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THE LONG-TERM EFFECTS OF CHILDHOOD ABUSE:
AN ATTACHMENT THEORY PERSPECTIVE

A Thesis Presented

by

THOMAS H. STYRON

Submitted to the Graduate School of the
University of Massachusetts Amherst in partial fulfillment
of the requirements for the degree of

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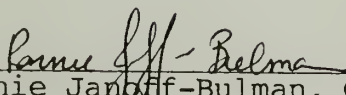
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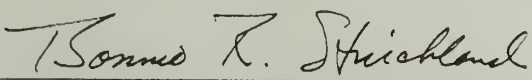
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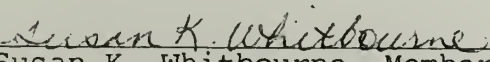
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ABSTRACT

THE LONG-TERM EFFECTS OF CHILDHOOD ABUSE:
AN ATTACHMENT THEORY PERSPECTIVE

FEBRUARY 1995

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The goals of this study were twofold: first, to report the frequency and co-occurrence of different categories of childhood abuse in a large sample of young adults; and second, to examine the impact of childhood abuse in the context of attachment theory, a perspective that appears to be useful for understanding the etiology and consequences of childhood abuse. In addition, we were interested in examining gender differences and exploring subjects' style of conflict resolution in romantic relationships, depression, and parents' use of alcohol as they may be related to childhood abuse and attachment style.

The subjects in this study were 879 college students enrolled in introductory psychology courses. They completed a series of measures related to abuse history, attachment, and other variables. Fully 26.4% of our sample reported a history of some kind of childhood abuse; 21.8% of the total sample reported a history of verbal abuse; 9.8% reported a

history of physical abuse; and 6.5% reported a history of sexual abuse. There was a considerable amount of co-occurrence of different types of abuse. In this sample, childhood abuse was associated with significantly higher levels of insecure attachment in both childhood and adulthood, as well as aggressive forms of conflict resolution, depression and parental alcohol abuse. Parental attachment, particularly to mother, was a predictor of adult attachment style. When controlling for parental attachment, abuse history did not emerge as a significant predictor of adult attachment style; it did, however, predict aggressive conflict resolution behaviors. The implications of these results as well as the limitations of the study are discussed.

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CHAPTER 1

INTRODUCTION

Since the concept of a "battered child syndrome" (Kempe, Silverman, Steele, Droegemueller & Silver, 1962) was introduced more than three decades ago, there has been a great deal of research in the area of childhood abuse. Most investigators agree that various forms of childhood abuse are widespread and victims are placed at serious risk for psychological problems later in life, often in the area of interpersonal relationships. There is far less consensus, however, on the actual frequency of childhood abuse and how to best explain its long-term consequences within a theoretical framework. The goals of this study were twofold: first, to report the frequency and co-occurrence of different categories of childhood abuse in a large sample of college undergraduates; and second, to examine the impact of childhood abuse in the context of attachment theory, a perspective that some researchers claim to be useful for understanding the etiology and consequences of childhood abuse. In addition, we conducted exploratory analyses regarding gender differences, depression, style of conflict resolution in romantic relationships and parents' use of alcohol, as related to abuse and attachment history.

The Frequency of Childhood Abuse

Childhood abuse is generally categorized as sexual, physical and/or emotional in nature (Briere & Runtz, 1988).

Available information on the frequency of each type of abuse varies widely. For example, several investigations into the frequency of sexual abuse (Herman, 1981; Russell 1984; *San Francisco Chronicle*, 1985) reported that as many as one in three women experienced some type of sexual abuse before adulthood. Other studies (Burnam, Stein, Golding, Siegel, Sorenson, Forsythe & Telles, 1988; Segal & Figley, 1988), however, have found the prevalence of childhood sexual abuse to be as low as 3 percent. (These latter studies included both men and women, a factor that partially explains the smaller frequency, as men consistently report lower rates of childhood sexual abuse.)

Likewise, in the areas of childhood physical and emotional abuse, there is a great deal of variation from survey to survey. In a recent review article, Finkelhor and Dziuba-Leatherman (1994) cite three different national surveys of childhood physical abuse, each with a very different finding. One estimated the incidence of physical abuse to be 4.9 per 1,000 children while the others estimated it to be roughly twice and five times that, 10.5 and 23.5, respectively.

While there has been relatively little research conducted in the area of psychological maltreatment or emotional abuse, the data that does exist also suggests a lack of consensus. For example, two national surveys (Finkelhor and Dziuba-Leatherman, 1994) estimated the incidence of psychological maltreatment to be approximately 3

per 1,000 children. In contrast, in a recent survey of university students (Briere & Runtz, 1990), 20% of the sample reported that they were "ridiculed or humiliated" (p. 363) more than 20 times in a given year as children.

Different research methodologies may partially account for the varying results of some of these surveys. One important issue, among others, is how broadly or narrowly a particular type of abuse is defined. In some surveys of childhood physical abuse, for example, respondents have been asked to simply answer "yes" or "no" to the question of whether they had ever experienced childhood physical abuse or neglect. In one survey (Royse, Rompf & Dhooper, 1991) using this method, 7% of the respondents answered the question affirmatively. In other surveys of childhood physical abuse, however, respondents have been asked for much more specific information. Briere and Runtz (1990), for example, asked subjects in their sample to rate how often, in the "worst year," their parents either slapped, hit, beat, punched or kicked them. Five percent or less of their sample had been beaten, punched or kicked more than twice in their worst year. However, 22% had been hit hard and 36% had been slapped. It is unclear whether the respondents and/or the investigators considered the experience of being hit or slapped in some or all of these cases to constitute physical abuse.

Studies of childhood sexual abuse further demonstrate how definitions of a particular type of abuse may vary and

the potential impact of such variations on research findings. One survey of university women (Fromuth, 1986), for example, defined sexual abuse as "a wide range of activities such as exhibitionism, sexual invitations, as well as various forms of physical contact" (p. 7) among children and perpetrators meeting certain age criteria. Using this definition, 22% of the subjects reported at least one experience of childhood sexual abuse. Another survey of university women (Briere & Runtz, 1990) defined sexual abuse somewhat differently, as "sexual contact between the subject and any individual at least five years older which occurred when she was fourteen years of age or younger" (p. 359). This item revealed that 14.7% of all subjects had self-reported sexual abuse histories. Another survey, reported by Burnam and her colleagues (1988), used still another definition. Respondents were asked if anyone ever tried "to pressure or force" them to have sexual contact, which was specifically defined as "touching your sexual parts, your touching their sexual parts, or sexual intercourse" (p.845). In this survey, roughly 5% of the men and women (combined) reported childhood sexual abuse.

Another methodological issue concerns the way data on abuse history are collected. For example, Russell's (1984) finding that one in three women were victims of childhood sexual abuse was based on a study in which each subject was interviewed in-depth. In contrast, Segal and Figley's (1988) finding that 3% of the college students in their sample had

experienced childhood sexual abuse was based on data gathered from a single question on a self-report measure. Herman (1992) argues that in-depth interviews conducted by a sympathetic listener may be crucial to getting the real story. Of Russell and others, she writes, "Feminist investigators labor close to their subjects. They repudiate emotional detachment as a measure of the value of scientific investigation...long and intimate personal interviews have become once again a source of knowledge" (p.30). Such an argument, however, may not be as clear-cut as it sounds. Other surveys (Burnam et al, 1988) that have employed personal interview techniques have still found much lower rates of childhood sexual abuse than Russell's. Some researchers (Gelles, Straus, 1987) argue that the more anonymous the contact between investigator and respondent, the more likely the respondent is to report difficult life events.

Another important issue, sometimes overlooked in surveys of childhood abuse, is the co-occurrence of different types of abuse. Information on the overlap of different types of abuse may be particularly useful for understanding the long-term outcome of childhood abuse, as well as for prevention and treatment. In a study by Ginsburg, Wright, Harrell and Hill (1989), for example, it was found that if a child had been abused or molested even once, he or she had a greatly increased chance of experiencing physical abuse, although not vice versa. Briere and Runtz (1988) found that

both psychological and physical maltreatment were typically present in the same families. In another study (Braver, Bumberry, Green & Rawson, 1992), with a sample of individuals with a history of childhood abuse, 16.7% reported sexual abuse, 23.3% reported physical abuse and 83.3% reported emotional abuse. The total exceeds 100% because 23% reported multiple forms of abuse. According to Browne and Finkelhor (1986), "Disentangling sources of trauma is one of the most imposing challenges for researchers" (p.76).

The Long-term Effects of Childhood Abuse

Research on childhood abuse strongly suggests that such abuse may have negative short and/or long-term consequences for many of its victims. Beitchman, Zucker, Hood, daCosta, Akman and Cassavia (1992), in a review of the research on childhood sexual abuse, concluded that such abuse is associated with a broad constellation of psychological problems. These include increased fear, anxiety, depression and suicidal ideation, sexual dissatisfaction and dysfunction, problems with intimacy and risk for revictimization. Age of onset, family functioning, duration of abuse and amount of force used, among other factors, were found to be important abuse-specific variables.

The majority of research in the area of childhood physical abuse has focused on its short-term effects on victims, which include increased anger and aggression, academic problems and interpersonal difficulties (Briere &

Runtz, 1988). Malinosky-Rummel and Hansen (1993), in a review of the research on the long-term effects of childhood physical abuse, conclude that such abuse may be associated with academic and vocational difficulties; adolescence and adult violence towards others, including partners and children; substance abuse; anxiety and depression; self-injurious and suicidal behaviors. In a retrospective study (McCord, 1983) that traced the lives of more than 250 men who had been classified as either "neglected," "abused," "rejected," or "loved" as children forty years earlier, it was found that half of the abused or neglected boys had been convicted for serious crimes, had become alcoholics or mentally ill, or had died when unusually young.

Much less is known about childhood emotional abuse than sexual or physical abuse. Only a small number of empirical studies (Briere & Runtz, 1988, 1990) have been conducted on the long-term effects of emotional abuse, relating such maltreatment to suicidal ideation and a variety of other psychological symptoms, including low self-esteem. In terms of short-term effects, it is believed that such abuse may be associated with poor self-concept, depression, dependency, scholastic underachievement and aggression (Briere & Runtz, 1988).

Attachment Theory

Bowlby (1977, 1984, 1988) has written extensively on attachment, the propensity of human beings to develop strong affectional bonds to particular individuals. Bowlby (1984) believes attachment to be "a characteristic of human nature throughout our lives -- from the cradle to the grave" (p.13). He contends that the quality of early attachment relationships is rooted in the degree to which a young child can rely on his or her caretaker as a source of security or protection and maintains that the capacity to establish secure affectional bonds with others "sometimes as careseeker and sometimes as a caregiver, is a principal feature of effective personality functioning and mental health" (Bowlby, 1988, p. 121).

An important part of Bowlby's theory is the concept of an internal working model, a mental construction with which the child interprets his or her world that becomes the basis for personality development. Bowlby proposes that children, over time, internalize their experience with their primary caretaker in such a way that early attachment relations form a prototype for other relationships throughout the life span.

Ainsworth, Blehar, Waters and Wall (1978) provided empirical support for many parts of Bowlby's theory. Through their observations of mother-child interactions in an experimental setting known as "the strange situation," Ainsworth and her colleagues delineated three attachment styles: secure, anxious/avoidant, and anxious/ambivalent. The

latter two are often referred to as forms of "insecure" or "anxious" attachment. Approximately 65% of the U.S. middle class children in their study were found to be securely attached, 23% were classified as avoidant and 12% ambivalent.

Bowlby's theory that attachment style between an infant and his or her caretaker is likely to be stable over time and influence future relationships has also been tested, although not extensively. Ainsworth and her colleagues (1978) found attachment style to be relatively stable from infancy through pre-school. Main and Cassidy (1988), in the longest longitudinal study to date, found similar results in research with children up to 6 years of age. Other research (Feeney & Noller, 1990) has examined attachment in adulthood retrospectively and inferred its continuity from childhood by demonstrating its association with parenting behavior and other patterns and symptoms theoretically consistent with an attachment perspective.

Hazan and Shaver (1987) were among the first to conceptualize adult romantic attachment in a way that parallels the typology developed by Ainsworth. In their studies with university students, they found that securely attached, avoidant or ambivalent adults differed predictably in the way they experienced romantic love. Securely attached adults described their most important love experience as especially happy, friendly and trusting. They emphasized being able to accept and support their partner despite their partner's faults, and their relationships tended to endure

the longest. Avoidant adults were characterized by fear of intimacy, emotional highs and lows and jealousy. Ambivalent adults experienced love as involving obsession, desire for reciprocation and union, and extreme sexual attraction and jealousy. Hazan and Shaver also reported that the relative prevalence of the three attachment styles was roughly the same in adulthood as in infancy and that attachment style was related to relationship experiences with parents in childhood.

Bartholomew and Horowitz (1991) recently expanded on Hazan and Shaver's research and proposed a four-group model for understanding attachment style in adulthood. Bartholomew and Horowitz developed their prototypes -- secure, preoccupied, dismissing and fearful -- using combinations of a person's self-image (positive or negative) and image of others (positive or negative), a conceptualization which is consistent with Bowlby's theory of an internal working model related to both self and others. In their studies, secure adults, those who had a positive view of self and others, were comfortable with intimacy and autonomy and were similar to Hazan and Shaver's secure group. Preoccupied individuals, those who had a negative view of self and a positive view of others, were characterized by an anxious preoccupation with relationships and were similar to Hazan and Shaver's ambivalent group. Dismissing individuals, those who had a positive view of self and a negative view of others, tended to avoid close relationships and maintained a sense of

independence and invulnerability. Finally, fearful adults, those who had a negative view of self and others, expressed fear of intimacy and isolated themselves socially.

A number of investigators (Aber & Allen, 1987; Alexander, 1992; Bowlby, 1984; Carlson, Cicchetti, Barnett & Braunwald, 1989; Cicchetti, 1989; Egeland & Sroufe, 1981; Lyons-Ruth, Connell, Zoll & Stahl, 1987) have proposed that attachment theory is useful for understanding risk factors for and long-term consequences of childhood abuse. They argue that attachment theory provides a unique developmental perspective that places maltreatment in a family context and also allows for a consideration of other conditions or events that influence a person's development and behavior at different points in the life span. According to Crittenden and Ainsworth (1989) attachment theory "permits an integration of much of the existing knowledge about maltreatment around a single, although not simple concept" (p.434).

Attachment theorists believe that attachment style -- specifically, insecure attachment -- and childhood abuse are closely linked. Based on studies (Ainsworth et al., 1978) demonstrating that insensitive, unresponsive and/or rejecting parenting is associated with insecure attachment between an infant and his or her parents, it follows that individuals in abusive families would be at high risk for insecure attachment to one another. Research has supported this argument.

Egeland and Sroufe (1981) compared the attachment styles of 31 abused infants with children receiving "excellent care" and found that the abused infants were twice as likely to be insecurely attached. Aber and Allen (1987) found a similar pattern among preschool and early school-age children and concluded that, "during early childhood, maltreatment disrupts a dynamic balance between the motivation to establish safe, secure relationships with adults and the motivation to venture out to explore the world in a competency-promoting fashion" (p.406).

According to Sroufe (1988), children classified as insecurely attached are at much greater risk than their secure counterparts for developmental difficulties. Among preschoolers, secure attachment predicts competence and popularity with peers, ego resiliency, resourcefulness and empathy. Avoidant attachment, on the other hand has been associated with emotional insulation, lack of empathy and hostile or anti-social behavior. Ambivalent attachment has been associated with neediness, tenseness, impulsivity, passivity and helplessness. Troy and Sroufe (1986) also found that insecurely attached preschoolers were more likely to victimize or be victimized by their peers. A secure attachment history, on the other hand, was associated with non-victimization.

Some investigators (Lyons-Ruth et al., 1987; Carlson et al., 1989) have found that maltreated infants are difficult to classify into traditional categories of attachment style

(i.e., secure, avoidant or ambivalent) and have used another category of attachment style known as disorganized/disoriented or Type D, first developed and investigated by Main and Weston (1981). Carlson and her colleagues (1989) found that 82% of neglected, emotionally or physically abused infants in their sample could be classified as disorganized/disoriented and were characterized by incomplete or undirected movements; stilling, slow movements, freezing and depressed affect; and direct indices of apprehension toward their caretaker.

Related research on childhood maltreatment and family functioning also supports the attachment theory argument that there is often a link between insecure attachment and abuse history. Beitchman and his colleagues (1992) report that individuals with a history of childhood sexual abuse are more likely than non-abused controls to originate from single-parent families or families with a high-level of marital conflict. In addition, these families are generally characterized by psychopathology in the form of depression, substance abuse, and violence among parents and siblings. It has also been found that in those families where there were supportive relationships and/or maternal warmth, victims experienced fewer psychological problems.

Another large body of research suggests that children who are not nurtured by their caretaker(s) may be more likely to develop similar relationships with their own children or partners in adulthood. Egeland, Jacobitz and Sroufe (1988)

compared parents who were maltreated as children to those without a history of abuse and found that a substantial majority of them were observed to maltreat or provide borderline care for their own children. In contrast, they note, "all but one of the mothers with a history of supportive and loving parental care provided adequate care for her child" (p.1080).

Of related interest are studies suggesting that variables in the family-of-origin are as important, if not more so, than those related to the abuse itself. Harter, Alexander and Neimeyer (1988), looking at effects of incestuous childhood abuse in college women, found that family characteristics were more predictive of social maladjustment than abuse per se. In another study (Fromuth, 1986), examining the relationship of childhood sexual abuse with later psychological adjustment in a large sample of college women, a history of abuse was significantly associated with measures of psychological and sexual maladjustment; however, once parental supportiveness was controlled for, very few significant relationships emerged.

The Present Study

The purpose of this study, in addition to reporting the frequency and co-occurrence of different types of childhood abuse in a large sample of university undergraduates, was to explore the relationship between childhood abuse and attachment both in childhood and adulthood. Specifically, we

wanted to test the hypothesis that individuals who have experienced childhood abuse would be more likely to be insecurely attached than their non-abused counterparts. We also wanted to look at differences on attachment measures between those reporting very traumatic abuse and those without a history of abuse. In addition, we wanted to test the hypothesis that both early attachment to mother and abuse history would be significant predictors of adult attachment style but that attachment to mother would be the stronger of the two.

Finally, we were interested in examining any gender differences and conducting exploratory analyses on data collected on subjects' style of conflict resolution in romantic relationships, depression, and parents' use of alcohol as they may be related to childhood abuse and attachment style. In terms of conflict resolution, we wanted to explore the possibility that individuals with an abuse history and/or insecure attachment would be more likely to respond to conflict in ways that for the most part would be considered non- or counter-productive and/or violent. In terms of depression, we wanted to explore the possibility that subjects with a history of childhood abuse would be more likely to report a higher level of depression. In terms of parents' use of alcohol, we wanted to explore the possibility that those individuals who came from households where there was alcohol abuse would be more likely to have experienced childhood abuse and to be insecurely attached.

CHAPTER 2

METHOD

Subjects

Respondents were 879 undergraduates enrolled in one or more introductory psychology courses at the University of Massachusetts. Sixty percent of the sample (N = 530) were female and 40% of the sample (N = 349) were male.

Procedure

The data analyzed for this study were drawn from the University of Massachusetts Psychology Department's semi-annual prescreening protocol ("the prescreen"). The prescreen consists of a wide variety of self-report measures, which often vary from semester to semester depending upon the research interests of the Psychology Department's faculty and graduate students. All undergraduate psychology majors are asked to participate in the prescreen in their introductory courses. Participants attend one of a number of meetings that are scheduled at the beginning of each semester, at which time the purpose of the prescreen is explained and a series of paper-and-pencil questionnaires are completed. Students receive academic credit for their participation and are informed that they may decline to respond to any questions without penalty.

Measures

The questionnaires for this study, included in their entirety in the Appendix, were self-report measures that focused upon the following areas: childhood abuse history, childhood attachment style to mother and father, adult attachment style for self and partner, conflict resolution style for self and partner, depression, and parents' use of alcohol.

Childhood Abuse

The frequency and co-occurrence of childhood abuse and the degree to which it was experienced as traumatic was determined by a questionnaire that asked about each respondent's trauma history. The questionnaire was divided into two parts, each of which contained 18 questions. The first part asked the respondent to indicate whether he/she had experienced one or more traumatic events by indicating "yes" or "no." The three items related to childhood abuse upon which this study was focused appeared on the questionnaire as follows: "verbal abuse as a child," "non-sexual physical abuse as a child," "incest or sexual abuse as a child." The second part of the questionnaire asked the respondent to indicate how traumatic each type of event was for them, using a ten-point scale which ranged from 0 ("not at all traumatic") to 9 ("extremely traumatic"). Subjects who indicated that they had experienced one or more of the three types of childhood abuse made up the "Abuse" group. Subjects who indicated that the level of trauma they

experienced was 5 or greater for any of these three abuses made up the "Very Traumatic('VT')"-Abuse group. Subjects who indicated that they had not experienced any of these three types of childhood abuse made up the "No-Abuse" group.

Attachment

Four attachment relationships were measured: subjects' childhood attachment style with their mother ("attachment to mother"), with their father ("attachment to father"), subjects' attachment style in adult romantic relationships ("adult attachment") and the attachment style of subjects' current romantic partner ("partner attachment"). Hazan & Shaver's (1987) attachment prototype scale, derived from the work of attachment theorists such as Bowlby (1977) and Ainsworth (1978), was used to measure childhood attachment style. Respondents were asked to choose one of three prototypes that best described their relationship to their mother and to their father while growing up (e.g., "He was fairly cold and distant, and sometimes rejecting..."). These prototypes correspond to the three categories of attachment style between infants and their mothers -- secure, avoidant, and anxious/ambivalent -- which Ainsworth and others have recorded in North America and other continents.

Bartholomew & Horowitz's (1991) attachment prototype scale was used to measure adult attachment style. Respondents were asked to choose one of four prototypes that best described their way of relating in romantic relationships and, provided they were in a relationship at

the time, also their partner's way of relating to them (e.g. "It is easy for my partner to become emotionally close to others..."). Bartholomew and Horowitz's model represents an expansion of Hazan and Shaver and other attachment theorists' work. Bartholomew and Horowitz developed their prototypes -- secure, preoccupied, dismissing and fearful -- using combinations of a person's self-image (positive or negative) and image of others (positive or negative), a conceptualization which is consistent with Bowlby's theory of an internal working model related to both self and others.

After choosing the prototype that best represented a given attachment relationship, respondents were asked to rate all of the prototypes presented (including the one's they did not choose as most representative) with respect to how well it described the relationship in question; a nine-point scale was used, ranging from 0 ("not at all descriptive") to 8 ("strongly descriptive"). The information from this part of the questionnaire allowed for a more complete assessment of each attachment relationship by providing a quantitative measure of both the prototype chosen as most representative of a given attachment relationship, as well as those that might also, to a lesser degree, be representative of the same relationship. An overall mean for each attachment style could then be determined and compared across relationships and groups.

For the purposes of this study, the attachment prototypes classified as other than secure were combined into

a single category called "insecure." In other words, those individuals who indicated that their childhood attachment style with their mother was most similar to the "avoidant" or "anxious/ambivalent" categories were grouped into a single insecure category. The same was done for the measure of childhood attachment style with one's father and also for the measures of the respondent's and partner's adult attachment style. In terms of the latter, it was Bartholomew and Horowitz' "preoccupied," "dismissing," and "fearful" categories that were combined into the single insecure category. It was felt that having one insecure category, as opposed to many separate ones, would allow us to investigate the relationship between childhood abuse and attachment most broadly and with greatest clarity.

To further facilitate some of our statistical analyses, a measure of overall attachment ("Gen-Secure") was also developed. This category is a single quantitative measure of attachment derived by subtracting the overall mean of insecure attachment from the mean of secure attachment for each of the four attachment relationships examined.

Conflict Resolution

Another questionnaire that was completed during the prescreen investigated the subjects' and their partners' way of responding to each other when in conflict. The questionnaire consisted of 15 items that described various ways of behaving during a dispute. Subjects were asked to rate each of the 15 items once for self and once for their

partner, using a five-point scale which ranged from 0 ("never") to 4 ("eleven or more times"). The first three items referred to ways of resolving a conflict that would be considered most constructive (e.g., "Discussed the issue calmly") and were subsequently grouped for purposes of analyses under a single category called "Resolve." The next five items referred to ways of responding to a conflict that might be considered more emotionally volatile or provocative (e.g., "Insulted or swore at my partner") and were grouped under a single category called "Insult." The final seven items referred to ways of responding to a conflict that involved some level of physical violence (e.g., "Slapped my partner") and were grouped under a single category called "Hit." The first of these items ("Threatened to hit my partner") was removed from analyses because it was felt that a threat of violence was not the same as an actual violent response, as represented by the other six items.

Depression

The Beck Depression Inventory (BDI) was also included on the prescreen. The BDI is a 21-item inventory of self-reported depression during the past week. Scores range from 0 to 63, with higher scores reflecting greater depression. The BDI is one of the most extensively used instruments in depression research.

Parental Alcohol Use

Also included on the prescreen was a questionnaire ("CAST") designed to investigate the level of alcohol use in

each subject's family-of-origin and its potential impact on the respondent's feelings and behavior. Subjects were asked to answer "yes" or "no" to a series of 30 questions such as, "Have you ever thought that one of your parents had a drinking problem?" and "Have you ever lost sleep because of a parent's drinking?"

CHAPTER 3

RESULTS

Frequency and Co-Occurrence of Childhood Abuse

The frequency and co-occurrence of different types of childhood abuse are presented in Tables 1 through 3 on page 34. Fully 26.4% of the total sample reported some kind of childhood abuse. 21.8% of the total sample reported a history of verbal abuse; 9.8% reported a history of physical abuse; and 6.5% reported a history of sexual abuse. There was a considerable amount of overlap across different types of abuse, which explains why the above figures amount to more than 26.4% of the total sample that reported some kind of childhood abuse. The number of individuals reporting exclusively one type of abuse was far smaller than when co-occurrence of various types of abuse was considered. For example, only 2.4% of the sample reported a history of sexual abuse without a history of physical and/or emotional abuse as well. The number of subjects who reported physical abuse only was just 1.5% of the total sample.

As a result of the substantial amount of co-occurrence of different types of abuse and the low frequency of only physical and only sexual abuse, we decided that the 26.4% of the sample that reported verbal, physical and/or sexual abuse would constitute the "Abuse" group. It is important to note that we did run several of our initial analyses examining the relationship between attachment and abuse history excluding individuals who reported sexual abuse; this was done not only

because of the relatively low frequency of sexual abuse, but also because of the possibility that sexual abuse may be more likely than verbal or physical abuse to have been perpetrated by someone other than an attachment figure. As our results were almost exactly the same either way, we decided to include sexual abuse in our final analyses.

Group Differences on Measures of Attachment

Prototype Measures of Attachment

Cross tabulations, as presented in Tables 4 through 7 on page 35, were conducted in order to examine differences in frequency of secure and insecure attachment as reported on the prototype measures of attachment. The four attachment relationships examined were the respondents' relationship with their mother ("attachment to mother"), their father ("attachment to father"), their partner ("adult attachment") and their partner's relationship to them ("partner attachment").

A majority of both groups reported that both their own and their current partner's adult attachment style was insecure. As presented in Table 4, a larger proportion of the Abuse group was classified as insecure than the No-Abuse group, or roughly 63% versus 55%, respectively ($X(2)=4.54, p < .05$).

There were large differences between the Abuse group and No-Abuse group in terms of style of attachment to mother and to father, as presented in Tables 6 and 7. More than half of

the Abuse group indicated an attachment style to mother that was insecure, as compared to less than one-fifth of the No-Abuse group. Likewise, nearly 70% of the Abuse group was classified as insecurely attached to father versus approximately 40% of the No-Abuse group. Chi-square analyses of these data confirmed that there was a statistically significant difference between abuse history, or lack thereof, and attachment to mother ($X(2)=81.05$, $p < .001$) and to father ($X(2)=52.86$, $p < .001$).

Cross tabulations and chi-square analyses were replicated for a subsample of the abuse group, those who reported very traumatic (VT) abuse, and the findings were essentially the same (see Tables 8 through 11 on page 36).

Scale Measures of Attachment

A series of 2 X 2 (Abuse and Gender) analyses of variance (ANOVA), as presented in Table 12 on page 37, were used to test for significant differences on mean scores for secure, insecure and overall ("Gen-Secure") attachment across the four attachment relationships. The analyses revealed significant differences between groups on all attachment measures and for all four attachment relationships, a majority at the $p < .01$ level or greater. The largest differences were with regard to overall (Gen-Secure) attachment to mother ($F(1,765)=94.58$, $p < .001$) and to father ($F(1,760)=77.20$, $p < .001$), with the abused respondents reporting less secure attachments. There were no significant gender differences.

The means for the VT-Abuse group as presented in Table 13 on page 37, were similar to those of group reporting any abuse. Differences between the means of the VT-Abuse group and No-Abuse group were all statistically significant (with the exception of secure attachment for partner), the majority at the $p < .001$ level or greater. Again, the largest differences were with regard to overall attachment to mother ($F(1,639)=86.35, p < .001$) and to father ($F(1,634)=40.62, p < .001$), with the abused respondents reporting less secure relationships.

Attachment to Parents and Abuse History as Predictors of Adult Attachment Style

Hierarchical regression analyses were conducted to test the hypothesis that both attachment to mother and abuse history would be significant predictors of adult attachment style; we expected that attachment to mother would be the stronger predictor of the two. The analyses were conducted using each of the three adult attachment style categories -- Secure, Insecure and Gen-Secure -- as dependent variables. The predictor variables were attachment style with mother (M Gen-Secure), attachment style with father (D Gen-Secure), and abuse history (Abuse). The results of the analyses are summarized in Tables 14, 15, and 16, beginning on page 38.

In terms of secure attachment, , the results (presented in Table 14) indicate that abuse, while significant when entered first, does not account for any additional variance

beyond that accounted for by attachment to mother and father. Mother and father overall attachment, when entered at the same step (M & D Gen-Secure), accounted for approximately 2.6% of the variance, a result significant at the $p < .001$ level. When attachment to mother and to father were entered separately, attachment to mother proved to be the only significant predictor of secure attachment and remained significant even when entered after abuse history. When attachment to mother was entered first, it accounted for approximately 2.3% of the total variance, a result significant at the $p < .001$ level. When attachment to father was entered second, it failed to account for a significant amount of additional variance. When the steps were reversed and attachment to father was entered first and mother second, attachment to mother significantly accounted for an additional 1.6% of the variance.

In terms of insecure attachment, the results (presented in Table 15) again indicate that abuse adds nothing significant to the variance accounted for by attachment to mother and father, although it is significant when entered first. Mother and father overall attachment (M & D Gen-Secure), when entered together in the first step, accounted for 7.9% of the variance, a result significant at the $p < .001$ level. Both attachment to mother and to father proved to be significant predictors of insecure attachment, with attachment to mother as the stronger of the two; this was the case even when entered after abuse history. When attachment

to mother was entered first, it accounted for 6.1% of the total variance, a result significant at the $p < .001$ level. When attachment to father was entered second, it accounted for an additional 1.7% of the variance, a result significant at the $p < .001$ level. When the steps were reversed and attachment to father was entered first, it accounted for 4.2% of the variance with attachment to mother significantly accounting for an additional 3.7% of the variance.

In terms of overall attachment (Gen-Secure), the results (presented in Table 16) again indicate that abuse does not add anything significant to the variance accounted for by attachment to mother and to father, although it is significant when entered first. Mother and father overall security (M & D Gen-Secure), when entered together in the first step, accounted for 8% of the variance, a result significant at the $p < .001$ level. Both attachment to mother and to father proved to be significant predictors of Gen-Secure attachment, with attachment to mother as the stronger of the two; again, they were significant predictors even when entered after abuse history. When attachment to mother was entered first, it accounted for 6.5% of the total variance, a result significant at the $p < .001$ level. When attachment to father was entered second, it accounted for an additional 1.5% of the variance, a result significant at the $p < .001$ level. When the steps were reversed and attachment to father was entered first, it accounted for 3.9% of the variance with

attachment to mother significantly accounting for an additional 4% of the variance.

Very traumatic abuse (as oppose to any abuse) was not used as a separate predictor variable in these regression analyses because all other findings with regard to attachment measures for the VT-Abuse and Abuse groups were essentially the same.

Group Differences on Measures of Conflict Resolution

There were a number of statistically significant differences between the Abuse and No-Abuse groups in terms of how often members of each reported having responded in a particular way to their romantic partner, and vice versa, when in conflict. There were also significant differences between men and women. As presented in Table 17 on page 41, members of the Abuse group indicated that they responded more often than the No-Abuse group in ways that were combined into the Insult ($F(1,743)=10.97, p < .001$) and Hit ($F(1,743)=10.71, p < .001$) categories; the Abuse group members insulted their partners and engaged in physical violence more often than the No-Abuse group. The difference between the Abuse group and No-Abuse group in terms of how often their members responded in ways that were combined into the Resolve category was not statistically significant. Our results also indicated that women were more likely than men to respond towards their partner in ways categorized as

Insult ($F(1,743)=105.19, p < .001$) and Hit ($F(1,743)=12.14, p < .001$).

In terms of the group ratings of romantic partners' ways of responding when in conflict, the differences between the Abuse group and No-Abuse group were also statistically significant in terms of the Hit and Insult categories, but not the Resolve category.

The means of the VT-Abuse group for each attachment category and relationship, as presented in Table 18, were similar to those of the Abuse group and the differences between these and the No-Abuse group were also statistically significant for the Insult and Hit categories for both self and partner, with the VT-Abuse group members reporting greater use. In addition, the difference between the VT-Abuse and No-abuse groups on means for the Resolve category was found to be statistically significant ($F(1,613)=4.03, p < .05$), with the VT-Abuse group indicating that they used the "healthy" means of resolving conflict more frequently than the No-Abuse group.

Attachment to Parents and Abuse History as Predictors of Violence-Oriented Conflict Resolution

We were interested in exploring the possibility that attachment to parents and/or abuse history would be significant predictors of the variable called "Hit," which is the measure of violence-oriented responses to conflict in romantic relationships.

According to our results, as presented in Table 19 on page 42, the only significant predictor of the subjects' use of violence-oriented responses to their partner was abuse history. When Abuse was entered first, it accounted for 2.7% of the total variance, a result significant at the $p < .001$ level. When mother and/or father overall security was entered second, these variables failed to account for a significant amount of additional variance.

Group Differences on Measure of Depression

Two-way ANOVAs revealed significant differences between the Abuse and the No-Abuse groups on data obtained from the Beck Depression Inventory. The mean of the Abuse group was 10.04 compared to the No-Abuse group mean of 7.64, $F(1,734)=17.95$, $p < .001$. The mean of the VT-Abuse group was slightly higher, 10.74, and also significantly different from that of the No-Abuse group ($F(1,646)=17.12$, $p < .001$). There were no significant gender differences.

Attachment to Parents and Abuse History as Predictors of Depression in Adulthood

We were interested in exploring the possibility that attachment to parents and/or abuse history would be significant predictors of depression in adulthood. According to our results, as presented in Table 20 on page 43, abuse does not account for any additional variance beyond that accounted for by attachment to mother and father. When

entered at the same step, mother and father overall security (M & D Gen-Secure) accounted for approximately 7.7% of the variance, a result significant at the $p < .001$ level.

Although significant when entered first, when Abuse was entered second, following M & D Gen-Secure, it failed to account for a significant amount of additional variance.

Both attachment to mother and to father proved to be significant predictors of depression, even when entered after Abuse, with attachment to mother as the stronger of the two.

When attachment to mother was entered first, it accounted for approximately 5.8% of the total variance, a result significant at the $p < .001$ level. When attachment to father

was entered second, it accounted for an additional 1.9% of the variance, a result significant at the $p < .001$ level.

When the steps were reversed and attachment to father was entered first, it accounted for 4.4% of the variance with attachment to mother adding an additional 3.3% of the variance.

Group Differences on Measure of Parental Alcohol Use

Two-way ANOVAs revealed significant differences between the Abuse and No-Abuse groups on data obtained from the questionnaire focusing on parental alcohol use. The mean of the Abuse group was 7.05 compared to the No-Abuse group mean of 2.48, $F(1,734)=74.87$, $p < .001$. The mean of the VT-Abuse group was slightly higher, 7.82, and also significantly

different from that of the No-Abuse group ($F(1,646)=67.06$, $p < .001$). There were no significant gender differences.

Parental Alcohol Use as a Predictor of Adult Attachment

We were interested in exploring the possibility that parental alcohol use, as measured by the test called "CAST," would be a significant predictor of adult attachment style. According to our results, as presented in Table 21 on page 44, parental alcohol use was a significant predictor of adult overall attachment at the $p < .001$ level, but the amount of variance it accounted for was relatively small, 0.62%. When CAST was entered as a second step, following M & D Gen-Secure or Abuse, it failed to account for a significant amount of additional variance. This pattern of findings was the same regardless of whether the criterion variable used was Secure, Insecure or Gen-Secure attachment.

TABLE 1
 Frequencies: Abuse/No Abuse
 (N=879)

Type of Abuse	N	% of sample
Abuse (Verbal, Physical or Sexual) Total	232	26.4
No Abuse Total	647	73.6
Grand Total	879	100

TABLE 2
 Occurrence and Co-Occurrence of Emotional,
 Physical or Sexual Abuse
 (N=879)

Type of Abuse	N	% of total sample
Verbal only	111	12.6
Physical only	13	1.5
Sexual only	21	2.4
Verbal and Physical only	51	5.8
Verbal and Sexual only	14	1.6
Physical and Sexual only	6	0.7
Verbal and Physical and Sexual	16	1.8

TABLE 3
 Occurrence of Any Abuse by Type
 (N=879)

Type of Abuse	N	% of total sample
Any Verbal	192	21.8
Any Physical	86	9.8
Any Sexual	57	6.5

TABLE 4
Abuse and No-Abuse Groups by Adult Attachment

	Secure	Insecure
Abuse (N=232)	86(37.1%)	146(62.9%)
No-Abuse (N=640)	289(45.2%)	351(54.8%)

TABLE 5
Abuse and No-Abuse Groups by Partner Attachment

	Secure	Insecure
Abuse (N=125)	41(32.8%)	84(67.2%)
No-Abuse (N=318)	141(44.3%)	177(55.7%)

TABLE 6
Abuse and No-Abuse Groups by Attachment to Mother

	Secure	Insecure
Abuse (N=206)	100(48.3%)	106(51.7%)
No-Abuse (N=573)	464(81.0%)	99(19%)

TABLE 7
Abuse and No-Abuse Groups by Attachment to Father

	Secure	Insecure
Abuse (N=202)	62(30.7%)	140(69.3%)
No-Abuse (N=564)	341(60.5%)	223(39.5%)

TABLE 8
VT-Abuse and No-Abuse Groups by Adult Attachment

	Secure	Insecure
VT Abuse (N=88)	30(34.1%)	58(65.9%)
No-Abuse (N=640)	289(45.2%)	351(54.8%)

TABLE 9
VT-Abuse and No-Abuse Groups by Partner Attachment

	Secure	Insecure
VT Abuse (N=48)	16(33.3%)	32(66.7%)
No-Abuse (N=318)	141(44.3%)	177(55.7%)

TABLE 10
VT-Abuse and No-Abuse Groups by Attachment to Mother

	Secure	Insecure
VT Abuse (N=78)	29(37.2%)	49(62.8%)
No-Abuse (N=573)	464(81.0%)	109(19.0%)

TABLE 11
VT-Abuse and No-Abuse Groups by Attachment to Father

	Secure	Insecure
VT Abuse	23(30.7%)	52(69.3)
No-Abuse	341(60.5%)	220(39.5)

TABLE 12
Attachment Prototype Means for Abuse and No-Abuse Groups

Attachment Prototype	Abused	Non-Abused	F	df
For Self:				
Secure	4.31	4.80	6.50*	1,836
Insecure	3.66	3.33	7.54**	1,859
Gen. Secure	0.68	1.47	9.12**	1,859
For Partner:				
Secure	4.01	4.66	5.24*	1,419
Insecure	3.54	3.13	5.95*	1,419
Gen. Secure	0.47	1.53	7.89**	1,419
For Mother:				
Secure	4.70	6.32	76.29***	1,757
Insecure	2.88	1.42	79.94***	1,765
Gen. Secure	1.81	4.90	94.58***	1,765
For Father:				
Secure	3.45	5.24	61.38***	1,673
Insecure	3.43	2.14	58.05***	1,760
Gen. Secure	0.09	3.14	77.20***	1,760

* $p < .05$ ** $p < .01$ *** $p < .001$

TABLE 13
Attachment Prototype Means for VT-Abuse and No-Abuse Groups

Attachment Prototype	VT Abused	Non-Abused	F	df
For Self:				
Secure	4.19	4.80	5.92**	1,733
Insecure	3.93	3.33	10.42***	1,719
Gen. Secure	0.17	1.47	10.90***	1,719
For Partner:				
Secure	4.03	4.66	n.s.	n.s.
Insecure	3.64	3.13	4.76*	1,364
Gen. Secure	0.40	1.53	5.66*	1,364
For Mother:				
Secure	4.47	6.32	67.03***	1,665
Insecure	3.57	1.42	77.69***	1,639
Gen. Secure	0.62	4.90	86.35***	1,639
For Father:				
Secure	3.44	5.24	40.16***	1,590
Insecure	3.57	2.14	31.77***	1,634
Gen. Secure	-0.14	3.14	40.62***	1,634

* $p < .05$ ** $p < .01$ *** $p < .001$

TABLE 14
 Hierarchical Regression Analysis:
 Secure as Dependent Variable

Dependent Variable: Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M & D Gen. Secure	.02561	.0001	.02561	.0001
2. Abuse	.00498	n.s.	.03060	.0003
Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.01667	.0054	.01667	.0054
2. M & D Gen. Secure	.01393	.0047	.03060	.0003
Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M Gen. Secure	.02315	.0000	.02315	.0000
2. D Gen. Secure	.00246	n.s.	.02561	.0001
3. Abuse	.00498	n.s.	.03060	.0003
Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.01667	.0054	.01677	.0054
2. M Gen. Secure	.01272	.0017	.02929	.0002
3. D Gen. Secure	.00120	n.s.	.03060	.0000
Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. D Gen. Secure	.00931	.0079	.00931	.0079
2. M Gen. Secure	.01631	.0004	.02561	.0001
3. Abuse	.00498	n.s.	.03060	.0003
Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.01667	.0054	.01667	.0054
2. D Gen. Secure	.00375	n.s.	.02402	.0037
3. M Gen. Secure	.01018	.0051	.03060	.0003

TABLE 15
 Hierarchical Regression Analysis:
 Insecure as Dependent Variable

Dependent Variable: Insecure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M & D Gen. Secure	.07864	.0000	.07864	.0000
2. Abuse	.00148	n.s.	.0813	.0000
Insecure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.01886	.0024	.01886	.0024
2. M & D Gen. Secure	.06127	.0000	.08013	.0000
Insecure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M Gen. Secure	.06126	.0000	.06126	.0000
2. D Gen. Secure	.01738	.0002	.07864	.0000
3. Abuse	.00148	n.s.	.08013	.0000
Insecure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.01886	.0024	.01886	.0024
2. M Gen. Secure	.04532	.0000	.06418	.0000
3. D. Gen. Secure	.01595	.0003	.08013	.0000
Insecure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. D Gen. Secure	.04210	.0000	.04210	.0000
2. M Gen. Secure	.03655	.0000	.07864	.0000
3. Abuse	.00148	n.s.	.08013	.0000
Insecure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.01886	.0024	.01886	.0024
2. D Gen. Secure	.03046	.0000	.04932	.0000
3. M Gen. Secure	.03080	.0000	.08013	.0000

TABLE 16
 Hierarchical Regression Analysis:
 Gen-Secure as Dependent Variable

Dependent Variable: Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M & D Gen. Secure	.07963	.0000	.07963	.0000
2. Abuse	.00302	n.s.	.08265	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02580	.0002	.02580	.0002
2. M & D Gen. Secure	.05685	.0000	.08265	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M Gen. Secure	.06483	.0000	.06483	.0000
2. D Gen. Secure	.01479	.0005	.07963	.0000
3. Abuse	.00302	n.s.	.08265	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02580	.0002	.02580	.0002
2. M Gen. Secure	.04457	.0000	.07037	.0000
3. D Gen. Secure	.01228	.0016	.08265	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. D Gen. Secure	.03917	.0000	.03917	.0000
2. M Gen. Secure	.04046	.0000	.07963	.0000
3. Abuse	.0032	n.s.	.08265	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02580	.0002	.02580	.0002
2. D Gen. Secure	.02532	.0000	.05112	.0000
3. M Gen. Secure	.03153	.0000	.08265	.0000

TABLE 17
Conflict Resolution Means for Abuse and No-Abuse Groups

Resolution Prototype	Abused	Non-Abused	F	df
For Self:				
Resolve	5.51	5.34	ns	
Insult	7.62	6.38	10.97***	1,743
Hit	2.25	1.43	10.71***	1,743
For Partner:				
Resolve	6.13	5.85	ns	
Insult	7.25	5.70	15.19***	1,738
Hit	2.60	1.53	11.50***	1,738

* $p < .05$ ** $p < .01$ *** $p < .001$

TABLE 18
Conflict Resolution Means for VT-Abuse and No-Abuse Groups

Resolution Prototype	VT Abused	Non-Abused	F	df
For Self:				
Resolve	5.74	5.34	ns	
Insult	8.54	6.38	8.93**	1,618
Hit	2.58	1.43	8.29**	1,618
For Partner:				
Resolve	6.53	5.85	4.03*	1,613
Insult	7.55	5.69	12.26***	1,613
Hit	2.42	1.53	4.28*	1,613

* $p < .05$ ** $p < .01$ *** $p < .001$

TABLE 19
Hierarchical Regression Analysis: Hit as Dependent Variable

Dependent Variable: Hit	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M & D Gen. Secure	.00952	.0410	.00952	.0410
2. Abuse	.02088	.0027	.03040	.0010
Hit	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02717	.0004	.02717	.0004
2. M & D Gen. Secure	.00322	n.s.	.03040	.0010
Hit	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M Gen. Secure	.00919	.0130	.00919	.0130
2. D Gen. Secure	.00033	n.s.	.00952	.0410
3. Abuse	.02088	.0027	.03040	.0010
Hit	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02717	.0004	.02717	.0004
2. M Gen. Secure	.00321	n.s.	.03038	.0004
3. D Gen. Secure	.00001	n.s.	.03040	.0010
Hit	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. D Gen. Secure	.00213	n.s.	.00213	n.s.
2. M. Gen. Secure	.00739	.0259	.00952	.0410
3. Abuse	.02088	.0027	.03040	.0010
Hit	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02717	.0004	.02717	.0004
2. D Gen. Secure	.00025	n.s.	.02742	.0010
3. M Gen. Secure	.00298	n.s.	.03040	.0010

Table 20
 Hierarchical Regression Analysis:
 Depression as Dependent Variable

Depression	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M & D Gen. Security	.07756	.0000	.07756	.0000
2. Abuse	.00499	n.s.	.08255	.0000
Depression	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02804	.0001	.02804	.0001
2. M & D Gen. Secure	.05450	.0000	.08255	.0000
Depression	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M Gen. Secure	.05836	.0000	.05836	.0000
2. D Gen. Secure	.01920	.0001	.07756	.0000
3. Abuse	.00499	n.s.	.08255	.0000
Depression	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02804	.0001	.02804	.0001
2. M Gen. Secure	.03825	.0000	.06629	.0000
3. D Gen. Secure	.01625	.0003	.08255	.0000
Depression	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. D Gen. Secure	.04416	.0000	.04416	.0000
2. M. Gen. Secure	.03340	.0000	.07756	.0000
3. Abuse	.00499	n.s.	.08255	.0000
Depression	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02804	.0001	.02804	.0001
2. D Gen. Secure	.02954	.0000	.05758	.0000
3. M Gen. Secure	.02497	.0000	.08255	.0000

Table 21
 Hierarchical Regression Analysis:
 CAST as a Predictor Variable

Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. CAST	.00624	.0280	.00624	.00624
2. M & D Gen. Secure	.07129	.0000	.0770	.0000
3. Abuse	.00224	n.s.	.07994	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M & D Gen. Secure	.07750	.0000	.07750	.0000
2. Abuse	.00242	n.s.	.07993	.0000
3. CAST	.00001	n.s.	.07994	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. M & D Gen. Secure	.07750	.0000	.07750	.0000
2. CAST	.00020	n.s.	.07770	.0000
3. Abuse	.00224	n.s.	.07994	.0000
Gen. Secure	R. Sq. Ea. Step	Signif. Ea. Step	R. Sq. Total	Signif. Total
1. Abuse	.02250	.0007	.02250	.0007
2. CAST	.00148	n.s.	.02399	.0011
3. M & D Gen. Secure	.00596	.0000	.07994	.0000

CHAPTER 4

DISCUSSION

The overall frequency of reported childhood abuse in our sample of university undergraduates was substantial. Our results indicated that more than one in four subjects were victimized as children and that there was a great deal of co-occurrence of different forms of abuse. The most commonly reported form of abuse was verbal in nature, followed by physical and then sexual. Our finding that 6.5% of subjects reported sexual abuse is considerably lower than some surveys (e.g., Russel, 1984; Fromuth, 1986) but consistent with others (e.g., Burnam et al., 1988; Segal & Figley, 1988). Unfortunately, it is not clear as to why there are such variations in frequency from survey to survey. Surveys of both college populations (Fromuth, 1986; Segal & Figley, 1988) and community samples (Russel, 1984; Burnam et al., 1988) have found higher and lower rates of childhood sexual abuse than ours. Likewise, surveys that have been more specific in their definitions of sexual abuse (Briere & Runtz, 1988; Burnam et al., 1988) or have used personal interview techniques (Burnam et al., 1988) have also reported both higher and lower frequencies than ours. In any event, the fact that one in every 15 subjects in our study reported childhood sexual abuse and several times that number reported verbal or physical abuse, are very disturbing statistics indeed.

In terms of differences between abused and non-abused individuals on measures of attachment, as we predicted, a higher proportion of the Abuse group reported insecure attachment in both childhood and adulthood. The differences were most dramatic with regard to childhood attachment: just 19% of the No-abuse group reported insecure attachment to mother compared with more than 50% of the abuse group. The significant differences in group means on each of the attachment measures provided further confirmation that abused subjects experienced both their childhood and adult relationships as less secure than their non-abused counterparts.

The results for the Abuse versus No-Abuse and the VT-Abuse versus No-Abuse analyses were very similar. We had expected our analyses to reveal stronger differences for the VT-Abuse group. As compared with all abuse respondents, a somewhat higher proportion of the VT-Abuse group indicated an insecure attachment to mother (63% versus 52%), but other than that the two groups' ratings on measures of attachment as well as all other variables were remarkably similar. It is possible that our 10-point rating scale for level of trauma and/or our decision to consider any rating of 5 or above as "very traumatic" failed to properly pick out individuals who suffered very traumatic abuse. A different interpretation is simply that any level of abuse is potentially as disruptive to an attachment relationship as more severe forms.

We were surprised to discover that a majority of the subjects in both the Abuse and No-Abuse groups reported an insecure attachment style for self and for partner. One possible explanation for this is that late adolescence or early adulthood are times of particular uncertainty with regard to romantic relationships. Nevertheless, if early attachment style forms a prototype or internal working model for future relationships, one would not expect such high levels of insecure attachment in adolescence. This raises serious questions about the assumption of continuity in the attachment theory literature.

The results of our hierarchical regression analyses suggest that abuse does not account for adult attachment style above and beyond parental attachment. Although consistently significant, the amount of variance that any variable, or even variables combined, accounted for was relatively small. The greatest amount of variance that attachment to mother accounted for was about 6%. Attachment to mother and father combined never accounted for more than 8%. These findings suggest that while childhood attachment may be significant predictors, there are clearly many other factors that are influencing the development of adult attachment style. They also suggest that abuse may matter most to the extent that it affects one's attachment relationship with one's parents and not in and of itself.

Another interesting result of our analyses was that attachment to mother and to father accounted for

approximately 8% of the variance when predicting insecure attachment in adulthood, but less than 3% when predicting secure attachment. One possible interpretation of this findings is that when things go wrong, as in the case of insecure attachment, one's relationship with one's parents makes more of a difference as opposed to when things go right, in the case of secure attachment.

In terms of group differences on the other variables we examined, namely conflict resolution, depression and parental use of alcohol, our exploratory analyses revealed a number of significant differences. With regard to conflict resolution, our results indicated that the Abuse group responded more frequently than the No-Abuse group in ways that could be considered either non-productive or aggressive. Of particular interest were the differences on the Hit items, which indicated that both the abuse group and their partners used violence (e.g., grabbed, slapped, kicked, bit, hit each other) significantly more frequently than their non-abused counterparts. This finding may be seen as consistent with a large body of research (e.g., Malinosky-Rummel & Hansen, 1993; Beitchman et al., 1992; Briere & Runtz, 1988) that suggests that children who are abused are more likely to be aggressive and/or involved in abusive relationships as adults.

Our analyses also revealed that when in conflict, women, significantly more often than men, responded to their partner in an emotionally provocative or physically aggressive way.

The fact that females reported behavior such as crying, sulking or swearing at one's partner more often than men was not as surprising as the fact that they also reported throwing something at, slapping or hitting their partner more often as well. Given men's tendency to be more aggressive than women, as well as differences in body strength, we would have expected any gender differences to have been in the opposite direction, with men more likely to use violence when in conflict than women.

In terms of depression, as we expected, the Abuse group scored significantly higher on the Beck Depression Inventory than the No-Abuse group. There is considerable evidence (e.g., Malinosky-Rummel & Hansen, 1993; Beitchman et al., 1992; Briere & Runtz, 1988) that victims of childhood abuse are more likely to be depressed than individuals without an abuse history. The No-Abuse group's overall mean of 7.6 places it within the "no or minimal" depression range on the BDI. The Abuse group's overall mean of 10 places it at the low-end of the "mild to moderate" depression range on the BDI.

In terms of group differences on the measure of parental alcohol use, results indicated that the Abuse group members experienced a significantly higher level of distress as a result of parents' drinking. This finding is consistent with evidence that children of alcoholics are more likely to experience abuse and/or greater emotional distress than those from families in which there is no drinking problem.

The only analyses that found abuse to be a significant predictor when controlling for other variables was with regard to conflict resolution. Hierarchical regression analyses revealed abuse history, but not parental attachment, to be a significant predictor of the use of aggression when in conflict with one's partner; abuse was significant when entered after parental attachment, but the opposite was not the case. Although the amount of variance it accounted for was again fairly small (less than 3%), this result supports previously cited research which suggests that victims of childhood abuse are more likely to be aggressive and/or involved in abusive relationships as adults than their non-abused counterparts.

In terms of depression, we expected abuse to be a stronger predictor of this variable than it turned out to be. Abuse did not account for a significant amount of variance when controlling for parental attachment. Attachment to mother, which accounted for 6% of the variance, was the strongest predictor of depression overall. This suggests once again that abuse may be most important to the extent that it affects one's relationship with one's parents and not in and of itself.

There are a number of limitations to our study. First and foremost, it is impossible to determine whether or not abuse was the result of an insecure attachment relationship with one's caretaker, vice versa or neither. Likewise, we know that there are significant associations among abuse,

childhood attachment and adult attachment style but these associations do not mean that there are causal relationships between these variables.

Another limitation is the fact that our data on childhood abuse and attachment were derived from measures based on self-reported, retrospective information. It is possible that subject's memory of abuse (or lack thereof) and/or attachment relationships are different from actual experience. It is also possible that social desirability may have affected the way abuse and both childhood and adult attachment relationships were appraised and/or reported.

We also had little information about the nature and extent of the respondents' abuse histories. For example, we could not determine from the childhood abuse questionnaire whether or not the abuse was actually perpetrated by an attachment figure (i.e., mother and/or father). We assumed this to be the case, at least for verbal and physical abuse, but if for some reason it were not in a large number of situations, it would obviously have important implications for the interpretation of our results. Also, as is clear from our regression analyses, factors beyond childhood attachment or abuse history clearly contribute to the prediction of adult attachment. Some of these factors may have been other forms of childhood trauma (e.g., "death of a parent") and adolescent or adult victimization (e.g., "rape by someone you knew") that were included in the original questionnaire but were not analyzed in this study.

Finally, there is always the question of how generalizable the findings from this kind of study are to the general population. Given the fact that our college sample consisted of mostly white, middle-class, relatively high-functioning young adults, it is likely that the results from a study using a random sample of the general population would be different.

Future investigations into the frequency of childhood abuse would be substantially enhanced by some standardization of definitions of various forms of childhood abuse and means for gathering data. Also, future research on the relationships between childhood abuse and childhood and adult attachment style would benefit greatly from the use of longitudinal designs. This would allow for the nature of any causal relationships between abuse, early attachment and adult attachment to be assessed and also for the circumvention of issues concerning self-reported, retrospective information. In the absence of such studies, the gathering of more in-depth information on abuse and attachment relationships, perhaps through interviews of subjects as well as family members and their partners, could also prove very useful.

In conclusion, this study provides new and useful information on the frequency and co-occurrence of various types of childhood abuse as well as an exploration of the relationship between childhood abuse and various attachment relationships. Our results indicate that there is a high

prevalence and co-occurrence of childhood emotional, physical and sexual abuse in our college population; that childhood abuse is associated with significantly higher levels of insecure attachment in both childhood and adulthood, as well as aggressive forms of conflict resolution, depression and parental alcohol abuse; and that parental attachment, particularly to mother, is a significant predictor of adult attachment style, whereas abuse history is not significant above and beyond parental attachment. Abuse is, however, a significant predictor of aggressive conflict resolution behaviors.

APPENDIX

QUESTIONNAIRE

Listed below are a number of experiences that people sometimes have in their lives. For event, please indicate whether you have had that experience by filling in "0" (no) or "1" (yes) on the opscan form beside the number corresponding with that event.

0 = No, I have not experienced this
1 = Yes, I have experienced this

1. Death of a parent	0 = no	1 = yes
2. Death of a sibling	0 = no	1 = yes
3. Death of someone close (not parent or sibling)	0 = no	1 = yes
4. Parents' divorce	0 = no	1 = yes
5. Diagnosed with a life- threatening illness	0 = no	1 = yes
6. Diagnosed with a serious, but not life-threatening, illness	0 = no	1 = yes
7. Serious disability	0 = no	1 = yes
8. Serious accident	0 = no	1 = yes
9. Parent or sibling diagnosed with a life-threatening illness	0 = no	1 = yes
10. Home destroyed by fire or natural disaster	0 = no	1 = yes
11. Verbal abuse as a child	0 = no	1 = yes
12. Non-sexual physical abuse as a child	0 = no	1 = yes
13. Incest or sexual abuse as a child	0 = no	1 = yes
14. Rape by a stranger	0 = no	1 = yes
15. Rape by someone you knew	0 = no	1 = yes
16. Sexual assault other than rape or child sexual abuse	0 = no	1 = yes
17. Non-sexual physical assault by a stranger	0 = no	1 = yes
18. Non-sexual physical assault by someone you knew	0 = no	1 = yes

Now for each experience, please indicate how traumatic the event was for you. If you experienced the event more than once, please consider the impact of all the instances together. For each event, please fill in the number on the opscan sheet that best corresponds to your rating of how traumatic the experience or experiences were for you. If you did not experience the event, please circle "0" (Not at All Traumatic) for that event.

Event/Experience	How traumatic was it?									
	Not at All Traumatic 0	1	2	Somewhat 3	4	5	6	7	8	Extremely Traumatic 9
19. Death of a parent	0	1	2	3	4	5	6	7	8	9
20. Death of a sibling	0	1	2	3	4	5	6	7	8	9
21. Death of someone close (not parent or sibling)	0	1	2	3	4	5	6	7	8	9
22. Parents' divorce	0	1	2	3	4	5	6	7	8	9
23. Diagnosed with a life- threatening illness	0	1	2	3	4	5	6	7	8	9
24. Diagnosed with a serious, but not life-threatening, illness	0	1	2	3	4	5	6	7	8	9
25. Serious disability	0	1	2	3	4	5	6	7	8	9
26. Serious accident	0	1	2	3	4	5	6	7	8	9
27. Parent or sibling diagnosed with a life-threatening illness	0	1	2	3	4	5	6	7	8	9
28. Home destroyed by fire or natural disaster	0	1	2	3	4	5	6	7	8	9
29. Verbal abuse as a child	0	1	2	3	4	5	6	7	8	9
30. Non-sexual physical abuse as a child	0	1	2	3	4	5	6	7	8	9
31. Incest or sexual abuse as a child	0	1	2	3	4	5	6	7	8	9
32. Rape by a stranger	0	1	2	3	4	5	6	7	8	9
33. Rape by someone you knew	0	1	2	3	4	5	6	7	8	9
34. Sexual assault other than rape or child sexual abuse	0	1	2	3	4	5	6	7	8	9
35. Non-sexual physical assault by a stranger	0	1	2	3	4	5	6	7	8	9
36. Non-sexual physical assault by someone you knew	0	1	2	3	4	5	6	7	8	9

78. Which of the following BEST DESCRIBES your relationship with your mother while you were growing up?
 (Read all three descriptions before choosing the best choice. Then mark the letter of your choice on the opscan form.)

CHOOSE ONE:

- A. She was fairly cold and distant, and sometimes rejecting. She was not very responsive to my needs. She had other priorities that sometimes came before me; her concerns were often elsewhere.
- B. She was noticeable inconsistent in her reactions to me, sometimes warm and sometimes not; she had her own agenda which sometimes got in the way of her receptiveness to my needs; she definitely loved me but didn't always show it in the best way.
- C. She was generally warm and responsive; she was good at knowing when, to be supportive and when to let me operate on my own; our relationship was almost always comfortable, and I have no major reservations or complaints about it.

For questions 79-81, rate the extent to which each paragraph describes your relationship with your mother while you were growing up. Be sure to mark the correct number on the opscan sheet.

79. PARAGRAPH A:

Not at all Descriptive									Strongly Descriptive
0	1	2	3	4	5	6	7	8	

80. PARAGRAPH B:

Not at all Descriptive									Strongly Descriptive
0	1	2	3	4	5	6	7	8	

81. PARAGRAPH C:

Not at all Descriptive									Strongly Descriptive
0	1	2	3	4	5	6	7	8	

10. Which of the following best describes your feelings in romantic love relationships? (Read all for descriptions before choosing the ONE best choice. Mark the letter of your choice on the opscan form.)

CHOOSE ONE:

A. I am uncomfortable getting close to others. I want emotionally close relationships, but I find it difficult to trust other completely, or to depend on them. I worry that I will be hurt if I allow myself to become too close to others.

B. I want to be completely emotionally intimate with others, but I often find that others are reluctant to get as close as I would like. I am uncomfortable being without close relationships, but I sometimes worry that others don't value me as much as I value them.

C. It is easy for me to become emotionally close to other. I am comfortable depending on others and having other depend on me. I don't worry about being alone or having others not accept me.

D. I am comfortable without close emotional relationships. It is very important to me to feel independent and self-sufficient, and I prefer not to depend on others or have others depend on me.

For questions 11-14, rate the extent to which each paragraph describes your feelings in romantic love relationships. Be sure to mark the correct number on the opscan sheet.

11. PARAGRAPH A:

Not at all									Strongly
Descriptive									Descriptive
0	1	2	3	4	5	6	7	8	

12. PARAGRAPH B:

Not at all									Strongly
Descriptive									Descriptive
0	1	2	3	4	5	6	7	8	

13. PARAGRAPH C:

Not at all									Strongly
Descriptive									Descriptive
0	1	2	3	4	5	6	7	8	

14. PARAGRAPH D:

Not at all									Strongly
Descriptive									Descriptive
0	1	2	3	4	5	6	7	8	

51. Are you currently involved in a romantic relationship?
 A=Yes B=No

IF YES, ANSWER THE FOLLOWING QUESTIONS. [if NO, SKIP to #58 on this questionnaire and on your opscan]

52. How long have you been in this relationship?
 A. Less than 3 months B. 3 months to a year
 C. Longer than a year

53. Which of the following BEST describes your partner's feelings in romantic love relationships? (Please MARK THE LETTER OF YOUR CHOICE ON THE OPSCAN FORM)

Choose ONE:

A. My partner is uncomfortable getting close to others. My partner wants emotionally close relationships, but s/he finds it difficult to trust others completely, or to depend on them. My partner worries that s/he will be hurt if s/he allow herself/himself to become too close to others.

B. My partner wants to be completely emotionally intimate with others, but my partner often finds that others are reluctant to get as close as s/he would like. My partner is uncomfortable being without close relationships, but s/he sometimes worries that others don't value her/him as much as s/he values them.

C. It is easy for my partner to become emotionally close to others. My partner is comfortable depending on others and having others depend on her/him. S/he doesn't worry about being alone or having others not accept her/him.

D. My partner is comfortable without close emotionally relationships. It is very important to her/him to feel independent and self-sufficient, and s/he prefers not to depend on others or have others depend on her/him.

For questions 54-57, rate the extent to which each paragraph describes your partner's feelings in romantic love relationships.

54. PARAGRAPH A:									
	Not at all								Strongly
	Descriptive				Descriptive				Descriptive
	0	1	2	3	4	5	6	7	8
55. PARAGRAPH B:									
	Not at all								Strongly
	Descriptive								Descriptive
	0	1	2	3	4	5	6	7	8
56. PARAGRAPH C:									
	Not at all								Strongly
	Descriptive								Descriptive
	0	1	2	3	4	5	6	7	8
57. PARAGRAPH D:									
	Not at all								Strongly
	Descriptive								Descriptive
	0	1	2	3	4	5	6	7	8

No matter how well a couple gets along, there are times when they disagree on major decisions, get annoyed about something the other person does, or just have spats or fights because they're in a bad mood or tired. They also use many different ways of trying to settle their differences. The following is a list of some things that people might do during a dispute. Please indicate whether you (NOT your romantic partner) behaved in any of these ways during the course of your most important romantic relationship (and if so, how often) using the following scale:

Never 0	1-2 times 1	3-5 times 2	6-10 times 3	11+ times 4
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During disputes in our relationship, I:

- 98. Discussed the issue calmly
- 99. Got information to back up my side of things
- 100. Brought in or tried to bring in someone to help settle things
- 101. Insulted or swore at my partner
- 102. Sulked and/or refused to talk about it
- 103. Stomped out of the room
- 104. Cried
- 105. Did or said something to spite my partner
- 106. Threatened to hit my partner or to throw something at him/her
- 107. Threw, smashed, hit, or kicked an object
- 108. Pushed, grabbed, or shoved my partner
- 109. Wrestled or pinned down my partner
- 110. Threw something at my partner
- 111. Slapped my partner
- 112. Kicked, bit, or hit my partner with a fist or object

Please indicate whether your most important romantic partner (NOT you) behaved in any of the following ways during the course of your relationship (and if so, how often), using the scale below:

Never	1-2 times	3-5 times	6-10 times	11+ times
0	1	2	3	4

During disputes in our relationship, my romantic partner:

- 98. Discussed the issue calmly
- 99. Got information to back up his/her side of things
- 100. Brought in or tried to bring in someone to help settle things
- 101. Insulted or swore at me
- 102. Sulked and/or refused to talk about it
- 103. Stomped out of the room
- 104. Cried
- 105. Did or said something to spite me
- 106. Threatened to hit me or to throw something at me
- 107. Threw, smashed, hit, or kicked an object
- 108. Pushed, grabbed, or shoved me
- 109. Wrestled or pinned me down
- 110. Threw something at me
- 111. Slapped me
- 112. Kicked, bit, or hit me with a fist or object

In each of the following groups of statements, choose the one statement that best describes how you feel **RIGHT NOW**. Mark the appropriate letter on your opscan sheet.

1.
 - a. I do not feel sad.
 - b. I feel sad or blue.
 - c. I am blue or sad all the time and I can't snap out of it.
 - d. I am so sad or unhappy that I can't stand it.

2.
 - a. I am not particularly pessimistic or discouraged about the future.
 - b. I feel discouraged about the future.
 - c. I feel I have nothing to look forward to.
 - d. I feel that I won't ever get over my troubles.
 - e. I feel that the future is hopeless and that things cannot improve.

3.
 - a. I don't feel like a failure.
 - b. I feel that I have failed more than the average person.
 - c. I feel that I have accomplished very little that is worthwhile or that means anything.
 - d. As I look back on my life, all I can see is a lot of failures.
 - e. I feel I am a complete failure as a person.

4.
 - a. I am not particularly dissatisfied.
 - b. I feel bored most of the time.
 - c. I don't enjoy things the way I used to.
 - d. I don't get satisfaction out of anything anymore.
 - e. I am dissatisfied with everything.

5.
 - a. I don't feel particularly guilty.
 - b. I feel bad or unworthy a good part of the time.
 - c. I feel quite guilty.
 - d. I feel bad or unworthy practically all the time now.
 - e. I feel as though I am very bad or worthless.

6.
 - a. I don't feel I am being punished.
 - b. I have a feeling that something bad may happen to me.
 - c. I feel I am being punished or will be punished.
 - d. I feel I deserve to be punished.
 - e. I want to be punished.

7.
 - a. I don't feel disappointed in myself.
 - b. I am disappointed in myself.
 - c. I don't like myself.
 - d. I am disgusted with myself.
 - e. I hate myself.

8.
 - a. I don't feel I am any worse than anybody else.
 - b. I am critical of myself for my weakness or mistakes.
 - c. I blame myself for my faults.
 - d. I blame myself for everything bad that happens.

9.
 - a. I don't have any thoughts of harming myself.
 - b. I have thoughts of harming myself but I would not carry them out.
 - c. I feel I would be better off dead.
 - d. I feel my family would be better off if I were dead.
 - e. I have definite plans about committing suicide.
 - f. I would kill myself if I had the chance.

10.
 - a. I don't cry more than usual.
 - b. I cry now more than I used to.
 - c. I cry all the time now. I can't stop.
 - d. I used to be able to cry but now I can't cry even though I want to.

11.
 - a. I am no more irritated now than I ever am.
 - b. I get annoyed or irritated more easily than I used to.
 - c. I feel irritated all the time.
 - d. I don't get irritated at all the things that used to irritate me.
12.
 - a. I have not lost interest in other people.
 - b. I am less interested in other people than I used to be.
 - c. I have great difficulty in making decisions.
 - d. I can't make any decisions at all any more.
13.
 - a. I make decisions about as well as ever.
 - b. I try to put off making decisions.
 - c. I have great difficulty in making decisions.
 - d. I can't make any decisions at all any more.
14.
 - a. I don't feel I look any worse than I used to.
 - b. I am worried that I am looking old or unattractive.
 - c. I feel that there are permanent changes in my appearance and they make me look unattractive.
 - d. I feel that I am ugly or repulsive looking.
15.
 - a. I can work about as well as before.
 - b. It takes extra effort to get started at doing something.
 - c. I don't work as well as I used to.
 - d. I have to push myself very hard to do anything.
 - e. I can't do any work at all.
16.
 - a. I can sleep as well as usual.
 - b. I wake up more tired in the morning than I used to.
 - c. I wake up 1-2 hours earlier than usual and find it hard to do anything.
 - d. I wake up early every day and can't get more than 5 hours sleep.
17.
 - a. I don't get any more tired than usual.
 - b. I get tired more easily than I used to.
 - c. I get tired from doing anything.
 - d. I get too tired to do anything.
18.
 - a. My appetite is not worse than usual.
 - b. My appetite is not as good as it used to be.
 - c. My appetite is much worse now.
 - d. I have no appetite at all any more.
19.
 - a. I haven't lost much weight, if any, lately.
 - b. I have lost more than 5 pounds.
 - c. I have lost more than 10 pounds.
 - d. I have lost more than 15 pounds.
20.
 - a. I am no more concerned about my health than usual.
 - b. I am concerned about aches and pains or upset stomach or constipation.
 - c. I am so concerned with how I feel or what I feel that it's hard to think of much else.
 - d. I am completely absorbed in what I feel.
21.
 - a. I have not noticed any recent changes in my interest in sex.
 - b. I am less interested in sex than I used to be.
 - c. I am much less interested in sex now.
 - d. I have lost interest in sex completely.

128. (Do not enter anything in #128 on your opscan.) Now, change to your second opscan sheet.
- Print your name (last name first) on it and fill in the bubbles.
 - Enter TODAY'S DATE (not your birthdate) under "date."
 - Enter your 9-digit student number under "identification number."
 - In the box labeled "sequence number," write a "2" in the first column (on the left) and bubble in the "2."
- BEGIN THE FOLLOWING ON #1 ON YOUR SECOND OPSCAN SHEET.

CAST

Answer "yes" or "no" to each of the following questions. For each question you answer "yes" fill in the first circle (A) on the opscan form. For each question you answer "no" fill in the second circle (B) on the opscan form.

A=YES B=NO

- Have you ever thought that one of your parents had a drinking problem?
- Have you ever lost sleep because of a parent's drinking?
- Did you ever encourage one of your parents to quit drinking?
- Did you ever feel alone, scared, nervous, angry or frustrated because a parent was not able to stop drinking?
- Did you argue or fight with a parent when he or she was drinking?
- Did you ever threaten to run away from home because of a parent drinking?
- Has a parent ever yelled at or hit you or other family member when drinking?
- Have you ever heard your parents fight when one of them was drunk?
- Did you ever protect another family member from a parent who was drinking?
- Did you ever feel like hiding or emptying a parent's bottle of liquor.
- Do many of your thoughts revolve around a problem drinking parent or difficulties that arise because of his or her drinking?
- Did you ever wish that a parent would stop drinking?
- Did you ever feel responsible for and guilty about a parent's drinking?
- Did you ever fear that your parents would get divorced due to alcoholic misuse?
- Have you ever withdrawn from and avoided outside activities and friends because of embarrassment and shame over a parent's drinking problem?
- Did you ever feel caught in the middle of an argument or fight between a problem drinking parent and you other parent?
- Did you ever feel that you made a parent drink alcohol?
- Have you ever felt that a problem drinking parent did not really love you?
- Did you ever resent a parent's drinking?
- Have you ever worried about a parent's health because of his or her alcohol use?
- Have you ever been blamed for a parent's drinking?
- Did you ever think your father was an alcoholic?
- Did you ever wish your home could be more like the homes of your friends who did not have a parent with a drinking problem?
- Did a parent ever make promises to you that he or she did not keep because of drinking?
- Did you ever think your mother was an alcoholic?
- Did you ever wish that you could talk to someone who could understand and help the alcohol related problems in your family?
- Did you ever fight with your brothers and sisters about a parent's drinking?
- Did you ever stay away from home to avoid the drinking parent or your other parent's reaction to the drinking?
- Have you ever felt sick, cried, or had a "knot" in your stomach after worrying about a parent's drinking?
- Did you ever take over any chores and duties at home that were usually done by a parent before he or she developed a drinking problem?

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