Measuring psychological abuse in same-sex couples: evidence of validity of the EAPA-P in a Spanish-speaking sample

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Abstract: Background: Research on psychological abuse in same-sex couples has increased in recent decades. However, the few studies that have validated standardized measures to assess this phenomenon have been conducted in English-speaking countries. The Psychological Abuse in Intimate Partner Violence Scale (EAPA-P) is a self-reported questionnaire measuring psychologically abusive behaviors experienced in intimate partner relationships. The aim of this study was to analyze the psychometric properties of the EAPA-P in Spanish-speaking same-sex couples. Method: 372 lesbian, gay, and bisexual individuals participated in the study through an online questionnaire. Validity was tested using factor analysis and correlations with a measure on psychological distress, and the discriminatory power of the scale was examined. Internal consistency reliability was calculated with the ordinal alpha coefficient. Results: The main results showed a one-dimensional factor structure explaining 52.27% of the total variance, with a reliability of .95. The discriminant analysis revealed that a score above 12, in a range from 0 to 76, was the optimal cut-off point to identify victimization. Significant correlations were found between the EAPA-P scores and depressive symptomatology. Conclusions: The EAPA-P appears to be a valid and reliable instrument to assess psychological abuse victimization in Spanish-speaking same-sex couples.

Keywords: coercive persuasion, intimate partner violence, psychological abuse, same-sex couples, scale validation.

Introduction

The study of Psychological Abuse (PA) in couples has gained special relevance in recent decades. The number of studies has increased notably, as some have tried to delimit the phenomenon (i.e. Rodríguez-Carballeira, Porrúa-García, Escartín, Martín-Peña, & Almendros, 2014), and others have examined its psychological consequences (i.e. Lagdon, Armour, & Stringer, 2014). In addition, several studies have addressed the development of measurement instruments to assess PA (i.e. Calvete, Corral, & Estévez, 2005; Porrúa-García et al., 2016; Straus, Hamby, Boney-McCoy, & Sugarman, 1996; Tolman, 1999). However, most of these studies have focused on abusive relationships in different-sex couples, and few studies have validated measures to evaluate PA strategies applied in same-sex couples (i.e. Matte & Lafontaine, 2011) formed by lesbian, gay, bisexual, or pansexual individuals, among others. The present study has the objective of providing evidence of the validity of a standardized instrument that assesses PA in intimate partners, the Psychological Abuse in Intimate Partner Violence Scale (Escala de Abuso Psicológico Aplicado en la Pareja, EAPA-P; Porrúa-García et al., 2016), for its specific use with Spanish-speaking individuals in same-sex couples.

Definition and prevalence of Psychological Abuse

PA in couples, also called emotional abuse or coercive control, has been defined as “the continued application of strategies of pressure, control, manipulation and coercion with the purpose of dominating and submitting to a partner” (Porrúa-García et al., 2016, p. 215). The submission of the partner is achieved through direct strategies, which affect the partner’s emotions, cognitions and behaviors, or through indirect strategies, which control the partner’s immediate context (Porrúa-García et al., 2016). For example, in the case of same-sex couples, some studies describe emotional abuse strategies, such as insults (Matte & Lafontaine, 2011) or threats to the partner (Mason et al., 2014), and isolation strategies, such as making it difficult for the partner to see her/his family or friends, and limiting the partner’s use of the computer or telephone (Frankland & Brown, 2014).

As noted in a recent systematic review, most empirical studies that have analyzed PA in same-sex couples have been conducted with samples from the United States (Badenes-Ribera, Bonilla-Campos, Frias-Navarro, Pons-Salvador, & Monterde-i-Bort, 2015), whereas this phenomenon has hardly been studied in other contexts such as Spain...
or Latin American countries (Barrientos, Rodríguez-Carballeira, Escartín, & Longares, 2016). In relation to the prevalence of the PA, the study by Walters, Chen and Breiding (2013), using data from the National Intimate Partner and Sexual Violence Survey (NISVS) conducted in the United States, pointed out that 63% of lesbian women, 76.2% of bisexual women, 60% of gay men, and 53% of bisexual men reported having experienced PA in an intimate partner relationship at some point in their lives. However, a study carried out in Spain reported that 11.3% of gay participants and 18.6% of lesbian participants self-identified as continued PA victims in same-sex couples (Longares, Escartín, Barrientos, & Rodríguez-Carballeira, 2017). In meta-analytic studies, high rates of PA victimization throughout life were also reported. For example, the study by Buller, Devries, Howard and Bacchus (2014) reported 34.4% in men who have sex with men, whereas Badenés-Ribera, Frias-Navarro, Bonilla-Campos, Pons-Salvador and Monterde-i-Bort (2014) indicated a rate of 43% in lesbian couples.

A large body of evidence reveals that PA in couples can lead to negative consequences for the well-being and mental health of the people who experience it, and that PA should be considered a severe form of violence (Lagdon et al., 2014). In the context of gender violence, previous studies found that victims could experience symptoms of anxiety, depression, and post-traumatic stress disorder (Arce, Fariña, Carballal, & Novo, 2009; Porrúa-García et al., 2016). In same-sex couples, despite the few studies on mental health consequences, some studies have also found a relationship between the experience of abuse and depressive symptomatology (Buller et al., 2014) and other negative consequences (Distefano, 2009).

**Psychological Abuse Assessment**

The lack of consensus about the definition of PA, the difficulty of identifying and agreeing on what behaviors should be considered abusive, and the need to validate assessment instruments that take the frequency of the abuse into account (Mason et al., 2014) make the adaptation and validation of standardized assessment instruments to evaluate PA in same-sex couples especially relevant. In recent decades, numerous measurement instruments have been proposed to evaluate the PA experienced in the couple. For example, the Psychological Maltreatment of Women Inventario (PMWI; Tolman, 1999), developed from the responses of victims of abuse, evaluates controlling abuse by means of 58 items classified in two factors: dominance/isolation and emotional/verbal abuse. However, it has been argued that the PMWI may be too extensive for the victims (Calvete et al., 2005), which could limit its use in both applied and research areas. A shorter instrument developed to assess PA in intimate partners is the IAPRP (Inventario de Abuso Psicológico en las Relaciones de Pareja; Calvete et al., 2005), which measures the frequency with which different abuse strategies have been experienced through 17 items with a unidimensional structure. In the same direction, the EAPA-P (Porrúa-García et al., 2016) was recently proposed with the objective of evaluating PA with 19 items that also measure the frequency of the experience of a broad set of abuse strategies in the couple. The aforementioned instruments showed adequate psychometric properties when administered to women victims of violence in different-sex couples, although no evidence of validity has been provided for their use with people in same-sex relationships.

Different research efforts have tried to evaluate the PA in same-sex couples, mainly in English-speaking contexts, either with items elaborated ad hoc (i.e., Carvalho, Lewis, Delgado, Winstead, & Viggiano, 2011) or with measures previously validated with people in different-sex couples, such as the widely known Revised Conflict Tactics Scale (i.e., Matte & Lafontaine, 2011), or to a lesser extent, the Abusive Behavior Inventory (i.e., Telesco, 2003). The psychological aggression scale of the Revised Conflict Tactics Scale (CTS2; Straus et al., 1996), validated with people in same-sex couples, measures acts of psychological aggression perpetrated and received in the past 12 months through 8 items (Matte & Lafontaine, 2011). Examples are: “My partner insulted or swore at me” or “My partner destroyed something belonging to me”. Moreover, the Abusive Behavior Inventory (ABI, Shepard & Campbell, 1992) was developed to measure abuse understood as a means to establish power and control over the victim. It contains 30 items that include acts of psychological and physical abuse, such as insulting or criticizing the partner. It should be noted that the instruments used in studies investigating PA in same-sex couples have some limitations. On the one hand, these instruments do not fully evaluate the set of abusive strategies that can be experienced in a couple. For example, in many cases coercive control strategies are not assessed (Frankland & Brown, 2014), despite the fact that they have been regarded as being especially severe (Rodríguez-Carballeira et al., 2014). On the other hand, some of the items on these instruments represent actions that may not involve PA by themselves (i.e., item 16 of the IAPRP: “My partner insulted me”), and they may overestimate the prevalence of the abuse when the context where these actions occur is unknown (Nowinski & Bowen, 2012). In addition, empirical studies that make an effort to evaluate PA in same-sex couples also have some limitations, such as the use of measurement instruments that have not been previously validated in this population (Frankland & Brown, 2014) or the use of samples composed almost exclusively of people residing in English-speaking countries.

In order to overcome some of the limitations previously mentioned in relation to the evaluation of the PA experienced in same-sex couples, this study aims to examine the psychometric properties of the EAPA-P (Porrúa-García et al., 2016), a brief instrument that assesses abusive strategies in a more holistic way, using a sample of Spanish-speaking lesbian, gay, bisexual, and pansexual individuals. The EAPA-P was created with the objective of designing an instrument that takes into account the entire range of PA strategies that
can occur in an intimate relationship, including from the most overt strategies to the most subtle. Thus, the EAPA-P includes strategies of control over personal life and manipulation of information, isolation, emotional abuse, imposition of one’s own thinking, and the imposition of a servile role. In this regard, its development was based on an exhaustive taxonomy of PA strategies in couples elaborated by Rodríguez-Carballeira et al. (2014), which included operative definitions for each type of abusive behavior, ranking them according to their severity. In the items on the EAPA-P, the different abusive strategies that can take place in the couple are represented, evaluating the frequency with which they are experienced. The EAPA-P was validated with a sample of women residing in Spain who were victims of gender violence, and it showed adequate reliability and a two-factor structure that differentiates direct PA strategies from indirect ones (Porrúa-García et al., 2016). Likewise, significant correlations were found between the PA reported from the scale and other measures of mental health, such as anxiety and depression.

The EAPA-P is one of the instruments that overcomes some of the limitations of the previous instruments used to evaluate PA in same-sex couples, although to date no evidence of validity has been collected for its use in this population. The objective of the present study was to adapt the EAPA-P and provide validity evidence for its use in Spanish-speaking same-sex couples. The four specific objectives established were to analyze: (a) its factorial structure, (b) its internal consistency, (c) its discriminatory capacity, and (d) its relationship with symptoms of psychological distress.

**Method**

**Participants**

In the present study, 372 Spanish-speaking individuals between 18 and 68 years old (M = 31.03; SD = 9.77) participated. Regarding their sexual-affective orientation, 173 (46.5%) participants identified as gay, 132 (35.5%) as lesbian, and 67 (18%) as bisexual or pansexual. With regard to their registered sex at birth, 190 (51.1%) were registered as men, and 182 (48.9%) as women. In terms of socio-economic status, 335 (90.1%) reported a medium level, 27 (7.3%) a low level, and 10 (2.7%) a high level. Participants were divided into two groups according to whether or not they considered that they had suffered PA in a same-sex couple to some degree, resulting in a first group of 206 (55.4%) victims and a second group of 166 (44.6%) non-victims. No significant differences were found between the groups of victims and non-victims based on the age of the participants (t = -.039, p = .969), the sexual-affective orientation (γ2 = 3.75, p = .15), the registered sex at birth (γ2 = .06, p = .80), or the socio-economic status (γ2 = 8.109, p = .23).

**Instruments**

**Self-identification as a victim**

The following definition of PA was presented: “the continued application of strategies of pressure, control, manipulation, and coercion to dominate and subdue a partner”. Next, we evaluated whether the participants thought they had suffered PA in a same-sex couple by using one item with a 6-point Likert scale (1 = No, 2 = Yes, rarely, 3 = Yes, occasionally, 4 = Yes, several times a month, 5 = Yes, several times a week, 6 = Yes, almost daily). This item, including the definition of PA, has been used in previous studies to calculate the percentage of PA in same-sex couples (Longares et al., 2017). Following the criteria used in previous studies (i.e. Straus, 2008), participants who scored from 2 (Yes, rarely) to 6 (Yes, almost daily) on this item were classified as victims.

**Psychological Abuse**

The Psychological Abuse in Intimate Partner Violence Scale (EAPA-P; Porrúa-García et al., 2016) was administered to evaluate the PA experienced. This scale assesses the frequency with which people experience PA behaviors in an intimate relationship. The EAPA-P includes 19 items rated on a 5-point Likert scale (0 = Never, 1 = Sometimes, 2 = Several times, 3 = Many times, 4 = Continuously). In the original study, it was administered to 101 women residing in Spain who were victims of gender violence (Porrúa-García et al., 2016), obtaining an adequate reliability coefficient for the global score (α = .93). In order to adapt the scale to people in same-sex relationships, expert researchers were consulted, and they evaluated the items on the scale and their suitability for this population. As a result, minor modifications were made in four items of the EAPA-P to make it applicable to different genders (see Table 1).

**Table 1. Items’ adaptation of the gender in the Spanish version EAPA-P.**

<table>
<thead>
<tr>
<th>ITEM EAPA-P</th>
<th>ADAPTED ITEM EAPA-P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mi pareja trataba de mantenarme alejada de mis familiares.</td>
<td>Mi pareja trataba de mantenarme alejada/a de mis familiares.</td>
</tr>
<tr>
<td>Mi pareja me lanzaba distintas advertencias para que me comportara como él quería.</td>
<td>Mi pareja me lanzaba distintas advertencias para que me comportara como él/ella quería.</td>
</tr>
<tr>
<td>Mi pareja mostraba desconsideración hacia mi papel como madre y esposa.</td>
<td>Él/ella mostraba desconsideración hacia mi papel como pareja (y/o padre/madre).</td>
</tr>
<tr>
<td>Mi pareja me trataba como si fuera su sirviente particular.</td>
<td>Mi pareja me trataba como si fuera su sirviente/a particular.</td>
</tr>
</tbody>
</table>

*Measuring psychological abuse in same-sex couples: evidence of validity of the EAPA-P in a Spanish-speaking sample*
Psychological distress

The Spanish adaptation of the Hospital Anxiety and Depression Scale (HADS; Tejero, Guima, Farre, & Peri, 1986) was administered to evaluate depressive and anxious symptomatology in order to provide evidence of external validity. The HADS consists of 14 items rated on a 4-point Likert scale (from 0 to 4); 7 items assess anxious symptomatology and 7 assess depressive symptomatology. In the present study, participants were asked about their emotions in the last month, and an adequate reliability coefficient was obtained for both the global score (\( \alpha = .88 \)) and both subscales (Anxiety: \( \alpha = .83 \); Depression: \( \alpha = .78 \)).

Procedure

The present research was approved by the Bioethics Commission of the University of Barcelona. The data were collected through an online questionnaire, using a convenience sample with a snowball sampling method. Participants were contacted through the main social networks and by email with the collaboration of Spanish and Latin American lesbian, gay, bisexual, transgender, and intersexual (LGBTI) organizations, as well as the collaboration of people who had already participated in the study, who spread the questionnaire among their acquaintances. The questionnaire was completed by a total of 376 people, with four subjects eliminated afterwards because they did not answer the self-identification as a victim item. According to the recommendations of Edwards, Sylaska and Neal (2015), the participants were explicitly asked to answer the questionnaire thinking of an intimate relationship with another person of the same sex, thus avoiding the inclusion of data about relationships with another different sex person. All the participants were informed of the study objectives, completed the informed consent, and collaborated autonomously, voluntarily and without receiving any type of compensation.

Data analysis

An exploratory factor analysis was conducted to examine the factor structure of the EAPA-P, using FACTOR 9.2 (Lorenzo-Seva & Ferrando, 2006). The ULS (Unweighted Least Squares) extraction method was used with the poly-choric correlation matrix, due to its robustness with small samples and items with Likert-type response formats (Ferrando & Anguiano-Carrasco, 2010; Izquierdo, Olea, & Abad, 2014). To select the number of factors, the information provided by the Parallel Analysis was taken into account (Timmerman & Lorenzo-Seva, 2011). The goodness of fit of the data to the model was established from the GFI (Goodness-of-Fit) index and the RMSR (Root Mean Square of Residuals). The descriptive analyses and the correlation coefficients were analyzed with SPSS .20. Following the recommendations of Elosua and Zumbo (2008), the reliability of the EAPA-P was examined by calculating the ordinal alpha coefficient. To perform the discriminant analysis, the self-identification as a victim item was dichotomized. Following previous studies that addressed the validation of instruments to assess PA (Saldaña, Rodríguez-Carballeira, Almendros, & Nishida, 2018), the discriminatory power and the optimal cut-off point of the EAPA-P were examined through the ROC curve (Receiver Operating Characteristic) procedure using MedCalc 14 (MedCalc Software, 2015).

The \( \chi^2 \) test was applied to examine the possible differences in the sexual-affective orientation, the registered sex at birth, and the socio-economic status, between the group of participants who self-identified as victims and those who self-identified as non-victims. We used non-parametric tests, due to the non-compliance of the homocedasticity assumption, to examine (1) the differences in the EAPA-P scores between the groups of victims and non-victims and (2) the differences in the HADS scores based on the sexual-affective orientation of the participants identified as victims. In addition, analysis of variance tests were performed with a significance level of \( \alpha = .99 \) to examine possible differences in the scores on the EAPA-P based on the sexual-affective orientation of the participants. Cliff’s delta coefficient (\( d \)) was used to examine the effect size of these differences, due to its robustness with non-normal and ordinal data (Macbeth, Razumiejczyk, & Ledesma, 2009). Finally, in order to compare the degree of victimization experienced by people in same-sex couples or in different-sex couples, Cohen’s \( d \) was calculated using the means and standard deviations obtained in the sample of the present study and in the sample of women victims of psychological abuse reported in the study by Porrúa-García et al. (2016).

Results

Factorial analysis

The internal structure of the EAPA-P was examined using data from the complete sample, including participants who self-identified as victims and those who self-identified as non-victims. The values of the Kaiser-Meyer-Olkin index (.94) and Bartlett’s sphericity test (\( \chi^2 = 3591.0, p < .001 \)) showed that the data matrix was adequate to apply factorial analysis. The Parallel Analysis recommended extracting a single factor that explained 52.27% of the total variance. The GFI (.98) and the RMSR (.08) values showed a good fit. The factorial loadings of the 19 items on the EAPA-P ranged between .53 and .79 (see Table 2).
Table 2. Descriptive statistics of the items scores of the EAPA-P

<table>
<thead>
<tr>
<th>Item</th>
<th>M [95% CI]</th>
<th>SD</th>
<th>Skewness</th>
<th>Kurtosis</th>
<th>r_{ix}</th>
<th>λ_{i1}</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2.33 [2.19, 2.46]</td>
<td>1.32</td>
<td>-0.19</td>
<td>-1.23</td>
<td>.64</td>
<td>.67</td>
</tr>
<tr>
<td>2</td>
<td>1.20 [1.06, 1.35]</td>
<td>1.44</td>
<td>0.85</td>
<td>-0.74</td>
<td>.47</td>
<td>.53</td>
</tr>
<tr>
<td>3</td>
<td>1.49 [1.34, 1.64]</td>
<td>1.51</td>
<td>0.60</td>
<td>-1.13</td>
<td>.67</td>
<td>.73</td>
</tr>
<tr>
<td>4</td>
<td>.92 [0.79, 1.06]</td>
<td>1.35</td>
<td>1.20</td>
<td>0.37</td>
<td>.66</td>
<td>.76</td>
</tr>
<tr>
<td>5</td>
<td>.44 [0.34, 0.55]</td>
<td>1.05</td>
<td>2.51</td>
<td>5.20</td>
<td>.54</td>
<td>.71</td>
</tr>
<tr>
<td>6</td>
<td>1.14 [1.02, 1.27]</td>
<td>1.20</td>
<td>0.90</td>
<td>-0.17</td>
<td>.65</td>
<td>.72</td>
</tr>
<tr>
<td>7</td>
<td>.99 [0.87, 1.12]</td>
<td>1.21</td>
<td>1.09</td>
<td>0.13</td>
<td>.67</td>
<td>.75</td>
</tr>
<tr>
<td>8</td>
<td>.75 [0.62, 0.88]</td>
<td>1.25</td>
<td>1.61</td>
<td>1.27</td>
<td>.62</td>
<td>.73</td>
</tr>
<tr>
<td>9</td>
<td>1.53 [1.38, 1.68]</td>
<td>1.46</td>
<td>0.53</td>
<td>-1.14</td>
<td>.53</td>
<td>.59</td>
</tr>
<tr>
<td>10</td>
<td>1.30 [1.15, 1.44]</td>
<td>1.41</td>
<td>0.82</td>
<td>-0.69</td>
<td>.63</td>
<td>.70</td>
</tr>
<tr>
<td>11</td>
<td>1.19 [1.05, 1.33]</td>
<td>1.40</td>
<td>0.85</td>
<td>-0.65</td>
<td>.57</td>
<td>.63</td>
</tr>
<tr>
<td>12</td>
<td>1.10 [0.95, 1.24]</td>
<td>1.43</td>
<td>1.00</td>
<td>-0.48</td>
<td>.69</td>
<td>.78</td>
</tr>
<tr>
<td>13</td>
<td>.54 [0.43, 0.65]</td>
<td>1.06</td>
<td>2.05</td>
<td>3.26</td>
<td>.50</td>
<td>.64</td>
</tr>
<tr>
<td>14</td>
<td>1.41 [1.26, 1.56]</td>
<td>1.44</td>
<td>0.61</td>
<td>-1.01</td>
<td>.70</td>
<td>.77</td>
</tr>
<tr>
<td>15</td>
<td>1.62 [1.47, 1.77]</td>
<td>1.46</td>
<td>0.43</td>
<td>-1.20</td>
<td>.72</td>
<td>.79</td>
</tr>
<tr>
<td>16</td>
<td>1.13 [0.99, 1.27]</td>
<td>1.36</td>
<td>0.97</td>
<td>0.39</td>
<td>.71</td>
<td>.78</td>
</tr>
<tr>
<td>17</td>
<td>.59 [0.47, 0.71]</td>
<td>1.20</td>
<td>1.96</td>
<td>2.44</td>
<td>.57</td>
<td>.72</td>
</tr>
<tr>
<td>18</td>
<td>.99 [0.86, 1.12]</td>
<td>1.28</td>
<td>1.13</td>
<td>0.09</td>
<td>.53</td>
<td>.59</td>
</tr>
<tr>
<td>19</td>
<td>1.63 [1.48, 1.78]</td>
<td>1.47</td>
<td>0.40</td>
<td>-1.24</td>
<td>.66</td>
<td>.73</td>
</tr>
</tbody>
</table>

Note. $n = 372$; 95% CI = 95% confidence interval; $r_{ix} = T$ corrected item-total correlation score; $\lambda_{i1} = Item's$ factor loadings.

Descriptive statistics and reliability

Table 2 shows the descriptive properties of the 19 items on the EAPA-P, calculated from the data for the complete sample. The values of corrected item-total correlation coefficients were all above .40. Regarding the reliability of the EAPA-P, an adequate internal consistency value was found, with an ordinal alpha coefficient of $a = .95$. For the scores of the group of victims on the EAPA-P, with a significance level of $a = 0.99$, no differences were found in the degree of PA experienced based on the sexual-affective orientation of the participants (Gay men: $M = 1.69$, $SD = .883$; Lesbians: $M = 1.70$, $SD = .87$; Bisexuals-Pansexuals: $M = 1.29$, $SD = .607$; $F(2, 203) = 2.981$, $p = .053$). Likewise, the average scores obtained on the EAPA-P by the group of participants who self-identified as victims were lower than those obtained in a sample of women victims of PA in different-sex relationships (Porrua-Garcia et al., 2016). Thus, according to the criteria proposed by Cohen (1988), differences with a high magnitude were found between the scores of the two samples on the EAPA-P (Same-sex couples: $M = 1.64$, $SD = .85$; Different-sex couples: $M = 2.48$, $SD = .90$; $d > .80$).

Discriminant Analysis

The theoretical range of the EAPA-P oscillates between the values of 0 and 76. The average score of the group of participants who self-identified as victims of PA in same-sex couples in this study was 31.08 (IC 95% [28.85, 33.30]; $SD = 16.2$). The theoretical range of the group of participants who self-identified as non-victims of PA was 11.59 (IC 95% [9.86, 12.91]; $SD = 9.93$). The results of the Mann-Whitney U test confirmed significant differences between the range of scores of the two groups ($U = 4748.00$, $p < .001$), and these differences had a high magnitude (Cliff’s $d = .72$). The results of the ROC curve analysis support the discriminant power of the EAPA-P because the area under the curve was .861 (IC 95% [.822, .895]; $p < .001$) (see Figure 1). The Youden index indicated a score equal to or higher than 13 as the optimal cut-off point on the EAPA-P to distinguish between victims and non-victims of PA in same-sex couples. This cut-off point showed a sensitivity of 86.89% (IC 95% [81.5%, 91.2%]) and a specificity of 69.28% (IC 95% [61.7%, 76.2%]).

Other evidence of validity

The scores obtained by the participants on the EAPA-P correlated significantly, albeit with low intensity, with the
depression subscale on the HADS ($r = .115, p < .05$). However, no significant correlations were found between the scores on the EAPA-P and the anxiety subscale ($r = .015, p = .772$). Additional analysis indicated that the scores on the HADS in the group of victims showed no differences based on the sexual-affective orientation or in terms of depressive symptomatology (Gay men: $M = .57, SD = .458$; Lesbians: $M = .70, SD = .576$; Bisexuals-Pansexuals: $M = .60, SD = .319$; Kruskal Wallis: $x^2 = 1.784, p = .410$) or anxious symptomatology (Gay men: $M = .96, SD = .518$; Lesbians: $M = 1.12, SD = .667$; Bisexuals-Pansexuals: $M = 1.06, SD = .418$; Kruskal Wallis: $x^2 = 2.21, p = .331$).

Discussion

In the present study, we provide evidence of the adequacy of the psychometric properties of the EAPA-P to assess the degree to which PA is experienced in same-sex couples in a Spanish-speaking sample. Regarding the internal structure of the EAPA-P, the results indicated that a one-factor structure was more appropriate. These results contrast with those obtained in the original study, where the EAPA-P was administered to a sample of 101 women victims of gender violence (Porriña-García et al., 2016), and evidence was found for a two-factor structure that differentiated between direct and indirect PA strategies. Although some studies argue that PA is multidimensional (i.e., Murphy & Hoover, 1999), in other studies that have evaluated the abuse applied in the context of an intimate relationship (i.e., Jones, Davidson, Bogat, Levendosky, & VonEije, 2005) and in abusive groups (i.e., Saldària, Rodríguez-Carballeira, Almendros, & Escartín, 2017), evidence has been found for the unidimensionality of the construct. In this regard, the PA strategies included in the taxonomy proposed by Rodríguez-Carballeira et al. (2014), and represented in the items on the EAPA-P, could be components of the same phenomenon that tend to occur simultaneously in abusive relationships.

Regarding the reliability of the EAPA-P, the results obtained showed an adequate internal consistency value ($a = .95$). This value is similar to the one obtained in the original study (Porriña-García et al., 2016) and equal to or higher than those reported in previous studies that used scales to assess PA in couples (i.e., Matte & Lafontaine, 2011). This result, along with the discrimination coefficient of the items, indicated that all the items on the EAPA-P had adequate functioning and contributed in a significant way to the total score on the scale in the sample of Spanish-speaking individuals in same-sex couples in the present study.

In relation to the discriminatory power of the EAPA-P in same-sex couples, the results revealed that a score equal to or higher than 13, in a range from 0 to 76, could be useful as an optimal cut-off point to detect experiences of victimization. This is the score on the scale where the relationship between sensitivity and specificity is the highest. Given the composition of the sample of participants in this study, this cut-off point will be useful in research and in the detection of victims of PA in same-sex couples with the general population.

Finally, the significant correlation found between the scores on the EAPA-P and the depression subscale of the HADS corroborates findings from previous studies indicating that depressive symptomatology is one of the main consequences of PA in same-sex couples (i.e., Buller et al., 2014). This result also coincides with those found in the validation of other measurement instruments of PA in couples (Calvete et al., 2005), providing evidence of the external validity of the scale. It has been pointed out that the presence of depressive symptomatology in PA victims in same-sex couples could be due to the negative influence of PA on victims’ self-esteem (Longares, Escartin, & Rodríguez-Carballeira, 2016).

The results obtained show that the mean PA in same-sex couples is lower than the one obtained in women victims of PA in different-sex couples (see Porriña-García et al., 2016). In any case, it should be taken into account that, in the present study, a community sample was used, whereas the sample of women in different-sex couples came from specialized services for victims of gender violence.

Along with the contributions provided, is necessary to point out some limitations. First, because the participants were contacted through a non-probabilistic sampling method, the representativeness of the sample cannot be guaranteed. In this regard, there could be a certain overrepresentation of people who participate actively in LGBTBI groups. In any case, this limitation is common in studies focused on this population (Nowinski & Bowen, 2012). Future studies should try to access people who have no connection with this type of organization. Moreover, given that the study was conducted with a general sample, future research could examine the psychometric properties of the EAPA-P with clinical Spanish-speaking people in same-sex couples. Second, although it is common in research (Edwards et al., 2015), the use of self-report measures that evaluate personal past experiences implies a retrospective exercise in order to answer the questions posed. Third, the EAPA-P does not include items that represent possible abusive strategies perpetrated specifically in same-sex couples. Future research should detect specific strategies that could be experienced or perpetrated in this population, and include them in the evaluation of PA experiences. Finally, future studies should study the factorial structure of the EAPA-P with a broader sample of victims of PA in same-sex couples, which in turn would allow a confirmatory factor analysis with guarantees and strengthen the evidence about the internal validity of the scale.

In any case, the present study provides evidence of the adequacy of the psychometric properties of the EAPA-P to assess the experiences of PA in Spanish-speaking people in same-sex couples. Thus, the EAPA-P is a suitable tool to evaluate the phenomenon in this population, both in research and in applied fields such as psychosocial or clinical interventions.

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