Clínica y Salud (2019) xx(x) xx-xx

Clínica y Salud

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Love Attitudes and Violence: Consequences of Burden of Care on Women

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ARTICLE INFO

Article history:
Received 7 September 2018
Accepted 21 May 2019
Available online 3 July 2019

Keywords:
Love styles
Violence
Caregiver burden
Ex post facto study

A B S T R A C T

Intimate partner violence against women is considered one of the most widespread forms of violence. Women staying in violent relationships is associated with feelings of love and caregiving. The objectives of this study were to investigate potential associations between violence (received and perpetrated), love styles, and perceived caregiver burden; to assess differences in the type of violence as a function of perceived caregiver burden; to analyse the predictive role of violence received and perpetrated and love styles in caregivers' burden; and to determine whether love styles mediate in the relation between violence and perceived caregivers' burden. Two hundred fifty women from the Basque Country (Spain), aged between 30 and 84 years (M = 58.66, SD = 10.46) participated in the study. It is a transversal study design. Results show a positive correlation between low burden and psychological aggression perpetrated. Further, the Agape love style and severe and minor psychological aggression perpetrated, and minor injury perpetrated were predictors of perceived caregiving burden. Finally, the findings indicate that love styles mediate the relationship between violence and care burden. The study concludes that love styles and perpetrated and received violence influence women's perceived caregiver burden. This should be taken into account when evaluating relationships.

Las actitudes amorosas y la violencia: las consecuencias de la carga de cuidados en la mujer

Palabras clave:
Estilos de amor
Violencia
Carga del cuidador
Estudio ex *post facto*

R E S U M E N

La violencia en pareja contra la mujer es la forma de violencia más extendida. Las mujeres que permanecen en relaciones violentas viven con sentimientos de amor y cuidado. Este estudio tiene como objetivos analizar la relación entre la violencia, las actitudes amorosas y la sobrecarga del cuidado, evaluar las diferencias de estas dos primeras en función del tipo de sobrecarga del cuidado, analizar el papel predictivo de las actitudes amorosas y la violencia sobre la carga del cuidado y estudiar el efecto mediador de las actitudes amorosas en la relación entre violencia y sobrecarga del cuidado. Doscientas cincuenta mujeres del País Vasco (España), con edades entre los 30 y los 84 años (M = 58.66, DT = 10.46) participaron en el estudio. Se ha utilizado un diseño de estudio transversal. Los resultados indican una relación positiva entre la sobrecarga leve y el abuso psicológico ejercido, observándose que un estilo de amor de tipo ágape y el abuso psicológico leve y severo ejercido predicen la carga percibida del cuidado. Asimismo, se aprecia que las actitudes amorosas median la relación entre la violencia y la carga del cuidado. Se concluye que las actitudes amorosas y la violencia ejercida y recibida influyen en la percepción de sobrecarga de la mujer cuidadora, lo que debe tenerse en cuenta al evaluar las relaciones de pareja.

Increasing awareness of severity and extent of violence against women has led to its recognition as a societal problem rather than being considered a private matter. Violence against women perpetrated by their partners is a complex and multi-causal phenomenon (Redding, Ruiz-Cantero, Fernández-Sáez, & Guijarro-Garvi, 2017). Over the years, different terms have been used to define it depending on the type of relationship. One of the terms that have become most widely used is intimate partner violence (IPV), referring to all the types of violence that occur in the context of an intimate or romantic relationship (Saltzman, Fanslow, McMahon, & Shelley, 1999).

Intimate partner violence is one of the most widespread forms of violence. Data from the Word Health Organization indicate that one in three women have experienced IPV at some point in their lives (Butchart & Mikton, 2014). This refers to violence against women by their partner or ex-partner and to a regular behavioural pattern, not isolated events (Deza, 2012), increasing gradually as a romantic commitment grows (González & Santana, 2001), with the

Cite this article as: Díaz, M., Estévez, A., Momeñe, J., & Ozerinjauregi, N. (2019). Love attitudes and violence: Consequences of burden of care on women. *Clínica y Salud.* Ahead of print. https://doi.org/10.5093/clysa2019a16

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objective of dominating the relationship and their partner/ex-partner (Fisher, Tran, Kriitma, Rosenthal, & Tran, 2010). Typically, the abuse starts early on, is chronic (Amor, Echeburúa, Corral, Zubizarreta, & Sarasua, 2002), and can take various forms: physical, psychological, and/or sexual (Rodríguez, Romero, Durand-Smith, Colmenares, & Saldívar, 2006). Psychological aggression is the most common form (Fernández-Fuertes & Fuertes, 2010; Pazos, Oliva, & Hernando, 2014) and it often occurs before physical violence. Psychological aggression refers to verbal and emotional attacks, including humiliation, threats, criticism, insults (Rey-Anacona, 2008), prohibition (Aiquipa, 2015), control tactics (Muñoz-Rivas, Graña, O'Leary, & González, 2007), belittling (Amor, Echeburúa, Corral, Sarasua, & Zubizarreta, 2001), isolation, domination, and rejection (Almendros, Gámez-Guadix, Carrobles, Rodríguez-Carballeira, & Porrúa, 2009). Physical violence is understood as the use of hitting, kicking, beating, or other types of physical force with the potential to cause bodily injury or harm, and sexual violence is understood as forcing someone to have sex or perform sexual acts against his/her will by coercion, intimidation, or force (Alberdi & Matas, 2002).

In this context, the model of romantic love and acceptance of related myths have encouraged women to remain in violent relationships. That is, the ideas that love gives meaning to life and can solve everything, and that break up represents a failure, play a negative role in women, making them believe that they should be capable of changing their abusive partner, or even being used to justify the violent behaviours as evidence of love (Bosch, Ferrer, Navarro, & Ferreiro, 2012; Sanpedro, 2004). The traditional model of romantic love tends to encourage individuals to stay in relationships based on control and inequality, encouraging passivity, subordination, idealisation, dependence on the other (Ferrer, Bosch, & Navarro, 2010), personal sacrifice, unrequited love (Ruiz-Jarabo & Blanco, 2004), and caregiving (Esteban & Távora, 2008; Illouz, 2009), especially in women (Cantera & Blanch, 2010). It should be noted that there are many women who understand love as an absolute and unconditional surrender to their couple, providing them with excessive care and keeping their own desires and needs in the background. These beliefs are today deeply rooted in many women without hardly realizing it, because they consider it as something natural and socially accepted (Coria, 2011). Emotions, as well as this type of beliefs, are culturally mediated, respond to the social norms and, therefore, are predetermined by myths, stereotypes, and taboos. Considering these beliefs as normal or natural results in the perpetuation of traditional sentimental structures (Herrera, 2017; Hochschild, 2012), in which there is a marked difference between men and women in the roles and behavioural patterns they must carry out. Violence is also an important element in maintaining women's subordination to men (Osborne, 2009). In line with this, love has been indicated as a possible factor that makes IPV more likely to occur and perpetuate (Bosch et al., 2007; Ferrer, Bosch, Navarro, Ramis, & García, 2008).

Lee (1977) proposed an interesting model to understand the nature of love, describing six styles of loving, a typological conception of love that serves as a framework for this study: a) Eros (passionate love), characterised by the expression of high levels of passion, physical attraction, and sexual activity; b) Ludus (game-playing love), involving a weaker emotional connection, with no future plans and no desire for attachment; c) Storge (friendship-based love), characterised by enduring commitment based on intimacy, friendship, and affection; d) Mania (obsessive love), that involves dependency on the partner, extreme jealousy, possessiveness, a lack of trust, and ambivalence; e) Pragma (pragmatic love), based on the rational search for the ideal partner, considering age, level of education, social status, religion, etc.; and f) Agape (altruistic love), characterised by unconditional commitment, selfless, and all-giving.

Love style preferences are linked to individuals' belief systems and attitudes to romantic situations (Hendrick & Hendrick, 2006). As indicated, the phenomenon of women staying in violent relationships has been associated with cognitive and emotional factors such as feelings of love (Amor, Bohórquez, & Echeburúa, 2006; Melgar, 2010; Puente-Martínez, Ubillos-Landa, Echeburúa, & Páez-Rovira, 2016) and with emotional dependence (Momeñe, Jáuregui y Estévez, 2017; Sánchez, 2016). In relation to this, it is important to analyse the establishment of increasingly strong affective attachment to abusive partners (Montero, 2001) and more passionate feelings towards such partners than shown by people who have never experienced abuse (Kú & Sánchez, 2006).

In relation to this, it is important to underline that caregiving is a dominant feature of the role women play in relationships between couples (Oliver & Valls, 2004) and that caregiving is also associated with love (Leal, 2007). In this context, caregiving is used to refer to a willingness to help satisfy the needs of the other person, in an unconditional way and considering multiple factors (López, 2009). Some women experiencing IPV believe that they have to continue taking care of their partner, accepting and giving into his demands, despite the abusive relationship (Souto et al., 2016).

In light of all this, the objectives of this study were: 1) to investigate potential associations between violence, love styles, and perceived caregiver burden; 2) to assess differences in the type of violence received and perpetrated as a function of perceived caregiver burden; 3) to analyse the predictive role of violence received and perpetrated and love styles in perceived caregiver burden; and 4) to determine whether love styles mediate in the relation between violence (received and perpetrated) and perceived caregiver burden.

Method

Participants

The sample was composed of 250 women living in the Basque Country who were recruited by convenience sampling. Specifically, we approached several organisations for women and those that expressed interest invited their members and staff to participate on a voluntary basis.

The mean age of participants was 58.66 years old (*SD* = 10.46), with a range between 30 and 84 years old, the majority being between 46 and 75 years old. At the time of the study, 62% were married, 9.6% widowed, 6.8% divorced, and 3.6% separated, while 3.6% had a cohabiting partner, 11.6% had a non-cohabiting partner, and 2.8% did not have a partner. Of the women who reported having a partner, 72.4% had an opposite-sex partner and 0.8% a same-sex partner, while 19.6% did not specify the sex of their partner.

Regarding education, 58.8% of the women had university or technical/vocational qualifications, while 16% had completed secondary education and 20.8% primary education, just one of the participants reporting no formal education. Almost half of the women were in work (45.2%), with jobs in administration (22.12%), healthcare (20.35%), and education (12.39%) sectors, while 3.6% were unemployed, 21.6% were homemakers, and 23.6% were retired.

Instruments

Zarit Burden Interview (ZBI; originally developed by Zarit, Reever, & Bach-Peterson, 1980). This questionnaire was designed to assess the subjective burden experienced by the primary caregivers of people with mental disorders. It explores the negative impact of caregiving on a caregiver in different areas of their life: physical health, mental health, social participation, and financial resources. Internationally, it is one of the most widely used scales for measuring burden (Breinbauer, Vásquez, Mayanz, Guerra, & Millán, 2009). It consists of 22 items in question form, and the caregiver is asked to respond using a 5-point Likert-type scale (0 = *never*, 1 = *rarely*, 2 = *sometimes*, 3 = *quite frequently*, 4 = *nearly always*).

The overall score is the sum of all items, ranging from 22 to 110, and can be used to assess whether or not the caregiver experiences burden and the level of burden; the higher the score, the higher the burden. In our study, we used the cut-offs proposed for the Spanish version (Martín et al., 1996): 22-46 (no burden), 47-55 (low burden), and 56-110 (high burden). The factors identified for this scale are: (1) impact of care, including the items related to all issues associated with the effects of providing care on the caregiver, with a factor loading of 7.3, explaining 33.2% of the variance; (2) interpersonal relationships, containing items referring to the relationship between caregiver and care recipient, with a factor loading of 2.5, explaining 11.4% of the variance; and (3) expectations of self-efficacy, gathering items reflecting the beliefs and expectations of the caregiver about their own ability to care for the care recipient, with a factor loading of 2.1, explaining 9.7% of the variance. Regarding reliability, the data from the current study have shown good levels of internal consistency for the overall scale (α = .91) and for separate factors: impact of care (α = .93), interpersonal relationships (α = .87), and expectation of self-efficacy (α = .77).

Revised Conflicts Tactics Scale-2 (CTS2) (Straus, Hamby, Boney-McCoy, & Sugarman, 1996). The Conflict Tactics Scale (CTS) was originally developed by Straus (1979) and later modified by Straus et al. (1996). This instrument collects data on the main types and extent of violence in partner relationships. Internationally, it is one of the instruments most widely used to study the prevalence and incidence of adult IPV. It is a self-administered questionnaire with a 39 item pairs (78 items in total: 39 questions each asking once for the respondent and once concerning the partner) that assess the extent to which each member of the couple engages in acts of physical, psychological, or sexual violence against the other, as well as the use of justification and negotiation to resolve conflict.

The scale has five subscales: negotiation (6 items), psychological aggression (8 items), physical assault (12 items), sexual coercion (7 items), and injury (6 items), which are in turn divided into two subscales: cognitive and emotional for negotiation, and minor or severe for the other scales. Responses rate the frequency of acts in the previous year, on an 8-point scale (from 0 = *never* to 6 = *more than 20 times in the past year,* as well as 7 = *never in the past year, but it did happen before that*)

Several indices can be calculated for each of the CTS2 subscales (Straus, 2001, 2004), including scores for prevalence, annual chronicity, and annual frequency. Analysis of the effect of item order indicates that the format is adequate, especially if the goal is to assess physical violence (Dietz & Jasinski, 2007).

In IPV perpetrators, the test-retest reliability for the frequency score ranges from .79 for the injury subscale to .49 for the negotiation subscale; in the subscales related to violence, the greatest reliability was found for the psychological aggression subscale (.72), although results for the physical assault and sexual coercion subscales were also above .65 (Vega & O'Leary, 2007). The internal consistency in the present study ranged between .36 and .85; specifically, coefficients of less than .70 were obtained for psychological aggression perpetrated and received, physical assault perpetrated and received, and sexual coercion perpetrated and received.

Love Attitudes Scale (LAS) (Hendrick & Hendrick, 1986). This instrument explores the six love styles proposed by Lee (1988) and addressing the types of love characteristic of each of them: Eros (passionate or idyllic love), Ludus (game-playing love), Storge (friendship love), Pragma (practical love), Mania (possessive, dependent love), and Agape (altruistic love). There are Spanish versions of LAS (Arias-Galicia, 1989) and a Spanish version used in a Mexican population was found to have good psychometric properties, comparable to those of the original version in English (Rodríguez, Montgomery, Peláez, & Salas, 2003).

The authors of this scale conceived the scale as a tool to measure the structure of attitudes and beliefs of interviewees regarding love, considering cognitive, affective, and behavioural indicators. It is composed of 42 items, and participants respond by marking one option on a 5-point scale (from 1 = *strongly agree* to 5 = *strongly disagree*); the lower the score, the greater the endorsement of the corresponding style.

The construct validity of the scale was checked and continues to be confirmed, showing that love styles assessed are related to other constructs in a predictable manner. In previous research, reliability analysis found coefficients from .68 for Storge to .83 for Agape (Hendrick & Hendrick, 1986). For the present data, Cronbach's α calculated as an indicator of reliability was .86 for Eros, .64 for Ludus, .72 for Storge, .85 for Pragma, .69 for Mania, and .84 for Agape.

Procedure

For completion of the questionnaire, either a researcher visited the interested women's organisations to distribute paper copies or a link was circulated to the online version. Data was collected after explaining the objectives of the study, as well as providing general information about the study, including the people and the organisation responsible, and full details concerning ethical and confidentiality considerations. This study was performed in accordance with the Declaration of Helsinki (World Medical Association, 2013). The questionnaire was then completed individually and anonymously on paper or online.

Data Analysis

The results have been obtained through the SPSS 22 program. Firstly, we analysed the bivariate relationships between violence received and perpetrated, love attitudes and perceived caregiver burden by the *r* of Pearson. The effect size was interpreted as described by Cohen (1992) in the following way: values under .20 were considered small, those around .5 medium and those higher than .8 large. Secondly, we analysed differences in means in the type of violence received and perpetrated and love attitudes as a function of perceived caregiver burden through Student's *t*. Thirdly, we analyse multiple regression by successive steps to verify the predictive role of violence perpetrated and received and love attitudes on perceived caregiver burden. Finally, we analysed mediations to study the mediating role of love attitudes in the relationships between violence perpetrated and received and perceived caregiver burden.

Results

Firstly, we assessed associations between the scores for violence perpetrated and received, love attitudes, and caregiver burden (Table 1), and found significant correlations (see below). Our results indicate that Eros love style was positively correlated with overall psychological aggression (both perpetrated and received) and also that Ludus love style was negatively correlated with overall psychological aggression (both perpetrated and received), overall physical assault received, minor physical assault perpetrated and received, and overall sexual coercion perpetrated and received. It is important to point out that romantic love is based on a construction of an unreal conception of love through the use of romantic myths (Yela, 2003), such as relating jealousy with love (González & Santana, 2001). Such demonstrations of love could be risk factors for gender-based violence (Diaz-Aguado, Martínez, & Martín, 2013).

Similarly, Storge love style was positively correlated with overall psychological aggression and minor psychological aggression received, while Mania love style was negatively correlated with minor psychological aggression perpetrated. Finally, Agape love style was positively correlated with the overall and minor psychological

Table 1. Correlation between Received and Perpetrated Violence, Love Attitudes and Caregiver Burden

	Eros	Ludus	Storge	Pragma	Mania	Agape	No burden	Low burden
Overall negotiation received	-.18*	.22*	.04	.18*	.12	-.11	-.11	.04
Emotional negotiation received	-.21*	.18*	.05	.15	.09	-.09	-.14	.01
Emotional negotiation perpetrated	.01	.07	-.01	.13	.18*	-.02	-.16	.17
Cognitive negotiation received	-.11	.23**	.03	.21*	.15	-.06	-.06	.07
Overall psychological aggression received	.21*	-.22*	.21*	.04	.04	.01	-.13	.20
Overall psychological aggression perpetrated	.22**	-.29**	.16	.02	-.14	.16*	-.21*	.24*
Minor psychological aggression received	.23**	-.17*	.24**	.05	-.14	.03	-.14	.21*
Minor psychological aggression perpetrated	.22**	-.26**	.16	.03	-.17*	.17*	-.24*	.24*
Severe psychological aggression received	.15	-.25**	.09	.02	-.14	.04	-.09	.12
Severe psychological aggression perpetrated	.17*	-.24**	.11	.00	-.06	.11	-.12	.17
Overall physical assault received	.05	-.17*	.09	.08	-.01	.15	.02	.06
Minor physical assault received	.05	-.20*	.06	.06	-.02	.16	-.01	.08
Minor physical assault perpetrated	.04	-.18*	.08	.08	-.02	.15	.04	.03
Overall sexual coercion received	.05	-.23**	.07	.07	-.07	.07	.02	.05
Overall sexual coercion perpetrated	.04	-.19*	.07	.08	-.01	.12	.03	.06
Minor sexual coercion received	.02	-.28**	.02	.10	-.09	-.02	.01	.07
Minor sexual coercion perpetrated	.04	-.24**	.04	.09	-.00	.07	.01	.09
Severe sexual coercion received	.08	-.15	.12	.03	-.05	.16*	.02	.04
Severe injury received	.08	-.16	.09	.05	-.02	.16*	.01	.07

*$p < .05$; **$p < .01$.

aggression perpetrated and with sexual coercion and severe injury received. With regards to burden, no burden was negatively associated with overall and minor psychological aggression perpetrated. Lastly, we found that low perceived burden was positively associated with overall psychological aggression perpetrated and with minor psychological aggression perpetrated and received.

Secondly, we analysed differences in the type of violence received and perpetrated and love attitudes as a function of perceived caregiver burden (Table 2). The sample was divided into three subgroups by caregiver burden, using the cut-off points for "no burden", "low burden" and "high burden" for the Spanish version of the ZBI (Martín et al., 1996). We found significantly higher mean scores for severe psychological aggression received and perpetrated in individuals who reported mild burden, and significantly higher mean scores for psychological aggression and minor sexual coercion and emotional negotiation perpetrated in the severe burden group. Further, though the differences did not reach significance, we note that we found the highest mean scores for Pragma love style in all three burden groups.

Thirdly, we analysed the predictive role of violence perpetrated and received and love attitudes on the perceived caregiver burden (Table 3). Below we indicate the significant regressions.

Finally, we analysed the relationship between violence, both received and perpetrated, and perceived caregiver burden, this relationship being mediated by love styles (Table 4).

The unstandardized coefficient for minor psychological aggression perpetrated increased from .06 in the first stage of analysis to .07 in the third stage. This implies that 16.66% of the variance of the relationship between minor psychological aggression perpetrated and caregiver burden is explained by love style. Similarly, the unstandardized coefficient for minor injury perpetrated increased from 1.78 in the first stage of analysis to 2.27 in the third stage, implying that 21.58% of the variance of the relationship between minor injury perpetrated and caregiver burden is explained by love style.

Discussion

Firstly, we have analysed the relationship between violence, love style, and caregiver burden. In this analysis, we found a significant

Table 2. Differences in the Types of Violence Received and Perpetrated and Love Attitudes by Perceived Caregiver Burden

	No burden		*F*	Sig.	Low burden		*F*	Sig.	High burden		*F*	Sig.
	M	*DT*			*M*	*DT*			*M*	*DT*		
Minor psychological aggression perpetrated	5.93	6.84	0.14	.70	10.59	7.95	3.03	.08	8.14	5.05	4.26	.04*
Severe psychological aggression received	2.10	6.53	1.28	.26	4.18	8.37	4.02	.04*	2.45	5.52	0.53	.47
Severe psychological aggression perpetrated	1.54	5.33	2.22	.14	4.05	7.36	5.90	.02*	1.82	4.60	0.58	.45
Overall emotional negotiation received	10.02	5.64	1.65	.20	12.48	5.63	0.67	.42	11.00	3.57	6.72	.01*
Minor sexual coercion perpetrated	0.98	3.89	0.04	.85	1.59	5.26	3.32	.07	0.18	0.85	4.62	.03*
Eros	15.67	5.91	0.06	.81	18.31	6.08	0.02	.88	15.95	4.88	0.32	.57
Ludus	26.52	5.37	0.18	.67	26.74	4.73	0.31	.58	25.25	5.02	0.00	.98
Storge	21.03	5.79	1.68	.20	22.68	5.12	0.21	.64	19.80	3.91	2.70	.10
Pragma	29.03	6.39	1.95	.17	29.68	4.19	3.91	.05	27.86	6.41	0.00	.98
Mania	27.77	4.79	0.00	.96	27.00	3.95	0.72	.40	27.00	5.17	0.42	.52
Agape	18.02	5.37	0.36	.55	19.15	5.78	0.83	.37	18.45	5.25	0.05	.82

*$p < .05$.

Table 3. Multiple Linear Regression of Love Style and Violence on Perceived Caregiver Burden

	β	β	*T*	*R*	R^2	Adjusted R^2	*p*
Overall caregiver burden							
Agape	.06	.39	2.43	.74	.54	.23	.02*
Severe psychological aggression perpetrated	.09	.61	2.05	.74	.54	.23	.04*
Minor psychological aggression perpetrated	.09	.75	2.82	.74	.54	.23	.01*
Interpersonal relationships							
Storge	-.26	-.36	-2.19	.68	.47	.15	.03*
Severe psychological aggression received	-.50	-.79	-2.69	.68	.47	.15	.01*
Severe psychological aggression perpetrated	.50	.61	2.03	.68	.47	.15	.04*
High burden							
Minor psychological aggression perpetrated	.04	.65	2.11	.70	.48	.13	.04*
Minor physical aggression received	-.12	.49	2.44	.70	.48	.13	.02*

*$p < .05$.

Table 4. Mediation of Love Style in the Relationship between Violence Received and Perpetrated and Perceived Caregiver Burden

Independent variable	Dependent variable	Total effect	Direct effect	Bootstrap 95% CI
Violence (received and perpetrated)				
Minor psychological aggression perpetrated	Caregiver burden	0.07*	0.06*	(-.01 to .16)
Minor injury perpetrated	Caregiver burden	2.27**	1.78**	(0.93 to 3.65)

*$p < .05$; **$p < .01$.

positive association between Eros love style and psychological aggression, both perpetrated and received. This may be due to the fact that Eros or passionate love is characterized by irresistible passion and intense feelings (Brenlla, Brizzio, & Carreras, 2004; Ubillos et al., 2001), a previous study finding that abused women reported more passionate feelings than women who had not been abused (Kú & Sánchez, 2006). Further, Ludus love style was negatively associated with psychological aggression and sexual coercion perpetrated and received as well as with physical assault received and minor physical assault perpetrated and received, and Mania love style was negatively associated with minor psychological aggression perpetrated. Although these findings are not consistent with previous studies showing that both the Ludus and Mania predict partner violence (Galicia, Sánchez, & Robles, 2013), they may be understood in terms of greater relationship satisfaction being linked to Eros love style (Contreras, Hendrick, & Hendrick, 1996).

With regards to Storge, this love style was positively associated with psychological aggression received. This result is in line with previous studies indicating that Storge love style is commonly found in the context of partner violence (Lucariello, 2012). Further, our findings may be related to the fact that these individuals consider falling in love to be more romantic in nature and a long-term commitment (Galicia et al., 2013). In turn, the romantic love model and acceptance of associated myths play a crucial role in the onset and maintenance of violence (Ferrer et al., 2008). As noted above, the literature states that this myth of romantic love particularly affects women (Cantera & Blanch, 2010). This can be explained from the social and power structure that urges women to seek a partner under the pretext of seeking ideal love, condemning them to inequalities, subjugation, and sacrifice. In this way, a model of domesticity is constructed where family, and by extension home, is the naturalized habitat of a woman, who lives situations of conflict generated from unreal equality guidelines that new generations have assumed under the protection of traditional roles, despite the evident persistence of gender differences (Melero, 2008). A search for romantic love is imposed on girls in order to organize and build a future, while for boys it is seduction, implying profit. The need to love is stronger in women, but at the same time it is more dependent, as Leal (2007) points out. Likewise, for Bosch and Ferrer (2013) gender-differentiated love creates false expectations and may be at the root of gender-based violence. From a differentiated socialization, women could expect the appearance in their lives of a "prince charming" within a framework characterized by expectation, passivity, care, and renunciation. In this way, romantic love reproduces inequality (Esteban & Távora, 2008; Illouz, 2009). We also found that Agape love style was positively associated with psychological aggression perpetrated and sexual coercion and severe injury received. These results are in line with previous research indicating that Agape in women is a predictor of violence perpetrated and received (Galicia et al., 2013). With respect to caregiving burden, we found that a perception of no burden was associated to psychological aggression perpetrated. Notably, this finding concerns violence perpetrated, which may be due to a tendency to underestimate violence received (Berns, 2000). This may be due to the cultural naturalization of violence against women and the tendency of abused women to minimize aggression (Zubizarreta, 2004).

Secondly, we analysed differences in violence and love styles perpetrated and received as a function of perceived caregiving burden. Our results indicate that the mean severe psychological aggression received and perpetrated was highest in the mild burden group. Further, though the differences did not reach significance, the mean scores were highest for Pragma love style in all three burden groups. The cultural, gender, and age differences related to predominant love style may help us understand these results (Galicia et al., 2013). Further, they may be explained by the positive relationships found in previous studies (Vohs, Finkenauer, & Baumeister, 2010) between Pragma love style and self-control. A romantic view of love may lead women to justify the control their partner exerts over them, and encourage them to adhere in their relationships to gender stereotypes in which control is associated with masculinity (Galicia et al., 2013).

Thirdly, we analysed the predictive role of violence perpetrated and received and love styles in perceived caregiving burden. The results of this analysis show, on the one hand, that Agape, together with severe and minor psychological aggression perpetrated predict caregiving burden and, on the other hand, that Storge, together with severe psychological aggression perpetrated and received predicted the impact of caregiving on interpersonal relationships. Similarly, we found that both minor psychological aggression perpetrated and minor physical aggression received are predictors of a high burden. We are not aware of any studies that have found an association between love attitudes, violence (received and perpetrated), and caregiving burden. Nevertheless, there is research associating romantic love

with gender-based violence (Amurrio, Larrinaga, Usategui, & del Valle, 2008) and indicating that women who seek romantic love wanting to find a relationship to give a sense of meaning to their lives are at high risk of experiencing IPV (Sanpedro, 2004).

Finally, we analysed love style as a mediator in the relationship between violence, both perpetrated and received, and caregiving burden. In this analysis, we found that the relationships of caregiving burden with minor psychological aggression perpetrated and with minor injury perpetrated were mediated by love style. We are not aware of any previous research on the mediating role of love style in violence perpetrated by caregiving women. On the other hand, our findings seem to be in line with previous studies that have found romantic love to be associated with women staying in violent relationships (Ferrer et al., 2010) and taking care of men (Esteban & Távora, 2008).

Certain limitations of this study should be recognised. First, it was based on a convenience sample from one region in our country, exclusively composed of women, with a mean age of 58 years old and who did not report high levels of violence. In relation to this, with such a high mean age, the attitudes reported may differ from the preferences at the beginning of their relationships, as love styles may change over time and, further, the sample may not be representative of the entire population of caregiving individuals, limiting the generalization of results. Moreover, age may have an impact on women's perception of experiencing partner violence. In fact, some studies have found older women to be more vulnerable, since they may face more social barriers to leaving an abusive partner (Straka & Montminy, 2006). Another factor to bear in mind is that more than half of the participants had tertiary education. Education is positively associated with the empowerment of women and more balanced gender roles in relationships (Vega, 2007) and, hence, a higher level of education could be protective against partner violence (Golden, Perreira, & Durrance, 2013; Redding et al., 2017). Given all this, our findings should be interpreted with caution. On the other hand, interpretations and perceptions of what is abusive behaviour may have influenced the results of this study, as in reporting violence there is a tendency to place emphasis on acts by the other party (Cáceres, 2011). Additionally, the cross-sectional nature of the study means we are unable to establish causal relationships between the study variables.

Despite these limitations, this study provides novel data on the mediating role of love styles in violence and caregiver burden perceived by women. The results may be very useful for improving our understanding of partner relationships and the love styles that may be associated with caregiver burden in women who receive or perpetrate violence.

Finally, future lines of research should be directed towards deepening, from a qualitative perspective, the meaning that women give to the violence received by their partners and to the care they provide them, as well as it would be interesting to gather information about their experiences.

Conflict of Interest

The authors of this article declare no conflict of interest.

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