Women talked about their future expectations and expressed wanting a future involving financial stability, employment, and peace (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, & Farnsworth, 2005).
In order to “triangulate” (i.e., determine the validity and reliability of qualitative research) their findings, Brown et al. (2005) asked participants to complete measures of cognitive distortions (Cognitive Distortion Scale; Briere, 2000) and life satisfaction (Satisfaction With Life Scale; Diener, Emmons, Larsen, & Griffin, 1985). Analysis of these measures suggested that the women possessed a view of self that was intrinsically bad (i.e., self-criticism), were likely to blame themselves for negative events in their lives, even those out of their control (i.e., self-blame), felt a lack of control of their lives and assumed future efforts would be unsuccessful (i.e., helplessness), were pessimistic about the future (i.e., hopelessness), and viewed the world as a dangerous place (i.e., preoccupation with danger). Participants’ life satisfaction scores also suggested that the women were not very satisfied with their life and well-being (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, & Farnsworth, 2005). Brown et al. (2005) argued that these findings validate the abovementioned results from the structured interview.

Strengths of this investigation include a focus on the impact of IPV on survivors’ work experiences and the inclusion of participants from two different shelters. Another strength is the use of both qualitative and quantitative research methods. The small sample size, however, is a limitation of the study. Additionally, the failure to consider the chronicity of the abuse is a limitation. Another limitation is the confusing results reported regarding participants’ expectations about the future. Although Brown et al. (2005) suggested that the findings from the measures of cognitive distortions and life satisfaction validate the results from the structured interview, these results seem to reflect contradictory expectations from the participants regarding their futures. The data obtained from the interview suggested that participants held positive expectations about
their future and about work, but the information from the quantitative measures indicated that the participants felt helpless towards controlling their lives and held negative expectations about the future.

The findings from Brown et al. (2005) further emphasized IPV’s negative impact on survivors’ work experiences. This study also illustrated that financial independence and employment are two primary goals of survivors and that survivors recognize the role of counseling in achieving these goals. The confounding results regarding participants’ expectations about their future validate the importance of further research investigating survivors’ outcome expectations about work.

Most recently, Chronister, Linville, and Kaag (2008) argued that information was needed regarding career barriers and supports in order to develop more effective career services for survivors of IPV. Chronister, Linville, and Kaag (2008) conducted a qualitative analysis to “investigate the contextual barriers and supports that affect survivors’ career development and ability to access career counseling services” (p. 340). The investigators’ conceptualizations of career barriers and supports and research questions were based on social cognitive career theory (SCCT) (Chronister, Linville, & Kaag, 2008).

The investigation involved 11 survivors of IPV participating in a 90 minute focus group. All 11 women had previously participated in a study by Chronister (2006), at which time the effectiveness of ACCESS (Advancing Career Counseling and Employment Support for Survivors of Domestic Violence), a specific community-based career counseling service, was assessed. ACCESS was a five-session group career counseling program that utilized written exercises, individualized assessment,
information about work, role modeling, and building support to enhance survivor’s exploration and identification of career interests and skills, knowledge of career opportunities, connection to community resources, and planning of both short and long-term goals. The focus groups in this investigation were intended to determine the women’s perceived contextual barriers and supports to using ACCESS (Chronister, Linville, & Kaag, 2008).

The participants ranged in age from 20-55 years, and nine participants identified as Caucasian, one identified as African American, and one identified as Native American. All participants identified their abuser as a man. Six of the women were employed. Not all participants fully completed the ACCESS program. Three different 90 minute focus groups were led; four women participated in the first group, two participated in the second group, and five participated in the final focus group. The questions of the focus group were based on previous research regarding the career development needs and experiences of domestic violence survivors. All participants were asked the same questions. All focus groups were recorded and later transcribed (Chronister, Linville, & Kaag, 2008).

Initial data analysis included coding, thematic analysis, and thematic building. The research team also used triangulation at different levels to verify credibility, dependability, and confirmability of the data. Three domains were identified: effects of the IPV on women’s career development, barriers affecting women’s ability to access and participate in ACCESS and other career-related activities, and support affecting women’s ability to access and participate in ACCESS and other career activities (Chronister, Linville, & Kaag, 2008).
Half of the participants reported effects of IPV on career pursuits. Participants described partner control of education and career activities (Chronister, Linville, & Kaag, 2008), and one participant stated that “education and working was really hard because I was being controlled all the time…It was hard to hold down a job and be educated being with the men we were with” (p. 351). Another participant explained “finding a job and actually going out working on your own when your other spouse is, you know, takin’ over basically is really hard” (p. 351).

Participants also described a decrease in motivation towards work and lowered outcome expectations regarding work as a result of the abuse. They expressed feelings of frustration and talked about working as “pointless”, arguing that they did not have access to the money they earned (Chronister, Linville, & Kaag, 2008).

The participants discussed the barriers they faced participating in ACCESS. They reported their abusive partner, their discomfort in groups and new situations resulting from abuse, and the stigma associated with IPV as barriers to ACCESS. One participant explained that

If your spouse wouldn’t let you leave, if you would have to sneak around to go. Because in a lot of domestic violence situations there is a lot of control. And then he may not want you to go do a career thing, you know, or get out by yourself. Or just do anything. That would be a big barrier (p. 352).

Women also identified practical barriers, such as time constraints, competing obligations, and finding childcare as additional barriers to participating in ACCESS (Chronister, Linville, & Kaag, 2008).
Participants also identified supports that assisted them in participating in ACCESS. They responded positively to the program’s structure and weekly format, to its information and tools related to educational and career development. They also appreciated learning career information in a group format among other survivors of IPV (Chronister, Linville, & Kaag, 2008).

A strength of this investigation is that it provided specific information regarding the barriers and supports to both work and career counseling for 11 women. A limitation is that the sample consisted solely of participants from the community, was small, and not diverse in terms of race/ethnicity and sexual orientation, thus limiting the generalizeability of the results. Another limitation is the possibility for sampling bias, since 34 women were eligible for the study and asked to participate, yet only 11 women decided to take part in the investigation. Finally, the focus groups were relatively small (one group had only 2 participants), which may have impacted how participants responded to the questions.

The Chronister, Linville, and Kaag (2008) study provided recent documentation about IPV’s impact on survivors’ ability to work and participate in career counseling. This investigation also demonstrated the importance of exploring the possible impact of IPV on survivors’ work-related outcome expectations. Results from Chronister, Linville, and Kaag (2008) suggest that IPV negatively affects survivors’ outcome expectations regarding the benefits of working. This relationship was not actually tested in their study, however, so more research is needed.

Taken together, these four studies (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, & Farnsworth, 2005; Browne, Salomon, & Bassuk, 1999; Chronister,
Linville, & Kaag, 2008; Wettersten, Rudolph, Faul, Gallagher, Tranrud, Adams, Graham, & Terrance, 2004) validate speculation (Bowen, 1982; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Linville, & Kaag, 2008; Chronister, & McWhirter, 2003; Chronister, Wettersten, & Brown, 2004; Wettersten et al., 2004) that IPV impacts survivors’ work behavior. More specifically, these investigations illustrate that IPV is associated with a variety of challenges that interfere with survivors’ work, including difficulty maintaining a work schedule, difficulty concentrating at work due to both recent and/or anticipated abuse, and conflict with partners resulting from the survivor working. Results from these studies also confirm contentions (Briere, & Jordan, 2004; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Browne, 1993; Chronister, Brown, O’Brien, Wettersten, Burt, Falkenstein, & Shahane, 2009; Gelles, 1976; Hofeller, 1980; Okun, 1986) that financial stability and economic independence are important factors to consider in the discussion of the impact of IPV on work.

Findings from the Brown et al. (2005) and Chronister, Linville, and Kaag (2008) examinations suggest that IPV also affects survivors’ work-related outcome expectations; however, this relationship was not empirically tested in either investigation. Given that IPV appears to negatively influence survivors’ work, it is important to better understand the mechanisms behind this association. Professionals have proposed that IPV impacts survivors’ work behavior by influencing their work-related self-efficacy expectations and outcome expectations. This literature is examined next.
IPV’s Relation to Self-Efficacy and Outcome Expectations

The literature on IPV and work has speculated that IPV negatively influences survivors’ cognitions about work. More specifically, the literature to date postulates that IPV impacts survivors’ beliefs regarding their ability to successfully complete work-related tasks (i.e., self-efficacy expectations) and their beliefs about the consequences of engaging in work behaviors (i.e., outcome expectations).

In an early paper on this topic, Bowen (1982) suggested the IPV influences survivor’s perceptions about their ability to successfully seek and maintain employment. Bowen (1982) maintained that survivors of IPV may have difficulty describing their attributes and qualifications to a prospective employer and may also disclose perceived weaknesses and lack of ability during an interview. Bowen (1982) argued that survivors may not recognize how previous work experience translates into skills towards future employment. Indeed, Bowen (1982) explained that “a woman who has years of experience as a bookkeeper for her husband’s business may insist that she has no skills with which to seek employment” (p. 125). According to Bowen (1982), survivors of IPV may not feel confident regarding their abilities to successfully conduct various aspects of a job search including filling out an application, deciding on appropriate clothes to wear on an interview, and accepting a job. Bowen (1982) suggested that “she [survivor of IPV] may be convinced that she is incapable of getting a job, and may find the entire process overwhelming” (p. 125). Bowen (1982) also argued that survivors of IPV may have negative beliefs regarding the outcome of working. According to Bowen (1982), survivors of IPV may believe that they will make mistakes at work, resulting in getting punished.
Similarly, Chronister and McWhirter (2003) contended that “domestic violence, by its very nature, is likely to have pervasive negative effects on battered women’s career self-efficacy and outcome expectations” (p. 421). They suggested that the isolation associated with IPV impacts survivors’ efficacy expectations about work. According to Chronister and McWhirter (2003), abusers isolate survivors in such a way that “opportunities to attempt and succeed at many educational and career-related tasks might be severely restricted or sabotaged” (p. 419). These authors argued that the isolation also reduces exposure to role models and peers engaged in education and careers.

Chronister and McWhirter (2003) maintained that both the verbal and physical components of IPV impact survivors’ work-related self-efficacy expectations. They (2003) claimed that survivors of IPV may feel incompetent to succeed at school or work as a result of the constant verbal denigration from their abusers. Survivors of IPV are subjected to repeated physical injuries and often experience intense feelings of fear, anxiety, nervousness, and depression (Chronister & McWhirter, 2003). Chronister and McWhirter (2003) explained that “the physical states resulting from such abusive treatment may decrease the survivor’s self-efficacy related to keeping or finding a job, performing job tasks, accomplishing educational and training goals, or performing successfully in any setting” (p. 419).

Chronister and McWhirter (2003) further argued that survivors’ outcome expectations for education and work are likely influenced by the anticipated response of the abuser including economic abuse (i.e., making her ask for money, taking her paychecks), harassment at work, and interfering with work and school goals. As with work-related self-efficacy expectations, Chronister and McWhirter (2003) suggested that
both the verbal and physical aspects of IPV interfere with survivors’ work-related outcome expectations. Chronister and McWhirter (2003) emphasized that emotional and physical states of fear and anxiety as well as experiences of pain, discomfort, and shame may result in impaired job performance and absences from work. In turn, women’s absences from work may result in fewer opportunities for job skill development and mastery, position advancement, wage increases, and positive evaluations by supervisors. These data support the conclusion that women’s negative outcome expectations for work and career are a very realistic predictor of future failure (p.420).

In terms of education, Chronister and McWhirter (2003) argued that battered women who are enrolled in academic courses may not be able to focus in class and successfully perform no tests, lowering both self-efficacy and outcome expectations. Abusers may prevent women from completing assignments, studying, and purchasing required educational materials. As experiences of negative emotions increase and job or academic performance and evaluations decline, battered women are likely to experience dissatisfaction…Women-and their abusers-may attribute their poor performance to a lack of innate ability and become convinced that, despite their efforts, career and educational success is impossible. This process is likely to foster both negative self-efficacy and outcome expectations, resulting in fewer and less persistent attempts to define and pursue vocational goals (pp. 420-421).

Thus, Bowen (1982) and Chronister and McWhirter (2003) presented convincing arguments regarding IPV’s negative impact on survivors’ work-related self-efficacy expectations and outcome expectations, and implicit in these arguments is that such effects likely increase with length of abuse. Although it makes sense that the physical, verbal, and psychological components of IPV would influence survivors’ beliefs about their ability to engage in work behaviors and their beliefs about the consequences of working, neither of these articles actually tested the relationships between IPV and self-
efficacy expectations and IPV and outcome expectations. Rather, the relationships between IPV and self-efficacy expectations and IPV and outcome expectations were assumed. In order to better understand the dynamics behind IPV’s impact on survivors’ work lives, and in order to provide helpful career interventions to survivors, it is imperative to test these relationships.

Career Interventions and Developmental Models for Survivors of IPV

In addition to speculating about the connection between IPV and survivor’s cognitions about work, the extant literature proposes various career interventions and developmental models that incorporate components to improve survivors’ work-related self-efficacy expectations and outcome expectations.

Ibrahim and Herr (1987), for example, argued for the need for “comprehensive life-career counseling” (p. 244) for women experiencing intimate partner violence who have either left or decided to leave their abuser. They maintained that “support counseling is essential in the crisis stage, but a comprehensive counseling strategy is needed to help them move from a state of emotional, psychological, and economic dependence on the abuse toward a state of personal and psychological empowerment and economic independence” (p. 244). Ibrahim and Herr (1987) developed a life-career counseling intervention and implemented it with six women.

All participants had experienced intimate partner violence, which was defined by the investigators as “serious or repeated injury from the man with whom she lives” (p. 244). All of the women were White and from middle to low socio-economic backgrounds. Their education levels ranged from completing eighth grade to receiving a
high school diploma. Half of the women were still living with their abuser and considering separation or divorce and half were separated from their abusers and were considering divorce. All were full-time homemakers. The intervention was implemented in a group format, led by two female master’s-level counselors. There were two sessions each week, and each session was two hours in length. The sessions were held at a women’s center. The intervention included a total of 54 two-hour sessions. Two of the six participants dropped out of the intervention (Ibrahim & Herr, 1987).

The intervention consisted of eight phases. Although it primarily focused on self-concept development and vocational self-concept development, it also included components that addressed the participants’ work-related self-efficacy expectations. Ibrahim and Herr (1987) emphasized the importance of career counselors attending to survivor’s beliefs about their work abilities and competencies. Ibrahim and Herr (1987) explained that

in comparative terms, abused women will need greater support than will typical female clients in understanding and accepting their potential and abilities and in recognizing their strengths. In helping these women achieve such goals, the tasks of the counselor become very complex and include using appropriate role models in group counseling to enhance the sense of competence and acceptance among abused women. Abused women may be able to accept superficially that they are people of worth, but it takes positive experiences over time for them to internalize this concept (p. 247).

One phase of Ibrahim and Herr’s (1987) career intervention (Phase 1: Inner Preparation) focused on addressing participants’ fears regarding testing their potential and utilizing their skills in the world of work. Another phase (Phase 4: Vocational Planning) attended to participants’ self-appraisals of vocational possibilities. In Phase 5, Vocational
Implementation, participants discussed their fears, anxieties, and self-doubt about work (Ibrahim & Herr, 1987). These phases seem consistent with a social cognitive perspective.

By recognizing that survivors of IPV have increased difficulty identifying their work abilities and strengths, and by attending to participants’ fears, self-appraisals, and self-doubts regarding work in the intervention, it appears that Ibrahim and Herr (1987) presumed IPV’s association with decreased self-efficacy expectations about work. Ibrahim and Herr (1987) did not report data, however, to justify this assumption or support these inclusions in the intervention. An empirical investigation of the relationship between IPV and work-related self-efficacy expectations and outcome expectations is warranted before additional career interventions for survivors are created.

Nevertheless, a strength of their work is that it sought to create a vocational intervention to address the career needs of survivors of IPV. There are, however, many limitations to it as well. First, the sample size was small and two out of the six participants dropped out of the intervention, a 33% drop out rate. Second, all of the participants were White and none resided in a domestic violence shelter. A third limitation was Ibrahim and Herr’s definition of abuse, as it included only violence occurring in heterosexual, married couples. All of these limitations circumscribe the applicability of the intervention. A fourth limitation is the lack of information regarding the participants’ responses to the therapy. Ibrahim and Herr (1987) briefly reported on participants’ reactions to their phase 3 intervention, but did not provide details of the participants’ feedback regarding the overall experience of the therapy. Feedback from the
participants is especially important, as there has been limited career intervention research with this population.

Following up on this line of thinking, Gianakos (1999) contended that abuse experiences likely impact survivors’ abilities to successfully engage in career-related competencies. Gianakos (1999) provided a career intervention for 20 self-identified battered women. All of the participants were White, ranged in age from 25-46 years, and were enrolled in college or training programs. Five of the participants were separated from their abusers, 15 lived with their abusers, and 8 expressed intentions to leave. Six of the women were employed, and the others were unemployed. All participants’ socioeconomic status was described as working or low class. The intervention was based primarily on Salomone’s (1988, 1993) five career-counseling phases, but she drew from various psychological theories during different stages. The five stages were: Understanding the Self, Understanding the World of Work, Understanding the Decision-Making Process, Implementing Educational and Vocational Decisions, and Adjusting to the Work and School Environment. The stage most relevant to the present investigation, that is, the stage that addressed the self-efficacy expectations of the participants, was labeled Understanding the Self. This stage is described below (Gianakos, 1999).

The focus of the Understanding the Self phase was to address the participants’ lowered percepts of self-efficacy and to increase self-knowledge. Gianakos (1999) used Bandura’s (1977) Social Cognitive Theory to shape the tactics used to increase participants’ work-related self-efficacy expectations. More specifically, she suggested addressing survivors’ self-efficacy expectations about work via Bandura’s four avenues to self-efficacy: verbal persuasion, emotional arousal, vicarious learning, and
performance accomplishments. Gianakos (1999) strengthened participants’ self-efficacy expectations through utilizing verbal persuasion (i.e., by examining survivor’s cognitions and feelings about themselves, reframing references to self within the context of the abuse, and identifying areas of competence), emotional arousal (i.e., examining survivors’ negative self-talk and encouraging them to utilize cognitive control and behavioral methods to manage anxiety responses), vicarious learning (i.e., having participants interact with other survivors), and performance accomplishments (i.e., seeking out career information). This phase concluded with participants discussing what they learned about themselves and examining how this information would be used in their career search (Gianakos, 1999).

As with the intervention proposed by Ibrahim and Herr (1987), Gianakos’ (1999) developmental framework for providing career counseling to survivors of IPV assumed a relationship between IPV and work-related self-efficacy expectations and outcome expectations. Gianakos (1999) appeared to recognize this presumption and argued that “future research is needed to specifically examine the personal, situational, and attitudinal traits of battered women that are related to successful completion of career-related competencies as well as identify those techniques in the intervention process that effectively address personal career issues made within the context of violent relationship” (p. 14).

A strength of this investigation is that it was an initial career intervention designed to address the vocational needs of survivors of IPV. Limitations include the homogeneous sample in terms of race and socioeconomic and the lack of quantitative data regarding participants’ responses to the intervention.
In response to the lack of empirical evidence available to guide career intervention practices with survivors of IPV, Chronister and McWhirter (2006) sought to develop and experimentally examine the effectiveness of two research-based group career intervention programs, the Advancing Career Counseling and Employment Support for Survivors (ACCESS), for survivors of IPV. The interventions were identified as standard and standard-plus. A fundamental goal of both interventions was to increase survivors’ confidence in their ability to explore long-term career opportunities, to clarify their work goals, and to increase the likelihood that survivors would pursue work goals. Both interventions involved career intervention components identified by Brown and Krane (2000). One intervention (standard-plus) also was designed to enhance participants’ critical consciousness (Chronister & McWhirter, 2006).

Both ACCESS interventions (standard and standard-plus) used SCCT as a framework and consisted of five two-hour weekly group sessions. The sessions focused on facilitating participants’ exploration of career interests, awareness and development of work skills, knowledge and utilization of community resources, and identification and planning of career goals. The standard-plus ACCESS intervention also included strategies for increasing participants’ critical consciousness in order to enhance their awareness and understanding of the impact of IPV on their career development. There were a total of 23 intervention groups (8 control, 7 standard intervention, 8 standard-plus intervention). Interventions were conducted by counseling and clinical psychology female doctoral students (Chronister & McWhirter, 2006).

Data for 72 women were included in the posttest analysis. Participants had a median age of 37 years. Fifty-four participants identified as European American, 5
identified as Latina, 1 identified as Pacific Islander, 4 identified as American Indian, 4 identified as biracial, 3 identified as multiracial, and 1 identified as other. Forty-two of the women were employed and 53 reported having at least 1 child. Participants’ education backgrounds varied (1 finished grade school; 2 completed some high school; 17 finished high school; 30 had some college; 8 completed an associate’s program; 13 had a bachelor’s degree; 1 had a professional degree). Inclusion criteria included being in an abusive intimate partner relationship in the past 5 years and meeting abuse criteria of the Abuse Experience Checklist (Chronister & McWhirter, 2006).

Participants completed pretest measures and were randomly assigned to the wait-list control, standard intervention, or standard-plus intervention group. Participants who were originally assigned to the wait-list group were randomly assigned to either the standard or standard-plus intervention group 5 weeks into the intervention. Participants completed posttest measures during the last program session, and 5 weeks after each participant completed a program; the researchers mailed the follow-up measures. The measures included the Four Factor Index of Social Status (Hollingshead, 1975), Abuse Experience Checklist, Career-Search Self-Efficacy Scale (Solberg, Good, & Nord, 1994), Career Outcome Expectations Scale (developed for this study), Critical Consciousness of Domestic Violence Measure (developed for this study), Battered Women’s Perceived Career Barriers Measure (developed for this study), Battered Women’s Perceived Career Support Measure (developed for this study), and Goal Identification and Ranking Measure (developed for this study) (Chronister & McWhirter, 2006).

Chronister and McWhirter (2006) conducted two one-way multivariate analyses of covariance (MANCOVAs) to determine treatment effects at posttest. Results
suggested that intervention participants’ career-search self-efficacy and critical consciousness scores at posttest were significantly higher than were those of wait-list participants. Treatment participants, however, did not score significantly higher than wait-list participants regarding outcome expectations and perceived support, nor did they score significantly lower in perceived barriers. Chronister and McWhirter (2006) provided various potential explanations for the outcome expectations results. They contended that the participants’ outcome expectations were already high and that simply the decision to participate in the intervention raised their outcome expectations.

Chronister and McWhirter (2006) also argued that their COES was not a valid measure of career outcome expectations. Lastly, they argued that

> it also may be that living in a violent situation may be a qualitatively different experience of oppression than oppression based on race-ethnicity and so forth (Chronister & McWhirter, 2004), and as such, outcome expectations are not as low as has been reported for other groups (Chronister & McWhirter, 2006, p. 159).

Chronister and McWhirter’s (2006) experimental examination of career interventions with survivors of IPV demonstrated both the benefit of attending to survivors’ work-related self-efficacy (in this case career-search self-efficacy) and the need for future research regarding survivors’ outcome expectations about work. A strength of this investigation is that it empirically tested career interventions designed for a specific, underserved population with complex and multifaceted career needs. Limitations include a relatively homogeneous sample regarding race/ethnicity and a lack of control group at follow-up. Measurement may also be a limitation as several of the
measures were developed for the study. This is not necessarily a weakness, particularly regarding the measurement of SCCT variables, as the theory demands measures that are task specific and require measurement specificity (Lopez et. al., 1997; Smith & Fouad, 1999).

Overall, the career interventions of Ibrahim and Herr (1987), Gianakos (1999), and Chronister and McWhirter (2006) demonstrate the recognition in the professional literature of the importance of attending to IPV survivors’ work-related self-efficacy expectations and outcome expectations. The interventions also validate the applicability of Bandura’s (1977) Social Cognitive Theory with this population. With the exception of Chronister and McWhirter’s (2006) intervention, the association between IPV and work-related self-efficacy expectations and outcome expectations was assumed. Chronister and McWhirter (2006) utilized the limited extant research (Albaugh & Nauta, 2005) to support the presumed relationship. Although it makes sense that IPV would impact both survivors’ beliefs about their ability to successfully seek and maintain employment and their beliefs about the consequences of working, very little research has actually empirically tested this association. It seems reasonable to suggest, then, that before designing additional career interventions to improve survivors’ work-related self-efficacy expectations and outcome expectations, this relationship must be tested.

Work-Related Self-Efficacy Expectations and Outcome Expectations of Survivors of IPV

An investigation by Brown, Reedy, Fountain, Johnson, and Dichiser (2000) examined the factors that contribute to self-efficacy for career decision-making tasks in survivors of domestic violence and how such factors relate to employment status. The
authors based their hypotheses on Bandura’s (1977, 1982) theory regarding self-efficacy’s role in goal achievement. Brown, Reedy, Fountain, Johnson, and Dichiser (2000) postulated that

Given the social isolation and restricted environment that many battered women describe, it is likely that some battered women have not been afforded opportunities to experience Bandura’s (1977) personal performance accomplishment (i.e., success experiences). This limitation of success experiences may create self-doubt about one’s ability to accomplish certain tasks. In addition, it could be argued that the other sources of self-efficacy development, namely, vicarious learning and social persuasion have also been largely unavailable in light of social isolation and the abuser’s need to control and keep the battered woman dependent (p. 253).

There were four overall purposes of the Brown et al. (2000) study. The first goal was to conduct an exploratory analysis of the career barriers experienced by survivors of domestic violence who seek services at shelter. The second aim was to determine if employed and unemployed survivors of abuse differed on career and self-identity variables. The third purpose was to explore the relationships among career and self-identity variables. The final goal was to investigate the value of perceived career barriers and self-identity variables as predictors of domestic violence survivors’ career decision-making self-efficacy (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000).

Seventy-one survivors of intimate partner violence residing in domestic violence shelters participated in the study. The sample was racially/ethnically diverse (i.e., 32 Caucasian, 23 African American, 3 Hispanic, 3 Native American, 4 other, and 6 did not report) and ranged in age from 18-57 years, with a mean age of 32 years. The women also were diverse in terms of education (i.e., 35% did not compete high school; 28% were
high school graduates; 14% participated in some college; 4% received undergraduate
degree; 7% received a professional degree; 1% received a graduate degree; 7% reported
other educational training; 4% did not report) and employment status (i.e., 56%
unemployed; 24% full-time employed; 13% part-time employed; 7% did not report).
They completed the following measures: the Career Decision-Making Self-Efficacy
Scale-Short Form (CDMSE-SF; Betz, Kelin, & Taylor, 1996), the Career Barriers
Inventory-Revised (CBI-R; Swanson & Daniels, 1995c), the Rotter Internal-External
Control Scale (I-E; Rotter, 1966), the Coopersmith Self-Esteem Inventory, Adult Form
(SEI; Coopersmith, 1987); the Work-Role Attitude scale (Hardesty & Bokemeier, 1989),
and a demographic questionnaire. In addition to the traditional questions asking for
background information, the demographic questionnaire also requested feedback from the
participants regarding how the shelter might help survivors of domestic violence in career
planning and implementation (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000).

The participants reported racial discrimination, inadequate preparation, and
dissatisfaction with career as barriers to career pursuits. They also provided information
regarding what the shelters could do to assist in career planning and implementation.
They suggested that the shelters could assist with career development (e.g., help with
matching interests/abilities with jobs), education (e.g., how to get into school), meeting
basic needs (e.g., housing), and providing emotional support (e.g., coping with abuse and
increasing self-esteem).

Means and standard deviations revealed that the women in this study reported
significantly lower career decision-making self-efficacy and self-esteem than was found
in female college samples and adult women in previous research (Betz, Klein, & Taylor,
1996; Coopersmith, 1987). Further, t-tests showed differences in career decision-making self-efficacy and work-role attitudes between women who were employed and women who were unemployed, suggesting that women who were employed reported significantly higher levels career decision-making self-efficacy and less traditional attitudes than did the domestic violence survivors who were unemployed. Pearson product moment correlations also revealed relationships between career and self-identity variables. More specifically, self-esteem and career decision-making self-efficacy were positively related, internal locus of control was positively related to self-esteem, and perceptions of career barriers were positively related to an external locus of control orientation. A multiple regression analysis indicated that self-esteem was the most significant predictor of career decision-making self-efficacy for this population of domestic violence survivors (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000).

The authors suggested that the results from this investigation highlight the importance of shelter staff exploring potential internal and external career barriers with shelter residents. They also proposed that “identification of inadequate career preparation as a barrier to battered women’s career pursuits suggests that these women need job and educational training, assessment of their vocational interests, and assistance in identifying transferable job skills” (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000, p260). Finally, Brown et al. (2000) argued that these results illustrate that “if battered women are to possess confidence in their ability to make career decisions, then shelter staff should target interventions that help them to improve their self-evaluation and empower them to believe they have control of the reinforcement sources in their life” (p. 262).
Strengths of this study include the large and diverse sample. Another strength is that the participants were from six different shelters. A final strength is that the investigation included both qualitative and quantitative means to obtain career-related information from survivors of domestic violence. A limitation of this study, though, is the lack of information regarding the procedures of the investigation. It is unclear how the data were collected. Another limitation is that the investigation did not actually examine the relation of IPV to efficacy expectations. Rather, the authors compared the career decision-making self-efficacy expectations among employed and unemployed survivors of IPV. The study also did not investigate the relationship between IPV and work-related outcome expectations, or the association between work-related self-efficacy expectations and outcome expectations. Lastly, the authors did not assess participants’ IPV history. Participants did not complete a measure that calculated the type, frequency, or intensity of the IPV they experienced.

Although the demographic questionnaire included an item regarding the length of abuse, the authors did not use this information in any of the analyses. This is unfortunate as research has suggested that length of abusive relationship impacts psychological outcomes in survivors. Follingstad, Wright, Lloyd, and Sebastian (1991) compared rates of physical and psychological symptoms across two groups of survivors of IPV; women with three or fewer experiences of violence and no further incidents within two years, and women in long-term and ongoing abusive relationships. Results suggested that abuse of longer duration predicted more symptoms than did short-term abuse (Follingstad, Wright, Lloyd, & Sebastian, 1991). Length of time in an abusive relationship may similarly be related to work-related self-efficacy expectations in survivors.
Chronister and McWhirter (2004) sought to examine ethnic differences in career-related variables relevant to survivors of domestic violence in order to extend the literature. The authors examined the abuse histories, career-related supports and barriers, vocational self-efficacy, and career outcome expectations of 74 adult women residing in domestic violence shelters in four West Coast and Pacific Northwest states. They predicted that women of color would anticipate greater difficulty overcoming future barriers, need more support, and have lower career self-efficacy and outcome expectations than European American women. They also hypothesized that abuse history would be positively related to perceived barriers and negatively related to perceived supports, self-efficacy expectations, and outcome expectations for both women of color and European American women. Last, they expected positive relationships between supports and self-efficacy and supports and outcome expectations, and negative relationships between barriers and self-efficacy and barriers and outcome expectations for both groups. The results most relevant to the present investigation are described below (Chronister & McWhirter, 2004).

A total of 43 participants identified as European American, and they had a mean age of 37 years and varied in terms of educational status (i.e., 2% completed grade school; 19% completed some high school; 28% completed high school; 37% completed some college; 14% completed and associate’s or bachelor’s degree) and employment status (i.e., 14% not employed; 23% employed in unskilled and semiskilled work; 2% in skilled manual work; 21% in clerical, sales, and semiprofessional work; 2% in minor professional work; and 37% did not report occupational history). Most (i.e., 78%) of the European American women had children residing with them in shelter. Thirty-one
participants were women of color (8 Latina; 6 African American; 5 Native American; 8 biracial; and 4 multicultural) and they had a mean age of 31. They, too, varied in terms of education (i.e., 7% some grade school; 2% finished grade school; 19% completed some high school; 36% finished high school; 16% completed some college; 20% received an associate’s or bachelor’s degree) and employment status (i.e., 42% unemployed; 17% employed in unskilled and semiskilled work; 7% in skilled manual work; 13% in clerical, sales, and semiprofessional work; 3% in administrative work; 19% did not provide occupational information). Most (i.e., 86%) of these women also had children residing in shelter with them (Chronister & McWhirter, 2004).

Research packets of ten measures (eight were used in this study) were mailed to shelter residents. Completed packets were returned to the investigators by shelter directors. Participants completed: the Hollingshead’s four-factor index of social status (Hollingshead, 1975), the abuse experiences checklist, a revised version of the vocational skills and self-efficacy measure (VSSE; McWhirter, Rasheed, & Crothers, 1998), the career search self-efficacy scale (CSES; Solberg, Good, & Nord, 1994), the career outcome expectations measure (COE; developed for this study), the hope scale (Snyder et al., 1991), a perceived career support measure (PCS; developed for this study), and a perceived career barriers measure (PCB; developed for this study). Participants also completed a demographic questionnaire (Chronister & McWhirter, 2004).

Chronister and McWhirter conducted a one-way multivariate analysis to test whether women of color anticipated greater difficulty overcoming future barriers, needed more support, and had lower vocational skills self-efficacy and outcome expectations than did European American women. No multivariate effect was found. Chronister and
McWhirter analyzed zero-order correlation matrices to test the predicted relationships between abuse history and perceived barriers, perceived supports, self-efficacy expectations, and outcome expectations, between supports and self-efficacy and outcome expectations, and between barriers and self-efficacy and outcome expectations. Abuse history was not significantly related to vocational skills self-efficacy or outcome expectations for either group. Another MANOVA revealed no main effects for length of time in abusive relationship and group membership regarding the dependent variables (i.e., vocational skills self-efficacy, outcome expectations, perceived difficulty overcoming future barriers, and anticipated future support needed) (Chronister & McWhirter, 2004). The authors explained that these results “seem to indicated that there are qualitative differences as opposed to quantitative differences among ethnic minority and European American women’s career self-efficacy and outcome expectations and perceptions of career barriers and supports” (Chronister & McWhirter, 2004, p. 180).

A strength of this study is that it was the first to investigate explicitly potential ethnic differences in social cognitive career variables. Another strength is that the authors examined whether length of time in the violent relationship related to participants’ vocational skills self-efficacy and/or career outcome expectations. A limitation is that many women residing in the shelter decided not to participate in the study, thus the sample may not be representative of all women in shelters. Another limitation is that all women of color were combined into one group and this ignores the potential differences between racial/ethnic groups. The authors also did not distinguish between types of IPV. Relationships between IPV and vocational skills self-efficacy and IPV and career outcome expectations may be different when specific forms of violence are considered.
Lastly, a number of the measures were developed for this study and their use has not been validated in other research.

Albaugh and Nauta (2005) added to the IPV literature by addressing the gap in the literature on relationships between college women’s intimate partner violence experiences and career development. Albaugh and Nauta (2005) assessed the degree to which experiencing partner violence was associated with career decision self-efficacy and perceived career barriers. They predicted that the extent of women’s experiences with IPV would be negatively related to career decision self-efficacy and positively related to perceived career barriers (Albaugh & Nauta, 2005).

A total of 129 female college students from a large Midwestern university participated in the study. Eighty-two percent of the participants identified as Caucasian, 12% as African American, 2% as Hispanic, 2% as Asian American, 2% as biracial, and 2% as some other race. The majority of the students were between the ages of 19 and 25 (90%) and were unmarried and living apart from their partner (93%). The students completed the Career Decision Self-Efficacy Scale-Short Form (CDSES-SF; Betz, Klein, & Taylor, 1996), the Career Barriers Inventory-Revised (CBI-R; Swanson et. al., 1996), the Conflict Tactics Scale-Revised (CTS2), and the Mood and Anxiety Symptom Questionnaire-Short Form (MASQ; Watson & Clark, 1991) in small-group sessions (Albaugh & Nauta, 2005).

Albaugh and Nauta (2005) used the annual prevalence scoring method for the CTS2 to determine the percent of women who reported having experienced at least one instance in the past year of each of the forms of violence assessed by the CTS2 (i.e., psychological, physical, and sexual, injury, and negation). The students’ responses to the
CTS2 demonstrated frequent occurrences of IPV. Results showed that psychological aggression, physical assault, and injury were not significantly related to any of the career decision self-efficacy subscales (i.e., engaging in accurate self-appraisal, gathering occupational information, engaging in goal selection, planning for the future, and engaging in problem solving). Sexual coercion, however, was significantly negatively associated with students’ confidence in their ability to engage in accurate self appraisal, to select goals, and to problem solve career decision-making challenges. Also, the degree to which participants engaged in negotiation with their partner was positively related with career goal-selection self-efficacy. Three hierarchical linear regression analyses demonstrated that the relationship between IPV and career decision self-efficacy was not fully accounted for by symptoms of depression (Albaugh & Nauta, 2005).

Albaugh and Nauta (2005) argued that their results suggested that the relationship between IPV and career development constructs varies depending on both the type of violence experienced and the career development variables being assessed. They explained that

In this study, the frequency with which women had experienced sexual coercion was associated with lower career decision self-efficacy (with respect to perceived ability to engage in accurate self-appraisal, select goals, and problem solve), even after we controlled for symptoms of depression. On the other hand, negotiation with an intimate partner was positively associated with goal-selection self-efficacy. However, other forms of intimate partner violence were not uniquely associated with any forms of career decision self-efficacy, and self-efficacy with respect to obtaining occupational information and planning for the future appeared to be independent from all forms of intimate partner abuse (Albaugh & Nauta, 2005, p. 301).
Albaugh and Nauta (2005) recognized that their findings were different than those of Brown et al. (2000) and suggested that the conflicting conclusions may be a result of assessing specific forms of IPV. Albaugh and Nauta (2005) argued that

Brown et al. (2000) found the extent of abuse to be unrelated to career decision self-efficacy. However, Brown et al., did not distinguish among types of partner violence. The nonsignificant associations between intimate partner violence and career decision self-efficacy in this study mirror the findings by Brown et al. when the violence is conceptualized as psychological aggression, physical assault, or injury. However, given that sexual coercion was related to career decision self-efficacy in a way that was different from the other forms of violence, it may be productive to examine associations between specific forms of violence and self-efficacy among battered women as well” (p. 302).

The method of assessing IPV was a major strength of this study. Albaugh and Nauta’s (2005) investigation was the first study to examine whether types of IPV differently impact the relationship between IPV and work-related self-efficacy expectations. Other strengths of this study include the use of statistically sound instrumentation and initiating the examination of the possible impact of IPV on college women’s career development. However, utilizing a college sample does limit the generalizability of the results, as college women may differ from other women who experience IPV in a number of ways including age, level of education, degree of financial dependence on one’s partner, length of time in abusive relationship, and developmental stage of career decision making. These differences may impact how the different types of IPV relate to career constructs. The racially/ethnically homogeneous sample is another limitation. The study also did not investigate the relationship between IPV and work-related outcome expectations, or the association between work-related self-efficacy
expectations and outcome expectations. Finally, the authors did not obtain information regarding participants’ length of time in the abusive relationship.

Taken together, these three studies (Albaugh & Nauta, 2005; Brown et al., 2000; Chronister & McWhirter, 2004) validate the applicability of Bandura’s (1977) Social Cognitive Theory with survivors of IPV and illustrate the recognition in the current professional literature of the importance of better understanding the dynamics behind IPV’s impact on survivors’ work lives. Brown et al. (2000) found that their shelter population endorsed lower career-decision-making self-efficacy than has been found in female college student samples. These results suggested that IPV may impact survivors’ work-related self-efficacy expectations and supported further investigation of this relationship.

The studies by Albaugh and Nauta (2005) and Chronister and McWhirter (2004) are the only two examinations that have assessed the relationship between IPV and work-related self-efficacy expectations and outcome expectations. These investigations presented conflicting results. Chronister and McWhirter (2004) found that abuse history was not related to vocational skills self-efficacy expectations or career outcome expectations. Albaugh and Nauta’s (2005) results showed that sexual coercion was significantly negatively associated with students’ confidence in their ability to engage in accurate self appraisal, their ability to select goals, and their ability to problem solve career decision-making challenges. These contradictory findings may be accounted for by how IPV was assessed in the studies. Chronister and McWhirter (2004) assessed IPV as a single construct, thus not distinguishing between types of violence. Albaugh and Nauta (2005), on the other hand, examined how different forms of IPV may relate to self-
efficacy expectations. It seems reasonable to suggest that types of violence may
differentially impact survivors’ beliefs regarding their ability to successfully seek and
maintain employment and their beliefs about the consequences of work. The conflicting
results in the Albaugh and Nauta (2005) and Chronister and McWhirter (2004) studies
illustrate why more research in this area is needed.

Summary

This chapter provided a review of the literature pertaining to the present study. It
began with a description of the empirical investigations that have explored IPV in
relation to general career constructs such as decision-making skills, readiness, and
behavior. Next, the chapter reviewed the literature that proposed IPV’s negative influence
on survivors’ self-efficacy regarding their ability to successfully seek and maintain
employment and their beliefs about the consequences of work. The career interventions
and developmental models designed for IPV survivors that included components which
aim to increase survivors’ work-related self-efficacy expectations and outcome
expectations were then explored. Finally, a review of the limited empirical literature
examining specifically the relationship between IPV and work-related self-efficacy
expectations and outcome expectations followed.

The extant literature (Brown, Linnemeyer, Dougherty, Coulson, Trangsrud, &
Farnsworth, 2005; Browne, Salomon, & Bassuk, 1999; Chronister, Linville, & Kaag,
2008; Wettersten et al., 2004) firmly established a connection between IPV and negative
work influences and outcomes. More specifically, these investigations illustrated that IPV
is associated with a variety of challenges that interfere with survivors’ work, including
difficulty maintaining a work schedule, difficulty concentrating at work due to both recent and/or anticipated abuse, and conflict with partners resulting from the survivor working. These examinations also confirmed contentions (Briere, & Jordan, 2004; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Browne, 1993; Chronister et al., 2009, Gelles, 1976; Hofeller, 1980; Okun, 1986) regarding the importance of financial stability and economic independence for IPV survivors. These studies contributed to the professional literature on IPV’s negative influence on survivors’ work, yet they did not provide explanations or evidence regarding how IPV impacts work.

Bowen (1982) and Chronister and McWhirter (2003), however, presented convincing arguments regarding the mechanisms behind the association between IPV and survivors’ work-related self-efficacy expectations and outcome expectations. Bowen (1982) maintained that IPV impacts survivors’ confidence in their ability to successfully conduct a job search, verbalize their attributes and qualifications, and recognize their job skills. Bowen (1982) also predicted that survivors would likely believe they would make mistakes at work that would result in punishment. Similarly, Chronister and McWhirter (2003) argued that the various components of IPV (e.g., isolation, verbal denigration, physical attacks) lead to survivors feeling incompetent to succeed at school or work, and they suggested that survivors’ outcome expectations for education and work are likely shaped by the anticipated response of the abuser. Implicit in both of these arguments is the assumption that more time in an abusive relationship results in more “learning experiences” which may undermine the woman’s self-efficacy and outcome expectations.

Qualitative findings from the work of Brown et al. (2005) and Chronister, Linville, and Kaag (2008) suggest that IPV affects survivors’ outcome expectations about
work. Further, career interventions and developmental models (Chronister & McWhirter, 2006; Gianakos, 1999; & Ibrahim & Herr, 1987) have incorporated components to improve survivors’ work-related self-efficacy expectations and outcome expectations. These interventions suggest the applicability of Bandura’s (1977) Social Cognitive Theory with survivors of IPV and also demonstrate the recognition in the professional literature of the importance of attending to survivors’ beliefs about their ability to successfully seek and maintain work and their beliefs about the consequences of work. However, with the exception of the intervention presented by Chronister and McWhirter (2006), which utilized limited research (Albaugh & Nauta, 2005), the association between IPV and work-related self-efficacy expectations and outcome expectations was presumed in this literature.

Only studies by Albaugh and Nauta (2005) and Chronister and McWhirter (2004) empirically assessed the relationship between IPV and work-related self-efficacy expectations and outcome expectations. These investigations presented contradictory results, however, regarding these associations. Chronister and McWhirter (2004) found that abuse history was not related to either vocational skills self-efficacy expectations or career outcome expectations. Albaugh and Nauta’s (2005) results, however, showed that the experience of sexual coercion by an intimate partner was significantly negatively associated with some aspects of female college students’ career self-efficacy expectations. The conflicting results in the Albaugh and Nauta (2005) and Chronister and McWhirter (2004) studies illustrate why more research in this area is needed. Additionally, Albaugh and Nauta (2005) provided a compelling argument for examining associations between specific forms of violence and self-efficacy expectations and
outcome expectations among battered women. These researchers’ failure, however, to consider length of time an abusive relationship in relation to type of IPV somewhat limits the conclusions that can be drawn from their data.

Purpose

Thus, the purpose of the present investigation is to answer the calls from numerous authors (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Wettersten, & Brown, 2004; Chronister, & McWhirter, 2006; Gianakos, 1999; Wettersten, Rudolph, Faul, Gallagher, Trangsrud, Adams, Graham, & Terrance, 2004) to extend counseling psychology’s focus on the vocational needs of survivors of intimate partner violence. Consistent with previous research (Albaugh & Nauta, 2005; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, 2006; Chronister, Linville, & Kaag, 2008; Chronister & McWhirter, 2004; Chronister & McWhirter, 2006), the present study used Bandura’s Social Cognitive Theory (1977, 1982, 1986) as its theoretical framework. More specifically, this investigation conceptualized psychological/emotional victimization as a form of Bandura’s (1977, 1982) verbal persuasion learning experience. The present study investigated the relationship between psychological/emotional victimization (e.g., intense criticism, put-downs, verbal harassment, denial of access to resources, restriction of freedom, intimidation, and the implicit or explicit threat of the loss of something) and work-related self-efficacy expectations (e.g., survivors’ confidence in their ability to look for a job, complete a job interview, regularly attend work and perform job tasks) and work-related outcome expectations (i.e., survivors’ beliefs about the consequences of finding and maintaining employment).
The second purpose of this study is to continue a history of examining the relationship between self-efficacy expectations and outcome expectations (Gainor & Lent, 1998; Lopez, Lent, Brown, & Gore, 1997; Smith & Fouad, 1999). In particular, the present study assessed the relationship between IPV survivors’ work-related self-efficacy expectations and their work-related outcome expectations.

The third purpose of this study is to investigate more systematically than has been done in the past whether length of time in an abusive intimate partner relationship moderates the associations between IPV and work-related self-efficacy expectations and outcome expectations. In particular, this study maintained that survivors who are in longer abusive relationships are likely exposed to more of Bandura’s (1977, 1982) learning experiences (i.e., verbal persuasion) by their partner. Therefore, based on Bandura’s (1997, 1982, 1986) Social Cognitive Theory, it seems reasonable that the associations between IPV and work-related self-efficacy expectations and outcome expectations would be stronger for survivors of longer abusive relationships.

The final purpose of this study is to assess survivors’ goals for employment. Implicit in the literature is the contention that survivors with stronger work-related self-efficacy expectations and positive work-related outcome expectations, have stronger goals to work. Thus, assessing survivors’ goals for employment is an exploratory objective of this study. A conceptual model of the purposes of this investigation is visually represented by Figure 1.
Hypotheses

The present study sought to investigate the relationship between psychological/emotional victimization and work-related self-efficacy expectations and outcome expectations among survivors of IPV. The present study also sought to examine whether abuse chronicity moderates the associations between IPV and self-efficacy expectations and outcome expectations. The following hypotheses are presented:

Hypothesis 1a: Psychological/emotional victimization predicts work-related self-efficacy expectations beyond the contribution of physical abuse among female survivors of IPV.

Hypothesis 1b: Psychological/emotional victimization predicts work-related outcome expectations beyond the contribution of physical abuse among female survivors of IPV.
Hypothesis 2: Work-related self-efficacy expectations and work-related outcome expectations are positively associated among female survivors of IPV.

Hypothesis 3a: Chronicity of abuse moderates the association between psychological/emotional victimization and work-related self-efficacy expectations among female survivors of IPV.

Hypothesis 3b: Chronicity of abuse moderates the association between psychological/emotional victimization and work-related outcome expectations among female survivors of IPV.
CHAPTER III

METHODS

Participants and Procedures

After obtaining Institutional Review Board approval, the researcher approached domestic violence shelters via an e-mail message or phone call regarding the aims of this study and asked for permission to recruit residents for study participation.

Participants were survivors of intimate partner violence who had experienced psychological/emotional victimization from a romantic partner within the past six months. Previous research (Chronister et al., 2009) used a similar time cutoff when assessing for IPV. Women were recruited from twelve domestic violence shelters within Ohio and Pennsylvania. Eighty-eight (75.2%) participants were residing in urban shelters and twenty-nine (24.8%) were from shelters in more rural neighborhoods.

One of two processes was used to recruit participants and inform them about the study; the process chosen for a given shelter was based on the preferences and recommendation of the shelter. The principal investigator went to some of the shelters and informed the residents about the research project and explained the questionnaires, the inclusion criteria for the study, and the various parts of the informed consent. The investigator then remained at the shelter while the residents completed the questionnaires and was available for questions from the residents. In other cases the shelter managers
requested that the shelter staff administer the questionnaires using directions given by the researcher and they then returned the completed questionnaires to the researcher. This procedure also was used when the shelter was too far away for a personal visit.

In order to participate in the study, shelter residents had to meet the following inclusion criteria: experience of at least one incident of psychological/emotional victimization within the six months prior to entering shelter, the relationship with their romantic partner was at least six months in duration, and the participant had been residing in shelter for one month or less. Victimization within the six months prior to entering shelter was an inclusion criterion because recent violence is a more valid report of violence and because that is how the measures for the present study were validated. A relationship lasting at least six months was an inclusion criterion because people are more invested in relationships that are longer in length (Rusbult, Johnson, & Morrow, 1986) and because it is reasonable to suggest that psychological/emotional victimization has more of an impact coming from a more reliable (i.e. someone that is trusted) source. The criterion of being in shelter for one month or less was to minimize the potential for influence of interventions that may have occurred since entering shelter.

A power analysis was computed to determine sample size based on requirements for the hierarchical regression to test Hypothesis 3. The test of this hypothesis was accomplished with two three-step hierarchical regressions to predict first self-efficacy and then outcome expectations. For these regressions, physical abuse was entered at step 1 to predict self-efficacy or outcome expectations, psychological/emotional IPV and chronicity of abuse were entered at step 2, and then the interaction of chronicity of abuse and psychological/emotional IPV was entered at step 3 to test for moderation. Due to the
limited research on IPV and social cognitive constructs, the general social cognitive literature (Lent, Brown, & Hackett, 1994) was utilized regarding predictors of self-efficacy and how much variance is accounted for in self-efficacy by those predictors. Lent, Brown, and Hackett (1994) reported on a meta-analysis that suggested the relationship between self-efficacy and social persuasion to be low ($r = .28$, $p < .05$) and the relationship between self-efficacy and emotional arousal to be moderate ($r = -.40$, $p < .01$). Thus, it was reasonable to suggest that general learning experiences associated with psychological/emotional IPV (e.g., anxiety due to IPV, verbal degradation of abilities by abuser) may account for substantial variance in work-related self-efficacy expectations. No research was available to suggest how the length of time in an abusive relationship would affect the relationship between psychological/emotional IPV and work-related self-efficacy expectations, but since interactions rarely account for much additional variance (Fraley, 2005), it was reasonable to propose a small effect for the addition of the psychological/emotional abuse x length of abuse interaction term. Consequently, setting $p$ at <.05, and if step 2 of the planned regression is assumed to result in an $R^2$ of .25 and an increment to $R^2$ of .05 is expected for the interaction term at step 3, to obtain power of .80 to detect an increase in $R^2$ at step 3, 112 participants were required (Soper, 2010).

The researcher received 164 completed survey packets from survivors of psychological/emotional IPV residing in domestic violence shelters. The final sample was composed of 117 women; 31 participants were removed for not meeting the inclusion criteria required to participate in the study, six were excluded because the abuse was not perpetrated by a romantic partner, and 10 were not included due to incomplete information.
Participants in the final sample ranged in age from 20 to 56 years old (M = 36, SD = 8.94). Five women chose not to disclose their age. In terms of race and ethnicity, 57 (48.7%) of the women identified as White, 40 (34.2%) identified as Black/African American, 2 (1.7%) identified as American Indian/Alaskan Native, 13 (11.1%) identified as more than one race, and 5 women (4.3%) identified their race as other. Ten women (8.5%) identified as being from Hispanic or Latino descent and 4 participants chose not to disclose their ethnicity.

In terms of sexual orientation, 106 (90.6%) of the women identified as heterosexual, 1 (.9%) identified as homosexual, and 10 (8.5%) identified as bisexual. As for the sex of their partner in the relationship that brought them to shelter, 116 (99.1%) women indicated that their most recent romantic partner was a man. One (.9%) participant chose not to disclose the sex of her most recent romantic partner.

A total of 96 (82.1%) women indicated that they were living with their abuser prior to entering shelter. One (.9%) woman did not disclose this information. A total of 73 (62.4%) women reported being single and living with their abuser prior to entering shelter, 14 (12.0%) reported being single and not living with their abuser, 19 (16.2%) reported being married, 6 (5.1%) reported being separated, and 4 (3.4%) reported being divorced. One woman chose to not disclose her relationship status prior to coming to shelter. Participants indicated that their relationship with their abuser had lasted between 6 months to 25 years (M = 61.34 months, SD = 64.66). Further, 71 (60.7%) women reported having been in previous abusive relationships. One hundred and four (88.9%) women reported having children. Of these, 18 (15.4%) reported having one child, 73
(62.4%) reported having two to four children, and 15 (13%) reported having five or more children.

In terms of socioeconomic status, 91 (77.8%) women reported that their current personal income was less than $10,000 per year, 11 (9.4%) reported their income was between $10,000 and $15,000 per year, 4 (3.4%) reported their income was between $15,000 and $20,000 per year, 2 (1.7%) reported their income was between $20,000 and $25,000 per year, and 5 (4.3%) reported their income was more than $25,000 per year. Four (3.4%) women chose not to report their annual personal income. A total of 99 participants (84.6%) reported receiving some form of government aid/public assistance to help support them financially. This may have included medical assistance for themselves, medical assistance for their children, food stamps, cash assistance, housing assistance, SSI/SSDI, or a combination of these six. Two (1.7%) participants chose not to indicate whether they were receiving government aid/public assistance.

With regard to education, 2 (1.7%) of the participants reported completing less than seven years of school (i.e., they did not complete the seventh grade), 6 (5.1%) reported that they completed junior high school, 27 (23.1%) reported that they completed some high school, but did not graduate, 32 (27.4%) reported that they graduated from high school or received their GED, 23 (19.7%) completed some college, 12 (10.3%) earned a certificate, 1 (.9%) graduated from a four-year college, 7 (6.01%) earned an Associate degree, 6 (5.1%) completed a job training/career technical program, and 1 (.9%) was still in high school.

Eighteen (15.4%) women reported being employed. Of these women, 8 (6.8%) indicated that they were working full-time and 9 (7.7%) indicated they were working
part-time. One (.9%) participant did not indicate whether she was working part-time or full-time. A total of 19 (16.2%) women reported being in school, with 11 (9.4%) women indicating that they were in school full-time and 7 (6.0%) women indicating that they were part-time students. One (.9%) participant did not indicate whether she was in school part-time or full-time. The women reported their longest held job lasting between 1 month and 20 years (M = 50.17 months SD = 47.97). Five (4.3%) women did not disclose the length of their longest held job. A total of 23 out of 115 (19.7%) women reported having previous career counseling or some other type of job assistance. Two (1.7%) women chose not to disclose whether they had previous career counseling. A total of 73 (62.4%) women reported that they were currently seeking employment.

Procedurally, the questionnaire packets that were distributed included two informed consents (one to be completed and returned to the researcher and one for the participant to keep), a demographic questionnaire, four research instruments, and a community resource list for participants. To avoid unintentional priming, participants were presented with instruments in the following order: demographic questionnaire, work-related self-efficacy questionnaire, work-related outcome expectations questionnaire, the Severity of Violence Against Women Scale (SVAWS) (Marshall, 1992), and the Psychological Maltreatment of Women Inventory-Short Form (PMWI-Short Form) (Tolman, 1999).

As an incentive to participate in this study, participants were informed that they would be entered into a drawing for the chance to win one of three fifty dollar VISA cards. Identification information and contact information for this incentive was collected on a sheet initially attached to the demographic questionnaire, but it was immediately
separated from the form. This eliminated the possibility of identifying specific participants’ responses on the questionnaires.

Measures

Demographic Sheet

This is an author-composed 25-item demographic questionnaire (see Appendix A) that requested participants to disclose personal information including: age, race, ethnicity, sexual orientation, relationship status, length of most recent abusive relationship, abuse history, educational background, employment status, employment history, personal income, number of children, and reasons for coming to shelter. This form also included three items regarding participants’ plans to engage in work-related activities. Items are written at a sixth grade reading level.

Psychological/Emotional Victimization by a Romantic Partner

The Psychological Maltreatment of Women Inventory-Short Form (PMWI-Short Form) (Tolman, 1999) was used to assess participants’ experiences of psychological/emotional victimization by a romantic partner within the past six months (see Appendix B). The PMWI-Short Form is a 14-item measure composed of questions that require the participants to rate how often in the past six months their romantic partners engaged in various psychologically abusive behaviors; ratings were made on a Likert scale ranging from 0 (never) to 5 (very frequently). The 14-item scale provides 2 subscale scores: Dominance-Isolation (e.g., “My partner monitored my time and made
me account for my whereabouts”) and Emotional-Verbal (e.g., “My partner called me names”). A summation of scores was generated such that higher scores reflected greater psychological/emotional victimization (Tolman, 1999). In this study, scores could range from one, as women needed to endorse at least one experience of emotional/psychological victimization within the six months prior to entering shelter, to seventy. Items are written at a sixth grade level.

The original PMWI (Tolman, 1989) is a 58-item instrument that was originally designed for use in batterer intervention programs to assess which types of psychological maltreatment batterers use and to evaluate the success of intervention programs. The length of this original measure limited its use in research, and therefore the PMWI-Short form was created (Tolman, 1999).

Tolman (1999) examined the reliability and validity of the PMWI and the PMWI-Short Form using 83 women from several sources including agencies providing domestic violence services, social service agencies providing counseling and other services, hospitals, parenting classes, and through public service announcements and ads advertising a study on relationships. Eligibility criteria to participate in the study included having been in a cohabitating relationship for at least one year and not being separated from their partner for more than one month in the past six months. In addition to the PMWI, each participant completed the Conflict Tactics Scale (CTS; Straus, 1979), the Index of Marital Satisfaction (IMS; Cheung & Hudson, 1982; Hudson, 1982), the Index of Spouse Abuse (ISA; Hudson & McIntosh, 1981), and the Brief Symptom Inventory (BSI; Derogatis & Melisaratos, 1983) (Tolman, 1999).
The PMWI demonstrated evidence consistent with good construct validity. Tolman (1999) reported that all PMWI subscales correlated highly with the non-physical and physical abuse scales of the Index of Spouse Abuse, correlated highly with the physical abuse subscale of the Conflict Tactics Scale, correlated moderately with the Index of Marital Satisfaction and the Brief Symptoms Inventory General Symptom Index, and were not significantly related to demographic variables. An ANOVA also revealed that the PMWI subscales successfully discriminated battered women from women in distressed relationships and nonbattered women who were satisfied in their relationships (Tolman, 1999).

Tolman (1999) used the fourteen subscale items of the PMWI that significantly differentiated battered women from women in distressed relationships who were not battered for construction of the PMWI-Short Form. Two seven-item scales were constructed, dominance-isolation and emotional-verbal. Both subscales displayed excellent internal consistency reliability (D/I, alpha .88; V/E, alpha .92). A factor analysis using the 14-item PMWI-Short Form demonstrated that the factor structure of the PMWI-Short Form is consistent with prior work on the factor structure of the larger PMWI, establishing factorial validity of the short subscales (Tolman, 1999).

Since its creation, the PMWI-Short Form (Tolman, 1999) has been consistently used to assess psychological abuse (Balsam, Rothblum, & Beauchaine, 2005; Bell & Goodman, 2001; Cattaneo & Goodman, 2003; Hazen, Connelly, Soriano, & Landsverk, 2008, Kocot & Goodman, 2003). It has been used with diverse populations including women seeking services provided by a community health care system, women seeking protective orders against their abusers, women filing charges against their abusers, and
women who identified as White, Black, and Hispanic (Bell & Goodman, 2001; Cattaneo & Goodman, 2003; Hazen, Connelly, Soriano, & Landsverk, 2008, Kocot & Goodman, 2003). Although the measure was originally developed for use with battered heterosexual women, items have been adapted to be gender neutral and the measure has been used with a lesbian, gay, and bisexual sample (Balsam, Rothblum, & Beauchaine, 2005).

The PMWI-Short Form has demonstrated good internal consistency in numerous additional studies. Balsam, Rothblum, and Beauchaine (2005) reported an alpha of .91 for psychological maltreatment in the past year and an alpha of .87 for psychological maltreatment over a lifetime. Cronbach alphas in the Bell and Goodman (2001) study were .86 for the Dominance-Isolation subscale and .90 for the Emotional-Verbal subscale. Cattaneo and Goodman (2003) reported alpha coefficients of .87 for the Dominance-Isolation subscale and .91 for the Emotional-Verbal Abuse subscale. Alpha reliability in the Hazen, Connelly, Soriano, and Landsverk (2008) investigation was .90 for the Emotional-Verbal subscale and .81 for the Isolation-Dominance subscale. Lastly, Kocot and Goodman (2003) reported a .94 Cronbach alpha for the PMWI-Short Form. In the present study, alpha was .91 for the PMWI-Short Form total score.

**Physical Abuse by a Romantic Partner**

The Severity of Violence Against Women Scale (SVAWS) (Marshall, 1992) was used to assess participants’ experiences of physical abuse by a romantic partner (see Appendix C). Although physical abuse is not the focal point of the present investigation, research suggests that psychological/emotional victimization often accompanies physical abuse (Follingstad, Rutledge, Berg, Hause, & Polek 1990; Stets, 1990; & Tolman, 1999).
Thus, physical abuse by a romantic partner was assessed to control for its role with regard to women’s work-related self-efficacy expectations or their work-related outcome expectations, so as to better identify the role of participants’ experiences with psychological/emotional victimization with regard to these constructs.

The SVAWS (Marshall, 1992) is a 46-item self-report measure that explores three elements of violence against women: threats (19 items), acts (21 items), and sexual aggression (six items). Participants rate how often their romantic partners engaged in various physically abusive behaviors on a 4-point Likert scale ranging from 1 (never) to 4 (many times). The stem of all items is “How often has your partner” and sample items included “Held you down, pinning you in place”, “Twisted your arm”, and “Beat you up”. A total score for each element of violence (i.e., threats, acts, and sexual aggression) is calculated by summing the frequency of each type of act. Scores can range from 14 to 84.

Since its creation, the SVAWS (Marshall, 1992) has been consistently used to assess physical abuse (El-Sheikh, Cummings, Kouros, Elmore-Staton, & Buckhalt, 2008; Levendosky, Bogat, Theran, Trotter, von Eye, & Davidson, 2004; Lilly, & Graham-Bermann, 2009; McFarlane, Groff, O’Brien, & Watson, 2005; Sansone, Chu, & Wiederman, 2007; Weston, Temple, & Marshall, 2005). It has been utilized with diverse populations including women residing in shelters, women residing in psychiatric inpatient hospitals, women utilizing services at an urban public primary care clinic, pregnant women, low-income women, and women who identified as White, Black, and Hispanic (Alsaker, Moen, & Kristoffersen, 2008; Alsaker, Moen, Nortvedt, & Baste, 2006; El-Sheikh, Cummings, Kouros, Elmore-Staton, & Buckhalt, 2008; Levendosky, Bogat, Theran, Trotter, von Eye, & Davidson, 2004; McFarlane, Groff, O’Brien, &

The SVAWS (Marshall, 1992) was modified for this study. First, because the present investigation was primarily concerned with the frequency of physically abusive behaviors by an intimate partner, items regarding threats of physical violence (19 items) and sexual aggression (six items) were eliminated, resulting in a 21-item scale that assessed physical acts of violence by a romantic partner. Second, the qualifier “over the past 12 months” was revised to “over the past 6 months” to capture the recent prevalence of such experiences. Similar types of modifications to the SVAWS (Marshall, 1992) have been utilized in previous research (El-Sheikh, Cummings, Kouros, Elmore-Staton, & Buckhalt, 2008; Sansone, Chu, & Wiederman, 2007; Sansone, Chu, & Wiederman, 2007; Sansone, Reddington, Sky, & Wiederman, 2007; Voisin, Neilands, Salazar, Crosby, & DiClemente, 2008). Items for the 21-item SVAWS are written at a seventh grade reading level.

A total score for participants’ experiences of physical acts of violence by an intimate partner was calculated by summing the responses to the 21-item SVAWS measure (Marshall, 1992). Scores could range from 21 to 84, with higher scores indicating more frequent physical violence by a romantic partner. The SVAWS (Marshall, 1992) subscales (i.e., symbolic/threats subscale and physical/sexual violence subscale) have exhibited good internal consistency in numerous studies. Hawkins,
Haggerty, Pearce, Kelly, and Grady (2009) reported an alpha of .95 for symbolic/threats and .95 for actual violence. Cronbach alphas in the El-Sheikh, Cummings, Kouros, Elmore-Staton, and Buckhalt (2008) study were .83 and .80 for symbolic/threats and actual violence, respectively. Sansone, Chu, and Wiederman (2007) reported alpha coefficients of .97 for the threats subscale and .97 for the acts subscale. Alpha reliability in the McFarlane, Groff, O’Brien, and Watson (2005) investigation was .92 for both threats of assaults and physical assaults. Finally, Weston (2008) reported an alpha of .93 for acts of physical violence. Internal consistency reliability of the 21-item SVAWS measure used with the present sample was .94.

Survivors’ Work-Related Self-Efficacy Expectations

The Work-Related Self-Efficacy Expectations Questionnaire was used to assess participants’ expectations regarding their ability to seek and maintain employment (see Appendix D). This 16-item measure was constructed for the purpose of this study. The extant literature (Bandura, 2006; Lent & Brown, 2006) suggests that assessing social cognitive constructs often entails designing new measures. Lent and Brown (2006) explained that

In essence, rather than being able to rely on all-purpose measures, SCCT researchers often have to design new measures, depending on the unique features of the behavioral domain of interest and the level of detail at which they wish to study it (p.13).

Bandura (2006) similarly argued that
There is no all-purpose measure of perceived self-efficacy. The “one measure fits all” approach usually has limited explanatory and predictive value because most of the items in an all-purpose test may have little or no relevance to the domain of functioning. Moreover, in an effort to serve all purposes, items in such a measure are usually cast in general terms divorced from the situational demands and circumstances. This leaves much ambiguity about exactly what is being measured or the level of task and situational demands that must be managed. Scales of perceived self-efficacy must be tailored to the particular domains of functioning that is the object of interest (pp. 307-308.)

Instructions for the Work-Related Self-Efficacy Expectations Questionnaire were designed using the suggestions of Bandura (2006) and Lent and Brown (2006). Participants were instructed to rate their perception of their current capability to perform a variety of job seeking and job maintaining behaviors. Participants were assured that their responses would remain confidential as to minimize demand characteristics and social-evaluative concerns.

Items of the Work-Related Self-Efficacy Expectations Questionnaire were constructed using the strategies offered by Bandura (2006) and Lent and Brown (2006). Items for this measure were generated from existing published self-efficacy expectations measures (i.e., Career Decision Making Self-Efficacy Scale-Short Form; Betz & Taylor, 2006; Career Search Efficacy Scale; Solberg et al., 1994) and relevant literature regarding survivors of IPV and work (i.e., Brown et al., 2000; Browne, Salomon, & Bassuk, 1999; Chronister & McWhirter, 2003; Chronister, Wettersten, & Brown, 2004; Ibrahim & Herr, 1987; & Wettersten et al., 2004). Items were clear, explicit, relatively short, and were written at a ninth grade reading level. The items assessed gradations of challenges associated with successfully obtaining and maintaining employment. The stem of all items requested that participants evaluate their capability to engage in various job seeking
and maintaining behaviors, rather than their intentions (goals) of engaging in such activities. The stem of all items was “How much confidence do you have that you can currently” and sample items included “Identify and use the resources needed to find a job”, “Prepare for a job interview”, and “Concentrate on your required work tasks”.

Response rating scales were constructed using the strategies suggested by Bandura (2006) and Lent and Brown (2006). Respondents indicated their degree of confidence in their ability to do various job seeking and job maintenance behaviors on an 11-point Likert scale ranging from 1 (cannot do at all) to 11 (highly certain can do). Consistent with scoring suggestions by Bandura (2006) and Lent and Brown (2006), a total score was calculated by summing the item responses and dividing by the total number of scale items (i.e., 16). Scores could range from 1 to 11, with higher scores indicating greater work-related self-efficacy.

Work-Related Self-Efficacy Expectations Questionnaire items’ construct validity may be inferred as they were constructed using the relevant IPV literature (Brown et al., 2000; Browne, Salomon, & Bassuk, 1999; Chronister & McWhirter, 2003; Chronister, Wettersten, & Brown, 2004; Ibrahim & Herr, 1987; & Wettersten et al., 2004) in accord with directives of Social Cognitive Theory (Bandura, 2006; Lent & Brown, 2006). Also, as some items were drawn from other measures, inferences about their reliability and validity may be drawn from those measures. For example, Cronbach alphas for the Career Decision-Making Self-Efficacy Scale-Short Form (CDMSE-SF) range from .73 to .83 for the subscales (i.e., self-appraisal, occupational information, goal selection, planning, and problem solving) and .94 for the total measure (Betz, Klein, & Taylor, 2006). Construct validity of the CDMSE-SF has been established through correlations
between career decision-making self-efficacy and vocational identity (Betz, Klein, & Taylor, 2006) and between career decision-making self-efficacy and fear of commitment (Betz & Serling, 1995).

Further, Solberg et al. (1994) reported Cronbach alphas of .97 for the Career Search Efficacy Scale (CSES), .95 for the Job Search Efficacy subscale, .91 for the Interviewing Efficacy subscale, .92 for the Networking Efficacy subscale, and .87 for the Personal Exploration Efficacy subscale. Solberg et al. (1994) also presented evidence of convergent and discriminant validity by investigating the relationship between subscales of the CSES to subscales of the Career Decision-Making Self-Efficacy Scale (Taylor & Betz, 1983) as well as other measures of human agency and personality (e.g., Personal Attributes Questionnaire; Spence & Helmreich, 1978).

In the present study, alpha was .95 for the Work-Related Self-Efficacy Expectations Questionnaire.

Survivors’ Work-Related Outcome Expectations

The Work-Related Outcome Expectancy Questionnaire was created to assess participants’ beliefs about the outcomes of seeking and maintaining employment (See Appendix E). This 23-item measure was constructed for the purpose of this research. Items for the Work-Related Outcome Expectancy Questionnaire were constructed using the strategies offered by Lent and Brown (2006) and Fouad and Guillen (2006). Items for this measure were generated from an existing published career outcome expectancy scale (i.e., Career Outcome Expectancy Scale: Females; Springer, Larson, Tilley, Gasser, & Quinn, 2001) and relevant literature regarding survivors of IPV and work (Bowen, 1982;
Brown et al., 2005; Chronister, Linville, & Kaag, 2008; Chronister & McWhirter, 2003; Wettersten et al., 2004). Items were written at an eighth grade reading level. The Work-Related Outcome Expectancy Questionnaire included items that assessed the three forms of outcome expectations (i.e., physical outcomes that follow a behavior, social reactions, and self-evaluations) described by Bandura (1977). Additionally, five items required reverse scoring, which is also consistent with suggestions of including items with both positive and negative expected outcomes. The stems of the items were “If I do a job search” and “If I get a job”. Sample items included “I will find job postings that I am qualified to apply for”, “I will get an interview”, and “I will get satisfaction from working”.

Response ratings and scoring were also constructed using the strategies suggested by Lent and Brown (2006). Participants indicated their degree of agreement regarding their own expectations of various outcomes occurring as a result of seeking and maintaining a job on an 11-point Likert scale ranging from 1 (strongly disagree) to 11 (strongly agree). Scores could range from 1 to 11, with higher scores indicating more positive expectations about the consequences of seeking and maintaining employment.

As with the Work-Related Self-Efficacy Expectations Questionnaire, the Work-Related Outcome Expectancy Questionnaire was developed specifically for this study and only indirect evidence for its psychometrics is available. The Career Outcome Expectancy Scale: Females (Springer, Larson, Tilley, Gasser, & Quinn, 2001) assesses women’s career outcome expectancies. As mentioned previously, some items for the Work-Related Outcome Expectancy Questionnaire were generated from this measure. Springer, Larson, Tilley, Gasser, and Quinn (2001) reported a Cronbach’s alpha of .83 for
the Career Outcome Expectancy Scale: Females. Work-Related Outcome Expectancy Questionnaire items’ construct validity also may be inferred as they were constructed using the relevant IPV literature (Bowen, 1982; Brown et al., 2005; Chronister, Linville, & Kaag, 2008; Chronister & McWhirter, 2003; Wettersten et al., 2004) in accord with directives of Social Cognitive Theory (Bandura, 2006; Lent & Brown, 2006). In the present study, alpha was .91 for the Work-Related Outcome Expectations Questionnaire.

Chronicity of Psychological/Emotional Victimization

Per convention in the literature (Chronister & McWhirter, 2004; Johnson, Delahanty, & Pinna, 2007), chronicity of psychological/emotional victimization was assessed by asking participants the duration (i.e., number of months) of the abusive relationship that led to their shelter admission. This information was obtained in the demographic questionnaire.
CHAPTER IV
RESULTS

This chapter discusses the preliminary analyses and results of the principal and exploratory analyses. Preliminary analyses included addressing missing data, analysis of outliers, and assessing the assumptions of multiple regression including normality, linearity, homoscedasticity, and independence of residuals, and examining descriptive statistics. Tests of hypotheses are presented in terms of hierarchical multiple regression and correlation.

Preliminary Analysis

Missing Data

The data were screened to locate, describe, and deal with missing data values using best practices techniques (Schlomer, Baumer, & Card, 2010; Tabachnick & Fidell, 2007). According to Schlomer, Bauman, and Card (2010), best practices related to missing data in research call for reporting the amount of missing data, the pattern of missing data, and the methods for handling missing data.

One hundred and sixty-four completed questionnaires were collected from domestic violence shelter residents. Thirty-one participants did not meet the inclusion
criteria required to participate in the study. Seventeen participants had resided in shelter for longer than a month at the time of questionnaire completion. Twelve women reported that relationships with their romantic partners were less than six months in duration. Two participants denied experiencing any incidents of psychological/emotional victimization within the six months prior to entering shelter. Listwise deletion was used to remove these thirty-one cases before data analysis began.

Six participants were abused by somebody other than a romantic partner, two participants were unable to confirm whether their shelter stay had been less than one month, two women did not provide information regarding the length of their abusive relationship, one participant did not complete the self-efficacy or outcome expectations measures, three women did not complete at least 26% of either the physical abuse, self-efficacy, or outcome expectations measures, and two women were missing more than 35% of their total data. Suggestions by the National Center for Health Statistics (2010) were utilized regarding acceptable amounts of missing data, and based on these standards listwise deletion was used to remove these 16 cases before data analysis began. After these 47 participants were removed from data analysis, the final sample size was 117.

Next, the remaining cases were reviewed to check for the amount and type of missing data. It was found that less than 5% of the overall data was missing, that is, there were 23 actual missing data points. This calculation is based on the variables that are of interest to the major hypotheses set forth in this study. Thus, the 5% does not include most of the demographic questionnaire items, as most of these were not needed for analyses; only the demographic question regarding length of abusive relationship was needed for the main analysis. This also does not include the items used for exploratory
analyses. Only one participant was missing more than one item and all but four items were missing only once. Of the four items that were missing more than once, three of them were missing for only two participants and one was missing for three participants. Thus, the missing data was determined to be missing completely at random (Schlomer, Bauman, & Card, 2010). Given the small amount of missing data in this data set, mean substitution for the individual participant for each variable was calculated and inserted for each missing data point (Tabachnick & Fidell, 2007).

Ten participants did not provide a specific shelter entrance date, but the researcher was confident based on other information that they had been residing in shelter for less than a month when completing the questionnaires, thus these women were included in the analysis. Four of the ten participants provided general timeframes such as “three weeks ago” or “seven days” to describe their shelter stay. The other six participants verbally confirmed with the researcher that their shelter stay was less than one month. This information was not treated as missing data, as the researcher was confident that they met the study inclusion criterion and the actual date of shelter entrance was not used in any of the study’s principal or exploratory analyses.

Data Screening

Outliers. The final data were examined for univariate and multivariate outliers using strategies outlined by Tabachnick and Fidell (2007) and Field (2005). First, the items for each measure in the study were reviewed and determined to be within the normal scale ranges.
Next, univariate outliers were examined. Tabachnick and Fidell (2007) explained that “univariate outliers are cases with very large standardized scores, $z$ scores, on one or more variables, that are disconnected from the other $z$ scores” (p. 73). Tabachnick and Fidell (2007) and Field (2005) suggested that cases with standardized scores above 3.29 ($p < .001$, two –tailed test) are potential outliers. Six cases showed potential univariate outliers. One participant had a standardized score of 3.69 on chronicity of abuse. Two participants had standardized scores of -3.68 and -3.94 on total psychological/emotional victimization. One participant had a standardized score of -3.37 on her work-related self-efficacy total and -3.47 on work-related outcome expectations total. Two participants had standardized scores of -3.69 and -3.64 on their work-related outcome expectations total.

Tabachnick and Fidell (2007) recommended that researchers examine values of Cook’s distances and leverage in combination with values of Mahalanobis distance and look for values that are consistently identified as multivariate outliers on all three techniques. The values for Mahalanobis distance, Cook’s distance, and leverage were estimated and examined using SPSS to identify potential multivariate outliers.

Tabachnick and Fidell (2007) recommended that researchers compare Mahalanobis distance to the critical values of a Chi square distribution chart with n-1 degrees of freedom. Tabachnick and Fidell (2007) also suggested researchers compare their Mahalanobis distance values against the $p < .001$ values. The degrees of freedom are one less than the number of predictors; therefore, there are two degrees of freedom in this study. Thus, according to the critical values of Chi-square distribution chart, the critical value is 13.816. This is slightly more conservative, yet comparable, to Field’s (2005) recommendation that for smaller samples ($N = 100$) and with fewer predictors.
Mahalanobis distance values greater than 15 are problematic. Six cases showed Mahalanobis distance values greater than 13.816. Tabachnick and Fidell (2007), however, contended that Mahalanobis distances should be used with caution because these values are not reliable; Mahalanobis distances sometimes identify values as outliers even though the values are not influential.

According to Tabachnick and Fidell (2007) and Field (2005) the critical value for Cook’s distance is a value that is greater than one. None of the cases produced Cook’s distance values greater than one. In regards to leverage, Field (2005) recommended using three times the average \((3(k + 1)/n)\) as a cut-off point for identifying cases having undue influence with \(k\) being the number of predictors and \(n\) being the sample size. In the present investigation, leverage scores greater than .103 represent potential undue influence. In this study, eight cases had leverage scores that exceeded the critical value cut off.

Six cases were identified as potential outliers, as their scores on three of the four outlier techniques suggested possible undue influence. Analyses were run with and without the identified outliers and no significant differences were noted in the results, thus the outliers were retained in the sample (Field, 2005; Tabachnick & Fidell, 2007).

*Normality, linearity, homoscedasticity, and independence of residuals.* Data were screened using the strategies suggested by Tabachnick and Fidell (2001) and Field (2005) to determine whether the assumptions of multiple regression were met including normality, linearity, homoscedasticity, and independence of residuals. Tabachnick and Fidell (2007) argued that assessment of regression assumptions can occur either prior to
running the multiple regression analysis or by examining the residuals of the analysis. They explained that “assumptions of analysis are that the residuals (differences between obtained and predicted DV scores) are normally distributed about the predicted DV scores, that residuals have a straight-line relationship with predicted DV scores, and that the variance of the residuals about predicted DV scores is the same for all predicted scores” (Tabachnick & Fidell, 2007, p. 125). According to Tabachnick and Fidell (2007), if the residuals meet the assumptions for regression, it is safe to contend that the individual variables also meet the assumptions. The analyses of assumptions in the present investigation were conducted by examining the residuals of each multiple regression analysis. Prior to screening for the assumptions, the variable physical abuse total was transformed, as the original scale ranges of 1-4 did not provide a true zero. In order to interpret what an increase in one unit of physical abuse truly meant, the scale ranges were transformed to 0-3, thus the transformed physical abuse total score could now range from 0-63.

The histogram for each analysis was plotted against the normal curve and visually examined. Each histogram showed near normal distribution. The assumption of normality was met. P-plots of residuals were examined to assess for linearity. Examination of P-plots showed near linearity. The assumption of linearity was met. Examination of the residual scatterplots showed no real pattern, indicating a lack of pattern for the residuals and proving the assumption of heteroscedasticity. Lastly, independence of residuals was examined by looking at the VIF values and the tolerance statistics. In each analysis, VIF values were well below 10 and the tolerance statistics were all well above .2, therefore it was concluded that the errors in the residuals were independent.
Descriptive Statistics

Table 1 provides descriptive statistics and a correlation table for the primary variables of interest. Descriptive statistics included the means, standard deviations, and coefficient alphas. The coefficient alphas for the scales were good with a range from .91 to .95. The internal consistency reliability coefficient for The Severity of Violence Against Women Scale (SVAWS) (Marshall, 1992) was .94, which is comparable to values reported by other researchers. Hawkins, Haggerty, Pearce, Kelly, and Grady (2009) reported an alpha of .95 for the actual physical violence subscale of the SVAWS, which encompasses the items used in the present investigation. Sansone, Reddington, Sky, and Wiederman (2007) and Weston (2008) reported alphas of .97 and .93, respectively, for the physical violence subscale. The coefficient alpha for The Psychological Maltreatment of Women Inventory-Short Form (PMWI-Short Form) (Tolman, 1999) was .91. This is similar to the reliability coefficients reported by Balsam, Rothblum, and Beauchaine (2005) and Kocot and Goodman (2003), which were .91 and .94, respectively.
Table 1. Correlations, Means, Standard Deviations, and Coefficient Alphas for Primary Variables of Interest

<table>
<thead>
<tr>
<th>Variable</th>
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<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<td>—</td>
<td>.43**</td>
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<td>.04</td>
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<tr>
<td>2. PMWI</td>
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<td>-.13</td>
<td>.11</td>
<td>—</td>
</tr>
<tr>
<td>3. WRSEQ</td>
<td>—</td>
<td>.77**</td>
<td>-.07</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>4. WROEQ</td>
<td>—</td>
<td>—</td>
<td>-.18*</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>5. Chronicity</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
</tbody>
</table>

&M	28.58&60.02&8.46&8.73&61.34

&SD	15.74&11.43&2.22&1.60&64.66

&\alpha	0.94&0.91&0.95&0.91

*Note. * p < .05, two-tailed, ** p < .01, two-tailed. (N = 117 for all scales). Severity of Violence Against Women Scale (SVAWS), Psychological Maltreatment of Women Inventory-Short Form (PMWI), Work-Related Self-Efficacy Expectations Questionnaire (WRSEQ), Work-Related Outcome Expectations Questionnaire (WROEQ), Chronicity of Abuse (Chronicity; in months).

The internal consistency reliability coefficient for the Work-Related Self-Efficacy Expectations Questionnaire (WRSEQ) was .95. This reliability coefficient is similar to the reliability coefficients reported for the Career Decision Making Self-Efficacy Scale-Short Form (Betz, Klein, & Taylor, 2006) and the Career Search Efficacy Scale (Solberg et al., 1994), .94 and .97, respectively, which were used to generate WRSEQ scale items. The Work-Related Outcome Expectancy Questionnaire (WROEQ) was also created for this study, and its coefficient alpha was .91, which is slightly higher than the .83 alpha reported for the Career Outcome Expectancy Scale: Females (Springer, Larson, Tilley, Gasser, & Quinn, 2001) which was used to generate WROEQ scale items.

The descriptive statistics for the relationship variables are discussed first. The mean length of romantic relationship was 61.34 months (min = 6, max = 300, SD = 64.66). Total physical abuse scores could range from 0-63. The mean total physical abuse score was 28.58 (min = 0, max = 60, SD = 15.74). Total psychological/emotional...
victimization scores could range from 0-70. The mean psychological/emotional victimization score was 60.02 (min = 15, max = 70, SD = 11.43).

Next, the descriptive statistics for the social cognitive variables are discussed. Work-related self-efficacy expectation scores could range from 1-11. The mean work-related self-efficacy expectation score was 8.46 (min = 1, max = 11, SD = 2.22). The scores for work-related outcome expectations could range from 1-11. The mean work-related outcome expectation score was 8.73 (min = 2.83, max = 11, SD = 1.60).

Bivariate correlations for the variables of interest were examined and are displayed in Table 1. Work-related self-efficacy expectations significantly and positively correlated with work-related outcome expectations as predicted by SCCT. Physical abuse was positively and significantly associated with psychological/emotional victimization, which is consistent with domestic violence research (Follingstad, Rutledge, Berg, Hause, & Polek 1990; Stets, 1990; & Tolman, 1999). Lastly, work-related outcome expectations negatively and significantly correlated with length of abusive relationship (chronicity of abuse). Comparisons for this association are not available as this relationship has not been empirically studied, however it is consistent with arguments presented by Bowen (1982) and Chronister and McWhirter (2003). Overall, these correlations are logical and provide some support for the validity of the data.

Primary Analyses

The first hypothesis addressed the question of whether psychological/emotional victimization predicts survivors’ work-related self-efficacy expectations beyond the contribution of physical abuse. This hypothesis was tested using hierarchical multiple
regression. At step one, work-related self-efficacy expectation was the dependent variable and total physical abuse was the independent variable. At step two, total psychological/emotional victimization was added to the model. The results indicated that neither physical abuse ($R^2_{\text{Cha}} = .002; F_{\text{Cha}} (1, 115) = .26, p > .05$) nor psychological/emotional victimization ($R^2_{\text{Cha}} = .018; F_{\text{Cha}} (2,114) = 2.07, p > .05$) accounted for significant variance in self-efficacy expectations. Thus, the first hypothesis was not supported; psychological/emotional victimization did not significantly predict survivors’ work-related self-efficacy expectations beyond the contribution of physical abuse. See Table 2 for details of this analysis.

Table 2. Regression Results for Test of Hypothesis 1

<table>
<thead>
<tr>
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<th>$B$</th>
<th>SE $B$</th>
<th>$\beta$</th>
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</thead>
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<tr>
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<td>Constant</td>
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<td>-.05</td>
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<tr>
<td><strong>Step 2</strong></td>
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<td></td>
<td></td>
</tr>
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<td>Constant</td>
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<tr>
<td>Physical Abuse</td>
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<td>.014</td>
<td>.016</td>
</tr>
<tr>
<td>Psychological/Emotional Victimization</td>
<td>-.029</td>
<td>.020</td>
<td>-.148</td>
</tr>
</tbody>
</table>

*Note. $R^2 = .002$ for Step 1; $\Delta R^2 = .018$ for Step 2; $p > .05$*

The second hypothesis addressed the question of whether psychological/emotional victimization predicts survivors’ work-related outcome expectations beyond the contribution of physical abuse. This hypothesis was tested using hierarchical multiple regression. At step one, work-related outcome expectation was the dependent variable and total physical abuse was the independent variable. At step two, total psychological/emotional victimization was added to the model. The results indicated that neither physical abuse ($R^2_{\text{Cha}} = .002; F_{\text{Cha}} (1, 115) = .20, p > .05$) nor
psychological/emotional victimization ($R^2_{\text{Cha}} = .026; F_{\text{Cha}} (2,114) = 3.04, p > .05$) accounted for significant variance in outcome expectations. Thus, the second hypothesis was not supported; psychological/emotional victimization did not significantly predict survivors’ work-related outcome expectations beyond the contribution of physical abuse. See Table 3 for details of this analysis.

Table 3. Regression Results for Test of Hypothesis 2

<table>
<thead>
<tr>
<th>Step</th>
<th>B</th>
<th>SE B</th>
<th>β</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
<tr>
<td>Constant</td>
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</tr>
<tr>
<td>Physical Abuse</td>
<td>.004</td>
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<tr>
<td>Step 2</td>
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<tr>
<td>Constant</td>
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<tr>
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<td>.12</td>
</tr>
<tr>
<td>Psychological/Emotional Victimization</td>
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<td>.01</td>
<td>-.18</td>
</tr>
</tbody>
</table>

Note. $R^2 = .002$ for Step 1; $\Delta R^2 = .026$ for Step 2; $p > .05$

The third hypothesis addressed the question of whether work-related self-efficacy expectations positively relate to work-related outcome expectations. This hypothesis was tested using a Pearson’s correlation. The results indicated a significant positive correlation between self-efficacy expectation and outcome expectation ($r = .77, N = 117, p < .01$, two-tailed). Thus, the third hypothesis was supported; work-related self-efficacy expectations positively related to work-related outcome expectations among survivors of intimate partner violence. See Table 1.

The fourth hypothesis addressed the question of whether chronicity of abuse by a romantic partner moderates the association between psychological/emotional victimization and work-related self-efficacy expectations. This hypothesis was tested using hierarchical regression. Prior to running the analysis, though, the variables of
psychological/emotional victimization and chronicity of abuse were centered. Centering involved calculating the mean of both variables and creating new centered variables that were the difference between the measured variables and the mean of the variables. Centering was done because predictor and moderator variables are usually highly correlated with the interaction term created from them, thus creating problems of multicollinearity (Frazier, Tix, & Barron, 2004).

At step one for the analysis to test hypothesis 4, work-related self-efficacy expectation was the dependent variable and total physical abuse was the independent variable. At step two, centered total psychological/emotional victimization and chronicity of abuse were added to the model. At step three, the interaction of chronicity of abuse and psychological/emotional victimization was added to the model. The results indicated that the interaction of psychological/emotional victimization and chronicity of abuse was not significantly related to work-related self-efficacy expectation ($R^2_{\text{Cha}} = .001; F_{\text{Cha}} (4, 112) = .07, p > .05$). See Table 4 for the details of this analysis.
Table 4. Regression Results for Test of Hypothesis 4

<table>
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<tbody>
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<tr>
<td>Step 2</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Constant</td>
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<td></td>
</tr>
<tr>
<td>Physical Abuse</td>
<td>.001</td>
<td>.02</td>
<td>.01</td>
</tr>
<tr>
<td>Psychological/Emotional Victimization</td>
<td>-.03</td>
<td>.02</td>
<td>-.14</td>
</tr>
<tr>
<td>Chronicity of Abuse</td>
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<td>.003</td>
<td>-.05</td>
</tr>
<tr>
<td>Step 3</td>
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<tr>
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</tr>
<tr>
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<td>.01</td>
</tr>
<tr>
<td>Psychological/Emotional Victimization</td>
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<td>.02</td>
<td>-.13</td>
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<tr>
<td>Chronicity of Abuse</td>
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<tr>
<td>PsychChron Interaction</td>
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<td>.000</td>
<td>.03</td>
</tr>
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Note. $R^2 = .002$ for Step 1; $\Delta R^2 = .02$ for Step 2; $\Delta R^2 = .001$ for Step 3; $p > .05$; PsychChron Interaction = Psychological/Emotional Victimization Chronicity of Abuse interaction term

Thus, the fourth hypothesis was not supported; chronicity of psychological/emotional victimization by a romantic partner did not significantly moderate the association between psychological/emotional victimization and work-related self-efficacy expectations.

The fifth and final hypothesis addressed the question of whether chronicity of abuse by a romantic partner moderates the association between psychological/emotional victimization and work-related outcome expectations. This hypothesis was tested using hierarchical regression. Again, psychological/emotional victimization and chronicity of abuse were centered prior to analysis. Then at step one, work-related outcome expectation was the dependent variable and total physical abuse was the independent variable. At step two, centered total psychological/emotional victimization and chronicity of abuse were added to the model. At step three, the interaction of chronicity of abuse and psychological/emotional victimization was added to the model. The results indicated that
the interaction of psychological/emotional victimization and chronicity of abuse was not significantly related to work-related outcome expectation ($R^2_{Cha} = .004; F_{Cha} (4, 112) = .42, p > .05$). Thus, the fifth hypothesis was not supported; chronicity of psychological/emotional victimization by a romantic partner did not significantly moderate the association between psychological/emotional victimization and work-related outcome expectations. See Table 5 for details of this analysis.

Table 5. Regression Results for Test of Hypothesis 5

<table>
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<th>β</th>
</tr>
</thead>
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<td>&lt;br&gt;Constant</td>
<td>8.61</td>
<td>.31</td>
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<tr>
<td></td>
<td>Physical Abuse</td>
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<td>.01</td>
</tr>
<tr>
<td>2</td>
<td>&lt;br&gt;Constant</td>
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<td>.33</td>
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<td></td>
<td>Physical Abuse</td>
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<td>.01</td>
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<td></td>
<td>Psychological/Emotional Victimization</td>
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<td>.01</td>
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<td>Chronicity of Abuse</td>
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<td>.002</td>
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<td>3</td>
<td>&lt;br&gt;Constant</td>
<td>8.50</td>
<td>.34</td>
</tr>
<tr>
<td></td>
<td>Physical Abuse</td>
<td>.01</td>
<td>.01</td>
</tr>
<tr>
<td></td>
<td>Psychological/Emotional Victimization</td>
<td>-.02</td>
<td>.02</td>
</tr>
<tr>
<td></td>
<td>Chronicity of Abuse</td>
<td>-.003</td>
<td>.003</td>
</tr>
<tr>
<td></td>
<td>PsychChron Interaction</td>
<td>.000</td>
<td>.000</td>
</tr>
</tbody>
</table>

*Note.* $R^2 = .002$ for Step 1; $\Delta R^2 = .05$ for Step 2; $\Delta R^2 = .004$ for Step 3 $p > .05$; PsychChron Interaction = Psychological/Emotional Victimization Chronicity of Abuse interaction term

Exploratory Analyses

Exploratory analyses were conducted in an attempt to understand the lack of support for the primary analyses. Given the somewhat restricted range of the psychological/emotional victimization scale, mean differences in both work-related self-efficacy expectations and work-related outcome expectations were examined for participants’ with extremely high or low psychological/emotional victimization.
Specifically, participants’ in the top third and bottom third of the distribution of scores for psychological/emotional victimization were compared regarding their work-related self-efficacy expectations and work-related outcome expectations. This was tested using two independent t-tests. The results of the two independent t-tests suggested that participants in the bottom third and upper third of psychological/emotional victimization scores did not significantly differ in their work-related self-efficacy expectations \((t(76) = .94, p > .05)\) or their work-related outcome expectations \((t(76) = .43, p > .05)\) (See Table 6). These findings are consistent with the primary hypothesis tests and indicate that psychological/emotional victimization level is not related to survivors’ work-related self-efficacy expectations and outcome expectations even when groups with high and low victimization are contrasted.

**Table 6. Results of Independent T-Test for Comparing Work-Related Self-Efficacy Expectations Among Bottom and Top Third of Psychological/Emotional Victimization**

<table>
<thead>
<tr>
<th></th>
<th>Bottom Third Psychological/Emotional Victimization</th>
<th>Top Third Psychological/Emotional Victimization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean Self-Efficacy</td>
<td>8.44</td>
<td>7.93</td>
</tr>
<tr>
<td>Std. Error Mean</td>
<td>.40</td>
<td>.37</td>
</tr>
<tr>
<td>Mean Outcome</td>
<td>8.73</td>
<td>8.41</td>
</tr>
<tr>
<td>Expectations Std. Error Mean</td>
<td>.29</td>
<td>.27</td>
</tr>
</tbody>
</table>

*Note. N = 78. * \(p < .05\)*

The next set of exploratory analyses extended the present examination of SCCT with survivors of IPV. According to SCCT, self-efficacy expectations and outcome expectations predict work goals (Lent, Brown, and Hackett, 1994). Thus, exploratory analyses examined the association of goals for work-related behavior with IPV scores and work-related self-efficacy and outcome expectations. Goals for work-related behavior
were calculated by summing the scores of three items on the demographic questionnaire assessing participants’ plans to engage in job-seeking behaviors (looking for a job, creating a resume, and getting a job). The scores for all three items were transformed, as the original scale ranges of 1-6 did not provide a true zero. The scale ranges were transformed to 0-5. Total goals for work scores could range from 0-15, with higher scores indicating stronger plans to engage in job-seeking behaviors. The mean goals for work-related behavior score was 10.24 (min = 0, max = 15, SD = 4.96). The internal consistency reliability for these three items was .90.

Table 7 provides descriptive statistics and correlations for the variables of interest in the next set of exploratory analyses. Goals for work-related behavior were of special interest in these analyses, so employed women were excluded from the sample. Goals for work-related behavior significantly and positively related to work-related outcome and self-efficacy expectations. Both of these associations are consistent with SCCT. Goals for work-related behavior were also significantly and negatively correlated with chronicity of abuse, suggesting that as participants’ chronicity of abuse increased their goals to engage in work-related behavior decreased.

To further explore the data with unemployed women, the two subscales of the PMWI-Short Form (Tolman, 1999), dominance-isolation and emotional-verbal, were examined in relation to the social cognitive variables. Results were consistent with the original hypothesis tests and the correlations observed with the total sample; none of the expected relations between types of verbal and psychological abuse and the social cognitive variables were supported when running the subscales rather than the total psychological/emotional victimization score. See Table 7 for these correlations.
Table 7. Correlations for Variables in Exploratory Analyses With Unemployed Women

(N=99)

<table>
<thead>
<tr>
<th>Variable</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. SVAWS</td>
<td>—</td>
<td>.46**</td>
<td>.01</td>
<td>.06</td>
<td>-.12</td>
<td>-.01</td>
<td>.45**</td>
<td>.38**</td>
<td>-.06</td>
</tr>
<tr>
<td>2. PMWI</td>
<td>—</td>
<td>-.04</td>
<td>-.08</td>
<td>.13</td>
<td>-.02</td>
<td>.94**</td>
<td>.88**</td>
<td>.10</td>
<td></td>
</tr>
<tr>
<td>3. WRSEQ</td>
<td>—</td>
<td>.77**</td>
<td>-.09</td>
<td>.30**</td>
<td>-.09</td>
<td>.04</td>
<td>-.14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. WROEQ</td>
<td>—</td>
<td>-.21*</td>
<td>.39**</td>
<td>-.12</td>
<td>-.02</td>
<td>-.35**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Chronicity</td>
<td>—</td>
<td>-.19*</td>
<td>.12</td>
<td>.11</td>
<td>.30**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Work Goals</td>
<td>—</td>
<td>-.07</td>
<td>.06</td>
<td>—</td>
<td>-.28**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Dom/Iso</td>
<td>—</td>
<td>.66**</td>
<td>.15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Emo/Ver</td>
<td>—</td>
<td>.01</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Age</td>
<td>—</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

M  
29.19 60.85 8.21 8.60 60.61 10.24 28.95 31.90 35.60

SD  
15.75 10.58 2.24 1.64 65.63 4.96 6.84 4.74 9.28

Note. * p < 0.05, one-tailed, ** p < 0.01, one-tailed. Severity of Violence Against Womens Scale (SVAWS), Psychological Maltreatment of Women Inventory (PMWI), Work-Related Self-Efficacy Expectations Questionnaire (WRSEQ), Work-Related Outcome Expectations Questionnaire (WROEQ), Chronicity of Abuse (Chronicity; in months), goals for work-related behavior (Work Goals), Dominance-Isolation subscale of PMWI (Dom/Iso), Emotional-Verbal subscale of PMWI (Emo/Ver).

The statistically significant associations between chronicity of abuse and unemployed women’s work-related goals and outcome expectations suggested that perhaps chronicity of abuse could be considered an alternative operational definition for IPV-related “learning.” From that perspective, chronicity was conceptualized to be a predictor of work-related outcome expectations and work-related outcome expectations were conceptualized as a mediator of the relation between chronicity and work goals, Kenny’s (2006) steps in establishing mediation were used to determine if work-related outcome expectations mediated the association between chronicity of abuse and work goals. All three variables were correlated significantly (See Table 7) and the results of hierarchical multiple regression analysis suggested that work-related outcome expectations did fully mediate the relationship between chronicity of abuse and goals to
engage in work behavior in this sample. Specifically, the previously significant relation between chronicity of abuse and work goals disappeared when outcome expectations were entered at step 1 of the regression. A Sobel test confirmed the mediation (Preacher, 2010). See Table 8 for the regression results.

Table 8. Regression Results for Test of Degree to Which Work-Related Outcome Expectations Mediate the Relationship Between Chronicity of Abuse and Work Goals

<table>
<thead>
<tr>
<th>Step 1</th>
<th>B</th>
<th>SE</th>
<th>β</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constant</td>
<td>.42</td>
<td>2.50</td>
<td></td>
</tr>
<tr>
<td>Work-Related Outcome Expectations</td>
<td>1.13</td>
<td>.29</td>
<td>.39</td>
</tr>
<tr>
<td>Step 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>1.57</td>
<td>2.67</td>
<td></td>
</tr>
<tr>
<td>Work-Related Outcome Expectations</td>
<td>1.07</td>
<td>.29</td>
<td>.36</td>
</tr>
<tr>
<td>Chronicity of Abuse</td>
<td>-.01</td>
<td>.01</td>
<td>-.12</td>
</tr>
</tbody>
</table>

Note. $R^2 = .15$, $F (1, 92)=16.03$, $p < .05$ for Step 1; $\Delta R^2 = .01$, $\Delta F (1, 91)=1.41$, $p > .05$ for Step 2

Lastly, analyses were conducted to explore individual differences in the current sample. Previous research (Mouton, Rodabough, Rovi, Hunt, Talamantes, Brzyski, & Burge, 2004) suggested racial differences in psychological/emotional victimization, with White women reporting higher levels of verbal abuse than minority women, so racial differences in abuse were examined. Likewise, since Bandura’s Social Cognitive Theory (1977, 1982, 1986) is based on the notion of learning, it seemed reasonable to suggest that age may be a relevant demographic variable to consider with the assumption that with age comes more learning experiences via abuse. Exploratory analyses, therefore, examined race and age in relation to the SCCT and abuse variables.

Correlations between relevant demographics, IPV variables, and SCCT variables were inspected (see Table 7). Age of participant was significantly and positively related
to chronicity of abuse, meaning that older participants not surprisingly reported experiencing longer abuse. Age was also significantly and negatively associated with work-related outcome expectations and goals for work. This suggests that as the age of participants increased, their work-related outcome expectations and goals for work decreased.

Mean differences in psychological/emotional victimization, physical abuse, work-related outcome expectations, and work-related self-efficacy expectations were examined in relation to participants’ race. The results of independent t-tests suggested that White and Black participants scored significantly differently on psychological/emotional victimization (as expected based on prior research), with White participants reporting more psychological/emotional victimization ($t(60.75) = 3.35, p < .05$). Racial differences were not found for reported levels of physical abuse, $t(95) = 1.17, p > .05$. Similarly, no differences were noted for work-related outcome expectations, $t(95) = -1.82, p > .05$, or work-related self-efficacy expectations, $t(95) = -1.48, p > .05$. See Table 9 for the details of these analyses.

Table 9. Results of Independent T-Tests for Comparing IPV and SCCT Variables Among White (N=57) and Black (N=40) Participants

<table>
<thead>
<tr>
<th>Participants</th>
<th>White Participants</th>
<th>Black Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean Psychological/Emotional Victimization</td>
<td>62.82</td>
<td>54.28</td>
</tr>
<tr>
<td>Std. Error Mean</td>
<td>1.20</td>
<td>2.25</td>
</tr>
<tr>
<td>Mean Physical Abuse</td>
<td>29.72</td>
<td>25.75</td>
</tr>
<tr>
<td>Std. Error Mean</td>
<td>2.14</td>
<td>2.65</td>
</tr>
<tr>
<td>Mean Work-Related Outcome Expectations</td>
<td>8.41</td>
<td>9.04</td>
</tr>
<tr>
<td>Std. Error Mean</td>
<td>.25</td>
<td>.22</td>
</tr>
<tr>
<td>Mean Work-Related Self-Efficacy Expectations</td>
<td>8.21</td>
<td>8.90</td>
</tr>
<tr>
<td>Std. Error Mean</td>
<td>.32</td>
<td>.33</td>
</tr>
</tbody>
</table>
Summary

The purpose of this chapter was to present the results of the primary and exploratory analyses of the present investigation. The hypotheses that psychological/emotional victimization significantly predicts both work-related self-efficacy expectations and work-related outcome expectations beyond the contribution of physical abuse were not supported. The prediction that work-related self-efficacy expectations positively relates to work-related outcome expectations was supported. Lastly, the hypotheses that chronicity of abuse moderates the associations between psychological/emotional victimization and work-related self-efficacy expectations and work-related outcome expectations were not supported.

Exploratory analyses with only unemployed women revealed that work-related goals significantly and positively related to work-related self-efficacy and outcome expectations, and significantly and negatively associated to chronicity of abuse. Subsequent analysis suggested work-related outcome expectations may mediate the association between chronicity of abuse and work goals. Finally, racial differences were found for psychological/emotional victimization with White participants reporting higher levels than Black participants and age was significantly and negatively related to work-related outcome expectations and goals to work.
CHAPTER V
DISCUSSION

The purpose of the present investigation was to answer the calls from numerous authors (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Wettersten, & Brown, 2004; Chronister, & McWhirtter, 2006; Gianakos, 1999; Wettersten, Rudolph, Faul, Gallagher, Trangsrud, Adams, Graham, & Terrance, 2004) to extend counseling psychology’s focus on the vocational needs of survivors of intimate partner violence. Consistent with previous research (Albaugh & Nauta, 2005; Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, 2006; Chronister, Linville, & Kaag, 2008; Chronister & McWhirtter, 2004; Chronister & McWhirtter, 2006), the present study used Bandura’s Social Cognitive Theory (1977, 1982, 1986) as its theoretical framework.

More specifically, this investigation conceptualized psychological/emotional victimization as a form of Bandura’s (1977, 1982) verbal persuasion learning experience. The present study investigated the relationship between psychological/emotional victimization (e.g., intense criticism, put-downs, verbal harassment, denial of access to resources, restriction of freedom, intimidation, and the implicit or explicit threat of the loss of something) and work-related self-efficacy expectations (e.g., survivors’ confidence in their ability to look for a job, complete a job interview, regularly attend
work and perform job tasks) and work-related outcome expectations (i.e., survivors’ beliefs about the consequences of finding and maintaining employment).

The second purpose of this study was to continue a history of examining the relationship between self-efficacy expectations and outcome expectations (Gainor & Lent, 1998; Lopez, Lent, Brown, & Gore, 1997; Smith & Fouad, 1999). In particular, the present study assessed the relationship between IPV survivors’ work-related self-efficacy expectations and their work-related outcome expectations.

The third purpose of this study was to investigate more systematically than has been done in the past whether length of time in an abusive intimate partner relationship moderates the associations between IPV and work-related self-efficacy expectations and outcome expectations. In particular, this study maintained that survivors who were in longer abusive relationships were likely exposed to more of what Bandura (1977, 1982) termed learning experiences (i.e., verbal persuasion) from their partner. Therefore, based on Bandura’s (1997, 1982, 1986) Social Cognitive Theory, it seemed reasonable that the associations between IPV and work-related self-efficacy expectations and outcome expectations would be stronger for survivors of longer abusive relationships.

The final purpose of this study was to assess survivors’ goals for employment. Implicit in the literature is the contention that survivors with stronger work-related self-efficacy expectations and positive work-related outcome expectations have stronger goals to work. Thus, assessing survivors’ goals for employment in relation to the other social cognitive constructs was an exploratory objective of this study.

Data from 117 survivors of IPV residing in domestic violence shelters were used in the study. Participants were recruited from twelve domestic violence shelters within
Ohio and Pennsylvania. In order to participate in the study, shelter residents had to meet the following inclusion criteria: experience of at least one incident of psychological/emotional victimization within the six months prior to entering shelter, the relationship with their romantic partner was at least six months in duration, and the participant has been residing in shelter for one month or less. All participants completed the self-report measures of IPV (i.e. PMWI-Short Form; Tolman, 1999, SVAWS; Marshall, 1992) and work-related self-efficacy expectations and outcome expectations. Participants also completed a 25-item demographic questionnaire which included an item assessing the length of participants’ relationship (chronicity of abuse) and three items regarding their intentions to engage in work behaviors (work goals).

Summary of Results

Hypotheses one and two predicted that psychological/emotional victimization relates to participants’ work-related self-efficacy expectations and participants’ work-related outcome expectations beyond the contribution of physical abuse. The results of the hierarchical multiple regression analyses failed to support these hypotheses. These findings appear to indicate that in this sample, psychological/emotional victimization did not predict either work-related self-efficacy expectations or work-related outcome expectations beyond the contribution of physical abuse. In fact, the results suggest that neither physical abuse nor psychological/emotional victimization accounted for significant variance in self-efficacy expectations or outcome expectations.

These results are contradictory to SCCT and the IPV literature that suggests IPV may negatively affect survivors’ self-efficacy regarding their ability to successfully seek
and maintain employment and their beliefs about the consequences of work (Bowen, 1982; Chronister, & McWhirter, 2003; Chronister, Wettersten., & Brown, 2004; Gianakos, 1999), but are consistent with the findings of Chronister and McWhirter (2004) and Albaugh and Nauta (2005). It is important to note, however, that the relationships between psychological/emotional victimization and work-related self-efficacy expectations were in the direction suggested by SCCT and the predictions of the present study; nevertheless, the relationships did not attain statistical significance.

In this sample of survivors, psychological/emotional victimization was not significantly associated to work-related self-efficacy expectations or work-related outcome expectations. This is consistent with the findings by Albaugh and Nauta (2005), who also did not find a relationship between psychological aggression and career decision self-efficacy, and also with the results of Chronister and McWhirter (2004), who found a lack of association between abuse history and vocational skills self-efficacy and career outcome expectations. Taken together, the results of all three investigations seem to suggest that psychological/emotional victimization, at least when assessed in a general manner, may not contribute to survivors’ self-efficacy expectations and outcome expectations regarding work.

Bandura (1977, 1982, 1986) suggested that judgments of self-efficacy are task-specific and come from four sources of information; performance attainments, vicarious experiences of observing the performances of other, verbal persuasion, and physiological states. Bandura (1977, 1982, 1986) explained that performance attainments “provide the most influential source of efficacy information because it can be based on authentic mastery experiences” (p. 126). In this sample, perhaps participants’ more task-specific
educational experiences and work histories positively influenced their self-efficacy expectations regarding their ability to successfully seek and maintain employment and their outcome expectations regarding the consequences of working. More specifically, perhaps this sample’s educational and work histories provided them the opportunity to develop high work-related self-efficacy expectations through performance accomplishment, thus decreasing the potential impact of the psychological/emotional victimization (i.e., verbal persuasion) they subsequently experienced.

Sixty-nine percent (81/117) of the participants either graduated from high school/earned GED, completed some college, earned a certificate, graduated from a four year college, earned an Associate’s degree, or completed a job training program. In addition, 82 % (91/111) of the participants indicated that they had previously held jobs for one year or longer. Supporting the premise that such experiences may be linked to social cognitive variables, the results of an independent t-test showed that participants with higher education experience (i.e., completed some college or received specific job training) reported significantly higher work-related self-efficacy expectations than did participants with a GED or less ($t(114.95) = -2.24, p < .05$). No such differences were found, however, for work-related outcome expectations. Similarly, 62.4% (73/117) of the women indicated that they were currently job hunting, and it is possible that participants received encouraging feedback on a prior job or from the job hunting process which may have influenced their work-related self-efficacy expectations and work-related outcome expectations.

Limiting assessment of participants’ psychological/emotional victimization to the women’s most recent abusive relationship also may have influenced these results.
Seventy-one women (60.7%) reported previous abuse by a romantic partner (19.1% =1, 10.2% =2, 7.6% =3, 5.1% = 4, .6% = 5, .6% = 6). There may be a significant amount and type of variation associated with psychological/emotional victimization from previous relationships that is not accounted for in this investigation.

Another potential explanation for the lack of support of these hypotheses is the high scores and limited variability in scores for psychological/emotional victimization, work-related self-efficacy expectations, and work-related outcome expectations among this sample. Contrary to postulations in the IPV literature (Bowen, 1982; Chronister & McWhirter, 2003), the survivors in this sample reported good confidence in their ability to successfully seek and maintain employment, as well as positive expectations regarding the consequences of working. The mean work-related self-efficacy expectations score in this sample was 8.46 (SD = 2.22), with eleven being the highest possible score. The mean work-related outcome expectations score in this sample was 8.73 (SD = 1.60), with eleven again being the highest possible score. Further, the mean psychological/emotional victimization score in this sample was 60.02 (SD=11.43), with 70 being the highest possible score. These high scores with limited variability suggest the potential for ceiling effects. Hessling, Traxel, and Schmidt (2004) explained that “a ceiling effect occurs when a measure possesses a distinct upper limit for potential responses and a large concentration of participants score at or near this limit (the opposite of a Floor Effect)” (p. 106). Thus, the overall high scores with limited variability among the variables of interest (i.e., work-related self-efficacy expectations, work-related outcome expectations, and psychological/emotional victimization) may have contributed to the lack of significance for the predicted relationships.
Assessing survivors’ work-related self-efficacy expectations and work-related outcome expectations within a month of entering shelter also may have contributed to participants’ high self-efficacy scores. Johnson and Zlotnick (2009) suggested that a prime time to intervene with survivors of IPV is when they have entered shelter, as they have instituted change in their lives. Similarly, the transtheoretical model (Prochaska, DiClemente, & Norcross, 1992) suggests that during the action stage of change, individuals act from a sense of self-liberation, meaning that they believe they can change their lives in key ways. Prochaska and Norcross (2003) explained that self-liberation is partly based on a sense of self-efficacy and a belief that “one’s own efforts play a critical role in succeeding in the face of difficult situations” (p. 527). Perhaps then, participants’ high work-related self-efficacy and high work-related outcome expectation scores can be attributed to the fact they have just instituted a major change in their lives by leaving their abusive partners and maybe their self-efficacy regarding their ability to manage this difficult situation, including their ability to find work, is inflated.

Similarly, perhaps participants’ work-related self-efficacy expectations and work-related outcome expectations were influenced by a type of verbal persuasion not assessed in the present investigation. The culture of domestic violence shelters is often empowering and supportive. It may be that participants had been receiving positive verbal persuasion from shelter staff and shelter residents since arriving at the shelter, impacting their work-related self-efficacy expectations and outcome expectations beyond the impact of their most recent experiences with psychological/emotional victimization by a partner. This possibility would also be consistent with Bandura’s (1977, 1982, 1986) theory.
Lastly, it is also possible that the survivors may not have felt comfortable reporting decreased confidence in their ability to successfully seek and maintain employment or their beliefs about the negative consequences of working. Although no identifying information was on the questionnaires, it is possible that participants were concerned that their responses to the questions would impact the services they were receiving from the shelter or their shelter stay. Minimizing demand characteristics and social/evaluative concerns is particularly important with SCCT variables, as they rely so heavily on participants’ candor (Lent & Brown, 2006).

The third hypothesis predicted that work-related self-efficacy expectations positively relate to work-related outcome expectations. The results of the Pearson’s correlation supported this hypothesis. In this sample, it appears that work-related self-efficacy expectations are positively associated with work-related outcome expectations. More specifically, as survivors’ confidence in their ability to seek and maintain employment increases, their beliefs in the positive consequences of working also increase. This result is consistent with both IPV research (Chronister & McWhirter, 2004) and career research (Gainor & Lent, 1998; Lopez, Lent, Brown, & Gore, 1997; Smith & Fouad, 1999). This also supports the mechanisms of SCT (1977, 1982, 1986) and SCCT (Lent, Brown, & Hackett, 1994) which have been supported with numerous other samples and content areas (Beebe, Smith, Burk, Dessieux, Velligan, Tavakoli, & Tennison, 2010; Lin, & Huang., 2008; Mitchell, & Fraser, 2011; Taymoori, Rhodes, & Berry, 2010).

Hypotheses four and five predicted that chronicity of abuse by a romantic partner moderates the associations between psychological/emotional victimization and work-
related self-efficacy expectations and between psychological/emotional victimization and work-related outcome expectations. The results of the hierarchical regression analyses failed to support these predictions. The results seem to indicate that in this sample, chronicity of abuse did not significantly moderate the associations between psychological/emotional victimization and work-related self-efficacy expectations or work-related outcome expectations. Because these associations have not been investigated in IPV literature, these results could not be compared to other research findings, but they are inconsistent with the logical argument that more experience with verbal abuse results in more severe outcomes. Again, it is important to highlight that chronicity of abuse was positively associated with psychological/emotional victimization and negatively associated with work-related self-efficacy expectations, but the relationships failed to reach statistical significance. As with the relationships described earlier, these associations were in the direction suggested by SCCT and the predictions of the present study.

Clearly these findings must be considered in the context of the lack of significant relationships between psychological/emotional victimization and work-related self-efficacy expectations and between psychological/emotional victimization and work-related outcome expectations. Although moderators may be examined when there are weak relations between a predictor and outcome (Baron & Kenny, 1986; Chaplin, 1991), moderator effects are best detected when there is a strong association between the two variables (Chaplin, 1991; Frazier, Tix & Barron, 2004; Jaccard et al., 1990).

The potential ceiling effects among the primary variables of interest discussed earlier, in addition to the high mean length of abuse (M = 61.34, SD = 64.66), may also
explain the lack of significant findings for the fourth and fifth hypotheses. Frazier, Tix, and Barron (2004) suggested that restricted range reduces power and impacts the ability to detect interaction effects. Hessling, Traxel, and Schmidt (2004) also argued that “ceiling effects are especially troublesome when interpreting interaction effects” (p. 106).

The present investigation also included a number of exploratory analyses. Implicit in the SCCT (Lent, Brown, & Hackett, 1994) literature is the contention that survivors with stronger work-related self-efficacy expectations and more positive work-related outcome expectations have stronger goals to work. Thus, exploratory analyses examined the association of goals for work-related behavior with work-related self-efficacy and outcome expectations. Simple linear regression analyses were conducted to assess whether work-related self-efficacy and outcome expectations predict goals for work-related behavior among unemployed survivors. Results suggested both work-related self-efficacy expectations and work-related outcome expectations significantly predicted work goals. These results support the mechanisms of SCT with this population and illustrate that as suggested by Bandura (1977, 1982, 1986), survivors’ thoughts about their ability to successfully perform activities around finding and maintaining work, as well as their beliefs about the positive outcomes of working, influence their intentions to engage in work behavior.

Additional exploratory analyses found that work-related outcome expectations mediated the relationship between chronicity of abuse and work goals. Because chronicity of abuse significantly and negatively (r = -.19) related to work-related outcome expectations, it was conceptualized as a type of “learning.” In that role, chronicity of abuse predicted both work-related outcome expectations and goals for work in the
unemployed survivors, but outcome expectations were found to fully account for its relation to work-related goals. This finding suggests attending to a survivor’s more general experience of abuse as representing her learning related to work behavior, instead of her more specific report of psychological/emotional victimization, may enhance future research and practice. This conceptualization also seems to better support the ideas underlying SCT. Perhaps there are important aspects of the abuse experience that remain uncaptured by current assessment methods.

Due to earlier findings of racial differences in experiences of verbal abuse and working from the assumption that learning experiences via abuse increase with age, exploratory analyses were conducted in an attempt to gain a better understanding of the present investigation’s sample by examining race and age in relation to the SCCT and abuse variables. The analysis indicated that older participants reported less positive expectations about the consequences of job-seeking and working than did younger participants. As the majority of participants indicated that their work histories primarily entailed unskilled positions (e.g., cashier, fast food, factory, home health care), it seems reasonable to suggest that in such positions workers may have less opportunity to receive promotions, to have control over their working conditions, or to have flexible hours. It also seems likely that older participants have had more experience in such work conditions and therefore may have a less idealistic view of the outcomes of working. This finding is consistent with Bandura’s (1977, 1982, 1986) postulation that learning experiences are associated with outcome expectations. Despite the negative relationship between age and level of outcome expectations, however, it must be noted that all participants’ expectations regarding the consequences of working were quite high.
Finally, the present observations about racial differences in victimization extend and support prior research. In this sample, White and Black participants scored significantly differently on psychological/emotional victimization, with White participants reporting more psychological/emotional victimization. An investigation by Mouton, Rodabough, Rovi, Hunt, Talamantes, Brzyski, and Burge (2004) also found that White women reported more exposure to verbal abuse than minority women. Mouton et al. (2004) suggested that racial differences in exposure to types of violence may be explained by varying definitions of what constitutes abuse across racial subgroups. In contrast, the lack of difference between these groups of women in reported physical abuse may be a result of a shared definition of that form of violence.

Strengths and Limitations

The current study exhibited several strengths. First it focused on the vocational needs of survivors of intimate partner violence, which have been called for in recent IPV literature (Brown, Reedy, Fountain, Johnson, & Dichiser, 2000; Chronister, Wettersten, & Brown, 2004; Chronister, & McWhirter, 2006; Gianakos, 1999; Wettersten, Rudolph, Faul, Gallagher, Trangsrud, Adams, Graham, & Terrance, 2004). This research also included participants from six different domestic violence shelters in both urban and rural communities of Ohio and Pennsylvania. Prior IPV researchers have suggested that residents of domestic violence shelters are a sub-population of IPV survivors, as survivors in shelter receive more frequent and more severe abuse and have lower incomes, less education, and more children compared to survivors not in shelter (Gondolf & Fisher, 1988; Ham-Rowbottom, Gordon, Jarvis, & Novaco, 2005). Survivors of IPV
residing in shelter, therefore, are especially in need of interventions designed to assist them in seeking stable employment and increasing their financial stability. Research with this population is needed to inform such interventions. The generalizability of the present results is also increased by inclusion of participants from different shelters and different communities and backgrounds.

Finally, the current study investigated the association between IPV and SCCT constructs more systematically and with stronger instrumentation than has been done in previous research. In particular, strengths of this project were the examination of whether psychological/emotional victimization predicts survivors’ work-related self-efficacy expectations beyond the contribution of physical abuse, and exploration of whether chronicity of abuse interacts with this association. Prior research with survivors of IPV has either not empirically examined the association between IPV and self-efficacy expectations and outcome expectations (Brown et al., 2000) or has not examined the associations between specific forms of violence and self-efficacy expectations and outcome expectations among battered women (Chronister & McWhirter, 2004). The literature to date has also failed to consider length of time in an abusive relationship in relation to IPV and SCT constructs (Albaugh & Nauta, 2005).

Despite the identified strengths, the current study was not without limitations. First, the results of the study should not be generalized to all female survivors of IPV. The majority of the participants in this study identified as heterosexual, were either Caucasian or African American, and reported earning less than $10,000 a year and receiving government aid. It is possible that these women differ in important ways from survivors from other racial groups, those who identify as homosexual or bi-sexual, and
those with higher SES. Similarly, although utilizing participants from domestic violence shelters is a strength of this research, it also limits the generalizability of the results.

The emphasis of this investigation was on the impact of psychological/emotional victimization, but it may have been worthy to examine whether participants’ experiences of other types of violence predicted work-related self-efficacy expectations and work-related outcome expectations, particularly because previous research (Albaugh & Nauta, 2005) found sexual coercion to be negatively associated with some types of career decision self-efficacy (e.g., ability to engage in accurate self appraisal, to select goals, and to problem solve career decision-making challenges). Experiences of financial abuse (e.g., making partners ask for money, taking away paychecks) may also impact survivors’ self-efficacy expectations and outcome expectations about work.

Additionally, combining job seeking and maintaining in the work-related self-efficacy measure may have impacted the results. These two domains of self-efficacy may function differently in relation to other variables of interest despite the overall high internal consistency of the measure. Another issue may have been that psychological/emotional victimization was assessed in a general manner, and perhaps it should have been assessed specific to the ability to work well; matching the specificity of the work-related self-efficacy expectation and work-related outcome expectation measures to the type of learning assessed (i.e., psychological/emotional victimization) may have been a better methodological choice.

Finally, the validity of the responses may be questioned. Albaugh and Nauta suggested that “the perceived shame, guilt, lowered sense of worth and perceptions of loss of control that accompany sexual assault or coercion (Gianakos, 1999) may help
explain its negative relationship with career decision self-efficacy” (p. 301). Including a social desirability measure may have helped control for this possibility.

**Implications for Research**

The IPV literature (Bowen, 1982; Chronister, & McWhirter, 2003; Chronister, Wettersten & Brown, 2004; Gianakos, 1999) presents convincing arguments that IPV may negatively affect survivors’ work-related self-efficacy expectations and work-related outcome expectations. The current study seems to indicate that among IPV survivors residing in domestic violence shelters in Ohio and Pennsylvania, psychological/emotional victimization, as assessed in this research, does not predict self-efficacy regarding ability to successfully seek and maintain employment or beliefs about the consequences of work. Unknown is whether it would have predicted other types of work-related self-efficacy or outcome expectations, and this could be a productive avenue of future research.

Further, as stated earlier, the lack of influence of psychological/emotional victimization on survivors’ work-related self-efficacy expectations and work-related outcome expectations, in addition to the lack of impact of chronicity of abuse moderating the associations between psychological/emotional victimization and work-related self-efficacy expectation and work-related outcome expectation, may be due to when and how the data were collected. Future research should examine the present constructs with survivors after they have been residing in shelter for a longer period of time or perhaps should assess these constructs with survivors who are not residing in shelter. Similarly, participants’ previous experiences in domestic violence shelters were unknown. Future
research should assess whether number of times in such shelters impacts these relationships.

The present study focused on the relation of psychological/emotional victimization to work-related self-efficacy and outcome expectations. It may be useful for future research to examine the consequences of IPV, rather than the report of violence occurrence, for self-efficacy expectations and outcome expectations. Post-traumatic stress disorder (PTSD) is the most prevalent disorder in survivors of IPV (Golding, 1999). Perhaps the physiological arousal associated with PTSD (e.g. hypervigilence, decreased concentration) influences survivors’ work-related self-efficacy expectations and outcome expectations. This would remain consistent with Bandura’s (1977, 1982, 1986) social cognitive theory.

Limiting psychological/emotional victimization experiences to survivors’ most recent abusive relationship may have influenced the ceiling effects observed. There may be a significant amount of variation associated with psychological/emotional victimization from previous relationships that is not accounted for in this investigation. Future research should be conducted that measures experiences of psychological/emotional victimization from all romantic partners. In this way a more complete “learning history” can be obtained.

The associations observed between chronicity of abuse, work-related outcome expectations, and work goals also support taking a more holistic view of survivors’ “learning” in future research. The support obtained for outcome expectations as a mediator of abuse chronicity and work goals suggests that it might be appropriate in future research to conceptualize chronicity of abuse as representing survivors’ learning.
Thinking about learning in a more general way (i.e., chronicity of abuse) rather than in terms of specific types of violence may capture the various components of IPV that impact survivors’ self-efficacy expectations and outcome expectations about work that are not accounted for with more specific operational definitions of learning. Future research should investigate the impact of this more generalized learning on work self-efficacy and outcome expectations.

Alternatively, it may be useful for future vocational research with survivors of IPV to match measures for their level of construct specificity. In particular, it might be beneficial to measure psychological/emotional victimization specific to the woman’s ability to work well. Such a measure might entail items like “my partner’s jealousy interfered with my relationships with my coworkers”, “arguing with my partner interfered with my ability to concentrate at work”, and “My partner tried to keep me from working”. Similarly, perhaps future research should include an assessment of ability along with examination of the impact of psychological/emotional victimization on work-related self-efficacy expectations and work-related outcome expectations; Lent and Brown (2006) noted that ability must be considered along with self-efficacy to predict performance well.

Another implication is the development and use of two new SCT measures that address the issues of work for IPV survivors. The Work-Related Self-Efficacy Expectations Questionnaire and the Work-Related Outcome Expectations Questionnaire held up well and related to each other as expected. Future research should extend information on these measures to establish further their reliability and validity.
Lastly, future research should investigate whether current vocational theory, in general, and SCT specifically, apply to working poor populations. Perhaps the suggested strategies to assess self-efficacy expectations and outcome expectations are not appropriate for populations from lower socio-economic statuses. It may be that there is a need for new vocational theories that focus more directly and intentionally on the implications of social class.

Implications for Practice

Although the expected relations between psychological/emotional victimization and the social cognitive variables were not observed, it is notable that participants in the current investigation endorsed experiencing overall high levels of psychological/emotional victimization. As research has suggested that the nonphysical violence is both the most difficult to identify and address, the present data suggest that it is important for therapists to initiate conversations in therapy about the client’s experience of psychological/emotional victimization, to provide psychoeducation about this type of abuse, and to allow the client to explore the potential impact of nonphysical violence. Further, the significant association observed between physical and psychological/emotional abuse highlights the likely need for therapists to consider and address both types of violence in therapy. Lastly, the significant difference in scores of psychological/emotional victimization between White and Black survivors highlights the importance of therapists taking into account possible cultural/racial differences in definitions or experiences of abuse.
Survivors in the present study also reported high levels of work-related self-efficacy expectations and work-related outcome expectations, suggesting that they were not only confident in their ability to successfully seek and maintain employment, but that they were also hopeful about the consequences of working. Therapists and shelter staff can utilize, and perhaps build on, these positive expectations when assisting survivors in re-establishing themselves in the community after leaving their abusers. This may be particularly important given that work goals were related to self-efficacy and outcome expectations despite the current economic status of the country and the challenging job market.

On the other hand, it may also be necessary for therapists and shelter staff to challenge shelter residents’ high work-related self-efficacy expectations and outcome expectations if they seem unreasonable. The reality is that finding and maintaining employment will be challenging for shelter residents and having unrealistic beliefs about the ability to seek employment or the benefits of work may create disappointment and failure experiences. Failure may influence survivors to return to a more financially stable, but abusive, situation.

Thus, in addition to fostering practical work skills, therapists and shelter staff should create opportunities for survivors to explore and verbalize their positive expectations about their ability to successfully seek and maintain work, as well as their hopeful expectations of the outcomes of working. Therapists and shelter staff could utilize components of the career interventions of Ibrahim and Herr (1987), Gianakos (1999), and Chronister and McWhirter (2006) described earlier, as each intervention includes components that involve attending to and improving survivors’ self-efficacy
expectations and/or outcome expectations about work from a SCCT perspective.

Increasing further women’s work expectations, in addition to increasing their insight about the factors that contribute to these expectations, will lead to stronger work goals. This may be beneficial for survivors in establishing financial stability in both the short-term and long-term in that it will help motivate them to find immediate jobs, as well as continue to examine future work goals/opportunities.

The fact that work-related outcome expectations mediated the relationship between chronicity of abuse and work goals, combined with the evidence that older participants reported significantly lower work-related outcome expectations, emphasizes the value of early interventions with survivors of IPV. Interventions should be designed to increase IPV awareness among younger women, perhaps targeting women as young as high school and college age. Similarly, interventions should provide psychoeducation regarding all types of IPV, particularly the psychological/emotional component as it appears more difficult to identify, so as to increase the likelihood of early detection and action.

Finally, the suggestion to conceptualize Bandura’s learning as a general chronicity of abuse instead of a more specific type of abuse highlights the potential benefits of therapists and shelter staff talking to survivors about the global impact of IPV on their self-efficacy expectations and outcome expectations about work. Perhaps talking about their general experiences of IPV will initially be easier for survivors and will increase insight regarding IPV’s effect on their work lives. As survivors’ insight increases, it may then be helpful for therapists and shelter staff to assist survivors in examining the potential impact of specific forms of violence.
REFERENCES


APPENDIX A
DEMOGRAPHIC QUESTIONNAIRE

Date ____________________

1. What date did you enter the shelter? ________________

2. What year were you born? ______

3. What is your race?
   ___White
   ___Black/African American
   ___Asian American
   ___American Indian/Alaskan Native
   ___Native Hawaiian or Other Pacific Islander
   ___More than one race; describe ________________
   ___Other; describe ______________________

4. Are you of Hispanic or Latino descent?  Yes   No

5. What best describes your sexual orientation?
   ___Male partner
   ___Female partner
   ___Male and/or female partner

6. What describes your most recent romantic partner?
   ___Male partner
   ___Female partner

7. What would you describe as your relationship status with your abuser before coming to shelter?
   ___Single, living together
   ___Single, living in separate residences
   ___Married
   ___Separated
   ___Divorced

8. Were you living with your abuser before living in shelter?  Yes  No

9a. How many months were you in the relationship with your abuser? __________

   9b. How many months was your relationship abusive? __________
10a. Have you been in previous abusive romantic relationships? Yes No

10b. If yes, how many? ____________

10c. If yes, how old were you during your earliest experience with abuse from a romantic partner? ____________

11a. Do you have any children? Yes No

11b. If yes, how many? ______

11c. If yes, what are their ages? ____________

11d. If yes, how many do you have custody of? ______

12. What is your highest educational degree? (What was the last grade you completed in school?)
   ___ Less than 7 years of school (have not completed 7th grade)
   ___ Completed junior high-school (7th, 8th, or 9th grade)
   ___ Completed some high-school, but did not graduate
   ___ Graduated from high-school/ Received GED
   ___ Completed some college
   ___ Earned a certificate (describe) _________________________
   ___ Graduated from a 4-year college
   ___ Earned an Associate degree; (describe) ________________
   ___ Completed a job training/career technical program; describe ____________________
   ___ Graduated from a graduate or professional program; describe ____________

13a. Are you currently employed? Yes No

13b. If yes, give employment status
   ___ Full-time (35 hours or more per week)
   ___ Part-time (less than 35 hours per week)

14. What is your current job? ____________

15. Please list the jobs you have had since the age of 18 (e.g., cashier at Wendy’s, home health care worker, nurse at St. Thomas)

16a. What was your longest held job? ______________

16b. How long did you work at this job? ______________

17a. Have you ever had career counseling, worked with a job coach, or had any other type of job assistance? Yes No

17b. If yes, briefly describe__________________________________

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18a. Are you currently enrolled in school? Yes No

18b. If yes, give your educational status
___ Full-time
___ Part-time

19. Are you currently looking for a job? Yes No

20. Please estimate your current personal income?
___ less than $10,000 per year
___ $10,000 - $15,000 per year
___ $15,000 - $20,000 per year
___ $20,000 - $25,000 per year
___ more than $25,000 per year; describe

21a. Do you currently receive any government aid/public assistance to help support you financially? Yes No

21b. If yes, please mark each type(s) you receive
___ Medical Assistance (for you)
___ Medical Assistance (for your kid(s))
___ Food stamps
___ Cash Assistance
___ Housing Assistance
___ SSI/SSDI (Disability)

Please answer the following three questions according to the key. Mark your answer by filling in the correct response after each question.

<table>
<thead>
<tr>
<th>STRONGLY DISAGREE</th>
<th>DISAGREE</th>
<th>SOMEWHAT AGREE</th>
<th>AGREE</th>
<th>STRONGLY AGREE</th>
<th>NOT APPLICABLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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</table>

22. I intend to start looking for a job within the next 30 days ____

23. Within the next 30 days I plan on creating/updating a resume before I start job hunting ____

24. I intend to get a job within the next 2 months ____

25. Please briefly describe what brought you to the shelter?
In order to notify you if you won the drawing for the fifty dollar Visa card, I need your name and a safe number where you can be reached. This information will be kept confidential and will not be attached to your responses to the questionnaires. It is completely your choice to give me this information. If you do not want to provide me with your name and phone number, that is okay and you can still participate in the study. However, if you do not give me your name and phone number, you WILL NOT be eligible to win the fifty dollar Visa card.

1a. What is your name? _________________________________

1b. Where is a safe number for me to contact you? _____________________

Contact information is needed in order to notify you if you win the $50 Visa Card. I will attempt calling you 3 times. After the 3rd attempt, your name will no longer be eligible to win the prize and another name will be drawn.
APPENDIX B

PSYCHOLOGICAL MALTREATMENT OF WOMEN INVENTORY-SHORT FORM

This questionnaire asks about actions you may have experienced in your relationship with your partner. Answer each item as carefully as you can by circling a number next to each statement according to the following scale:

1 = NEVER  
2 = RARELY  
3 = OCCASIONALLY  
4 = FREQUENTLY  
5 = VERY FREQUENTLY  
NA = NOT APPLICABLE

IN THE PAST SIX MONTHS:

1. My partner called me names.  
   1 2 3 4 5 NA

2. My partner swore at me.  
   1 2 3 4 5 NA

3. My partner yelled and screamed at me.  
   1 2 3 4 5 NA

4. My partner treated me like an inferior.  
   1 2 3 4 5 NA

5. My partner monitored my time and made me account for my whereabouts.  
   1 2 3 4 5 NA

6. My partner used our money or made important financial decisions without talking to me about it.  
   1 2 3 4 5 NA

7. My partner was jealous or suspicious of my friends.  
   1 2 3 4 5 NA

8. My partner accused me of having an affair with another person.  
   1 2 3 4 5 NA

9. My partner interfered in my relationships with other family members.  
   1 2 3 4 5 NA

10. My partner tried to keep me from doing things to help myself.  
    1 2 3 4 5 NA
11. My partner restricted my use of a telephone. 1 2 3 4 5 NA
12. My partner told me my feelings were irrational or crazy. 1 2 3 4 5 NA
13. My partner blamed me for his/her problems. 1 2 3 4 5 NA
14. My partner tried to make me feel crazy. 1 2 3 4 5 NA
APPENDIX C

SEVERITY OF VIOLENCE AGAINST WOMEN

During the past six months, you and your partner have probably experienced anger or conflict. Below is a list of behaviors your partner may have done during the past 6 months. For each statement, describe how often your partner has done each behavior by writing a number from the following scale.

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</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Never</td>
<td>Once</td>
<td>A few times</td>
<td>Many times</td>
</tr>
</tbody>
</table>

*How often has your partner:*

___ 1. Held you down, pinning you in place
___ 2. Pushed or shoved you
___ 3. Grabbed you suddenly or forcefully
___ 4. Shook or roughly handled you
___ 5. Scratched you
___ 6. Pulled your hair
___ 7. Twisted your arm
___ 8. Spanked you
___ 9. Bit you
___ 10. Slapped you with the palm of his/her hand
___ 11. Slapped you with the back of his/her hand
___ 12. Slapped you around your face and head
___ 13. Hit you with an object
___ 14. Punched you
___ 15. Kicked you
___ 16. Stomped on you
___ 17. Choked you

1  2  3  4
Never  Once  A few times  Many times

How often has your partner:

___ 18. Burned you with something
___ 19. Used a club-like object on you
___ 20. Beat you up
___ 21. Used a knife or gun on you
APPENDIX D

WORK-RELATED SELF-EFFICACY EXPECTATIONS QUESTIONNAIRE

INSTRUCTIONS: These questions are designed to help us get a better idea of the kind of things that are difficult about looking for a job and working. Please rate how certain you are that you can CURRENTLY do each of things described below by marking the answer according to the key. Your answers will be kept strictly private.

Rate your degree of confidence by recording a number from 0 to 100 using the scale given below:

1           2           3           4           5           6           7           8           9           10           11
Cannot do at all Moderately can do Highly certain can do

HOW MUCH CONFIDENCE DO YOU HAVE THAT YOU CAN CURRENTLY:

1. Identify and use the resources you need to find a job ____
2. Know where to find information about job postings ____
3. Look for a job ____
4. Prepare a good resume ____
5. Get a job interview ____
6. Identify your job skills ____
7. Prepare for a job interview ____
8. Dress in a way that communicates success during a job interview ____
9. Describe your skills and abilities in a job interview ____
10. Succeed in a job interview ____
11. Regularly attend work as scheduled ____
12. Concentrate on your required work tasks ____
13. Succeed at your job ____
14. Have the skills needed to do your job ____
15. Get promoted at work / receive a raise ____
16. Keep your job for as long as you would like ____
APPENDIX E

WORK-RELATED OUTCOME EXPECTATIONS QUESTIONNAIRE

INSTRUCTIONS: For each statement below, please read carefully and indicate how much you agree by marking the answer according to the key. Mark your answer by filling in the response after each question. There are no right or wrong answers. Your answers will be kept strictly confidential.

1           2           3           4           5           6           7           8           9           10           11
Strongly Disagree Somewhat Agree Strongly Agree

IF I DO A JOB SEARCH:

1. I will find job postings that I am qualified to apply for ____
2. I will feel anxious ____
3. I will get an interview ____
4. I will have a good interview ____
5. I will find a job ____
6. I will feel accomplished from finding a job ____

IF I GET A JOB:

7. I will feel better about myself ____
8. I will make use of my abilities ____
9. I will be more independent ____
10. I will be financially stable ____
11. I will get support from my family and friends ____
12. I will have the opportunity to develop my skills at work ____

13. I will get satisfaction from working ____

14. I will fight with a romantic partner because I work ____

1 2 3 4 5 6 7 8 9 10 11
Strongly Disagree Somewhat Agree Strongly Agree

IF I GET A JOB:

15. I will get mixed messages about work (e.g. work/don’t work) from a romantic partner ____

16. I will be bothered at work by a romantic partner ____

17. I will have access to the money I earn from working ____

18. I will make mistakes at work, resulting in getting punished ____

19. I will receive positive evaluations from my boss ____

20. I will get a raise and/or promotion ____

21. I will get recognized/praised for the things I do ____

22. I will have good working conditions ____

23. My work hours will be flexible and meet the needs of my family ____
APPENDIX F

INSTITUTIONAL REVIEW BOARD APPROVAL

NOTICE OF APPROVAL

June 10, 2010

Agnan Sihet

275 Hamden Hall Rd., Apt. 4
Cleveland Heights, OH 44106

From: Sharon Schillinger, IRB Administrator

Re: #12222234 "Outsiders' Violence (OPV) and Work"

Thank you for submitting an IRB application for Review of Research Involving Human Subjects for the referenced project. Your proposal represents minimal risk to subjects and has been approved under Expedited Category #7.

Approved Date: June 10, 2010
Expiration Date: June 10, 2011

In addition, the following have been approved:
- Volume of documentation of consent
- Approval of allocation of consent
- Research involving children
- Research involving prisoners

Please adhere to the following IRB policies:
- IRB approved in good for not more than 12 months. If your project will be active for longer than one year, it is your responsibility to submit a continuation application prior to the expiration date. We require submission two weeks prior to expiration to ensure sufficient time for review.
- Electrical equipment should not be used in the laboratory.
- If you plan to make any changes to the approved protocol, you must submit a continuation application for change and it must be approved by the IRB before being implemented.
- Any adverse reactions/accidents must be reported immediately to the IRB.
- If the research is being conducted for a nation's own or national defense, you must file a copy of this letter with the appropriate department.

Additional information and all IRB forms can be accessed on the IRB website at:
http://www.case.edu/irb/index.jsp?prepip=1

CC: Linda Sihet, Advisor
CC: Stephanie Irsch, IRB Chair

Office of Research Services and Sponsored Programs

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