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**A FEMINIST-CENTERED, SELF-EFFICACY, PSYCHOEDUCATIONAL
INTERVENTION FOR LOW-INCOME RURAL ABUSED WOMEN**

by

CATHERINE R. THOMAS

**SUBMITTED TO SCRIPPS COLLEGE IN PARTIAL FULFILLMENT OF THE
DEGREE OF BACHELOR OF ARTS**

PROFESSOR CATALINO

PROFESSOR WALKER

DECEMBER 13, 2019

Abstract

The effects of a feminist-centered, self-efficacy, psychoeducational intervention will be tested using low-income rural female domestic violence victims. Derived from previous literature indicating that lower self-efficacy is commonly seen in abused women, this intervention will focus on reconfiguring the abused women's ideas on the patriarchal world through a feminist-centered approach to increase their self-efficacy. Before the intervention, well-being, assertiveness, self-efficacy, attitudes towards feminism, and likelihood of returning to their abuser will be measured. The same dependent variables will be measured after the intervention, except for the likelihood of them returning to their abusers. As a follow-up three weeks after the intervention, the participants will be asked the likelihood they feel of returning to their abusers. It is predicted that the women in the feminist-centered self-efficacy intervention will show higher scores on the dependent variables after the intervention than before the intervention. Another prediction is that the feminist-centered self-efficacy intervention group will show higher scores on the dependent variables in comparison to the control group. It is also expected that self-efficacy will mediate the relationship between the condition and likelihood of returning to abusers. This area of study is extremely important in helping women who have experienced violence leave their abusers.

Introduction

Intimate partner violence (IPV) is a vastly recurring public health issue (World Health Organization, 2005; Warshaw, Sullivan, & Rivera, 2013; Campbell, 2002; Smith, Chen, Basile, Gilbert, Merrick, Patel, Walling, & Jain, 2017). IPV is defined as a cycle of physical, psychological, sexual, or economic abuse through controlling behaviors that include social isolation, intimidation, or sexual assault (World Health Organization, 2005; Warshaw, Sullivan, & Rivera, 2013; Lanier & Maume, 2009; Campbell, 2002). About 25%-33% of heterosexual women experience abuse from intimate partners (Hughes, Cangiano, & Hopper, 2011). Survivors of abuse frequently experience a whole host of negative impacts psychologically from their controlling partners, as well as numerous physical and emotional health problems (Sawin, Sobel, Annan, & Schminkey, 2017; Campbell, 2002; Smith, Chen, Basile, Gilbert, Merrick, Patel, Walling, & Jain, 2017). Abused women frequently develop psychological symptoms such as fear, anxiety, depression, and post traumatic stress disorder (PTSD) (Sawin, Sobel, Annan, & Schminkey, 2017; Murdaugh, Hunt, Sowell, & Santana, 2004; Warshaw, Sullivan, & Rivera, 2013). Many abused women face barriers to resources and support, especially in rural areas in the United States (Sawin, Sobel, Annan, & Schminkey, 2017; Peek-Asa, Wallis, Harland, Beyer, Dickey, & Saftlas, 2011).

The decision to stay or leave an abusive partner is an incredibly tough decision abused women have to make. This decision happens over a long period of time as the victim has many

variables to consider (Lerner & Kennedy, 2000; Kim & Gray, 2008). Studies indicate that victims stay with their abusers or return to their abusers due to several factors such as the involvement of children, economic dependency, fear that they cannot take on the world alone, and others (Lerner & Kennedy, 2000; Kim & Gray, 2008). These traumatic experiences commonly increase feelings of hyperarousal, fear, and ultimately negatively impact abused women's well-being (Campbell, 2002; Kim & Gray, 2008). Lower self-efficacy is commonly seen in abused victims (Ross, 2012). Self-efficacy is a concept postulated by Bandura, expressed as a significant aspect of human well-being (Bandura, 1977; Bandura, 2008). With control and surveillance exerted over abused women by manipulative partners, abused women commonly believe that they deserve the abuse.

There is an extensive body of literature concerning abused women in urban areas in the United States, however, less research has focused on abused women in low-income, rural areas in the United States (Intimate Partner Violence in Rural America, 2015; Lanier & Maume, 2009). Furthermore, very little research has focused on interventions for rural abused women to help them escape their abusive partners, as abused women in more remote, low-income areas tend to face excessive barriers to accessing resources than their low-income urban counterparts (Lanier & Maume, 2009; Sawin, Sobel, Annan, & Schminkey, 2017; Peek-Asa, Wallis, Harland, Beyer, Dickey, & Saftlas, 2011). This study attempts to instill self-efficacy through a feminist-centered approach by focusing on abused women in rural areas who have just left their

abusers, to increase empowerment, increase their overall well-being, and to decrease the likelihood of them returning to their abusers.

Literature Review

Barriers to Low-income Rural Abused Women

Low-income rural abused women experience more obstacles than low-income urban abused women when accessing community resources such as health care, sufficient public transportation, or childcare services (Sawin, Sobel, Annan, & Schminkey, 2017; Peek-Asa, Wallis, Harland, Beyer, Dickey, & Saftlas, 2011; Intimate Partner Violence in Rural America, 2015). Studies have also found that there are higher amounts of abused women in more rural areas (Intimate Partner Violence in Rural America, 2015; Peek-Asa, Wallis, Harland, Beyer, Dickey, & Saftlas, 2011). One study found that, in comparison to urban abused women, rural abused women experience more severe physical abuse (Peek-Asa, Wallis, Harland, Beyer, Dickey, & Saftlas, 2011). Much of this is due to patriarchal beliefs regularly being a core agonist of abuse towards women (Hunnicut, 2009). These patriarchal values and traditional gender roles tend to be more present in rural areas rather than in urban areas (Sawin, Sobel, Annan, & Schminkey, 2017). Jennings and Piquero's study found that abused rural women also have a higher risk of death than abused urban women (Jennings & Piquero, 2008).

Peek-Asa, Wallis, Harland, Beyer, Dickey, and Saftlas's study found that while about 1% of abused urban women live more than 40 miles away from a resourceful program, about one

quarter of abused rural women live more than 40 miles away from a resourceful program (Peek-Asa, Wallis, Harland, Beyer, Dickey, & Saftlas, 2011). This sheds light on the extreme difficulties faced in terms of transportation and commuting distances to women's shelters for rural women. Extended traveling distances amplify factors such as social isolation and less social support by not having resources in close proximity. While abused women are typically restricted by their abuser to discuss the abuse with others, less social support and fear of small-talk in a tight knit community exacerbate the difficulties of accessing resources for abused women in small community contexts. In addition, rural women do not utilize health care as much as urban women (Sawin, Sobel, Annan, & Schminkey, 2017).

Becoming financially independent is another barrier for low-income rural abused women than low-income urban abused women (Intimate Partner Violence in Rural America, 2015). In addition to increased poverty rates in rural areas in the United States, more scarce employment opportunities in rural areas make it even more difficult for victims when they are trying to leave their abuser and not be financially dependent on them (Intimate Partner Violence in Rural America, 2015). All of these factors make low-income rural abused women a particularly vulnerable population.

Self-efficacy

Bandura defines self-efficacy as the perceived ability to influence and control the events in one's life to obtain an accomplishment (Bandura, 2008). The self-efficacy theory is a major

part of Bandura's social cognitive theory, which refers to mediating human behavior (Bandura, 1977; Bandura, 2008). Bandura's "An Agentic Perspective on Positive Psychology" looks at how self-efficacy can be highly impactful for one's well-being (Bandura, 2008).

Bandura lays out the four sources of development for self-efficacy as: mastery experiences, vicarious experiences, social persuasion, and physical arousal and mood (Bandura, 2008). An experience in one of these contexts can greatly contribute to the development of self-efficacy. Mastery experience is an individual's own experience that can raise resilience and perseverance to meet a goal. Vicarious experiences build aspirations from observing others. Social persuasion can increase one's effort by encouragement from others. Self-efficacy can also be strengthened by enthusiasm and a non-anxious body, which refers to physical arousal and mood (Bandura, 2008). While self-efficacy is the perceived belief that one can control situations in life, agency, as defined by Bandura, "is to influence intentionally one's functioning and life circumstances" (Bandura, 2006, p. 164). Taking charge over the actions and the course of one's life to achieve a wanted end-result is required for psychological well-being and motivation (Bandura, 2008).

Self-efficacy in Abused Women

Research has shown significantly lower self-efficacy in abused women (Ross, 2012). Various recent studies have focused on the measurement of self-efficacy and increasing self-efficacy through interventions. Cox and Stoltenberg's study found that increasing

empowerment and self-esteem in abused women ultimately led to an increase in overall well-being and decrease in negative psychiatric symptoms (Cox & Stoltenberg, 1991). Bandura and Benight's study found that self-efficacy was a major factor for coping with various traumatic experiences (Bandura & Benight, 2004). If one's self-efficacy has decreased and they feel unmotivated to take any sort of action in life, increasing their empowerment and self-efficacy will help them come to the belief that they can create their own path in life (Bandura, 2008).

Numerous mental health consequences of abused women include fear, anxiety, depression, hyperalertness, and PTSD (Campbell, 2002; Sawin, Sobel, Annan, & Schminkey, 2017; Murdaugh, Hunt, Sowell, & Santana, 2004; Warshaw, Sullivan, & Rivera, 2013). The abuser manipulating, monitoring, isolating, and stripping the identity of the abused woman leads to a decrease in her perceived control, while a depressed mood will create a lack of motivation. This lack of motivation contributes to the vicious cycle of the woman being unable to leave the abusive relationship. Abusers tend to alienate their victim and cut them off from relationships, which creates a lack of social support and resources for the woman to escape from the relationship, ultimately making her believe that she deserves the abuse.

The decision to stay or leave is an extremely heavily loaded decision for abused women to make (Lerner & Kennedy, 2000). There are numerous reasons and fears that abused women must work through while deciphering their stay-leave decision, including fear that their abuser will physically come after them and potentially kill them; threats from the abuser; harassment; feelings of guilt; emotional attachment; involvement of children; financial dependency; fear they

cannot take on the world alone; self-blame; or learned helplessness (Strube & Barbour, 1983; McDermott & Garofalo, 2004; Kim & Gray, 2008). One study found that abusers were able to make their victims sympathize with them and not tell police: “A victim’s recantation intention was foremost influenced by the perpetrator’s appeals to the victim’s sympathy through descriptions of his suffering from mental and physical problems, intolerable jail conditions, and life without her” (Bonomi, Gangamma, Locke, Katafiasz, & Martin, 2011, p. 1054). Studies have also shown that women have higher levels of empathy than men, suggesting that women could be more prone to feeling guilty, self-blaming, and having more sympathy for their abuser (Mestre, Samper, Frías, & Tur, 2009).

Male Privilege and a Feminist Approach

Male violence against women is highly related to patriarchal and male-dominated views (Ross, 2012; Bathrick & Kaufman, 2001; Hunnicut, 2009). The system of male privilege is the primary mechanism for male batterers to have their female partner be submissive so they can feel more masculine. Abuse occurs predominantly in households where traditional gender roles are stronger (Hunnicut, 2009). Many abused women who are around more traditional, patriarchal views tend to believe they cannot survive without their abuser; this goes beyond her perceived competence, but rather, her realization of the structure of the world (Bathrick & Kaufman, 2001). In Hunnicut’s article, he defines patriarchy as “social arrangements that privilege males, where

men as a group dominate women as a group, both structurally and ideologically—hierarchical arrangements that manifest in varieties across history and social space” (Hunnicut, p. 557).

Hunnicut highlights the importance of considering patriarchy and gender roles in the context of abuse: “The fact that men of every clan and culture victimize women more than the reverse suggests that violence is structured along gendered lines. Theories of violence must be gender sensitive” (Hunnicut, p. 557). This is crucial for understanding that violence against women is a product of men wanting more power and to feel more masculine (Hunnicut, 2009). Strong traditional gender roles and patriarchal values prevail more in small, rural towns, such as evangelical communities (Peek-Asa, Wallis, Harland, Beyer, Dickey, & Saftlas, 2011).

In Bathrick and Kaufman’s article, they state “men have been socialized to believe we have the right and the privilege to dominate and control women. Physical force (battering and rape) are the extremes to which we resort if necessary to maintain that control” (Bathrick & Kaufman, p. 1). Applying feminist-centered strategies to empowering women could be a powerful tactic in helping abused women escape their situation through creating a nurturing and supportive space.

Previous Interventions for Abused Women

Resources for abused women include counseling, hotlines, advocacy, and women’s shelters (Ross, 2012; McDermott & Garofalo, 2004). These interventions tend to focus on empowering women and understanding the woman’s individual circumstances (Ross, 2012; Dutton, 1993). Dutton emphasizes how understanding specific life circumstances is important

when helping abused women recover, by having more context in which to help her better understand her reactions to the abuse (Dutton, 1993). Dutton describes important aspects of treatment in interventions for abused women: providing support, acceptance and validation, and education about violence against women (Dutton, 1993).

Cox and Stoltenberg's intervention for abused women in a women's shelter measured self-esteem, locus of control, assertiveness, self-expression, negative emotional symptoms, and career decisions (Cox & Stoltenberg, 1991). Interventions are typically centered on increasing empowerment, increasing self-efficacy, and providing referrals for community resources (Ross, 2012; Dutton, 1993). Ross's study alludes to the idea that psychoeducational treatment can be impactful for victims and their recovery (Ross, 2012). As they have been effective in interventions, psychoeducational groups combine a therapeutic part and an educational piece to aid in recovery from trauma (Ross, 2012).

Study Overview

There has yet to be an intervention for low-income rural, evangelical, abused women, with a specifically feminist-centered psychoeducational approach to decrease the likelihood of them returning to their abusers by rebuilding their perception of patriarchy. This study is tailored towards women coming from households with strong traditional gender roles, in an evangelical community with strong patriarchal values. This intervention is drawn from Cox and Stoltenberg's intervention (1991), as well as Ross's study (2012). Cox and Stoltenberg's

intervention was based in the midwest and focuses on increasing self-esteem, locus of control, self-expression, negative emotional symptoms, self-assertiveness, and career decisions through different modules to decrease the likelihood of women returning to their abuser (Cox & Stoltenberg, 1991).

This intervention is also drawn from Ross's study (2012), which attempts to increase empowerment, self-efficacy, and assertiveness in abused women through advocacy training and a psychoeducational approach. Ross's study attempted to increase women's participation in advocacy and educate them on abuse (Ross, 2012). This intervention will use a psychoeducational approach with a feminist perspective to increase self-efficacy through reconfiguring patriarchal ideas to decrease low-income rural Evangelical women returning to their abusers.

There will be two groups: an intervention group and a control group. Participants will be randomly assigned to either the feminist-centered self-efficacy psychoeducational intervention or the "Survivors of Abuse" intervention. In this quasi-experimental design study, the feminist-centered self-efficacy intervention will receive three modules: a feminist-centered self-efficacy educational and counseling module, an "Assertiveness" mastery experience module, and a referral services and community resources module. The control group will receive the "Survivors of Abuse" non-feminist centered education program on IPV module, a counseling services module, and community resource and referral services module. This will be done in a pretest/posttest format.

The participants will be given the New General Self-efficacy scale, the Center for Epidemiologic Studies Depression Scale (CESD), Rathus Assertiveness Schedule scale (RAS), and the Attitudes Towards Feminism scale (FEM) pretest and posttest. Before the intervention there will also be a questionnaire asking the likelihood they feel of returning to their abuser. The questionnaire will be administered again as a follow up three weeks after the intervention to see the likelihood of them returning to their abuser. The study will take place at a women's shelter in a small town about 30 miles away from a few small evangelical communities. The shelter is geographically closer to a medium-sized city in the midwest. Well-being, self-efficacy, attitudes towards feminism, assertiveness, and likelihood of returning to their abuser will be the measured dependent variables for the study.

The research question of this study is: how can we decrease the likelihood of low-income rural evangelical abused women returning to their abuser? The first hypothesis is that the effect will be that increasing feminist-centered self-efficacy will decrease the likelihood the abused women would want to return to their abuser, and, also that there will be a significant increase in empowerment. The second hypothesis is that increasing feminist-centered self-efficacy will have a positive impact on well-being.

Proposed Method

Participants

Hansen, Eriksen, & Elklit's study (2014), a similar study, had a medium sized effect. Given the parameters of Cohen (1992), a power analysis suggests that 128 participants will be needed for this study with a power of 0.80 and an alpha of 0.05 with two groups in the study. However, taking a 30% attrition rate into consideration due to participants returning to their abusers, not completing the study, or deciding to not participate in this study, a power analysis was recalculated to find that 185 participants are recommended for this study.

Participants will be heterosexual women aged 18 years or older. The participants will be recruited after entering the shelter if they fit the criteria for the study. To be eligible for the study, the participants must have a history of abuse from an intimate partner. In addition, the participants must have left the abusive partner within the past three days of entering the shelter. Participants will also need to be from one of the four targeted evangelical communities that the shelter provides resources for. The four targeted evangelical communities are remote towns in the midwest with strong patriarchal beliefs and traditional values around 30 miles away from the shelter. After signing an informed consent form, the participants must agree to stay at the shelter for at least two weeks for completion of the study. All information on individuals will be kept confidential.

Materials

Interventions. There will be two interventions: a feminist-centered self-efficacy psychoeducational intervention and a "Survivors of Abuse" intervention.

Feminist-centered Self-efficacy Psychoeducational Intervention. Drawing upon previous interventions for abused women, this study seeks to measure levels of self-efficacy and

well-being after being exposed to a feminist perspective. Assertiveness, attitudes towards feminism, and likelihood of returning to the abuser will also be measured. The participants in this psychoeducational group will receive three modules. The first module will be an “Educational Course” that discusses abuse, male privilege, and what a patriarchal society is. The course will also teach them that they can be strong and independent women, that they can be financially independent, and that they don’t deserve abuse. It will be designed in a group format with optional counseling services. This module will have both the therapeutic and educational components, making it psychoeducational. This is drawn from Ross’s study (2012).

The second module, “Assertiveness”, drawn from Cox and Stoltenberg’s study (1991), will be geared towards the abused women learning how to speak more assertively, that they can be independent, and rehearse what they would say to their partner now as a mastery experience. The third module will be the referral services at the women’s shelter where they will be provided with one of the shelter’s programs for community resources, employment, childcare, transportation, and relocation. After the intervention, participants in both groups will have these services and resources to help with their transition of leaving their abusers, if they choose to do so. The study would be two weeks, with the modules taking place during training four nights per week for one hour each. This intervention is drawn from Cox and Stoltenberg’s intervention (1991) and Ross’s study (2012).

“Survivors of Abuse” Intervention. This intervention would be the control group to compare with the feminist-centered self-efficacy intervention group. The “Survivors of Abuse” group will receive three modules. The first module will be a non feminist-centered educational course “Survivors of Abuse”. This course will educate the women on IPV; however, they will

not discuss ideas related to patriarchy or feminism. The second module will consist of counseling services. The third module will include the victims being provided with the shelter's referral services for community resources, employment, childcare, transportation, and relocation. The third module will be the same as the feminist-centered self-efficacy psychoeducational group's third module (all participants will have services and resources available to help them leave their abusers). This group's educational component will not have a feminist emphasis or educate the women about patriarchy and male privilege. They will also not receive the "Assertiveness" module. The group will meet for the modules four nights a week for two weeks, at the same time as the feminist-centered self-efficacy intervention group.

Scales. Surveys with four different scales will be administered before and after the intervention to measure self-efficacy and empowerment, depression and well-being, attitudes towards feminism and views on patriarchy, and assertiveness. In addition, there will be a questionnaire pretest and posttest asking them about the likelihood they feel of them returning to their abuser.

New General Self-Efficacy scale (NGSE). The New General Self-efficacy scale, by Chen, Gully, & Eden (2001), will be administered to assess the women's self-efficacy. This 5-point scale is an 8 item Likert type scale that assesses a person's perceived abilities. The scale ranges from 1 ("Strongly Disagree") to 5 ("Strongly Agree") with questions such as "I will be able to successfully overcome many challenges" and "When facing difficult tasks, I am certain that I will accomplish them" (Chen, Gully, & Eden, 2001). The scale was developed as a new scale with high construct validity and high reliability as the General Self-efficacy scale (GSE), which was developed prior to the NGSE, has shown lower validity (Chen, Gully, & Eden,

2001). With an α of 0.85-0.88, the NGSE scale has high reliability (Chen, Gully, & Eden, 2001). Higher scores on this scale indicate higher self-efficacy.

Center for Epidemiologic Studies Depression Scale (CES-D). Created by Lenore Radloff, this 20 item scale is used to measure symptoms of depression (Radloff, 1977). This 4-point likert type scale ranges from 0 (“None of the time”) to 4 (“All of the time”) with statements such as “I was happy” and “I felt that people dislike me” (Radloff, 1977). The scale has a high reliability with an α of .90 (Radloff, 1977). Some items on the scale are reverse scored due to wording of certain statements.

Attitudes towards feminism scale (FEM). This 5-point likert scale will be used to measure attitudes towards feminism to gain a baseline sense of the women’s views on feminism before and after the intervention. This scale will also serve as a manipulation check to ensure the efficacy of the intervention and to see if the intervention had an effect on perceptions of patriarchy. Developed by Smith, Ferree, and Miller (1975), this 27-item scale measures beliefs about feminism. One study found a high reliability with the FEM scale ($\alpha= 0.75-0.87$) (Byrne, Felker, Vacha-Haase, & Rickard, 2011). The responses range from 1 (“Strongly Agree”) to 5 (“Strongly Disagree”). Items such as “Women should not be permitted to hold political offices that hold great responsibility” and “A woman who refuses to bear children has failed in her duty to her husband” are included on the scale (Smith, Ferree, & Miller, 1975). Higher scores reveal that the participants have more feminist beliefs.

Rathus Assertiveness Schedule scale (RAS). The RAS was created to assess assertiveness. Developed by Spencer Rathus (1973), this 30 item scale is a 6-point likert scale with responses ranging from +3 (very characteristic of me) to -3 (very uncharacteristic of me).

Some items on the scale are reverse coded for scoring, due to reverse wording. Gustafason's study (1992) found a high reliability ($\alpha=.82$) with the scale (Gustafason, 1992). Some items on the RAS include "Most people seem to be more aggressive and assertive than I am" and "I am careful to avoid hurting other people's feelings, even when I feel that I have been injured" (Rathus, 1973). The higher the scores on this scale, the higher the assertiveness.

Likelihood of Returning. A questionnaire with a likert type scale on the likelihood of returning to their abuser will be administered before the intervention and three weeks after the intervention, as a follow-up. The questionnaire will contain a 6-point likert scale consisting of percentages decreasing in increments of 20 from 1 (100%) to 6 (0%), with 100% being "Definitely" and 0% being "Never". The questionnaire will ask how likely they feel they want to return to their abuser. The follow-up questionnaire will have an additional question before the percentages question which will ask if they have already returned to the abusive partner. If they have not returned, they will be asked how likely they feel it is that they would return. Higher scores on this scale will indicate less likelihood of returning.

Procedure

After signing the informed consent form, the participants will fill out a demographic questionnaire. The participants will then take a survey that will be administered before and after the intervention which will include four scales: The New General Self-efficacy scale (GSE) to measure empowerment and self-efficacy, the Center for Epidemiologic Studies Depression Scale (CESD) to measure depressive symptoms and well-being, the Attitudes Towards Feminism Scale (FEM) to measure views on feminism to gain a baseline sense of their views on

patriarchy, and the Rathus Assertiveness Schedule (RAS) scale to measure assertiveness. The Attitudes towards Feminism Scale will also serve as a manipulation check to ensure the effectiveness of the intervention.

Before the intervention, participants will also be asked the likelihood they feel of returning to their abuser through a likert type scale on a questionnaire. Three weeks after the intervention, there will be a follow up study with the same questionnaire asking again about the likelihood of them returning if they have not already returned. After this, participants will then be thanked for participating and debriefed.

Ethics

This research study attempts to decrease the likelihood of rural abused women returning to their abuser after entering the shelter. The study also seeks to increase their well-being. The participants are a vulnerable population in this study. However, as the procedures are only meant to positively impact them, the participants would be in no more danger than potential everyday life encounters. The study intervenes in a way that is positive for the participants without using deception. Upon entering the shelter, if the participants fit the criteria for the study, they will be recruited. Participants must provide voluntary consent in order to be a part of the research study. The participants will be given enough information about the study to make a choice for themselves about whether or not they want to participate.

This research study does involve participants providing sensitive information. By answering surveys and questionnaires, participants will be providing sensitive personal information related to how empowered they feel, their assertiveness, their views on patriarchy

and feminism, and their overall well-being. These topics could potentially spark issues with their psychological safety. To ensure that participants remain psychologically safe, the intervention will provide several different resources for the participants during this vulnerable time, such as counseling services and referral services. The referral services will provide resources such as transportation, childcare, and resources for employment to help the participants achieve the best outcome possible upon exiting the shelter.

The intervention's aim is to help the participants get into a more positive headspace during this time of psychological risk and empower them to help them stay away from their dangerous partner. Risks will be minimized as much as possible, and all individual information will be kept confidential. Confidentiality will be secured by keeping individual information anonymous by assigning each participant an ID number. Once the participant has consented to be a part of the study, they will receive a participant ID number. All information will be securely stored.

In terms of the participants' physical safety, the location of the study will be at a women's shelter about 30 miles outside of the evangelical communities the participants will be coming from. This shelter will be geographically closer to a medium-sized city in the midwest. The women's shelter is a specific resource for the four targeted evangelical communities. The shelter would be safe enough for the women to be situated in during this period of time. Immediately after leaving the abuser can be the most dangerous time for the victim (Palarea, Zona, Lane, & Langhinrichsen- Rohling, 1999). The shelter would be accessible enough for the abused women to get to, but far enough away from their community that it would be a safe space physically for the abused women, such that the abusers wouldn't be able to find them.

The implications of this research have great benefits that outweigh the risks of the study. There is no intention of causing distress to the participants. Although there has been extensive research on abused women, no research has yet intervened with a rural evangelical community, with particularly strong patriarchal beliefs, in a feminist-centered educational way. This potentially may lead to women escaping their partners and reconstructing their ideas on the patriarchal world. This could greatly benefit the participants and society at large through helping women out of an extremely dangerous situation.

Predicted Results

In this study, the first hypothesis is that increasing feminist-centered self-efficacy will decrease the likelihood the abused women will feel that they will return to their abuser, thereby increasing empowerment. The second hypothesis is that increasing feminist-centered self-efficacy will have a positive impact on women's wellbeing. Besides well-being and self-efficacy, other dependent variables measured are attitudes towards feminism, assertiveness, and likelihood of returning to their abuser. In order to test these variables, a mixed model Analysis of Variance (ANOVA) will be conducted, with the type of intervention varying between participants and time varying within participants.

A main effect of time is expected to show that the feminist-centered self-efficacy group will display higher mean scores for all of the dependent variables (self-efficacy, well-being, attitudes towards feminism, assertiveness, and likelihood of returning) after the intervention

than before the intervention. The interaction effect is expected to show that the feminist-centered self-efficacy group will have a larger change in mean scores for all dependent variables in comparison to the control group. These effects are predicted due to previous findings in studies such as Bandura (1977), Ross (2012), Lerner & Kennedy (2000), Kim & Gray (2008), and Cox and Stoltenberg (1991) investigating self-efficacy, well-being, assertiveness, and empowerment. These predicted results are in line with the hypotheses for this study. It is also predicted that the participants will pass the manipulation check.

In addition to these tests, a correlation test will be used to test the relationship between self-efficacy and likelihood of them returning to their abuser. It is predicted that increased self-efficacy through the feminist-centered intervention will decrease the likelihood of returning to an abuser compared to the control group. A second correlational test will be run to analyze the relationship between self-efficacy and well-being. It is predicted that the feminist-centered self-efficacy group will have higher self-efficacy and higher well-being. Both predictions are based on Bandura (1977), Ross's study (2012), Lerner & Kennedy (2000), Kim & Gray (2008), and Cox and Stoltenberg's intervention (1991).

It is also predicted that self-efficacy will mediate the relationship between the condition and likelihood of returning to abusers. Using Baron and Kenny's (1986) test, the first step is the condition relating to the self-efficacy dependent variable as shown above. The second relationship is self-efficacy relating to a decrease in the likelihood of returning as displayed above in the first hypothesis. The last step is to show that self-efficacy mediates the relationship

between the condition and likelihood of returning. Finally, a multiple regressions test will be run to investigate the mediation between the condition, self-efficacy, and the likelihood of returning. Self-efficacy continues to predict the relationship between the condition and likelihood of returning. This relationship is predicted due to findings in Bandura (1977), Ross's study (2012), Lerner & Kennedy (2000), Kim & Gray (2008), and Cox & Stoltenberg's study (1991).

Conclusion

This study's aim was to investigate the effects of a feminist-centered self-efficacy intervention for low-income, rural evangelical abused women to decrease the likelihood of them returning to their abusers and increase their well-being. There are many studies on how self-efficacy increases well-being and how these measurements are commonly used in interventions with abused women. However, very little research focuses on rural abused women. As of yet, no intervention has focused on low-income, evangelical rural abused women with a feminist-centered self-efficacy approach. This is an extremely important topic of research that needs further investigation. Research on rural abused women, especially, is imperative. The impacts of this study are significant, as this intervention could potentially reshape low-income, rural evangelical abused women's ideas of patriarchy and being independent women. This could potentially increase rates of this specific population leaving their abusers and increasing their empowerment.

Limitations

Some limitations to this study would be the location of the women's shelter where the intervention would take place. For the physical safety of the participants, the shelter needs to be far away enough from the evangelical communities that the abusers would not be able to find the victims at the particular shelter. However, transportation to the shelter may not be the most accessible for abused women in the evangelical communities. This could decrease the amount of potential participants to the study.

Another limitation to this study is that the study was only over the course of five weeks. There is a demand for longer interventions for abused women to examine the long lasting effects over long periods of time. Abused women are deeply impacted psychologically and emotionally from abuse for a long time, and true results from recovery are really discovered over the course of several years. This study is only five weeks, which is enough time to make an impact, but could be longer. Another limitation is the dropout rate for participants with the follow-up. If the participant has decided to return to their abuser, they will most likely not respond to the follow-up, which would make them drop out of the study.

Future Directions

A future direction for this study would be making the intervention over a longer period of time to test the true impact it has for these women. A future version of this study could last a few months, and have a follow-up years later to test the lasting effects. When intervening with

abused women, longitudinal studies are important to truly assess the lasting impacts an intervention has for the women.

This study has many important aspects that should be further researched, especially with this specific vulnerable population. Violence against women is a devastating issue that occurs far too often. Abused women in communities with patriarchal values and strong traditional gender roles could deeply benefit from further research in this area with a focus on reconfiguring their ideas about patriarchy and male privilege. This could lead to empowering them effectively and ultimately help them leave their abuser.

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