Family- and community-related determinants of intimate partner violence among Mexican and Puerto Rican origin mothers in fragile families☆

Yok-Fong Paat a,⁎, Trina L. Hope b, Thenral Mangadu a, Guillermina Gina Núñez-Mchiria c, Silvia M. Chavez-­Baray a

a The University of Texas at El Paso, 500 W. University Avenue, El Paso, TX 79968, United States
b The University of Oklahoma, United States

A R T I C L E   I N F O

Article history:
Received 14 November 2016
Received in revised form 7 May 2017
Accepted 10 May 2017
Available online 23 May 2017

Keywords:
Intimate partner violence
Family
Community
Hispanic mothers
Mexicans
Puerto Ricans

A B S T R A C T

Hispanics are frequently categorized under one homogeneous group in existing intimate partner violence research, presenting a challenge for practitioners and researchers interested in assessing potentially unique public health concerns of each subgroup. Using the Fragile Families and Child Wellbeing Study, this study examined the family- and community-related determinants of intimate partner violence experienced by mothers of Mexican and Puerto Rican descent. The respondents’ self-reported physical violence and power control are two key measures of IPV. Our study found statistical differences between the Mexican and Puerto Rican origin respondents’ experiences with IPV. Specifically, father infidelity and parenting concordance functioned as risk and protective factors, respectively, for the Mexican origin mothers’ experiences of relational violence. In the case of the Puerto Rican origin respondents, higher level of spousal support, collective efficacy, and social disorganization were linked to less violence, while increased emotional distance and higher level of baseline education were associated with more violence.

Introduction

Intimate partner violence (IPV), which is disproportionately experienced by women, is a public health concern that warrants scholarly attention and policy intervention (Devries et al., 2013; Stöckl et al., 2013; WHO, 2013, 2016). Not only is IPV a leading cause of injury and death for women, it can impose significant long-term health impacts and societal costs (e.g., Duvvury, Callan, Carney, & Raghavendra, 2013; WHO, 2016). Specifically, violence experienced by women of Hispanic descent in the United States represents a critical arena for further inquiry. Indeed, Hispanic Americans, who make up approximately 17% of the country’s population and currently represent one of the fastest growing subpopulations in the U.S., are projected to constitute 31% of the nation’s population by 2060 (CDC, 2015a). The Centers for Disease Control and Prevention (CDC) estimated that over one-third of Hispanic origin women (37.1%) have experienced some form of IPV, including stalking, physical altercations, and rape (Breiding, Chen, & Black, 2014). While statistics on IPV prevalence vary among Hispanic women and their non-Hispanic counterparts, Hispanic women are disproportionately affected by the aftermath of this violence given their demographic and culturally-related circumstances (e.g., review of Cummings, Gonzalez-Guarda, & Sandoval, 2013; Lacey, McPherson, Samuel, Sears, & Head, 2012). Worse yet, not only can circumstances unique to Hispanic women (e.g., structural disadvantages, inaccessibility to health care, and cultural barriers) account for under-reporting of IPV, these incidents also present substantial barriers for those attempting to leave abusive relationships (Katendahl, Burge, Ferrer, Becho, & Wood, 2016; Women of Color Network, 2006).

In the family realm, prior research has found that interparental violence adversely affects child development (e.g., Holt, Buckley, & Whelan, 2008; Jouriles, Rosenfield, McDonald, & Mueller, 2014; Yount, DiGirolamo, & Ramakrishnan, 2011). The fertility rate for Hispanic women, which stands at 73/1000 for women aged 15–44, is an indication that many are parents (Martin, Hamilton, Osterman, Curtin, & Mathews, 2015). Despite the troubling statistics on IPV among Hispanic women, research on this marginalized population is sparse, and most studies focus exclusively on respondents of Mexican origin. Further, Hispanic subgroups, consisting of Mexicans, Puerto Ricans, Cubans, Dominicans, and others from Central or South American countries (U.S. Census Bureau, n.d.), are frequently categorized under one
homogeneous group in existing IPV research (Rizo & Macy, 2011), presenting a challenge for practitioners and researchers seeking to assess potentially unique public health concerns of each subgroup.

Using the Fragile Families and Child Wellbeing Study, this study examined the family- and community-related determinants of IPV experienced by mothers of Mexican and Puerto Rican origin, the two largest Hispanic subgroups in the U.S. Due to the lack of IPV literature stressing the distinct differences between Hispanic subgroups, and because studies looking at Hispanics as a whole are primarily studies of respondents of Mexican descent, we tried to be more explicit about our use of different ethnic labels in our literature review. Social scientists and policy makers’ awareness of subgroup differences can help facilitate culturally- and structurally-sensitive interventions targeting these underserved populations.

**Family-related determinants of IPV**

From the family perspective, female and male roles in traditional Hispanic culture (including Mexican and Puerto Rican) have been connected to economic contributions, household production, and gendered obligations. Rigid gender roles and sexualized double standards are part of traditional, male-dominated Hispanic families, where both genders are subjected to social norms guiding their behaviors – men head and provide for the household, whereas women’s roles have been historically confined to nurturing practices associated with child-rearing and a disproportionate burden of housework (e.g., Paat, 2015; Toro-Morn, 1995; see also Raffaeili & Ontai, 2004). Some scholars suggested that cultural explanations relating to the concepts of machismo and marianism (discussed below), along with familismo (familism), respeto (respect), dignidad (dignity), and traditional gender roles put Hispanic/Mexican/Puerto Rican women at greater risk for IPV (see Adams & Campbell, 2005; Rodditi, Schultz, Gillette, & de la Rosa, 2010). Fuchslo, Murphy, and Dufresne (2012), for instance, found that the immigrant Mexican women in their study felt compelled to marry their abusive sexual partners because “marrying white” (i.e., marrying prior to having any pre-marital sexual encounters) or marrying someone they had had sex with offered them respect. Other studies suggested that white women were pressured to remain sexually “pure” (e.g., chastity, marry as a virgin, or remain sexually faithful in marriage), live up to the standard of the Virgin Mary (i.e., “marianism”), and uphold a higher level of chastity; infidelity among men, in some cases, was permitted or even encouraged (Fuchs et al., 2012). While socially prescribed sexual dominance “justifies” adulterous relations, infidelity has been identified as a precursor/occurrence of IPV (Conroy, 2014; Utley, 2017; Lewis et al., 2017; Nemeth, Bonomi, Lee, & Ludwin, 2012; Witte & Mulla, 2012).

Rather than being characterized as warm, attentive, and supportive, abusers are frequently depicted as jealous, possessive, insecure, emotionally distant, and controlling (Langhinrichsen-Rohling, McCullars, & Misra, 2012; Smith & Segal, 2016). Violence has also been found to be more prevalent among partners in less committed relationships (e.g., cohabiting relationships versus marriage) (e.g., Caetano, Vaeth, & Ramisett-Mikler, 2008; Cui, Durtchsi, Donnellan, Lorenz, & Conger, 2010). Despite the high fertility rate among Hispanics in the U.S., the Pew Research Center (2011) estimated that Puerto Ricans are less likely to be married than Hispanics or the U.S. population as a whole. Oropesa (1996) postulated that Mexicans, compared to Puerto Ricans and non-Hispanic whites, hold marriage in higher regard, with marriage being perceived as “an affirmation of womanhood” and a “major life objective” (p. 59–60). In the parenting domain, there is compelling evidence that IPV is both a cause and an outcome of parenting conflicts (e.g., Finger et al., 2010; Kan, Feinberg, & Solmeyer, 2012; Paat, 2011). In other words, disagreements between partners on parenting issues can precipitate violence, and violence in turn makes parenting discordance more likely.

Although the patriarchal view of gender roles has been linked to male dominance, aggression, and authoritarianism (Lloyd, 1991), the cultural construction of masculinity and femininity for the Hispanic community is far from monolithic. Torres (1998) posited that the reversal of traditional gender roles among Puerto Rican families, owing to increased availability of economic opportunities for women, threatened Puerto Rican men’s views of masculinity. When immigrant status is considered, Mexican and Puerto Rican immigrant women’s acclimatization to mainstream culture can alter relationship dynamics and shift the customary power structure, because it threatens the traditional concept of masculinity (Grzywacz, Rao, Gentry, Marin, & Arcury, 2009). Ramirez (2008) indicated that concepts of machismo and marianism have been challenged by factors such as urbanization, education, and shared child-rearing responsibilities. He indicated that the participation of mothers and fathers in the urban workforce has altered traditional child-rearing practices and household gender expectations. Indeed, some scholars have suggested that the concepts of machismo and marianism, as ahistorical concepts or social constructs, over-exaggerate stereotypes of male dominance/female submissiveness, arguing that these concepts are merely narrow reflections of Hispanic gender role identity (see González-López & Gutmann, 2005; Torres, 1998). Others have also advocated for exploring the positive cultural aspects of machismo (e.g., bravery, protectiveness, self-respect, and responsibility) and marianism (e.g., compassion, loyalty, and patience) (Gil & Vazquez, 1996; Torres, 1998).

**Community-related determinants**

Classic ecological research pioneered by the work of Burgess and Park (1921), as well as Shaw and McKay (1969), indicated that residence in a neighborhood characterized by observable signs of physical deterioration, high density, and unemployment correlates with a range of poor outcomes in part because “socially disorganized” neighborhoods promote anonymity, weaken social control, and foster insecurity or potential violence. Further, empirical evidence indicated that socially disorganized neighborhoods are often plagued by a plethora of social problems (such as high rates of crime/delinquency, residential instability, health disparities, illicit drug use, vandalism, and non-marital/teen births) for several reasons (e.g., Brody et al., 2001; Kubrin & Wo, 2016; Sampson, Morenoff, & Cannon-Rowley, 2002). First, consensus on standard behaviors and acceptable norms may be impeded by the loose ties and social anonymity that exist between residents of highly disorganized neighborhoods, causing reluctance to exert guardianship/social control. Such communities are considered to be low in “collective efficacy” (Sampson, 2004, p. 232). Second, neighborhood social disorganization hinders the community’s ability to maintain social control and combat other social ills. In his ethnographic study “The Code of the Street,” Anderson (1999) posited that children growing up in violent neighborhoods are more likely to see violence as a normal part of daily life, necessary to gaining respect in neighborhoods with high rates of personal violence. Additionally, concerns for safety or fear of victimization are likely to impede social integration or vice versa, since perceived powerlessness can lead to social withdrawal in order to avoid victimization or conflict (e.g., Franklin, Franklin, & Fearn, 2008; Geis & Ross, 1998; Yuan & McNeeley, 2017).

Unlike cohesive neighborhoods that foster residents’ healthy mental states, ecological research suggests that socially and physically disordered neighborhoods present various observable signs of physical deterioration that can heighten the risk of depression, directly or indirectly (e.g., Graif, Arcaya, & Diez Roux, 2016; Ross, 2000). In addition to lacking the necessary socio-economic resources to combat crime, residents may not know how to respond when social norms are being violated due to the lack of community cohesion characterized by mutual aid, shared norms, and reciprocity (Sampson, 2004). Bourgois (1996), for example, found that Puerto Rican men who failed to attain the ideal of manhood created by consumerism in the midst of deindustrialization were
دریافت فوری
متن کامل مقاله

امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات