Forgiveness as a Moderator of the Relationship Between Religiosity and Intimate Partner Violence

by

Leroy Sapp

Liberty University

A Dissertation Presented in Partial Fulfillment

of the Requirements for the Degree

Doctor of Education

School of Behavioral Sciences

Liberty University

2023

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Abstract

This quantitative study uses an online survey method to examine forgiveness in a woman with patriarchal religious beliefs (PRB) who has experienced intimate partner violence (IPV) and the predictive role of forgiveness in moderating the relationships between IPV and religiosity and IPV and PRB. The participants received scores on PRB, which were divided into two groups: adherence and nonadherence. The findings concluded no statistically significant difference between the means of the adherence group and nonadherence group's mean forgiveness levels. The study found that forgiveness moderated the positive relationship between religiosity and IPV violence approval, and forgiveness negatively affected said relationship. Religiosity was more predictive of IPV than forgiveness. Further, findings showed that forgiving moderated the positive relationship between PRB and IPV violence approval, and forgiveness negatively affected said relationship; PRB was more predictive of IPV than forgiveness.

Keywords: Forgiveness, intimate partner violence, religiosity, social learning theory

Dedication

This dissertation is dedicated to my wife, Cynthia, who has taught me the love of God and always given me the gift of forgiveness! Thank you for encouraging me every day to be the best person I could be and always to show the love of God. This dissertation is also dedicated to my mother-in-law and father-in-law, Pastors Annie Mae and Amos Handsom, for all your wisdom, guidance, and love throughout life.

Acknowledgments

First and foremost, I would like to acknowledge the God of grace and forgiveness who, through the atoning work of Jesus Christ, has forgiven me of all my sin. I want to thank you for strengthening and guiding me throughout this entire process. I am grateful for Dr. Pamela Moore, my dissertation faculty mentor and chair, and Dr. Holly Johnson, my reader and committee member, whose wisdom, insights, and directions made this project a reality. I will cherish the professionalism with which you embraced me during this literary pilgrimage. May God continue to bless you! Finally, I want to thank the Department of Community Care and Counseling/School of Behavioral Sciences faculty at Liberty University and friends and family for their instruction, love, and support. Being a part of your life has enriched my life.

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List of Abbreviations

Christian Fundamentalism (CF)

Civil Protection Order (CPO)

Cognitive Behavior Therapy (CBT)

Cognitive Trauma Therapy (CTT)

Internet Cognitive Behavior Therapy (iCBT)

Intimate Partner Violence (IPV)

Patriarchal Beliefs Scale (PBS)

Patriarchal Religious Beliefs (PRB)

Social Learning Theory (SLT)

The Centrality of Religiosity Scale (CRS)

The Conflict Tactics Scales-2 Short Form (CTS2S)

The Heartland Forgiveness Scale (HFS)

The Personal and Relationships Profile (PRP)

The United States Preventive Services Task Force (USPSTF)

Veterans' Health Administration (VHA)

World Health Organization (WHO)

Chapter One: Introduction

Overview

The chapter examined intimate partner violence, religiosity, and forgiveness. Intimate partner violence is commonly known to affect women more than men, attributed to patriarchal ideology through one's religiosity. However, the predictive role of forgiveness as a moderator of the relationship between intimate partner violence and religiosity has been understudied. This chapter presented the historical background, theoretical framework, problem statement, purpose statement, significance of the study, research questions, and operational definitions, and concludes with a summary.

Background

There are a variety of human relationships, but intimate partner relationships are plagued by severe violence (Ellison et al., 1999). Intimate partner violence (IPV) is a painful and challenging societal problem (Davidson et al., 2015). A substantial amount of research has led to the development of several theoretical models to address IPV for both victims and perpetrators (Stith et al., 2012). Cognitive Behavior Therapy is the standard theoretical model (Jackson et al., 2018) for treating IPV (Nesset et al., 2019) and addressing problematic behaviors in IPV perpetrators (Satyanarayana et al., 2016). The Social Learning Theory theoretical model provides a comprehensive explanation of the prevalence of violence (Wareham et al., 2009). The information presented here will examine forgiveness as a predictive role (Baldry et al., 2017; Katerndahl et al., 2019) in intimate partner violence (violence approval) and the effect of forgiveness on the relationship between violence approval and religiosity (Baldry et al., 2017; Fehr et al., 2010; Fincham et al., 2005; Gordon et al., 2008; Katerndahl et al., 2019; McCullough et al., 1998; Williamson & Gonzales, 2007; Ysseldyk et al., 2019) as they relate to beliefs in

patriarchal ideology (Acevedo & Shah, 2015; Dobash & Dobash, 2011; Flood & Pease, 2009; Garcia & Herrero, 2006; McKinley et al., 2021; Munir, 2002; Ozaki & Otis, 2017).

Historical Context

Intimate partner violence (IPV) is a worldwide epidemic (Hawcroft et al., 2019; Makara-Studzinska & Madej, 2016) despite 40 years of legislation to reduce its effects (Keating, 2015). One in four women and one in seven men will experience IPV during their lifetime, and IPV prevalence varies by location, race, ethnicity, age, social status, and education (Basile et al., 2011). The World Health Organization (WHO) reported in 2014 that every fifth woman around the globe suffered from IPV (Hussain et al., 2017). IPV affects men and women from every racial, socioeconomic, and religious background (McAllister & Roberts-Lewis, 2010).

Religiosity can legitimize intimate partner violence (Renzetti et al., 2017). Religiosity as a construct is shared systemic beliefs and values within a group and is demonstrated through ritualistic practices, whereas spirituality is a personal search for meaning and connection to entities, though not always through formalized religion (Hill & Edwards, 2013; Jordan et al., 2014; Zimmer et al., 2016). Religious beliefs often exemplify males (patriarchal) as primary decisional power figures and females as primary caregivers, thus limiting women's vocational or economic advancement (Levitt et al., 2008).

The concept of patriarchy has two elements: structure and ideology (Hunnicutt, 2009; Smith, 1990; Sultana, 2012). A patriarchal structure is a hierarchal system in which men have authority over women and children (Yllö & Straus, 1990). Patriarchal ideology (PI) comprises values, beliefs, and norms that reflect male dominance in society (Yllö & Straus, 1990). PI explains privileges that lead to male power in the community, including IPV (Haj-Yahia et al., 2015). PI is prevalent in societies and established traditions around gender (Haj-Yahia, 1998;

Haj-Yahia, 2002). Vulnerability to IPV may occur if a woman adheres to traditional roles rooted in religious tenets (Potter, 2007). Haj-Yahia et al. (2015) found that patriarchal societies legitimized male IPV on women and reinforced women's inferior status within the community. Various solutions have been attempted to solve IPV, such as by legal means, education, mental health services, and religious doctrine; most religions promote forgiveness as a healing option (McCullough et al., 2005).

Forgiveness has existed since humanity began (Griswold, 2007; Genesis 3:21, KJV; McCullough, 2008). The study of forgiveness has evolved from a few studies in the 1990s to today, thousands of psychological studies few studies in the 1990s, thousands of psychological studies (Strelan, 2010). Several studies have identified a relationship between forgiveness and IPV. Cowden et al. (2020), in a study of 515 women in a heterosexual romantic relationship, found that forgiveness moderated the relationship between psychological abuse with depression and stress. In another study, Ysseldyk et al. (2019) found that forgiveness moderated physical and mental abuse and depression in society. Forgiveness is vital to a well-functioning human, and research has focused on four areas: dispositional forgiveness, health consequences, dispositional and situational correlation, and mental health and interpersonal benefits (Emmons & Paloutzian, 2003). The study would benefit individuals by assisting them in identifying values, beliefs, and role identification that influence their decision-making regarding violence and forgiveness.

Social Context

Intimate partner violence (IPV) is a severe and evolving societal problem (Catlett et al., 2010; Davidson et al., 2015). IPV against women is facilitated by societies' culture, social context, and laws that favor males (Raj & Silverman, 2002). Violence exposure within family-of-

origin has consistently been linked to the perpetration of IPV in adulthood (Eriksson & Mazerolle, 2015). Women who witness IPV in childhood are conditioned to believe IPV is normal (Yount & Krause, 2017) and are more susceptible than men to becoming IPV victims (Powers et al., 2020). Studies revealed that 15% to 75% of women experience IPV at some point in their lives (Bosch-Fiol & Ferrer-Perez, 2020). In Europe, IPV affects 20% to 30% of women during their lifetime (European Union, 2014). Research from the United States, South Africa, Israel, Australia, the United Kingdom, and Canada revealed that 40% to 70% of female murders are associated with IPV (Bosch-Fiol & Ferrer-Perez, 2020; Cooper & Smith, 2011; Me, 2013; Norris, 2013).

IPV has many variables that contribute to violence, among them family structure, and religious values reinforce family structures and traditions (Bartkowski, 1997). Allport and Ross (1967) identified two categories of religiosity or religious orientation: intrinsic and extrinsic. Intrinsic individuals have religion as the guiding principle in their lives, whereas extrinsic individuals use religion from an instrumental perspective to obtain comfort, a sense of community, and to meet societal rules. The world's cultures and religious traditions have some processes to navigate hurt, pain, and traumas within relationships and often utilize forgiveness (Marshall, 2014). All the major religious traditions have forgiveness as a tenet (Rye et al., 2000; Smith, 2009), and research has found that religiousness, in general, is related to forgiveness (Gorsuch & Hao, 1993; Shoemaker & Bolt, 1997). Forgiveness is a process of healing from hurt. It disrupts the damage of emotional, spiritual, or physical violence, and offers a path to reconstructing relationships (Marshall, 2014; Matthew 6:14-15, KJV). Forgiveness is vital to restoring intimate relationships (Cowden et al., 2020), and forgiveness is not reconciling to save a relationship (Worthington et al., 2007). People are instructed that forgiveness is a necessary

virtuous act to harmonize with society and God (Miles, 2001). Forgiveness plays an essential role in psychoanalytic therapy (Siassi, 2004).

Theoretical Context

Research on the cognitions of IPV perpetrators has led to behavioral interventions based on cognitive characteristics (Dardis et al., 2017; Lomo et al., 2018; Weldon, 2016). Cognitive Behavior Therapy (CBT) is a theoretical model strongly empirically supported and applied to facilitate changes in problematic behaviors in perpetrators of IPV (Ager, 2020; Allard et al., 2018; Cotti et al., 2020; Nesset et al., 2019; Satyanarayana et al., 2016). Cognitive Behavior Therapy is the gold standard for treating IPV (Arias et al., 2013; Arroyo et al., 2017; Hesser et al., 2017; Jackson et al., 2018; Redondo et al., 2019; Santos et al., 2017). Akers' Social Learning Theory (SLT) is an empirically validated theory of learning mechanisms comprising four theoretical concepts: differential association, definitions, differential reinforcement, and imitation (Cochran et al., 2011, 2016; Coop et al., 2019; McRae et al., 2017). SLT reveals unconscious values engrained within the self because of childhood experiences and articulate learning processes of survivors of IPV victimization (Cochran et al., 2017; Dim & Elabor-Idemudia, 2021; Powers et al., 2020; Yount & Krause, 2017). SLT is aptly suited to explain IPV (Cochran et al., 2011; Coop et al., 2019; McRae et al., 2017; Powers et al., 2020; Zavala & Kurtz, 2021). Wareham et al. (2009) found that intergenerational transmission and social learning were constructs for the mechanisms of intimate partner violence.

Researchers have identified positive correlations between religiosity and several psychological constructs (Edwards et al., 2002; Graham-Pole et al., 1989; Hughes et al., 1994). Forgiveness is a positive psychological construct usually associated with religiosity; it is considered a social and coping skill (Berecz, 2001; Edwards et al., 2002; Langman & Chung,

2013). Forgiveness research has evolved from the domain of theology and philosophy to include psychological consequences (Kidwell et al., 2012; Strelan & Covic, 2006). Functionality analysis has been used extensively throughout psychology, and forgiveness is an excellent candidate for functional analysis because of social behavior (Baumeister et al., 1998; Davis et al., 2015; Lawler-Row & Piferi, 2006; Strelan, 2010; Toussaint et al., 2001).

Forgiveness is a human concept that permeates cultures, ethnicities, and religions (Worthington et al., 2019). Forgiveness correlates to cognition (thoughts and attitudes) (Fincham et al., 2005; Gordon et al., 2008; Williamson & Gonzales, 2007), affect (emotions), and constraints (Fehr et al., 2010; McCullough et al., 1998), and could be integrated with CBT and SLT for treatment of IPV. Researchers agree that forgiveness is a complex cognitive, affective, and behavioral response to an offense (Baumeister et al., 1998; Berecz, 2001; Gordon & Baucom, 1998; Govier & Hirano, 2008; Gumus & Kislak, 2019). A variety of instruments have been developed to measure forgiveness in different circumstances, such as particular incidents (Kamat et al., 2006), specific transgressions (McCullough et al., 1998; Subkoviak et al., 1995), the particular person (Hargrave & Sells, 1997), close relationship (Pollard et al., 1998), and dispositional forgiveness (Berry et al., 2001, 2005; Brown, 2003; Chiaramello et al., 2008; Kamat et al., 2006; Mauger et al., 1992; Mullet et al., 1998; Roberts, 1995; Rye et al., 2001; Wohl et al., 2008).

Advanced proven theories and measurements can better understand forgiveness as a construct to answer the questions of its predictive value (Cowden et al., 2020; Edwards et al., 2002, Freud, 1930; Worthington & Wade, 1999). Forgiveness mediates anger and hostility (Hirsch et al., 2011; Karairmak & Guloglu, 2014; McCullough et al., 2000; Webb et al., 2013) while mitigating symptoms of PTSD and depression (Karairmak & Guloglu, 2014; Konstam et

al., 2001; Snyder & Heinze, 2005). Numerous studies have emphasized forgiveness's utility in clinical therapy models (Baldry et al., 2017; Berecz, 2001; Gordon & Baucom, 1998; Kidwell et al., 2012; Miles, 2001; Worthington & Wade, 1999).

Research has found that religious people value forgiveness more than non-religious people (Enright et al., 1989; Gorsuch & Hao, 1993; Rye et al., 2000), although this is still not absolute if this valuing of forgiveness translates into being more forgiving of betrayals (Gordon et al., 2008). McCullough and Worthington (1999) found a disconnect between religious people's ideal (abstract) of forgiveness and the actual act (concrete) of forgiving real-time situations in their lives. It is unclear if an individual's religious orientation influences their forgiving decision (Gordon et al., 2008). There is a gap in the literature with an empirically supported measurement of an individual's valuing of forgiveness concerning their religious and cultural beliefs. This study may fill the gap of limited, empirically supported measurement of the predictive role of forgiveness by measuring forgiveness's effect on the relationship between IPV violence approval and religiosity for individuals who adhere to a patriarchal ideology.

Problem Statement

No comprehensive sources of relevant research have measured the predictive role of forgiveness in an individual who has experienced IPV and adheres to patriarchal ideology. Forgiveness is often experienced through religious and cultural beliefs. There is a need to fashion a therapy model that accounts for these beliefs and offers forgiveness in a clinical setting (Clabby, 2020).

Despite the literature on forgiveness as a positive change agent (Enright et al., 1989; Langman & Chung, 2013; McCullough et al., 2005; Pierro et al., 2018), as a construct, it has been poorly operationalized in correlational and quasi-experimental research, thereby limiting its

role as a healing agent (Baldry et al., 2017; Edwards et al., 2002; Prieto-Ursua et al., 2018; Watson et al., 2016; Webb et al., 2013; Zahorcova et al., 2020). Forgiveness applies to all people, whether religious, spiritual, or professing no religion (Enright et al., 1989; Gorsuch & Hao, 1993; Joo et al., 2019; Rye et al., 2000; Webb et al., 2013; Worthington et al., 2007). Forgiveness can benefit clients' physiological and psychological well-being (Gumus & Kislak, 2019; Langman & Chung, 2013; Raj et al., 2016; Wade et al., 2014; Wohl et al., 2008).

The challenge of forgiveness in therapy is the influence of various intrapersonal, interpersonal, and contextual factors (Fehr et al., 2010; Fincham et al., 2005; Gordon et al., 2008; Williamson & Gonzales, 2007). Forgiveness is a crucial aspect of the wholeness and well-being of individuals who experience IPV; it is a complicated process of letting go, setting aside, and releasing hurt propagated by another person (Miles, 2001). Forgiveness involves changing a survivor's attitude toward a perpetrator through values and behavioral elements (Davidson et al., 2015; Govier & Hirano, 2008; Gumus & Kislak, 2019; Wenzel & Okimoto, 2010). Forgiveness allows a person to release unhealthy negative emotions and find a resolution with a perpetrator (Baumeister et al., 1998; Gabriels & Strelan, 2018; Takada & Ohbuchi, 2013; Worthington & Scherer, 2004). Forgiveness as a variable has been widely studied in relation to IPV and religiosity; however, the predictive role of forgiveness requires further research (Baldry et al., 2017; Katerndahl et al., 2019). The problem identified following the literature review is the predictive role of forgiveness in the relationship between IPV violence approval and religiosity for an individual who adheres to a patriarchal ideology.

Purpose Statement

This quantitative study examines forgiveness in an individual with patriarchal-religious beliefs (PRB) who has experienced IPV violence approval and the predictive role of forgiveness

in moderating the relationship between IPV violence approval and religiosity. This study aims to use current multidimensional instruments to measure the predictor (religiosity) using the Centrality of Religiosity Scale (Huber & Huber, 2012), independent variable patriarchal beliefs using the Patriarchal Beliefs Scale (Yoon et al., 2015), criterion IPV violence approval using the Personal and Relationships Profile (Straus et al., 1999), and the moderator (forgiveness) using the Heartland Forgiveness Scale (Thompson et al., 2005a).

Volunteer participants for this study were recruited from individuals registered to participate in research surveys via Prolific.com. The researcher had no contact or interaction with the participants but provided the online survey; Prolific.com collected the data and provided the researcher with completed data sets. Participants represented the general population of women in the United States over 18 years old using cluster sampling (participant's location in the United States, i.e., Southern Region or Pacific Coastal Region). The required sample size was determined by extrapolation using linear equations for the medium effect size of .59 and a power of .77, highlighted in Table 1 below (Preacher et al., 2007).

Table 1

Power Analysis

TABLE 3
Type I Error Rates and Empirical Power for Model 1

Test	*Regression Coefficients*	*Sample Size*				
		50	*100*	*200*	*500*	*1000*
first	.00	.000	.000	.000	.000	.000
first	.14	.001	.005	.046	.316	.792
first	.39	.210	.613	.975	1.000	1.000
first	.59	.710	.978	1.000	1.000	1.000
second	.00	.000	.000	.000	.000	.000
second	.14	.001	.003	.040	.282	.769
second	.39	.187	.588	.972	1.000	1.000
second	.59	.689	.976	1.000	1.000	1.000
boot	.00	.000	.002	.001	.003	.000
boot	.14	.015	.031	.140	.514	.852
boot	.39	.322	.720	.977	1.000	1.000
boot	.59	.769	.983	1.000	1.000	1.000
bc	.00	.003	.007	.005	.007	.005
bc	.14	.030	.065	.223	.623	.891
bc	.39	.414	.786	.982	1.000	1.000
bc	.59	.818	.987	1.000	1.000	1.000
bca	.00	.003	.007	.005	.007	.005
bca	.14	.030	.065	.223	.623	.891
bca	.39	.414	.785	.982	1.000	1.000
bca	.59	.818	.987	1.000	1.000	1.000

Note. In this and subsequent tables, *first* refers to tests using first-order standard errors, *second* to second-order standard errors, *boot* to rejection rates using percentile-based bootstrapped confidence intervals, *bc* to bias-corrected limits, and *bca* to bias-corrected and accelerated limits.

Note. The image was created from a 2007 article by K. J. Preacher, D. D. Rucker, & A. F. Hayes, Addressing moderated mediation hypotheses: Theory, methods, and prescriptions, *Multivariate Behavioral Research*, *42*(1), 205 (Preacher et al., 2007).

The participants were a random sample of the population because Prolific.com chose the participants and provided the researcher with demographic information; once again, the researcher had no contact with the participants. The researcher analyzed the data from each group. Through the provided online survey, the researcher collected demographics from participants such as age, ethnicity, marital status, socioeconomic status, and employment status. The survey took approximately 15 minutes to complete. The survey operationalized the variables which were measured using the following instruments: IPV violence approval: the Personal and Relationships Profile (PRP); religiosity: the Centrality of Religiosity Scale; forgiveness: the Heartland Forgiveness Scale (HFS), and patriarchal religious beliefs: the Patriarchal Beliefs Scale (PBS).

Significance of the Study

This research aimed to strengthen competence among professionals and demonstrate how forgiveness could be an effective change agent in treating IPV. The study examined the predictive role of forgiveness in mediating the relationship between IPV (violence approval) and religiosity (patriarchal-religious beliefs) (Baldry et al., 2017; Katerndahl et al., 2019). The research goal was forgiveness as a positive psychological construct incorporated into theoretical models such as CBT and SLT for IPV treatment (Berecz, 2001; Edwards et al., 2002; Langman & Chung, 2013; Webb et al., 2013). The present research attempted to build on the knowledge of therapeutic forgiveness benefits (Davis et al., 2015; Gabriels & Strelan, 2018; Kidwell et al., 2012; Schnabl-Schweitzer, 2010) through a patriarchal framework that explores the social and cultural (Tonsing & Tonsing, 2019) conditions that contribute to IPV. Forgiveness does not encompass the entire therapeutic process but is a pillar that contributes to the success of the process (Schnabl-Schweitzer, 2010).

Research Questions

RQ1: Are women who are victims of IPV and who score above 99 on the PBS have higher forgiveness of others levels toward their abuser than women who are victims of IPV and score less than 100 on the PBS?

RQ2: What is the predictive role of forgiveness of others in moderating the relationship between religiosity and IPV violence approval?

RQ3: What is the predictive role of forgiveness of others in moderating the relationship between adherence to PRB and IPV violence approval?

Definitions

Concept

1. *Forgiveness* is a process of healing from hurt and disrupts the damage of emotional, spiritual, or physical violence, and offers a path to reconstructing relationships (Marshall, 2014).
2. *Intimate partner violence* causes physical, sexual, or psychological harm to an intimate partner (e.g., depression) (Stewart et al., 2016).
3. *Religiosity* is an organized system of beliefs members identify with and adhere to (e.g., religious attendance) (Consoli-Morgan et al., 2018).
4. *Patriarchal beliefs* are the belief in a historical and social system of male authority in which males have higher status than females structurally and ideologically (Chesney-Lind, 2006; Hunnicutt, 2009).
5. *Psychological aggression* is an individual's verbal or behavioral actions to humiliate, dominate, intimidate, criticize, and threaten their partner (e.g., access to money) (Follingstad et al., 2005).

Operational

1. *Forgiveness* improves personal relationships between victims and perpetrators (e.g., restoration of relationships) (Karremans & Van Lange, 2004; Tsang et al., 2006).
2. *Intimate partner violence* may occur if a woman adheres to traditional roles rooted in religious tenets (e.g., physical abuse) (Potter, 2007).
3. *Religiosity* is religious values that reinforce family structures and traditions (e.g., gender roles) (Bartkowski, 1997).
4. *Patriarchal beliefs* are the belief in patriarchy as a hierarchical power structure of male authority and female inferiority (Moghadam, 2004).
5. *Psychological aggression* is maltreatment associated with IPV, including physical abuse, neglect, and psychological punishment (e.g., anxiety) (Harley, 2002).

Summary

The information presented here was a brief overview of the magnitude of the intimate partner violence problem. The problem statement was presented, and it stated that there is limited research on a theoretical model that assesses the predictive role of forgiveness of others in individuals who have experienced IPV and adhere to patriarchal religious beliefs. The background of the problem included a discussion of the severe societal problem of IPV and the development of theoretical models to address the behavior; however, forgiveness as a psychological construct has not been effectively operationalized for the treatment of IPV. The significance of the study was explained in terms of the importance of incorporating forgiveness into theoretical models as a pillar to address the IPV problem. There was a discussion of how a patriarchal framework entails social and cultural conditions through forgiveness that could affect the IPV problem.

Chapter Two: Literature Review

Overview

The body of intimate partner violence (IPV) literature is widespread, vast, and challenging to integrate. This chapter examined the gaps in the literature related to the lack of theoretical models' incorporation of forgiveness as a positive psychological construct in the treatment of IPV. The chapter begins by exploring the literature about the theoretical framework of cognitive behavior therapy and social learning theory. The extent of IPV as a societal problem and the influence of exposure to childhood violence are discussed. Religious doctrinal teachings such as fundamentalism and community and personal values are explored. Lastly, forgiveness is discussed from the viewpoint of the world's major religions, and the chapter concludes by briefly exploring the support systems of those who experience IPV.

Theoretical Framework

A variety of theoretical models are used to treat IPV, such as cognitive behavior therapy (Jackson et al., 2018), social learning theory (Wareham et al., 2009), and eye movement desensitization and reprocessing therapy (Edmond et al., 2016; Jaberghaderi et al., 2019; Schwarz et al., 2021; Tarquinio et al., 2012a, 2012b) (this therapy was not covered in this study).

Cognitive Behavior Therapy

Theoretical models of treatment must be able to empower survivors of IPV by facilitating an environment of safety and hope (Dardis et al., 2017). Cognitive behavior therapy (CBT) is the standard for treating IPV (Jackson et al., 2018), and social learning theory explains IPV (Coop et al., 2019; Zavala & Kurtz, 2021). Research using cognitions of IPV perpetrators has led to behavior interventions (Weldon, 2016) which have been incorporated into CBT and facilitated change in problematic behaviors of IPV perpetrators (Satyanarayana et al., 2016) and these

interventions are strongly empirically supported to be effective in changing problematic behaviors (Ager, 2020). A meta-analysis of CBT found that it significantly reduced IPV recidivism through psychodynamic counseling and anger management (Arias et al., 2013). Most treatment models for IPV have focused on male-to-female violence and targeted recidivism (Hesser et al., 2017). Cognitive Trauma Therapy (CTT) is an empirically proven model developed to address functioning difficulties related to IPV (Allard et al., 2018). Perpetrators' worldviews must be examined to identify obstacles to treatment goals (Lomo et al., 2018).

The CBT model identifies IPV as inappropriate, dysfunctional, violent behavior due to inadequate communication skills needed to facilitate appropriate behavior (Cotti et al., 2020). Arias et al. (2013), in a meta-analytic review of interventions for IPV, found that CBT had a significant effect on reducing recidivism due to the inclusion of additional interventions such as psychodynamic counseling and anger management. Arroyo et al. (2017) conducted a systematic review and meta-analysis of 21 studies, concluding that CBT-based interventions adapted to IPV survivors significantly reduced depressive symptoms and anxiety. Latif and Khanam (2017) studied 200 randomly selected IPV survivors (females) and found that cognitive-behavior group intervention significantly reduced depression and anxiety in survivors. The CBT model does not address how people learn behaviors, but social learning theory examines learning mechanisms. Early exposure to IPV impacts children's development (Aymer, 2008), leading to an elevated risk for violence throughout the child's lifetime (Kimber et al., 2018).

Palmstierna et al. (2012) found that a 15-week manualized group-based CBT program significantly reduced violent behavior. Moms' Empowerment Program (MEP), a CBT community-based program, was utilized by 181 mothers and successfully reduced depression in the women (Graham-Bermann & Miller-Graff, 2015). Hesser et al. (2017), in a study utilizing

Internet Cognitive Behavior Therapy (iCBT), found that the intervention reduced aggression, anxiety, and psychological and physical IPV. A systematic review and meta-analysis of 21 studies found that CBT-based interventions effectively reduced depressive symptoms and anxiety (Arroyo et al., 2017). Cognitive-based theoretical models have been empirically proven to address functioning difficulties related to IPV (Allard et al., 2018), and social learning theory (SLT) explains the unconscious values ingrained in the self through childhood experiences (Dim & Elabor-Idemudia, 2021).

Social Learning Theory

Akers' Social Learning Theory (SLT) is an empirically validated theory based on behavior consisting of four theoretical concepts: differential association, definitions, differential reinforcement, and imitation (Cochran et al., 2016, 2017). Differential association is an individual's definition of favorable, unfavorable, illegal, and deviant behavior. Definitions are an individual's meaning of behavior through judgments and attitudes (Cochran et al., 2016, 2017). Differential reinforcement is action or behavior associated with rewards or punishment (Cochran et al., 2016, 2017). Imitation is behavior modeled after someone (Cochran et al., 2016, 2017).

SLT articulates learning processes associated with IPV (Powers et al., 2020) and is an empirically validated theory (Cochran et al., 2017). The family of origin is critical to children's learning (Coop et al., 2019). Children who witness IPV are at enormous risk of being perpetrators of IPV in adulthood (Cochran et al., 2011; Giordano et al.; 2015, Lee et al., 2022; Liu et al., 2018; Powers et al., 2020); sociodemographic characteristics and prior relationship experiences influence those who accept violence (Coop et al., 2019). Violence exposure within the family of origin has consistently been linked to perpetuating IPV in adulthood (Eriksson & Mazerolle, 2015). Women are more susceptible than men to being IPV victims (Powers et al.,

2020), and those who witness IPV in childhood are conditioned to believe IPV is normal (Yount & Krause, 2017); IPV against the lesbian, gay, and bisexual community is also a public health problem (McRae et al., 2017).

Research into IPV has significantly been associated with current partner IPV and social learning constructs (Cochran et al., 2017). Wareham et al. (2009) found that intergenerational transmission and social learning were the mechanisms for intimate partner violence. Females model their mother's behavior, while males model their father's (Eriksson & Mazerolle, 2015). Exposure to parental IPV leads to complex trauma in children, with men having higher exposure than women (Naughton et al., 2015), with IPV only predictive in adulthood if the father was violent (Eriksson & Mazerolle, 2015), and social learning through childhood with men was strongly associated with IPV perpetration in marriage (Yount et al., 2016).

Most research focuses on survivors' responses to a perpetrator (Raj & Wilermuth, 2016). However, this study will focus on enhancing the knowledge of therapeutic forgiveness benefits through a patriarchal framework that explores the social and cultural (Tonsing & Tonsing, 2019) conditions that contribute to IPV. The relevant factors of forgiveness as a moderator are lacking in researching IPV (Raj & Wilermuth, 2016). Most people experience hurtful interactions, resulting in life-altering pain and affecting their well-being (Kidwell et al., 2012). The World Health Organization defines IPV as violent behavior by an intimate partner that causes physical, sexual, or psychological harm (Stewart et al., 2016). Although women assault male partners (Archer, 2000), IPV is more prevalent for men (Stewart et al., 2016) and impacts women to a greater extent with physical, financial, and emotional injuries (Archer, 2000). The theoretical review of the literature on cognitive behavior therapy (CBT) (Satyanarayana et al., 2016) and

social learning theory (SLT) (Wareham et al., 2009) treatment of IPV will be investigated along with the effect of religiosity and forgiveness on IPV.

Related Literature

This literature review explored the impact of intimate partner violence on relationships through the constructs of behavior and learning through theoretical models of CBT and SLT. IPV against women remains a social problem of epidemic proportions (Catlett et al., 2010). The literature was examined under four headings: intimate partner violence, religion, forgiveness, and support system. Intimate partner violence was presented through the effects of violence on the relationship due to violence witnessed (learned) (Kimber et al., 2018) during childhood. Religion and sexuality were reviewed in terms of doctrinal teachings (Schnabl-Schweitzer, 2010) and cultural and social norms (Asay et al., 2016) by way of community and personal values (Emmons & Paloutzian, 2003) in which forgiveness is applied within the relationship (McCullough, 2001). Lastly, the survivors' support system was explored through the community, family, and church vehicles (Glenwright & Fowler, 2013).

Intimate Partner Violence

There is a consensus that IPV is a serious social problem (Trabold et al., 2017) and threatens women of every social class, ethnicity, and religious affiliation (Bent-Goodley & Fowler, 2006; McAllister & Roberts-Lewis, 2010). IPV is a severe problem worldwide (Makara-Studzinska & Madej, 2016) and in the United States (Wardle, 2003). It is estimated that 5.3 million women (about twice the population of Arkansas) in the United States experience IPV every year, and almost 43 million women (about twice the population of New York) experience IPV in the form of rape or physical violence during their lifetime (Dichter et al., 2017a). Africa as a continent has a verified 37% prevalence of IPV, the highest in the world (Adjei, 2018). In

Europe, within the 28 European Union member states, 22% of women had experienced IPV (European Union, 2014): Finland in 2014 had a rate of 32% (European Union, 2014) and in 2016 a 42% rate (Pengpid & Peltzer, 2016); Poland had a 34.3% rate (Pengpid & Peltzer, 2016) and Spain in 2014 had a 13% rate (European Union, 2014) and in 2016 a 15.2% rate of prevalence (Pengpid & Peltzer, 2016). In Asia, China in 2004 had a rate of 34% (Parish et al., 2004) and in 2012 a 24.7% rate (ACWF & NBSC, 2012); Vietnam had a rate of 32.7% (Vung et al., 2008), while in East Asia there is a 16.3% prevalence (Peterman et al., 2015). In South America, Chile has a 31% prevalence (Pengpid & Peltzer, 2016). While the Muslim world statistic is difficult to verify, a few examples include Pakistan, with an estimated 70% to 90% rate, and the Middle East with an estimated 8.1% to 64.6% prevalence of IPV (Hawcroft et al., 2019).

In 2013, the World Health Organization reported that 30% of women had experienced physical or sexual violence by their partners (WHO, 2013). IPV is prevalent worldwide and is a public health problem affecting countless women (Lenahan, 2009). The effects of IPV are far-reaching in terms of physical, psychological, and social consequences and are women's most prevalent cause of injury (McAllister & Roberts-Lewis, 2010). Commonly cited estimates are that 7.6% to 11.5% of men and 12% to 25% of women are physically or sexually assaulted by an intimate partner each year (Basile et al., 2011). Much research has been undertaken to identify factors that may increase or decrease men's likelihood of abusing their female partners (Stith et al., 2012).

The World Health Organization defines violence as using physical force, which results in injury, damage, death, psychological pain, abnormal development, or deprivation; 80% of violence between partners occurs in the first four years of a relationship (Makara-Studzinska & Madej, 2016). Violence is prevalent and multifaceted, multiclausal, and complex (Whiting et al.,

2009). In the United States, IPV refers to violence between current or former partners in a relationship; it is defined broadly by American laws, and every state has its own version of a domestic violence law (Wardle, 2003). Every year in the United States, 30% of female homicides involves intimate partners (Ellison et al., 1999). The Department of Justice in the United States defines domestic violence as abusive behavior that presents in a pattern that is used to take power, control, or authority over an intimate partner; this behavior can take the form of physical, sexual, emotional, economic, or psychological actions or threats which influence another person (Boujarian et al., 2016). IPV victims often cling to hope for change, and they must work harder to ensure the marriage works (Nason-Clark, 2004, p. 304). Women who share custody of children with abusers are vulnerable to post-separation violence (Hardesty & Chung, 2006).

In 2014, the U.S. Department of Justice estimated an annual national incidence of 2,100 intimate partner homicides, 70% involving females as victims (Truman & Langton, 2015). Forty years of legislation have not reduced violence against women or intimate partner violence (Keating, 2015). Legal proceedings can provide temporary safety for survivors of IPV (Wright & Johnson, 2012). In civil legal services offered to those who experience IPV, the civil protective order (CPO) is the most used tool (Hartley & Renner, 2018; Lopes, 2016; Renner & Hartley, 2021; Wright & Johnson, 2012). There are two reasons why women have no legal recourse for IPV: the risk of consequences from dissolving the relationship (Garcia-Jimenez et al., 2019; Hamby, 2013; Mahoney, 1991) and the legal system not meeting women's expectations (Erez & Belknap, 1998; Ford, 1983; Garcia-Jimenez et al., 2019). The effective use of legal services assists in mitigating the risk of femicide (Fong et al., 2016). Despite legal and educational initiatives, many victims of IPV continue to suffer in silence (Davies et al., 1998; Ragusa, 2012).

According to Basile et al. (2011), one in four women has experienced IPV from a male partner. Forty-one percent of mothers reported a previous violent partner in their lifetime (Graham-Bermann et al., 2009). Violence against women is often accompanied by emotional abuse and controlling behavior (Cooper-White, 2011). IPV inflicts physical and psychological harm requiring medical assistance, and medical professionals are often ill-equipped through training, understanding, resources, and skills to address IPV (Alvarez et al., 2018). Women remain in abusive relationships for many reasons, such as fear, economic hardship, and homeless; women often experience shame brought on by violence in the family (Asay et al., 2016). Physical abuse is prevalent throughout the lifecycle of a relationship, even as the couple ages (Band-Winterstein & Eisikovits, 2009).

The need for IPV education is clear, but this review focused on healthcare IPV education because it must start with screening and counseling survivors and perpetrators (Alvarez et al., 2018; Aymer, 2008). Healthcare workers regularly interact with survivors of IPV and require educational strategies to provide them with effective support (Connor et al., 2012; Crombie et al., 2016). Healthcare workers in the United States are more knowledgeable about IPV than Vietnamese and Chinese workers, with the Chinese more resistant to addressing IPV (Kamimura et al., 2015). There is a need for comprehensive IPV education standards that can be applied globally (Hanson et al., 2016), and identifying IPV victims in the healthcare system is challenging (Sims et al., 2011).

Appropriate IPV screening is essential, especially in populations at elevated risk (Alvarez et al., 2018). The U.S. Preventive Services Task Force (USPSTF) and the Institute of Medicine recommend IPV screening and brief counseling as preventative care for women during routine healthcare visits (USPSTF, 2013; Iverson et al., 2013). The Veterans Health Administration

(VHA) Domestic Violence Task Force has implemented screening for IPV and found in a telephone survey that 18.5% of the women who use VHA primary care reported experiencing psychological, sexual, or physical IPV during the past year. The prevalence of IPV as a societal problem has led to an increased focus in clinical settings to address women's issues; however, women are less likely to disclose IPV because they are there for a different medical reason (Dichter et al., 2017b). Disclosure of IPV warrants an in-depth conversation between the provider and the individual (Swailes et al., 2017), and women often display shame when revealing violence (Asay et al., 2016). Primary care providers are ill-equipped to help women communicate trauma, leaving women's trauma exposure undisclosed (Bergman et al., 2019).

Research has found a relationship between religiosity and acceptance of violence, such as approval of violence (Koch & Ramirez, 2010). Religious women are more at risk than non-religious women when abused due to under-reporting (McAllister & Roberts-Lewis, 2010). Relationships can be one of the pleasures of life, or they can be a source of grief and pain when violence is involved (Valor-Segura et al., 2014). The perpetrator's use of violence is well calculated and often paralyzes victims with fear preventing them from limiting violent events (Band-Winterstein & Eisikovits, 2009). As it progresses, IPV may often be directed toward the entire family (wife and children) (Dahlen et al., 2018). IPV is also associated with adverse childhood experiences, which results in negative healthcare choices (Lenahan, 2009), and women who reported IPV also revealed childhood abuse (Dahlen et al., 2018).

Various theories explain violence in society; for example, Cultural Spillover Theory. According to Klostermann et al. (2012), Cultural Spillover Theory explains IPV. This theory posits that the more a culture embraces violence to achieve its goals and objectives, the higher the propensity for this legitimized violence to be extrapolated to other areas of life where it is not

socially acceptable. Simply stated, violence in one domain of life spills over into other areas of life that are not socially acceptable (Klostermann et al., 2012). IPV in the family system may affect generations of offspring (Wareham et al., 2009).

Childhood Violence

Intimate partner violence (IPV) is considered family violence, with women often being abuse victims (Asay et al., 2016). Although family violence is experienced worldwide, it is rarely reported, and when reported, law enforcement rarely takes it seriously: abusers are rarely removed or prosecuted (Asay et al., 2016). Early exposure to family violence thwarts men's development (Aymer, 2008). Moreover, IPV affects children from different socioeconomic backgrounds, ethnicity, and sexual orientations (Vanderleest & Urquides, 2010). There is a significant association between children exposed to IPV and adult perpetration (Kimber et al., 2018), and men who commit IPV reported childhood exposure to parental violence (Dutton, 2007). Children need security from and attachment to their parents (Aymer, 2008), and children's exposure to IPV is associated with an elevated risk of being victims as well as perpetrators over their lifetime. When violence occurs in the home, children can witness severe violence (71%), mild violence (78%), sexual violence (19%), physical threats (83%) and coercion and control (92%) (Graham-Bermann et al., 2009). Child maltreatment affects millions of children globally and is associated with many adverse later-life outcomes affecting, for example, employment and financial status (Bunting et al., 2018).

IPV is a prevalent problem in the United States, with women of childbearing age often the victims (Carpenter & Stacks, 2009). Children are exposed to IPV in a variety of ways: visually or audibly witnessing violence, seeing the results of violence (bruises and wounds on people, holes in the walls of their home), and having contact with child protective services

(Carpenter & Stacks, 2009). Moreover, exposure to IPV in childhood has been linked to psychological maladjustment in childhood (McDonald et al., 2016). Preschool children exposed to IPV suffer psychological and cognitive complications and physical health issues (Howell, 2011). IPV abuse occurs in children as young as 12 (Howard & Wang, 2003). The prevalence of dating violence among adolescents demonstrates a significant need for prevention programs to reduce it (De Grace & Clarke, 2012).

Researchers have found no evidence supporting universal IPV screening; however, clinicians should be aware of the symptoms of IPV exposure and ask questions to assess the presence of suspected IPV (MacMillan & Wathenm, 2014). Children exposed to IPV are at risk of maltreatment (Campbell et al., 2021; Coulter & Mercado-Crespo, 2015), and 40% of IPV cases are estimated to include child abuse (Herrenkohl et al., 2008). Children exposed to IPV are associated with an impairment in other forms of maltreatment (MacMillan & Wathenm, 2014). Maltreatment associated with IPV includes physical abuse, neglect, and psychological punishment (Harley, 2002). Parental IPV increases the risk of child adjustment problems such as aggression, defiance, and anxiety (Kitzmann et al., 2003). Clinicians must collaborate with healthcare and child protection services to help treat children exposed to IPV (MacMillan & Wathenm, 2014).

Child protective services professionals who interact with clients where IPV has occurred find that child welfare cases have a 70% co-occurrence of IPV (Cross et al., 2012). Professionals are legally bound to report suspected child maltreatment to the appropriate authorities (Rizo et al., 2019). Children who experience IPV are marginalized because criminal justice and social services focus on managing the risk of violence between adults (Callaghan et al., 2018). Children are not represented in policy or criminal law as direct victims of domestic violence (Callaghan et

al., 2018). It is critical to recognize children as equal victims of IPV (Callaghan et al., 2018). Many states have laws in their civil or criminal statutes to address child exposure to IPV; however, most states do not address the issue within their child maltreatment reporting laws (Child Welfare Information Gateway, 2013). IPV exposure alone does not constitute child maltreatment in some states unless specific criteria are met (Rizo et al., 2019).

Child-focused therapies aim to improve mental health in children exposed to IPV (MacMillan & Wathenm, 2014). The research found that mothers who experience IPV sometimes project their emotions of distress onto their children (Chan & Yeung, 2009). In developing resilience from IPV, character is the best predictor for boys and temperament for girls (Bowen, 2015). Adolescents confess they have limited knowledge of IPV, and teenage females have the highest rate per capita of IPV (Chapin & Coleman, 2012) and one-third of adolescents experiencing physical assault at home (Chapin & Coleman, 2014). An individual's value system is defined by their family and powerful social concepts such as religiosity and sexuality (Obeid et al., 2010).

Religiosity and Relationships

Dollahite (1998) defines religion as a community of faithful believers connected by teachings and traditions that lead to a sacred and moral life. Religions are anchored by spiritual traditions that transcend an individual's conception of reality and open a person to a larger reality that the traditions have established over time. Religiosity is an organized system of beliefs that members identify with and adhere to (Consoli-Morgan et al., 2018). Religious affiliation enables a person to forgive more readily (Kidwell et al., 2012). Spirituality comprises the feelings, thoughts, experiences, and behaviors that present as an individual's search for the sacred within or outside religion (Cornish & Wade, 2010). These traditions could lead members to become

aggressive and display behavior such as psychological aggression in relationships. Psychological aggression is an individual's verbal or behavioral actions to humiliate, dominate, intimidate, criticize, and threaten their partner (Follingstad et al., 2005).

Renzetti et al. (2017) found that men high in religious self-regulation had significantly higher rates of IPV perpetration, physical violence, and psychological aggression due to beliefs and values ingrained by religious and spiritual practices. Religious beliefs often exemplify males (patriarchal) as head of the household, with primary decisional power, and females as primary caregivers of children, thus limiting their vocational or economic advancement (Levitt et al., 2008). Patriarchal ideology argues that society esteems men in a position of superiority over women (Dobash & Dobash, 2011), and patriarchal societies affect intimate relationships by supporting men's domineering behavior over women (Ozaki & Otis, 2017). Religious individuals are susceptible to patriarchy (DeRose et al., 2021). Researchers have found an association between religious beliefs and patriarchal attitudes (Acevedo & Shah, 2015; Brooks & Bolzendahl, 2004; Moore & Vanneman, 2003; Seguino, 2011). Religious abusive behavior in the context of IPV occurs across various religions, i.e., Jewish, Christian, and Muslim (Jayasundara et al., 2017).

In a patriarchal society, men are socialized in the cultural ideal of what a man is in terms of authority (Peralta, 2007; Peralta et al., 2011). Male authority is a cultural norm in a patriarchal society (Ozaki & Otis, 2017), and patriarchal ideology is often used to explain to women survivors of IPV that they are to blame for the violence and to absolve the men of responsibility for their behavior (Gracia & Tomás, 2014). Gender role attitudes affect IPV (Garcia-Cueto et al., 2015; Sonis & Langer, 2008) and these attitudes evolved from patriarchal beliefs (Allen et al., 2009; McCarthy et al., 2018; Santana et al., 2006). Men and women possess patriarchal gender

role attitudes based on traditional ideologies of masculinity and femininity (McKinley et al., 2021). Women are shamed and blamed when they defy patriarchal gender roles (Viki & Abrams, 2002). McKinley et al. (2021) found that male normalization of violence toward women was associated with patriarchal gender roles.

Perpetrators often assume that no abuse is occurring in their relationship (Edleson & Brygger, 1986; Wetzel & Ross, 1983) and have difficulty with moral reasoning (Buttell, 1999; Kane et al., 2000). Men who engage in IPV often use patriarchal beliefs to justify their behavior (Flood & Pease, 2009; Munir, 2002; Simister & Mehta, 2010), and women justify IPV more than men do (Rani et al., 2004; Uthman et al., 2009). Individuals who endorse sexist attitudes (gender roles) are more accepting of IPV (Glick et al., 2002; Hammond & Overall, 2013; Overall et al., 2011; Sakall, 2001).

Religious leaders usually operate from a family systems perspective and believe that both partners should take responsibility for ending violence (Moon & Shim, 2010; Ware et al., 2004). Studies have found that religious leaders' primary goal when intervening in IPV is relationship reconciliation (Nason-Clark, 1996; Ware et al., 2004). Men who hold religious beliefs that value rigid gender roles that privilege male power may facilitate IPV perpetration (Koch & Ramirez, 2010). Renzetti et al. (2017) found that men with higher religious commitment were more likely to perpetrate physical and psychological abuse. Abusive men often use religion to legitimize their behavior (Bent-Goodley & Fowler, 2006; Simonic et al., 2013).

Spirituality and religiosity are critical concepts that can be used by psychologists and clergy to meet the mental health needs of individuals (Keller et al., 2015). Religiosity encompasses more than attendance at services or religious affiliation and self-proclaimed importance beliefs (Renzetti et al., 2017). Religious values reinforce family structures and

traditions (Bartkowski, 1997). The religious teaching of male authority and female submission can contribute to intimate partner violence (Levitt & Ware, 2006) and thus religiosity can legitimize intimate partner violence (Renzetti et al., 2017). An individual's regular church attendance was inversely associated with IPV for both men and women (Koch & Ramirez, 2010).

Religious pressure in counseling to forgive a perpetrator causes battered women to remain in abusive relationships (Nason-Clark, 2004). Brinkerhoff et al. (1992) found that religiosity had a feeble effect on IPV perpetration when examining the relationship between religious denomination, church attendance, and IPV perpetration. Ellison et al. (1999) found that Christian Protestant men and women did not disproportionately commit intimate partner violence compared to the rest of society. Vulnerability to IPV may occur if a woman adheres to traditional roles rooted in religious tenets (Potter, 2007). Ellison et al. (1999) found that the possibility of violence increased in males who were more conservative in their belief in the inerrancy and authority of the Bible than their female partners.

For most individuals, religiosity and spirituality are essential concepts; religion encourages a commitment to live a virtuous lifestyle, and spirituality affords an individual an opportunity for self-improvement (Consoli-Morgan et al., 2018). The Hindu and Buddhist religions adhere to justice and karma; Islam has no forgiveness construct, but eternal rewards are based on a life lived honorably, and Muslim women achieve honor through obedience to men, sexual modesty, and religious piety (Glick et al., 2016); and forgiveness is a foundational tenet of Christianity (Worthington & Wade, 1999). Islamic tradition contrasts with the Christian tradition in that for Islam forgiveness is not unconditional (Allam, 1967; Moucarry, 2004). Worthington

and Wade (1999) warned that forgiveness models not rooted foundationally in psycho-social literature are useless when applied in clinical practice.

People worldwide differ in culture, cognition, and social relations in term of their concept of forgiveness (Worthington et al., 2019). Americans focus more on emotional processes as individuals through acts and attitudes toward forgiveness (Joo et al., 2019), whereas the Japanese focus more on adjustment than understanding forgiveness to maintain relationship harmony (Joo et al., 2019). Women who experience psychological IPV require control over their situations to move forward (Davidson et al., 2015).

"Religion and spirituality are important components of life" (Bolton et al., 2019, p. 360). Again, religiosity as a construct comprises shared systemic beliefs and values within a group and is demonstrated through ritualistic practices, whereas spirituality is a personal search for meaning and connection to entities, albeit not always through formalized religion (Hill & Edwards, 2013; Jordan et al., 2014; Zimmer et al., 2016). Spirituality is an individual's search for meaning and connectedness to humanity and nature (Emmons, 1999; Piedmont, 1999). Religious groups have beliefs (Consoli-Morgan et al., 2018), behaviors (Cornish & Wade, 2010), and religious norms (Popescu & Drumm, 2009) that could be classified as fundamentalism.

Fundamentalism

The term fundamentalism is applied to any religious group, such as Christian, Muslim, or Hindu, that rejects Western secular modernism (Appelros, 2014); fundamentalism as a concept is difficult to define (Lundberg, 2007). Fundamentalism is often used to define religiosity (Bayani, 2019). Fundamentalisms include sociological and interdisciplinary perspectives such as absolutism to religious texts, rigid hierarch structure of the group, anti-modernism, and anti-secularism (Barzilai-Nahon & Barzilai, 2005; Saroglou et al., 2020). Religious fundamentalists

have an ultra-conservative approach to sacred texts (Barzilai-Nahon & Barzilai, 2005). From a psychological perspective, fundamentalism expresses cognitive inflexibility, emotional negativity, and moral rigorism (Saroglou et al., 2020). Religious fundamentalism can be found in various religions, such as Christianity, Judaism, Islam, Hinduism, and Buddhism (McDonough, 2013).

Lundberg (2007) defined fundamentalism as an oppositional position against identities and belief practices that alter how a particular religious group relates to society. Extreme religious fundamentalism is not limited to one religion, as demonstrated by Buddhist extremists who attached the Rohingya in Myanmar or Christian extremists' attacks on abortion clinics in the United States (Yustisia et al., 2020). The connection between fundamentalism and violence is that religious fundamentalists are incredibly committed to their religion and ideology and view the modern secular world as an attack on their values and religious teachings. However, most violent acts are associated with Islamic extremists (Yustisia et al., 2020). Religion and spirituality must receive adequate attention and be incorporated into treatment for IPV (Bell & Mattis, 2000; West, 1999).

Religion defines a culture's prosocial values and ideals (Habito & Inaba, 2006). Religiosity is highly prized in Christianity, Judaism, Islam (Saroglou et al., 2004), and Buddhism (Saroglou & Dupuis, 2006). Religion is a living organism that survives through adaptability to maintain its authority in the society that produced it (Preda, 2019). Religions are part of the culture and of cultural systems (Cohen, 2009; Saroglou & Cohen, 2011). Society is full of religious groups representing Christianity, Judaism, Islam, Hinduism, and Buddhism perceived as fundamentalists (Epstein & Gang, 2007). Religion as a value system is crucial in human civilization and impacts ethics, moral principles, and virtues (Musek, 2017). Fundamentalists

armed with absolutes, extreme reactionary attitudes, and ideologies quickly become extremists and militant (Vorster, 2008), and fundamentalists strictly adhere to the tradition of their religion (Vorster, 2008).

In fundamentalism, casuistry (the clever use of unsound reasoning) can reshape individual values and beliefs into the established norms of the religion (Vorster, 2008). Religious fundamentalism is a firmly held tenet of the faith in which believers defy epistemic (validation of knowledge) challenges (Lundberg, 2007). It is a return to traditional values, beliefs, and identity (Bayani, 2019) and can also stem from the fear of a perceived enemy. In Christianity, fundamentalists are most often peaceful in protest, whereas Jewish and Islamic fundamentalists are inclined toward violence (Vorster, 2008), and in Hinduism and Buddhism, fundamentalists are more open-minded and peaceful (Abella, 2018).

Fundamentalists perceive secularization as the decline of religious beliefs and values in modern society and the privatization of religion (Huang, 2015). Whether in Christianity, Judaism, Islam, Hinduism, or Buddhism, fundamentalists aim to bring their religious beliefs back to the central focus of society in a secularized culture (Armstrong, 2004). From a psychological perspective, fundamentalists search for identity, political power, and certainty (Abella, 2018). Abbott et al. (2016) found that fundamentalist religious women raised Catholic or Protestant embraced the teachings on restrictions regarding sex and had low sexual-self-esteem.

Religions can legitimize men as superior by objectifying women as inferior through patriarchal belief systems (Asay et al., 2016). Anderson et al. (2012) found that the connection to a higher power provided a sense of meaning and purpose for women who experienced IPV and enabled them to value life; women experienced a spiritual conflict in remaining in abusive marriages due to religious core doctrinal teachings. Women who adhere to solid religious values

are likelier to stay in an abusive relationship than women with lower religiosity (Horton et al., 1988). Christianity, Judaism, Islam, Hinduism, and Buddhism have specific religious beliefs based on traditions concerning IPV (Jankowski et al., 2018). Christian fundamentalists' beliefs predict their behaviors and attitudes regarding societal issues (Altemeyer & Hunsberger, 2005).

Christian Fundamentalism

Christian fundamentalism is a system of beliefs and practices rooted in a literal interpretation of the Bible and dedication to strict behavioral and social norms through Christian fellowship (Ammerman, 1991). From a clinical perspective, Christian fundamentalism is poorly understood (Aten et al., 2010). The various degrees of fundamentalist beliefs and the resistance to being labeled a fundamentalist are major obstacles for researchers seeking to quantify how many Christians embrace a fundamentalist belief system (Woodberry & Smith, 1998). The lack of understanding is due to the murky distinction between Christian fundamentalism (CF) and other forms of Protestant Christianity (Keller et al., 2015). Researchers define CF as more of an attitude than a prescribed collation of doctrines (e.g., Davis, 2006). Hood et al. (2005) conceptualized CF as a meaning system in which followers understand their world.

Fundamentalism was born in the nineteenth century during a Christian evangelical movement that opposed Darwinism and biblical criticism (Woodberry & Smith, 1998). Fundamentalism was codified in booklets titled *The Fundamentals: A Testimony to the Truth* from 1910 to 1915 and later became known as Christian fundamentalism (Hood et al., 2005). CF can be distinguished from evangelical Christianity by its emphasis on conservatism and authoritarianism (Moyers, 1994). Researchers have found that CF reacts to theological liberalism and cultural modernism (e.g., Stockwell, 2012). Ammerman (1991) articulated five core beliefs shared by CF and evangelical Christians: the inerrancy of scripture, biblical literalism,

separatism, evangelism, and premillennialism (Davis, 2006; Gibson, 1995; Rouse et al., 2019; Unnever & Cullen, 2006). Christian fundamentalists believe they possess the truth; if other Christians do not adhere to their point of view, they are not true Christians (Barr, 1977).

CF, from the beginning, is a response to a perceived force out to destroy Christianity (Beier, 2006). Lyman Steward, a Presbyterian layman with no formal theological education, conceived, funded, and published the *Fundamentals* book series, producing twelve volumes with his brother Milton between 1910 and 1915. Steward established the Bible Institute of Los Angeles (now Biola University), and these efforts evolved from a fierce business rivalry with liberal Baptist John D. Rockefeller (Pietsch, 2013). The terms "fundamentalist" and "evangelical" were interchangeable until the 1940s; from the 1950s and 1960, a split occurred due to evangelist Billy Graham inviting mainstream denominations to his crusades (Beier, 2006). CF was revived in the 1970s and 1980s through the rise of Christian conservatives such as Jerry Falwell, who focused on politics, morality, and science (Shaw & Nicholls, 2010). The degree to which Christians adhere to fundamentalist beliefs predicts their patterns of behaviors and attitudes (Altemeyer & Hunsberger, 2005), such as coping strategies (Phillips & Ano, 2015), responses to existential ambiguity (Nell, 2014), and attitudes to mortality (Friedman & Rholes, 2009; Vess et al., 2012).

CF is positively associated with violence approval and perpetration of IPV (Koch & Ramirez, 2010). A root problem in Christian and biblical counseling is the belief that wives submit to their husbands, leading to re-victimizing women (Cooper-White, 2011). Religious literature on premarital counseling must incorporate IPV awareness and prevention (Cooper-White, 2011). In Muslim countries, religion is critical to governing people's social, political, and legal lives (Obeid et al., 2010). Persons who identify strongly with their religion rarely engage in

intimate relationships outside their faith (Cila & Lalonde, 2014). Male dominance in power structures of religion is undeniable; institutional patriarchy impacts ecclesiastical and family structure and is pervasive in the background while women are abused (Burris & Jackson, 2018); such power structures also exist in Islam.

Islamic Fundamentalism

Islamic fundamentalism has its roots in opposition to secular modernizing whose origins lie in colonialization by the West (Dunne et al., 2020; Kramer, 2013). Islamic fundamentalists adhere to Islamic jurisprudence (Islamic law), where church and state are separated. Islamic jurisprudence comprises guidelines, rules, and regulations extracted from the Qur'an and the Sunnah and is not dependent on time and place conditions (Bayani, 2019). Fundamentalists believe that the only way to achieve Islamic law is to fight society (Bayani, 2019). Islamic fundamentalism has grown recently and attracted considerable attention from the media, world governments, and academia (Alam, 2007). The inability of Islam to embrace modernization through the use of civil magistrates is the root of its belief in having no separation of religion and state, embodied in Islamic jurisprudence (Islamic law) (Lal, 2014). Islam is not the only religion experiencing difficulties with modernization; for example, Buddhism and Hinduism.

Buddhist and Hindu Fundamentalism

Buddhist fundamentalism originated as Buddhist Modernism during the mid-nineteenth century in Sri Lanka and Burma (Thompson, 2020). This fundamentalist movement stemmed from religious, economic, cultural, and political changes caused by European colonialism; it was founded on monastic-oriented and lay traditional devotional values and focused on meditation and empowerment based on science and rationality. Buddhist Modernism has influenced global society with its emphasis on mindfulness (Thompson, 2020). Sri Lankan Buddhists regard

themselves as the true guardians of pure Buddhism (Berkwitz, 2003). Traditional Buddhists emphasize compassion and non-violence; they favor holistic and dialectical teachings with less essentialist thinking about society (Clobert et al., 2015). Fundamentalism has disembodied Buddhist traditions and spread them globally through media in which Buddhist rituals and ceremonies have become spectacles. For example, monks skilled in public speaking have become religious celebrities (Berkwitz, 2003).

Fundamentalism is a reaction to society's marginalization of religion (Sen & Wagner, 2009). Although there has been conflict between Hindu and non-Hindu religions, traditional Hindus tolerate other religions. Hindus are guided socially by the concept of *dharma* (duty, virtue, morality, and religion) (Sundararajan, 2010). Hindu fundamentalists see secularists as elitists possessing Western values out of touch with honest India; they view Gandhi's non-violence and ethnic tolerance as the root of many of India's societal problems (Sen & Wagner, 2009). The major religions, such as Islam, Christianity, and Judaism, have rejected the term "fundamentalist" because it implies that all believers adhere to the political goal of the militant ideology of a few members who manipulate sacred texts and teachings (Appleby, 2002). Despite their differences, fundamentalists of Judaism, Christianity, Islam, and other religions interpret modern history as a dramatic decline in traditional religious values (Appleby, 2002).

Intrinsic/Extrinsic Religious Orientation

Allport and Ross (1967) identified two categories of religiosity or religious orientation: intrinsic and extrinsic. Intrinsic individuals have religion as the guiding principle in their lives, while extrinsic individuals use religion from an instrumental perspective to obtain comfort, a sense of community, and to meet societal rules. All major world religions can be divided into extrinsic and intrinsic religiosity (Saha, 2014). Extrinsic religiosity is demonstrated through

religious practices such as prayers, languages, clothing, and symbols, while intrinsic religiosity consists of ethical principles and a code of conduct (Saha, 2014).

Intrinsic religious-oriented individuals internalize the principles of their religion to their very core regardless of personal or social benefits; their religious practices establish their identity and sense of self and guide them through life experiences (Allport & Ross, 1967). Extrinsic religious-oriented individuals engage in religious activities such as church attendance, but religious beliefs are not core to their identity; their religious practices include personal and social benefits (Allport & Ross, 1967). Intrinsic religious individuals are motivated by spiritual benefits, whereas extrinsic religious individuals are motivated by social benefits (Litman et al., 2019). Gordon et al. (2008) found that intrinsic religious individuals were more likely to forgive an interpersonal betrayal than extrinsic religious individuals; this is based on intrinsic individuals centering life around their religious values, whereas extrinsic individuals were more focused on the social benefits of having a religious community.

Community Values

Patriarchal beliefs comprise a hierarchy wherein men are deemed superior and women inferior (Asay et al., 2016). Traditional beliefs create a hierarchical system that is male dominated in areas such as business, politics, government, education, religious institutions, and families, which must be maintained to ensure a natural social order (Asay et al., 2016). Women being viewed as property is a cultural norm in some societies. There is a struggle to define men's and women's roles worldwide (Asay et al., 2016), and women's roles are becoming less subservient to those of men. In dealing with family violence, a key challenge is to merge cultural beliefs about violence with beliefs about the roles of men and women (Asay et al., 2016).

IPV against women is rooted in power and patriarchy and is deeply ingrained in church traditions and theologies (McMullin et al., 2015). Religious commitment may be inversely associated with violence (Ellison et al., 1999). The Islamic faith is patriarchal: family roles, marriage, and divorce are regarded as God's will, and both socially and legally, women are subordinate to men (Glenwright & Fowler, 2013). In France, to prove they have adapted to new social norms and assimilated into society, Muslim women are compelled to speak about their religious beliefs and practices and to disclose privileged information about their sexual life to prove they are sexually healthy (Fernando, 2014).

Personal Values

Fundamentalist religious women perceive their sexual behaviors as congruent with their moral standards. Women with sexually permissive attitudes cannot express what they want sexually nor communicate it to their partners (Abbott et al., 2016). Fundamentalist religious women raised as Catholics exhibit non-flattering perceptions of their sexual selves than do religious liberal women reared in the Catholic faith (Abbott et al., 2016). Protestant women who endorse sexually permissive attitudes express negative perceptions of their sexual selves than Protestant women with more conservative sexually permissive attitudes. Women with a liberal view of sexual attitudes perceive casual sex as an acceptable societal norm (Abbott et al., 2016).

When confronted by scriptures discouraging relief from an abusive marriage, a woman will remain in an abusive relationship out of guilt (Jankowski et al., 2018). Churches depend on nuclear families for existence, but violence against women in church families undermines the concept of happy Christian living. Hence, the clergy has been slow to consider the dissolution of violent marriages (Nash, 2006). Members want the clergy to become educated on IPV and speak

out more often from the pulpit about the subject (Zust et al., 2021). The spiritual concept of forgiveness is often forgotten and replaced by duty (Nash, 2006).

Forgiveness

Forgiveness is difficult (Marshall, 2014) and painful (Vitz & Mango, 1997). All the major religious traditions have forgiveness as a tenet (Rye et al., 2000; Smith, 2009), and research has found that religiousness, in general, is related to forgiveness (Gorsuch & Hao, 1993; Shoemaker & Bolt, 1997), with dispositional forgiveness outcomes consistent between Protestant and Jewish (Cohen et al., 2006) and between Christian and Muslim subgroups (Azar & Mullet, 2002). There are two sides to forgiveness, those seeking forgiveness (Sandage et al., 2000) or those simply apologizing (Exline et al., 2007), and these actions could be directed at a victim or at God (Sandage et al., 2000). The granting side of forgiveness involves emotional or decisional forgiveness (Worthington & Scherer, 2004); this forgiveness can be for the self (Fisher & Exline, 2010), the perpetrator (Sandage et al., 2000), or the situation (Thompson et al., 2005b).

Forgiveness improves personal relationships between victims and perpetrators (Karremans & Van Lange, 2004; Tsang et al., 2006). Correct forgiveness can benefit one's physiological and psychological well-being (Langman & Chung, 2013; Raj et al., 2016; Wade et al., 2014; Wohl et al., 2008). Various studies have found a connection between granting forgiveness and psychological health (Berry et al., 2005; Friedberg et al., 2009; Lawler et al., 2005; Lawler-Row & Piferi, 2006; Messay et al., 2012). Forgiveness has been associated with improved spinal issues, physiological phenomena, and cardiac problems (Friedberg et al., 2009; Lawler-Row et al., 2008).

Intimate Partner Violence (IPV) experiences negatively affect a survivor's trust in other people and influence a survivor's disposition toward forgiveness (Davidson et al., 2015).

Forgiveness is a complex process fueled by socio-cognitive variables. It is a way to overcome negative feelings directed at perpetrators (Baldry et al., 2017) and is associated with health (Webb et al., 2013). Women reported that their church communities were not helpful during IPV because they pressured them to forgive their abusers, enabling the abuse and evoking guilt to have women remain in a troubled relationship (Anderson et al., 2012).

Forgiveness applies to all people, whether religious, spiritual, or professing no religion (Webb et al., 2013), and involves self-regulation within the individual (Pierro et al., 2018). Women who experience IPV tend to exhibit minor forgiveness, as opposed to women who have not experienced IPV (Davidson et al., 2015). Forgiveness predicts mental health and mediates resentment and negative feelings (Gumus & Kislak, 2019). Women who seek revenge find it challenging to express compassion and kindness toward transgressors (Davidson et al., 2015).

Religious transformative processes include forgiveness, commitment, sacrifice, and sanctification (Goodman et al., 2013). Men and women process transgressions differently and respond differently to their perceptions. Women forgive more than men, and their quest for a relationship may help women forgive rather than seek justice (Miller et al., 2008). Intrinsic religious people view religion as a central guiding principle of their lives; hence religious beliefs direct them daily. Extrinsic religious people see religion as a means of comfort, a sense of community, and a means adhering to legal and social rules (Allport & Ross, 1967). Intrinsic religious individuals tend to forgive more readily (Brown et al., 2007) and will likely forgive interpersonal betrayals (Gordon et al., 2008).

Worthington et al. (2019) identified four types of forgiveness: divine, self, person-to-person, and organizational-societal. They also found no single Christian conceptualization of forgiveness due to variations in beliefs, values, and practices. Forgiveness is associated with

health and mediating physiological processes to provide an emotion-focused coping strategy (Worthington & Scherer, 2004). Forgiveness is a human concept that permeates cultures, ethnicities, and religions (Worthington et al., 2019). Takada and Ohbuchi (2013) identified two types of forgiveness: valid and hollow. They found that valid participants were motivated to forgive based on relationship-oriented motives and used collaborative methods to resolve conflict, whereas hollow participants were motivated by self-oriented goals and avoidance methods, and were less satisfied with the outcome of the conflict than were valid participants. Maltby and Day's (2004) study found that the ability to forgive outright was associated with positive emotions compared to the likelihood of forgiving, which was negatively associated with a neurotic defense style. Forgiveness given to save a relationship was associated with increased distress instead of forgiveness to restore the self (Gabriels & Strelan, 2018).

A variety of instruments have been developed to measure forgiveness in different circumstances, such as a particular incident (Kamat et al., 2006), a specific transgression (McCullough et al., 1998; Subkoviak et al., 1995), a specific person (Hargrave & Sells, 1997), a close relationship (Pollard et al., 1998), and dispositional forgiveness (Berry et al., 2001, 2005; Brown, 2003; Chiaramello et al., 2008; Kamat et al., 2006; Mauger et al., 1992; Mullet et al., 1998; Roberts, 1995; Rye et al., 2001; Wohl et al., 2008). More than any religion, Christianity strongly emphasizes forgiveness (Lutjen et al., 2012). However, Islam (Abu-Nimer & Nasser, 2013), Buddhism (Rye et al., 2000), and Hinduism (Duggi & Kamble, 2014; Temoshok & Chandra, 2000) define forgiveness according to their tenets.

Islam and Forgiveness

Islam opposes the Christian tradition because forgiveness cannot be unconditional (Allam, 1967; Moucarry, 2004). Islam provides a framework to guide followers' behavior,

health, politics, and laws (Scull, 2015). In Islam, forgiveness is a significant value (Abu-Nimer & Nasser, 2013) and is associated with four Arabic terms; *Al-Afuw* (pardon), *Safhu* (turning from sin), *Ghafara* (erasing sin), and *Samah* (generous) (Abu-Nimer & Nasser, 2013; Duggi & Kamble, 2014). *Tawba* (repentance) is also an essential Islamic tenet consisting of four pillars: regret: for misdeeds; determination: not to repeat wrongdoings; compensation: for wrongdoings; and *Istighfar* (forgiveness): seeking Allah's (God's) forgiveness (Uyun et al., 2019). Islam teaches forgiveness and restores relationships between people and God (Abu-Nimer, 2003; Irani & Funk, 1998). In Islam, forgiveness is based on the intentionality of the offender and places an emphasis on a positive outcome (Abu-Nimer & Nasser, 2013).

Islam, Judaism, and Christianity exhibit significant differences in approaching forgiveness. Judaism and Islam require repentance before forgiveness (Auerbach, 2005). Christianity teaches mercy and love to its believers to facilitate forgiveness without preconditions (Auerbach, 2005). In mainstream Christianity, people develop an attachment to God through the Spirit (Bracken, 2002) and relate to others because they are created in the image of a relational God (Stewart, 1998; Wainwright, 2008). Christians believe in the actual presence of God in people (Miner et al., 2014).

In Judaism, the rules for forgiveness are strict. Repentance comprises three phases: the individual must first confess the sin, then repent of wrongdoing, and lastly endeavor not to repeat the sin. The individual must also confess the sin openly to the community and compensate the victim; after these conditions are met, the perpetrator is forgiven (Auerbach, 2005). In Islam, the requirements for forgiveness are the same as in Judaism, with settlement and reconciliation taking place within a communal framework to end conflict and restore peace through forgiveness (Auerbach, 2005). Islamic theology views God's presence as symbolic and psychological;

Muslims assert that God's presence is metaphorically in an individual's heart (Miner et al., 2014). Christians relate to God through Christ, who is believed to be God and man; Muslims relate to God through prophets and symbolism through divine names (Miner et al., 2014).

Within Islam, there is a defined difference in forgiveness between humans and Allah (God) (Abu-Nimer & Nasser, 2013). For Muslims, repentance is required for forgiveness, but the individual must not take forgiveness for granted, for the decision to forgive is Allah's only (Abu-Nimer & Nasser, 2013). The concept of forgiveness from an unconditional perspective does not exist in Islam (Abu-Nimer & Nasser, 2013), where forgiveness is associated with apologizing (Warsah, 2020). Muslims scored lower on unconditional forgiveness concerning Christians and were more forgiving when an apology was offered (Azar & Mullet, 2002; Johnstone et al., 2012; Mullet & Azar, 2009). The Muslim community is conceived as a political and religious community, whereas the Christian community is conceived as only a religious community.

This ideology leads to theological differences in the meaning of apologies (Mullet & Azar, 2009), and there are also similarities and differences between forgiveness and apology. Forgiveness is broader than an apology, where forgiveness involves the perpetrator's request to be forgiven and the victim's response, whereas apology denotes the action of requesting forgiveness (Auerbach, 2005). Conflict is a universal human experience (Basile et al., 2011) and an apology is a conflict management method (Lazare, 2006). A perpetrator's affiliation with God facilitates the possibility of an apology (Cooney & Phillips, 2013), which allows the perpetrator to restore a relationship compromised by their behavior (Tabak et al., 2012).

Apologies facilitate forgiveness through the empathy and compassion a victim feels for a perpetrator offering deep condolence (apology) for their behavior (McCullough et al., 1998). "Apologies are essential in the broader work of forgiveness" (Marshall, 2014, p. 500). A

perpetrator's request for forgiveness adds to an apology's sincerity and moral quality (Brooks, 2020). The theological framework in our lives provides our understanding of apology and forgiveness, shaping our everyday practices (Marshall, 2014). In mainstream Christianity, reconciliation and forgiveness are deeply rooted in a God that freely forgives everyone; in contrast, in Islam, to obtain Allah's (God) forgiveness, individuals must prove themselves worthy of forgiveness (Abu-Nimer & Nasser, 2013; Gold & Davis, 2005).

Buddhism and Hinduism, and Forgiveness

Forgiveness is not a core tenet of the Buddhist tradition, whereas compassion is the building block of Buddhism (Gold & Davis, 2005; Paz et al., 2007). The Buddhist tradition has two virtues conceptualizing forgiveness: forbearance and ending suffering (Paz et al., 2007). Buddhism emphasizes forgiveness through forbearance and compassion to resolve personal suffering (Rye et al., 2000). Buddhists follow an eightfold path to enlightenment and elimination of pain (Gold & Davis, 2005; Menahem & Love, 2013). Some Buddhists define forgiveness as letting go of anger (Boleyn-Fitzgerald, 2002). Buddhism values forgiveness, but it questions the underlying attributes of forgiveness and thus scores the lowest in the practice of forgiveness compared to Christianity, Islam, and Judaism (Johnstone et al., 2012).

Hindu tradition regards forgiveness as a virtue (Duggi & Kamble, 2014; McCullough et al., 2005). Hinduism considers forgiveness a virtue to facilitate the path of dharma (Gold & Davis, 2005; Rye et al., 2000). In Hinduism, forgiveness is a pillar of spirituality and is defined as mental strength when dealing with offenses by controlling emotions and exhibiting tolerance under challenging circumstances (Duggi & Kamble, 2014; Temoshok & Chandra, 2000). The Hindu tradition teaches grace that offers forgiveness without judgment on sin, unlike the

Christian tradition (Alan, 2007). Hindus do not want negative feelings and anger to carry over to future births; therefore, they must forgive (Tripathi & Mullet, 2010).

IPV and Forgiveness

Several studies have identified a relationship between forgiveness and IPV. Cowden et al. (2020), in a study of 515 women in heterosexual romantic relationships, examined the role of forgiveness in moderating relations between psychological abuse and indicators of psychological distress; they found that forgiveness moderated the relationship between psychological abuse with depression and stress when the women used forgiveness as a healing agent to replace negative emotions with positive emotions toward their perpetrator. Forgiveness is a process that identifies harm to an individual and offers the possibility to heal that harm. It disrupts the damage during moments of emotional, spiritual, or physical violence and offers a path to reconstructing relationships in the future (Marshall, 2014). “A process of forgiveness without grief and anger is unfathomable” (Hamman, 2012, p. 437). Forgiveness is a theological construct and a relational and social process (Marshall, 2014).

The world’s cultures and religious traditions all have some process for navigating hurt, pain, and traumas that occur in relationships (Marshall, 2014). Forgiveness is a critical tenet of the Christian faith; however, it is unclear if an individual’s religious orientation influences their decision to forgive (Gordon et al., 2008). Research has found that religious people value forgiveness more than non-religious people (Enright et al., 1989; Gorsuch & Hao, 1993; Rye et al., 2000), but it remains unclear if this valuing of forgiveness translates into being more forgiving of interpersonal betrayals (Gordon et al., 2008). McCullough and Worthington (1999) found a disconnect between religious people’s ideal (abstract) of forgiveness and the actual act (concrete) of forgiving during their real-time situations.

In another study, Ysseldyk et al. (2019) found that physical and psychological abuse moderated forgiveness and depression in female undergraduate students; forgiveness was strongly negatively associated with psychological symptoms where the perpetrator was unapologetic, compared to a positive association where the perpetrator was remorseful. Lahav et al. (2019), focusing on mental and physical health symptoms, found that forgiveness protected against distress in military spouses who experience lower levels of intimate partner violence but was not present at higher levels of violence.

Berecz (2001) proposed an operational definition of forgiveness as an interpersonal change of perspective within a person toward a transgressor, while Ashton and Lee (2001) proposed that forgiveness and nonretaliation are vital to a person's emotional stability. Forgiveness and reconciliation differ: forgiveness is letting go of a desire for retaliation toward a transgressor, whereas reconciliation is a survivor's and perpetrator's decision to restore the relationship (Miles, 2001). Kidwell et al. (2012) found three unique elements related to why a person forgives: they were motivated by a host of factors and used a variety of strategies to be able to forgive; the process of forgiveness was an intentional and long journey; and forgiveness was described as multifaceted and incorporated religious and secular strategies to obtain forgiveness.

According to Govier and Hirano (2008), there are three categories of forgiveness: bilateral forgiveness, when the survivor and the perpetrator come together, the perpetrator acknowledges wrongdoing to the survivor and expresses remorse for their actions, and forgiveness takes place; unilateral forgiveness, when the survivor does not wait on the perpetrator to acknowledge wrongdoing but offers forgiveness due to a variety of personal commitments; and invitational forgiveness, when a survivor forgives when repentance by the

perpetrator has not occurred, but the survivor encourages the perpetrator to acknowledge wrongdoing, commit to cease and not continue the behavior, and if appropriate provide restitution.

The process of forgiveness involves changing a survivor's attitude toward a perpetrator through values and behavioral elements (Govier & Hirano, 2008). Gordon et al. (2008) defined forgiveness as reducing negative emotions and increasing positive emotions by the victim directed toward a betraying partner. In the field, as the study of forgiveness evolved, additional research by Berecz (2001) further illuminated an understanding of forgiveness through the reconciliation process by positing two categories of forgiveness: conjunctive forgiveness that results in reconciliation between the transgressor and the victim, and disjunctive forgiveness that does not lead to reconciliation but allows parties to leave the relationship without chronic destructive emotions.

Gordon et al. (2008) posit that two types of religious orientation influence an individual's forgiveness capacity. Intrinsically oriented people are more internally motivated by religious beliefs and are more apt to forgive interpersonal betrayals, while extrinsically oriented people are externally motivated by societal and religious norms to forgive, thus scoring higher on vengefulness measures. Several evidence-based models assist individuals in learning how to forgive; for example, the REACH model (Clabby, 2020). Restoring an individual from IPV takes a community effort and involves healthcare providers, family, and religious institutions (Abbott et al., 2016).

Support System: Community, Family, and Church

Healthcare providers feel unprepared to assist women who experience IPV (Alhalal, 2020; Alvarez et al., 2018; Corley & Sabri, 2021) Healthcare providers attribute training

deficiency to their ineffectiveness in responding to IPV incidents (Alhalal, 2020; Alvarez et al., 2018; Corley & Sabri, 2021). Providers are not equipped with the resources and skills to deliver trauma-informed care to women who experience IPV (Alhalal, 2020; Alvarez et al., 2018; Corley & Sabri, 2021). Providers' lack of understanding of IPV contributes to insufficient continuity of care for survivors of IPV (Alhalal, 2020; Alvarez et al., 2018; Corley & Sabri, 2021). Women with IPV lack the support of clinics and the community (Alhalal, 2020; Alvarez et al., 2018; Corley & Sabri, 2021). Providers' lack of preparation in addressing IPV in a clinical setting, in addition to limited resources, unduly burden patients with rigorous time constraints, impairing woman-centered care for IPV survivors (Alhalal, 2020; Alvarez et al., 2018; Corley & Sabri, 2021). There is a critical need to prepare by training practicing student nurses to screen patients for IPV (Alhalal, 2020; Alvarez et al., 2018; Corley & Sabri, 2021).

Professional nursing organizations have developed IPV screening training, trauma-focused care, and referral services; however, the guidelines are implemented inconsistently in educating nurses in the United States (Alhalal, 2020; Alvarez et al., 2018). Communities that view IPV as a public threat and oppose the right to privacy are more equipped to change cultural norms (Asay et al., 2016). It is essential for women who experience IPV to have a support system that provides affirmation, encouragement, stability, and resources (Anderson et al., 2012). Education is the key to helping victims of IPV, and often families are unaware that IPV exists within relatives' relationships (Asay et al., 2016).

Families often do not intervene during IPV because they are unaware, do not wish to interfere, or do not know how to help (Anderson et al., 2012; Sharli et al., 2022). Family violence is concealed behind closed doors. The family unit is considered a private institution, and violence is permitted behind closed doors (Asay et al., 2016; Sharli et al., 2022). When

confronted by a violent family member, individuals can demonstrate hope when they protect and nurture each other (Asay et al., 2016; Sharli et al., 2022). Without a supportive family, victims must rely on the community for the strength to flee abusers (Asay et al., 2016; Sharli et al., 2022).

Women reported that church support was instrumental in recovery (Anderson et al., 2012; Shaw et al., 2022), and found that religious communities provided emotional comfort and security, which in turn led to a sense of belonging (Anderson et al., 2012; Shaw et al., 2022). Women-to-women ministry was of value since it provided peer-to-peer guidance, mentoring, and companionship (Anderson et al., 2012; Shaw et al., 2022). Churches are gateways to community involvement and can decrease an individual's isolation while increasing their social networks (McAllister & Roberts-Lewis, 2010; Shaw et al., 2022). Women have confidants on various emotional issues as well as the spiritual realm, and tend to have higher levels of religiosity than men (Luquis et al., 2012; Shaw et al., 2022).

Religious communities instruct proper behaviors in private and public life and raise awareness for victims and perpetrators of the inappropriate nature of abuse (McAllister & Roberts-Lewis, 2010). Religious leaders are helpers, counselors, and confidants (Neergaard et al., 2007). Clergy can positively affect IPV by acknowledging that there may be women in their congregations experiencing IPV and providing compassionate instructions through sermons (Neergaard et al., 2007). Pastors and priests can assist abused parishioners by understanding how perpetrators use violence to control and batter women's emotional, psychological, physical, and spiritual journeys (Neergaard et al., 2007).

Summary

Discussing the theoretical framework began with Cognitive Behavior Therapy (CBT) as the gold standard for treating IPV (Jackson et al., 2018). CBT is strongly empirically supported and effective in changing problematic behaviors (Ager, 2020; Satyanarayana et al., 2016). Although CBT significantly reduces IPV recidivism (Arias et al., 2013), the CBT model does not address individuals' learning behaviors, which can be examined by Social Learning Theory (SLT) (Dim & Elabor-Idemudia, 2021). Aker's SLT is an empirically validated theory based on behavior that utilizes four theoretical concepts: differential association, definitions, reinforcement, and imitation (Cochran et al., 2016, 2017). The SLT model articulates learning processes associated with IPV (Powers et al., 2020). SLT reveals childhood exposure to IPV (Cochran et al., 2011), which leads to a condition of elevated risk of IPV perpetration in adulthood (Eriksson & Mazerolle, 2015) and acceptance of IPV as normal behavior (Yount & Krause, 2017).

The chapter then discussed IPV as a serious societal problem (Trabold et al., 2017), a severe global health crisis that primarily affects women regardless of social, educational, cultural, and economic background (Bent-Goodley & Fowler, 2006; Makara-Studzinska & Madej, 2016; McAllister & Roberts-Lewis, 2010). The worldwide rates of IPV were briefly discussed. In the United States, 5.3 million women have a year of experience with IPV (Dichter et al., 2017a); in the 28 European Union countries, 22% of women experienced IPV; in Africa, the rate was 37% (Adjei, 2018); in Asia, China in 2004 had a rate of 34% (Parish et al., 2004); in South America, Chile had a 31% rate (Pengpid & Peltzer, 2016); and in the Middle East the rate is estimated between 8.1% and 64.6% because of the lack of accurate data(Hawcroft et al., 2019). Some reasons why women remain in IPV relationships include shame, fear, finances, and homelessness (Asay et al., 2016). Exposure to IPV in childhood was discussed and linked to

psychological maladjustment in childhood (McDonald et al., 2016), with 40% of IPV cases estimated to include child abuse (Herrenkohl et al., 2008).

The concept of religion was also examined. Religion involves a community of faithful believers adhering to teachings and traditions (Consoli-Morgan et al., 2018; Dollahite, 1998). Religious beliefs often exemplify a patriarchal hierarchy (Levitt et al., 2008) in which men are deemed superior to women (Dobash & Dobash, 2011; Ozaki & Otis, 2017). Patriarchal religious beliefs (PRB) often legitimize IPV and instruct women to forgive their perpetrators (Renzetti et al., 2017). Adherence to fundamental religious doctrine often empowers IPV within those relationships primarily dominated by a patriarchal power structure (DeRose et al., 2021). The term "fundamentalism" was discussed and can be applied to any religious group (Appelros, 2014). Religious fundamentalists have an ultra-conservative approach to sacred texts (Barzilai-Nahon & Barzilai, 2005) and can be found in various religions, such as Buddhism, Christianity, Judaism, Islam, and Hinduism (McDonough, 2013), which were briefly discussed in the chapter.

The concept of forgiveness was also discussed, and all major religions have forgiveness as a tenet and avenue for healing (Rye et al., 2000; Smith, 2009). Forgiveness improves the personal relationship between victims and perpetrators (Karremans & Van Lange, 2004; Tsang et al., 2006) and, used correctly, can benefit one's physiological and psychological well-being (Langman & Chung, 2013; Raj et al., 2016; Wade et al., 2014; Wohl et al., 2008). For those who experience IPV, forgiveness is an avenue for overcoming negative feelings toward perpetrators (Baldry et al., 2017) and applies to everyone, whether religious or not (Webb et al., 2013).

Lastly, the support system for IPV survivors was examined. Communities that view IPV as a threat are more equipped to change cultural norms (Asay et al., 2016). Women need a support system that provides affirmation, encouragement, stability, and the resources to recover

from IPV (Anderson et al., 2012). The family demonstrates hope when they protect and nurture a family member who is experiencing IPV, and in the absence of a supportive family, individuals must rely on the community (Asay et al., 2016). Religious institutions can address IPV and provide emotional comfort and security to IPV survivors (McAllister & Roberts-Lewis, 2010), with religious leaders acting as counselors and confidants (Neergaard et al., 2007) who instruct on proper behavior in relationships (McAllister & Roberts-Lewis, 2010).

Chapter Three: Methods

Overview

This study is quantitative and used an online survey to investigate the relationship between intimate partner violence and religiosity, specifically, how forgiveness moderates that relationship for victims of IPV who adhere to or do not adhere to patriarchal-religious beliefs. The study utilized an independent t-test and multivariate regression to examine the level of forgiveness of the participants. The data from this research may assist clinicians, counselors, and mental health professionals incorporate forgiveness as a treatment agent in theoretical models to address IPV. This chapter discussed the online survey design and the rationale for why this approach is most appropriate. Also discussed were dependent and independent variables: the dependent variables are IPV violence approval and religiosity and the independent variables are forgiveness and PRB.

The study used a moderated mediation analysis, with the moderator variable being forgiveness and the other variable being IPV violence approval, PRB, and religiosity. The variables were evaluated using the following instruments: for *forgiveness*, the Heartland Forgiveness Scale (Thompson et al., 2005a); for *IPV*, the Personal and Relationships Profile (Straus et al., 1999); for *PRB*, the Patriarchal Beliefs Scale (PBS) (Yoon et al., 2015); and for *religiosity*, the Centrality of Religiosity Scale (Huber & Huber, 2012). The chapter concludes with discussions of research questions, hypotheses, participants, recruitment process, instrumentation, procedures, and data analysis.

Design

Following formal approval by the Institutional Review Board (IRB) (see Appendix A), the study used a quantitative nonexperimental research design to investigate the relationship

between IPV, religiosity, and forgiveness among individuals and their significant others. The data were collected utilizing an online survey. Surveys are widely used to collect data (Guerard et al., 2016) and online surveys can produce data superior to those obtained using paper surveys when proper strategy, planning, and execution occur (Chang & Vowles, 2013). Online surveys benefit researchers (Al-Salom & Miller, 2019) because they allow for complex questionnaire design (Harms et al., 2017). The advantages of online surveys include immediate follow-ups such as thank you messages, no geographical limitations, and the ability to target a sample (Chang & Vowles, 2013).

The design used an independent t-test parametric test (Fagerland, 2012; Kim, 2015; Liu & Wang, 2021) to explore the difference in the level of forgiveness for those who adhere to PRB and those who do not. The design utilized moderation analysis (Edwards & Lambert, 2007; Hayes, 2018; Ng & Chan, 2020) to examine the effect of forgiveness on the relationship between IPV and religiosity and the relation with PRB. There are multiple variables in any study, and those in this study include forgiveness, IPV violence approval, religiosity, and PRB. Again, the researcher utilized an independent t-test for RQ1 and a moderation analysis with multiple linear regression for RQ2 and RQ3.

An independent t-test is a parametric test and an inferential statistic used to examine the difference between the means of two groups (Fagerland, 2012). There are two types of independent t-tests, parametric and nonparametric methods (Kim, 2015), and this study will use parametric methods. Parametric methods define the probability distribution of variables and make inferences on that distribution, while nonparametric methods are used when the distribution is not defined (Kim, 2015); the researcher assumes that the mean and variance estimates will be normally distributed (Liu & Wang, 2021). Again, an independent t-test

examines the difference in the mean of two groups (Liu & Wang, 2021) and is computed using the formula in Figure 1; the *critical t* value is found on t distribution using a desired alpha level (e.g., 0.05) and degrees of freedom (Liu & Wang, 2021) that is computed using the formula in Figure 2.

Figure 1

Independent T-test Formula

$$t = \frac{\overline{x_1} - \overline{x_2}}{\sqrt{\frac{S_1^2}{N_1} + \frac{S_2^2}{N_2}}}$$

Figure 2

Degrees of Freedom Formula

$$df = \frac{\left(\frac{s_1^2}{N_1} + \frac{s_2^2}{N_2}\right)^2}{\frac{(s_1^2/N_1)^2}{N_1 - 1} + \frac{(s_2^2/N_2)^2}{N_2 - 1}}$$

Moderation effectively investigates hypotheses in counseling psychology research (Lorah & Wong, 2018). The concept of moderation is where the relationship between a predictor and outcome variable is the primary concern and how the moderator variable affects that relationship (Liu & Yuan, 2020). Moderation, in its simplest form, is an examination of the relationship between an independent and dependent variable that changes according to the value of a moderating variable (Dawson, 2014; Preacher et al., 2016). Moderating variables imply the effect of the relationship between a predictor and outcome variable affected by moderating variables (Lorah & Wong, 2018). Moderation is the statistical examination of differences or

conditions that influence the relationship between a predictor and outcome variable (Edwards & Lambert, 2007). Moderation analysis examines when or under what circumstances effects exist (Hayes & Rockwood, 2017). Moderation is also called interaction, such as X's effect on Y is moderated by W, so X and W interact (Hayes & Rockwood, 2017). This interaction is the core of testing moderation (Dawson, 2014).

Moderation models test hypotheses that examine the relationship between an independent variable and a dependent variable that depends on the level of influence of a moderator variable (Aguinis, 1995; Baron & Kenny, 1986). A hypothesis concerning moderation is best tested when the product of X (religiosity and PRB), W (forgiveness), and Y (IPV) are included along with X and W; this allows the researcher to see that X's effect on Y depends linearly on W (Hayes, 2018). Statistical moderation implies that the strength of a relationship between X and Y depends on the value of the moderator variable (Liu & Yuan, 2020). It is used to test the relationship between predictor (X) and outcome (Y) variables as impacted by the moderator (W) (Montoya, 2019). The moderation model helps one understand the changes in the relationship between X and Y as W changes (Montoya, 2019).

Multivariate analysis will be used to examine the data, and the multivariate model is a useful analytic tool in various situations for researchers (Pituch et al., 2016). A multivariate model allows a researcher to mathematically evaluate the association between variables such as X and Y if individuals do not differ on other antecedent variables in the model (Hayes, 2018). The multivariable model allows multivariable regression assessment of several variables to explore relationships between independent and dependent variables (Hidalgo & Goodman, 2013). Model 1 (Hayes, 2018) is used for RQs 2-3 (see Figures 3 and 4) and analyzes multiple

possible correlated outcomes within-study and between-study correlations (Chen et al., 2015). The multivariate model has advantages over the univariate approach (Wei & Higgins, 2013).

Figure 3

Simple Moderation Analysis RQ2

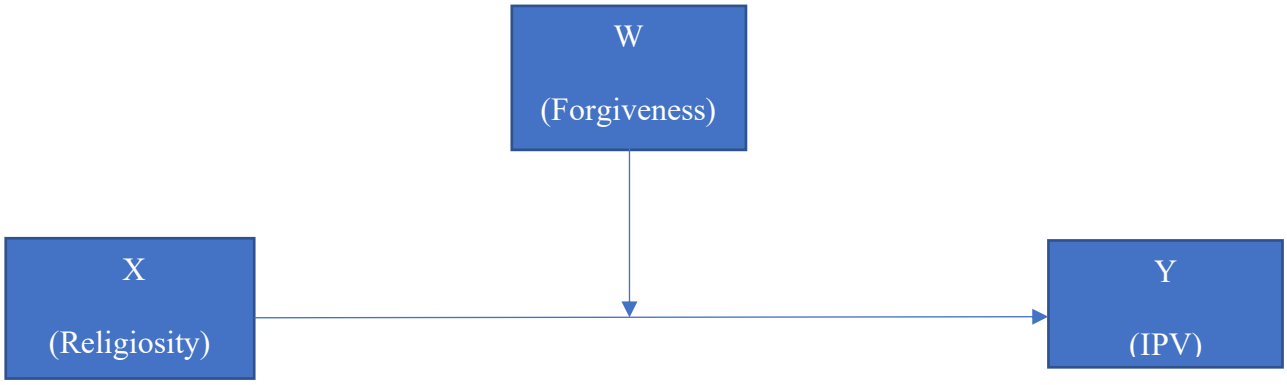
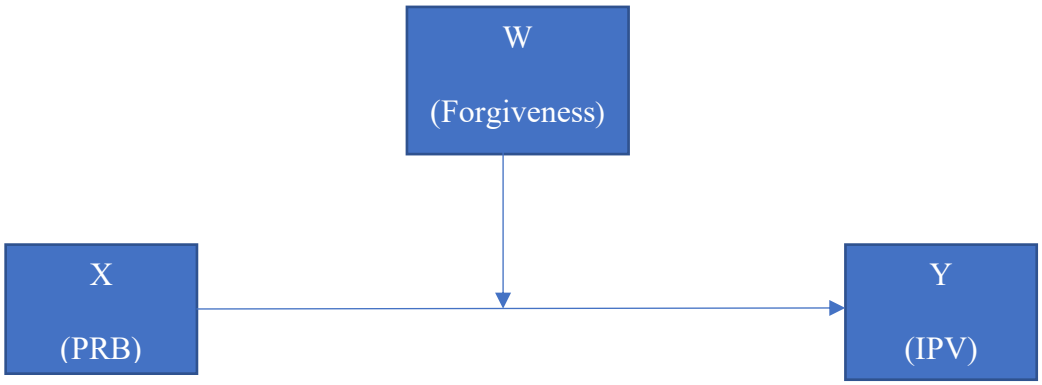


Figure 4

Simple Moderation Analysis RQ3



The advantages of multivariate analysis are estimates for all effects combined into a single model, exploring the relationship among multiple effects, obtaining superior statistical properties, and obtaining different conclusions compared to the univariate model (Jackson et al.,

2011). The multivariate model tests hypotheses for multiple uncorrelated variables (Flikkema et al., 2012). Researchers use a multivariate model to control Type 1 error rates (Baldwin et al., 2014). There are two main goals in using a multiple regression model to analyze data: the first is determining the relative influence of one or more predictor variables on the criterion value (Binder, 1985; Pena & Sanchez, 2007; Cucina et al., 2014) and the second is identifying outliers or anomalies (Binder, 1985; Pena & Sanchez, 2007; Cucina et al., 2014).

The study utilized cluster sampling to examine data. Adaptive cluster sampling allows a population to be targeted to a particular cluster (Moradi et al., 2014). Another design is two-stage cluster sampling, which examines populations from some partition (Moradi et al., 2014). Two-stage sampling consists of primary sample units (PSUs) and secondary sample units (SSUs) (Cochran, 1977). The PSUs are a natural ordering or grouping of objects, and the SSUs are a cluster's objects or sub-units (Picquelle & Mier, 2011). Cluster sampling requires detailed data collection on all individuals in the cluster, and a random sample of clusters is a good approach (Sauer et al., 2021).

This study utilized IBM Statistical Package for the Social Sciences (SPSS) to administer an independent t-test for RQ1 and contains Hayes' Process Macro to administer a simple moderation model (Model #1) for RQ2 and RQ3 that reveals the effect of (X) (Religiosity) on (Y) (IPV) moderated by (W) (Forgiveness) and the effect of (X) (PRB) on (Y) (IPV) moderated by (W) (Forgiveness) by identifying paths to reveal that the effect of (X) on (Y) is dependent on (W) expressed as $(Y = i_y + (b_1 + b_3W)X + b_2W + e_{y)}$; moreover, the effect of (W) on (Y) as moderated by (X) is expressed as $(Y = i_y + b_1X + (b_2 + b_3X)W + e_{y)}$(Hayes, 2018).

Research Questions

The research questions for this study are the following:

RQ1: Are women who are victims of IPV and who score above 99 on the PBS have higher forgiveness of others levels toward their abuser than women who are victims of IPV and score less than 100 on the PBS?

RQ2: What is the predictive role of forgiveness of others in moderating the relationship between religiosity and IPV violence approval?

RQ3: What is the predictive role of forgiveness of others in moderating the relationship between PRB and IPV violence approval?

Hypotheses

The hypotheses for this study are these:

H_o1: There is no statistically significant difference in forgiveness of others' level of those who adhere to PRB and those who do not adhere to PRB.

H_a1: Women who are victims of IPV and who score above 99 on the PBS will have higher forgiveness of others' levels toward their abusers than women who are victims of IPV and score less than 100 on the PBS.

Ha1 was developed from the following studies. Vulnerability to IPV may occur if a woman adheres to traditional roles (Potter, 2007). Forgiveness is vital to a well-functioning human (Emmons & Paloutzian, 2003). People are told forgiveness is a necessary virtuous act to keep them in harmony with society and God (Miles, 2001). Escher (2013) found that a belief in God's forgiveness was the primary motivation for an individual to forgive others. The PBS measures gender-related attitudes rooted in patriarchy and correlates with modern sexism, antifeminist attitudes, and egalitarian attitudes toward women (Yoon et al., 2015).

H_o2: Forgiveness does not moderate the relationship between religiosity and IPV violence approval.

Ha2: Forgiveness of others will moderate the effect of religiosity on IPV violence approval by reducing the strength of the positive relationship between religiosity and IPV violence approval.

Ha2 was developed from the following studies. Religious pressure in the form of counseling to forgive a perpetrator causes battered women to stay in abusive relationships (Nason-Clark, 2004). One in four women and one in seven men will experience IPV during their lifetime (Breiding et al., 2008). The religious teaching of male authority and female submission can contribute to IPV (Levitt & Ware, 2006). Religiosity can adversely legitimize IPV (Renzetti et al., 2017).

Ho3: Forgiveness of others does not moderate the relationship between PRB and IPV violence approval.

Ha3: Forgiveness of others will moderate the effect of PRB on IPV violence approval by reducing the strength of the positive relationship between PRB and IPV violence approval.

Ha3 was developed from the following studies. Forgiveness is often experienced through cultural beliefs (Clabby, 2020) and only a few studies have examined forgiveness from a cultural perspective (Cowden et al., 2020). The concept of patriarchy comprises two elements: structure and ideology (Hunnicutt, 2009; Smith, 1990; Sultana, 2012). The patriarchal structure is a hierarchal system in which men have authority over women and children; patriarchal ideology comprises values, beliefs, and norms that reflect male dominance in society (Yllö, 1990). Evidence suggests that survivors who offer forgiveness to IPV perpetrators experience continual abuse (Cowden et al., 2020). Ysseldyk et al. (2019) found a relationship between forgiveness and IPV.

Participants and Setting

Volunteer participants for this study were recruited from women registered to participate in research surveys via Prolific.com. The researcher had no contact or interaction with the participants but provided the online survey; Prolific.com collected the data and provided the researcher with completed data sets. In the United States, 10 million adults experience IPV annually, and one in four women experience IPV in their lifetime (NCADV, 2020). These statistics reveal that 25% of women in the United States experience IPV, and this means that Prolific.com, from its 130,000 participants (Prolific.com, 2022), must supply a population four times the required sample size for the study. The required sample size is determined by extrapolation using linear equations for the medium effect size of .59 and a power of .77, highlighted in Table 1 (Preacher et al., 2007).

The Hayes Process function utilizes bootstrapping, which requires a minimal power level of 80% for social science research (Wiedmaier, 2017); thus, calculating power analysis in this study requires 57 participants. Participants represented the general population of women only in the United States over 18 years old using cluster sampling (participants' location in the United States, i.e., Southern Region or Pacific Coastal Region). Prolific.com needed to supply a participant population four times 57 (sample size) for a population of 228 participants; the actual sample size consisted of 271 participants. However, Prolific.com did not screen participants for IPV; they were screened after Prolific.com had provided them. The research requested Prolific.com to provide a sample size of 300 participants to generate a higher probability of reaching the goal of a sample size of 57 participants due to attrition and incomplete data collection; the sample size of 271 participants was the final total for this study. The participants were a random sample of the population because Prolific.com chose them and provided all

demographic information; again, I had no contact with the participants. Through the provided online survey, I collected demographics from participants such as age, ethnicity, marital status, socioeconomic status, and employment status. The survey took approximately 15 minutes to complete. The survey operationalized forgiveness, religiosity, PRB, and IPV violence approval.

I sent a request with a link to the online survey at their Prolific.com account to Prolific.com to facilitate advertising for the study, recruiting volunteers, and collecting data. Prolific.com directed interested participants to the online website that housed the survey. The survey was anonymous and Prolific.com collected no identifying information from volunteers. The participants could opt out of the survey at any time and their input would be removed.

Inclusion and exclusion criteria

Inclusion criteria required all participants to self-report being at least 18 years of age, female, and living in the United States. Exclusion criteria consisted of (a) currently experiencing intimate partner violence, (b) currently experiencing severe depressive symptoms because of violence, and (c) currently experiencing suicidal or homicidal ideation. The questions for the criteria are in Appendix B.

Instrumentation

The Centrality of Religiosity Scale (Huber & Huber, 2012) is found in Appendix E. The Centrality of Religiosity Scale (CRS) consists of a 15-item questionnaire that is scaled using a 5-point Likert scale (from 1 = “Never” to 5 = “Very often”) and the technical ordinal scale will be approximated to continuous and classified in the data file as such. The CRS measures five dimensions of religiosity; intellect, ideology, public practice, private practice, and experience. The intellectual dimension comprises three items (1, 6, 11), ideology three items (2, 7, 12), the dimension of public practice three items (3, 8, 13), private practice three items (4, 9, 14), and

experience three items (5, 10, 15). A sample question from the instrument is, “How often do you think about religious issues?” (Huber & Huber, 2012, p. 717).

The CRS score is calculated when the item score is divided through the number of scored scale items that produce a range between 1.0 and 5.0; for categorization groups, it is recommended to use 10 to 2.0: not religious, 2.1 to 3.9: religious, and 4.0 to 5.0: highly religious (Huber & Huber, 2012, p. 720). In order to maintain the 5-point Likert scale, the items (3, 4, 14) have a score of (1 to 5) assigned by item frequency based on prayer, meditation, and religious service; the response of (A or B = 5, C = 4, D or E = 3, F or G = 2, H = 1) is applied respectively (Huber & Huber, 2012, p. 720). CRS has a reliability of Cronbach’s alpha of .73 to .83 (Abbasi et al., 2019). Numerous studies have used this instrument (e.g., Grover & Dua, 2019; Kambara et al., 2020; Prutskova, 2021) and permission to do so is granted through free access by its developers.

The Heartland Forgiveness Scale (Thompson et al., 2005a) is found in Appendix F. The Heartland Forgiveness Scale (HFS) consists of an an18-item questionnaire that is scaled using a 7-point Likert scale (from 1 = “Almost Always False of Me” to 7 = “Almost Always True of Me”) that measures dispositional forgiveness; the technical ordinal scale will be approximated to continuous and classified in the data file as such. The HFS has three significant dimensions assessing (a) forgiveness of self [(*Self* items refer to negative emotions toward oneself (e.g., shame, guilt)], (b) others [*Other* items refer to negative attitudes toward a transgressor (e.g., revenge)], and (c) situations [*Situation* items refer to dealing with uncontrollable events (e.g., storms, sickness)]. These three dimensions comprise six items, with three positively worded and three negatively worded, measuring forgiveness and unforgiveness, respectively. A sample

question from the instrument is, “I continue to punish a person who has done something that I think is wrong” (Thompson et al., 2005a).

The HFS scoring consists of HFS total and three subscales; the following items must be reverse scored (2, 4, 6, 7, 9, 11, 13, 15, and 17); then the values for the items that compose each subscale are summed; HFS total (items 1-18), HFS Self subscale (items 1-6), HFS Other subscale (items 7-12), HFS Situation subscale (items 13-18); total score range from 18 to 126 and subscales range from 6 to 42. The higher the score, the higher the level of forgiveness; the lower the score, the lower the level of forgiveness (Thompson et al., 2005a, p. 359). HFS has a test-retest reliability of .82 and, for a total scale score, a Cronbach’s alpha of .84 to .87 (Edwards et al., 2002). Numerous studies have used the HFS (e.g., Bugay et al., 2012; Karairmak & Guloglu, 2014; Langman & Chung, 2013; Thompson, 2005a). Permission to use this scale is granted for research and clinical purposes if there is no profit from utilizing it.

The Patriarchal Beliefs Scale (PBS) (Yoon et al., 2015) is found in Appendix G. The instrument is used to measure patriarchal beliefs by assessing patriarchal ideologies at the micro, mezzo, and macro levels. The PBS comprises 35 items and a 5-point Likert scale ranging from 1 (“strongly disagree”) to 5 (“strongly agree”), with scores ranging from 35 to 175. Higher PBS scores reflect a more significant endorsement of patriarchal beliefs. The three factors comprising the PBS subscales are men’s institutional power, women’s inferiority, and gendered domestic roles.

The first scale, men’s institutional power, comprises 12 items; a sample question is “I would feel more secure with a male president running the country than a female one.” The second subscale is the inferiority of women and consists of 12 items, such as “Women are less able than men to manage money.” The last scale is the gendered domestic roles, consisting of 11

items, such as “A man should be the one to discipline the children.” The validity is high, with Cronbach’s alphas of .97 for the total score, .97 for the institutional power of men, .95 for the inferiority of women, and .96 for gendered domestic roles (Yoon et al., 2015). Numerous studies have used the PBS (e.g., Gervais et al., 2020; Oucho & Williams, 2019; Qureshi et al., 2021). Permission to use this instrument is granted through free access by its developers.

The Personal and Relationships Profile (Straus et al., 1999) is found in Appendix H. The Personal and Relationships Profile (PRP) is used to investigate abuse in relationships by determining risk factors through assessing intrapsychic and interpersonal variables through an analysis of 25 scales, of which Violence Approval will be used for this study. The instrument comprises nine background questions and 187 questions to cover the scales. PRP uses a four-point Likert scale (ranging from “strongly disagree” to “strongly agree”); the technical ordinal scale will be approximated to continuous and classified in the data file as such.

Some scales have subscales, such as the focus of this study, Violence Approval, which has three subscales of measurement: family violence, male violence, and sexual aggression. Violence Approval is measured through 10 questions (family violence (four), male violence (three), and sexual aggression (three)) within the instrument. A sample question is, “When a boy is growing up, it is important for him to have a few fistfights.” The PRP scoring does not recommend a total score consisting of the sum of all the items in the instrument because PRP intends to measure 25 separate constructs. The method recommended for clinical use is the sum score of each response category entered on the scoring form.

The mean score is recommended for analysis and most researchers enter responses into a data file and using statistical analysis software such as SPSS to obtain mean score. Using the software, create a syntax to compute the mean score (i.e., in SPSS, to compute the mean score

for the Negative Attribution (NA) scale is COMPUTE NA = MEAN .3 (Q35i, Q89, Q96, Q14)) (Straus et al., 1999, p. 9). The validity is high, with 90% of scales either moderately or strongly correlated; Violence Approval has a .70 alpha coefficient of internal consistency reliability (Straus et al., 1999). Numerous studies have used these instruments (e.g., Caron et al., 2012; Kelmendi & Baumgartner, 2017; Martin et al., 2011). Permission to use the instrument is granted for those who engage in or report psychometric analyses, such as reliability and factor analyses, or who provide the data for analyses to PRP.

Procedures

Following formal approval by the IRB (see Appendix A), Prolific.com identified potential participants through its website and these participants completed an anonymous online questionnaire hosted on the Typeform.com website, link: https://form.typeform.com/to/FoacVBz8#prolific_pid=xxxxx. Participants received $4.00 for completing the questionnaire from Prolific.com through my Prolific.com account. I had no contact with the participants, and they completed an informed consent form (see Appendix C) online before taking the survey.

Participants were women representing the general population over 18 years old using cluster sampling from a sample size of 228 (final study sample size was 271) determined by extrapolation using linear equations for medium effect size .39 and a power of .98, bias-corrected and accelerated (bca) bootstrap interval highlighted in Table 1 (Preacher et al., 2007). The participants were a convenience sample of the population because Prolific.com chose the participants and provided me with the demographic information; again, I had no contact with the participants. I analyzed the data through cluster sampling. Through the provided online survey, I

collected participant demographics such as age, ethnicity, marital status, socioeconomic status, and employment status. The survey took approximately 15 minutes to complete.

The survey operationalized the research questions (RQ) variables. The RQ1 variables are forgiveness (dependent variable) measured by HFS and PRB (independent variable) measured by PBS. The RQ2 variables are forgiveness (moderator), measured by HFS; religiosity (predictor), measured by CRS; and IPV violence approval (criterion), measured by PRP. The RQ3 variables are forgiveness (moderator) which HFS and PRB (predictor) measure, measured by PBS, and IPV violence approval (criterion), measured by PRP. Profilic.com collected demographic information, and all questions were administered to all participants in the same order. The questionnaire took approximately 15 minutes to complete.

Data Analysis

This quantitative correlational study investigated the relationship between IPV, religiosity, PRB, and forgiveness. Multiple regression is best suited to describe and predict the relationship between two or more variables in this study. It helps explore the incremental and total explanatory power of numerous variables (Hayes, 2018). The contemporary approach to regression is the preferred method for multiple regression. It is easily understood, and all predictor variables have equal treatment (Warner, 2012).

Regression analysis includes multiple predictor variables that answer different questions (Warner, 2012). This study utilized multivariate regressions to measure the effect of forgiveness on the relationship between IPV and religiosity. The study builds on Koch and Ramirez (2010), who examined the relationship between religiosity, CF, and aggression between college students and their intimate partners. The focus of this study was to investigate the effect of forgiveness as a moderator on IPV and religiosity and IPV and PRB. I assessed various predictor variables by

examining the variance of variables. However, in doing so, precautions were taken due to regression slope coefficients, which can influence reliability, distribution shape, and other aspects of predictors (Warner, 2012).

Multiple regression provides many outcomes, with two variables used as predictors. Overall, regression analysis can be significant or insignificant, and every predictor variable can or cannot contribute statistically (Warner, 2012). Multiple regression analysis reveals a partition of variance for the dependent variable into variance accounted for or predicted by predictor variables, accounting for overlap or correlation between predictors (Warner, 2012). The study used Hayes Process Macro Model 1 for moderation analysis to test whether a proposed causal effect of (X) (Violence approval) on (Y) (Religiosity) may be transmitted through a moderating (W) (Forgiveness) variable, and whether a proposed causal effect of (X) (Violence approval) on (Y) (PRB) may be transmitted through a moderating (W) (Forgiveness) variable (Hayes, 2018, p. 584). The model represents if an effect of (X (focal antecedent)) on (Y) is influenced by or dependent on (W) (Hayes, 2018, p. 220). The dependency moderates the effect of (X) on (Y) or the predictability of (W) (Hayes, 2018, p. 220).

A simple linear moderation model will provide data in which (X's) effect on (Y) is dependent on (W) or conditional and provide an avenue to test hypotheses concerning moderation (Hayes, 2018, p. 226). The conditional effect of (X) on (Y) is defined by the amount of difference in one unit on (X) is estimated to differ on (Y) (Hayes, 2018, p. 227). In moderation analysis, we examine if (W) is related to the effect of (X) on (Y); if so, then (W) moderates (X's) effect or (X) and (W) interact and generate influence on (Y) (Hayes, 2018, p. 265). In this model framework, the paths are unconditional; the variables' relationships are not moderated by other variables (Hayes, 2018, p. 224). My goal was to determine if a mediational process is conditional

on other variables (Muller et al., 2005). Hayes' Process Macro incorporates a variety of models that allow researchers to test the effects (direct and indirect) of (X) on (Y) and conditional on a moderator (Hayes, 2018).

Summary

This chapter discussed the methods used to complete the study and how the data were analyzed. The study was conducted because there is limited research on incorporating forgiveness as a therapeutic pillar in addressing IPV. The study explored the forgiveness levels of those who adhere to and do not adhere to PRBs in terms of the correlation between IPV and religiosity. The study findings could be significant for clinicians, counselors, and mental health professionals wishing to incorporate forgiveness into theoretical models that address IPV.

The design used for this study was a quantitative online survey design. The research questions for this study were:

RQ1: Are women who are victims of IPV and who score above 99 on the PBS have higher forgiveness of others levels toward their abuser than women who are victims of IPV and score less than 100 on the PBS?

RQ2: What is the predictive role of forgiveness of others in moderating the relationship between religiosity and IPV violence approval?

RQ3: What is the predictive role of forgiveness of others in moderating the relationship between PRB and IPV violence approval?

The participants and procedures were discussed, with a sample population of 271 participants recruited by Prolific.com from women in the United States population. The instruments for the study were the Centrality of Religiosity Scale, the Heartland Forgiveness Scale, the Patriarchal Beliefs Scale, and the Personal and Relationships Profile. The data were

analyzed using an independent t-test for RQ1 and a moderated analysis for RQ2 and RQ3. The data were analyzed by IBM SPSS using an independent t-test and a multiple regression analysis. The next chapter discusses the study's findings.

Chapter Four: Findings

Overview

This study aimed to examine the effects of forgiveness of others as a moderator on the relationship between religiosity and IPV (violence approval). Additionally, the research examined the relationship between patriarchal beliefs and IPV (violence approval) and forgiveness of others as a moderator of said relationships. To obtain data for the study, the researcher administered an online survey on forgiveness, religiosity, IPV (violence approval), and patriarchal beliefs. The data analysis included one independent t-test and two multiple linear regression analyses. This chapter describes the descriptive statistics, hypotheses, assumption tests, and results.

Descriptive Statistics

One thousand forty-two volunteer participants across the United States agreed to participate in the current research study. However, of those volunteer participants, 999 completed the study; within the study, 822 participants were excluded as they indicated they were not female. In addition, six participants opted out of the study due to fear of re-experiencing emotions related to IPV. The remaining 271 participants completed the demographic survey and met the inclusion criteria. Therefore, the sample size consisted of 271 participants. Descriptive analyses revealed that most participants (i.e., 212 of the 271 participants) ranged in age from 25 to 64 and represented 78.3% of the sample (see Table 2). Dividing the sample by categorical variables (i.e., marital status or location) provided additional descriptive statistics. The participants who reported being single (never married) (N=86) and married (N=104) comprised 70.1% of participants in the study (see Table 3). The participants who reported their location as

South (N=74) and Mid-West (N=61) comprised (N=135) of the total number of participants, or 49.8% of the participants in the study (see Table 4).

Table 2

Age Distribution of Survey Respondents (N = 271)

Age	Frequency	Percent
18-24	33	12.2
25-34	65	24
35-44	55	20.3
45-54	50	18.5
55-64	42	15.5
65-74	24	8.9
75 or older	1	.4
Prefer not to say	1	.4
Total	271	100.0

Table 3

Marital Status Distribution of Survey Respondents (N = 271)

Status	Frequency	Percent
Single never married	86	31.7
Living with partner	36	13.3
Married	104	38.4
Separated	5	1.8
Widowed	7	2.6
Divorced	31	11.4
Prefer not to say	2	.7
Total	271	100.0

Table 4

Location Distribution of Survey Respondents (N = 271)

Location	Frequency	Percent
Mid-Atlantic	40	14.8
Mid-West	61	22.5
New England	31	11.4
Pacific Coastal	30	11.1
Rocky Mountains	6	2.2
South	74	27.3
South-West	29	10.7
Total	271	100.0

Results

Data Screening

Preliminary data screening was conducted to examine variables (Forgiveness, Religiosity, Intimate Partner Violence, and Patriarchal Beliefs), which involves identifying errors, inconsistencies, missing values, and outliers. The data file in SPSS must be proofread and scrutinized for accuracy with the original data sources to ensure no errors during data entry (Warner, 2012). I proofread surveys line by line, verified the secure calculations and compared the scores to the data set, revealing no inconsistencies. According to Warner (2012), SPSS interprets an empty cell in the data worksheet as missing data. However, the participants were notified that incomplete surveys would not be accepted and excluded from the study; the data set contained no missing values. An IBM SPSS frequency table was used to examine missing values (see Table 5). Furthermore, according to Warner (2012), an outlier is an extreme score that can occur on either end of a frequency distribution for quantitative variables (i.e., the forgiveness of others), which is revealed by a boxplot. Boxplots were created to test for outliers (see Figures 5 to 8) Figure 8 has two outliners. However, this was due to being the highest scores and, in my

opinion, will not significantly impact data analysis. Next, the study examines the hypotheses through assumptions and data analysis.

Table 5

Data Statistics of Survey Respondents (N = 271)

		Forgiveness of Others	Religiosity	Violence Approval	Patriarchal Beliefs
N	Valid	271	271	271	271
	Missing	0	0	0	0
Mean		22.76	2.0522	16.34	74.20
Median		28.00	2.0000	16.00	66.00
Std. Deviation		6.667	.83381	3.692	33.342
Skewness		-.108	.124	.242	.842
Kurtosis		-.308	-1.146	-.654	.042
Std. Error of Kurtosis		.295	.295	.295	.295
Minimum		10	.75	10	35
Maximum		42	3.75	27	172

Figure 5

Boxplot of Forgiveness of Others

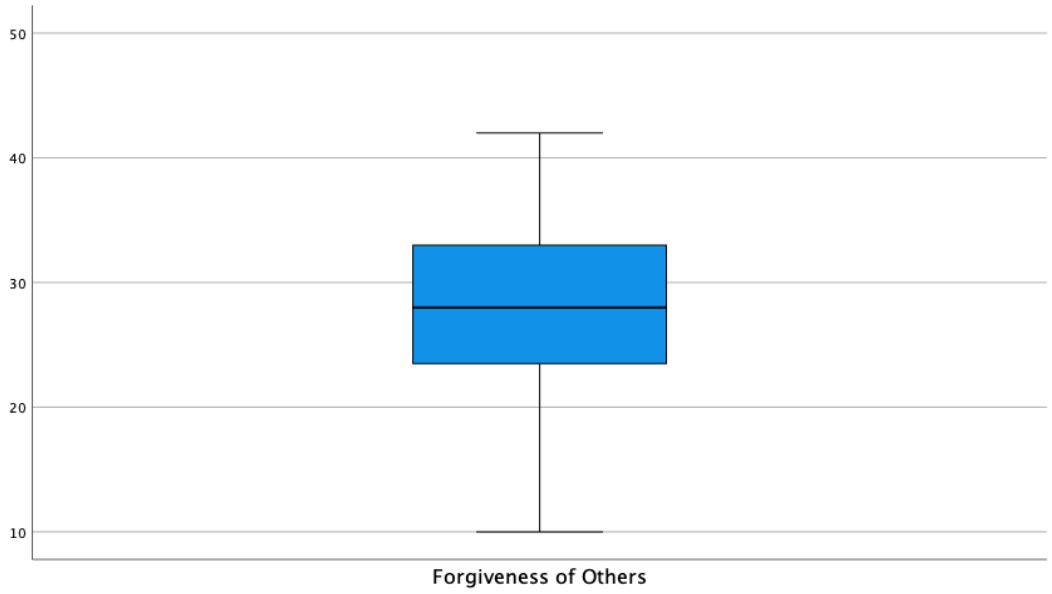


Figure 6

Boxplot of Religiosity

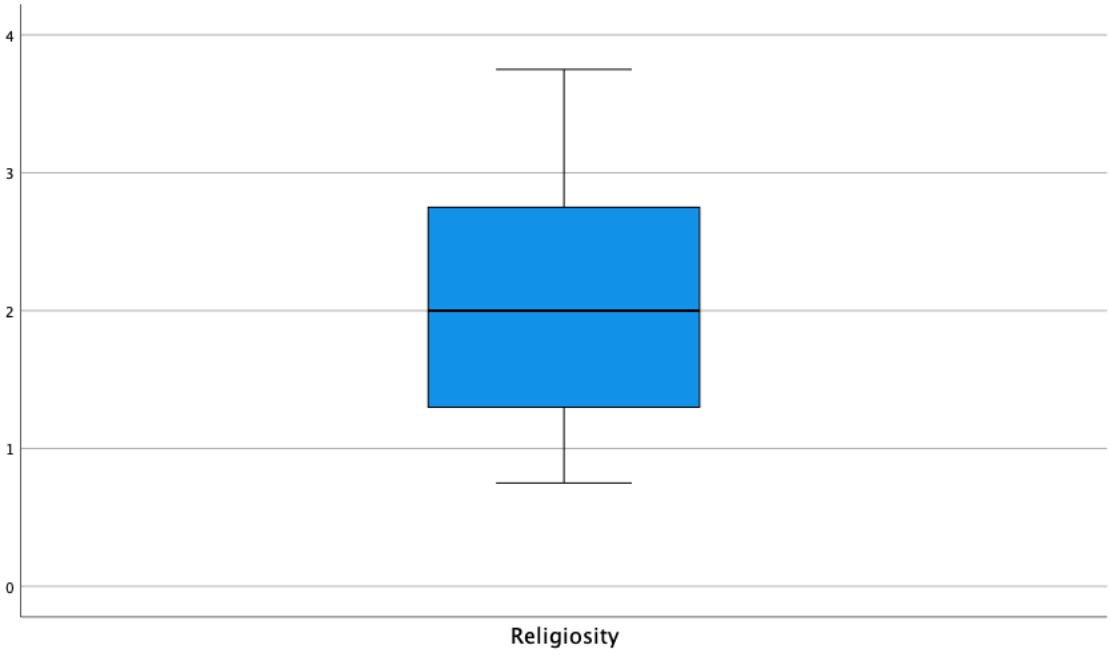


Figure 7

Boxplot of Violence Approval

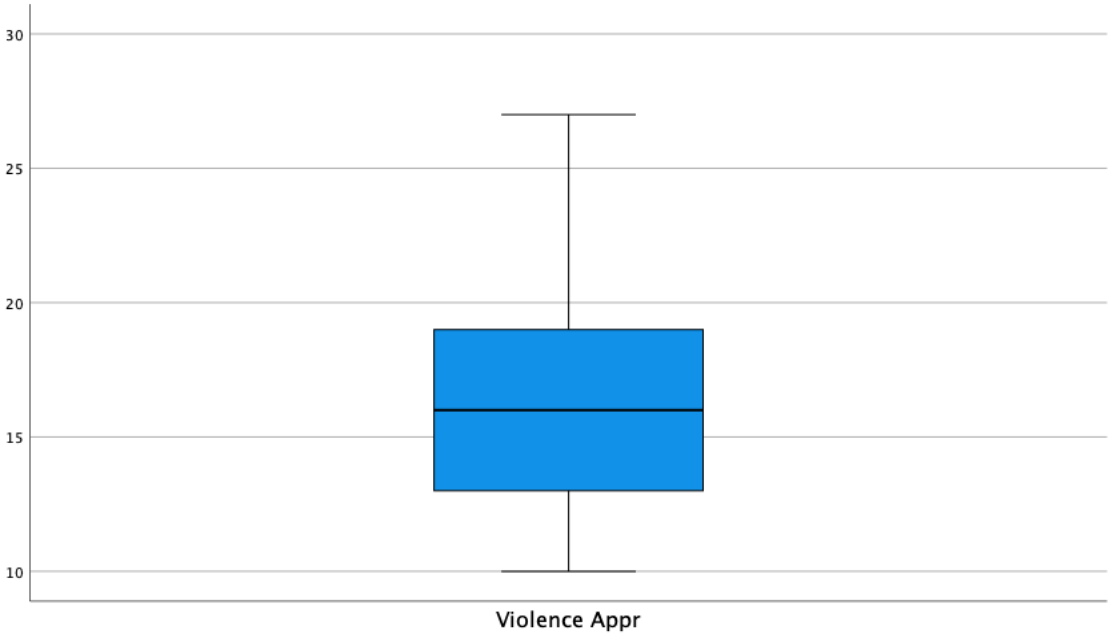
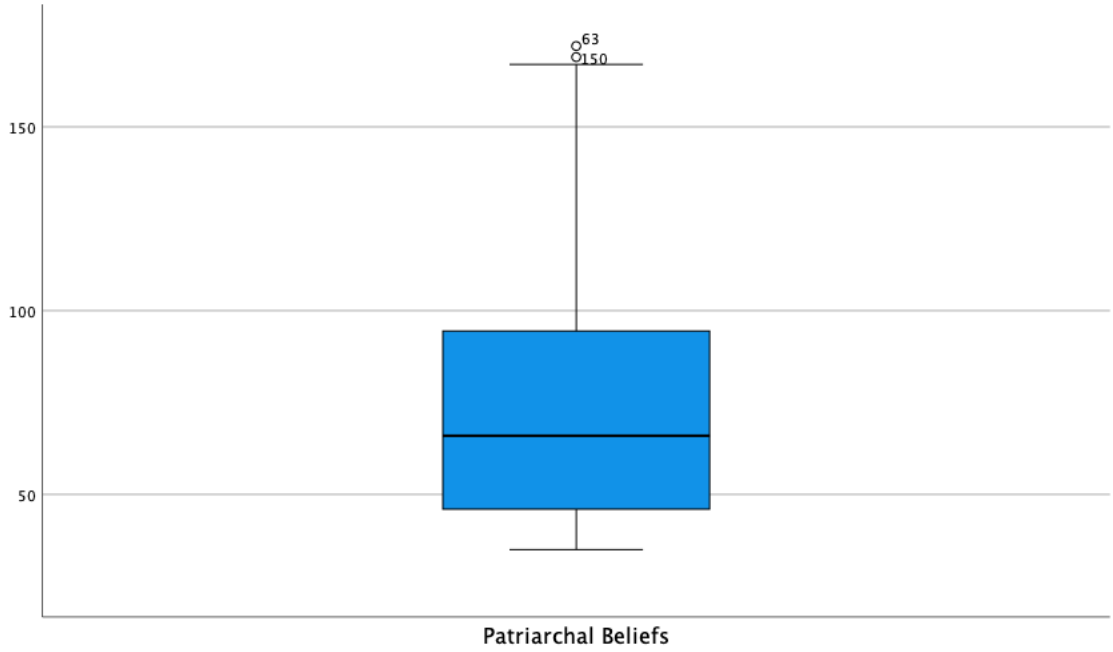


Figure 8

Boxplot of Patriarchal Beliefs



Research Questions

The three research questions for this study were developed from the following literature review. Tonsing & Tonsing (2019) found there is a need to examine the coping mechanism of women; what type of value or belief system influences women's coping skills? Katerndahl et al. (2019) used forgiveness as a variable but did not measure forgiveness in participants. Crapolicchio et al. (2021) found a need for more research on the processes related to forgiveness. According to Marshall (2014), forgiveness is a process of healing from hurt and is instrumental in restoring relationships. Forgiveness has been shown to improve personal relationships between victims and perpetrators of IPV (Karremans & Van Lange, 2004; Tsang et al., 2006). Stewart et al. (2016) stated that IPV causes harm to an intimate partner. IPV may occur if a woman adheres to traditional roles rooted in religiosity (Potter, 2007). According to Consoli-

Morgan et al. (2018), religiosity is a system of beliefs that an individual adheres to. Religiosity reinforces family structures and traditions (Bartkowski, 1997). Chesney-Lind (2006) and Hunnicutt (2009) defined patriarchal beliefs as a social system of male authority that allows males to dominate women and children in society. Patriarchal beliefs are ingrained in culture, religion, and society, where males are deemed superior, and females inferior (Moghadam, 2004).

RQ1: Are women who are victims of IPV and who score above 99 on the PBS have higher forgiveness of others levels toward their abuser than women who are victims of IPV and score less than 100 on the PBS?

RQ2: What is the predictive role of forgiveness of others in moderating the relationship between religiosity and IPV violence approval?

RQ3: What is the predictive role of forgiveness of others in moderating the relationship between adherence to PRB and IPV violence approval?

Hypothesis One

H_o1: There is no statistically significant difference in forgiveness of others level of those who adhere to PRB and those who do not adhere to PRB.

H_a1: Women who are victims of IPV and who score above 99 on the PBS will have higher forgiveness of others' levels toward their abusers than women who are victims of IPV and score less than 100 on the PBS.

T-Test Assumption Testing

Parametric tests assume certain conditions for data to meet in order to use various tools such as independent t-tests (Hazra & Gogtay, 2016). The assumptions that data must meet are: (a) normally distributed, (b) data within the group is independent, (c) samples are randomly

selected from the population, and (d) samples have homogeneity of variances (Hazra & Gogtay, 2016).

In assessing the assumptions to use an independent t-test, the data for DV (Forgiveness) were examined. The data set was reduced from N = 271 to N = 122 because the number of participants who grouped as adhering to patriarchal beliefs was N = 61; therefore, the remaining nonadherence group, N = 210, from the nonadherence group, N = 210, was randomly taken participants to create a group N = 61 to match N = 61 for the adherence group. The two groups were balanced to reduce errors. Statistical procedures such as a t-test rely on the assumption that data are normally distributed (Ghasemi & Zahediasl, 2012). Some tests that evaluate normality are histograms (Mishra et al., 2019) and the Shapiro-Wilk test (Mishra et al., 2019), and for homogeneity of variance the Levene test (Warner, 2012). Histograms (see Figures 9 and 10) on the normality of the data were observed and indicated that scores for Forgiveness of Others were normally distributed within each group (Nonadherence/Adherence).

Assumptions 2 and 3 were already met because the scores within the groups did not influence or affect each other, and the participants were randomly selected from the population. An additional test for normality was conducted using Shapiro-Wilk and Nonadherence $t(61)$, $p = .359 > p = .05$; therefore, the null hypotheses could not be rejected, and the data are normal; Adherence t (61), $p = .279 > p = .05$; therefore, the null hypotheses could not be rejected, and the data are normal (see Table 6). The independent t-test is appropriate when conditions of normality, equal variance, and independence are satisfied (Kim, 2015). These assumptions are usually met when participants are assigned to one group (Warner, 2012). This study assigned participants to a group based on their PBS scores. The Levene test (see Table 7) was used to evaluate the homogeneity of variances; $F = 3.833$, $p = .053$, showed a nonsignificant difference

between the variances; because the homogeneity of variance assumption did not appear to be violated, the independent t-test was used to evaluate Hypothesis One.

Figure 9

Histogram of Forgiveness of Others and Patriarchal Beliefs (Nonadherence)

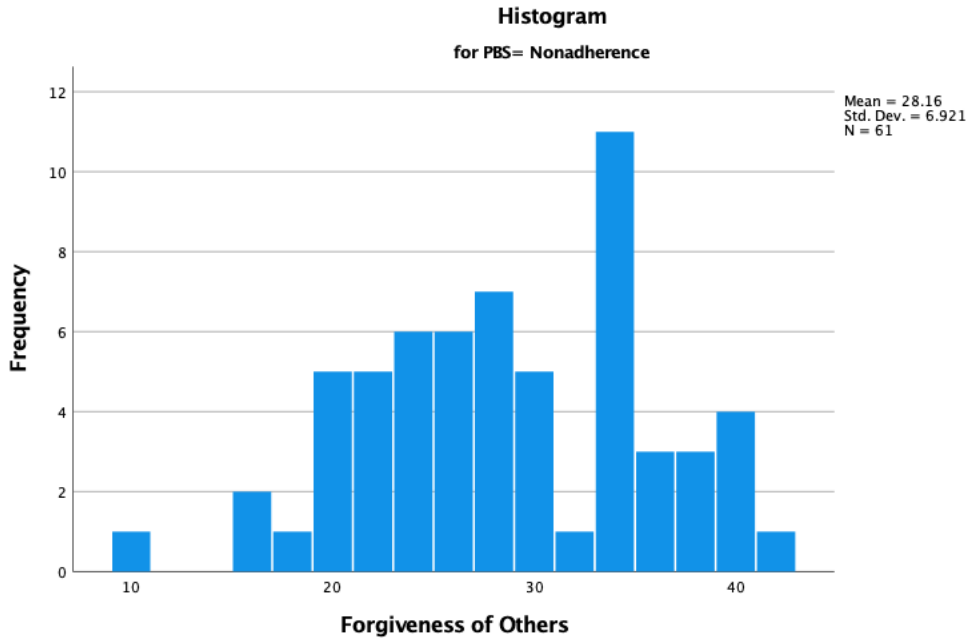


Figure 10

Histogram of Forgiveness of Others and Patriarchal Beliefs (Adherence)

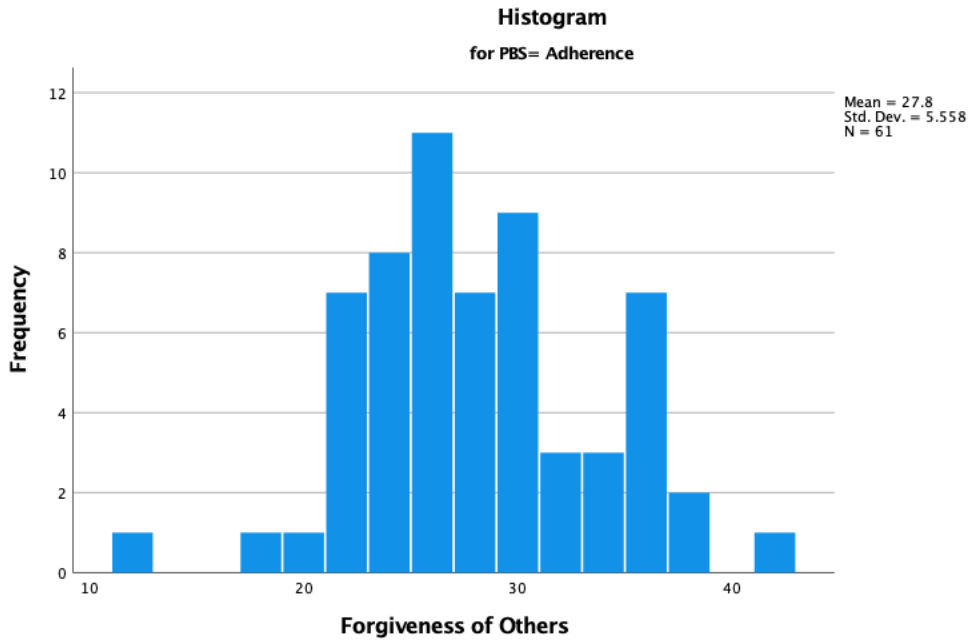


Table 6

Shapiro-Wilk Test of Normality

	Nonadherence/ Adherence	Shapiro-Wilk Statistic	df	Sig
Forgiveness of Others	Nonadherence	.979	61	.359
	Adherence	.976	61	.279

Table 7

Levene Test of Homogeneity of Variance

		Levene's Test for Equality of Variances		t-test for Equality of Means					95% Confidence of Interval the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Forgiveness of Others	Equal variance assumed	3.833	.053	.317	120	.752	361	1.137	-1.890	2.611
	Equal variance not assumed			.317	114.656	.752	.361	1.137	-1.891	2.612

Data Analysis T-Test

An independent t-test was performed to assess whether the mean Forgiveness of Others differed significantly for 61 participants nonadherent to patriarchal beliefs (Group 1) compared to 61 participants who adhered to patriarchal beliefs (Group 2). The mean Forgiveness of Others (see Table 8) did not differ significantly, $t\,(120) = .317$, $p = .752$, two-tailed. The p-value of .752 (see Table 8) was greater than .05; therefore, there is no statistically significant difference between the groups' mean and the null hypothesis is not rejected.

Table 8

Forgiveness of Others Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means					95% Confidence of Interval the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Forgiveness of Others	Equal variance assumed	3.833	.053	.317	120	.752	361	1.137	-1.890	2.611
	Equal variance not assumed			.317	114.656	.752	.361	1.137	-1.891	2.612

Hypothesis Two

Ho2: Forgiveness does not moderate the relationship between religiosity and IPV violence approval.

Ha2: Forgiveness of others will moderate the effect of religiosity on IPV violence approval by reducing the strength of the positive relationship between religiosity and IPV violence approval.

Multiple Regression Assumption Testing

Multiple linear regression is used when there is more than one independent variable (i.e., religiosity and forgiveness of others) and one dependent variable (i.e., IPV violence approval); this method is used to examine the relationship between variables, such as how changes in

independent variables impact changes in the dependent variable (Frost, 2019). Regression analysis generates a mathematical equation representing the relationship between the independent and dependent variables used to make predictions (Frost, 2019). The normal distribution is necessary to ensure that values in the data set do not significantly impact the mean value; regression analysis assumes normality, and this assumption must be met (Mishra et al., 2019). The relationship among all pairs of variables must meet the assumptions of normality, linearity, and homogeneity of variance; these assumptions can be evaluated by scatter plots (Warner, 2012). Scatterplots (see Figures 11 and 12) were created to assess these assumptions. The scatterplot showed an even distribution of points above and below the reference line (normal distribution), showed a straight-line relationship (linearity), and revealed that the scores are evenly distributed above the reference line (homogeneity of variance) (Warner, 2012).

Figure 11

Scatterplot of DV IPV Violence Approval and IV Religiosity

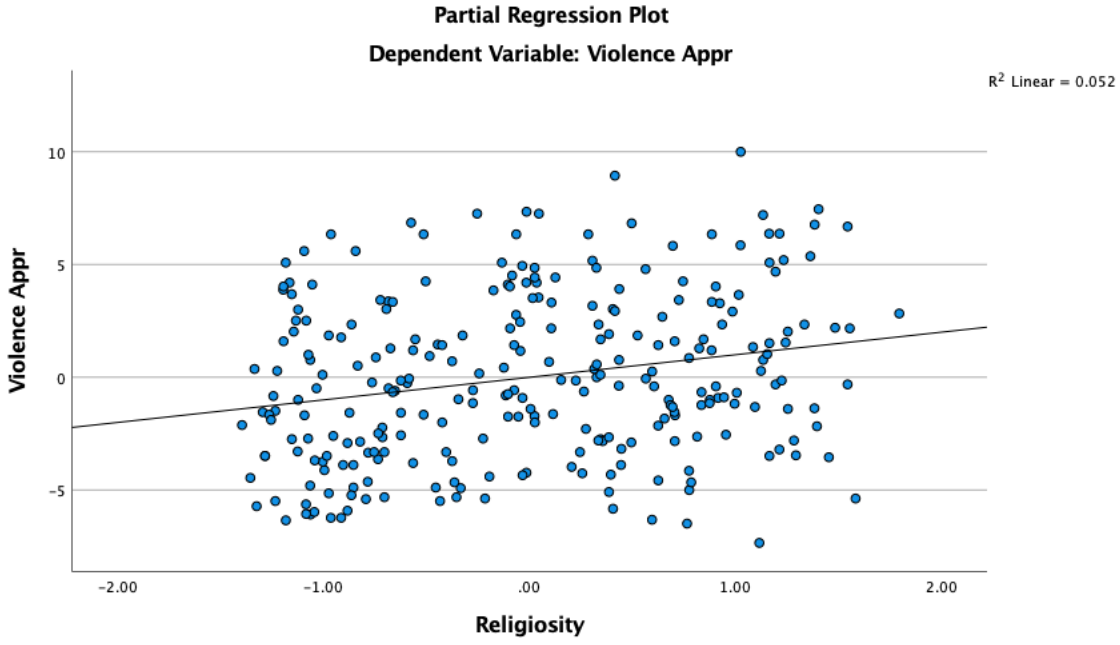
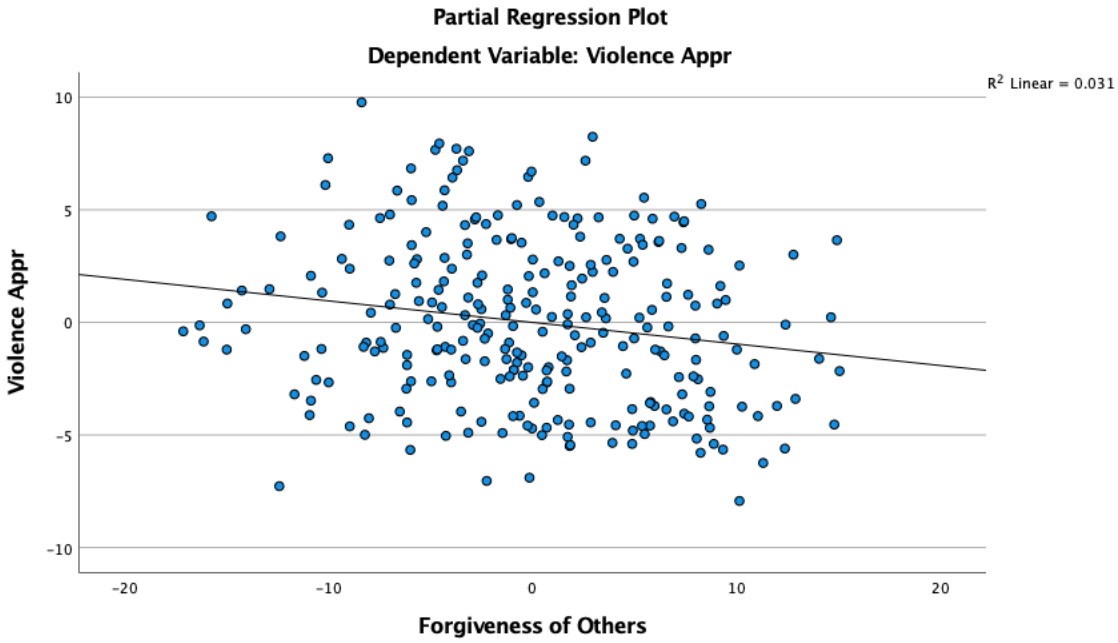


Figure 12

Scatterplot of DV IPV Violence Approval and IV Forgiveness of Others



The plots did not indicate any violations of these assumptions. The assumption of multicollinearity that must also be met. Multicollinearity occurs when there is a correlation between independent variables; this is a problem because the variables are supposed to be independent (Frost, 2019). The variance inflation factor (VIF) identifies correlation and the strength of the correlation between independent variables; the value of 1 indicates no correlation, and values between 1 and 5 suggest moderate correlation but require no corrective actions; however, values greater than 5 reveal excessive multicollinearity (Frost, 2019). To test for multicollinearity among the IVs, the VIF (1.01) (see Table 9) was examined; the value did not violate this assumption.

Table 9

RQ2 Collinearity Statistics

Model		Unstandardized Coefficients		Standardized Coefficients			Collinearity Statistics
		B	Std Error	Beta	t	Sig	VIF
1	(Constant)	16.940	1.038		16.324	<.001	
	Religiosity	1.000	.261	.226	3.832	<.001	1.007
	Forgiveness of Others	-.096	.033	-.173	-2.931	.004	1.007

Data Analysis Multiple Linear Regression

A Hayes Process Macro Model 1 was performed; all predictor variables were entered in one step. In addition to the default statistics, each predictor's zero-order, part, and partial correlation with IPV violence approval were requested. The regression included two predictors (see Table 10) that were statistically significant, $R = .27$, $R^2 = .08$, $F(2, 268) = 10.80$, $p < .001$, explaining 8% ($R^2 = .08$) of the variance in the outcome variable. Religiosity ($B = 1.00$, $t = 3.83$, $p < .001$) and forgiveness of others ($B = -.10$, $t = -2.93$, $p < .004$) (see Table 11) contributed significantly to the model. The two predictors were significantly predictive of IPV violence approval; religiosity $t(268) = 3.83$, $p < .001$; forgiveness of others $t(268) = -2.93$, $p < .004$ (see Table 11). The Int_1 variable, which is the interaction of religiosity and forgiveness of others, was an insignificant interaction on IPV violence approval ($B = -.013$, $t = -.343$, $p < .732$) (see Table 11). The nature of the predictive relationship of religiosity was as expected; the positive sign of the slope of religiosity indicated that higher scores on religiosity predicted higher scores on IPV violence approval. The Int_1 variable showed how religiosity effect on IPV violence approval is dependent on forgiveness of others. The regression coefficient for religiosity and forgiveness of others (-.013) quantified how the effect of religiosity on IPV violence approval changes as forgiveness of others changes by one unit. Specifically, as religiosity increases by one

unit, the difference in strength of IPV violence approval decreases by (-.013) units, meaning this effect moves left on the number line toward smaller values.

Table 10

RQ2 Model Summary

Model	R	R Squared	Adjusted R Squared	Std. Error of the Estimate	R Squared Change	F Change	Change Statistics df 1	df 2	Sig. F Change
1	.273	.075	.068	3.565	.075	10.799	2	268	<.001

Table 11

RQ2 Coefficients Statistics

Model		Unstandardized Coefficients B	Unstandardized Coefficients Std Error	Standardized Coefficients Beta	t	Sig	Correlations Zero-order	Correlations Partial	Correlations Part
1	(Constant)	16.940	1.038		16.324	<.001			
	Religiosity	1.000	.261	.226	3.832	<.001	.212	.228	.225
	Forgiveness of Others	-.096	.033	-.173	-2.931	.004	-.155	-.176	-.172
	Int_1	-.013	.037		-.343	.732			

The predictive nature of violence approval to forgiveness of others was also as predicted; however, scores on forgiveness of others were negatively related to the IPV violence approval; that is, higher forgiveness of others scores predicted lower scores on IPV violence approval, which was as expected. The negative partial *r* for the prediction of forgiveness of others controlling for the other predictor (r = -.18) (see Table 11) was stronger than the zero-order Pearson's *r* for the prediction of violence approval for the forgiveness of others without controlling for other variables (r = -.16) (see Table 11), on the indication of possible suppression effects; that is, it appears that the part of forgiveness of others that was unrelated to religiosity was strongly predictive of poorer scores on violence approval. The proportion of variances

uniquely explained by these predictors was as follows: sr^2 = .05 for religiosity and sr^2 = .03 for the forgiveness of others (see Table 11). In this sample and the content of these predictors, religiosity was the strongest predictor of IPV violence approval. However, the null hypothesis is rejected; the forgiveness of others does affect the positive relationship between religiosity and IPV violence approval.

Hypothesis Three

H_o3: Forgiveness of others does not moderate the relationship between PRB and IPV violence approval.

H_a3: Forgiveness of others will moderate the effect of PRB on IPV violence approval by reducing the strength of the positive relationship between PRB and IPV violence approval.

Multiple Regression Assumption Testing

As stated earlier in Hypothesis Two, the assumptions for regression analysis are normality, linearity, and homogeneity of variance and must be met. The scatterplots (see Figures 11 and 13) were created to assess these assumptions; the assumptions were met. In addition, the assumption of multicollinearity must be met to test multicollinearity; Table 12 was created, and the VIF value (1.00) did not indicate a violation of this assumption.

Figure 13

Scatterplot of DV IPV Violence Approval and IV Patriarchal Beliefs

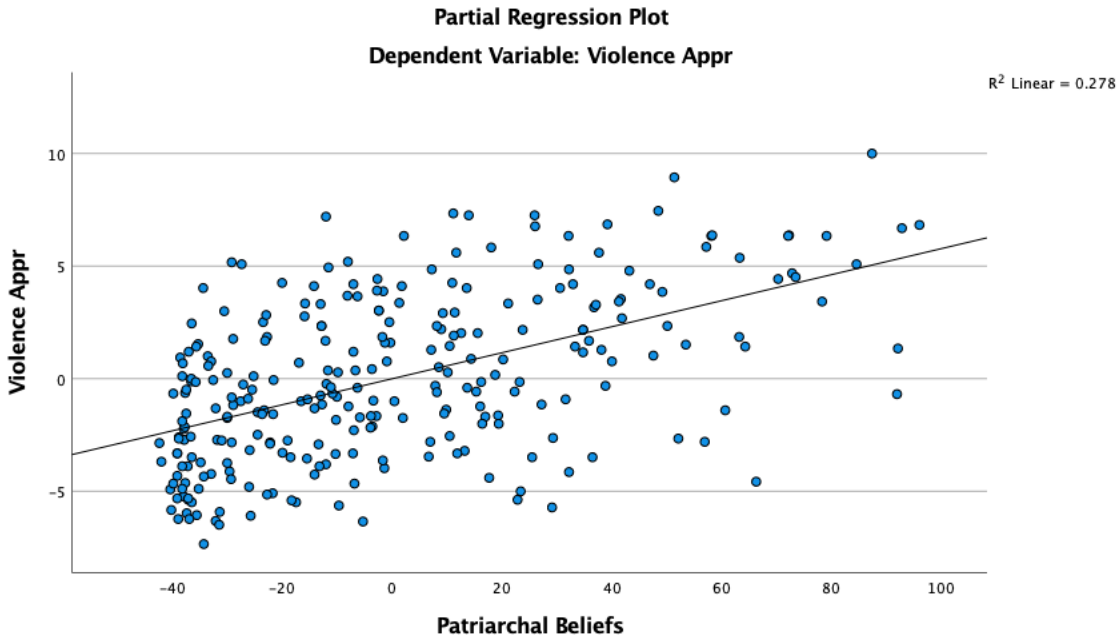


Table 12

RQ3 Collinearity Statistics

Model		Unstandardized Coefficients		Standardized Coefficients			Collinearity Statistics
		B	Std Error	Beta	t	Sig	VIF
1	(Constant)	14.137	.927		15.250	<.001	
	Patriarchal Beliefs (PRB)	.058	.006	.522	10.167	<.001	1.001
	Forgiveness of Others	-.075	.028	-.136	-2.645	.009	1.001

Data Analysis Multiple Linear Regression

A Hayes Process Macro Model 1 was performed; all predictor variables were entered in one step. In addition to the default statistics, each predictor's zero-order, part, and partial correlation with IPV violence approval were requested. The regression included two predictors

(see Table 13) that were statistically significant, $R = .54$, $R^2 = .30$, F (2, 268) = 56.23, $p < .001$, explaining 30% ($R^2 = .30$) of the variance in the outcome variable. PRB ($B = .058$, $t = 10.17$, p < .001) and forgiveness of others ($B = -.075$, $t = -2.65$, p < .009) (see Table 14) contributed significantly to the model. The two predictors were significantly predictive of IPV violence approval; PRB t (268) = 10.17, $p < .001$; the forgiveness of others t (268) = -2.65, $p < .009$ (see Table 14). The Int_1 variable, which is the interaction of PRB and forgiveness of others was an insignificant interaction on IPV violence approval ($B = .0006$, $t = .0009$, $p < .718$) (see Table 14). The nature of the predictive relationship of PRB was as expected; the positive sign of the slope of PRB indicated that higher scores on PRB predicted higher scores on IPV violence approval. The Int_1 variable show how the PRB effect on IPV violence approval is dependent on forgiveness of others. The regression coefficient for PRB and forgiveness of others (.0006) quantifies how the effect of PRB on IPV violence approval changes as forgiveness of others changes by one unit. Specifically, as PRB increases by one unit, the difference in strength of IPV violence approval increases by (.0006) units, meaning this effect moves right on the number line toward larger values.

Table 13

RQ3 Model Summary

Model	R	R Squared	Adjusted R Squared	Std. Error of the Estimate	R Squared Change	F Change	Change Statistics df 1	df 2	Sig. F Change
1	.544	.296	.290	3.110	.296	56.226	2	268	<.001

Table 14

RQ3 Coefficients Statistics

Model		Unstandardized Coefficients B	Unstandardized Coefficients Std Error	Standardized Coefficients Beta	t	Sig	Correlations Zero-order	Correlations Partial	Correlations Part
1	(Constant)	14.137	.927		15.250	<.001			
	Patriarchal Beliefs (PRB)	.058	.006	.522	10.167	<.001	.526	.528	.521
	Forgiveness of Others	-.075	.028	-.136	-2.645	.009	-.155	-.160	-.136
	Int_1	.0006	.0009		.718	.473			

The predictive nature of violence approval to forgiveness of others was also as predicted; however, scores on forgiveness of others were negatively related to the IPV violence approval; that is, higher forgiveness of others scores predicted lower scores on IPV violence approval, which was as expected. The negative partial *r* for the prediction of forgiveness of others controlling for the other predictor (*r* = -.16) (see Table 14) was the same as the zero-order Pearson's *r* for the prediction of violence approval for the forgiveness of others without controlling for other variables (*r* = -.16) (see Table 14), on the indication of possible suppression effects; that is, it appears that the part of forgiveness of others that was unrelated to PRB was strongly predictive of poorer scores on violence approval. The proportion of variances uniquely explained by these predictors was as follows: sr^2 = .27 for PRB and sr^2 = .02 for the forgiveness of others. PRB was the strongest predictor of IPV violence approval in this sample and the content of these predictors. However, the null hypothesis is rejected; the forgiveness of others does affect the positive relationship between PRB and IPV violence approval.

Summary

This quantitative study aimed to examine forgiveness in an individual who has experienced IPV violence approval and the predictive role of forgiveness in moderating the relationship between IPV violence approval and religiosity. No comprehensive sources of relevant research have measured the predictive role of forgiveness in an individual who has experienced IPV and adheres to patriarchal ideology. Research question one, Do women who are victims of IPV and who score above 99 on the PBS have higher forgiveness of others' levels toward their abuser than women who are victims of IPV and score less than 100 on the PBS?, was examined. The mean Forgiveness of Others (see Table 8) did not differ significantly, t (120) = .317, p = .752, two-tailed. The p-value of .752 (see Table 8) was greater than .05; therefore, there is no statistically significant difference between the groups' mean and the null hypothesis is not rejected.

Research question two, What is the predictive role of forgiveness of others in moderating the relationship between religiosity and IPV violence approval?, was examined using Hayes Process Macro Mode 1. The regression included two predictors (see Table 10) that were statistically significant, R = .27, R^2 = .08, F (2, 268) = 10.80, p < .001, explaining 8% (R^2 = .08) of the variance in the outcome variable. Religiosity (B = 1.00, t = 3.83, p < .001) and forgiveness of others (B = -.10, t = -2.93, p < .004) (see Table 11) contributed significantly to the model. The two predictors were significantly predictive of IPV violence approval; religiosity t (268) = 3.83, p < .001; forgiveness of others t (268) = -2.93, p < .004 (see Table 11). The Int_1 variable, which is the interaction of religiosity and forgiveness of others, was an insignificant interaction on IPV violence approval (B = -.013, t = -.343, p < .732) (see Table 11). However, the null hypothesis is

rejected; the forgiveness of others does affect the positive relationship between religiosity and IPV violence approval.

Research question three, What is the predictive role of forgiveness of others in moderating the relationship between adherence to PRB and IPV violence approval?, was examined using a Hayes Process Macro Model 1. The regression included two predictors (see Table 13) that were statistically significant, $R = .54$, $R^2 = .30$, $F\ (2, 268) = 56.23$, $p < .001$, explaining 30% ($R^2 = .30$) of the variance in the outcome variable. PRB ($B = .058$, $t = 10.17$, $p < .001$) and forgiveness of others ($B = -.075$, $t = -2.65$, $p < .009$) (see Table 14) contributed significantly to the model. The two predictors were significantly predictive of IPV violence approval; PRB $t\ (268) = 10.17$, $p < .001$; the forgiveness of others $t\ (268) = -2.65$, $p < .009$ (see Table 14). The Int_1 variable, which is the interaction of PRB and forgiveness of others, was an insignificant interaction on IPV violence approval ($B = .0006$, $t = .0009$, $p < .718$) (see Table 14). However, the null hypothesis is rejected; the forgiveness of others does affect the positive relationship between PRB and IPV violence approval. The next chapter discusses these findings, the implications, limitations, and potential future research of the study.

Chapter Five: Conclusions

Overview

This quantitative online survey aimed to examine forgiveness in a woman with patriarchal religious beliefs who have experienced IPV and the predictive role of forgiveness in moderating the relationship between IPV and religiosity. This chapter discusses the study's findings in light of existing studies. The research questions were the following: (a) Do women who are victims of IPV and who score above 99 on the PBS have higher forgiveness of others' levels toward their abusers than women who are victims of IPV and score less than 100 on the PBS; (b) What is the predictive role of forgiveness of others in the moderation of the relationship between religiosity and IPV violence approval, (c) What is the predictive role of forgiveness of others in the moderation of the relationship between adherence to PRB and IPV violence approval? The following are presented: implications, limitations, and recommendations for future research.

Discussion

The quantitative online survey examined the effect of forgiveness on IPV, patriarchal religious beliefs, and religiosity. The problem remains that no comprehensive sources of relevant research have measured the predictive role of forgiveness in an individual who has experienced IPV and adheres to patriarchal ideology. Gabriels and Strelan (2018) found that forgiveness of a perpetrator was linked to distress and negative emotions, and Maltby and Day (2004) found that the ability to forgive outright was associated with positive emotions. This study was designed to investigate the statistical significance of forgiveness as it pertains to those who have experienced IPV and adhere to or do not adhere to PRB, as a moderator of the relationship between religiosity and IPV, and as a moderator of the relationship between IPV and PRB.

First, the current study explored whether there is a statistically significant difference in the forgiveness of others between women who are victims of IPV who scored above 99 on the PBS and those who scored less than 100 on the PBS. Those who scored above 99 joined the adherence group and those who scored below 100 joined the nonadherence group. The PBS does not categorize adherence or nonadherence; I determined the score for each group; there was no manipulation of the forgiveness scores. The higher the scores on the PBS (35 to 175), the greater the adherence to patriarchal beliefs; however, the study findings did not reveal what motivated a person's forgiveness. The current research findings concluded that there was no statistically significant difference between the means of the adherence group and the nonadherence group. The literature offers reasons why a person may forgive based on the influence of patriarchal beliefs.

For example, Strelan et al. (2016) found that survivors freely forgave and experienced more positive emotions when perpetrators attempted to correct unacceptable behavior. They also found that survivors of IPV were more likely to forgive for personal well-being and to save the relationship and not for the offender. McCullough (2001) noted the need to determine the psychological factors that foster an individual's forgiving ability. People are told forgiveness is a necessary virtuous act that keeps them in harmony with society (Miles, 2001). Forgiveness and reconciliation are different: forgiveness is letting go of a desire for retaliation toward a transgressor, while reconciliation is a decision by the survivor and perpetrator to restore the relationship (Miles, 2001). Forgiveness research to date includes only a few studies that have examined it from a cultural aspect (Cowden et al., 2020). The PBS was correlated in relation to modern sexism, antifeminist attitudes, and egalitarian attitudes toward women (Yoon et al., 2015). Studies have shown that women perceived their IPV experiences as being borne out of

their social positioning that supports and emphasizes patriarchal societal norms (Akinsulure-Smith et al., 2013; Sullivan et al., 2005). Bowman (2003) noted that it was difficult to avoid interpreting IPV regarding gender inequality, given that most societies are patriarchal.

Not surprisingly, some studies found an increased risk for IPV with patriarchal ideologies of male privilege and dominance (Kalunta-Crumpton, 2017; Kalunta-Crumpton & Onyeozili, 2011; Hunnicutt, 2009). Patriarchal ideologies legitimize structural patriarchy based on beliefs about the hegemony of male dominance (Hunnicutt, 2008; Kalunta-Crumpton, 2015). Hunnicutt (2009) described the patriarchal structure as a hierarchical order endowing masculinity with a position of power and privilege while viewing women as inferior. People forgive from various perspectives, such as cognitive, emotional, and spiritual. Cognitively, the willingness to work within oneself (Parker et al., 2004) by letting go of unhealthy anger in order to bring about healing (Mickley & Cowles, 2001; Steeves & Parker, 2007) through the understanding that forgiveness is letting go of negative emotions, even though those emotions are justified (Mickey & Cowles, 2001; Taylor, 2004), to be willing to forgive those who have hurt you.

The individual understands forgiveness as an ongoing process that explores hurt and sets goals to change emotions (Taylor, 2004), knowing that forgiveness holds the perpetrator accountable (Laughon et al., 2008). The victim must be willing to examine the situation and gain perspective (Nguyen et al., 2014; Parker et al., 2004), knowing forgiveness is a choice (Taylor, 2004). This choice can occur if the victim does not take the offense personally (Mickley & Cowles, 2001) but understands there are factors influencing a perpetrator's behavior, such as mental illness, addiction, and often fear (Laughon et al., 2008; Mill et al., 2010). The individual must be willing to examine their behavior in the situation (Mickley & Cowles, 2001), realize that life is short, and focus on what is most important in life (Ferrell et al., 2014, Mickley & Cowles,

2001) by viewing forgiveness as a personal victory (Taylor, 2004) by refocusing attention on pleasant memories (Ngyuyen et al., 2014) and talking to someone about their feelings (Taylor, 2004; Yao & Chao, 2019) in order to live in the present (Nguyen et al., 2014).

Emotionally, the individual must be willing to restore intimacy with the perpetrator (Mickley & Cowles, 2001) through humility (Mickley & Cowles, 2001) with feelings of empathy for the perpetrator (Mill et al., 2010; Taylor, 2004). Spiritually, the victim wants to live by God's moral principles (Laughon et al., 2008; Mickley & Cowles, 2001; Parker et al., 2004; Steeves & Parker, 2007) and be at peace (Ferrell et al., 2014) by remembering the sense of shared humanity with the offender and the value of loving others (Mickley & Cowles, 2001). Forgiveness correlates to cognition (thoughts and attitudes), affect (emotions), and constraints (Fehr et al., 2010).

Secondly, the study examined the predictive role of forgiveness of others in moderating the relationship between religiosity and IPV violence approval. The study's research findings were that forgiveness moderated the positive relationship between religiosity and IPV violence approval, and forgiveness negatively affected said relationship. Religiosity was more predictive of IPV than forgiveness. The study findings showed the influence religiosity and forgiveness on each other; however, they did not reveal how the two constructs interacted. Religiosity association with IPV was shown in the study, and this was consistent with the literature's documentation of various influences on IPV. Although the study did not identify the relationship between forgiveness and religiosity, the literature has documented various interactions that could exist in the study's sample population.

Most people will experience offensive and hurtful interpersonal experiences that will cause significant pain, and religious affiliation enables a person to forgive more readily (Kidwell

et al., 2012). Survivors are instructed that forgiveness will correct their situation and told to forget their pain; if they do not forgive, God will not forgive them of their transgressions (Miles, 2001). Religiosity and belief systems significantly influence people's lives (Edwards et al., 2002). Religion may pressure instantaneous forgiveness, but it is arduous (Miles, 2001). Religiosity causes an individual to forgive in order to get closer to God (Kidwell et al., 2012).

Not surprisingly, studies have connected pervasive religiosity with IPV experiences (Sullivan et al., 2005; West, 2016). Religiosity can adversely legitimize intimate partner violence (Renzetti et al., 2017). The religious teaching of male authority and female submission can contribute to intimate partner violence (Levitt & Ware, 2006). Religious pressure in the form of counseling to forgive a perpetrator causes battered women to remain in abusive relationships (Nason-Clark, 2004). Vulnerability to IPV may occur if a woman adheres to traditional roles rooted in religious tenets (Potter, 2007). The individual's religious practice shapes their beliefs (Schnabl-Schweitzer, 2010). Research has found that the willingness to forgive is higher (a) when there was no intent to harm (Boon & Sulsky, 1997; Girard & Mullet, 1997), (b) when the perpetrator has apologized (Darby & Schlenker, 1982; Girard & Mullet, 1997; McCullough, Worthington & Rachal, 1997; Weiner et al., 1991), and (c) after no revenge or further consequences are sought (Enright et al., 1989; Girard & Mullet, 1997).

Forgiveness is a critical tenet within the Christian faith; however, it is unclear if an individual's religious orientation influences their decision to forgive (Gordon et al., 2008). Although research has found that religious people value forgiveness more than non-religious people (Enright et al., 1989; Gorsuch & Hao, 1993; Rye et al., 2000), it remains unknown if this valuing of forgiveness translates into more forgiving of interpersonal betrayals (Gordon et al., 2008). McCullough and Worthington (1999) found a disconnect between religious people's ideal

(abstract) of forgiveness and the actual act (concrete) of forgiving real-time situations in their lives. Escher (2013) found that a collaboration of religiosity and belief in God's forgiveness was the primary motivation for an individual to forgive others. Tsang and Stanford (2007) found that in women, empathy and general religiosity were positively associated with forgiveness, but that the blame was unrelated to forgiveness.

The world's cultures and religious traditions all have some process for navigating hurt, pain, and traumas that occur within relationships (Marshall, 2014). Research has found that religious people value forgiveness more than non-religious people (Enright et al., 1989; Gorsuch & Hao, 1993; Rye et al., 2000). Forgiveness is difficult (Marshall, 2014) and painful (Vitz & Mango, 1997). All the major religious traditions have forgiveness as a tenet (Rye et al., 2000; Smith, 2009), and research has found that religiousness, in general, is related to forgiveness (Gorsuch & Hao, 1993), with dispositional forgiveness outcomes consistent between Protestant and Jewish (Cohen et al., 2006) and between Christian and Muslim subgroups (Azar & Mullet, 2002).

Research has identified positive correlations between religiosity and several psychological constructs (Edwards et al., 2002; Graham-Pole et al., 1989; Hughes et al., 1994). Forgiveness has been identified as a positive psychological construct usually associated with religiosity; it is considered a social and coping skill (Edwards et al., 2002; Langman & Chung, 2013). Studies show no significant differences in prevalence rates of IPV in religious communities compared to the general population (Battaglia, 2001; Brinkerhoff et al., 1992). In religious communities, the pressure to remain in abusive relationships and adhere to religious norms and beliefs is often greater than in other communities (Popescu & Drumm, 2009). Religious beliefs often exemplify males as household heads with primary decisional power and

females as primary caregivers of children (Levitt et al., 2008). Studies have found that religious leaders' primary goal when intervening in IPV is relationship reconciliation (Nason-Clark, 1996; Ware et al., 2004). Men who hold religious beliefs that value rigid gender roles that privilege male power may facilitate IPV perpetration (Koch & Ramirez, 2010). Renzetti et al. (2017) found that men with higher religious commitment were likelier to perpetrate physical and psychological abuse. Abusive men often use religion to legitimize their behavior (Bent-Goodley & Fowler, 2006; Simonic et al., 2013).

Lastly, the study explored the predictive role of forgiveness in moderating the relationship between adherence to PRB and IPV violence approval. The study's research findings showed that forgiving moderated the positive relationship between PRB and IPV violence approval, and that forgiveness negatively affected said relationship; PRB was more predictive of IPV than forgiveness. The study revealed that PRB influenced IPV violence approval, consistent with the literature. The previous discussion of religiosity stated that religion teaches traditional roles (patriarchy) (Potter, 2007) and that religious practices develop religious beliefs (Schnabl-Schweitzer, 2010). Men's religious beliefs may facilitate IPV perpetration (Koch & Ramirez, 2010). The core concepts of patriarchy have been described as male domination and female subordination (Hattery, 2009; Hunnicutt, 2009). Research has shown that patriarchal beliefs are associated with IPV (Allen et al., 2009; Garcia-Cueto et al., 2015; McCarthy et al., 2018; Santana et al., 2006; Sonis & Langer, 2008).

Hunnicutt (2009) argued that patriarchy could not be seen as fixed or timeless, but this system of male domination and women subjugation takes on many forms in different contexts. Both men and women hold patriarchal beliefs reinforcing patriarchal ideology (McKinley et al., 2021). IPV against women is facilitated by societies' culture, social context, and laws that favor

males (Raj & Silverman, 2002). Researchers have found that patriarchal cultural values influence IPV (Kim & Emery, 2003; Lee, 2000; Yoshihama, 2005), align with societal sexism (Jiang, 2009), and that there is an association between religiosity and patriarchal attitudes (Acevedo & Shah, 2015; Brooks & Bolzendahl, 2004; Moore & Vanneman, 2003; Seguino, 2011). Men who are perpetrators of IPV try to justify their behaviors through religiosity and patriarchal beliefs (Flood & Pease, 2009; Munir, 2002; Simister & Mehta, 2010). Research has found that men's adherence to patriarchal beliefs is a precursor to violence toward women (Flood & Pease, 2009; Gracia & Tomás, 2014; Haj-Yahia, 1998; Jewkes, 2002; Stickley et al., 2008; Walker, 1999).

Implications

This study's findings will add information valuable to clinicians in treating IPV. The literature concerning forgiveness supports the theoretical probability that individuals will benefit from incorporating it into the treatment process. Forgiveness is a theological construct and a relational and social process (Marshall, 2014). A variety of studies have emphasized the utility of forgiveness in clinical models for therapy (Gordon & Baucom, 1998; Worthington, 1998) and its association with physical, mental, and relationship health (Freedman & Enright, 1996; Toussaint et al., 2001; Worthington et al., 2007). The challenge of forgiveness in therapy is the influence of various intrapersonal, interpersonal, and contextual factors (Fehr et al., 2010; Fincham et al., 2005; Gordon et al., 2008; Williamson & Gonzales, 2007). The success of forgiveness in a therapeutic setting depends upon the client's conceptualization of forgiveness and the therapist-client conceptual convergence during treatment (Seedall et al., 2014).

Forgiveness as a construct can be better understood by refined, proven theories and measurements to answer the questions of its predictive value (Edwards et al., 2002). Psychologists have recognized the therapeutic benefits of forgiveness (Schnabl-Schweitzer,

2010). Forgiveness is an enabler of healing that involves releasing pain, anger, and fear (Miles, 2001). It is a vital aspect of the wholeness and well-being of a survivor, and is a complicated process of letting go, putting aside, and releasing hurt propagated by another person (Miles, 2001). According to Kidwell et al. (2012), individuals forgive because they are motivated by certain factors and use various strategies to forgive; forgiveness is a long and intentional journey, and incorporates religious and secular strategies.

Forgiveness also involves changing a survivor's attitude toward a perpetrator through conative and cognitive elements (Govier & Hirano, 2008). It is crucial to faith, counseling, and psychotherapy, and is a complex construct that involves the intricate interaction of situational and personal variables (Berecz, 2001). Forgiveness is vital for good mental health. Without it, individuals remain paradoxically isolated by bitterness and revenge yet remain connected (Berecz, 2001). Forgiveness allows a person to release unhealthy negative emotions and find a resolution with a perpetrator (Baumeister et al., 1998). Forgiveness does not embrace the entire therapeutic process but is a pillar that contributes to the success of that process (Schnabl-Schweitzer, 2010). Forgiveness is vital to restoring intimate relationships (Cowden et al., 2020), and Lahav et al. (2019) found that it also protects against distress. Toussaint et al. (2001) found that one's health was related to forgiving others.

Forgiveness is often experienced through religious and cultural beliefs, and there is a need to fashion a therapy model that accounts for these beliefs and offers forgiveness in a clinical setting (Clabby, 2020). Recent studies have utilized social experiments and research protocols to harness the healing power of forgiveness (Smith, 2009). Siassi (2004) gives forgiveness an essential role in the psychoanalytic process and in therapy, defining forgiveness as the work to repair an injury and reestablish intrapsychic bonds. Forgiveness research has evolved from the

fields of theology and philosophy to include psychological consequences (Strelan & Covic, 2006). Researchers agree that forgiveness is a complex cognitive, affective, and behavioral response to an offense (Gordon & Baucom, 1998).

Only a few studies in forgiveness research to date have examined forgiveness from a cultural perspective (Cowden et al., 2020). Forgiveness occurs within the individual and differs from other constructs, such as reconciliation (Davis et al., 2015). Forgiveness is a strategy for emotional coping (Davis et al., 2015; Worthington & Scherer, 2004) and is crucial in counseling and psychotherapy (Berecz, 2001). Forgiveness is not the entire therapeutic process but an essential element that undergirds that process and is a necessary first step for someone who has experienced IPV (Schnabl-Schweitzer, 2010). Forgiveness is a human concept that permeates cultures, ethnicities, and religions (Worthington et al., 2019) and that can benefit one's physiological and psychological well-being (Langman & Chung, 2013; Raj et al., 2016; Wade et al., 2014; Wohl et al., 2008).

Christian Worldview

A worldview guides an individual's thinking about what exists and how it should exist (Strom, 2013), and Christians have a worldview. Christianity believes in the incarnation and atonement work of Jesus Christ to bring man back into the right relationship with God (Jacquette, 2014; I Peter 2:24, KJV). Humanity is observed within a framework in terms of how it relates to God (Zeidan, 2002). A Christian worldview starts with a person acknowledging the existence of God and that God rewards their pursuit of Him (Hebrews 11:6, KJV). God is the ultimate authority (Prince,1990), and a life of faith is total surrender to God (Zeidan, 2002). The correct vertical relationship to God results in a correct horizontal relationship with others

(Zeidan, 2002); every person has intrinsic value and is made in the image of God (Packer & Howard, 1985).

Christianity views patriarchy as a hierarchical power structure in which God has given authority to humans and that God made them both male and female (Genesis 1:26-27). Gender and cultural orientations differ according to religions. In Christianity, males and females have different roles (Colossians 3:18-19; Ephesians 5:33). IPV is a prevalent problem, and the church must be a refuge and support for all those experiencing violence (Bent-Goodley et al., 2012). The church is a place for inner healing, reflection, and relationship building (Bent-Goodley et al., 2015; Psalm 9:9, Psalm 46:1, Psalm 55:22, Philippians 4:7, KJV). Academia supports forgiveness as a therapeutic change agent, and Christianity teaches us to forgive others (Hertlien & Brown, 2018; Matthew 6:14-15, Mark 11:25-26, KJV). Pastors view forgiveness not as condoning or excusing bad behavior (Enright & Coyle, 1998; Ephesians 4:31-32, Isaiah 55:7, KJV). Enright and Fitzgibbons (2000) coined the expression "forgiveness therapy," which is exercised in Christianity daily as the letting go of negative emotions, resentment, anger, and revenge toward someone who has wronged an individual (Colossians 3:12-13, Isaiah 55:7, KJV).

The Christian worldview is that religious prayer is beneficial, and clinicians should be open to using it during counseling sessions (Belcher & Vining, 2000; Belcher & Hall, 2001; I Peter 3:12, James 5:16, KJV). Religious coping, that is, casting your cares upon God, provides a framework for coping with adversity and giving meaning to one's life (Pargament et al., 2000; Jeremiah 30:17, I Peter 5:7, Psalm 138:7, Psalm 147:3, KJV). Christianity builds resilience in the lives of believers (Pertek, 2022; Colossians 3:12-14, KJV). Women's belief systems and prayer enable them to manage emotional pain through religious coping (Pargament et al., 2000). Studies have found a relationship between religion and mental health (Bradshaw et al., 2008), and

Christianity states that if an individual meditates on God's word, they will find perfect peace of mind and health, and will prosper (III John 2, Philippians 4:7, Psalm 42:11, Proverbs 3:7-8, KJV). Religious coping has been correlated with better mental health for victims of IPV (Ladis et al., 2023).

Limitations

This research contributes to the scholarship on forgiveness in therapy as an element of treatment. A significant limitation of the current study is the demographics of the sample population. The sample population consisted only of women who were victims of IPV and did not include perpetrators (males). Women are more susceptible than men to be victims of IPV (Powers et al., 2020). The literature reveals that between 15% to 75% of women experience IPV at some point in their lives (Bosch-Fiol & Ferrer-Perez, 2020). The sample size included women from the United States, of which 49.8% of the participants were from two regions in the United States. The study used representative sampling within the United States; however, 71.8% of the participants were Caucasian. Thus, due to the study's small sample size, the results cannot be generalized.

Another limitation is location. The study only pertained to the United States, and IPV against women is facilitated by culture and social context (Raj & Silverman, 2002). In Europe, IPV affects 20% to 30% of women during their lifetime (European Union, 2014). IPV prevalence rates in Vietnam and China are 32.7% and 34% (Vung et al., 2008; Parish et al., 2004). For women who experienced IPV during their lifetime, the global rate in 2006 was from 15% to 71% (Garcia-Moreno et al., 2006). The current study should be expanded to incorporate other cultures and societies to obtain enough data to generalize the findings.

Moreover, the definition of forgiveness may not mean the same to all participants in the study. Forgiveness is not the same as reconciling (Worthington et al., 2007); the decision-making of women who experience IPV is poorly understood (Katerndahl et al., 2019). There are two sides to forgiveness, those seeking forgiveness (Sandage et al., 2000) and those simply apologizing (Exline et al., 2007), and their actions could be directed toward a victim or toward God (Sandage et al., 2000). The granting side of forgiveness involves emotional or decisional forgiveness (Worthington & Scherer, 2004); this forgiveness can be for the self (Fisher & Exline, 2010), the perpetrator (Sandage et al., 2000), or the situation (Thompson et al., 2005b). The study did not evaluate the meaning of forgiveness for the participants and thus could not determine why participants forgave. This quantitative research is not to be generalized to all women, and the results of this study may have limited meaning to other societies, including various ethnic groups, religions, forgiveness levels, and IPV experiences.

Recommendations for Future Research

Forgiveness as a research topic has attracted considerable attention; however, as a construct, much research remains to be done to obtain a clearer perspective on its predictive role. Forgiveness as a construct can be better understood via refined, proven theories and measurements to answer the questions of its predictive value (Edwards et al., 2002). Although forgiveness has been identified as a positive psychological construct (Enright et al., 1989; Langman & Chung, 2013; McCullough et al., 1997), it has been poorly operationalized (Edwards et al., 2002). Therefore, it is recommended that this study's problem and purpose be explored in various areas by conducting further research. The study could be redesigned to include a working definition of forgiveness given to participants and an instrument to measure violent socialization among the participants. For example, data from measuring violent socialization could be used to

examine the possible correlation between violence approval and violent socialization within the sample.

The person who engages in a relationship will eventfully experience conflict in that relationship; one way of managing conflict is an apology (Lazare, 2006). The relationship between apology and forgiveness should be further explored. There are similarities and differences between forgiveness and apology. Forgiveness is broader than an apology and involves both the perpetrator's request to be forgiven and the victim's response, whereas apology denotes the action of requesting forgiveness (Auerbach, 2005). An apology allows the perpetrator to restore a relationship compromised by their behavior (Tabak et al., 2012). Apologies facilitate forgiveness through the empathy and compassion a victim feels for a perpetrator offering deep condolence (apology) for their behavior (McCullough et al., 1998). The theological framework in our lives allows us to understand how apology and forgiveness shapes our practices in everyday life. Apologies are a vital component of forgiveness (Marshall, 2014), and a perpetrator's request for forgiveness adds to an apology's sincerity and moral quality (Brooks, 2020).

The second recommendation for future study is violent socialization; this refers to developing attitudes early in life that condone violence in intimate relationships as a result of witnessing violence in one's family or community (Eriksson & Mazerolle, 2015; Kim et al., 2019). Esquivel-Santovena et al. (2021) called for future research on violent socialization related to IPV, while Kim et al. (2019) recommended including other forms of violence (i.e., violence approval) in future research on violent socialization.

Summary

Forgiveness is a subject that has been extensively studied; however, the problem remains that no relevant research has measured the predictive role of forgiveness of those who have experienced IPV and who adhere to patriarchal ideology. This study investigated whether forgiveness levels were statistically significant in the groups who experienced IPV and who adhered or did not adhere to patriarchal beliefs. The study examined forgiveness as a moderator of the relationship between IPV and religiosity and the relationship between IPV and PRB. The findings showed no statistical significance in the forgiveness levels for the groups' adherence and nonadherence to patriarchal beliefs. Additionally, the study found that forgiveness did moderate the positive relationship between IPV and religiosity and the positive relationship between IPV and PRB. This study adds to the literature in showing that forgiveness is a positive change agent in mitigating the effects of IPV in an individual. In addition, the study identified the ability of forgiveness to impact the relationship between PV and religiosity and the relationship between IPV and PRB.

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Appendix A

Institutional Review Board Approval

LIBERTY UNIVERSITY.
INSTITUTIONAL REVIEW BOARD

December 1, 2022

Leroy Sapp
Pamela Moore

Re: IRB Exemption - IRB-FY22-23-336 FORGIVENESS AS A MODERATOR OF THE RELATIONSHIP BETWEEN RELIGIOSITY AND INTIMATE PARTNER VIOLENCE

Dear Leroy Sapp, Pamela Moore,

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds your study to be exempt from further IRB review. This means you may begin your research with the data safeguarding methods mentioned in your approved application, and no further IRB oversight is required.

Your study falls under the following exemption category, which identifies specific situations in which human participants research is exempt from the policy set forth in 45 CFR 46:104(d):

Category 2.(i). Research that only includes interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording).

The information obtained is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained, directly or through identifiers linked to the subjects.

Your stamped consent form(s) and final versions of your study documents can be found under the Attachments tab within the Submission Details section of your study on Cayuse IRB. Your stamped consent form(s) should be copied and used to gain the consent of your research participants. If you plan to provide your consent information electronically, the contents of the attached consent document(s) should be made available without alteration.

Please note that this exemption only applies to your current research application, and any modifications to your protocol must be reported to the Liberty University IRB for verification of continued exemption status. You may report these changes by completing a modification submission through your Cayuse IRB account.

If you have any questions about this exemption or need assistance in determining whether possible modifications to your protocol would change your exemption status, please email us at irb@liberty.edu.

Sincerely,
G. Michele Baker, MA, CIP
Administrative Chair of Institutional Research
Research Ethics Office

Appendix B

Social Media Advertisement

Prolific.com

ATTENTION: I am conducting research as part of the requirements for a Doctor of Education degree at Liberty University. My research aims to better understand how forgiveness impacts the relationship between domestic violence (intimate partner violence) and religiosity. To participate, you must be a woman who is age 18 or over and living in the United States and must not be currently experiencing intimate partner violence, severe depressive symptoms because of violence, and must not be suicidal or homicidal. Participants will be asked to complete an anonymous online survey, which should take about 15 minutes. Please click the link below if you want to participate and meet the study criteria. A consent document will be provided on the first page of the survey. Please review this page, and if you agree to participate, click the "proceed to survey" button at the end. Participants will be compensated $4.00 by Prolific.co through their Prolific.com accounts.

To take the survey, click here: https://form.typeform.com/to/FoacVBz8#prolific_pid=xxxxx.

Appendix C

Informed Consent Form

Title of the Project: Forgiveness as a Moderator of the Relationship Between Religiosity and Intimate Partner Violence
Principal Investigator: Leroy Sapp, Doctoral Candidate, Liberty University

Invitation to be Part of a Research Study

You are invited to participate in a research study. To participate, you must be a woman 18 years of age or older, living in the United States, and must not be currently experiencing intimate partner violence, severe depressive symptoms as a result of violence, and must not be suicidal or homicidal. Taking part in this research project is voluntary.

Please take time to read this entire form and ask questions before deciding whether to take part in this research.

What is the study about and why is it being done?

The study's purpose is to evaluate the role of forgiveness in the relationship between intimate partner violence and religion.

What will happen if you take part in this study?

If you agree to be in this study, I will ask you to do the following:

Complete an online, anonymous survey, answering each of the questions in the survey to the best of your ability with one answer per question. The survey will take approximately 15 minutes to complete.

How could you or others benefit from this study?

Participants should not expect to receive any direct benefit from taking part in this study.

Benefits to society include providing clinicians, counselors, and clergy with valuable information regarding the benefits of forgiveness in addressing intimate partner violence.

What risks might you experience from being in this study?

The risks involved in this study are minimal, which means they are equal to the risks you would encounter in everyday life. However, if the survey stirs unpleasant memories which cause you severe difficulties, discontinue the survey and contact your counselor to address the difficulties.

How will personal information be protected?

The records of this study will be kept private. Research records will be stored securely, and only the researcher will have access to the records.

- Participant responses will be anonymous.
- The data will be stored on a password-locked external USB stick and locked in a storage cabinet in the researcher's office. The researcher will be the only one able to access the data, and after three years the USB stick containing the data will be destroyed by fire.

How will you be compensated for taking part of the study?

Participants will be compensated for participating in this study by Prolific.com. The participants must be registered volunteers with Prolific.co and will receive $4.00 in their Prolific.com accounts. The researcher will have no contact with participants and will only verify the survey's completion by participants to Prolific.com for them to receive compensation.

Is study participation voluntary?

Participation in this study is voluntary. Your decision to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any question or to withdraw at any time prior to submitting the survey without affecting those relationships.

What should you do if you decide to withdraw from the study?

If you choose to withdraw from the study, please exit the survey and close your internet browser. Your responses will not be recorded or included in the study.

Whom do you contact if you have questions or concerns about the study?

The researcher conducting this study is Leroy Sapp. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact him at lsapp4@liberty.edu. You may also contact the researcher's faculty sponsor, Dr. Pamela Moore, at pmoore@liberty.edu.

Whom do you contact if you have questions about your rights as a research participant?

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA 24515, or email at irb@liberty.edu.

Disclaimer: The Institutional Review Board (IRB) is tasked with ensuring that human subjects research will be conducted in an ethical manner as defined and required by federal regulations. The topics covered and viewpoints expressed or alluded to by student and faculty researchers are those of the researchers and do not necessarily reflect the official policies or positions of Liberty University.

Your Consent

Before agreeing to be part of the research, please understand what the study is about. You can print a copy of the document for your records. If you have any questions about the study later, you can contact the researcher using the information provided above.

Appendix D

Demographic Survey

1. Thank you for volunteering to be a participant in this study. To proceed, you must be 18 years old or older. Are you at least 18 years old?
    A) Yes
    B) No

2. What is your gender?
    A) Male
    B) Female
    C) Do not wish to specify

3. Do you live in the United States?
    A) Yes
    B) No

4. If you live in the United States, in what region are you located?
    A) New England Region
    B) Mid-Atlantic Region
    C) Southern Region
    D) Mid-West Region
    E) South-West Region
    F) Rocky Mountains
    G) Pacific Coastal Region

5. This study is genuinely concerned about your safety, and if you are experiencing any of the following, it will exclude you from this study. Are you experiencing intimate partner violence or severe depressive symptoms because of violence? Are you suicidal or want to kill someone? If you answer yes to any of the above questions, please exit this survey and seek professional assistance to resolve any problems this survey may have caused.
    A) Yes
    B) No

Appendix E

Centrality of Religiosity Scale (CRS)

01: **How often do you think about religious issues?**

5	4	3	2	1
Very often	Often	Occasionally	Rarely	Never

02: **To what extent do you believe that gods, deities, or something divine exists?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

03: **How often do you take part in religious services?**

A) Several times a day
B) Once a day
C) More than once a week
D) Once a week
E) One to three times a month
F) A few times a year
G) Less than a few times a year
H) Never

Between 04a and 04b, answer the question that pertains more to your life (answer one).

04a: **How often do you pray?**

A) Several times a day
B) Once a day
C) More than once a week
D) Once a week
E) One to three times a month
F) A few times a year
G) Less than a few times a year
H) Never

04b: **How often do you meditate?**

A) Several times a day
B) Once a day
C) More than once a week
D) Once a week
E) One to three times a month
F) A few times a year
G) Less than a few times a year
H) Never

Between 05a and 05b, answer the question that pertains more to your life (answer one).

05a: **How often do you experience situations in which you have the feeling that God or something divine intervenes in your life?**

5	4	3	2	1
Very often	Often	Occasionally	Rarely	Never

05b: **How often do you experience situations in which you have the feeling that you are at one with all?**

5	4	3	2	1
Very often	Often	Occasionally	Rarely	Never

06: **How interested are you in learning more about religious topics?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

07: **To what extend do you believe in an afterlife—e.g., immortality of the soul, resurrection of the dead, or reincarnation?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

08: **How important is it for you to take part in religious services?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

Between 09a and 09b, answer the question that pertains more to your life (answer one).

09a: **How important is personal prayer for you?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

09b: **How important is meditation for you?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

Between 10a and 10b, answer the question that pertains more to your life (answer one).

10a: **How often do you experience situations in which you have the feeling that God, deities, or something divine wants to communicate or to reveal something to you?**

5	4	3	2	1
Very often	Often	Occasionally	Rarely	Never

10b: **How often do you experience situations in which you have the feeling that you are touched by a divine power?**

5	4	3	2	1
Very often	Often	Occasionally	Rarely	Never

11: **How often do you keep yourself informed about religious questions through radio, television, internet, newspapers, or books?**

5	4	3	2	1
Very often	Often	Occasionally	Rarely	Never

12: **In your opinion, how probable is it that a higher power really exists?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

13: **How important is it for you to be connected to a religious community?**

5	4	3	2	1
Very much so	Quite a bit	Moderately	Not very much	Not at all

Between 14a and 14b, answer the question that pertains more to your life (answer one).

14a: **How often do you pray spontaneously when inspired by daily situations?**

A) Several times a day
B) Once a day
C) More than once a week
D) Once a week
E) One to three times a month
F) A few times a year
G) Less than a few times a year
H) Never

14b: **How often do you try to connect to the divine spontaneously when inspired by daily situations?**

A) Several times a day
B) Once a day
C) More than once a week
D) Once a week
E) One to three times a month
F) A few times a year
G) Less than a few times a year
H) Never

15: **How often do you experience situations in which you have the feeling that God, deities, or something divine is present?**

5	4	3	2	1
Very often	Often	Occasionally	Rarely	Never

Appendix F

Heartland Forgiveness Scale

HFS

Directions:
In the course of our lives negative things may occur because of our own actions, the actions of others, or circumstances beyond our control. For some time after these events, we may have negative thoughts or feelings about ourselves, others, or the situation. Think about how you **typically** respond to such negative events. Next to each of the following items write the number (from the 7-point scale below) that best describes how you **typically** respond to the type of negative situation described. There are no right or wrong answers. Please be as open as possible in your answers.

1	2	3	4	5	6	7
Almost Always False of Me		More Often False of Me		More Often True of Me		Almost Always True of Me

____ 1. Although I feel badly at first when I mess up, over time I can give myself some slack.

____ 2. I hold grudges against myself for negative things I've done.

____ 3. Learning from bad things that I've done helps me get over them.

____ 4. It is really hard for me to accept myself once I've messed up.

____ 5. With time I am understanding of myself for mistakes I've made.

____ 6. I don't stop criticizing myself for negative things I've felt, thought, said, or done.

____ 7. I continue to punish a person who has done something that I think is wrong.

____ 8. With time I am understanding of others for the mistakes they've made.

____ 9. I continue to be hard on others who have hurt me.

____ 10. Although others have hurt me in the past, I have eventually been able to see them as good people.

____ 11. If others mistreat me, I continue to think badly of them.

____ 12. When someone disappoints me, I can eventually move past it.

____ 13. When things go wrong for reasons that can't be controlled, I get stuck in negative thoughts about it.

____ 14. With time I can be understanding of bad circumstances in my life.

____ 15. If I am disappointed by uncontrollable circumstances in my life, I continue to think negatively about them.

____ 16. I eventually make peace with bad situations in my life.

____ 17. It's really hard for me to accept negative situations that aren't anybody's fault.

____ 18. Eventually I let go of negative thoughts about bad circumstances that are beyond anyone's control.

Appendix G

The Patriarchal Beliefs Scale (PBS)

Please indicate your agreement with the following items using the 1–7 scale below. There are no right or wrong answers. Please be open and honest in your responses.

1 – Strongly Disagree 2 – Disagree 3 – Slightly Disagree 4 – Neither Agree nor Disagree
5 – Agree 6 – Slightly Agree 7 – Strongly Agree

1. At work, I would have more confidence in a male boss than a female boss.
2. I am more comfortable with men running big corporations than women.
3. I would feel more comfortable if a man were running the country's finances.
4. I would feel more secure with a male president running the country than a female one.
5. Men should lead national politics.
6. It is important that men make the big decisions that will affect my country.
7. Men rather than women should lead religious services.
8. Matters of local government are best left up to men.
9. A man should be the head of a company.
10. Men would make for more competent CEOs of financial institutions.
11. I prefer to have men lead town hall meetings.
12. The powerful roles that men play on TV/movies reflect how society should run.
13. Women should be paid less than a man for doing the same job.
14. Banks should not give credit to women.
15. Women do not belong in the workforce.
16. It is acceptable for a husband to physically reprimand his wife.
17. A woman's place in the community should be mostly through volunteer work.
18. Women are less able than men to manage money.
19. Male work colleagues should have more of a say in the workplace.
20. Girls have less use for formal education than boys.
21. Women's careers should be limited to traditional female jobs.
22. Police should not intervene in domestic disputes between a husband and his wife.
23. Men are inherently smarter than women.
24. A man has the right to have sex with his wife even if she may not want to.
25. A man should be the breadwinner.
26. Cleaning is mostly a woman's job.
27. Cooking is mostly a woman's job.
28. A man should be the one to discipline the children.
29. A woman should be the one who does most of the child rearing.
30. A man should control the household finances.
31. A woman should be the one to do the housework.
32. A man is the head of the household.
33. A man should make the rules of the house.
34. Women should be more responsible for domestic chores than men.
35. A woman should be the primary caretaker for children.

Note. Items 1–12 are for F1: *Institutional Power of Men*; items 13–24 are for F2: *Inherent Inferiority of Women*; and items 25–35 are for F3: *Gendered Domestic Roles*.

Appendix H

The Personal and Relationship Profile (PRP)

1. Violence Approval ("Strongly Agree, Agree, Not Sure, Disagree, Strongly Disagree"):

   Family Violence:

   1) It is sometimes necessary to discipline a child with a good hard spanking.

   2) I can think of a situation when I would approve of a wife slapping a husband's face.

   3) I can think of a situation when I would approve of a husband slapping a wife's face.

   4) It is sometimes necessary for parents to slap a teen who talks back or is getting into trouble.

   Male Violence:

   5) When a boy is growing up, it's important for him to have a few fist fights.

   6) A man should not walk away from a physical fight with another man.

   7) A boy who is hit by another boy should hit back.

   Sexual Aggression:

   8) A woman who has been raped probably asked for it.

   9) If a wife refuses to have sex, there are times when it may be okay to make her do it.

   10) Once sex gets past a certain point, a man can't stop himself until he is satisfied.