The theme of this issue of Joining Forces Joining Families is psychological abuse. Psychological abuse (also sometimes referred to as emotional abuse) is a distinct component of domestic violence. We feature an interview with Daniel O’Leary, PhD, a Distinguished Professor of Psychology and Director of Clinical Training at Stony Brook University. He received the Distinguished Scientist Award from the Clinical Division of the American Psychological Association in 1985, and he was installed in the National Academies of Practice in Psychology in 1986. He has published over 230 articles and eleven books. His current research focuses on the etiology and treatment of partner aggression, and the link between marital discord and depression.

**Dr. McCarroll: How would you explain psychological aggression?**

Dr. O’Leary: Unlike physical aggression that is easily classified into various acts like pushing, slapping, and shoving, psychological aggression can run the gamut from behaviors such as refusing to talk to the person, giving him/her the cold shoulder, constant belittling, and/or controlling their whereabouts — almost keeping them imprisoned. There are many problems with the definition of psychological abuse. It is easier for the legal and mental health professionals to agree on a definition of physical abuse because there is zero tolerance for unwanted physical aggression. Some form of psychological aggression against a partner is committed essentially by everybody at some time. Thus, if one wishes to differentiate between psychological aggression and psychological abuse, it is necessary to agree on what constitutes the boundary from one to the other. We have characterized four types of Psychological Abuse (O’Leary & Maiuro, 2001):

1. Critical comments that damage a partner’s self-esteem;
2. Passive-aggressive withholding of support (the silent treatment);
3. Threats of physical harm;
4. Restriction of freedom.

**In This Issue**

The theme of this issue of Joining Forces Joining Families is psychological abuse. Psychological abuse (also sometimes referred to as emotional abuse) is a distinct component of domestic violence. We feature an interview with Daniel O’Leary, PhD, a Distinguished Professor of Psychology at the State University of New York at Stony Brook. Our literature review of psychological abuse highlights the seriousness of this form of domestic violence and the need for increased prevention efforts. Building Bridges to Research reviews the topic of agreement and how one may measure whether people agree or disagree by applying theoretical data on acts of violence committed by and between partners. Finally, we highlight some websites on psychological abuse as well as other types of domestic violence.

We look forward to providing relevant and timely topics to support your work in 2009.
Dr. McCarroll: Do you differentiate between psychological aggression and psychological abuse?

Dr. O’Leary: In my clinical work, I do not generally try to distinguish between the two because it often is unclear where to draw the line. It is akin to the difference between physical aggression versus battering. You can easily categorize certain psychologically aggressive behaviors as abusive like taking the spark plugs out of a car or restricting money and checkbook access. However, if pressed, I would categorize recurring acts of any of the four types of psychological aggression described above as psychological abuse. Such recurring acts are likely to make a partner lose self-esteem and/or be fearful.

Dr. McCarroll: Does psychological abuse predict physical abuse?

Dr. O’Leary: Not necessarily, but it is the single best predictor, even better than alcohol. There are examples of actions taken to harm another person where there was not a verbal argument immediately preceding it, but these are the rare exceptions. Most acts of physical aggression follow a verbal argument or are in the context of a verbal argument. We know that people can experience a great deal of psychological abuse, even if it never occurs with physical abuse. We also know that it is associated with a great deal of relationship discord. You can predict that physical abuse will later occur if there is a tendency for people to have psychological aggression across time. In other words, it is the extent of psychological aggression that is predictive of whether a physically aggressive act will occur (Murphy & O’Leary, 1989).

Dr. McCarroll: What is the trigger in which psychological aggression escalates to physical abuse?

Dr. O’Leary: One of the triggers is alcohol or any substance that lowers inhibitions. Another trigger is if the argument taps into what is really at your core, your sense of who you are as a person or your firmly held beliefs and values.

Dr. McCarroll: One of the missions of the Army Family Advocacy Program (FAP) is prevention. What should FAP personnel who give domestic violence prevention classes tell people about psychological abuse?

Dr. O’Leary: My first task would be to tell people that psychological aggression is a serious issue. I try to tell mental health audiences the importance of reducing psychological aggression whether it is through relaxation, medication, relationship enhancement, or financial consultation. Anything that will reduce psychological aggression will make physical aggression less probable.

Dr. McCarroll: How do you differentiate between verbal abuse and psychological aggression?

Dr. O’Leary: Individuals who have a difference of opinion and who attempt to resolve their relationship differences can do so without being psychologically aggressive, i.e. calling their partner names, screaming at them or saying things to make the partner feel inferior. To differentiate assertion from verbal aggression, Curley and I developed a measure of spouse specific assertion and spouse specific aggression (O’Leary & Curley, 1986).

Dr. McCarroll: How damaging is psychological abuse?

Dr. O’Leary: There are a few descriptive studies where women who have been physically abused or battered have also reported psycho-

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Adult Psychological Abuse

By James E. McCarroll, PhD

Psychological abuse (also sometimes referred to as emotional abuse) is a distinct component of domestic violence. While adult physical and sexual abuse are widely recognized as domestic violence, psychological abuse has received much less attention. The definition of psychological abuse is difficult, particularly in regard to satisfying both the mental health and legal professions (O’Leary 1999).

Hostility, in many forms, is psychological aggression. It is relatively common, even in happily married couples, particularly in young couples with or without marital discord (O’Leary 1999). But, psychological aggression is not the same as psychological abuse. O’Leary and others have distinguished between aggression and abuse on the basis of the frequency and intensity of negative remarks and threats.

The strict definition of psychological abuse is broad and often not clear. O’Leary (1999) defines it as acts of recurring criticism, verbal aggression, acts of isolation and domination toward an intimate partner. Non-verbal psychological abuse, such as stalking, can also be considered psychological abuse. [Note: See Dr. O’Leary’s interview for more on non-verbal psychological abuse.] Potentially abusive behavior can be grouped under the following four primary dimensions (O’Leary and Maiuro, 2001):

1. Damaging to partner’s self-image or self-esteem through denigration,
2. Passive-aggressive withholding of emotional support and nurturance,
3. Explicit and implicit threatening,
4. Restricting personal territory and freedom.

In couples’ therapy, psychological abuse is often recognized as a difficult issue with which to work. The seriousness of the effects of psychological abuse was shown in an early study by Follingsted, Rutledge, Berg, Hause, & Polek (1990). They studied six types of emotional abuse of 234 women with a history of physical abuse and related these types to the frequency and severity of the physical abuse. The six types were: verbal attacks, social or financial isolation or restriction, jealousy or possessiveness, threats of abuse or harm, threats to end the marital relationship or have an affair, and damage to or destruction of the woman’s property.

Ninety-nine percent of the women had experienced some form of emotional abuse and 72% reported experiencing four or more types. The most frequently reported type of abuse was ridicule, but threats of abuse, jealousy, and restriction all occurred to a large percentage of the women.

Ridicule was reported as having a negative impact by the highest percentage and threats of abuse were the second most negatively impacting type. Seventy-two percent of the women reported that psychological abuse had a more negative impact on them than physical abuse. None of the individual types of psychological abuse was related to the frequency of physical abuse or severity of injuries. However, about half the women (54%) used the emotional abuse incident, particularly threats of abuse and restriction, to predict an occurrence of physical abuse.

The effects of psychological aggression compared to physical aggression were also reported in a community sample of couples (Taft, O’Farrell, Torres, Panuzio, Monson, Murphy, & Murphy, 2006). In this sample, psychological aggression victimization was associated with greater distress, anxiety, and physical health symptoms beyond the effects of physical aggression. Psychological victimization was also uniquely associated with higher levels of depression for women only. Possible distinct etiologies were suggested for male and female perpetrators and highlighted the need for different models of psychological aggression for men and women.

O’Leary and Maiuro (2001) reviewed measures of psychological abuse and measures derived from them. Eight measures that have been used are the Conflict Tactics Scale (Straus, Hamby, Boney-McCoy, & Sugarman, 1990), the Index of Spouse Abuse (Hudson & McIntosh, 1981); Spouse Specific Aggression and Assertion (O’Leary & Curley, 1986), Psychological...
Maltreatment of Women (Tolman, 1989), Index of Psychological Abuse (Sullivan, Parisian & Davidson, 1991), Severity of Violence Against Women (Marshall, 1992), and the Dominance Scale (Hamby, 1996).

Psychological abuse has substantial health effects. Female gastroenterology patients with irritable bowel syndrome, a bowel condition without a known organic basis, reported significantly higher levels of emotional abuse, self-blame and self-silencing than comparison patients who had irritable bowel disease, a bowel condition with a known organic basis (Ali, Toner, Stuckglass, Gallop, Diamant, Gould, & Videns, 2000). Emotional abuse remained associated with irritable bowel syndrome even when physical and sexual abuse histories were controlled. The authors concluded that women who experienced emotional abuse may be more likely to develop response patterns of inhibiting self-expression and taking responsibility for negative events, all of which may lead to increased levels of stress affecting the gastrointestinal system.

Psychological abuse was also associated with an increased risk of smoking in a cohort of white, well-educated, and employed women. Further, when it co-occurred with physical or sexual abuse, the risk was increased (Jun, Rich-Edwards, Boynton-Jarrett, & Wright, 2008). Dominance and isolation predicted increases in depressive symptoms over time in dating women. These effects were moderated by their levels of perception of interpersonal control (Katz & Arias, 1999). Psychological abuse and stalking contributed uniquely to PTSD and depression symptoms after controlling for the effects of physical and sexual violence and injuries (Mechanic, Weaver, & Resick, 2008). In a study of living in a shelter, psychological abuse was a significant predictor of PTSD and intentions to leave the abusive partner even after controlling for the effects of physical abuse (Arias & Pape, 1999). Male-to-female psychological aggression has also been associated with distress in mothers and internalizing and externalizing behavior in children (Clarke, Koenen, Taft, Street, King, & King, 2007).

Importantly, psychological abuse nearly always seems to precede physical abuse and thus prevention of psychological abuse may prevent later physical abuse and injury (O’Leary, 1999).

[Editor’s note: See interview with Dr. O’Leary for more on this point.]

References


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There have been many studies that have addressed whether there are differences in the reports of interpersonal violence (IPV) by partners (e.g., Arias & Beach, 1987; Heyman & Schlee, 1997; O’Leary & Williams, 2006). Having an accurate measure of the nature and extent of couple violence is useful in determining the prevalence of IPV, but could also be helpful clinically. Studies have generally shown a significant, but low correlation between couple reports (Archer, 1999; Jouriles & O’Leary, 1985; Schafer, Caetano, & Clark, 2002; Cunradi, Bersamin, & Ames, 2008). Possible reasons for this are that in self-reports an individual may try to make him/herself or their partner look either good or bad, or individuals may have fears of legal or partner repercussions if they report accurately. Also, self-report instruments lack specificity in the measures or definitions of reported behaviors (Simpson & Christensen, 2005). In general, results are consistent in finding that both men and women will report a lower level of aggression than their partners attribute to them and men tend to underreport their own violence more than do women. The level of agreement tends to be higher on measures that are more specific and objective (Simpson & Christensen, 2005).

The purpose of this article is to present a statistical method for calculating agreement. The degree of agreement may be considered a psychometric property of a measurement instrument, in this case the verbal agreement between partners on acts of violence. Among other psychometric measures discussed in our previous descriptions of statistical concepts are reliability, validity, internal consistency, and inter-rater agreement. Measures of agreement have both reliability and validity properties. There is no gold standard for either of these so we must depend on estimates. In this case, we are estimating how reliable and valid are the reports of two people: whether either or both reporters are reporting consistently (reliability) and giving accurate information (validity). If each member of a couple describes incidents of violence consistently over time, their descriptions may be considered reliable. Their level of agreement also has validity considerations. If they do not agree, why not? Some possible reasons for this are suggested in the first paragraph.

Measuring agreement between observers is a key element of reliability. This can be done in several ways. One way is to calculate the percent agreement. However, percent agreement is not the best method. Some reasons for this are because it does not tell the prevalence of the phenomenon under study, how many disagreements occurred, or whether one rater was more accurate than another (Jekel, Katz, & Elmore, 2001).

Cohen’s Kappa is a statistic that has been used in computing agreement between spouses on the frequency of aggression. However, to easily calculate agreement on aggression (or any other variable of interest) in a clinical environment, a better choice is to use the Kappa Test Ratio (Jekel, Katz, & Elmore, 2001). This test gives the agreement between two reporters above chance level. Its result is a ratio, but that ratio is often given as a percentage. The test is calculated, similar to chi-square, on the difference between the observed (actual) versus the expected (by chance) values. The value of the result of the test can be expressed as a ratio or as a percentage. The ratio can vary from –1 (perfect disagreement) to +1 (perfect agreement). A value of 0 means that the agreement is equal to chance. The ratio can also be expressed as a percentage (numerator divided by denominator). Jekel, Katz, and Elmore (2001) suggest that when the percentage is less than 20%, the amount of agreement is negligible; between 20–40% is low; 40–60% is fair; 60–80% is good; and over 80% is excellent.

Here is an example using fictitious data about agreement between acts of aggression between two partners (Table 1). Consider that you want each member of a couple to count the number of days on which aggression by one partner, the man, for example, occurs. In 80 days, they both agree that aggression occurred on 20 days; they also agree that aggression did not occur on 45 days. The woman thought that aggression occurred on 10 days,
but her partner thought it had not occurred; the man thought that aggression occurred on 5 days, but the woman believed it had not. Like many comparisons in research, these data can be displayed in a 4-fold table. The key to how these numbers are used to calculate the Kappa statistic are given in Table 2 and the paragraphs that follow it.

In order to calculate the Kappa Ratio, you need to calculate an overall expected value. This is based on the amount of positive agreement (cell a) expected by chance and the amount of negative agreement (cell d) expected by chance. In other words, based on chance alone, how many times would you expect them to agree and how many times would you expect them to disagree? This is calculated by multiplying the marginal totals \((a + b)\) and \((c + d)\) together and dividing by the total \((a + b + c + d)\) number of possible days on which they could agree or disagree.

For our fictitious example, the observed agreement equals 65 \((a + d)\). The maximum possible agreement equals 80. The expected value for cell a is \((25)(30) / 80 = 9.375\). The expected value for cell d is \((55)(50) / 80 = 34.375\). The total of the two values is that which would be expected by chance, \(43.75\).

Now we can calculate the Kappa ratio, the difference between the observed and expected values (actual and chance) divided by the total number of possible agreements minus that value which would be expected by chance. The calculation is the following:

\[
\frac{65 - 43.75}{80 - 43.75} = 0.586
\]

This value of 0.586 can be expressed as 58.6%. Thus, according to the standards cited by Jekel, Katz, & Elmore (2001), the agreement is greater than only by chance, but still is only fair.

References

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**Table 1. Number of Agreements (Positive) and Disagreements (Negative) Between Spouses About Conflict**

<table>
<thead>
<tr>
<th>Man’s Counts of His Own Aggression</th>
<th>Woman’s Counts of Man’s Aggression</th>
<th>Positive</th>
<th>Negative</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
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<td>5</td>
<td>25</td>
</tr>
<tr>
<td>Negative</td>
<td>10</td>
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</tr>
<tr>
<td>Total</td>
<td></td>
<td>30</td>
<td>50</td>
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<table>
<thead>
<tr>
<th>Man’s Counts of His Own Aggression</th>
<th>Woman’s Counts of Man’s Aggression</th>
<th>Positive</th>
<th>Negative</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
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<td>c</td>
<td>d</td>
<td>c+d</td>
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<tr>
<td>Total</td>
<td></td>
<td>a+c</td>
<td>b+d</td>
<td>a+b+c+d</td>
</tr>
</tbody>
</table>

**Table 2. Key to the Calculation of the Kappa Statistic**

Cell a is the count of the number of days the man and the woman agree that aggression occurred.

Cell b is the count of the number of days the man said aggression occurred, but the woman disagreed.

Cell c is the count of the number of days the woman said aggression occurred, but the man disagreed.

Cell d is the count of the number of days the man and the woman agree that aggression did not occur.
logical abuse. They reported that the psychological abuse had a more negative effect than the physical abuse (Follingstad, Rutledge, Berg, Hause, & Polek, 1990; Arias & Pape, 2001). Anything that goes to the core of one’s self-esteem, is most likely to be emotionally damaging to the person.

**Dr. McC Carroll: Do you see people in your clinic who come in for help with purely psychological abuse or verbal abuse?**

Dr. O’Leary: We found that if you ask men and women to briefly describe their major marital problems, about 50% of men and 60% of women report communication. Lack of sexuality and personality style problems are reported as the next most frequent problems by both husbands and wives (O’Leary, Vivian, & Malone, 1992). Another form of psychological abuse, which is particularly damaging, is threatening to leave the relationship. When people come into therapy, we say that one of the ground rules is not to tell the other that you are thinking about divorce or you are threatening divorce. It just sets things back and instills more distrust.

**Dr. McC Carroll: How do you measure psychological aggression?**

Dr. O’Leary: We use a variation of the Conflict Tactics Scale (Straus, Hamby, Boney-McCoy, & Sugarman, 1990), a self-report of aggressive behavior, with potential clients for therapy. We ask them to describe any major arguments that have taken place.

In the interview, we try to get a more detailed elaboration of what happened in the most recent incident and to get a sense of what both of them will own up to. Both men and women underreport negative things that they have done, though men tend to underreport more than women, particularly on the more serious aggressive acts.

We have found that if you look at the agreement about psychological aggression or physical aggression it is not substantially different than agreement on positive activities like kiss your partner, engage in outside activities together, laugh together (O’Leary & Williams, 2006).

**Dr. McC Carroll: The literature on psychological abuse seems largely to be about psychological abuse of women. Is there any literature about women as perpetrators?**

Dr. O’Leary: If you look at all the published studies on husband and wife interactions in marital assessments, women actually engage in more negative, more critical behavior than do men whereas men engage in more withdrawing-type behavior (Woodin, 2008). So, it would make some sense that women might score as high or higher on measures of psychological abuse. We know that on measures of psychological aggression like the Straus scale and even on a scale like dominance and jealousy, women in our samples had scores that were essentially not different from those of men.

**Dr. McC Carroll: Is adult psychological abuse recognized in state laws?**

Dr. O’Leary: In New York State it is. It is not uncommon to have orders of protection based on threats. When a person is alleged to have made threats against an individual’s person or their animals, an order of protection can be initiated through the courts without any evidence of physical contact.

**Dr. McC Carroll: Thank you for your time and your insights.**

Dr. O’Leary: You are welcome.

**References**


Websites of Interest

There are relatively few websites specific to the subject of adult psychological abuse or psychological aggression, but some sites have sections on this topic.

Psychological abuse is sometimes referred to as emotional abuse. A website that gives a description of emotional abuse including examples and misconceptions about emotional abuse can be found at http://emotionalheal.org/basics.htm.

The National Coalition Against Domestic Violence Website, www.ncadv.org has a section on psychological abuse of children, adults, and the elderly. It contains definitions, statistics, and other facts about psychological abuse with accompanying references.

Centers for Disease Control and Prevention has a compendium of research tools entitled “Measuring Intimate Partner Violence Victimization and Perpetration.” It includes 12 scales to measure psychological (or emotional) abuse perpetration. Some of the scales measure physical and sexual abuse as well as psychological abuse. Among the scales included are the Abusive Behavior Inventory, the Psychological Maltreatment of Women Inventory, and the Profile of Psychological Abuse. When the scale is not copyrighted (in open literature) all the items are given. When the scale is copyrighted only samples are provided. It can be found at http://cdc.gov/ncipc/dvp/Compendium/IPV%20Compendium.pdf.


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