THE ROLE OF PARENTING STRESS IN THE LINK BETWEEN INTIMATE PARTNER

VIOLENCE AND EMOTIONALLY MALTREATING PARENTING BEHAVIOR: AN

EXAMINATION OF INDIRECT AND CONDITIONAL EFFECTS

by

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(Under the Direction of Anne Shaffer)

ABSTRACT

Grounded in family systems theory (Cox & Paley, 1997) and the spillover hypothesis of conflict (Erel & Berman, 1995), the present study examined the unique role of parenting stress in the transmission of conflict from intimate partner violence (IPV) to both observed and self-reported emotionally maltreating parenting behavior. Participants included 60 demographically diverse mother-child dyads (children 8-11-years-old). Results indicated that the relation between maternal IPV victimization and observed, but not self-reported, emotionally maltreating parenting behavior was conditional upon the level of maternal parenting stress, such that higher levels of IPV victimization were related to emotionally maltreating parenting behavior when mothers also experienced higher levels of parenting stress. Indirect effects were not supported in the current study. Findings suggest intervention efforts designed to reduce maternal parenting stress and increase parental self-efficacy might be important in reducing risk for parental engagement in emotionally maltreating parenting behavior in the wake of IPV victimization.

INDEX WORDS: Emotional Maltreatment, Intimate Partner Violence, Parenting Stress

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CHAPTER 1

INTRODUCTION

Overview

The familial context is the most proximally influential aspect of a child's development, and while a supportive familial environment can promote psychosocial well-being, an unsupportive environment can be particularly detrimental. Emotional maltreatment, including parenting behavior which conveys the child is unwanted, unloved, worthless, or flawed (Brassard, Hart, & Hardy, 1993), is a type of unsupportive familial environment that increases risk for maladaptive outcomes, both concurrently and over time. The purpose of the current study is to build upon the extant literature examining contextual factors within the family system that increase risk for parental engagement in emotional maltreatment. Specifically, this study will examine the unique role of parenting stress in the link between intimate partner violence and emotionally maltreating parenting behaviors through indirect and conditional effects analyses.

Emotional Maltreatment

Emotional maltreatment consists of emotionally neglectful parenting behaviors (i.e., emotional unavailability, detachment, avoidance, and indifference toward child's emotional needs) and/or emotionally abusive parenting behaviors (i.e., taunting, belittling, and verbal hostility; Egeland, 2009) that are both pervasive and frequent in the context of the parent-child relationship (Wolfe & McIsaac, 2010). This type of maltreatment is associated with numerous negative sequelae. Children who experience emotional maltreatment often present greater internalizing problems (Gibb et al., 2001), experience problematic peer interactions (Bolger, Patterson, & Kupersmidt, 1998; Shaffer, Yates, & Egeland, 2009), and develop low self-esteem

(Kim & Cicchetti, 2006) during childhood. Additionally, adult retrospective reports of childhood emotional maltreatment have been related to problems in adulthood including romantic relationship difficulties (DiLillo et al., 2009, Perry, DiLillo, & Peugh, 2007; Wekerle et al., 2009), decreased self-esteem (Mullen, Martin, Anderson, Romans, & Herbison, 1996), maladaptive cognitive schemas (Wright, Crawford, & Del Castillo, 2009), and greater depressive symptomatology (Gross & Keller, 1992). Notably, when controlling for other forms of maltreatment, emotional maltreatment is equally, if not more, detrimental to the individual's psychosocial development than other forms of maltreatment (Hart, Brassard, Binggeli, & Davidson, 2002; Shaffer et al., 2009; Wekerle et al., 2009; Wright et al., 2009). Thus, effective and early identification of emotional maltreatment is essential in facilitating clinical interventions to both minimize further parental engagement in emotional maltreatment and to mitigate children's risk for maladaptive outcomes throughout development.

Inconsistencies in the assessment and identification of emotional maltreatment complicate research efforts designed to elucidate the sequelae of emotional maltreatment, risk factors that increase the likelihood of its occurrence, and efforts for intervention. The reported prevalence of emotional maltreatment largely varies depending on the source of the report, and discrepancies suggest that emotional maltreatment occurs more frequently than indicated by child service reporting institutions. Of all reported cases, those initiated due to emotional maltreatment range from 4.2% (U.S. Department of Health and Human Services, 2009) to 8.9% (Trickett, Mennen, Kim, & Sang, 2009). However, systematic re-evaluation of cases indicates higher prevalence rates. For instance, reexamination of Department of Child and Family Services (DCFS) cases indicated rates of emotional maltreatment as high as 48% (Trickett et al., 2009), and another study examining emotional maltreatment rates among children already within

the Child Protective Services (CPS) system identified occurrences as high as 94% when assessed by case social workers (McGee, Wolfe, Yuen, Wilson, & Carnochan, 1995), suggesting a high co-occurrence of emotional maltreatment with other maltreatment forms. Notably, within a community sample, the rate of emotional maltreatment co-occurring with physical maltreatment was only 25%, whereas 90% of physical maltreatment cases also included emotional maltreatment (Claussen & Crittenden, 1991). Results suggest that physically maltreating parents likely also engage in emotional maltreatment; however, emotionally maltreating parents do not necessarily physically maltreat their children. Research relying solely on reporting agencies might capture only a small fraction of emotional maltreatment cases, and results likely fail to present a complete picture of families who engage in emotional maltreatment limiting thorough understanding of the potential risks for emotionally maltreated children (Brassard et al., 1993).

Research methods identifying emotional maltreatment via parent and/or child self-report often reveal higher rates than reporting agencies. Rates of parental engagement in emotional maltreatment derived from a phone interview range from 15%, in a large, population-based anonymous phone study (Chang, Theodore, Martin, & Runyan, 2008) to 33% as indicated by a gallop poll study (Straus & Field, 2003). Studies using parental self-report measures (e.g., Parent-Child Conflict Tactics Scale) have indicated rates of 25%, as found in a large, multi-site, longitudinal study conducted within a lab setting (Taylor, Guterman, Lee, & Rathouz, 2009). Retrospective self-reports within a research setting ranged from 24% (Burns, Harding, & Jackson, 2010) to 38% (Moeller, Bachman, & Moeller, 1993), reflective of individuals who experienced childhood emotional maltreatment.

Several issues likely contribute to the variance in emotional maltreatment rates across assessment methods. Within the reporting and legal setting, unclear definitions and inconsistent

applications of what constitutes emotional maltreatment increase the likelihood that cases are underreported to CPS (Trickett et al., 2009). Since emotional maltreatment lacks observable evidence of its occurrence (e.g., bruises, marks), reporting agencies likely refrain from initiating reports without very severe examples (e.g., chronic berating, threatening abandonment; Carlton, 2006; Egeland, 2009) or specific guidelines for determining parenting behavior that cross the threshold from poor parenting to emotional maltreatment (Morelen & Shaffer, 2012; Wolfe & McIsaac, 2010). In addition, cases involving emotional maltreatment in isolation of other maltreatment forms, are less likely to be reported due to variation in mandatory reporting laws (e.g., inconsistent definitions) and ethical concerns related to the legal implications on the family (Garrison, 1987; Morelen & Shaffer, 2012).

While parental self-reports indicate greater prevalence of emotional maltreatment than reporting agencies, parental self-report rates appear to be lower than those identified via children's retrospective self-reports. Demands for social desirability likely contribute to parental underreporting of emotional maltreatment. For instance, Bennett, Sullivan, & Lewis (2006) compared rates of maltreatment as identified by Child Protective Services (CPS), parental self-disclosure of maltreatment status, parental self-reports of child maltreatment as measured by the Parent-Child Conflict Tactics Scale (CTSPC), and observations of positive (i.e., warmth, encouragement) and negative parenting behavior (i.e., intrusiveness, physical control, negative feedback) during a parent-child interaction task. While mothers involved with CPS scored higher on CTSPC than a non-CPS control group, findings indicated that some parents did indeed conceal their engagement in maltreatment. Twenty-eight percent of mothers denied their maltreatment status and endorsed significantly less maltreatment on the CTSPC than mothers who acknowledged their maltreatment status, suggesting demand for social desirability.

Observations of parenting behavior neither differentiated the CPS from comparison parents nor those who concealed maltreatment status from those who acknowledged maltreatment status. A continued need exists for the development of observational assessment tools that are both effective in identifying emotional maltreatment as it occurs and more resistant to the demand of social desirability.

In general, observational methods for assessing parenting behavior are often preferred over self-reports due to their ability to assess moment-to-moment processes and in vivo responses to child behavior. In addition, they have potential to reduce vulnerability to demands of social desirability (Gardner, 2003). While parents likely attempt to present their most effective parenting skills within observational settings, they inherently are constrained by their scope of parenting knowledge. For instance, parental engagement in physically abusive behaviors during an observational task is undoubtedly understood as harmful, ineffective parenting. Emotionally maltreating parenting behavior, on the other hand, is less consistently viewed as insidious, increasing potential for its occurrence during observations. Parental difficulties in regulating emotions in response to perceived undesirable child behavior also increases likelihood for parental engagement in maladaptive parenting behavior (Shipman & Zeman, 2001). Parental emotional arousal during observational tasks is likely to interfere with parental self-monitoring and inhibition. Overall, observational methods that comprehensively assess transient examples of emotionally maltreating parenting behavior might be more effective than self-report measures in detecting families at-risk for chronic emotional maltreatment within the parent-child relationship (Haskett, Scott, & Ward, 2004).

Emotionally Maltreating Parenting Behaviors

Conceptualization. As previously discussed, emotional maltreatment is comprised of chronic and pervasive emotional abuse (i.e., taunting, belittling, and verbal hostility) and emotional neglect (i.e., emotional unavailability, detachment, avoidance, and indifference toward child's emotional needs). Behaviors that constitute emotional maltreatment include the most severe of these behaviors; however, it is likely emotionally maltreating parents also evidence these behaviors in their milder forms. Mild emotionally maltreating parenting behaviors likely are indicative of poor parenting, whereas more severe emotionally maltreating parenting behaviors, if chronic and pervasive, might suggest a pattern of emotional maltreatment within the home (Wolfe & McIsaac, 2010). Previous research has examined the sequelae of negative parenting behaviors often consistent with emotional abuse, including parental psychological control and hostility, as well as emotional neglect, including parental psychological unavailability.

Psychological control. Psychological control is comprised of parental efforts to control the child's thoughts, behaviors, or opinions through psychological means that ultimately are intrusive and manipulative of the child's emotional development (Barber & Harmon, 2002). According to Barber (1996), psychological control consists of several key parenting behaviors including 1) parental constraints of children's verbal expressions (e.g., interrupting; speaking for the child; ignoring child's verbal expressions by physically communicating disinterest, such as looking or facing away from the child), 2) invalidating emotions (e.g., challenging the validity of an expressed emotion; saying they know how the child thinks or feels; teasing child for expressed emotions), 3) personal attacks (e.g., emphasizing responsibilities in family as determining worth; bringing up past wrongdoings as evidence of lack of worth; blaming child for

family's problems; patronizing), 4) guilt induction (e.g., highlighting child's mistakes as causing sadness, worry, and problems for family; inducing guilt by emphasizing all the parent/family member has done for the child), 5) love withdrawal (e.g., threatening to withhold or take away love/affection if child's behavior is other than preferred; using facial expressions and postures to convey displeasure in child until child changes behavior), and 6) erratic emotional behavior (e.g., inconsistent expressions of caring versus attacking behavior). Of importance, psychological control is distinct from parental behavioral control or limit setting (Barber, Stoltz, & Olsen, 2005; Soenens & Vansteenkiste, 2010) that includes efforts to control the child's behavior, including appropriate expectations for behavior and parental monitoring of the children's activities (e.g., time spent with friends, curfew). A spectrum of psychological control would consist of mild (e.g., attempting to control the child by aligning the child's thoughts with those of the parent) to severe (controlling the child through threatening harm to the child, others, or property).

The extant literature has demonstrated that psychological control is related to a host of childhood problems, including concurrent and prospective reports of children's internalizing symptoms (Barber, 1996; Loukas, Paulos, & Robinson, 2005; Soenens, Luyckx, Vansteenkiste, Duriez, & Goossens, 2008; Stone, Buehler, & Barber, 2002) and less consistently externalizing problems (Barber, 1996; Stone, et al., 2002). Guilt induction, specifically, has been linked with children's internalizing problems (Rakow et al., 2011), and love withdrawal has been linked with both externalizing (e.g., aggression, antisocial behavior; Grotpeter, 1997) and internalizing problems (e.g., anxiety, inhibition, neuroticism; Olsen, et al., 2002). In addition, psychological control has been related to lower self-esteem and poorer school performance and adjustment (Soenens, Vansteenkiste, & Sierens, 2009).

Hostility. Hostility consists of parental expressions that are hurtful, rejecting, denigrating and sarcastic in nature (e.g., name calling). In comparison to anger, these comments convey a sense of little hope or expectancy for change. Hostility sends the message that the parent disapproves of the child (e.g., child is flawed, disliked) in comparison to a disapproval of the child's behavior. Studies often combine verbal hostility with physical hostility (e.g., slapping; Sturge-Apple, Davies, Cicchetti, & Manning, 2010) and other emotionally maltreating parenting behaviors (e.g., psychological control; Straus, Hamby, Finkelhor, Moore, & Runyan 1998) contributing to the challenge in assessing the unique role of verbal hostility in child outcomes. A spectrum of hostile parenting would consist of mild (e.g., vague put-down, sarcasm) to severe examples (e.g., references to the child as dumb, useless, worthless, unlovable).

Parental verbal hostility has been linked with greater psychological problems throughout development. For instance, children who experience verbal hostility in early childhood are more likely to develop poor social and emotional functioning due to increased aggression towards peers and social withdrawal in middle childhood (Shaffer et al., 2009). In addition, retrospective reports of verbal hostility (i.e., calling child names, shouting, yelling, belittling) in combination with several psychologically controlling behaviors (i.e., threatening harm) are related to greater psychopathology symptomatology in young adults (Miller-Perrin, Perrin, & Kocur, 2009; Teicher, Samson, Polcari, & McGreenery, 2006). Additionally, higher rates of parental hostility were subsequently related to physical health complaints (e.g., headaches, stomach aches, coughs) among adolescents (Wickrama, Lorenz, & Conger, 1997).

Emotional unavailability. Emotional unavailability captures parenting behaviors that demonstrate a parent's failure to meet the child's emotional needs. For instance, the parent might not respond to a distressed child and appears to lack an emotional connection. A spectrum

of emotional unavailability would consist of mild (e.g., failing to respond to a child's negative emotion) to severe (e.g., consistent ignoring of the child as though the child does exist).

Observations of parental emotional unavailability have been linked with children's subsequent social withdrawal, aggression, emotional problems, and decreased prosocial peer interactions (Shaffer et al., 2009; Sturge-Apple, Davies, & Cummings, 2006).

Relations to child maltreatment. Recent conceptualizations of emotionally maltreating parenting behaviors are derived from behaviors consistent with emotional maltreatment. For instance, parenting behaviors comprising psychological control have been paralleled to indicators of emotional maltreatment, based not only on the distinct parenting behaviors (e.g., threats of harm, name-calling; Straus et al., 1998), but also the similar negative implications it can exert on children's development (Barber, Bean, & Erickson, 2002; Olsen et al., 2002). In addition, examples of severe parental hostility and emotional unavailability have been conceptualized as emotional abuse and neglect respectively (Shaffer et al., 2009). However, there remains a dearth of literature examining these behaviors simultaneously as indicators of emotional maltreatment, and such studies are needed to establish a more comprehensive understanding of the occurrence and sequelae of emotionally maltreating parenting behaviors (Barber et al., 2002). Although the observation of emotionally maltreating parenting behaviors in the relatively circumscribed context of lab-based interaction tasks is not sufficient to determine the occurrence of emotional maltreatment without additional information regarding the pervasiveness of these behaviors in the parent-child relationship, it is important to consider how these behaviors can serve as indicators of emotional maltreatment that can be assessed in observations of parent-child interactions. At this point, few studies have examined the occurrence of emotionally maltreating parenting behaviors within a sample of identified

emotionally maltreating parents, therefore, studies have relied on assessing these behaviors among samples of other maltreatment cases (e.g., physical abuse and neglect; Brassard et al., 1993; Haskett et al., 2004; Shipman et al., 2007).

One study conducted by Brassard and colleagues (1993) examined observed emotionally maltreating parenting behaviors among a sample of CPS involved mothers and their children as well as a matched non-maltreating comparison group. All CPS mothers had substantiated cases of physical abuse and neglect and engaged in emotional maltreatment, as later assessed by the National Center for Child Abuse and Neglect criteria (NCCAN, 1998). Results indicated that physically and emotionally maltreating mothers were significantly more likely than non-maltreating comparison mothers to engage in behaviors consistent with emotional abuse, including psychological control (i.e., threats of harm) and verbal hostility, as well as emotional neglect, including emotional unavailability (i.e., denying emotional response). Notably, the complete observational scales (i.e., Psychological Maltreatment Rating Scales, Brassard et al., 1993) effectively classified 82% of mothers as either emotionally maltreating or non-maltreating, suggesting such behaviors are a valid and effective assessment of emotionally maltreating parenting behavior.

Haskett and colleagues (2004) observed the interactions of CPS involved physically maltreating parents with their school-aged children. Cluster analyses revealed two distinct positive and negative parenting behavior clusters among these parents, with the negative parenting cluster including psychological control, as measured by parental intrusiveness, and emotional unavailability, as measured by flat affect and decreased sensitivity to children's needs. The positive parenting cluster, on the other hand, included parental sensitivity, positive affect and warmth. When comparing the two maltreating parenting groups with non-maltreating

parents, results suggested the parenting behavior of the negative parenting group was distinct from the parenting behavior of non-maltreating parents. The behaviors of the positive parenting group were indistinguishable from the parenting behaviors of non-maltreating parents.

Consistent with Brassard and colleagues (1993), emotionally maltreating parenting behaviors, seemed more likely to occur within maltreating versus non-maltreating parents.

A more recent study examined the occurrence of parental emotional invalidation within a sample of physically maltreating parents (Shipman et al., 2007). Physically maltreating parents were more likely than non-maltreating parents to engage in emotional invalidation during a parent-child interaction task, and emotional invalidation mediated a link between physical maltreatment and children's emotion regulation abilities. Previous studies have established a link between children's emotion regulation abilities and both internalizing and externalizing problems throughout childhood (Suveg & Zeman, 2004; Southam-Gerow & Kendall, 2002; Zeman, Shipman, & Suveg, 2002) and adulthood (Berzenski & Yates, 2010; Burns et al., 2010), further demonstrating the potential indirect influence of emotionally maltreating parenting behaviors on children's emotional functioning.

Based on the previous studies, emotionally maltreating parenting behaviors likely cooccur with child maltreatment and have potential to serve as glimpses into potentially more
pervasive and pernicious parenting styles characteristic of emotional maltreatment. Currently,
these findings have been limited to samples of physically maltreating parents. Since cases of
emotional maltreatment are often undetected, continued efforts to identify the prevalence and
sequelae of these behaviors in community samples are warranted. It is difficult to ascertain
whether emotionally maltreating parenting behaviors cross the threshold into emotional
maltreatment without knowledge of the chronicity and pervasiveness of the behaviors beyond the

research setting. Regardless, these behaviors have proven to be indicative of parenting practices harmful to children's development. Thus, observations of emotionally maltreatment parenting behaviors have potential to serve as an effective tool in the identification of emotionally maltreating parents, or at risk parents, within community samples who would benefit from parenting interventions.

Familial Context of Emotionally Maltreating Parenting Behaviors

Considering the negative implications that emotionally maltreating parenting behavior can exert on children's development, researchers have proposed several models to help elucidate the determinants of such parenting practices. From a systems theory perspective, risk factors interact at both within and between multiple system levels (e.g., individual, family, neighborhoods, schools, society) and the more proximal the risk factor, the greater the impact on the individual (Belsky, 1983, 1993; Bronfenbrenner, 1979; Cicchetti & Valentino, 2006). Thus, the family environment, one of the most proximal systems to an individual parent, can directly influence parenting behavior (Cox & Paley, 1997; Masten & Shaffer, 2006).

While a multitude of factors interact to shape parenting behavior, family systems theory (Cox & Paley, 1997; Minuchin, 1974) suggests determinants of parenting include interactions between individual characteristics of the parent (e.g., personality, mental health), and the parenting dyad (Masten & Shaffer, 2006). In addition, the quality of the co-parenting relationship, can impact parenting behavior by functioning as either a source of emotional stress (i.e., increasing risk for maladaptive parenting), or support (i.e., buffering risk for maladaptive parenting) for a parent (Belsky, 1983, 1993). Consequently, parental intimate partner violence, particularly maternal victimization, is one probable risk factor for parental stress and emotionally maltreating parenting behaviors.

Intimate partner violence. Intimate partner violence (IPV) consists of maladaptive conflict resolution strategies including emotional abuse (e.g., coercive acts, harming a partner's self-worth, threatening harm, use of intimidation, isolating partner from friends and family), physical violence (e.g., pushing, hitting, shaking, use of weapon), sexual violence (e.g., unwanted and/or coerced sexual interactions) and threats of physical or sexual violence (Saltzman, Fanslow, McMahon, & Shelley, 1999). IPV not only has been related to increased physical health problems, depressive symptomatology, suicidality, alcohol/drug abuse, and post-traumatic stress symptomatology among battered women (Bonomi et al., 2006; Coker, Smith, Bethea, King, & McKeown, 2000; Golding, 1999), but also children's internalizing and externalizing problems (Buehler et al., 1997; Evans, Davies, & DiLillo, 2008; Graham-Bermann, & Perkins, 2010; Holt, Buckley, & Whelan, 2006). One proposed mechanism by which IPV leads to children's emotional and behavioral problems is through the intrusive nature of IPV into the parent-child relationship (Bradford & Barber, 2005; Erel & Burman, 1995; Krishnakumar & Buehler, 2000).

Relations to parenting behavior: Spillover hypothesis. Several models have been proposed to explain the relation between IPV and negative parenting behavior. For instance, the compensatory hypothesis suggests that interparental conflict results in a more positive parent-child relationship as compensation for deficiencies in the marital relationship. The compartmentalization hypothesis, on the other hand, suggests conflict is confined within the co-parenting relationship, therefore having no impact on the parent-child relationships (Bradford & Barber, 2005; Erel & Burman, 1995). Lastly, the spillover hypothesis, which has garnered the most consistent support and best explains the empirical demonstrations of the negative outcomes of IPV reviewed above, suggests that the behaviors and emotions characteristic of one family

dyad (e.g., parental dyadic relationship) can transfer or "spillover" into another (e.g., parent-child dyad; Erel & Burman, 1995; Krishnakumar & Buehler, 2000; Nelson, O'Brien, Blankson, Calkins, & Keane, 2009). For instance, literature posits that more negative interparental conflict, particularly exchanges of withdrawal and hostility, is related to similar maladaptive communication patterns during other family interactions (e.g., parent-child interactions, child rearing decisions in presence of child, parental implementation of discipline) as well as an overall negative family climate (Katz & Wooden, 2002). Thus, conflict resolution patterns occurring within one family dyad (e.g., interparental) have potential to spillover into other family system interactions (e.g., parent-child, parent-parent-child).

Notably, IPV has received particular interest in the literature as a predictor or correlate of child maltreatment (Edleson, 1999; Jouriles, McDonald, Slep, Heyman, & Garrido, 2008; Jouriles & Norwood, 1995; Mahoney, Donnely, Boxer, & Lewis; Slep & O'Leary, 2005; Maughan & Cicchetti, 2002; Taylor et al., 2009), with co-occurrence rates ranging from 30% to 60% (Casanueva, Martin, Runyan, 2009; Edleson, 1999). One study using a nationally representative sample examined the co-occurrence of IPV and child maltreatment and found that 44% of maltreating mothers were also victims of IPV, as measured by the Conflict Tactics Scale. These mothers were twice as likely as nonvictims to be rereported to CPS for additional child maltreatment within 18 months of the initial report (Casanueva et al., 2009). Related to the goals of the current study, research also identified a link between IPV and emotional maltreatment (Taylor et al., 2009). For instance, a large, anonymous, population based phone survey indicated higher rates of emotional maltreatment by parents who engaged in either intimate partner psychological abuse alone (Chang et al., 2008), or in multiple forms of IPV (Zolotor, Theodore, Coyne-Beasley, & Runyan, 2007).

While the extant literature supports the spillover hypothesis as it relates to IPV and maternal child maltreatment in general, there is a dearth of studies examining the spillover of IPV into the parent-child relationship in the form of emotionally maltreating parenting behaviors, specifically. One known study identified a link between self-reports of intimate partner psychological aggression and parental self-reports of psychological control among children eight- to sixteen-years-old (Schoppe-Sullivan, Schermerhorn, & Cummings, 2007). IPV also was associated with some parenting behaviors including decreased maternal warmth and attention, but no known studies have demonstrated associations between IPV and observed emotionally maltreating parenting behavior (Levendosky, & Graham-Bermann, 2000; Renner, 2009). Alternatively, several studies have examined relations between emotionally maltreating parenting behaviors and other, less severe, maladaptive interparental conflict resolution strategies that commonly occur with IPV. Interparental conflict behaviors that are considered less severe, but also maladaptive for the parental dyad, include withdrawal from conflict (i.e., disengaging, looking away, refusing to discuss a problem), avoidance (i.e., avoiding discussion, changing the topic of conflict, delaying discussion), hostility (e.g., criticizing, invalidating, using critical sarcasm), and demand (i.e., nagging, pressuring change), and occur more frequently in couples who engage in IPV than those who are nonviolent (Berns, Jacobson, & Gottman, 1999). IPV couples also are more likely to reciprocate these less severe behaviors during a conflict discussion (Cordova, Jacobson, Gottman, Rushe, & Cox, 1993; Katz & Woodin, 2002; Sturge-Apple et al., 2006). Therefore, the co-occurrence of emotionally maltreating parenting behaviors and less severe interparental conflict suggests these emotionally maltreating parenting behaviors might also co-occur with IPV. An overview of the extant research examining the link between interparental conflict and emotionally maltreating parenting behaviors is presented below.

Relations of interparental conflict to parenting behavior: Psychological control. In a prospective study of parents of kindergartners, Sturge-Apple, Davies, Cicchetti, and Cummings (2009) observed interparental interactions and identified a link between interparental withdrawal from a conflict discussion and children's self-reports of parental psychological control two years later, as measured by the CRPBI scales (i.e., control through guilt, instilling anxiety, and intrusiveness). In addition, parental psychological control has been associated with self-reports of interparental conflict (Buehler, Benson, & Gerard, 2006; Sturge-Apple, Gondoli, Bonds, & Salem, 2003). For instance, in a cross-sectional study, Buehler and colleagues (2006) found that maternal self-reports of interparental hostility were related to sixth-grade children's self-reports of maternal psychological control, as measured by the CRPBI and Barber Psychological Control Scale. In addition, both Stone et al. (2002) and O'Donnel, Moreau, Cardemil, & Pollastri (2010) found that children's self-reports of interparental conflict (e.g., parents threaten each other, tell each other to "shut up," call each other names) were related to children's reports of parents' engagement in parental psychological control, as measured by CRPBI. Lastly, Fauber, Forehand, Thomas, and Wierson (1990) examined a positive relation between 1) a latent interparental conflict variable consisting of both maternal and children's (aged 11-14) selfreports of interparental conflict, and 2) a latent variable of maternal psychological control comprising observations of psychological control in a mother-child interaction (i.e., mothers efforts to control the child via guilt and/or anxiety induction) and maternal and child self-reports of psychological control, as measured by the CRPBI. In each of the previous studies, parental psychological control mediated the link between interparental conflict and children's problem behavior.

Relations of interparental conflict to parenting behavior: Hostility. The link between interparental conflict and parental hostility has been examined less consistently, potentially due to the tendency for studies to examine hostility in combination with other harsh parenting behaviors (e.g., yelling, slapping; Buehler & Gerard, 2002) or negative parenting behavior in general (e.g., anger, yelling, disagreements; Feinberg, Kan, & Hetherington, 2008). One study identified that parents who engaged in interparental hostility also were more likely to engage in hostile parenting, as indicated by youth self-reports (e.g., "called me dumb or lazy;" Buehler et al., 2006)

Relations of interparental conflict to parenting behavior: Emotional unavailability. In a longitudinal study including parents of kindergarten-aged children, Sturge-Apple, Davies, & Cummings (2006, 2006b) found that intimate partner withdrawal during a conflict discussion task predicted subsequent observations of parental psychological unavailability (i.e., parental apathy, neglect, unresponsiveness, and lack of affection, support and praise) during a parent-child interaction one year later. Observations of intimate partner hostility (e.g., insults, expressions of disgust, spite, cruelty) also predicted maternal, but not paternal, subsequent psychological unavailability. Structural equation modeling also indicated that parental emotional unavailability mediated the link between 1) interparental withdrawal from conflict and children's internalizing, externalizing, and school-related problems, and 2) maternal interparental hostility and children's school-related problems (Sturge-Apple et al., 2006b).

Although there is little consistency regarding the specific interparental conflict behaviors and related parenting behaviors (e.g., harsh parenting, parent-child conflict, acceptance, warmth) examined across studies, research supports a relation between interparental conflict and emotionally maltreating parenting behaviors. The link between IPV and emotionally

maltreating parenting behaviors, on the other hand, has not been established within the extant literature and warrants further examination.

Parenting stress and the spillover process. As demonstrated, interparental conflict, including IPV, has been examined as an intrusive process that interferes with the quality of the parent-child relationship. However, the relation between these behaviors and poor parenting is not direct, and meta-analyses have identified only moderate effect sizes for these relations (d = 0.46, Erel & Burman, 1995; d = 0.62, Krishnakumar & Buehler, 2000). Consideration of other intervening family processes that might increase the likelihood for spillover to occur is essential in gaining a complete understanding of the spillover of IPV into parenting (Bradford & Barber, 2005; Erel & Burman, 1995; Krishnakumar & Buehler, 2000).

Theory suggests the spillover hypothesis operates due to strained emotional resources, including an inability to contain negative affect or arousal related the experience of violence, that interfere with a parent's emotional availability and sensitivity to the child (Erel & Burman, 1995; Jouriles et al., 2008; Margolin, 1981). Therefore, parents who experience greater emotional distress in the context of IPV victimization might be at greater risk for engaging in emotionally maltreating parenting behaviors, as they are characterized by a lack emotional availability and sensitivity to the child's independent needs. In contrast, parents who experience less emotional distress might be more equipped to compartmentalize the negative effects of IPV. Previous research has examined the role of maternal psychological distress in the relation of IPV and parenting; however, few have examined the unique influence of stress specifically related to the parenting role.

Parental psychological distress. The experience of IPV victimization has detrimental effects on a parent's general psychological well being (Bonomi et al., 2006) which also can

negatively influence the parent-child relationship. Parents experiencing psychological distress unrelated to the parenting role, engage in more emotionally maltreating parenting behaviors, including hostility and unavailability, during parent-child interactions than nondistressed parents (Haskett et al., 2004; Lovejoy, Graczyk, O'Hare, & Neuman, 2000). One notable study identified that maternal depression, accounted for the link between IPV and children's internalizing and externalizing problems, through its impact on parenting (e.g., hostility, unavailability). Maternal depression also has fully accounted for a link between IPV and children's internalizing problems (Dehon & Weems, 2010).

Parenting stress. Unique from psychological distress, parenting stress encompasses negative appraisals of either the demands of the parenting role and/or the relationship with the child (Abidin, 1992). For instance, parents who experience parenting stress often believe they are incompetent in the parenting role, perceive the demands of the parenting role as intrusive or interfering, are disappointed or dissatisfied by the parent-child relationship, and/or perceive their child as difficult. Parenting stress, above and beyond other life stressors (e.g., financial distress, education level, marital status), has been linked with substantiated and self-reported physical maltreatment (Haskett, Ahern, Ward, & Allaire, 2006; Haskett et al., 2004; Holden & Ritchie, 1991; Taylor et al., 2009). Parenting stress also has been associated with self-reported negative parenting behavior, including overreactive, inconsistent, and lax parenting (Gerdes et al., 2007; Huth-Bocks & Hughes, 2008; Margolin, Gordis, & John, 2001), as well as self-reported emotionally maltreating parenting behavior, including psychological control (Sturge-Apple et al., 2003). Few studies have examined the link between parenting stress and observations of negative parenting and/or emotionally maltreating parenting behavior specifically.

The limited extant literature examining the role of parenting stress on observations of parent-child interactions within a research setting suggests parenting stress is greater among those who engage in negative and emotionally maltreating parenting behaviors. Haskett et al. (2004) conducted cluster analyses to examine the relation of parenting stress and coded observations of parenting behavior within a sample of physically maltreating parents involved with child protective services. Two parenting behavior clusters emerged: a negative parenting behavior cluster consisting of negative affect and several emotionally maltreating parenting behaviors including psychological control (i.e., greater intrusiveness) and emotional unavailability (i.e., disengagement, flat affect, decreased sensitivity to child's needs), and a positive parenting behavior cluster as indicated by greater parental verbal and physical warmth, sensitivity, positive affect, and engagement with the child. Notably, parenting stress was significantly greater among maltreating parents within the negative parenting behavior cluster; those in the negative parenting cluster endorsed clinical levels of parenting stress, while those in the positive parenting cluster endorsed below clinical levels of parenting stress. These findings lend support to the notion that parenting stress can potentially increase parental vulnerability for engaging in maltreatment.

IPV & parenting stress. The extant literature posits that IPV victimization is positively associated with maternal parenting stress (Owen, Thompson, & Kaslow, 2006; Taylor et al., 2009). For example, battered women seeking services are more likely to experience greater levels of parenting stress than non-battered comparison groups (Holden & Ritchie, 1991), and parenting stress was greater among women who reported more frequent and severe IPV (Levendosky & Graham-Bermann, 1998). Of interest, one study found that psychological IPV, but not physical IPV, was directly related to increased parenting stress (Renner, 2009).

Maternal depression has demonstrated a role in the spillover of IPV into the parent-child relationship, but recent literature is considering the unique role of parenting stress, above and beyond maternal depression. For instance, studies examining both maternal depression and parenting stress find that maternal parenting stress is not only predicted by maternal depression (McPherson, Lewis, Lynn, Haskett, & Behrend, 2009; Renner, 2009), but parenting stress also mediates the link between psychological distress and parenting behavior (Gerdes et al., 2007). Another study identified maternal depression as a mediator of the link between IPV and subsequent parenting stress (Renner, 2009). Therefore, IPV appeared to contribute to maternal depression, thereby increasing risk for parenting stress

While parenting stress theoretically appears to be influential in the link between IPV and parenting behavior, few studies have examined its role. One study found self-reported interparental conflict increased parenting stress, thereby increasing self-reported parent-child conflict (i.e., mediation; Sturge-Apple et al., 2003). Consistent with the spillover hypothesis, a mother's limited emotional resources in the wake of IPV may result in greater parenting stress and, as a result, hinder effective problem-solving with the child. Alternatively, another study identified a link between self-reported IPV and self-reported child maltreatment potential only for those parents who experienced parenting stress (i.e., moderation; Margolin & Gordis, 2003). Consistent with the compartmentalization hypothesis and findings suggesting that mothers might be better able to compartmentalize their marital/coparenting roles from the parenting role (Belsky, Youngblade, Rovine, & Volling, 1991; Davies, Sturge-Apple, Woitach, & Cummings, 2009; Lindahl, Clements, & Markman, 1997), spillover might occur only for those who experience parenting stress. Perhaps parents experiencing minimal parenting stress are more effective in managing their own emotions and in navigating interactions within the parent-child

relationship in the context of IPV. Based on the limited research, it is unclear whether parenting stress is a mechanism by which IPV leads to emotional maltreatment or if parental engagement in emotionally maltreating parenting behavior depends on the level parental stress. No known studies have examined parenting stress as a mediator and moderator within the same sample, which can be essential in clarifying the complex relations among familial risk factors (Frosch and Mangelsdorf, 2001).

Goals of the Current Study

The purpose of the current study is to expand understanding of the familial context of emotional maltreatment. Specifically, this study will examine the unique role of parenting stress in the association between intimate partner violence (IPV) victimization and emotionally maltreating parenting behavior. Consistent with family systems theory (Cox & Paley, 1997; Minuchin, 1974), the spillover hypothesis explicated above (Erel & Berman, 1995) asserts that conflict within the parenting relationship can "spillover" into the parent-child relationship due to the strain of conflict on parental emotional functioning.

Previous studies have established relations between IPV and documented cases of emotional maltreatment; however, based on the inadequacy of CPS reports in identifying emotional maltreatment cases, alternative assessment methods are warranted in order to capture a comprehensive understanding of the relation of IPV and emotional maltreatment within community samples. Furthermore, these methods can assist in the identification of families with histories of IPV who also are at-risk for engaging in emotional maltreatment and would benefit from intervention efforts. Through thorough and systematic assessment of parenting behaviors consistent with current conceptualizations of emotional neglect (i.e., emotional unavailability) and emotionally abuse (i.e., parental hostility, psychological control), research has potential to

address this limitation. However, few studies have examined emotionally maltreating parenting behaviors concurrently and often examine them in conjunction with other non-maltreating parenting behaviors (e.g., warmth, anger, disagreement) or in isolation.

Expanding on the extant literature, the first goal of the current study is to address this gap using a multi-method approach to comprehensively assess emotionally maltreating parenting behaviors as they relate to IPV. Since observational methods can reduce the effects of social desirability, they also have potential to identify families at risk for emotional maltreatment who otherwise might not be captured by other methods vulnerable to social desirability biases (e.g., self-reports, interviews). Furthermore, parents may be more likely to engage in emotionally maltreating parenting behaviors in observational settings, as compared to other forms of maltreatment, given the common misperception such behaviors (e.g., hostile criticism) are less insidious than physical maltreatment.

The current study also will assess emotionally maltreating parenting behaviors through maternal self-reported invalidation of children's negative emotions. While observational methods have numerous strengths, it is difficult to replicate the home environment in which they occur. Therefore, observational methods might limit opportunities for parents to engage in multiple emotionally maltreating parenting behaviors. In addition, observational methods are unable to capture the chronicity and pervasiveness of emotionally maltreating parenting behaviors, which is essential in the classification of emotional maltreatment. Alternatively, self-report methods can include exhaustive lists of emotionally maltreating parenting behaviors and also include multiple realistic vignettes as contexts in which emotional maltreatment might occur. Thus, a multi-method approach can increase detection of emotionally maltreating parenting behaviors.

Another goal is to explore the processes by which IPV is associated with emotionally maltreating parenting behaviors. The spillover hypothesis proposes that IPV intrudes on the parent-child relationship due to the emotional strain of victimization. Stress related to the parenting role is greater among victims of IPV and also increases risk for parental engagement in emotionally maltreating parenting behaviors above and beyond psychological distress. Thus early identification of parenting stress and interventions might reduce parental engagement in emotionally maltreating parenting behaviors. No known studies have examined parenting stress as it relates to emotionally maltreating parenting behaviors in the context of IPV.

Due to limited and inconsistent literature, it is unclear whether the relation of IPV and emotionally maltreating parenting behaviors is indirect, via increases in parenting stress, or if the link between interparental conflict and parenting behaviors is conditional upon levels of experienced parenting stress. Consistent with the spillover hypothesis, IPV has potential to be indirectly related to emotionally maltreating parenting behaviors via parenting stress (see Figure 1). An indirect model suggests that emotions and behaviors related to IPV increase maternal parenting stress thereby limiting a mother's ability to effectively manage conflict within the parent child relationship; thus, there is increased risk for engagement in emotionally maltreating parenting behaviors. Alternatively, IPV might be related to emotionally maltreating parenting behaviors conditional upon the presence of parenting stress (see Figure 2). Consistent with the compartmentalization hypothesis, a conditional effects model suggests that maternal IPV victimization will be related to parental engagement in emotionally maltreating parenting behaviors only for mothers who experience parenting stress. Thus, spillover occurs only for those who are unable to separate the emotional toll of IPV from the parent-child relationship. Another potential explanation is that parents already stressed by the parenting role are more

likely to engage in emotionally maltreating parenting behaviors in response to IPV. No known studies have examined the indirect and conditional effects of IPV on emotionally maltreating parenting behaviors due to parenting stress within a single study, nor have studies concurrently examined these links via observational methods of parenting. Therefore, the current study will address this gap in the literature by examining the unique role of parenting stress in the relation between IPV and emotionally maltreating parenting behavior, through evaluation of indirect and conditional effects.

Study hypotheses. It is hypothesized that more severe IPV victimization will be associated with 1) increased maternal engagement in emotionally maltreating parenting behavior and 2) greater levels of maternal parenting stress. In addition, it is hypothesized that greater maternal parenting stress will be associated with increased maternal engagement in emotionally maltreating parenting behaviors. Lastly, it is hypothesized that the relation between IPV victimization and maternal engagement in emotionally maltreating parenting behavior will be mediated or moderated by maternal parenting stress. Considering the established links between maternal psychological distress and 1) IPV victimization, 2) parenting stress, and 3) child maltreatment, the current study will control for maternal psychological distress in all analyses. All hypotheses will be examined twice; once with observed, and once with self-reported emotionally maltreating parenting behavior as the outcome. Outcomes are expected to be consistent across methods; however, these comparisons are exploratory in nature.

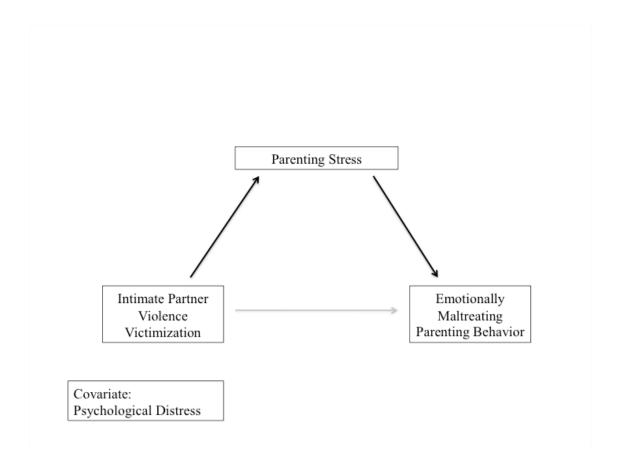


Figure 1. Indirect effects model. The relation between intimate partner violence victimization and emotionally maltreating parenting behavior via parenting stress.

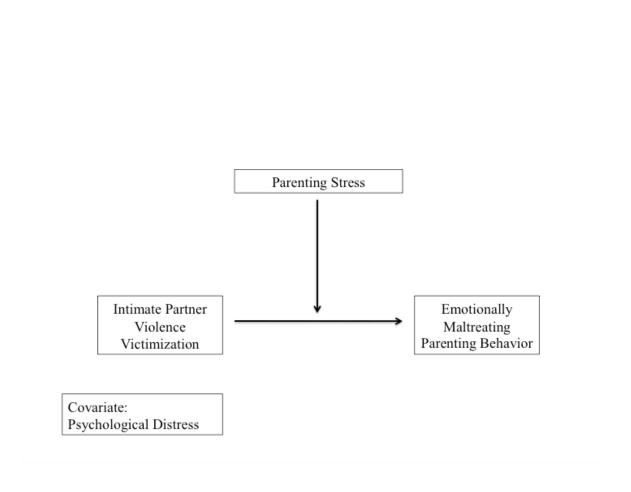


Figure 2. Conditional effects model. The relation between intimate partner violence victimization and emotionally maltreating parenting behavior dependent upon level of parenting stress.

CHAPTER 2

METHOD

Power Analysis

An *a priori* power analysis was conducted using G Power (Faul, Erdfelder, Buchner, & Lang, 2009). Previous research suggested parenting stress had a small-moderate F^2 increase (.15 - .33) in a model examining indirect effects of maternal depression on parenting behavior via parenting stress (Gerdes et al., 2007). Results indicated that 100 participants were needed to detect 80% power for detecting a small-medium sized effect ($F^2 = .10$) when applying a statistical significance of alpha as 0.05.

Participants

Participants included 64 maternal caregiver-child dyads from the community. Children included 26 boys and 38 girls ranging in age from 8 to 11 (M = 9.45; SD = 1.04). Caregivers included any primary, maternal figure (e.g., biological mothers, adoptive mother, grandmother, aunt) with whom the child was residing. Of the 64 maternal caregivers, 59 (92%) self-identified as the biological mother, and so caregivers are referred to as mothers throughout for brevity. The majority of mothers (83%) had graduated from high school or completed equivalent requirements, and 34% completed college. The sample was demographically diverse with 50% of the families identifying as African American, 45% Caucasian, and 2% Hispanic.

Additionally, 47% of families reported an income less than \$20,000 per year, and 23% reported income greater than \$60,000 per year. Regarding the mother's relationship status, 55% were married or cohabiting, 20% were divorced or separated, and 36% were never married.

Procedure

Dyads were recruited via newspaper advertisements and community flyers. In order to participate in the study, dyads were required to be fluent in reading and writing in English at approximately a fifth grade reading level, and to have cohabited with the child for at least two consecutive years prior to the assessment. The study took place in a psychology research laboratory designed for structured observational assessments. Following consent procedures, parent-child dyads participated in a series of interaction tasks that were videotaped for later coding. The first task served as a warm-up activity during which the child was asked to imagine his/her home fifty years into the future. Second, the dyad engaged in a conflict discussion. After both the caregiver and child rated common topics of disagreement from 1 (no disagreement) to 3 (disagree a lot), the researcher selected the disagreement discussion topic noted as a problem by both the parent and child. The dyads were then instructed to discuss the topic for four minutes and try to reach a solution. Third, the dyads worked together to create a picture of a house and tree on an Etch-A-Sketch, with each member of the dyad using only one of the knobs. Lastly, the child was asked to complete a homework-like, logic-puzzle. During all tasks, the mother and child were encouraged to interpret the guidelines as preferred in order to elicit examples of common interactions between the parent and child. Following the interaction tasks, the parent and child completed demographic and self-report measures. As incentive for participation, mothers received \$40, and the participating child received a small toy.

Measures

Maternal IPV victimization. The Conflict Tactics Scale, Revised Short Form (CTS2S; Straus & Douglas, 2004), is a 20-item adult self-report measure that assesses intimate partner violence and other conflict resolution strategies. The measure captures the severity (i.e., none,

minor only, severe), prevalence, and mutuality (i.e., one, both, or neither partner engages in behavior) of maladaptive conflict resolution strategies. Developed as a more time efficient version of the Revised Conflict Tactics Scale, the CTS2S consists of two items (one from the severe subscale, one from the minor subscale) from each of the four maladaptive conflict tactics scales, including physical violence (e.g., "pushed, shoved, or slapped me"), injury from assault (e.g., "needed to see a doctor because of a fight"), psychological aggression (e.g., "destroyed something belonging to me or threatened to hit me"), sexual coercion (e.g., "used force...to make me have sex"). In addition, the CTS2S includes two Negotiation Scale items, including one from the cognitive subscale (e.g., "explained my side or suggested a compromise") and one from the emotional subscale (e.g., showed I cared about my partner's feelings about an issue we disagreed on").

The developers selected CTS2S items from each CTS2 subscale (severe, minor, emotional, cognitive) by identifying the item in each subscale that most highly correlated with the total CTS2 score. When two items demonstrated equivalent associations with the total CTS2 score, the item with the highest prevalence rate was included. In order to increase sensitivity in detecting conflict behaviors, the developers combined several related behaviors into a single item (Straus & Douglas, 2004). For instance, severe conflict behaviors, including "kicking" and "beating-up," existed as separate items in the CTS2, and in the CTS2S all behaviors were combined into a single item (i.e., "punched, kicked, or beat me up"). The CTS2S has demonstrated similar psychometric properties to the CTS2, and subscales were adequately correlated between the two measures (.64-.94), suggesting its use as a viable alternative to the complete version. However, measures of internal consistency were not provided given only two

items were included for each subscale and the heterogeneity of conflict items (Schmitt, 1996; Straus & Douglas, 2004).

For the purposes of the current study, only items assessing maternal victimization of maladaptive conflict resolutions strategies (physical violence, injury from assault, psychological violence, sexual assault) were included. A history of IPV victimization score has been established by assessing the occurrence of IPV in a current and/or past relationship. Mothers reporting a current romantic relationship complete the CTS2S as presented in Straus and Douglas (2004). Mothers indicate the frequency and occurrence of IPV utilizing an 8-point scale ranging from 1 (occurred once in the past year) to 6 (occurred more than 20 times in the past year). If the behavior did not occur in the past year, but it did occur in the past, mothers reported a 7; a score of 8 indicated the behavior never occurred. Mothers who endorsed a past significant relationship occurring during the child's lifetime, completed a measure consisting of the same items, but indicated the frequency of the behaviors on a five-point Likert-scale ranging from 1 (the behavior never occurred) to 5 (the behavior always occurred). In the current sample, 14 mothers completed the CTS2S for both a current and past relationship, 26 completed the CTS2S for only a current relationship, and 12 completed the CTS2S for only a past relationship.

In order to maximize use of the sample size for analyses, a single composite score of maternal history of IPV victimization was computed. Items from the past relationship measure, when available, and current relationship measure, when available, were collapsed and rescored as either 0 (the behavior never occurred) or 1 (the behavior did occur). For instance, if behaviors in an item occurred in both a current and in a past relationship, a score of 1 was given for the item. After identifying the prevalence of maternal IPV victimization for each the eight maladaptive conflict items, severity levels were computed for each of the four subscales (i.e.,

physical violence, psychological aggression, injury, sexual coercion). If mothers endorsed neither a minor nor severe item in the subscale, a score of zero (no violence) was given; if mothers endorsed a minor item but not a severe item in the subscale, a score of 1 (minor only) was given; if mothers endorsed a severe item but not a minor item in the subscale, a score of 2 (severe) was given, and if mothers endorsed a minor item and a severe item, a score of 2 (severe) was given. Straus and Douglas (2004) recommended severity ratings as perpetrators of minor violent behaviors often engage in more severe violent behaviors as well, potentially confounding the behaviors. Therefore, potential scores for mothers total IPV victimization could range from 0 to 8 even if certain minor behaviors were not endorsed. Internal consistency for maternal IPV victimization was adequate in the current sample ($\alpha = .87$).

Emotionally maltreating parenting behavior. Self-reports of emotionally maltreating parenting behavior were collected via the Coping with Children's Negative Emotions Scale (CCNES; Fabes, Eisenberg, & Bernzweig, 1990). The measure assesses parental reactions to children's negative emotions in the context of sixteen hypothetically distressing situations (e.g., child falls of a bike and breaks it). CCNES scales capture potential parental responses to children's negative emotion including punitive reactions (e.g., "tell the child to stop crying or he/she will not be able to ride the bike"), minimization reactions (e.g., "tell the child he/she is overreacting"), distress reactions (e.g., "get angry with the child"), emotion-focused reactions (e.g., "comfort your child and try to get him/her to forget about the accident"), expressive encouragement (e.g., "tell your child it is OK to cry), and problem-focused reactions (e.g., "help your child figure out how to get the bike fixed). Parents indicate the likelihood of each response on a scale from 1 (very unlikely) to 7 (very likely). Consistent with previous research, the punitive reaction and minimizing reaction subscale scores will be averaged to create an

aggregate "harsh parental responses" scale (Fabes, Leonard, Kupanoff, & Martin, 2001) as an assessment of self-reported emotionally maltreating parenting behavior. Internal consistency was adequate for each scale in the current sample: minimization scale (α = .87), punitive reactions scale (α = .89), and composite harsh parenting scale (α = .94).

Observational measures of emotionally maltreating parenting behavior included behavioral scales coding parental hostility, psychological unavailability, and psychological control. The hostility coding scale (see Appendix A) captured parenting behavior that was cold, rejecting, sarcastic, and critical (e.g., parent calls child "stupid," or "lazy"). In comparison to an angry parent who sought a change in the child's behavior, the hostile parent exhibited a sense of hopelessness for change. Parents were coded on a scale from 1 (no hostility) to 7 (severe hostility). At the low end of the hostility scale, parents might have exhibited no, indeterminate, or minor examples of hostile behavior such as a minor put down or express a slight sense of hopelessness (e.g., "I've told you again and again, but you never clean your room"), In the middle range, parents were becoming more hostile and evidenced a lack of hope for change (e.g., "I don't know why I even bother asking you?"). At the high range of the scale, rejection of child, put downs, and disregard for child were more frequent and pervasive throughout the interaction. The psychological unavailability coding scale (see Appendix B) captured parenting behavior that was devoid of emotional responses to the child's needs (Egeland & Erickson, 1987). The scale ranged from 1 (minimal disengagement) to 6 (high disengagement), with lower scores indicative of parents who overall were emotionally available to their children, but they might fail to respond to the child's emotional needs on occasion (e.g., become absorbed in the task or inattentive for a brief time). At the middle of the scale, the parent demonstrated both responsivity and unavailability, although unavailability was more frequent. The high end of the

scale identified parents who almost always were disengaged and unresponsive to the child's emotional needs and interacted with the child only as needed during the lab task. The psychological control coding scale (see Appendix C) captured parenting behavior that was motivated to control and align the child's thoughts, behavior and emotions with those of the parent. Based on the Psychological Control Scale—Observer Rating (PCS-OBS; Barber, 1996), the current global rating scale assessed behaviors consistent with psychological control, including constraints of verbal expressions, love withdrawal, guilt induction, emotional invalidation, erratic emotional behavior, and/or personal attacks/blame. The scale ranged from 1 (no psychological control) to 7 (pervasive and severe psychological control), with lower scores representing parents who expressed control over their child's thoughts likely due to lapses in parental self-monitoring during a task rather than motivation to align the child's thoughts/emotions. At the middle of the scale, the parent engaged in pervasive control of the child's thoughts and ideas and exhibited some attempts of aligning the child's thoughts, behavior and emotions (e.g., "I will be sad and disappointed if you don't clean your room." At the high end of the scale, it was clear the parent was attempting to control the child's thoughts, behavior and emotion via multiple control behaviors and rarely allowed the child to express his/her own perspective. Observed emotionally maltreating parenting behavior scores were derived from the sum of scores for hostility, psychological control, and psychological unavailability during the conflict discussion and could range from 3-20.

Prior to coding video recordings of mother-child interactions, each member of the coding team was trained and achieved reliable scoring. Coders assigned a global score for each emotionally maltreating parenting behavior scale reflective of the dyadic interactions during the conflict discussion. Inter-rater reliability was computed with interclass correlations for the first

30 dyads, and each scale demonstrated adequate reliability as follows: psychological control (α = .76), psychological unavailability (α = .84), and hostility (α = .79). In the current study, a composite of the three scales will be used as a measure of observed emotionally maltreating parenting behavior, thus capturing both emotional abuse and emotional neglect.

Parenting stress. The Parenting Stress Index-Short Form (PSI-SF, Abidin, 1995) is a 36-item parent-report measure that assesses a parent's current level of stress related to the parenting role. The PSI-SF consists of items from the full-length Parenting Stress Index (Abidin, 1983), and was developed as a shorter, more time efficient alternative. Using a Likert-scale ranging from 1 (strongly disagree) to 5 (strongly agree), parents indicated whether they experienced stress in various parenting roles (e.g., "I feel trapped by my responsibilities as a parent," "My child seems to cry or fuss more often than most children," "Sometimes I feel my child does not like me..."). The sum of item scores yields a total parenting stress score. Raw scores greater than 90 indicate clinically significant parenting stress (Haskett, et al., 2004). The PSI demonstrated adequate reliability in the current sample ($\alpha = .92$).

Psychological distress. The Symptom Checklist-90-Revised (SCL-90-R; Derogatis, 1994) is a 90-item questionnaire that assesses an individual's current levels of psychological distress. Using a Likert-scale ranging from 0 (not at all) to 4 (extremely), participants recorded the degree to which various symptoms (e.g., headaches, shakiness, trouble concentrating) were bothersome during the past seven days. The most commonly used score is the global severity index (GSI), which is an average of all 90-symptom items. For the purposes of the current study, the GSI scores will determine current levels of psychological distress. T-scores greater than and equal to 63 indicate clinically significant levels of distress (Derogatis, 1994). The SCL-90-R demonstrated adequate internal reliability in the current sample (α = .98).

CHAPTER 3

PLAN FOR ANALYSES

For data that fails to meet assumptions (e.g., skewed distributions, presence of multicollinearity, small sample sizes), which can be common within developmental and observational research (Holmbeck, 1997; Straus, 1979; Straus et al., 1998), bootstrapping analyses can be particularly useful, as they are more robust to violations of these assumptions for distributions. Therefore, bootstrapping analyses were employed in the current study.

Analysis of Indirect Effects

Indirect effects of interparental conflict on emotionally maltreating parenting behavior via parenting stress was tested using the simple mediation option of the SPSS macro, PROCESS, discussed in Hayes (2012). The macro provides a stringent examination of indirect effects through bootstrap analyses and establishes 95% bias corrected confidence intervals of indirect effects through multiple random resamplings of data. Arguing for the use of bootstrapping approaches, Preacher and Hayes (2004) discuss several limitations to both the Baron and Kenny (1986) and Sobel approach. The Baron and Kenny (1986) requires significant associations between 1) the predictor variable and proposed mediator, 2) the proposed mediator and the outcome variable, and 3) the predictor and outcome variables. More recently literature suggests these requirements can both increase risk for both Type I and Type II error. For instance, analyses that solely rely on Baron and Kenny and fail to meet prerequisites for testing indirect effects risk wrongful acceptance of the null hypothesis (MacKinnon, Fairchild, & Fritz, 2007; Preacher and Hayes, 2004), when other tests would reject the null hypothesis. When prerequisites are met for analyses, indirect effects are detected when the link between the

predictor and criterion variable is no longer significant after the mediator is entered into the regression model. However, this method does not specifically test the strength of the indirect effect, as achieved by the Sobel test (Sobel, 1982). Although the Baron and Kenny method combined with the Sobel test can provide a more stringent test of indirect effects, both rely on assumptions of normality, again increasing risk for erroneous conclusions. The bootstrapping approach can detect indirect effects with fewer errors, making it a preferable option for analyses.

Two simple mediation PROCESS analyses were conducted in which interparental conflict served as the predictor variable, parenting stress as the mediator, and emotionally maltreating parenting behavior as the outcome. The first analysis included self-reports of emotionally maltreating parenting behavior as measured by the Harsh Parenting composite scale of the CCNES; the second analysis included observations of emotionally maltreating parenting behavior as measured by the composite hostility, psychological control, and psychological unavailability scales.

Analysis of Conditional Effects

In order to examine the whether the magnitude of the relation between interparental conflict and emotionally maltreating parenting behavior depends on the level of maternal parenting stress, conditional effects were tested using the moderation option of the SPSS macro, PROCESS, discussed in Hayes (2012). PROCESS conducts linear regression analyses to examine the proportion of variance in the outcome that is accounted for by the joint-effects of the predictor and moderator variables. PROCESS also conducts estimates of model coefficients and simple slopes to demonstrate the effect of the predictor on the outcome at different levels of the moderator, and confidence intervals for the conditional effects are generated based on bootstrap sampling. Although PROCESS provides several options for probing conditional effects, the

current study examined conditional effects at low, medium, and high levels of the moderator (i.e., the mean and one standard deviation above and below the mean), and 2) the Johnson-Neyman technique, which determines the value of the moderator at which the predictor becomes a significant versus nonsignificant. Values will be entered into a graphing program (i.e., Excel) to provide a graphic representation of interaction effects. Two separate moderation PROCESS analyses were conducted in the current study; first, self-reported emotionally maltreating parenting behavior (i.e., CCNES harsh parenting) served as the outcome; second, observed emotionally maltreating parenting behavior served as the outcome. Interparental conflict served as the predictor, and parenting stress served as the moderator. The predictor and moderator variables were mean centered prior to analyses to increase interpretability of data (Hayes & Matthes, 2009).

CHAPTER 4

RESULTS

Missing Data and Preliminary Results

The range of missing cases per study variable was 0 to 11 (0-17%). In order to reduce bias that can occur as a result of listwise deletion, missing values were replaced via individual mean substitution. Previous studies suggest that individual mean substitution is an effective missing data replacement when many or most items per scale are available (e.g., eight items; Hawthorne & Elliot, 2006; Widaman, 2006); thus, this approach was used to replace missing values for participants who responded to at least 8 items per scale on the CCNES, PSI, and SCL-90. Four participants were eliminated from analyses due to human non-response on the majority of items on a measure. The final sample included 60 mother-child dyads. See Table 1 for a complete presentation of means, standard deviations and bivariate correlations among study variables.

Average standardized scores of observed emotionally maltreating parenting behavior ranged from -.74 to 3.34 (M = 0 SD = .80) with 58.3% (N = 35) of mothers exhibiting levels of emotionally maltreating parenting behavior within one standard deviation below the mean, with 28.3% (N = 17) exhibiting levels within one standard deviation above the mean, and only 13.3% (N = 8) of mothers exhibiting levels of emotionally maltreating parenting behavior greater than one standard deviation above the mean. Rates of self-reported emotionally maltreating parenting behavior, as assessed via the CCNES, ranged from 1.33 to 6.21 (M = 2.97, SD = 1.23), with 12% (N = 7) of mothers indicating they would likely to very likely respond to their children's

expressions of negative emotion in a harsh manner (i.e., minimizing/punitive manner). Observed and self-reported emotionally maltreating parenting behaviors were significantly related (α = .28, p = .034). IPV victimization severity scores ranged from 0 (no history of IPV victimization) to 8 (severe victimization across all categories of IPV: physical, injury, sexual, psychological), with 13% (N = 8) endorsing no IPV victimization, 40% (N = 24) endorsing only one minor event, and 17% (N = 10) endorsing at least two severe events, with scores ranging from 6-8. Parenting stress scores ranged from 38-161 (M = 73.87, SD = 22.09), with 19% (N = 11) of mothers endorsing clinically significant levels of parenting stress (scores > 90). Consistent with other studies using community samples, participants in the current sample overall endorsed relatively low levels of intimate partner violence victimization, emotionally maltreating parenting behavior, and parenting stress.

Independent samples t-tests were conducted to explore child sex and maternal ethnic differences in the current study. Results indicated that, in comparison to mothers of boys, mothers of girls reported significantly greater history of IPV victimization (girls M = 6.00, boys M = 1.70; t [57.93] = -2.33, p = .02), and, in comparison to mothers of females, mothers of boys reported greater psychological distress (boys M = 57.52, males M = 41.92; t [58] = 2.38, p = .02). Levene's test indicated unequal variances for maternal IPV victimization; therefore degrees of freedom were adjusted from 58 to 57.93. There were no significant differences between mothers of boys versus girls on other study variables. In comparison to non-African American mothers (e.g., Caucasian, Hispanic), African American mothers evidenced significantly greater levels of emotionally maltreating parenting behavior, both observed (African American: M = .22, non African American: M = .22; t [58] = 2.25, p = .03) and self-reported (African American: M = .23, non African American: M = .263; t [58] = 2.19, p = .03), and psychological distress

(African American: M = 56.40, non African American: M = 49.27; t [58] = 2.30, p = .03). No other significant differences between African American and non African American mothers emerged.

Bivariate Correlations

Bivariate correlations were conducted among study variables and are presented in Table

1. Consistent with study hypotheses, results indicated significant positive relations between reports of maternal IPV victimization and observed emotionally maltreating parenting behaviors and parenting stress. Maternal IPV victimization was not significantly related to self-reported emotionally maltreating parenting behavior. Also consistent with study hypotheses, results indicated significant positive relations between parenting stress and both self-reported and observed emotionally maltreating parenting behavior. Psychological distress was significantly and positively related to both maternal IPV victimization and parenting stress, and only marginally related to observed emotionally maltreating parenting behavior.

Analysis of Indirect and Conditional Effects

Observed emotionally maltreating parenting behavior. Bootstrapping (5000 resamples) analysis using the simple mediation option of the SPSS macro, PROCESS (Hayes, 2012), did not reveal a significant indirect effect of maternal IPV victimization on observed emotionally maltreating parenting behavior via parenting stress when controlling for psychological distress (point estimation = .027; 95% BCaCI [-.001, .118]), since the confidence interval included zero.

The moderation option of the SPSS macro PROCESS was used to examine the conditional effect of maternal IPV victimization on observed emotionally maltreating parenting behavior. Results indicated a significant joint-effect of maternal IPV victimization and parenting

stress (b = .005, 95% CI [.001, .008], p = .01), accounting for a significant portion of additional variance in observed emotionally maltreating parenting behaviors when controlling for psychological distress (R^2 increase = .08; F(1, 55) = 7.10, p = .01). Conditional effects were probed to examine the relation between maternal IPV victimization and observed emotionally maltreating parenting behavior at three different levels of parenting stress: low (-1 SD = -22.09; uncentered = 51.78), medium (M = 0; uncentered = 73.87), and high (+1 SD = 22.09; uncentered = 95.96). Results indicated a slope significantly different from zero only when examining conditional effects at high levels of parenting stress, such that greater severity of IPV victimization was related to greater emotionally maltreating parenting behavior at high (b = .177; 95% CI [.06, .29], t(1,55) = 3.12, p = .003), but not low (b = -.036; 95% CI [-.16, .09], t(1,55) =-.600, p = .551) or medium (b = .070; 95% CI [-.01, .16], t(1.55) = 1.63, p = .109) levels of parenting stress (see Figure 3). Additional analyses via the Johnson-Neyman technique determined significant conditional effects occurred when parenting stress scores were at or above 7.17 (uncentered = 81.04). At lower levels of IPV victimization (i.e., < 1 type of victimization), there appeared to be no significant differences in emotionally maltreating parenting behavior regardless the level of parenting stress.

Self-reported emotionally maltreating parenting behavior. Bootstrapping (5000 resamples) analysis using the simple mediation option of the SPSS macro, PROCESS (Hayes, 2012), did not reveal a significant indirect effect of maternal IPV victimization on self-reported emotionally maltreating parenting behavior via parenting stress when controlling for psychological distress (point estimation = .041; 95% BCaCI [-.003, .151]), since the confidence intervals included zero.

The moderation option of the SPSS macro, PROCESS, was used to examine the conditional effect of maternal IPV victimization on self-reported emotionally maltreating parenting behavior when controlling for psychological distress. There was no significant joint-effect of maternal IPV victimization and parenting stress accounting for a significant portion of variance in self-reported emotionally maltreating parenting behavior (b = .001, 95% CI [-.005, .008], p = .70).

Table 1. Means, Standard Deviations, and Bivariate Correlations of Study Variables. Note. Observed emotionally maltreating parenting behavior is the average of the standardized scores for observed parental hostility, psychological control, and psychological unavailability.

	M	SD	1	2	3	4	5
Observed Emotionally Maltreating Parenting Behavior	0.00	0.80		.28*	.36**	.49**	.31*
2. Self-Reported Emotionally Maltreating Parenting Behavior	2.97	1.23			.01	.35**	.18
3. Maternal IPV Victimization	2.43	2.19				.37**	.34**
4. Maternal Parenting Stress	73.87	22.09					.68**
5. Maternal Psychological Distress	52.83	12.46					

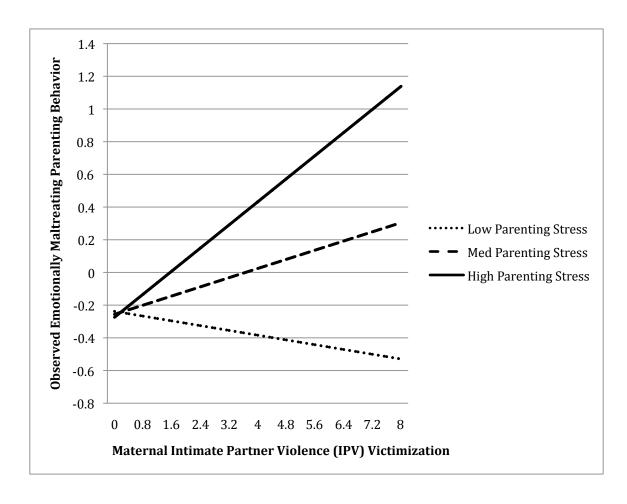


Figure 3. Joint-Effects of Intimate Partner Violence and Parenting Stress. Relation between maternal intimate partner violence victimization and observed emotionally maltreating parenting behavior depending on level of parenting stress when controlling for maternal psychological distress. Note. Values for low, medium, and high values of both parenting stress and IPV are +/- 1 SD from the sample mean. Maternal IPV victimization scores are presented as uncentered values.

CHAPTER 5

DISCUSSION

Using a multi-method approach, the current study examined the association between maternal intimate partner violence (IPV) victimization and emotionally maltreating parenting behavior within a community sample, with emphasis on the unique contribution of parenting stress in this relation. The current study hypothesized that 1) maternal IPV victimization would be related to mothers' increased engagement in self-reported and/or observed emotionally maltreating parenting behavior (i.e., spillover), and 2) the link between maternal IPV victimization and self-reported and/or observed emotionally maltreating parenting behavior would be either indirect or conditional upon the level of maternal parenting stress (i.e., mediated or moderated, respectively), even when controlling for general psychological distress.

Results supported the first hypothesis, demonstrating that mothers' reports of IPV victimization were associated with greater observed, but not self-reported, emotionally maltreating parenting behavior. While other studies have identified associations between 1) IPV and documented cases of emotional maltreatment (Casanueva et al., 2009), and 2) less severe interparental conflict and observed emotionally maltreating parenting behaviors (e.g., Sturge-Apple et al., 2009), no known studies have identified links between IPV and observed emotionally maltreating parenting behavior. Consistent with study hypotheses and previous literature, intimate partner violence was related to maternal reports of parenting stress (e.g., Owen et al., 2006).

The second hypothesis proposed the link between IPV victimization and emotionally maltreating parenting behavior was either indirect or conditional via parenting stress; findings

supported a conditional effects (i.e., moderation) model with observed emotionally maltreating parenting behavior as the outcome. Mothers reporting higher levels of IPV victimization were more likely to engage in greater emotionally maltreating parenting behavior during a conflict discussion, when they also endorsed high levels of parenting stress. Lastly, in the context of low IPV victimization, mothers engaged in low levels of observed emotionally maltreating parenting behaviors regardless the level of parenting stress.

Conditional effects were not supported in the link between IPV victimization and self-reports of emotionally maltreated parenting behavior. Analyses of indirect, mediating effects also were not supported in the current study for either observed or self-reported emotionally maltreating parenting behavior. Therefore, the overall relation between IPV victimization and emotionally maltreating parenting behavior was not accounted for by parenting stress, but rather the joint-effects of IPV victimization and parenting stress.

Through examination of both conditional and indirect effects within a single study, the current findings have potential to clarify the complex process of risk for parental engagement in emotionally maltreating parenting. Erel and Burman (1995) summarized several theories proposed to explain the association between IPV victimization and parenting, including 1) the spillover hypothesis, suggesting interparental conflict "spills over" into the parent-child relationship due to the strain of victimization on the parents' emotional well-being (Margolin, 1981), 2) the compartmentalization hypothesis, suggesting parents contain conflict within the interparental relationship, thereby preventing an impact on the parent-child relationship, and 3) the compensatory hypothesis, suggesting parents (particularly mothers) who experience interparental conflict compensate by seeking a more positive relationships with the child (e.g., Brody, Pellegrini, & Sigel, 1986).

Consistent with both the spillover and compartmentalization hypothesis, findings suggest IPV victimization "spills over" into the parent-child relationship when mothers experience high levels of parenting stress, regardless of general levels of psychological distress. In addition, current findings suggest that mothers experiencing higher IPV victimization who endorsed medium-low levels of parenting stress were able to compartmentalize conflict within the parental relationship, diminishing the link between IPV victimization and emotionally maltreating parenting behavior. Previous studies have yielded inconsistent results when examining conditional and indirect effects of interparental conflict on parent-child conflict via parenting stress (Margolin & Gordis, 2003; Sturge-Apple et al., 2003); therefore, the current study provides additional support for a compartmentalization hypothesis, but only for mothers experiencing low to average levels of parenting stress. Thus, spillover is more likely to occur for mothers who were victims of greater intimate partner violence and endorse high levels of parenting stress. Notably, the role of parenting stress was not better accounted for by mothers' general psychological distress, suggesting that high parenting stress served a unique function in the spillover of conflict within the current study.

No other studies have examined the role of parenting stress in the link between IPV victimization and emotionally maltreating parenting behavior when controlling for or accounting for general psychological distress; however, other studies have identified parenting stress as the process by which psychological distress predicts maladaptive parenting (Gerdes et al., 2007). Future studies would benefit from replicating these findings in a clinical sample to further distinguish the differential role of parental and general psychological distress as it relates to IPV victimization and parenting behavior.

Although no *a priori* hypotheses were proposed regarding methodological differences in findings, results varied in the current study depending on self-report versus observational methods of assessing emotionally maltreating parenting behavior. Several potential explanations for differences are provided. First, participants' self-reported emotionally maltreating parenting behavior might have been subject to reporter bias, whereas observations of emotionally maltreating parenting behavior are often resistant to such bias (Bennett et al., 2006; Gardner, 2003). Second, observations of emotionally maltreating parenting behavior assessed a range of parenting behaviors (i.e., hostility, psychological unavailability, psychological control), whereas self-reported emotionally maltreating parenting behavior included only parenting behavior consistent with emotional invalidation within psychological control domain.

Limitations and Future Directions

Despite the contributions of the current study, several statistical and methodological limitations should be considered when interpreting results. First, although the emotionally maltreating parenting behaviors examined in the current study (i.e., psychological control, hostility, psychological unavailability) are consistent with current definitions of emotional maltreatment (Barber et al., 2002; Straus et al., 1998), conclusions regarding a parent's emotional maltreatment status cannot be made without knowledge of the frequency and pervasiveness of these behaviors (Wolfe & McIsaac, 2010). Given challenges related to identifying emotionally maltreating families via self-report and reporting agencies, observational methods of emotionally maltreating parenting behaviors within a community sample have potential to assist in identifying families that are at risk for or already cross the threshold of parenting indicative of emotional maltreatment. Future studies examining the prevalence of observed emotionally maltreating parenting behaviors in both community samples and samples

of referred and documented families will be helpful in determining the sensitivity of such methods in detecting at risk or emotionally maltreating families. Second, given the small sample size (i.e., below the power analysis sample size recommended for detecting significance) and limited number of participants endorsing high levels of maternal IPV victimization, emotionally maltreating parenting behavior, and parenting stress, relations among variables might be attenuated. Bootstrapping methods tend to resolve such issues through multiple resamplings of data (Preacher & Hayes, 2004), but future studies also will benefit from reexamining the current findings using both larger and more clinical samples (e.g., substantiated cases of emotional maltreatment, battered women). Third, the cross-sectional design of the study prevents conclusions regarding the temporal relation among variables. For instance, it is difficult to ascertain whether maternal IPV victimization preceded parenting stress and emotionally maltreating parenting behavior, which is ideal in assessing indirect effects (Kraemer, Stice, Kazdin, Offord, & Kupfer, 2001). Although the proposed relations among variables in the mediation model were theoretically based, longitudinal studies are needed to assess temporal relations among IPV victimization, parenting stress, and emotionally maltreating parenting behavior. A reexamination of conditional versus indirect effects using a longitudinal sample also has potential to facilitate effective points of intervention.

Fourth, conclusions regarding the discrepancy between self-reported versus observed emotionally maltreating parenting behaviors are cautioned due to the potential differences in parenting behaviors assessed via methods. A self-report measure that includes more diverse examples of emotionally maltreating parenting behavior consistent with those observed during a conflict discussion might yield more similar results (e.g., CTSPC). Future studies with larger sample sizes might benefit from developing a latent construct of emotionally maltreating

parenting behavior that includes both self-reported and observed emotionally maltreating parenting behavior. Fifth, in order to maximize use of the current sample, the current study also did not differentiate between mothers who currently were in a violent relationship from those who had a history of victimization. Repeating the current study in samples with more diverse assessment of IPV (i.e., partner's report of victimization and perpetration, current versus past victimization, frequency, coparent status) as well as samples of battered women will be important in determining the generalizability of the current findings.

Conclusions from the current study contribute to the growing literature examining the familial context of emotional maltreatment, and indicate areas for future research. Additional studies are required to further understanding of the relation between parenting stress and emotionally maltreating parenting behavior in the context of IPV victimization. First, studies should examine whether parents are more vulnerable to engage in emotionally maltreating parenting behavior depending on the type of parenting stress they experience. Previous studies indicate the Parenting Stress Inventory yields two distinct, but related, factors (Abidin, 1995; Haskett et al., 2006), including parent-domain stress (i.e., feeling burdened by the parenting role) and child-domain stress (i.e., dissatisfaction with parent-child relationship, perception child is difficult). Further, child-domain stress might be more predictive of physical maltreatment (Haskett et al., 2006); however, studies have not examined parent- versus child-domain stress in the relation between IPV victimization and emotional maltreatment. Second, since IPV victimization alone was not predictive of emotionally maltreating parenting behavior in the current study and depended on the level of parenting stress (independent of psychological distress), future studies will benefit from determining factors that increase risk for IPV victims to experience parenting stress including maternal factors (e.g., social support, emotion regulation

processes), environmental factors (e.g., household income, unemployment), and child characteristics (e.g., social, emotional, behavioral, and health problems). Previous studies suggest mothers who engage in physical maltreatment perceive their children's behavior as more problematic than objective observers and nonabusive mothers (McPherson et al., 2009) and evidence greater emotion dysregulation (Shipman & Zeman, 2001). Consistent with the spillover hypothesis, mothers might be vulnerable to emotional stress, potentially decreasing her ability manage emotions in the context of managing conflict with children. If parenting stress also is heightened, a mother might be vulnerable to engage in emotional maltreatment. Lastly, given the insidious and often elusive nature of emotional maltreatment, increased efforts are needed to increase identification of emotionally maltreating parenting as well as the context in which it occurs. While the current studied assessed observations of emotionally maltreating parenting behaviors, that likely are indicative of emotional maltreatment, future studies will benefit from replicating these findings in a verified emotionally maltreating sample both independent of and with verified samples of IPV victims.

The findings in the current study also have potential to inform intervention efforts designed to decrease the transmission of conflict from within the parenting relationship to the parent-child relationship, and highlights the importance of examining parenting stress among maternal IPV victims. Interventions aimed to increase parental self-efficacy in 1) managing children's behavior and emotions, and 2) increasing mother's awareness and coping with her own emotions in response to children's behavior, might decrease the occurrence of maladaptive parenting. Furthermore, intervention efforts that foster positive interactions and target problem behaviors in children have been effective in decreasing parenting stress in both maltreating and nonmaltreating families (Eisenstadt, Eyberg, McNeil, Newcomb, & Funderburk, 1993; Timmer,

Urquiza, Zebel, McGrath, 2005). Thus, such interventions might be influential decreasing parenting stress, and potentially emotionally maltreating parenting behavior. In order to target emotionally maltreating parenting behaviors in addition to parenting stress, interventions might benefit from including an emotional socialization component to equip parents with effective parenting skills that promote emotional development and competence, mitigating risk for children's development of psychopathology.

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APPENDIX A

PARENTAL HOSTILITY CODING SCALE

This scale is distinct from the anger scale because, though it may appear similar to anger, hostility is not intended to engage or elicit a response from the child. There is no expectation on the part of the parent that a satisfactory resolution will ensue through the use of these comments. On the contrary, there is an element of hopelessness or fatalism. It is as if things will never change. There is an indirect quality to most comments and frequently incongruence between the comment and the affect of the parent, i.e. use of sarcasm or rejecting statements said with humor or laughter. An element to consider in scoring is the accompanying affect. Cold, rejecting comments or easily expressed hurtful comments characterize the high end of scoring. In the moderate range, there may be a mixture of pain and sadness at having said a hurtful thing.

- 1- **Very Low.** No evidence of hostility, any angry statements made are done so with the clear intention of eliciting a response or change in the child.
- 2- Low. Vague or indeterminate examples of a small number. A minor put down or a critical tone are examples of behaviors that might occur at this level, but only one of these may occur for a score of a 2.
- 3- **Moderately Low.** A score of 3 signifies a minor element of hurtful intent or at least a degree of hopelessness in the task of achieving a satisfactory response. It may take the form of several mildly hurtful comments or two or three clear putdowns. Statements leave open the possibility of working something out all hope is not lost.
- 4- **Moderate**. All scores 4 and above begin to be characterized by a clear lack of expectation that there will be any change or satisfactory solution. There are several pointed, hostile statements made with sarcasm or cynicism, but there may remain an element of vulnerability. At this level, expressions of hostility may co-occur with intermittent expressions of anger. In general, scale point 4 should be used for parents who are a mixed picture.
- 5- **Moderately High.** A score of 5 is appropriate when it is apparent that the parent adopts a predominantly hostile approach to the interactions. The parent clearly rejects working with the child on the tasks and put-downs take on a personal nature. This parent's behavior is more rejecting than not, either by the frequency of the hostile behavior or by the potency by which rejection is communicated several times in the session.
- 6- **High**. This parent frequently expresses rejection and hostility toward the child. There is little or no effort to show warmth during substantial portions of the session. At this scale point, it may seem that the parent is using rejection or hostility as a control technique against child.
- 7- **Very High.** This scale point should be reserved for those parents who show outright rejection of their child. Their interactions are characterized by a high degree of cynicism, sarcasm, personal put-downs and complete disregard for the child. The parent shows no warmth towards the child.

APPENDIX B

PARENTAL PSYCHOLOGICAL UNAVAILABILITY CODING SCALE

Psychological unavailability reflects the degree to which a parent fails to respond to her child's emotional needs. This is distinct from, though it may co-occur with, instances of hostile or actively rejecting responses to the child. Mothers who are psychologically unavailable may appear depressed, or detached from the interactions. They will not exhibit pleasure in the interactions or in being with their children. This positive responsivity might be manifest in appropriately labeling the child's emotions, or validating the child's emotions or experiences, or expressing curiosity in how the child is feeling or experiencing the tasks.

Availability Indicators: Validates child's perspective, feelings, and actions in situation; responds appropriately to child's emotional needs, or bids for attention; expresses curiosity in child's feelings or experiences in tasks; is able to comfort distressed child

Unavailability Indicators: Is detached from experience and/or child; interacts with child only as necessary or required by task

- 1- Very Low/Low. Mother does not show signs of detachment from her child's positive and negative emotional experiences in the interactions, as indicated by expressing empathy for child's emotional reaction, even in situations where the mother and child were in conflict or disagreement with one another, or there are multiple indicators that the mother is correctly identifying and responding to her child's current emotional experience. OR The mother does not show any signs of detachment from her child's experience in the interactions.
- 2- **Moderately Low**. Mothers are more psychologically available to their children than not, although some lapses in their ability to respond to their children are evident.
- 3- **Moderate**. At this scale point, mother's failure to be psychologically available to her child is mixed with indicators of emotional responsivity and validation.
- 4- **Moderately High**. More frequently than not, mothers fail to respond appropriate to the child's emotional experiences or bids for attention. However, there are a few instances where the child's emotional experience is validated or labeled by the mother. It is clear that the mother is generally detached from the interactions, though she may inconsistently be psychologically available to her child.
- 5- **High**. Mother is mostly psychologically unavailable to her child and detached from the tasks for a majority of the time. Instances of availability and pleasure or engagement in the interaction are rare.
- 6- **Very High**. Mother is entirely unresponsive to the child's emotional experiences/needs, or attempts by the child to elicit interaction. At this level, a mother is only observed to interact with her child when absolutely necessary, without any evidence of pleasure or engagement in the interaction. Mother is entirely unable to comfort a child if distressed, or share in the child's positive experiences.

APPENDIX C

PARENTAL PSYCHOLOGICAL CONTROL CODING SCALE

This scale reflects the degree to which the mother attempts to control her child's feelings, verbal expressions, opinions, and ideas with the *motivation* of aligning them with her own. The mother's behaviors do not *necessarily* deny or acknowledge the child's ideas and opinions. A mother scoring low on this scale does not attempt to coerce or squelch the child's own ideas, opinions, and feelings. In contrast, a mother scoring high on this scale attempts to align the child with her own perspective through psychological means, such as guilt, shame, derision, manipulation, and coercion.

- 1- **Very Low** (no psychological control). Mothers that recognize and support the ideas, opinions, and feelings of the child are scored here, although it is not necessary for the mother to be supportive. It is essential that mothers scored here do not actively deny the child's perspective.
- 2- **Low**. There may be a few fleeting instances where the mother attempts to control the child's perspective or insists on the child taking her perspective. However, these instances of psychological control appear to be lapses in parental self-monitoring, rather than intentional acts of manipulation.
- 3- **Moderately Low**. Mothers scored here exert some psychological control. Instances of control are pervasive in one task (e.g., etch-a-sketch, imaginary happenings) or seen intermittently throughout the tasks. The mother may be task-oriented and attempting to control a certain task thereby inadvertently controlling the child's opinions and perspective (e.g., in conflict, "we need to reach a compromise" or stay on topic of choice or not allowing the child to direct her).
- 4- **Moderate**. At this scale point, mother's use of psychological control is becoming more notable and a theme of their interaction. Attempts to control the child are seen in all tasks or for a substantial portion of the interaction time. Mother's scored here demonstrate multiple examples of task oriented control across tasks or demonstrate one non-task oriented use of psychological control.
- 5- **Moderately High**. More than once, mothers attempt to coerce or manipulate the child's feelings, ideas, and opinions. However, there are a few instances where the child's perspective is allowed or not rejected. It is clear that the mother is attempting to influence the child's opinions and feelings, though she may not do so consistently.
- 6- **High**. More often than not, mother interferes with the child's attempts to assert his/her own opinions and separate identity. She may do this by convincing the child that his/her opinions and perspectives have no validity compared to her own perspective or by pointing to the inadequacy of his/her opinions without suggesting alternate opinions. She may be very intrusive and dominating in their interactions. At this scale point, the behaviors the mother uses to control the child are more consistent and overt, clearly intending to control the child and/or to push her own agenda.

7- **Very High**. Mothers' clear attempts to control their child's feelings or opinions are pervasive in multiple tasks or for a substantial portion of the interaction time. Mother rarely or never allows child's perspective, and such occurrences are insincere.

Indicators of Psychological Control

- Constraining verbal expressions
 - Changing the subject, interrupting, finishing sentences, speaking for the other, lecturing, switching topics, dominating the conversations, asking leading questions, or answering their own questions.
 - Showing disinterest in what another family member had to say by ignoring the other's comments or by physical postures that communicate disinterest (e.g., looking or facing away from the child).

• Invalidating Feelings

- o Discounting, misinterpreting, or assigning a value (e.g., good/bad, right/wrong) to the feelings that were being expressed.
- o Family members engaged in mind reading (e.g., say they know what the other is thinking or feeling).

• Guilt Induction

- o Pointing out that another's behavior had a negative emotional impact on a family member, such as making them worry, feel sad or depressed, or lose self-esteem.
- o Family members tried to evoke sympathy from another enumerating all the things they have done for the other. Family members played the role of martyr or continually blamed themselves for the other's problems (e.g., I'm such a bad mother).
- o Family members said that if the other really cared for them, she or he would do or be what the family member expected.

Personal attack

- o Family members attacked the worth or place in the family of the other by reminding the other of his or her responsibilities to the family, saying the other is not a responsible family member.
- o Brought up the other's past mistakes or embarrassing behaviors as evidence of the accused members lack of worth.
- o Blamed another for the other's own or the families problems.
- Spoke in a very condescending or patronizing way or acted as if they were a therapist to the other member.

• Love Withdrawal

- o Family members threatened the withdrawal of their love or attention if the other did not do or become what they expected.
- Family members diverted their gaze, turned away, made a displeased expression or physically left the interaction when the other expressed something contrary to their expectations.

• Erratic Emotional Behavior

Vacillated between caring and attacking expression