

The Protective Roles of Spirituality, Supportive and Common Dyadic Coping Among Latino
Immigrant Couples in the US

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Abstract

This study examined whether spirituality and dyadic coping protected partners from becoming psychologically aggressive toward each other using secondary, cross-sectional data from a sample of 104 Latino couples living in the Washington, DC metropolitan area. The model tested was based on Bodenmann's Systemic Transactional model (1997) and incorporated an Actor-Partner Interdependence Model approach (Kenny, Kashy, & Cook, 2006). SEM results indicated that each partner's spirituality had a direct negative effect on their own psychological aggression, and a direct positive effect on their own supportive dyadic coping, and the couple's common dyadic coping. Each partner's spirituality also had an indirect effect on both partners' psychological aggression through increases in the couple's common dyadic coping. Supportive dyadic coping was not found to mediate the relation between spirituality and psychological aggression. Limitations of the study as well as clinical, programmatic, and research implications are discussed.

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Attribution

A co-author aided in the writing and research contained in this thesis. A brief description of her background and contributions are included here.

Prof. Mariana K. Falconier- Ph.D. (Department of Human Development, Virginia Tech) is the primary Advisor and Committee Chair. Prof. Falconier provided the data that was employed in this study. Additionally, Prof. Falconier provided extensive training and help in performing statistical analyses as well as contributing to the writing and editing of the manuscript.

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Chapter I: Introduction

The Problem and its Setting

The Hispanic population in the United States has been rapidly growing, rising from over 35,000,000 individuals, comprising 12.5% of the total population in 2000, to nearly 47,000,000 people, accounting for 15.4% of the population by 2008 (Pew Hispanic Center, 2010).

Population change reports show that between 2000 and 2008 Hispanics accounted for over 50% of total population change in the United States (Pew Hispanic Center, 2010). Additionally, it is projected that in 2050 nearly 1 in 5 Americans will be immigrants and more than 1 in 4 individuals in the United States will be Hispanic (Pew Hispanic Center, 2008). There is a particularly large percentage of Hispanics in the Washington D.C. metropolitan area, accounting for 8.8% of the population of the District in 2009, 15.1% in nearby Fairfax County, 17.1% in Arlington County, and in Maryland, 13.5% in Prince George County and 16.1% in Montgomery County (U.S. Census Bureau, 2009). Because of the rapidity of growth and the large percentage of the population that Hispanics form, it is particularly important that research be conducted to better understand this community.

As of today most of the published studies on Hispanics have included Mexicans, Cubans, and Puerto Ricans, excluding other Hispanic populations that have an important presence in some areas of the U.S. Such is the case of the metro D.C. area, whose Hispanic community is unique in its composition. In Montgomery County the Hispanic community is comprised of 28.9% Salvadorans, 9.9% Mexicans, 6.3% Puerto Ricans, and 5% Peruvians, whereas nationally the Latino population is 64% Mexican, 9% Puerto Rican, 8.1% “other Hispanic”, 7.4% Central American, 5.4% South American, 3.5% Cuban, and 2.7% Dominican (US Census Bureau, 2005; 2006). Additionally, in comparison to other areas of the U.S. where Hispanics are more

established, Hispanics in the metro D.C. area tend to be younger and there are more first generation immigrants, which may make them more vulnerable to stress (US Census Bureau, 2006). Despite the somewhat unique composition of Hispanics in the Washington DC metropolitan area, the large percentage of the population that Hispanics comprise, and the rapid growth of the Hispanic community, little is known about the challenges of immigrant couples, the impact these challenges have on family functioning, and what protective factors may reduce potentially harmful outcomes.

While immigrants come to the United States seeking a better life, they often bring with them traumatic experiences from the past and find unexpected stressors in their new surroundings (Michultka, Blanchard, & Kalous, 1998; Negy, Schwartz, & Reig-Ferrer, 2009). This is particularly true of Latino immigrants.¹ Many Latino immigrants come from war torn countries like El Salvador and Guatemala where they witnessed and suffered traumatic experiences due to political upheaval and its influence on the family (Michultka et al., 1998). Upon leaving their countries, many also faced difficult border crossings during which time they may have been abused and traumatized (Zamichow, 1992).

Once they arrive in the United States, Latino immigrants face many stressors ranging from separation from family members, lack of fluency in English, fears of deportation, and differences in traditions and values from the dominant culture, among others (Arbona et al., 2010). These stressors may contribute to feelings of depression, anxiety, and unhappiness (Ding & Hargraves, 2009). Work stress, discrimination, and gender role conflicts may also contribute to acculturation stress which occurs when immigrants are adjusting to a new culture (Dawson &

¹ Though population studies use the term “Hispanic”, individuals born or whose ancestors were born in Spanish-speaking Latin American countries prefer to be referred to as “Latino/a” (Falicov, 1998). Consequently, this study will refer to this population as such.

Panchanadeswaran, 2010; Falicov, 1998; Falconier, McCollum, Wainburg, & Austin, 2010).

These stressors, especially when not anticipated prior to immigration, may create a discrepancy between the life that is expected and the actual life that immigrants lead once they arrive in the United States. This discrepancy may exacerbate the experience of acculturation stress (Negy et al., 2009). Acculturation stress often results in “anxiety, depression, feelings of marginality and alienation, heightened psychosomatic symptoms, and identity confusion” (Williams & Berry, 1991, p. 634). The high levels of stress faced by many Latino immigrants due to experiences in their countries of origin, their potentially precarious arrival in the United States, and difficulties in adjusting to a new context may create stress that negatively influences functioning in their intimate relationships.

A limited body of research suggests that acculturation stress among Latinos is associated with greater marital distress (Negy, Hammons, Reig-Ferrer, & Marino, 2010). Additional research on non-Latino samples has found that stress in couples is associated with negative outcomes such as lower relationship satisfaction, lower sexual activity and sexual satisfaction, and is a risk factor for physical violence and psychological aggression (Bodenmann, Atkins, Schar, & Poffet, 2010; Langer, Lawrence, & Barry, 2008). Thus, based on evidence from research on other populations, the stressful context in which Latino immigrants live and come from may put them at risk for having lower quality relationships and of perpetrating and being the victim of physical and psychological aggression in their romantic relationships (Bodenmann, Meuwly, Bradbury, Gmelch, & Ledermann, 2010; Frye & Karney, 2006).

Psychological aggression, which has been defined as “both coercive verbal behaviors (e.g., insulting or swearing at partner) and coercive nonverbal behaviors that are not directed at the partner’s body (e.g., slamming doors or smashing objects)” (Murphy & O’Leary, 1989, p.

579), has already been found to be quite prevalent among Latina women. Hazen and Soriano (2007) found life time prevalence rates of psychological aggression among Latinas living in the United States to be 82.5%, with 82.2% experiencing less severe and 33.9% experiencing severe psychological aggression. Psychological aggression has also been linked to individual negative outcomes such as depression, hostility, and somatization among Latina women living in the United States (Hazen, Connelly, Soriano, & Landsverk, 2008). This seems to be consistent with empirical findings from non-Latino populations where psychological aggression victimization has been found to be associated with psychological distress, anxiety, depression and post-traumatic stress disorder (PTSD) in women, and physical health symptoms (Taft et al., 2006; Pico-Alfonso, 2005). Psychological aggression has been found to be potentially more damaging to the self esteem of its victims than physical aggression (Aguilar & Nightingale, 1994).

Even though psychological aggression among Latino couples has not been studied extensively, research on non-Latino populations has consistently found psychological aggression to be associated with negative relational outcomes. Psychological aggression has been negatively associated with marital satisfaction (Panuzio & DiLillo, 2010), and with a partner leaving or wanting to leave the relationship (Follingstand, 2009). The children of parents who are psychologically aggressive towards each other seem to be at an increased risk of exhibiting violent and aggressive behaviors during their youth (Ferguson, San Miguel, & Hartley, 2009). Psychological aggression has been found to predict physical and sexual aggression in relationships (Murphy & O'Leary, 1989; Ramisetty-Mikler, Caetano, & McGrath, 2007; Zarza, Ponsoda, & Carrillo, 2009). In fact, a study specifically conducted with Latino immigrants demonstrated that psychological aggression is a precursor to physical and sexual aggression in this population (Zarza et al., 2009). Given the negative influence that psychological aggression

has on individuals and relationships, and particularly its potential to escalate into physical and sexual aggression, the stressors that Latino immigrant couples face in the U.S., and the association between stress and psychological aggression, it seems crucial to investigate protective factors against psychological aggression among Latino couples.

Based on research conducted with non-Latino populations, one such potential protective factor may be the use of supportive and common dyadic coping. Bodenmann (2005) states that “supportive dyadic coping occurs when one partner assists the other in his or her coping efforts. This can be expressed through activities such as helping with daily tasks or providing practical advice, empathic understanding, helping the partner to reframe the situation, communicating a belief in the partner’s capabilities, or expressing solidarity with the partner” (p. 38). Common dyadic coping occurs when “both partners participate in the coping process more or less symmetrically or complementarily in order to handle a problem-focused or emotion-focused issue relevant to the dyad by using strategies such as joint problem solving, joint information seeking, sharing of feelings, mutual commitment, or relaxing together” (Bodenmann, 2005, p. 38). Bodenmann and colleagues (2010) found dyadic coping to be a protective factor against the use of psychological aggression during times of stress, as it reduces the effect of stress on verbal aggression and weakens the relationship between stress and verbal aggression. Additionally, dyadic coping has been found to contribute to marital quality, marital satisfaction, relationship stability, and to positively influence behavior during conflicts (Bodenmann & Cina, 2005; Bodenmann, Pihet, & Kayser, 2006; Papp & Witt, 2010). As there is evidence that dyadic coping protects couples from engaging in psychological aggression in other populations, it is possible that it may also protect Latino immigrant couples living in the United States from engaging in psychological aggression, though this has yet to be empirically validated.

Another potential protective factor against psychological aggression might be spirituality. Spirituality is defined as “an overarching construct” that “refers to a dimension of human experience involving personal transcendent beliefs and practices, within or outside formal religion, through family and cultural heritage, and in connection with nature and humanity” (Walsh, 2009, p. 5). Religious attendance, which is related to spirituality, has already been found to decrease Latino male’s physical aggression (Ellison, Trinitapoli, Anderson, & Johnson, 2007). Spirituality is an important dimension of Latino culture which encompasses many traditions that vary across the different Latino cultures, ranging from Christian beliefs in a divine and all powerful God, to Puerto Rican Espiritismo, the belief in an invisible world of spirits, both good and evil, that play an active role in the lives and behaviors of its followers, to the Cuban priests and priestesses of Santeria who heal and perform rituals (Falicov, 2009). Denominationally, two thirds of Latinos identify themselves as being Roman Catholic, half of whom tend towards the Pentecostal and charismatic branches of Catholicism. Many Catholic Latinos are converting to Evangelical traditions (Walsh, 2009). Regardless of the tradition, spirituality plays an important role in the daily lives of Latinos, most of whom frequently rely on God’s power, seek divine intervention, pray, and participate in expressions of faith (Walsh, 2009). Spiritual beliefs and practices can be brought with immigrants to their new country, creating a sense of consistency, values, and strength to cope with the many stressors and challenges associated with immigration (Falicov, 1998). Latinos more often turn to spirituality to cope than other ethnic groups, indicating that spirituality might be an easily accessible and culturally sensitive protective factor (Culver, Arena, Wimberly, Antoni, & Carver, 2004; Ellison et al., 2007; Ingram, 2007).

There are limited empirical findings that indicate that spirituality may protect against the use of psychological aggression. Mahoney et al. (1999) found that perceptions about the sanctity

of marriage, sacred nature of marriage, and beliefs in the manifestation of God in marriage are associated with less marital conflict and less use of verbal aggression and stalemate in relationships. Additionally, as psychological aggression predicts the use of physical violence in relationships (Murphy & O'Leary, 1989; Zarza et al., 2009), it is possible that protective factors against physical violence may also protect against psychological aggression. Among other populations, regular religious attendance has been found to be negatively linked with perpetration of domestic violence for both men and women (Ellison & Anderson, 2001; Ellison, Bartowski, & Anderson, 1999). Although it is possible that spirituality may protect Latino immigrant couples from being psychologically aggressive in their intimate relationships, this possibility has not been explored.

Though the relationships between spirituality and supportive and common dyadic coping have not yet been empirically validated in any population, spirituality has been shown to be conducive to better individual and relationship outcomes. Spirituality is negatively correlated with depression and anxiety, positively correlated with quality of life (Kaczorowski, 1989; Nelson et al., 2009; Sawatzky, Ratner, & Chiu, 2005) and positively associated with marital adjustment, relationship satisfaction, communication, conflict resolution, quality of sexual relationship, relationship with families and friends, and empathic understanding (Giblin, 1997; Roth, 1988). Mahoney et al. (1999) found that beliefs about the sanctity of marriage were associated with more verbal collaboration in couples, indicating that the spiritual significance given to marriage may increase a couple's use of supportive behaviors. In addition to emphasizing the importance of marriage, the use of spirituality as an individual coping strategy may aid partners in managing their own stress, allowing them to better support their partner (Ka'opua, Gotay, & Boehmn, 2007), and thus increasing supportive and common dyadic coping.

Psychological aggression is a problem among Latino immigrant couples living in the United States which has the potential to escalate into physical and sexual violence and lead to negative outcomes for individuals, couples and families. However, it is still unknown which factors may prevent Latino couples from engaging in this type of behavior. Research on the general population and the importance of spirituality in the Latino culture suggest that both spirituality and supportive and common dyadic coping might protect Latino couples from engaging in psychological aggression, but this possibility has not yet been explored.

The Purpose of the Study

Given that psychological aggression is a problem among Latino immigrant couples living in the United States because it may escalate into physical and sexual violence and it is associated with negative outcomes for individuals, couples and families (Aguilar & Nightingale, 1994; Ferguson et al., 2009; Follingstand, 2009; Hazen & Soriano, 2007; Hazen et al., 2008; Murphy & O’Leary, 1989; Panuzio & DiLillo, 2010; Pico-Alfonso, 2005; Ramisetty-Mikler et al., 2007; Taft et al., 2006; Zarza et al., 2009), the purpose of this study is to explore spirituality and supportive and common dyadic coping as possible protective factors by examining the relationships between supportive and common dyadic coping, spirituality, and psychological aggression. In addition to exploring potential protective factors, this study will be among the first to explore psychological aggression among Latino immigrant couples in the United States on the couple level, allowing for the consideration of gender differences and partner and actor effects. This study is guided by Bodenmann’s (2000, 2005) Systemic Transactional model of stress and coping, and the Actor-Partner Interdependence Model (APIM; Kenny, Kashy, & Cook, 2006). This study investigates Latino immigrant couples living in the Washington D. C. metropolitan area because of the unique composition of its community as well as the intense immigration and

acculturation stress that may put these immigrants at risk for engaging in psychological aggression.

Significance

Psychological aggression in couples is a predictor of physical aggression, sexual aggression, low marital satisfaction, leaving or wanting to leave the relationship, psychological distress, anxiety, depression, PTSD, physical health symptoms, low self esteem, and violent and aggressive behaviors in children who witness it (Aguilar & Nightingale, 1994; Ferguson et al., 2009; Follingstand, 2009; Murphy & O'Leary, 1989; Panuzio & DiLillo, 2010; Pico-Alfonso, 2005; Ramisetty-Mikler et al., 2007; Taft et al., 2006; Zarza et al., 2009). Given these deleterious consequences of psychological aggression for individuals, couples, and families, examining factors such as spirituality and supportive and common dyadic coping that can prevent couples from engaging in psychological aggression is essential in order to protect families from these outcomes. Exploring these potential protective factors among Latino immigrant couples living in the Washington D.C. area is particularly important given the many stressors that these couples experience. Findings from this study may contribute to the generation of programs for the prevention of psychological aggression among Latino immigrant couples as well as providing important information for clinicians working with this population. Additionally, this study will make a significant contribution to the virtually nonexistent literature on Latino immigrant couples living in the metro Washington D. C. area who represent a unique and under researched segment of the Latino immigrant population, consisting of a higher percentage of immigrants arriving from El Salvador and lower percentage of Mexican immigrants than the national population (US Census Bureau, 2005; 2006).

Theoretical Framework

Bodenmann's Systemic-Transactional model of coping (2000, 2005) guides the development of this study. It is based in Lazarus (1999) description of a transactional approach to stress in which stress is created by the interaction between the resources that an individual has and the demands on those resources that are experienced. While Lazarus (1999) incorporates the social environment into the model, specific aspects of couples coping were not explained. Bodenmann's Systemic-Transactional model of coping (2000, 2005) extends the work of Lazarus (1999) by incorporating Systems theory and describing how stress influences not only individual, but couple functioning. Systems perspective is used to conceptualize dyadic coping as a process in which one partner's stress and coping efforts influence the other partner and how they respond, as well as influencing the relationship.

Systems theory originated in the fields of mathematics, physics, and engineering, where the concept that "the whole is greater than the sum of its parts" (Nichols & Schwartz, 2008, p.101) was developed. Hall and Fagan (1956) stated that systems are a set of objects and the relationships between those objects and their attributes. This idea was later applied to family relationships and served to shift the focus from individual behavior and psychopathology to interactions between family members. Within a family system, each family member and their relationships with other family members influence the functioning of the system as a whole. Additionally, sub groups within the family, such as the parental subsystem and the child subsystem, interact with one another. Change in one individual, relationship, or subsystem influences how the rest of the individuals, subsystems and family function and behave. For example, a female partner's ability to cope with her own stress may be influenced by her use of spirituality as an individual coping mechanism. This may influence her engagement in the

positive dyadic coping of her partner, which may then influences her partner's stress and behavior during conflict.

Bodenmann (2000, 2005) describes how chronic everyday stress negatively influences couple functioning which then deteriorates marital satisfaction, leading to relationship dissolution and divorce. According to this model, external stress leads to less time spent together as a couple which may interfere with shared activities, feelings of togetherness, self-disclosure and joint coping. Decreased quality of communication between partners due to stress may also result in negative interactions in which withdrawal replaces positive interactions. Chronic everyday stress may increase the risk of physical and psychological problems as well as heightening problematic personality traits such as rigidity, anxiety and hostility. The result of these couple processes may be the alienation of partners as they are less and less involved in each other's lives or engage in more conflict with one another. Ultimately, alienation leads to marital dissatisfaction and then possibly to divorce. The process of deterioration in relationships is explained to occur as stress from outside of the relationship, when not managed by individual coping abilities, spills over into the couple relationship, creating relationship stress. In this way, Bodenmann explains the deleterious influence of chronic everyday stress on relationships.

Bodenmann (2005) explains that dyadic stress is any stressful occurrence that influences both partners in a couple either because they personally experience the stress, or because their partner experiences stress which influences their relationship behavior, thus influencing the non stress experiencing partner. When an individual experiences stress, their individual coping abilities are first employed to manage the stress. If the individual is not able to manage the stress using his or her individual coping, the next available resource is dyadic coping. In the dyadic process of coping with stress an individual communicates his or her stress through verbal and

nonverbal means to his or her partner, who then must perceive and interpret these indicators. The partner who receives the communication of stress then responds by either not recognizing or responding to the communication, becoming overwhelmed by the partner's stress, also known as stress contagion, or engaging in a form of positive or negative dyadic coping. The stressed partner then perceives and assesses the response of the non stressed partner.

The positive forms of dyadic coping consist of supportive dyadic coping, common dyadic coping and delegated dyadic coping (Bodenmann, 2005). Supportive dyadic coping is described by Bodenmann (2005) as occurring "when one partner assists the other in his or her coping efforts. This can be expressed through activities such as helping with daily tasks or providing practical advice, empathic understanding, helping the partner to reframe the situation, communicating a belief in the partner's capabilities, or expressing solidarity with the partner" (p. 38). In common dyadic coping, both partners participate by providing mutual support when both partners are experiencing the same stress. Common dyadic coping may take the form of "joint problem solving, joint information seeking, sharing of feelings, mutual commitment, or relaxing together" (p. 38). Partners engage in delegated dyadic coping when a partner takes over responsibilities normally handled by the stressed partner in order to reduce that partner's level of stress.

Negative forms of dyadic coping include hostile, ambivalent and superficial dyadic coping (Bodenmann, 2005). When a partner offers hostile dyadic coping, he or she supports his or her stressed partner while at the same time expressing "disparagement, distancing, mocking or sarcasm, open disinterest, or minimizing the seriousness of the partner's stress" (Bodenmann, 2005, p. 39). An individual who offers support to a stressed partner but does so with resentment

and unwillingness engages in ambivalent dyadic coping. Superficial dyadic coping occurs when a partner is insincere in the support offered to a stressed partner.

The purpose of dyadic coping is to reduce stress for each partner and to improve relationship quality. Dyadic coping “fosters a feeling of *we-ness*—that is, mutual trust, reliability, commitment, and the perception that the relationship is a supportive resource in difficult circumstances” (Bodenmann, 2005, p. 41). Bodenmann (2005) states that dyadic coping is generally used after individual coping efforts have not been sufficient, and if dyadic coping is not sufficient, social support from family and friends, followed by social support from distant acquaintances, and then professional help are sought.

The application of the Systemic-Transactional model of coping is particularly useful in conceptualizing this study. Because Latino immigrant couples experience a large amount of stress, it is possible that this stress may spill over into the couple relationship, influencing relationship processes. After a partner has a stressful experience, the partner may communicate this stress in the relationship. The other partner then has a choice of the way in which he or she responds. The use, or lack thereof, of positive forms of dyadic coping, such as supportive and common dyadic coping, may then influence the outcome of the interaction which may be either the successful soothing of the partner, withdrawal, or conflict escalation.

The use of the Systemic-Transactional Model of stress is conducive to statistical analysis using the Actor-Partner Interdependence Model (APIM; Kenny et al., 2006). According to Kenny (1996), “In dyadic research, the responses of the two members of the dyad are likely to be non-independent” (p. 279). Partners’ similar backgrounds, *partner effects* that occur when “a characteristic or behavior of one person influences the other person” (p. 280), *mutual influence* that occurs when the score of one partner causes the score of the other partner, and *common fate*,

which happens when both partner's are influenced by a causal factor that they both experience, may result in non-independence (Kenny, 1996). Ultimately, because the thoughts, feelings, and behaviors of one partner influence the thoughts, feelings, and behaviors of the other partner, a high correlation and a lack of independence of variables may occur. This correlation and interdependence between variables can bias statistical results if they are not controlled for. APIM (Kenny et al., 2006) allows for the controlling of interdependence among variables.

In addition to controlling for interdependence among variables, APIM also allows for the exploration of partner and actor effects. Partner effects occur when a variable related to one partner influences a variable related to the other partner. Actor effects occur when a variable related to one partner influences another variable related to the same partner. The model created in this study incorporates couples data on the use of positive dyadic coping, spirituality, and psychological aggression. This study explores the relationship between the importance that spirituality has in the life of one partner and that partner's use of psychological aggression and positive dyadic coping, which are actor effects. Additionally, the relationship between one partner's use of positive dyadic coping and his or her partner's use of psychological aggression, a partner effect, is explored. Because these variables are non-independent and are placed into one model in order to explore relationship processes, the use of APIM is required to control for interdependence of variables and to allow for the exploration of partner and actor effects.

Research Questions

This study intends to explore the following research questions:

- 1) Does spirituality protect Latino immigrant couples living in the Washington D.C. metro area from engaging in psychological aggression and influence their use of supportive and common dyadic coping?

2) Does the use of supportive and common dyadic coping influence the use of psychological aggression among Latino immigrant couples living the Washington D. C. metro area?

Chapter 2: Literature Review

Introduction

This literature review will describe the current research related to the context of the Latino population in the United States, psychological aggression, supportive and common dyadic coping, and spirituality.

Context of the Latino Population in the United States

While immigrants come to the United States seeking a better life, often they bring with them traumatic experiences from the past and find unexpected stressors in their new surroundings (Michultka et al., 1998; Negy et al., 2009). Many Latino immigrants come from war torn countries like El Salvador and Guatemala where they witnessed and suffered traumatic experiences due to political upheaval and its influence on the family. The number of war experiences and severity of war trauma are highly predictive of the development of PTSD in Central American refugees (Michultka et al., 1998). Upon leaving their countries, many also face difficult border crossings in which they are subject to extreme environmental conditions, stress due to the fear of being caught, as well as being abused and taken advantage of by those who guide their passage (Zamichow, 1992).

Once they arrive in the United States, immigrants from Spanish speaking countries face many stressors ranging from separation from family members, lack of fluency in English, fears of deportation, and having different traditions and values than the dominant culture, among others (Arbona et al., 2010). Often immigrants are separated from their family members when they come to the US (Arbona et al., 2010), sending home money to care for family left behind in other countries (Falicov, 1998). Additionally, immigrants may struggle to communicate in a new language, creating isolation, confusion, and adding to the stress involved in accomplishing

everyday tasks, resulting in depression, anxiety, and unhappiness (Ding & Hargraves, 2009). Work stress (Falicov, 1998), and discrimination (Dawson & Panchanadeswaran, 2010) may also contribute to acculturation difficulties. Adjusting to a new culture may create pressure to conform to the dominant society, “often resulting in a particular set of stress behaviors that include anxiety, depression, feelings of marginality and alienation, heightened psychosomatic symptoms, and identity confusion” (Williams & Berry, 1991, p. 634).

In particular, the clash between traditional gender roles of Latinos and those proscribed in the United States may be particularly stressful as it may lead to role confusion. According to *machismo* ideals, men are required “to be family oriented, brave, hard working, proud, and interested in the welfare and honor of their loved ones” (Falicov, 1998, p. 198). Other views of *machismo* focus on men as physically strong, domineering, commanding of respect, and providers for the family (Falicov, 1998). Traditional female gender roles are described by the concept of *marianismo*, which encourages women to be faithful to their husbands as well as “submissive, self-sacrificing, religious, humble, and modest” (Falicov, 1998, p. 199). In the United States, these roles may create tension as women are encouraged to defend their rights, pursue their own interests and independence, and often take on employment. Men may feel the pressure to provide financially for all of their spouses’ needs and to protect the family, while their partners are looking for fulfillment outside of the family and taking on more traditionally masculine roles. This may create stress and confusion about appropriate gender roles (Falconier et al., 2010). In these circumstances, men may become violent in order to regain control over their partners (Walker, 1999).

Many Latino immigrants face exceptional amounts of stress due to experiences in their countries of origin, their potentially precarious arrival in the United States, and difficulties in

adjusting to a new context. These stressors, especially when not anticipated prior to immigration, may create a discrepancy between the life that is expected and the actual life that immigrants lead once they arrive in the United States. This discrepancy may exacerbate the experience of acculturation stress (Negy et al., 2009). Such stress may detrimentally influence immigrant couple functioning as evidenced by findings that acculturation stress among Latinos is associated with greater marital distress (Negy et al., 2010).

Bodenmann's Systemic-Transactional model of coping (2000, 2005) creates a framework with which to understand the ways in which stress experienced by immigrants may spill over into the couple relationship, resulting in disruptions to relationship processes. Bodenmann and Cina (2005) found higher levels of stress to be correlated with less relationship stability and lower relationship satisfaction. Bodenmann, Ledermann, and Bradbury (2007) found that stress due to acute life events and external daily hassles, such as those experienced at work or in relationships outside of the couple relationship, were associated with more stress and tension within the couple relationship, indicating that external stress can spill over into the dyadic relationship if it is not managed by the individual. Bodenmann and colleagues (2007) also found that more relationship stress experienced by a partner was associated with their own and their partner's lower marital satisfaction, sexual satisfaction, and sexual activity. Additionally, Lederman, Bodenmann, Rudaz, and Bradbury (2010) found that daily relationship stress affects one's own and one's partner's marital communication and quality. Taken together, these findings indicate that external stress may contribute to stress in couple relationships which then detrimentally influences overall relationship evaluations and functioning. Given the amount of stress Latino immigrant couples face, Bodenmann's Systemic Transactional model of coping (2000, 2005) is particularly applicable in that it explains how external stressors may spill over

into the couple relationship, creating relationship stress that may interfere with healthy relationship processes that may put couples at risk for conflict escalation and psychological aggression.

Psychological Aggression

Psychological aggression is defined as “both coercive verbal behaviors (e.g., insulting or swearing at partner) and coercive nonverbal behaviors that are not directed at the partner’s body (e.g., slamming doors or smashing objects)” (Murphy & O’Leary, 1989, p. 579). Most couples report using psychological aggression at some point in their relationship, indicating that the use of psychological aggression may be normative, though still damaging (DeHart, Follingstad, & Fields, 2010; Falconier & Epstein, 2010; Fry & Karney, 2006). That the use of psychological aggression is so common is particularly concerning as there is a large body of research that demonstrates its damaging influence on victims and on the couple relationships of those who engage in it (Aguilar & Nightingale, 1994; Follingstad, 2009; Murphy & O’Leary, 1989; Panuzio & DiLillo, 2010; Pico-Alfonso, 2005; Ramisetty-Mikler et al., 2007; Taft et al., 2006; Zarza et al., 2009).

There is a large body of research that explores gender differences in psychological and physical aggression perpetration and victimization. The results of a meta-analytic review by Archer (2000) showed that women were more likely than men to report engaging in acts of physical aggression and to do so more frequently than men. However, the same study found that men were more likely to injure their partners and that 62% of partners who were injured were women. Archer (2000) reported that the proportion of victims who were women in studies ranged from 62% to 94%. Others studies have found that women perpetrate more psychological aggression than men (Hines, 2003; Panuzio & DiLillo, 2010) In some studies findings also

indicate no significant difference in male and female perpetration of physical aggression (Hines, 2003; Panuzio & DiLillo, 2010; Taft et al., 2006) or psychological aggression (Taft et al., 2006). It appears that while women may engage in more acts of aggression, the physical harm done by men to women may be more damaging and more lethal (Archer, 2000).

An extensive body of literature has shown that psychological aggression is correlated with negative mental and physical health outcomes of its victims. Various studies suggest that emotional abuse predicts depression (Ali, Oatley, & Toner, 1999; Coker et al., 2002; Taft et al., 2006), anxiety (Taft et al., 2002), and PTSD (Arias & Pape, 1999; Dutton, Goodman, & Bennett, 2001). Additionally, Coker et al. (2002) also found psychological abuse victimization to be correlated with “current poor health, substance use, developing a chronic disease, chronic mental illness, and injury” (p. 260). These findings suggest that psychological aggression is detrimental to the mental and physical health of its victims.

Research suggests that psychological aggression has a negative effect on its victims, even above and beyond the influence of physical aggression. For example, Aguilar and Nightingale (1994) found that the only type of abuse that was found to be significantly related to low self-esteem among battered women was emotional/controlling abuse. Additionally, Taft et al. (2006) conducted a study using a community sample of 145 heterosexual couples. Findings indicate that psychological aggression was a stronger predictor of mental and physical health variables than physical aggression. Psychological aggression victimization was found to be associated with psychological distress, anxiety, physical health symptoms and higher levels of depression in female victims. The findings of these studies highlight the unique negative impact that psychological aggression has on the individual outcomes of its victims.

In addition to exploring individual outcomes, Taft et al. (2006) found that psychological aggression is a negative predictor of relationship satisfaction which is consistent with an important body of research supporting this negative relationship. Panuzio and DiLillo's (2010) study of the impact of physical, psychological, and sexual intimate partner aggression on marital satisfaction also underscores the unique contribution of psychological aggression to marital satisfaction. This longitudinal study included 202 newlywed couples. Findings indicated all types of intimate partner aggression were associated with lower marital satisfaction. This was especially true of couples in which psychological aggression was bidirectional. Psychological aggression was found to be the most unique contributor to the marital satisfaction of victims. Kasian and Painter (1992) found that psychological aggression was negatively correlated with relationship satisfaction among dating couples and Katz, Arias, and Beach (2000) found that stability and intimacy of dating couples were also negatively associated with psychological aggression. Additionally, psychological aggression has been found to predict a victim's intentions to leave the relationship (Arias & Pape, 1999). These findings underscore the deleterious influence of psychological aggression on relationships.

In addition to negatively impacting individual and relationship outcomes, it is possible that psychological aggression leads to the perpetration of other forms of abuse. Stets (1991) suggests that psychological aggression may be reciprocal, meaning that engaging in psychological aggression against a partner may lead to the partner then responding in turn with psychological aggression. Falconier and Epstein (2010) confirmed this suggestion in results that demonstrate a high correlation between each partner's use of psychological aggression. Findings from Murphy and O'Leary's (1989) study demonstrated that among newlyweds the use of psychological aggression by either partner predicts physical aggression, suggesting that the

reciprocal use of psychological aggression in couples may lead to conflict escalation and the use of physical aggression. In addition to predicting both psychological and physical aggression, Ramisetty-Mikler and colleagues (2007) also found that use of severe psychological aggression predicts perpetration of sexual aggression by both males and females. Zarza and colleagues (2009) replicated the findings that psychological aggression predicts physical and sexual aggression in a study of Latino immigrants. Taken together, these findings highlight the importance of preventing psychological aggression in order to prevent its escalation into physical and sexual aggression.

There is a limited body of research that has demonstrated that exposure to stress is a risk factor for psychological aggression as well as physical aggression (Frye & Karney, 2006; Hellmuth & McNulty, 2008; Langer et al., 2008). As physical and psychological aggression are closely associated (Falconier & Epstein, 2010), evidence of the link between physical aggression and stress provides added support to the small body of research showing the relationship between psychological aggression and stress (Frye & Karney, 2006). Frye and Karney (2006) explored the relationships between psychological aggression, physical aggression, and acute stress. Results showed that partners were more likely to engage in physical aggression at times when they were also engaging in psychological aggression. Both partners were found to be more likely to engage in psychological aggression during times of higher acute stress. Husbands who experience chronic stress were more likely to be physically aggressive. Additionally, Langer and colleagues (2008) found that changes in stress predicted changes in physical aggression for both husbands and wives and Hellmuth and McNulty (2008) found that higher chronic stress was associated with engaging in more intimate partner violence. These studies demonstrate that stress is a risk factor for perpetration of both psychological and physically aggressive acts, supporting

the notion that stress experienced by the individual may spill over into the couple relationship, and if not properly coped with, may result in relationship conflict that escalates into psychological aggression, and from psychological aggression to physical and sexual aggression (Murphy & O’Leary, 1989; Zarza et al., 2009).

Psychological Aggression among Latino Couples

There is very little research that addresses the problem of psychological aggression among Latino immigrants in the United States. Hazen and Soriano (2007) explored prevalence rates of psychological aggression among Latino U.S born, immigrant, and migrant-seasonal workers in California. Life time prevalence rates were 82.5%, with 82.2% experiencing less severe and 33.9% experiencing severe psychological aggression. In the past year 72.6% of the sample reported experiencing psychological aggression with 71.6% experiencing less severe and 21.6% experiencing severe psychological aggression. In the same study, living with a partner, being separated or divorced, and partner’s substance use were significantly associated with psychological aggression. Psychological abuse has also been found to be related to depression, hostility, and somatization among Latino women living in the United States (Hazen et al., 2008).

Though few studies have explored how psychological aggression influences couple functioning among Latinos living in the United States, there is some evidence that confirms its deleterious influence on couples in this population. Zarza and colleagues (2009) found that the use of psychological aggression leads to the perpetration of physical and sexual aggression in a sample of Latino immigrants in the United States. Additionally, two studies explored psychological aggression among Argentinean couples facing economic strain (Falconier, 2010; Falconier & Epstein, 2010). Falconier (2010) found that female anxiety and male depression resulting from economic strain were associated with both partner’s use of psychological

aggression. Falconier & Epstein (2010) found that male and female psychological aggression mediated the relationship between male economic strain and the female partner's relationship satisfaction. Taken together, these findings indicate that, as in other populations, psychological aggression may be related to stress and is harmful to couple relationships.

Though there is little research on psychological aggression, there is a larger body of research on the topic of intimate partner violence in the Latino community in the United States. Klevens (2007) concludes in a literature review that "various studies consistently show that IPV occurs as frequently among Latinos as among non-Latinos when confounders are controlled for. There is some preliminary evidence that Latinas experience similar forms of IPV and suffer similar consequences" (p. 113) Klevens (2007) continues, "Latinos share many of the same risk factors as those observed among non-Latinos...Role strain especially as a result of immigration and acculturation, might be unique to Latinos" (p. 115). Additionally, unique to Latinos is the finding that Latino victims report greater suicidal ideation or attempts than those of other ethnicities (Krishnan, Hilbert, & VanLeeuwen, 2001). Evidence suggests that though in many ways violence between Latino partners is similar to partner violence among other populations, there are some differences.

Supportive and Common Dyadic Coping and Psychological Aggression

There is some evidence that supportive and common dyadic coping may be protective factors against psychological aggression though no research to date has explored their use or the relationship between supportive and common dyadic coping and the perpetration of psychological aggression in Latino immigrant couples living in the United States. One recent study on the topic was conducted by Bodenmann, Meuwly, and colleagues (2010), using a sample of 317 Swiss adults, most of whom were in their 40's, had been in a relationship for a

substantial amount of time, and were married with children. The purpose of the study was to determine how individual and dyadic coping moderate the relationships between stress, anger, and verbal aggression. Findings indicated that higher verbal aggression was associated with less use of dyadic and individual coping. Both positive and common forms of dyadic coping moderated the relationship between stress and verbal aggression. These findings indicate that using supportive and common dyadic coping skills may be a protective factors against the use of psychological aggression during times of stress. Bodenmann, Meuwly, et al. (2010) stated that “recognizing the link between context and verbal aggression is important, because it suggests that some individuals and couples who are stressed will not become verbally hostile if they are able to effectively reduce or manage stress” (p. 410). These findings indicate the possibility that when a partner is better able to support their stressed counterpart, they may be able to diffuse the stress that would otherwise build into conflict and possibly psychological aggression.

Positive dyadic coping has been found to positively influence couple relationships which supports the roles that supportive and common dyadic coping may have as protective factors against psychological aggression. In a longitudinal study of 110 Swiss couples, Bodenmann et al. (2006) found that positive dyadic coping is significantly associated with marital quality. Specifically, more positive and less negative dyadic coping predicted higher marital quality, as measured by less quarreling, more tenderness, and more togetherness. Positive dyadic coping has been found to be positively correlated with a partner’s own marital satisfaction while women’s positive dyadic coping is also associated with partner’s marital satisfaction and her own and her partner’s observed negativity during conflict (Papp & Witt, 2010). Additionally, the use of more frequent positive dyadic coping in couples when dealing with stress is associated with more stable and satisfying relationships (Bodenmann & Cina, 2005) and dyadic adjustment (Badr,

Carmack, Kashy, Christofanilli, & Revenson, 2010). The use of empathic responding in couples, which is similar to positive dyadic coping, is associated with lower levels of next day marital tension, indicating that supportive interactions between partners can reduce relationship stress (O'Brien, DeLongis, Pomaki, & Zwicker, 2009). Pap and Witt (2010) found male and female partner's use of positive dyadic coping to be moderately correlated, indicating that one partner's support may be related to the support offered by the other partner. Thus, supportive and common dyadic coping may aid in couple processes that strengthen relationships and may protect against the use of psychological aggression.

Not only does coping on the couple level appear to be beneficial to the couple relationship, but also to partner's individual well being. Collaborative coping, or the pooling of resources and the use of joint problem solving, has been found to be associated with more positive same day mood for both partners and less negative moods of women in a sample of older couples coping with prostate cancer (Berg et al., 2008). Taken together, these findings suggest that the use of supportive and common coping may protect the couple relationship as well as individuals from the negative influence of stress and thus may ultimately be a protective factor that prevents conflict from escalating into psychological aggression.

Spirituality among Latinos

Spirituality is defined as “an overarching construct” that “refers to a dimension of human experience involving personal transcendent beliefs and practices, within or outside formal religion, through family and cultural heritage, and in connection with nature and humanity” (Walsh, 2009, p. 5). Closely related to spirituality, religion is defined as “an organized, institutionalized belief system, set of practices, and faith community” (Walsh, 2009, p. 5). According to Mahoney (2010), “spirituality is a unique objective of both personal and

institutional forms of religion” (p. 810). Spirituality is very important in the Latino community. Spiritual traditions vary across the different Latino cultures, ranging from Christian beliefs in a divine and all powerful God, to Puerto Rican Espiritismo, the belief in an invisible world of spirits, both good and evil, that play an active role in the lives and behaviors of its followers, to the Cuban priests and priestesses of Santeria who heal and perform rituals (Falicov, 2009). Denominationally, two thirds of Latinos identify themselves as being Roman Catholic, half of whom tend towards the Pentecostal and charismatic branches of Catholicism. Many Catholic Latinos are converting to Evangelical traditions (Walsh, 2009). Regardless of the tradition, spirituality plays an important role in the daily lives of immigrant Latinos, most of whom frequently rely on God’s power, seek divine intervention, pray, and participate in expressions of faith. Many Latinos also report having had miraculous experiences and encounters with the divine that greatly influence their lives (Walsh, 2009).

The varying practices and beliefs of spiritual Latino immigrants serve an important function in this community. When immigrants leave their country of origin, many leave behind the traditions of their culture. However, spiritual beliefs and practices can be brought with immigrants to their new country, creating a sense of consistency, values, and strength to cope with the many stressors and challenges associated with immigration (Falicov, 1998). While facing immigration challenges, traditions and religious holidays may provide comfort and a sense of peace and belonging, protecting couples and families from the detrimental impact of stressful immigration challenges. As many people who are spiritual may not consider themselves religious (Walsh, 2009), and as Latinos participate in a wide variety of both spiritual and religious practices, the broader construct of spirituality may offer a more comprehensive

understanding of how the wide range of these traditions influence Latino immigrant couple functioning.

Spirituality and Psychological Aggression

There is some limited evidence that spirituality may protect against the use of psychological aggression. Perceptions about the sanctity of marriage, sacred nature of marriage, and beliefs in the manifestation of God in marriage are associated with less marital conflict, greater verbal collaboration, less use of verbal aggression and stalemate in relationships (Mahoney et al., 1999). Additional research indicates that religiosity, which is closely related to spirituality, appears to be a protective factor against perpetration of domestic violence (Ellison & Anderson, 2001; Ellison et al., 1999; Ellison et al., 2007). Because psychological aggression and physical aggression are so closely related, it is possible that the protective power that religion has against the perpetration of domestic violence may also protect against psychological aggression (Frye & Karney, 2006; Murphy & O'Leary, 1989; Zarza et al., 2009). Regular religious attendance has been found to be negatively linked with perpetration of domestic violence for men who attend once a week and women who attend once a month by both self and partner reports (Ellison & Anderson, 2001; Ellison et al., 1999). These findings remained significant after controlling for social support, abuse of drugs and alcohol, low self-esteem, and depression (Ellison & Anderson, 2001). Like religiosity, spirituality may have a similar protective influence against physical and psychological aggression.

A study conducted by Ellison and colleagues (2007) investigated the relationship between religious involvement and perpetration of intimate partner violence among white, Latino, and African Americans. Religiosity was found to protect against perpetration of domestic violence with a particularly strong effect for Latino men. The data used in the study was

collected in 1987-1988 from a sample of over 6,000 individuals. To determine perpetration of domestic violence, participants were asked if an argument during the prior year had “become physical” and if the participant answered yes, they were asked how many fights with their partner led to hitting, shoving, or throwing things. Partner reports were also obtained and combined with self reports. Participants were then classified as either reporting perpetration of violence or not perpetrating violence. Religious involvement was operationalized as frequency of attendance, which is the most common way of measuring religiosity in studies of domestic violence (Ellison et al., 2007). This finding that religiosity protects Latino men from perpetrating domestic violence provides a good indication that spirituality may also protect Latino immigrant couples from perpetrating psychological aggression, as physical and psychological aggression are likely to happen at the same time and psychological aggression may predict the use of physical violence in Latino immigrant couples (Frye & Karney, 2006; Murphy & O’Leary, 1989; Zarza et al., 2009).

Spirituality and Supportive and Common Dyadic Coping

Though the relationships between spirituality and supportive and common dyadic coping have not been empirically validated, spirituality has been shown to be conducive to better individual and relationship outcomes. Spirituality is negatively correlated with depression and anxiety, and positively correlated with quality of life (Kaczorowski, 1989; Nelson et al., 2009; Sawatzky et al., 2005). Spiritual well-being is also positively associated with marital adjustment, relationship satisfaction, communication, conflict resolution, quality of sexual relationship, relationships with families and friends, and empathic understanding (Giblin, 1997; Roth, 1988). Mahoney et al. (1999) found that beliefs about the sanctity of marriage were associated with

more verbal collaboration in couples. Spirituality has been found to be associated with better individual outcomes and stronger marriages.

Research on religiosity has shown the positive influence of religiosity on individual outcomes. Religious individuals are better able to cope with stress, less likely to be depressed, commit suicide, or have drug and alcohol problems (Gallup & Lindsay, 1999). Religiosity has also been found to aid in individual coping, resulting in less depressed mood and higher quality of life (Koenig, Pargament, & Nielsen, 1998; Chang, Noonan, & Tennstedt, 1998). According to a literature review by Mickley, Carson, and Soeken (1995), “Studies show that individuals who demonstrate high levels of intrinsic religiousness tend to have less depression, anxiety, and dysfunctional attention seeking, and high levels of ego strength, empathy, and integrated social behavior” (p. 345).

In addition to positive individual outcomes, like spirituality, religiosity is associated with better family outcomes. Seventy five percent of Americans reported in Gallup surveys that their family relationships have been strengthened by the presence of religion in their home (Gallup & Lindsay, 1999). Sullivan (2001) found that more religious newlywed couples had less tolerance for divorce, higher commitment and more willingness to seek help than less religious couples. Religiosity has been found to be positively associated with marital satisfaction, couples who attend church together more frequently report higher marital quality and marital happiness, and shared religious beliefs and devotional activities held within the home are associated with relationship quality (Ellison, Burdette, & Wilcox, 2010; Myers, 2006; Sullivan, 2001). In marital relationships, partners’ individual religiosity has been found to be strongly correlated (Mahoney et al., 1999; Sullivan, 2001). Evidence from qualitative studies indicates that there may be a process by which religiosity aids couples in managing conflict in their relationship (Lambert &

Dollahite, 2006). These findings indicate that religiosity has a positive influence on couple outcomes and support the positive influence that spirituality has on couple relationships.

Research on the ways in which religiosity encourages positive relationship behaviors supports the possibility of a relationship between spirituality and supportive and common dyadic coping. Wilcox and Wolfinger (2008) explain that “religious attendance appears to increase the incidence of interpersonal behaviors conducive to good behaviors, such as affection” (pp. 839-840). Research on empathic responding has found that the attachment of greater personal significance to family stressors results in increased use of empathic responding by both husbands and wives (O’Brien et al., 2009). Religion may serve to emphasize the importance of couple and family relationships, creating more personal significance and therefore increased empathic responding within the dyad. Religious attendance has also been found to be positively associated with partners’ supportive behaviors (Wilcox & Wolfinger, 2008). These “good relationship behaviors” may occur because religiosity places a high value on other centered behaviors, selflessness and unconditional love (Lambert & Dollahite, 2006), creating the motivation to extend support to partners during times of stress, and thus possibly increasing the participation in supportive and common dyadic coping.

Qualitative studies also make the connection between religiosity and partner support. Hamama-Raz, Hemmendinger, and Buchbinder (2010) found in a qualitative study of religious couples after spontaneous abortion that, “Men who demonstrated the ability to bypass their own pain and made an effort to respond to their partner’s distress motivated the women’s exit from the isolation cycle, and contributed to a sense of dyadic cohesion and to creating meaning for their ‘togetherness’” (p. 251). Religious virtues may encourage partners to focus on the well being of their partner and to be supportive during times of stress, ultimately increasing the use of

supportive and common dyadic coping. Spirituality may have a similar influence on couple functioning.

In addition to increasing the use of supportive and common dyadic coping by encouraging partners to be supportive of one another and emphasizing the importance of marriage, spirituality may aid a partner in his or her individual coping, which may then contribute to his or her use of supportive and common dyadic coping. Spirituality has been found to aid in individual coping by buffering the relationship between stress, negative affect and physical symptoms (Kim & Seidlitz, 2002). Additionally, Ka'opua and colleague's (2007) qualitative study of how elderly wives of husbands diagnosed with prostate cancer use spirituality as a resource which then helps them to support their spouse. The study found that, "spirituality functioned as a cultural force providing a way of viewing the self in relation to evolving life events that was subsequently translated into ways of coping" (p. 36). Participants were then able to participate in adaptive work to preserve intimacy, described as "affirmation of the marital bond, efforts to understand problems from the husband's perspective, and finding new ways to share intimacy" (p. 34). If a partner has adequate individual coping skills, they may be better equipped to manage their own stress so they have more available emotional resources to support their partner. Thus, in addition to emphasizing the importance of marriage and good relationship behaviors, spirituality may help partners to cope individually which may afford them the emotional energy to engage in supportive and common dyadic coping.

Conclusion

This literature review describes the current theory and research related to the context of the Latino population in the United States, psychological aggression, supportive and common dyadic coping, and spirituality. Bodenmann's Systemic-Transactional model of coping (2000,

2005) provides a theory by which to understand how the stress that Latino immigrants face on a daily basis may spill over into the couple relationship, creating conflict which may escalate into the use of psychological aggression. Spirituality may be a protective factor that reduces a couple's engagement in psychological aggression and increases partners' use of supportive and common dyadic coping by emphasizing the importance of providing partner support, while also helping partners to adequately cope with their own stress, allowing them to better engage in supportive and common dyadic coping (Chang et al., 1998; Lambert & Dollahite, 2006).

Supportive and common dyadic coping may also prove to be a protective factor against psychological aggression as partners who engage in these types of coping may be better able to soothe their distressed counterpart, preventing escalation of conflict into psychological forms of aggression and then possibly into physical aggression (Murphy, & O'Leary, 1989; Zarza et al., 2009). By employing the Actor-Partner Interdependence Model in order to control for the interdependence of variables and to explore actor and partner effects, these protective factors will be explored.

Chapter 3: Manuscript

Abstract

This study examined whether spirituality and dyadic coping protected partners from becoming psychologically aggressive toward each other using secondary, cross-sectional data from a sample of 104 Latino couples living in the Washington, DC metropolitan area. The model tested was based on Bodenmann's Systemic Transactional model (1997) and incorporated an Actor-Partner Interdependence Model approach (Kenny, Kashy, & Cook, 2006). SEM results indicated that each partner's spirituality had a direct negative effect on their own psychological aggression, and a direct positive effect on their own supportive dyadic coping, and the couple's common dyadic coping. Each partner's spirituality also had an indirect effect on both partners' psychological aggression through increases in the couple's common dyadic coping. Supportive dyadic coping was not found to mediate the relation between spirituality and psychological aggression. Limitations of the study as well as clinical, programmatic, and research implications are discussed.

The Protective Roles of Spirituality, Supportive and Common Dyadic Coping Among Latino
Immigrant Couples in the US

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The Hispanic population in the United States has been rapidly growing, rising from over 35,300,000 individuals, and comprising 13% of the total population in 2000, to nearly 50,500,000 people, accounting for 16% of the population in 2010 and over half of the population growth over the past decade (Humes, Jones, & Ramirez, 2011). It is projected that in 2050 more than 1 in 4 individuals in the US will be Hispanic (Pew Hispanic Center, 2008). A large proportion of the Hispanic population continues to be first generation immigrants. According to the Pew Hispanic Center (2009) 18,000,000 Hispanics in the U.S. are immigrants, comprising 37.4% of the Hispanic population in the country. Past traumatic experiences in their countries of origin (e.g., war, political torture and/or persecution, abuse) and in their immigration journey, as well as the challenges involved in adjusting to a new context in the U.S. are among some of the challenges that many Latino immigrant couples face (Arbona et al., 2010; Michultka, Blanchard, & Kalous, 1998; Negy, Schwartz, & Reig-Ferrer, 2009; Zamichow, 1992).

Psychological aggression is common among Latinos and both men and women engage in it (Falconier, McCollum, Wainbarg, & Austin, 2010; Hazen & Soriano, 2007). Most findings regarding psychological aggression among Latinos come from studies using women as informants, making it difficult to determine prevalence rates of female to male psychological aggression, though rates of male to female psychological aggression have been reported to be as high as 82.5% (Hazen & Soriano, 2007). The various stressors that Latino couples face have been argued to be among the most important factors contributing to the physical and

psychological aggression found in this population (Klebens et al., 2007; Lewis, West, Bautista, Greenberg, & Done-Perez, 2005; Raj & Silverman, 2002). This is consistent with Bodenmann's Systemic-Transactional Model (STM; 1997), according to which external stressors may spill over into a couple's relationship, putting the couple at risk for conflict escalation and aggression. It is also in agreement with studies that have found an association between stress and aggression in other populations (Bodenmann, Meuwly, Bradbury, Gmelch, & Ledermann, 2010; Frye & Karney, 2006).

Psychological aggression, defined as "both coercive verbal behaviors (e.g., insulting or swearing at partner) and coercive nonverbal behaviors that are not directed at the partner's body (e.g., slamming doors or smashing objects)" (Murphy & O'Leary, 1989, p. 579), is detrimental to individuals, couples and families. Within the Latino population, psychological aggression has been associated with depression, hostility, and somatization among women (Hazen, Connelly, Soriano, & Landsverk, 2008) and appears to be the initial type of aggression experienced, prior to escalation into physical and sexual aggression (Zarza, Ponsoda, & Carillo, 2009). In other populations psychological aggression has also been associated with negative relational outcomes such as lower marital satisfaction (Panuzio & DiLillo, 2010) and increased likelihood for leaving or wanting to leave the relationship (Follingstad, 2009). Additionally, children who are exposed to psychological aggression in their homes seem to be at an increased risk of exhibiting violent and aggressive behaviors (Ferguson, San Miguel, & Hartley, 2009).

Despite the high percentage of Latino immigrants in the US, the high prevalence of psychological aggression, and the risks that psychological aggression presents to individuals, couples, and families, little is known about what factors may protect Latino immigrant couples from engaging in this form of aggression. Understanding protective factors that may reduce these

couples' engagement in psychological aggression may contribute to the development of clinical and programmatic approaches aimed at preventing and reducing this type of aggression and its potential escalation into physical and sexual violence.

Quantitative studies show that Latinos frequently turn to spirituality to cope with stressors (e.g., cancer, arthritis), indicating that spirituality might be an easily accessible and culturally sensitive protective factor (Abraído-Lanza, Vasquez, & Echeverria, 2004; Culver, Arena, Antoni, & Carver, 2002; Culver, Arena, Wimberly, Antoni, & Carver, 2004; Fitchett et al., 2007), especially for immigrants who may find continued participation in their spiritual practices and traditions after immigrating to a new country to be comforting and to give a sense of consistency during times of transition (Falicov, 1998). Even though spirituality has been associated negatively with depression and anxiety, and positively with quality of life (Kaczorowski, 1989; Nelson et al., 2009; Sawatzky, Ratner, & Chiu, 2005), the idea that a spiritual orientation might protect Latino partners from becoming psychologically aggressive toward each other has not yet been explored. In addition, and consistent with STM, studies of couples' coping processes with non-Latino populations have found that one partner's efforts to support the partner experiencing stress (Supportive Dyadic Coping, SDC) and the couple's conjoint efforts to cope with common stressors (Common Dyadic Coping, CDC) are positively associated with marital quality, marital satisfaction, relationship stability, and improved behavior during conflicts (Bodenmann & Cina, 2006; Bodenmann, Pihet, & Kayser, 2006; Papp & Witt, 2010). Despite the Latino culture's strong value for family support and cooperation (Falicov, 1998), no study has yet examined whether these two positive forms of dyadic coping can also protect Latino couples from engaging in psychologically aggressive behaviors toward each other. Accordingly, this study examined the roles of spirituality, SDC, and CDC as potential protective

factors against psychological aggression among first generation Latino immigrant couples living in the U.S. from an STM perspective. The study also incorporated an Actor-Partner Interdependence Model (APIM, Kenny et al., 2006) approach in order to examine and control for partners' interdependence.

The Systemic-Transactional Model

STM (Bodenmann, 1997) is based on Lazarus and Folkmans (1984) transactional approach in which stress is created by the interaction between the resources that an individual has to manage stress and the demands on those resources that are experienced. STM extends the work of Lazarus and Folkman (1984) by examining stress processes in the couple's context created by the interplay between partners' behaviors. It describes how the stress signals from one partner elicit a response from the other partner. These signals and responses influence both individuals and the couple relationship. STM posits that individuals first use individual coping methods, and then dyadic coping methods if individual efforts are not sufficient to manage stress. Dyadic coping involves the communication of stress verbally or nonverbally, followed by the partner's response to these expressions. Possible responses include not responding to the communication, becoming overwhelmed by the partner's stress, or engaging in a form of negative or positive dyadic coping. The purpose of dyadic coping is "the reduction of stress for each partner and the enhancement of relationship quality" (p. 41) which occur because dyadic coping "fosters a feeling of *we-ness*—that is, mutual trust, reliability, commitment, and the perception that the relationship is a supportive resource in difficult circumstances" (Bodenmann, 2005, p. 41). Negative dyadic coping forms include offering support to a partner in a hostile, ambivalent and/or superficial way (Bodenmann, 2005). Positive forms of dyadic coping include supportive, delegated, and common coping. Supportive dyadic coping occurs when one partner

offers support in the forms of “practical advice, empathic understanding, helping the partner to reframe the situation, communicating a belief in the partner’s capabilities, or expressing solidarity with the partner” (p. 38). Delegated dyadic coping occurs when a partner takes over responsibilities normally handled by the stressed partner. Common dyadic coping occurs when partners mutually engage in “joint problem solving, joint information seeking, sharing of feelings, mutual commitment, or relaxing together” (p. 38). The inclusion of common dyadic coping makes Bodenmann’s model unique from any other stress and coping model because it includes not only the social support offered from one partner to another, which is present in other dyadic coping models (e.g., the empathic responding model; O’Brien, DeLongis, Pomaki, & Zwicker, 2009; congruence model; Revenson, Abraído-Lanza, Majerovitz, & Jordan, 2005) but also joint partners efforts to cope with common stressors. Positive forms of dyadic coping have been found to predict better relationship functioning (Bodenmann & Cina, 2006; Bodenmann et al., 2006; Papp & Witt, 2010).

Actor-Partner Interdependence Model (APIM)

Partners’ similar backgrounds, mutual influence, and shared context may result in non-independence between partners’ responses, and therefore, biased statistical results when analyzing couples’ data (Kenny, 1996). APIM (Kenny et al., 2006) allows for the control and examination of this interdependence among partners’ variables by including the analysis of both actor and partner effects. Despite the dyadic nature of Bodenmann’s model most studies based on his conceptualizations (Bodenmann & Cina, 2006; Bodenmann, Ledermann, & Bradbury, 2007; Bodenmann et al., 2010; Bodenmann et al., 2006), have either analyzed partners’ behaviors separately or have had data from only one partner, failing to examine and control for the interdependence between partners’ variables. With the exception of Papp & Witt’s study

(2010), the current study is the only other study from a STM perspective that has incorporated an APIM approach. This study was also one of the first to explore psychological aggression among Latino immigrant couples in the United States.

Psychological Aggression and Dyadic Coping

Psychological aggression has been reported to happen commonly among Latino couples (Falconier et al., 2010; Hazen & Soriano, 2007). Prevalence rates among Latinas living in the US were reported to be 82.5%, with 82.2% experiencing less severe and 33.9% experiencing severe psychological aggression (Hazen & Soriano, 2007). Though the prevalence rates of female to male psychological aggression among Latinos have not been investigated, findings have indicated that Latino women perpetrate as much if not more partner violence than men (for a review see Klevens, 2007). No study has yet examined dyadic coping processes in Latino couples. However, findings from studies on other populations suggest that positive forms of coping are associated with positive relational outcomes, indicating that they might protect couples from engaging in psychological aggression.

Common dyadic coping and supportive dyadic coping have been found to predict higher marital quality and greater relationship stability (Bodenmann & Cina, 2006; Bodenmann et al., 2006). Regarding psychological aggression, a recent study conducted by Bodenmann and colleagues (2010) found that supportive and common dyadic coping were negatively related to verbal aggression. The study concluded that “recognizing the link between context and verbal aggression is important, because it suggests that some individuals and couples who are stressed will not become verbally hostile if they are able to effectively reduce or manage stress” (p. 410).

Even though dyadic coping processes have not been studied in Latino populations, it is likely that Latino couples rely on positive forms of dyadic coping given their strong family

orientation, commonly referred to as *familismo*. This concept refers to the emphasis of the Latino culture on the importance of extended family ties, family rituals, interdependence, collective efforts to support one another, and cooperation (Falicov, 1998). Moreover, the strong family support found in this culture has been found to protect individuals' physical and mental health (Mulvaney-Day, Alegría, & Sribney, 2007), which suggests the possibility that supportive and common dyadic coping strategies may be present in Latino couples and may protect them from engaging in psychologically aggressive behaviors toward one another.

Psychological Aggression and Spirituality

Spirituality has been defined as “an overarching construct” that “refers to a dimension of human experience involving personal transcendent beliefs and practices, within or outside formal religion, through family and cultural heritage, and in connection with nature and humanity” (Walsh, 2009, p. 5). The Latino population has been described as highly spiritually oriented (Falicov, 1998; 2009; Fitchett et al., 2007) with more than 90% of Hispanics identifying with a specific religion (Pew Hispanic Center, 2007). Among Latinos, spirituality encompasses many different traditions and beliefs including Christian beliefs in a divine and all powerful God, Espiritismo (the belief in an invisible world of both good and evil spirits), and Santeria (the belief in priests and priestesses who heal and perform rituals) (Falicov, 2009). Spirituality plays an important role in the daily lives of Latinos, most of whom frequently rely on God's power, seek divine intervention, pray, and participate in expressions of faith (Walsh, 2009). Latinos report participating in high levels of religious coping which has been found to be related to better psychological well-being, and better physical health (Abraído-Lanza et al., 2004; Finch, 2003). Spirituality has been found to protect Latinos when coping with stressors such as cancer and

arthritis (Abraído-Lanza et al., 2004; Culver et al., 2002; Culver et al., 2004). Additionally, Latinos have been found to be among the more religious ethnic groups (Fitchett et al., 2007).

Spirituality has been found to have a positive influence on both individual and couple functioning. It has been found to aid in individual coping by buffering the relationship between stress, negative affect and physical symptoms (Kim & Seidlitz, 2002). Spirituality has also been associated negatively with depression and anxiety, and positively with quality of life (Kaczorowski, 1989; Nelson et al., 2009; Sawatzky et al., 2005). At a couple's level, a partner's spirituality has been found to be a positive predictor of marital adjustment, relationship satisfaction, communication, conflict resolution, quality of sexual relationship, relationships with families and friends, and empathic understanding (Giblin, 1997; Roth, 1988). In addition to functioning as an individual coping mechanism, perceptions about the sanctity of marriage, sacred nature of marriage, and beliefs in the manifestation of God in marriage are associated with less marital conflict, greater verbal collaboration, and less use of verbal aggression and stalemate in relationships (Mahoney et al., 1999).

Even though the research on the relationship between spirituality and psychological aggression has been limited, findings from studies on physical aggression suggest that spirituality might protect couples from psychological aggression as well. Various studies have found that religiosity decreases the likelihood of physical violence in relationships (Ellison & Anderson, 2001; Ellison, Bartowski, & Anderson, 1999), even after controlling for social support, abuse of drugs and alcohol, low self-esteem, and depression (Ellison & Anderson, 2001). It has been argued that the emphasis that spiritual individuals place on the sacred nature of marriage may encourage partners to be more forgiving, accepting, and willing to minimize conflicts and make positive attributions of their partner, all of which are conducive to conflict

resolution, as well as using religious coping methods which ultimately aid couples in de-escalation of conflict, preventing psychological aggression (Mahoney et al., 1999).

Among the Latino population, one study found that male's religiosity was negatively associated with his physical aggression (Ellison et al., 2007). This finding together with those that have found spirituality associated with better relational functioning in non-Latino populations and the high spiritual orientation among Latinos, suggest that spirituality might protect Latino partners' from becoming psychologically aggressive toward each other. Moreover, from a STM perspective spirituality might be considered an individual coping strategy that may prevent partners from engaging in psychological aggression (Bodenmann et al., 2010).

Spirituality and Dyadic Coping

Though the relationships between spirituality and supportive and common dyadic coping have not yet been examined in any population, spirituality has been shown to be conducive to better individual and relationship outcomes. Spirituality is negatively correlated with depression and anxiety, and positively correlated with quality of life (Kaczorowski, 1989; Nelson et al., 2009; Sawatzky et al. 2005), marital adjustment, relationship satisfaction, communication, conflict resolution, quality of sexual relationship, relationship with families and friends, and empathic understanding (Giblin, 1997; Roth, 1988). Additionally, Mahoney et al. (1999) found that beliefs about the sanctity of marriage were associated with more verbal collaboration in couples, indicating that the spiritual significance given to marriage may increase a couple's use of supportive behaviors such as supportive and common dyadic coping.

Research on the ways in which religiosity encourages positive relationship behaviors supports the possibility of a relationship between spirituality and supportive and common dyadic coping. In fact, religious attendance has been found to be positively associated with partners'

supportive behaviors (Wilcox & Wolfinger, 2008). These healthy relationship behaviors may occur because religiosity places a high value on other centered behaviors, selflessness and unconditional love, creating the motivation to be respectful and affectionate, and to extend support to partners during times of stress, thus possibly increasing participation in supportive and common dyadic coping (Lambert & Dollahite, 2006; Wilcox & Wolfinger, 2008).

Consequently, it is possible that spirituality might protect couples from psychological aggression directly and indirectly through increases in their SDC and CDC behaviors.

Conceptual Model

The review of the empirical and anecdotal literature supports the conceptual model tested in this study with Latino couples. Consistent with STM, in this model spirituality is viewed as an individual coping strategy that protects the couple from engaging in psychological aggression directly and indirectly through partners' use of supportive and common dyadic coping (Figure 1).

The conceptual model incorporates an APIM approach by including both partners' variables within the same model, which allows for the examining of and controlling for partners' interdependence. Consistent with the APIM approach, the model includes positive associations between partners' psychological aggression, SDC, and spirituality. Empirical evidence supports the inclusion of such associations. Partners' psychological aggression has been found to be positively associated (e.g., Falconier & Epstein, 2010; Panuzio & DiLillo, 2010), as one partner's anger may provoke anger and escalation in the other partner, which then creates additional provocation and escalation. Similarly, partners' use of SDC has also been found to be positively related as one partner's offer of support may encourage the other partner to offer support in return (Papp & Witt, 2010). There is also evidence that both partners' spirituality is positively related (Mahoney et al., 1999; Sullivan, 2001), possibly due to selection effects during

the spousal selection process. The following is a list of hypotheses that summarize the conceptual model depicted in Figure 1.

Hypotheses

- 1) Each partner's spirituality will have a direct, negative effect on their own use of psychological aggression.
- 2) Each partner's supportive dyadic coping will mediate the relationship between their own spirituality and their partner's psychological aggression. Each partner's spirituality will have a direct, positive effect on their supportive dyadic coping, which in turn will have a direct, negative effect on the other partner's psychological aggression.
- 3) The couple's common dyadic coping will mediate the relationship between each partner's spirituality and each partner's psychological aggression. Each partner's spirituality will have a direct, positive effect on the couple's common dyadic coping, which in turn will have a direct, negative effect on each partner's psychological aggression.
- 4) Partners' levels of psychological aggression, supportive dyadic coping, and spirituality will be positively related to each other.
- 5) Common dyadic coping will be positively related to each partner's supportive dyadic coping.

Method

Design of the Study

This study was a secondary analysis of existing, cross-sectional data collected by Dr. Mariana Falconier at Virginia Tech in 2009. The data were originally drawn from a community sample of Latino couples to explore the influence of stress on relationship functioning.

Study Participants

Participants from the original data collection included 114 heterosexual Latino couples from the metro Washington D.C. area. Inclusion criteria included that both partners must be Latino, at least 18 years old, living together for at least one year, and currently living together. Purposive and snowball sampling techniques were used to locate participants. Participants were recruited from community outpatient mental health clinics, private psychotherapists' offices, churches, community agencies, festivals, and medical offices through the use of English and Spanish fliers. Given that this study focused on first generation Latino immigrant couples, only data from couples in which both partners were foreign born and had immigrated to the US after turning 10 years old was used. To achieve the desired sample, 10 couples were excluded leaving a sample of 104 couples.

The Latino immigrant population in the Washington D. C. metropolitan area is unique and under-researched. In Montgomery County, the Hispanic community is comprised of 28.9% Salvadorans, 9.9% Mexicans, and 6.3% Puerto Ricans, whereas nationally the Latino population is 64% Mexican, and 9% Puerto Rican (US Census Bureau, 2005, 2006). Additionally, there tend to be more first generation immigrants that are younger in the metro DC area than in other areas of the U.S. where Hispanics are more established (US Census Bureau, 2006).

In the sample used in this study, women's average age was 39.43 ($SD = 7.87$) and men's average age was 40.64 ($SD = 8.68$). All men and women were Latin American immigrants with men averaging 14.32 ($SD = 8.03$) years in the United States and women averaging 12.37 ($SD = 7.43$) years. Among the male participants, 32.7% were born in El Salvador, 12.5% in Peru, 12.5% in Mexico, 10.6% in Guatemala, and 31.7% in other Latin American countries. Among the female participants, 32.7% were born in El Salvador, 15.4% in Peru, 11.5% in Mexico,

11.5% in Guatemala, and 28.9% in other Latin American countries. Within the sample 76 couples (73.1%) were married to their partners while 28 couples (26.9%) were cohabiting. Couples had been living together for 12.09 years on average ($SD = 7.66$) and were living with an average of 1.84 ($SD = 1.22$) children under the age of 21 in their household. Within the sample 51% of couples met in the United States while 49% met in Latin American countries.

In the sample 21.2 % of men and 24% of women had obtained at least a bachelor's degree while 27.9% of men and 30.7% of women did not complete high school. The majority of men (84.6%) and women (61.5%) were employed. Combined income of over \$50,000 was reported by 47.1% of couples, income ranging from \$20,000 to \$49,999 was reported by 31.7% of couples, and income below \$19,999 was reported by 14.4% of couples. When considering combined income, it is important to remember that in 32.4% of couples at least one partner reported that there was another adult contributing to the household income.

Procedure

Interested participants received packets which included research consent forms, an instruction sheet, and a self-report questionnaire for each partner. All participants preferred to complete the assessments in Spanish. Participation was voluntary and written informed consent was obtained from each participant. Each partner was instructed to complete their individual written questionnaires separately and upon returning questionnaires and consent forms each participant received a \$25 gift card. Three digit numbers were assigned to each participant couple in order to maintain confidentiality. The data were then entered into SPSS and prepared for analysis. Identifying contact information and names were excluded from the database and original assessment documents were filed in a locked cabinet

Instruments

The current study used several scales selected from those collected in the original study. Except for the Conflict Tactics Scale-Revised (CTS-R, Straus, Hamby, Boney-McCoy, & Sugarman, 1996), whose translation was provided by Western Psychological Services, all the other measures were translated into Spanish by a native speaker and then back translated into English. Both versions, the original English version and the back translation, were then compared for accuracy. Participants completed a demographics questionnaire (age, marital status, ethnicity, family and household composition, education, employment, etc.) which was originally written in Spanish by a native speaker.

Psychological aggression. The Spanish version of the Conflict Tactics Scale-Revised was used in this study (Straus et al., 1996). The CTS-R is a 39 item measure composed of the following subscales: physical assault, psychological aggression, negotiation, injury, and sexual coercion. The eight-item psychological aggression subscale was employed in the current study. Multiple participants with a high value response wrote next to the response that they would call their partner ugly or fat in a “caring” way. Given that the term “gorda” and “gordita” can be used in the Latino cultural in an affectionate way, the item *My partner called me fat or ugly* was eliminated from the scale as it was not necessarily an indicator of psychological aggression for this population. Additionally, this item exhibited the lowest factor loading (.48) for each partner. The items include a participant’s report of their own, as well as their partner’s frequency of use of psychologically aggressive behaviors. The self report items include items such as *I insulted or swore at my partner*. Partner report questions follow each self report question and include items such as *My partner did this to me*. Possible answers and their original coding include (0) *this has never happened*, (1) *not in the past year but it did happen*, (2) *once in the past year*, (3) *twice in*

the past year, (4) 3-5 times in the past year, (5) 6-10 times in the past year, (6) 11-20 times in the past year, and (7) more than 20 times in the past year. Items were then recoded as follows: 0=0, 1=0, 2=1, 3=2, 4=3, 5=4, 6=5, 7=6, combining original response options 0 and 1 into 0. This type of scoring was suggested by Newton, Connelly, and Landsverk (2001) because alternate methods based on the midpoint of the categories could increase the skewness and kurtosis of the data. Given that answers on one's own level of aggression may be affected by a social desirability bias, only the partner's report was used to assess each partner's psychological aggression. This scale has been frequently used in the literature to measure psychological aggression (Panuzio & DiLillo; 2010; Ramisetty-Mikler, Caetano, & McGrath 2007) and has been found to have acceptable internal consistency reliability ranging from .72 to .79 (Ramisetty-Mikler et al., 2007; Straus et al., 1996) and to have good construct and discriminant validity (Straus et al., 1996). In this study, the internal consistencies of the partner's report of male and female psychological aggression scales were .83 and .86.

Supportive dyadic coping. The Supportive Dyadic Coping Subscale from the Dyadic Coping Inventory (DCI; Bodenmann, 2000) was used to measure SDC. The DCI is a self-report questionnaire with 37 items with nine different subscales: stress communication by oneself and by partner, supportive dyadic coping by oneself and by partner, delegated dyadic coping by oneself and by partner, negative dyadic coping by oneself and by partner, common dyadic coping, and an overall evaluation of coping. Responses are rated on a Likert-type scale ranging from 1 (*very rarely*) to 5 (*very often*). The DCI has been increasingly used over the past ten years to measure couple's coping (for a review see Bodenmann, 2008).

The Supportive Dyadic Coping Subscale is comprised of five items that assess the way in which one partner provides emotion focused (e.g. showing empathy, being on the same side,

listening) and problem focused (e.g. helping to analyze the situation and see it in a different light) support (Bodenmann, 2000) to the other partner when he or she is under stress. Consistent with the strategy used for the CTS-R, only the partner's report was used to measure each partner's supportive behavior. Partner report items include items such as *My partner shows empathy and understanding to me*. Answers were reported on a five-point likert scale with options including (1) *very rarely*, (2) *rarely*, (3) *sometimes*, (4) *often*, and (5) *very often*. A five-item version of the supportive dyadic coping by partner scale has been used previously in the literature and has been found to have appropriate internal consistency reliability of between .82 and .83 in German, Italian, and French samples (Lederman et al., 2010). In this study, the five-item version of the supportive dyadic coping of the partner scale was found to have an internal consistency reliability of .89 for both males and females.

Common dyadic coping. The five-item Common Dyadic Coping subscale from the DCI was used to assess CDC. The CDC subscale assesses partners' conjoint efforts to cope with stressors that affect both partners. Items include emotion (e.g. relaxing together) and problem focused coping strategies (e.g. searching for solutions). An example of an item from this scale is *We try to cope with the problem together and search for ascertained solutions*. Value responses are the same as the ones described for the SDC subscale. However, the coding involved averaging both partners' responses in order to capture both partners' perceptions of common coping. T-tests comparing male and female reports of the couple's engagement in CDC indicated no significant difference ($MD = .34$, $t(91) = .68$, $p = .50$). Past studies have reported the Common Dyadic Coping Subscale to yield an internal consistency of .83 (Bodenmann et al., 2004; Bodenmann et al., 2006). In the current study male and female common dyadic coping scales exhibited internal consistency reliabilities of .94 and .92 respectively.

Spirituality. Participants' level of spirituality was assessed through the question *How important is religion or spirituality to you in your daily life?* Answer options included (4) *very important*, (3) *important*, (2) *somewhat important*, (1) *not very important*, and (0) *not at all important*. Though it would be preferable to have a more extensive measure of spirituality, because this study is a secondary analysis of existing data, this was not possible. Nonetheless, the use of a measure of religiosity comprised of one or two variables is common in the literature as demonstrated by a review of research studies that explored the role of religion in marital and parent-child relationships which found that approximately 77% of quantitative studies depended on such one and two item measures (Mahoney, 2010).

Results

Path Model Variable Characteristics for Women and Men

T-tests for paired samples were conducted for each of the path model variables in order to assess gender mean differences (Table 1). Overall, the sample reported high levels of spirituality (Males: $M = 3.13$, $SD = 1.03$; Females: $M = 3.41$, $SD = .85$), moderate levels of SDC (Males: $M = 11.56$, $SD = 5.23$; Females: $M = 13.03$, $SD = 4.96$), and low levels of psychological aggression (Males: $M = 6.39$, $SD = 7.79$; Females: $M = 4.86$, $SD = 6.37$). Compared with men, women's level of spirituality ($MD = 0.28$, $t(87) = -2.59$, $p = .01$) and use of SDC ($MD = 5.28$, $t(88) = 2.63$, $p = .01$) were statistically significantly higher, and they were significantly less psychologically aggressive toward their partners ($MD = -1.53$, $t(86) = 2.06$, $p = .04$). Bivariate correlations among all factors are reported in Table 2.

Multivariate Analysis

Structural Equation Modeling (SEM) using EQS 6.1 and the maximum likelihood estimation method were employed to test the conceptual model. First, three separate

Confirmatory Factor Analyses (CFA) were conducted for the three measurement models, a two-factor model (male and female) for psychological aggression, a two-factor model (male and female) for supportive dyadic coping, and a one-factor model for common dyadic coping. In the first two models male and female factors were related to each other. Once goodness of fit was achieved in each measurement model, the three measurement models were incorporated into the structural model and the full model was evaluated. Given there were missing data (4.3%) and the fact that the data were not multivariately normally distributed (Yuan, Lambert, and Fouladi's (2004) normalized coefficient = 15.92), model fit in the measurement and structural models were evaluated through robust statistics. Model fit was assessed by computing the robust Yuan-Bentler scaled chi-square (χ_{YB}^2), an adjusted chi-square statistic used for non-normal and incomplete data (Yuan & Bentler, 2000). A statistically significant chi-square (χ_{YB}^2) value means that the sample distribution differs significantly from the distribution expected from the proposed model and therefore, the model should be rejected. Given the χ^2 -test's sensitivity to sample size the recommended ratio of no more than 3:1 for the χ_{YB}^2/df ratio was used to evaluate model fit (Kline, 1998). In addition, the three fit indices recommended by Hu and Bentler (1999) were used to assess model fit: Bentler's Comparative Fit Index (CFI), the Standardized Root Mean Square Residual (SRMR), and the Root Mean Square Residual of Approximation (RMSEA). CFI > .96; SRMR < .08, RMSEA < .06 indicate good model fit. Robust CFI and RMSEA values were used in this study. Respecifications of CFA and structural models were based on the results of the Lagrange Multiplier (LM) test, theoretical and cultural considerations, and findings from previous studies.

Given the limited sample size, length of relationship was the only control variable included in this study. Length of relationship was controlled for because it has been found to be

correlated with psychological aggression, as well as positive and common dyadic coping (Capaldi & Crosby, 1997; Feldman & Broussard, 2006).

CFAs for Male and Female Psychological Aggression

As Figure 2 shows, each of the seven items that measured psychological aggression was used as the observed variables in the CFA for psychological aggression. This measurement model included a covariance between both latent constructs (male and female psychological aggression) and covariances between the errors of both partners' same observed variables so that the interdependence between partners' variables could be controlled for. The fit indices for this model did not indicate a good fit to the data ($\chi_{AB}^2(69) = 86.00.65$, $p = .08$; robust CFI = .95; SRMR = .96; robust RMSEA = .04 (.00, .07). An examination of the results from the LM test and theoretical considerations led to the inclusion of one more covariance for each partner in the model, relating the error terms of the shouting/yelling and threatening to hit/throw something observed variables. The resulting model showed a significantly improved fit ($\Delta \chi_{AB}^2(2) = 9.18$, $p < .01$) and this was the model that was kept as it also indicated a good fit to the data, $\chi_{AB}^2(67) = 77.82$, $p = .17$; robust CFI = .97; SRMR = .09; robust RMSEA = .03 (.00, .07). Standardized factor loadings for all observed variables ranged from .51 to .87.

CFAs for Male and Female Supportive Dyadic Coping

Each of the five items that measured supportive dyadic coping was used as the observed variables in the CFA for supportive dyadic coping. This measurement model (Figure 3) included a covariance between both latent constructs (male and female supportive dyadic coping) and covariances between the errors of both partners' same observed variables so that the interdependence between partners' variables could be controlled for. The fit indices for this model indicated a good fit to the data, $\chi_{AB}^2(29) = 44.62$, $p = .03$; robust CFI = .97; SRMR = .06;

robust RMSEA = .07 (.000, .107). Standardized factor loadings for all variables ranged from .54 to .91.

CFA for Common Dyadic Coping

Each of the five averaged items that measured common dyadic coping was used as the observed variables in the CFA for common dyadic coping (Figure 4). The fit indices for this model did not indicate a good fit to the data, $\chi_{AB}^2(5) = 35.62, p = .000$; robust CFI = .89; SRMR = .07; robust RMSEA = .24 (.17, .32). Results from the LM test suggested the model could be improved by adding a covariance between the error terms of two items. Given that these two items differentiated themselves from the other three by representing emotion focused strategies, the covariance was added to the model. The relationship between these two indicators of common dyadic coping has also been noted and included in previous studies (Bodenmann, 2008; Donato et al., 2009). The new model showed a significantly better ($\Delta \chi_{AB}^2(1) = 29.29, p < .001$) fit to the data, $\chi_{AB}^2(4) = 6.33, p = .18$; robust CFI = .99; SRMR = .02; robust RMSEA = .07 (.000, .18). In the final measurement model, standardized factor loadings for all variables were acceptable, ranging from .73 to .98.

Structural Model

The final CFA models were incorporated into the structural model proposed in this study and the full model was evaluated (Figure 5). Fit indices indicated that this structural model fit the data acceptably ($\chi_{AB}^2(430) = 508.26, p = .005$; robust CFI = 1.00; SRMR = .09; robust RMSEA = .000 (.000, .030).

Hypothesis 1 was supported as results indicated direct negative paths between female spirituality and female psychological aggression (-.33) as well as male spirituality and male psychological aggression (-.29). Hypothesis 2, which stated that SDC would mediate the

relationship between one's own spirituality and one's partner's psychological aggression, was partially supported as only relationships between one's own spirituality and one's own SDC were found. The indirect effect of spirituality on psychological aggression through SDC was not supported as relationships between one's own SDC and partner's psychological aggression were not demonstrated. Female spirituality had a direct positive effect on female SDC (.25), and male spirituality had a direct positive effect on male SDC (.19). Hypothesis 3 was supported as CDC was found to mediate the relationship between female spirituality and female psychological aggression as well as male spirituality and male psychological aggression, above and beyond the direct influence of spirituality on psychological aggression. This indicates that spirituality influences psychological aggression indirectly through CDC. Female (.17) and male (.28) spirituality had direct positive effects on CDC, which then had a direct negative effect on female (-.32) and male (-.36) psychological aggression. Hypothesis 4 was supported as there were relationships between each partner's spirituality, SDC and psychological aggression. Positive associations between male and female psychological aggression (.64), male and female SDC (.50), and male and female spirituality (.41) were found above and beyond the influence of other relationships in the model. Hypothesis 5 was supported as there were significant positive associations between CDC and female (.48) and male (.74) SDC. The structural model with standardized results (Figure 5) presents these findings.

Models with constraints were tested to examine whether there were statistically significant gender differences among paths with the same measurement units. No significant gender differences were found in the relationships between each partner's spirituality and CDC, their own SDC, and their own psychological aggression.

Testing Alternative Models

Finding a good fit of the hypothesized model to the data does not necessarily rule out the possibility of other competing models that might also have a good fit to the data. Consequently, two other alternative models were also evaluated. Given that SDC and CDC were hypothesized to mediate the relationship between spirituality and psychological aggression, a model was tested in which spirituality mediated the relation between CDC and each partner's psychological aggression and between each partner's SDC and the other partner's psychological aggression, while still keeping the direct relation between each partner's and their own psychological aggression. The lower value for the Akaike Information Criterion showed that the original hypothesized model (-246.20) was a better fitting, more parsimonious model than this alternative model (-229.32), providing further support for the mediation role of CDC in the relationship between spirituality and psychological aggression.

In order to rule out the possibility that the results of the test of the hypothesized structural model were an artifact of the CDC coding strategy (averaging both partners' reports), we also tested a model in which each partner's reports on CDC were introduced in the model as two distinct factors, male report and female report of CDC. This model also fit the data adequately ($\chi_{AB}^2(583) = 735.78, p = <.001$; robust CFI = 1.00; SRMR = .09; robust RMSEA = .00 (.00, .03) and significant path coefficients were also found between each partner's spirituality and their reports of CDC (males: .26, females: .24) and between each partner's CDC and their own psychological aggression (males: .33, females: .45).

Discussion

This was the first study to explore protective factors against psychological aggression among Latino immigrant couples. It is also unique in its use of the STM perspective to guide its

development as well as its use of the APIM approach to control for interdependence and explore partner and actor effects. The purpose of this study was to investigate the preventative roles of spirituality, SDC, and CDC against psychological aggression as well as the potential mediating roles of SDC and CDC between spirituality and psychological aggression among Latino immigrant couples in the US.

Psychological Aggression

On average, participants in the study reported low levels of psychological aggression, which contrasts with the high prevalence of psychological aggression among Latinos described in the empirical literature (Falconier et al., 2010; Hazen & Soriano, 2007). It is likely that participants may have underreported their true levels of psychological aggression due to a social desirability bias and the possibility that their partners may have had access to their responses. Although partners were instructed to complete their questionnaires separately and without consulting each other, some couples may have chosen to complete the assessment instruments together or may have looked at each other's responses.

In this sample, females engaged in less psychological aggression than males. This finding seems to be consistent with the high rates of male to female verbal abuse reported by Hazen and Soriano (2007). However, it differs from a recent review of studies on Latinos' interpartner violence which concluded that women perpetrate as much if not more partner violence than men (for a review see Klevens, 2007).

Psychological aggression in the present study was measured through partner's report. Therefore, males' higher reports of their female partner's psychological aggression may be a reflection of males' tendency to underreport episodes of aggression rather than being an accurate report of their partner's behavior. This has been found to occur in the general population and

among Latinos (Caetano, Field, Ramisetty-Mikler, & Lipsky, 2009; see, e.g., Fals-Stewart, Birchler, & Kelley, 2003; Healey & Smith, 1998). As hypothesized and consistent with past research (Falconier & Epstein, 2010; Panuzio & DiLillo, 2010), male and female partners' psychological aggression were positively related to each other, indicating that a partner's level of psychological aggression is one of the factors contributing to the individual's own psychological aggression. This finding confirms the need to include and control for this relationship in any study of psychological aggression.

Dyadic Coping

Similar to findings from studies on non Latino samples (Bodenmann et al., 2010; Papp & Witt, 2010), Latinos in this study engaged in moderate levels of SDC and CDC. However, men reported that their partners participated in higher levels of SDC than women reported of men. This may be due to the Latino cultural role of women, known as *marianismo*, which emphasizes a woman's responsibility to be submissive, faithful, humble, and a generous and giving wife and mother who nourishes relationships (Falicov, 1998). This cultural emphasis on giving support may encourage women to provide support in the form of SDC. This gender difference in SDC has not been reported in previous studies and as studies on dyadic coping processes have seldom been completed using data from both partners, it is impossible to compare these findings to other studies that have assessed gender differences within the same couple.

As demonstrated in previous studies, both partners' SDC were found to be positively related to each other (Bodenmann et al., 2004). This relationship may exist because the giving of support by one partner may encourage the other partner to give support in return. As in others studies, a positive association between partner's SDC and couple CDC was also found (Bodenmann et al., 2004), possibly because both are present in healthy relationships.

Spirituality

Consistent with the emphasis given by the anecdotal literature and qualitative studies to the role of spirituality in the Latino culture, both males and females reported high levels of spirituality in the present study (Falconier et al., 2010; Falicov, 2009; Higgins & Learn, 1999; Musgrave, Allen, & Allen, 2002; Taylor, 2001; Zea, Quezada, & Belgrave, 1994). However, women's level of spirituality was significantly higher than men's, which is consistent with gender differences found in rates of involvement in spiritual practices across Latino and other populations (Ellison et al., 2007; Stark, 2002) and anecdotal reports that the Latino concept of *marianismo* emphasizes the importance of female religiosity (Falicov, 1998). As expected, there was an association between male and female partners' spirituality. This relationship may be due to selection effects that occur during courting, one partner influencing the other partner's level of spirituality by their own example or direct pressure, or a couple jointly deciding to change their level of spirituality, and has been found in other studies (Mahoney et al., 1999; Sullivan, 2001).

Spirituality and Common Dyadic Coping as Protective Factors

Findings from this study indicate that the more spiritual a person is, the less likely he or she is to engage in psychological aggression toward a partner, which is consistent with findings that show that religiosity protects against engagement in physical aggression (Ellison et al., 2007). This relationship may exist because most spiritual orientations promote what Anderson (1999) calls the code of decency which encourages attributes such as temperance, hard work, honesty, respect, and obeying laws, which are consistent with a non-violent stance in relationships. Spiritual individuals who believe in a loving and kind deity who they are striving to emulate would also be making efforts to eliminate aggressive behaviors in their relationships.

Additionally, believing that marriage and couple relationships are sacred may motivate partners to treat each other with respect, also reducing the use of psychological aggression.

Given that participants were asked about the importance given to spirituality in their lives rather than about their reliance on spirituality under stressful circumstances, it is not possible to conclude from this study if couples use spirituality as an individual coping strategy. If used as an individual coping strategy, it is possible that spirituality may help reduce stress, and thus prevent stress spill over into the couple relationship, and possible escalation into psychological aggression. In the event that spirituality does function as an individual coping strategy, results suggest that couples may be relying on individual coping and dyadic coping strategies simultaneously, which differs from the proposition in STM that couples only turn to dyadic coping once individual coping methods have been exhausted and found insufficient to manage stressors, an idea that has also been challenged by other models (Berg & Upchurch, 2007).

As hypothesized in this study, in addition to its direct influence on psychological aggression, spirituality was also found to protect couples from engaging in psychological aggression indirectly through CDC, above and beyond the relationship between spirituality and SDC. The more spiritually oriented partners are, the more likely they are to engage in CDC, which in turn protects the couples from engaging in psychological aggression, above and beyond the direct influence that spirituality had on psychological aggression. This finding is consistent with research that shows that spirituality is associated with positive relationship outcomes (Giblin, 1997; Mahoney et al. 1999; Roth, 1988) and that common dyadic coping is negatively associated with verbal aggression (Bodenmann et al., 2010). The relationship between an individual's personal spiritual orientation and CDC may be related to the emphasis that religious traditions, in which some spiritual individuals engage, often place on the sacred nature of

marriage as well as the importance of a husband and wife being united. It is possible that higher levels of common dyadic coping efforts indicate that partners are willing to work together in efforts to deal with stress, fostering a sense of safety and we-ness in their relationship which makes it easier for partners to be vulnerable and turn towards each other when in need. Without this sense of togetherness and partners joining against a stressor, couples may instead allow stress to spill over into their relationship, pitting one partner against the other during times of stress, which may then create tension and escalation into psychological aggression.

In addition to protecting couples from engaging in psychological aggression and encouraging participation in CDC, spirituality also has a direct effect on engagement in SDC indicating that more spiritual partners more often offer SDC to their partners. However, contrary to expectations, an individual's increased engagement in supportive behaviors towards a partner did not reduce their partner's engagement in psychologically aggressive acts and therefore did not mediate the relationship between the individual's spirituality and the partner's psychological aggression. This result is inconsistent with findings that indicate that positive dyadic coping protects against verbal aggression (Bodenmann et al., 2010), but consistent with findings that show that SDC and CDC influence different parts of the stress escalation process (Bodenmann et al., (2010), indicating that SDC and CDC influence relationships differently. Spirituality may serve as an individual coping strategy that allows one partner to better manage their own stress and thus be more prepared to offer support to their partner, or may encourage positive relationship behaviors due to the emphasis placed on the sanctity of marriage. The inconsistent result that SDC is not associated with psychological aggression may result from cultural considerations. It is possible that because of the collectivist nature of the Latino culture which highlights the importance of personal sacrifice for the common good, as well as the Latino

familismo, which places an emphasis on interpersonal relationships, interdependence, and support giving between family members (Falicov, 1998), Latino couples feel that it is more important to work together than it is to receive support from a partner. Whereas satisfaction with a relationship in individualistic societies may be more dependent on the balance between the giving and receiving of support between partners, based on the exchange model, this concept may not be relevant in collectivist societies. Couple's common needs and well being may come first before individual needs and therefore the perception of both partners working together may be more important than one partner offering support to the other. Thus, CDC may play a more important role than SDC in Latino couples.

The findings of this study indicate that among Latino couples, spirituality has a direct negative association with one's own psychological aggression. Additionally, spirituality has an indirect negative effect on psychological aggression through a couple's use of CDC. That this same indirect effect was not found through use of SDC may be a result of the Latino cultural *familismo* and collectivist orientation. Because this study employed an APIM approach, interdependence between partners' responses was controlled for and partner effects were explored, indicating that these associations were present above and beyond the relationships between each partner's spirituality, SDC, and psychological aggression, as well as all other relationships in the model.

Contributions to the Systemic-Transactional Model of Dyadic Coping

This study makes a unique contribution to Bodenmann's (1997) Systemic-Transactional Model. Previous studies have often failed to explore the unique contribution of CDC to couple and individual functioning. This study provides evidence that CDC is different than other types of dyadic coping, such as SDC, and that its unique relationship with outcome variables merits

further investigation. Results suggest that coping processes may be different depending on the cultural group. Even though SDC has been found to play a protective role against verbal aggression, that effect disappeared in the presence of CDC, which we attribute to the cultural characteristics of Latinos. This suggests that STM might benefit from including cultural variables such as spirituality, *familismo*, and *marianismo*. Additionally, this study makes clear that spirituality may be an important predictor and contributor to both individual and dyadic coping and merits further investigation as such.

This study was able to determine that the direct and indirect effects of one partner's spirituality on both partners' psychological aggression are present above and beyond the effects of the other partner's spirituality and that this effect remained after controlling for length of relationship, as well as the relationships between each partner's spirituality, partners' engagement in SDC and associations between SDC and CDC because of the use of APIM. This type of approach underscores the valuable understanding that comes from investigating both partners' variables using an APIM approach, which allows for investigation of the unique contribution of each partner to couple processes and outcomes.

Limitations

Even though the test of alternative models provided strong support for the validity of the conceptual model proposed in this study, the cross-sectional nature of the data precludes any causal inferences. In addition, couples were drawn from the metro DC area where the composition of the Latino population differs from other parts of the U.S. For example in the sample used in the study, 32.7% of participants were from El Salvador, many of whose emigrants suffer from PTSD due to war experiences, 12.5% in Peru, and 12.5% in Mexico, whereas nationally the Latino population is 64% Mexican, and 9% Puerto Rican (US Census

Bureau, 2005, 2006). This high percentage of immigrants who possibly suffer from PTSD may indicate a distinct sample and the possibility that results may not be generalizable to other Latino immigrant populations in the US. Another limitation to the study is that a one-item measure of spirituality was used. Though this may reduce the reliability of findings, many other studies rely on such limited measures (Mahoney, 2010). Future research which employs a more detailed measure of spirituality may make it possible to determine what specific aspects of spirituality influence individual and couple outcomes. Couples completed the self-report assessments in their homes without supervision. Therefore, it is possible that participants were influenced by their partner's presence or concerns that their partners would read their responses, one participant completed the assessment on behalf of their partner, and partners consulted each other about answers. Self-report measures are also subject to social desirability biases especially on more sensitive subjects. Finally, that the sample reported low levels of psychological aggression may indicate that these protective factors are only helpful in couples with lower levels of psychological aggression (Bodenmann et al., 2010).

Implications

The results of the current study have important implications for researchers and clinicians. Research may expand upon the current study to explore the relationships between spirituality, SDC, CDC, and psychological aggression among other populations. Implementing a longitudinal design would also allow for causal inferences. Additionally, by using a more descriptive measure of spirituality the specific mechanisms by which spirituality influences individual and couple behavior may be better understood. Furthermore, additional research could focus on the protective role that spirituality and other culturally sensitive practices have among Latinos. This study confirms the need for further investigation into the relationships between

individual coping, dyadic coping, and relationship outcomes using an APIM approach in order to examine and control for partners' interdependence. The need to further clarify the differing contributions of SDC and CDC to individual and couple outcomes in different populations, instead of measuring SDC and CDC together in a positive dyadic coping scale (Papp & Witt, 2010), was also made clear by this study,.

Given the harmful effects of psychological aggression on individuals, couples, and families, as well as the potential that it has to escalate into physical and sexual aggression, this study provides important findings with regards to protective factors for clinicians working with Latino couples. Clinicians may consider exploring and encouraging client's spirituality, a dimension in the couple's life that is consistent with Latino cultural values, as well as couple's joint coping processes such as discussing problems together and relaxing together. These findings may also be incorporated into prevention programs. By encouraging participation in these protective factors, negative outcomes associated with psychological aggression may be prevented.

Conclusion

Findings from this study revealed the protective function that spirituality and common dyadic coping have against psychological aggression among Latino immigrant couples living in the United States. These findings emphasize the importance of conducting future research that utilizes the APIM approach in order to better understand how individual and couple factors influence individual behavior and relational outcomes among different populations. Future research informed by this model will add to knowledge of couple functioning, contributing to preventative and intervention strategies. The importance of attending to cultural factors when

analyzing models of dyadic coping was also highlighted by this study as the importance of both spirituality and common dyadic coping among Latino immigrants has a cultural basis.

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Table 1

Path Model Variable Characteristics for Women and Men

Variable	Mean	<i>SD</i>	Mean Difference	<i>SD</i> (Mean Difference)	<i>T</i>	<i>df</i>	<i>p</i>
Spirituality							
Women	3.41	.85	.28**	1.03	-2.59	87	.01
Men	3.13	1.03					
Psychological Aggression							
Women	4.86	6.37	-1.53*	6.94	2.06	86	.04
Men	6.39	7.79					
Supportive Dyadic Coping							
Women	18.02	4.95	1.47**	5.28	2.63	88	.01
Men	16.54	5.24					
Common Dyadic Coping	17.55	4.76					

Note: N = 104 women and 104 men.

p* < 0.05 (two-tailed). *p* < 0.01 (two-tailed).

Table 2

Spearman's Correlations Among Factors

	1	2	3	4	5	6
1 Male Spirituality	-----					
2 Female Spirituality	.45**	-----				
3 Male SDC	.09	-.05	-----			
4 Female SDC	.00	.23*	.46**	-----		
5 Male Psyc. Agg.	-.10	-.05	-.30**	-.09	-----	
6 Female Psyc. Agg.	-.07	-.30**	-.20	-.17	.63**	-----
7 CDC	.28*	.26*	.66**	.50**	-.27*	-.34**

Note: N = 104 women and 104 men.

Note: SDC = Supportive Dyadic Coping, CDC = Common Dyadic Coping

*p < 0.05 (two-tailed). **p < 0.01 (two-tailed).

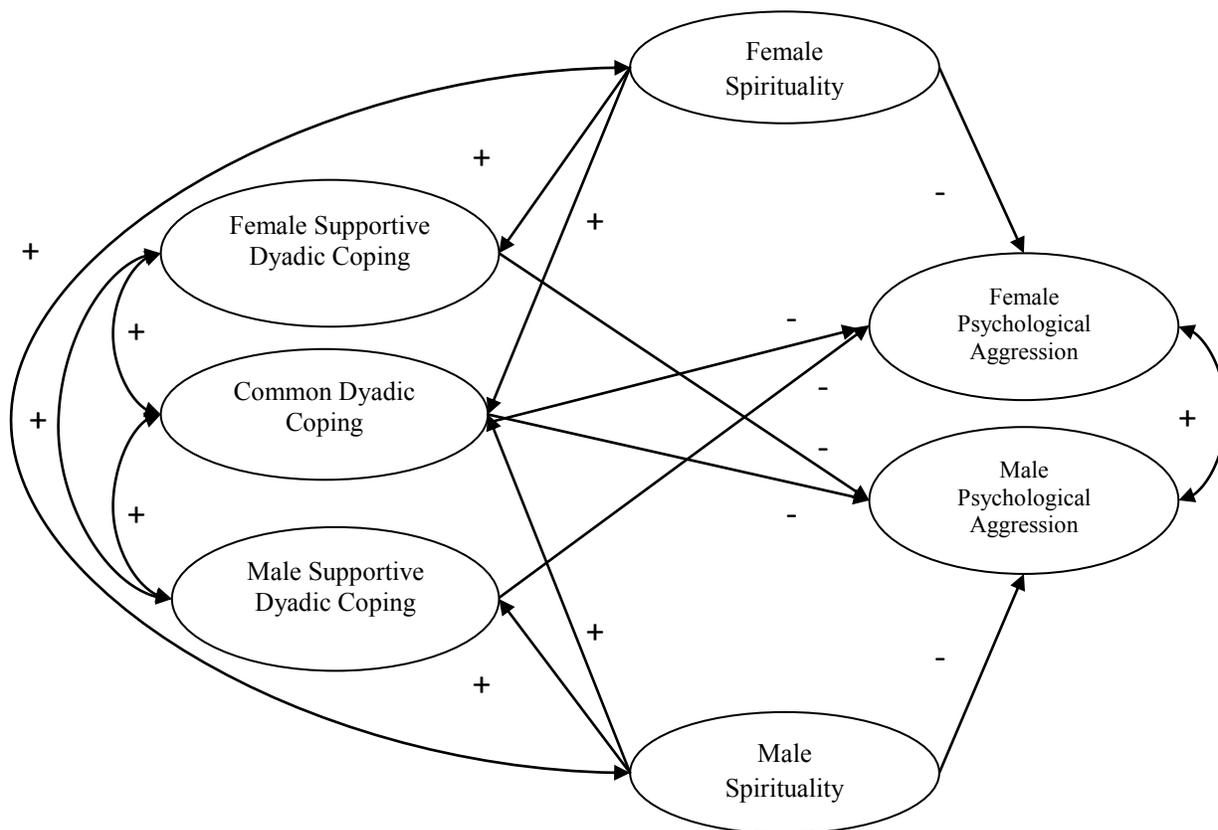


Figure 1. Conceptual Model. This figure depicts the conceptual model of the study with hypothesized paths.

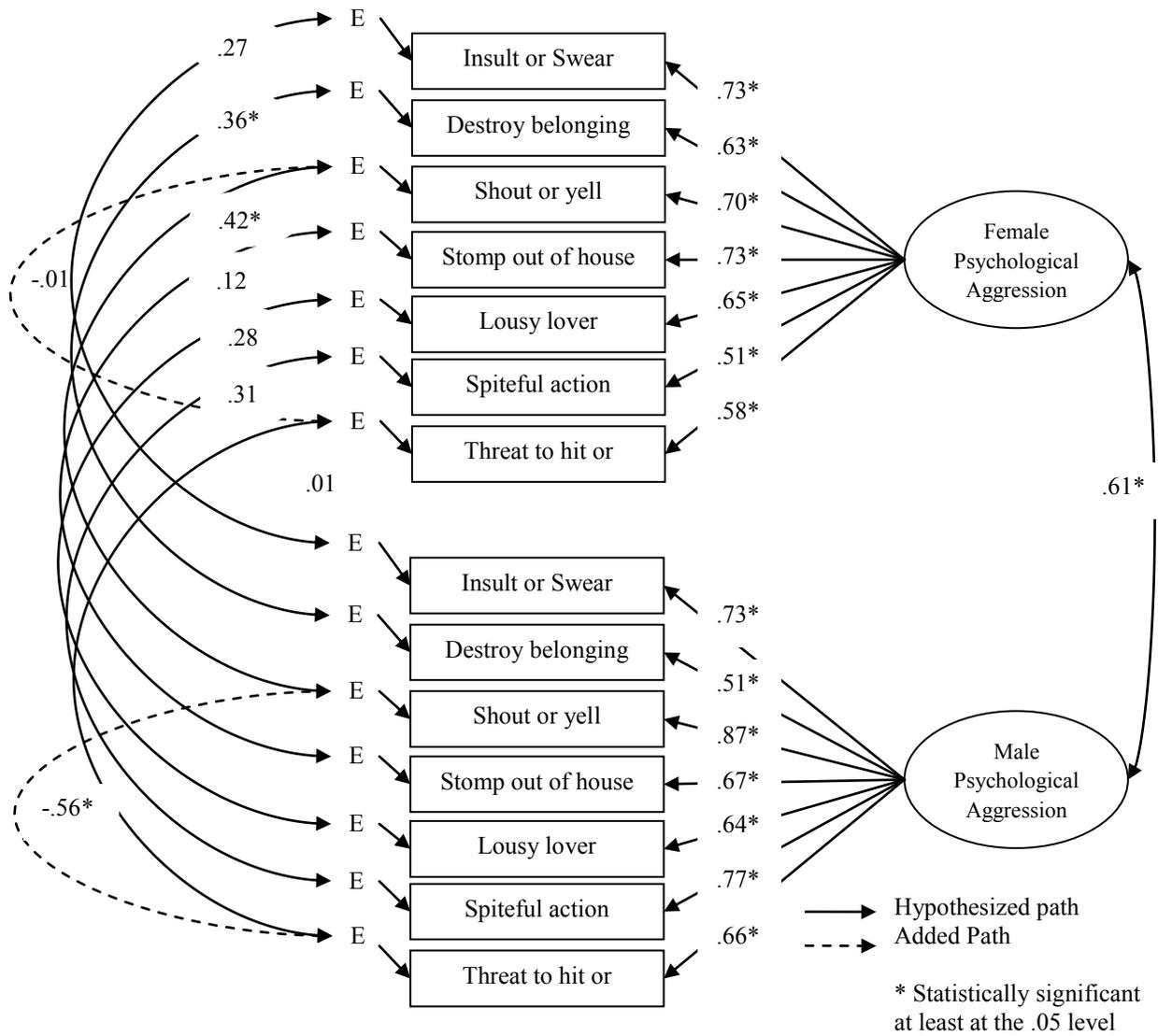


Figure 2. Measurement model for male and female psychological aggression: Standardized results. This model demonstrates the standardized results for male and female psychological aggression.

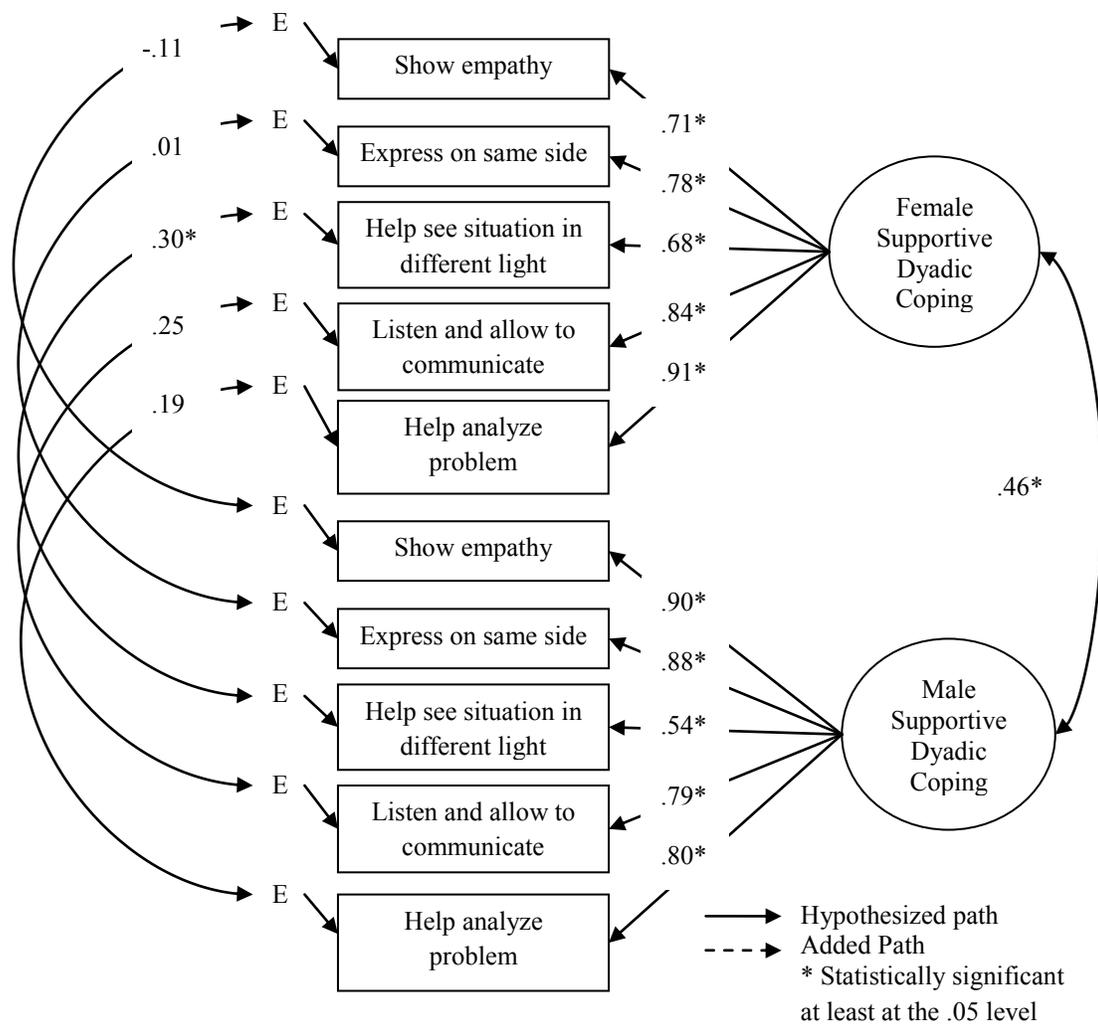


Figure 3. Measurement model for male and female supportive dyadic coping: Standardized results. This figure demonstrates the measurement model for male and female supportive dyadic coping.

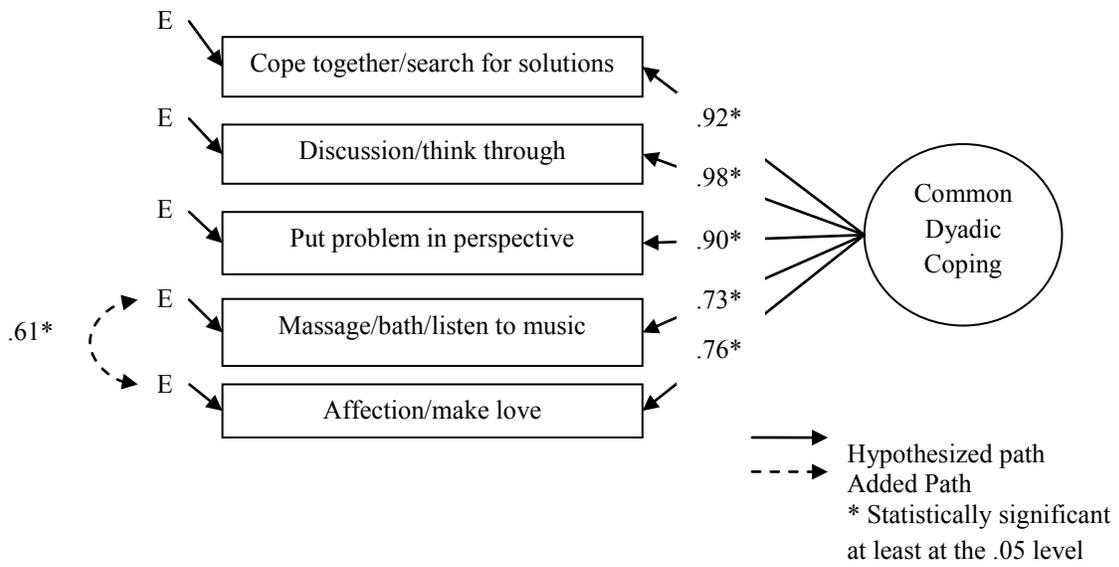


Figure 4: Measurement model for common dyadic coping: Standardized results. This figure depicts the measurement model for common dyadic coping.

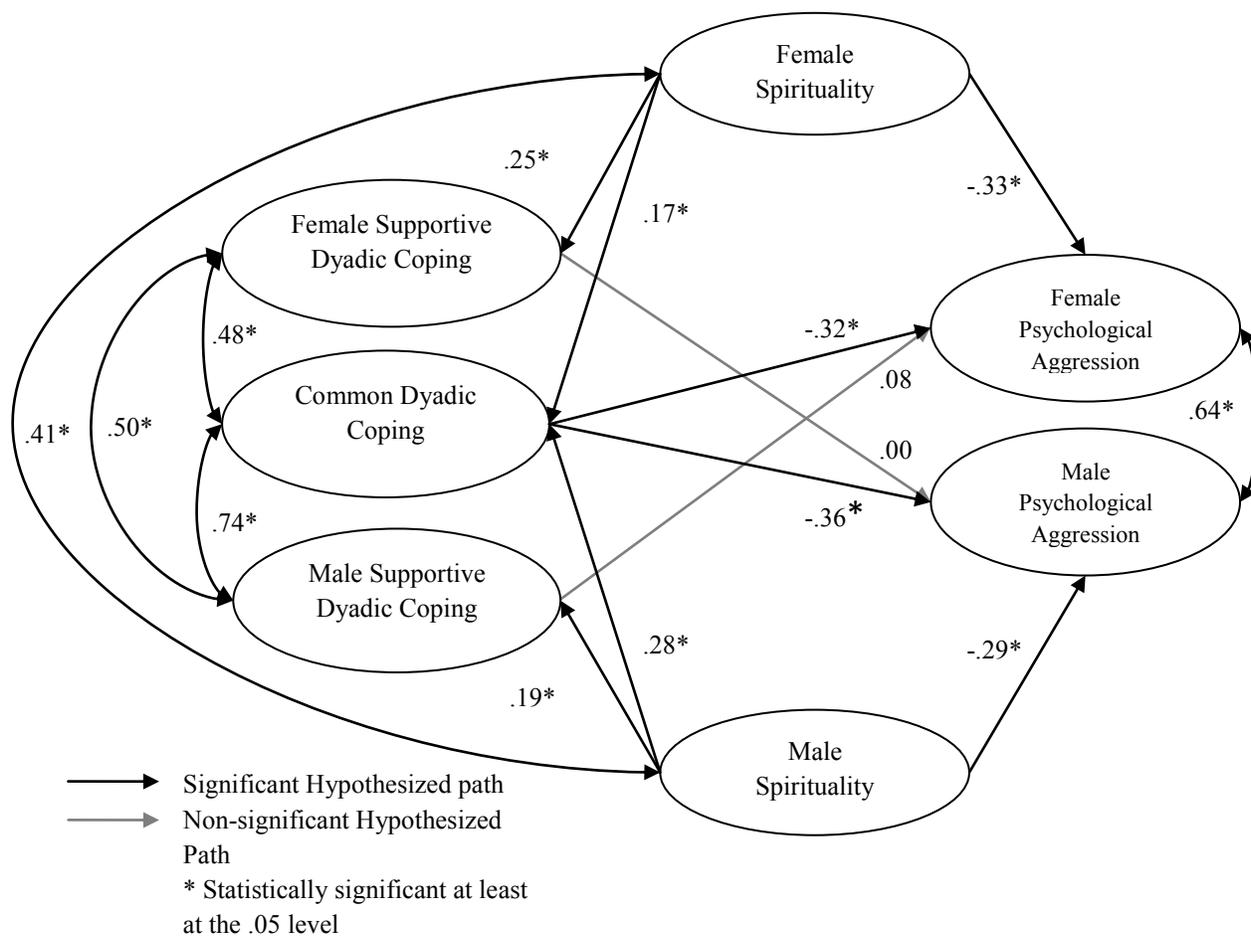


Figure 5. Structural model: Standardized results. This figure depicts the standardized results of the structural model.

Appendix A- Measures

Conflict Tactics Scale- Revised

Psychological Aggression Subscale Items

- 1) I insulted or swore at my partner.
- 2) My partner did this to me.
- 3) I called my partner fat or ugly. (excluded from final scale)
- 4) My partner called me fat or ugly. (excluded from final scale)
- 5) I destroyed something belonging to my partner.
- 6) My partner did this to me.
- 7) I shouted or yelled at my partner.
- 8) My partner did this to me.
- 9) I stomped out of the room or house or yard during a disagreement.
- 10) My partner did this to me.
- 11) I accused my partner of being a lousy lover.
- 12) My partner accused me of this.
- 13) I did something to spite my partner.
- 14) My partner did this to me.
- 15) I threatened to hit or throw something at my partner.
- 16) My partner did this to me.

Dyadic Coping Inventory Items

Supportive Dyadic Coping of Partner Subscale Items

- 1) My partner shows empathy and understanding to me.
- 2) My partner expresses that he/she is on my side.
- 3) My partner helps me to see stressful situations in a different light.
- 4) My partner listens to me and gives me the opportunity to communicate what really bothers me.
- 5) My partner helps me analyze the situation so that I can better face the problem.

Dyadic Coping Inventory Item

Common Dyadic Coping Subscale Items

- 1) We try to cope with the problem together and search for ascertained solutions.
- 2) We engage in a serious discussion about the problem and think through what has to be done.
- 3) We help one another to put the problem in perspective and see it in a new light.
- 4) We help each other relax with such things like massage, taking a bath together, or listening to music together.
- 5) We are affectionate to each other, make love and try that way to cope with stress.

Spirituality item

1) How important is religion or spirituality to you in your daily life?