



Lifting the  
“Political Gag Order”  
*Breaking the Silence  
Around Partner Violence in  
Ethnic Minority Families*

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After more than two decades of research, it is clear that partner violence is a serious social problem that affects many segments of society (Straus et al., 1980). Despite the increased focus on battering, investigators are just beginning to explore the complexities of partner violence among ethnic minorities. This void in the literature has existed for several reasons. First, some researchers have taken a “color blind” approach to examining partner violence; that is, it has been assumed that the dynamics of battering were similar regardless of ethnicity (Fontes, in press). Although violent families of all ethnic backgrounds may share some similarities (e.g., high rates of marital

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The terms *ethnic minorities* and *people of color* are used to refer collectively to the four ethnic groups discussed in this chapter (African Americans, Latinos, Asian Americans, and American Indians). Also, the terms *African American* and *Anglo American* are used interchangeably with *black* and *white*, respectively. Where possible, the ethnic group is identified (e.g., Mexican American, Chinese American). The terminology used to refer to racial groups may vary on the basis of regional, political, and personal preference. The author acknowledges the limitations of the terminology used in this chapter.

dissatisfaction), a color-blind perspective disregards the ways race/ethnicity shapes the experience and interpretation of violence (O'Keefe, 1994). Alternatively, other researchers have considered violence to be a problem primarily of poor, ethnic minorities. As a consequence, research findings have been presented without consideration for factors that might act as mediators between ethnicity and partner violence (e.g., level of acculturation) or structural inequalities (e.g., social class) that may account for higher rates of partner violence among ethnic minorities (Asbury, 1993; Cazenave & Straus, 1990; Jasinski, 1996). Furthermore, failure to consider historic and sociocultural factors that influence minority partner violence may result in stereotypes, unfair public policies, and ineffective intervention efforts (Fontes, in press).

Information on ethnic minority partner violence is also lacking because some members of the ethnic minority community have imposed a "political gag order" concerning battering (Crenshaw, 1994). Specifically, some community members fear that research findings will be misinterpreted or used to reinforce negative societal stereotypes about minorities. Mistrust of authorities has led some community leaders and activists to deny the problem of partner violence or to resist the release of data indicating that minorities are more aggressive (Crenshaw, 1994; Eng, 1995; Ho, 1990).

Ethnic minorities are projected to constitute approximately 50% of the U.S. population by 2050 (U.S. Bureau of the Census, 1991). Therefore, researchers can no longer afford to maintain the silence around partner violence in this group. This chapter reviews research in this area.

Although the term *ethnic minority* may encompass many groups, this chapter focuses on the four largest groups in the United States: African Americans, Latinos, Asian Americans, and American Indians. First, a brief description of each group is presented. Second, the literature on partner violence among these groups is reviewed. Specifically, ethnic differences, demographic and cultural factors that potentially contribute to higher rates of partner violence among ethnic minorities, and limitations of the research are addressed. Third, therapeutic implications, including barriers to help seeking, hallmarks of culturally appropriate assessments, and culture-specific treatment recommendations are discussed. Finally, recommendations for policy are suggested.

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### Description of the Populations

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The purpose of this section is to describe briefly the four ethnic groups discussed in this chapter. An emphasis is placed on conditions associated with increased levels of partner violence, including demographic characteristics (e.g., youthfulness, poverty), and important historic events (e.g., forced migration). Cultural strengths, which may act as buffers against violence, also are highlighted (Asbury, 1993; Cazenave & Straus, 1990). The reader is reminded that conclusions cannot be drawn about individuals totally on the basis of ethnic group membership.

#### **African Americans**

African or black Americans make up approximately 12% of the U.S. population and constitute its largest racial minority. Although largely descendants of tribes along the west coast of Africa, many also have American Indian and European ancestry. Unlike other immigrants, African Americans entered the United States via the slave trade. Their 200-year history of enslavement was characterized by forced separation of families, beatings, and loss of language and culture. Following slavery, discrimination took the form of de facto segregation (Greene, 1994; Hammond & Yung, 1994). Substantial societal gains have been made; nevertheless, black people have not achieved economic, employment, and educational parity with Anglo Americans. For example, one in three African Americans currently lives in poverty (U.S. Bureau of the Census, 1992). Despite social and economic injustices, African American families have developed cultural strengths and coping strategies, including adaptability of family roles; strong kinship bonds; emphasis on work, education, and achievement; religious values; and a humanistic belief system that stresses concern for others and spontaneous interactions (Allen, 1986; Greene, 1994).

#### **Latino Americans**

Latinos represent approximately 22.4 million people, or about 9% of the U.S. population. They are projected to be one of the largest minority groups by the turn of the century (U.S. Bureau of the Census,

1991). Mexicans, Puerto Ricans, and Cubans constitute the three largest Latino ethnic groups living in the U.S. mainland. They differ substantially in terms of immigration history and number of generations in the United States. Mexican Americans have been in the United States for 150 years and account for 60% of the Latino population. The original population did not enter the United States as immigrants; rather, they were conquered during the Mexican American War. As a result of the acquisition of their land during the Spanish American War, Puerto Ricans share a similar history of domination. Nevertheless, large waves of Puerto Rican migration to the United States began only 45 years ago. This group came primarily to escape high unemployment rates. Today, Puerto Ricans account for 15% of Latinos. Finally, Cubans, the most recent immigrants, make up 5% of the Latino population. The "first wave" of Cuban immigrants were predominately white, educated professionals who arrived in Florida between 1959 and 1965. As political refugees, the Cubans received economic assistance from the federal government. By the 1980s, U.S. immigration laws were stricter and the economy was declining. Consequently, subsequent waves of nonwhite, less educated Cuban immigrants were met with hostility (Ginorio, Gutierrez, & Cause, 1995; Portes & Truelove, 1987).

These differing migration histories contribute to demographic variations between ethnic groups. For example, Cuban Americans are older than Latinos as a group (median age 40 vs. 26, respectively; U.S. Bureau of the Census, 1993). They also tend to be more economically advantaged. For example, in one nationally representative sample, Cuban American families were more likely than Puerto Rican and Mexican American families to report two incomes and employment in managerial or professional occupations. Despite the economic success of some Cubans, Latino families are two to five times more likely than Anglo families to live in poverty (Jasinski, 1996; Kaufman Kantor et al., 1994). Nonetheless, Latinos maintain strong social support networks and multigenerational families characterized by loyalty and honor (Ginorio et al., 1995).

### **Asian Americans**

Asian/Pacific Island Americans represent 2.9% (7.27 million) of the U.S. population. Three predominant Asian groups reside in the United States. The first group can trace its origins to mainland Asiatic

culture (Chinese, Vietnamese, Japanese, and Koreans); the second group came from Southeast Asia (Filipinos, Indonesians, Malaysians, Cambodians, and Laotians); and the third group, Pacific Islanders (Hawaiians, Samoans, and Guamanians), are considered "natives" rather than immigrants (Okamura, Heras, & Wong-Kerberg, 1995; Trask, 1990).

The experience of Asian American groups differs greatly by immigration and generational status. Immigrant-descendent families, such as Chinese, Japanese, and Korean Americans, can trace four or more generations in the United States. In general, these groups are highly acculturated; that is, they have adopted the norms and behaviors of U.S. society. Immigrant American families, in which the parents are foreign born and the children are American born, sometimes experience cultural and generational conflicts as they attempt to manage both traditional and new norms and values. Despite this challenge, these families are often able to pool their resources and achieve relatively high levels of educational and economic success (Okamura et al., 1995). Because of the prosperity of these two-family constellations, Asians have been dubbed "model minorities." This stereotype minimizes the poverty that exists among Asian Americans, which is almost twice the rate for Anglos, with recently arrived immigrant/refugee families being most impoverished (U.S. Bureau of the Census, 1993). Their economic instability is often coupled with other difficulties, such as language barriers, lack of education, unsafe neighborhoods, and anti-Asian violence. Despite their diverse backgrounds, as a group Asians emphasize family loyalty, responsibility, respect, and cooperation (Chen & True, 1994; Stevenson, 1992).

### **American Indians**

The indigenous native peoples of North America are referred to as American Indians. The 2 million American Indians in the United States, which represent more than 500 different tribes, account for 0.8% of the U.S. population. Because of increased willingness to acknowledge Indian ancestry, interracial marriages, and high birth rates, this population has grown by almost 600,000 in the last decade. Almost every tribe was subjected to forced removal from ancestral homelands, brutal colonization, confinement to reservations, and pressure to assimilate into European American society. Currently, one third live on federal reservations; the remainder live in either rural

or urban settings. Migration between the two locations is common (LaFromboise, Berman, & Sohi, 1994; U.S. Bureau of the Census, 1991).

As a consequence of the high unemployment rate—over 80% in some communities—American Indians experience substantial rates of poverty (Bachman, 1992; Indian Health Service, 1989; LaFromboise et al., 1994; LaFromboise, Choney, James, & Running Wolf, 1995). Death at an early age is also common. More than one third of all American Indian deaths involve people under age 45—three times the rate of the general population. This high death rate, primarily because of suicide, homicide, and accidents, may account for the youthfulness of this population (median age 22.6 years). The prevalence of alcoholism, which is 3.8 times higher for American Indians than for other ethnic groups (Asbury, 1993), is a major contributor to many of these deaths. For example, alcohol is a factor in 90% of American Indian suicides (Johnson, 1994). Despite great adversity, many American Indian families, such as in the Hopi of Northern Arizona, maintain traditional values and customs, including reverence to elders, cooperation, and group cohesion (Wasinger, 1993).

In conclusion, a great deal of cultural, linguistic, historic, and geographic diversity exists both between and within ethnic minority groups. As a group, however, they are disproportionately more likely than Anglo Americans to be youthful and impoverished. Nevertheless, these groups have developed cultural strengths (e.g., cooperation) and strong kinship bonds, which may reduce the likelihood of battering (Cazenave & Straus, 1990).

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### **Incidence of Partner Violence**

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Ethnic differences and prevalence rates of partner assault are best estimated by using large national probability samples (Hampton, Gelles, & Harrop, 1989), such as the First (Straus et al., 1980) and Second National Family Violence Surveys (Straus & Gelles, 1986), which are composed of national probability samples of 2,143 and 6,002 households, respectively. Clinical and convenience samples can provide valuable information as well. Thus, this chapter reviews studies that use a variety of samples. The majority of the literature focuses on African Americans and Latinos. Although the absence of

research on Asian Americans and American Indians is discernible, the research in these areas is discussed when available. Demographic contributors to violence, such as social class, age, and husband's occupational and employment status, are considered. In addition, cultural factors, including level of acculturation, alcohol abuse, and normative approval of violence; are other risk markers addressed. Finally, limitations of the research are discussed.

### **Are Ethnic Minorities More Violent Than Anglo Americans?**

*African Americans.* Researchers have found contradictory results in rates of partner violence among African Americans when non-representative samples were used. Using case records of partner violence victims, Fagan et al. (1983) found that white batterers, compared with their black counterparts, were more violent toward both family members and nonfamily members. In contrast, a multiethnic (black, Mexican American, white) community sample of Texas residents revealed that black women were three times more likely than Anglo women to beat or be beaten by a partner (Neff, Holamon, & Schluter, 1995). Other studies have not found ethnic differences in rates of partner assault in samples of battered women who were incarcerated (Roundtree, Parker, Edwards, & Teddlie, 1982) or residents of a women's shelter (O'Keefe, 1994).

Large national probability studies, however, have consistently revealed a higher rate of partner violence among African Americans, compared with Anglo Americans. For example, in the First National Family Violence Survey (Straus et al., 1980), the overall rate of black husband-to-wife abuse was four times higher than white husband-to-wife abuse (113 vs. 30 per 1,000, respectively). The same study revealed that African American wives were twice as likely as Anglo wives to engage in severe acts of violence against their husbands (76 vs. 41 per 1,000, respectively). A decade later, a similar pattern of racial differences emerged in the Second National Family Violence Survey (Hampton & Gelles, 1994; Straus & Gelles, 1986). When Hampton and associates (1989) compared violence rates from these two national studies, battering of black wives decreased by almost half (42%). Despite this decline, African Americans were still found to be more violent than their Anglo counterparts.

National probability studies have been criticized for excluding family constellations with high representations of ethnic minorities, such as single-parent families and families with children under age 3 (Kanuha, 1994). When these family types were included in the National Survey of Families and Households, however, racial differences remained. African Americans were almost twice as likely as Anglos to report physical violence toward their partners (e.g., hitting, shoving, throwing objects; Sorenson, Upchurch, & Shen, 1996).

*Latino Americans.* Researchers using community (Neff et al., 1995), clinical (Mirande & Perez, 1987), and shelter samples (Torres, 1991) have found no differences in rates of partner assaults between Mexican Americans and Anglos. National probability studies, however, have revealed contradictory results. Latinos in the Second Family Violence Survey reported a higher rate of partner abuse than Anglo couples (23% vs. 15%, respectively; Straus & Smith, 1990b), whereas Sorenson and colleagues (1996) discovered that Latinos were less violent than Anglos, as measured by a modified version of the Conflict Tactics Scale (Straus, 1979).

These discrepant findings can be attributed to two major research limitations. By regarding Latinos as a homogenous group and by limiting studies to English-speaking participants, important ethnic group differences are often obscured. Kaufman Kantor and colleagues (1994) avoided these problems by conducting face-to-face bilingual (Spanish-English) interviews with a national probability sample, including an oversample of Latinos. Large ethnic group differences emerged, with Puerto Rican husbands (20.4%) being approximately 2 times more likely than Anglo husbands (9.9%) and 10 times more likely than Cuban husbands (2.5%) to assault their wives.

*Asian Americans.* To date, no nationally representative studies of Asian American partner violence have been conducted (Sorenson et al., 1996). Instead, much of the research has relied on case histories (Eng, 1995), clinical samples (Chan, 1987), anecdotal reports (Lai, 1986), and newspaper accounts (Chin, 1994). Consequently, estimates of wife assault have varied widely. For instance, one study that used focus groups composed of 6 to 10 Chinese women estimated that between 20% and 30% of Chinese husbands hit their wives (Ho, 1990). In another study, Song (1986) found that 60% of her non-

random sample of 150 immigrant Korean women were battered. Although it is not possible to draw conclusions about ethnic differences on the basis of these limited studies, interviews with victims (Ho, 1990) and community leaders (Huisman, 1996) indicate that battering is a serious problem in this ethnic group as well.

*American Indians.* No accurate lifetime prevalence rates of partner violence within or between American Indian groups are known (Chester, Robin, Koss, Lopez, & Goldman, 1994). Estimates of battering have ranged from 50% (Wolk, 1982) to 80% (Chapin, 1990). Many of these findings, however, are based on anecdotal reports (e.g., Allen, 1986) and samples as small as 20 respondents (Verlarde-Castillo, 1992). Using the Second National Family Violence Survey (Straus & Gelles, 1990a), Bachman (1992) found that American Indian couples were significantly more violent than their Anglo counterparts (7.2 vs. 5.3 per 100 couples). The relatively small number of American Indian families surveyed ( $N = 204$ ) and the failure to assess tribal affiliation, however, make it difficult to draw conclusions about ethnic differences.

To summarize, research using nonrepresentative samples, such as shelter residents, has found no racial differences in rates of partner violence among African American, Latino, and Anglo battered women (Gondolf, Fisher, & McFerron, 1988). Some community samples (Neff et al., 1995) and several large nationally representative samples have indicated that African Americans (Sorenson et al., 1996; Straus & Gelles, 1986) and American Indians (Bachman, 1992) reported higher rates of partner violence than Anglo Americans. Findings for Latino Americans are contradictory, with national studies finding both higher (Straus & Smith, 1990b) and lower rates of physical violence (Sorenson et al., 1996) for Latinos, compared with Anglos. The failure to consider ethnic group differences in much of the research on Latino Americans may account for these conflicting findings. When Latino ethnic group differences were considered, Puerto Rican husbands reported the highest rate of wife assault, and Cuban husbands reported the lowest rate in one study (Kaufman Kantor et al., 1994). No accurate estimates of Asian American partner assaults have been made, although evidence from focus groups and community activists suggests that violence is also a concern in this population (Ho, 1990; Huisman, 1996).

## **What Factors Contribute to These Ethnic Group Differences?**

Are ethnic minorities more violent? This question is far too simplistic. A structural explanation is necessary for understanding the higher rates of partner violence in these populations; that is, ethnic minorities are disadvantaged in a society in which race and ethnicity determine access to economic resources. Lack of opportunities and societal inequalities create stress, which in turn may increase the risk of violence (Gelles & Straus, 1988; Jasinski, 1996). Economic marginalization also shapes the culture of the family. For example, less acculturated individuals are likely to be economically marginalized because they lack access to education and job opportunities. Poverty also increases the probability of drinking to excess and endorsing more approving attitudes toward violence (Hampton et al., 1989; Kaufman Kantor et al., 1994; Kaufman Kantor & Straus, 1987). Stated in another way, ethnic minorities are not inherently more violent than Anglo Americans; rather, they are more likely than Anglos to be over-represented in demographic categories that are at greater risk for physical violence. In many instances, racial differences in rates of partner violence disappear when age, social class, and husband's occupational and employment status are taken into account (Straus et al., 1980). The remaining ethnic differences can often be explained by level of acculturation, alcohol abuse, and the normative approval of violence (Cazenave & Straus, 1990; Kaufman Kantor et al., 1994). The following section reviews the research in these areas.

### ***Demographic Factors***

*Age.* Younger age—specifically, being under age 30—is highly correlated with partner violence (Straus & Gelles, 1990a). Research based on the Second National Family Violence Survey has consistently found that younger white (Suitor et al., 1990), African American (Hampton & Gelles, 1994), and American Indian couples (Bachman, 1992) were more violent than their older counterparts. The same pattern appears to be present in Asian American couples. Both anecdotal accounts (Yoshihama, Parekh, & Boyington, 1991) and empirical studies (Lane & Gwartney-Gibbs, 1985) have documented dating aggression among Asian American young adults.

When racial differences were examined, Straus and Smith (1990b) found that Latino couples did not have a higher probability of partner violence than Anglos when age was considered; that is, youthfulness, rather than ethnicity, accounted for the differences in rates of battering between Latinos and Anglos. Given the youthfulness of ethnic minority groups, the association between younger age and partner violence is likely to exist for African Americans and American Indians as well.

*Social Class.* Ethnic differences in rates of partner violence often disappear when social class is taken into account. Using the First National Family Violence Survey (Straus et al., 1980), Cazenave and Straus (1990) found that African Americans experienced *less* partner violence than Anglos in three out of four income categories (the two highest and the lowest income group). Higher rates of partner assaults were only reported by African American respondents in the \$6,000 to \$11,999 income range. However, 40% of black respondents in this sample were in this income category. Similarly, in the Second National Family Violence Survey, Straus and Smith (1990b) found that lower income and urban residence accounted for the differences in rates of partner violence between Latinos and Anglo Americans.

Although income and partner violence were not correlated among American Indians in one national study, a significant association was found between these two variables for the entire sample. Given that a higher percentage of American Indians was represented in the lower income levels, the link between social class and assault may still exist (Bachman, 1992). Poverty also has been linked to partner violence among Asian focus group participants, with Chinese Americans attributing wife battering to the poor, rural, less educated members of their community (Ho, 1990).

*Husband's Occupational and Employment Status.* Nationally representative studies have revealed a link between husband's occupational and employment status and partner violence. Specifically, African American men employed in blue-collar occupations reported more violence than their black professional counterparts (13% vs. 7%, respectively; Cazenave & Straus, 1990). Additionally, black families in which the husbands were unemployed reported higher rates of wife assault than black families with employed husbands (Hampton & Gelles, 1994). A similar association is expected to exist for

American Indians. Although Bachman (1992) did not empirically test this link, more American Indian than Anglo couples were employed in blue-collar occupations, a group that reported significantly higher rates of partner abuse. Media accounts and interviews have associated wife battering with limited employment opportunities among Chinese immigrant husbands as well (Chin, 1994). There is no way of knowing, however, what other factors may be acting in conjunction with husband's unemployment to account for these findings. Like the aforementioned demographic factors, when employment status was taken into consideration, racial differences disappeared. For example, one study found that husband's unemployment, rather than ethnicity, was the strongest predictor of partner violence when Latinos and Anglos were compared (Kaufman Kantor et al., 1994).

### ***Cultural Factors***

In some instances, even when social class and occupational status were considered, the rate of partner violence continued to be higher for African Americans than for Anglo Americans (e.g. Neff, et al., 1995). For instance, in a community sample, more middle-class African American women (46%) were battered than their middle-class Anglo counterparts (27%; Lockhart, 1987). Similarly, results from a national study revealed that controlling for husband's occupation did not always eliminate racial differences. In this study, African American men employed in white-collar occupations were still more abusive than Anglo professionals (7% vs. 3%, respectively; Cazenave & Straus, 1990). Given the previous discussion of demographic risk markers, these findings seem contrary to expectation. Cazenave and Straus (1990) concluded that "there are some effects of racial oppression which are independent of income and may cause marital stress and tensions that may erupt in violence" (p. 336). Therefore, escaping poverty may not totally eliminate the risk of partner violence for ethnic minorities because their higher economic status is often precarious and potentially lost with slight economic changes. This financial uncertainty may lead to stress, which in turn may contribute to battering (Lockhart, 1987). Empirical research supports this association. For example, Bachman (1992) found that as *stress*, defined as nervousness and the inability to cope, increased, the probability of American Indian couple violence escalated. Wife assault also has been empirically linked to alcohol abuse and normative approval of violence.

Stressors such as poverty and lack of job opportunities place ethnic minorities at greater risk for heavy drinking and possibly greater tolerance of violence. These factors, along with level of acculturation, interact to contribute to increased levels of wife abuse among ethnic minorities (Kaufman Kantor, 1990; Kaufman Kantor et al., 1994). The influence of acculturation, alcohol abuse, and normative approval of violence on partner violence rates are discussed below.

*Level of Acculturation.* Defined as the extent to which immigrant groups take on the norms and behavioral patterns of the host society (Gordon, 1964), level of acculturation has been investigated as a contributor to wife assaults. Results have been contradictory, with both high (Jasinski, 1996) and low levels of acculturation (Okamura et al., 1995) being linked to partner violence. Other studies have found no association between acculturation and partner violence (e.g., Perilla, Bakeman, & Norris, 1994).

*High Acculturation as a Predictor of Violence.* The majority of the empirical research conducted on acculturation has focused on Latino Americans. In one study, a greater level of acculturation, as measured by comfort with the English language, was associated with increased levels of partner violence. When economic factors were considered, however, such as poverty and husband's employment status, English language preference was no longer a significant predictor of wife assault (Jasinski, 1996). When country of origin was used as a measure of acculturation, which is highly correlated with English preference, important ethnic group differences were revealed. Specifically, Kaufman Kantor et al. (1994) found that being born in the United States was associated with increased risk for wife assault among Mexican American and Puerto Rican American husbands. A study conducted by Sorenson and Telles (1991) revealed a similar pattern among Latinos in a Los Angeles community sample, with Mexican Americans who were born in the United States reporting higher rates of hitting or throwing things at their partners (30.9%) than both Mexican Americans who were born in Mexico and Anglos (20% vs. 21.6%, respectively).

Level of acculturation as it relates to black partner violence has not been investigated empirically. However, researchers have hypothesized a link between *racial identity*, defined as cultural pride and commitment to the black community, and intimate assaults. In

particular, African Americans with lower racial identity are expected to be more violent (Myers, 1990; Oliver, 1989). In Taylor and Zhang's (1990) interviews of 96 black couples, maritally distressed spouses scored lower than nondistressed couples on black cultural identity. Although physical abuse was not measured directly, partner violence and marital distress have been theoretically and empirically linked (e.g., Miller, Lefcourt, Holmes, Ware, & Saleh, 1986).

Authors assert that intimate violence toward American Indian women can be traced to the introduction of alcohol, Christianity, and the European hierarchal family structure into Indian cultures (e.g., Allen, 1986). Research that establishes the link between increased abuse as a result of modernization and acculturation, however, has yet to be conducted (Chester et al., 1994).

What accounts for these findings? One explanation suggests that as Latinos become more Americanized, the American Dream of greater economic and educational opportunities also may be desired. When discrimination blocks these efforts, feelings of frustration and hostility could potentially be acted out in the form of wife assault (Jasinski, 1996). This may hold true for other ethnic groups as well. Additionally, as ethnic minorities become more acculturated, cultural values and family strengths (e.g., communalism, religiosity, fear of community disapproval) may be relinquished. Consequently, social controls, which might have curtailed partner violence, are no longer in place (Kaufman Kantor et al., 1994).

*Low Acculturation as a Predictor of Violence.* Evidence also suggests that less acculturated members of ethnic groups are more violent. For example, Jasinski (1996) found that, among Puerto Ricans, partner violence was associated with being born outside the United States. She hypothesized that, in their efforts to assimilate, non-U.S.-born Latinos may experience conflict between their culture of origin and Anglo culture. They also may experience economic marginalization because of language and educational barriers. The stress associated with making this adjustment may lead to violence.

Similar conclusions have been drawn for Asian Americans. According to anecdotal research (Dunwoody, 1982; Lai, 1986; Rimonte, 1989), case studies (Eng, 1995; Okamura et al., 1995), and legal accounts (Anderson, 1993; Jang, Lee, & Morello-Frosch, 1990), Asian immigrants and refugee families experience more partner violence than their U.S.-born counterparts. Cultural isolation, coupled with

the lack of educational and job opportunities, limited English-speaking skills, and poverty, are hypothesized to contribute to the increased risk of violence (Chen & True, 1994). Asian women who enter the United States illegally or through "mail order" marriages are also potentially more vulnerable to victimization. Substantial documentation of abuse, in the form of affidavits from police, medical personnel, and social service agencies, may be required from these immigrant women in order to receive assistance. Without proof, which is difficult to obtain in most cases, victims risk deportation by fleeing their violent husbands (Anderson, 1993).<sup>1</sup>

The ethnic groups under investigation, the myriad of ways acculturation has been defined, and the failure to consider the confounding effects of socioeconomic status may partially account for these conflicting results (Kaufman Kantor et al., 1994). As Jasinski (1996) asserts, however, under particular circumstances both high and low acculturation could be associated with partner violence:

On the one hand, more acculturated individuals (as measured by language preference and generational status) may be faced with the strain of being led to believe that hard work will result in success while experiencing first hand the effects of discrimination and prejudice.  
(p. 191)

Alternatively, a "lack of integration into the economic structure of the U.S. could interfere with chances for upward mobility and create economic stresses which could increase the risk for spousal violence" (p. 107). More empirical research needs to be conducted before the association between acculturation and violence can be understood. Future investigations should include other dimensions of acculturation, such as feelings of cultural marginality and discrimination from the dominant Anglo society (Portes, 1984).

*Alcohol Abuse.* The linkage between drinking and wife beating is not a problem solely of poor, ethnic minorities. Kaufman Kantor and Straus (1987) found that, regardless of race, wife battering was seven times greater among binge drinking, blue-collar men who approved of wife slapping. Social isolation, economic marginalization, and a host of other stressors place segments of the African American, Latino (Kaufman Kantor, 1990), and American Indian (Asbury, 1993) communities at increased risk for heavy drinking, therefore making them

more susceptible to alcohol-related wife assaults (Hampton, 1987). Research using the 1985 National Family Violence Survey (Kaufman Kantor, 1990) has linked high-volume drinking by Latino men to increased rates of partner violence. Specifically, Latinas with binge-drinking husbands were more than 10 times more likely to be assaulted than those with low-to moderate-drinking husbands. When ethnic group differences were investigated in the 1992 National Alcohol and Family Violence Survey, heavy-drinking Puerto Rican husbands were five times more likely than their nondrinking counterparts to hit their wives (Kaufman Kantor, in press). Similarly, the husband's heavy drinking was also found to be associated with partner violence among African Americans (Kaufman Kantor, 1990) and American Indians (Bachman, 1992). Researchers have not yet explored the linkage between drinking and Asian American violence.

*Normative Approval of Violence.* The endorsement of cultural norms sanctioning partner assaults, often measured by the item "Are there situations that you can imagine in which you would approve of a husband slapping his wife?" (Owens & Straus, 1975), has been linked to increased levels of partner violence. Using data from the First National Family Violence Survey, Straus and colleagues (1980) found that African Americans, when compared with whites, were more approving of both husband and wife slapping. It has been hypothesized, however, that economic inequalities contribute to more approving attitudes toward intimate violence. According to Oliver (1989), when traditional wage earner roles are unavailable, working-class black men take on alternative roles, which often emphasize physical violence and the sexual exploitation of women. Because black women have historically contributed economically to the household, they may be less tolerant of violence. Consequently, conflict may erupt in these relationships (Hampton et al., 1989; Ucko, 1994). Some empirical evidence supports the theory that social class accounts for the higher percentage of normative approval of violence by African Americans. Cazenave and Straus (1990) found that, when income and occupational status were taken into consideration, differences in approval of violence between blacks and whites disappeared.

The male-dominated Latino family structure and *machismo*, a cultural script characterized by sexual prowess and aggression, have been theoretically linked to more approving attitudes toward violence (Perilla et al., 1994; Zambrano, 1985). When tested empirically,

studies have revealed that the endorsement of violent norms, regardless of ethnicity and income level, more than doubled the odds of husband-to-wife assault. Latino couples, however, were not significantly more male-dominated or accepting of violence than Anglo American couples (Jasinski, 1996; Kaufman Kantor et al., 1994).

Similarly, hierarchal family structures and rigid gender roles that emphasize male dominance and female submissiveness have been theoretically linked to battering among Asians (Ho, 1990; Rimonte, 1989). Results from focus group interviews imply ethnic group differences in cultural approval of violence. For example, on the basis of statements such as "Physical abuse of a wife once in a while is OK," Ho (1990) concluded that the Vietnamese, Khmer, and Laotians were more tolerant of abuse than the Chinese.

In conclusion, level of acculturation, alcohol abuse, and normative approval of violence do not occur in isolation (Perilla et al., 1994). Future research should consider factors that mediate the aforementioned variables and partner violence, such as work stress (Jasinski, Asdigian, & Kaufman Kantor, in press), relationship quality, and depression (Julian & McKenry, 1993).

### **What Are the Research Limitations?**

Much of the information about ethnic minority partner violence is derived from anecdotal accounts, self-report surveys, incidence reports from public sources (e.g., FBI Uniform Crime Reports), and survey-based research. Although these sources provide valuable information, they can be biased in important ways. Anecdotal accounts, such as those collected by battered women's programs, provide excellent first-person accounts. They are often subjective, however, and based on small samples (Burns, 1986; White, 1984; Zambrano, 1985). Furthermore, they often represent the most severe cases of battering. Although self-administered surveys are more objective, most have failed to include illiterate participants and samples that are diverse enough to examine racial/ethnic differences. Despite the larger, more diverse samples used in government-sponsored reports, they frequently rely on public sources that are overwhelmingly used by minorities and the poor, such as the police and community health clinics (Kanuha, 1994). Large national probability studies have corrected these problems by including more representative samples and by oversampling African Americans (e.g., Straus & Gelles, 1986) and Latinos (e.g.,

Kaufman Kantor et al., 1994). Nevertheless, many have failed to include Asians, American Indians, and other groups with high representations of ethnic minorities, such as single-parent families, cohabiting couples, and families with children under age 3. Furthermore, the reliance on telephone interviews has resulted in an underrepresentation of non-English-speaking participants (Asbury, 1987; Lockhart, 1987).

The existing research is limited in other important ways as well. In particular, "ethnic lumping" has been a problem (Fontes, in press). In one type of ethnic lumping, for example, research on Latino Americans often assumes that Mexican Americans represent the experience of other Latino groups. A second type of ethnic lumping entails collapsing diverse ethnic groups—for instance, Japanese, Chinese, and Koreans—into one "Asian" group without consideration for their diverse experiences. Finally, much of the research is race comparative and relies on psychometric rating scales that are rarely normed by using diverse populations (Sorenson et al., 1996).

In summary, at first glance, partner violence appears to be more prevalent among African Americans, American Indians, and some Latino ethnic groups than among Anglos. On closer inspection, these ethnic differences often disappear when age, social class, and husband's employment status are taken into account. When ethnic differences remain, they may be explained by level of acculturation, binge drinking, and normative approval of violence. Despite the growing knowledge of violence in these groups, more empirical research needs to be conducted, particularly with Asian Americans and American Indians. Future research should compare violent ethnic minorities with their nonviolent counterparts. Also, research needs to be culturally sensitive, which includes using the participants' preferred languages, having minority researchers help design and conduct studies, and incorporating measures of acculturation and racial identity (Fontes, in press; Root, 1996; Sorenson et al., 1996).

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### **Therapeutic Implications**

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The available data on ethnic minority partner violence need to be used in developing culturally appropriate and effective intervention strategies. This chapter takes the position that "success of the therapy

depends less on the identity into which therapists are born than on their skills, knowledge, cultural competency, and genuine comfort with people of diverse cultures" (Fontes, 1995, p. 261). With this said, the following section focuses on three therapeutic issues: (a) obstacles that impede help seeking by battered women, (b) hallmarks of a culturally appropriate assessment, and (c) culture-specific treatment recommendations.

### **What Barriers Impede Help Seeking?**

Scant empirical research has examined the extent and nature of help-seeking efforts by battered minority women. Research using both national probability (West, Jasinski, & Kaufman Kantor, 1997) and shelter samples (Gondolf et al., 1988; O'Keefe, 1994) revealed that Latinas reported receiving less help from family, friends, clergy, and social service agencies than black and Anglo women. Taken together, these findings point to a pattern of service underuse. According to the Latino mental health literature, cultural and institutional barriers, rather than lack of desire for services, impede minority help-seeking efforts (Rodriguez & O'Donnell, 1995). Community activists further argue that stereotypes concerning ethnic minority partner violence act as an additional obstacle (Richie & Kanuha, 1993). The following sections review the research on each of these barriers.

*Cultural Barriers.* Cultural barriers to help seeking consist of "sub-cultural values and beliefs that predispose those who identify with them to avoid use of specialty mental health" (Rodriguez & O'Donnell, 1995, p. 170). These barriers may take different forms for various ethnic groups. African Americans' strong religious beliefs that emphasize faith and prayers (Abney & Priest, 1995); Puerto Ricans' *cultural fatalism*, or belief that certain negative life events happen regardless of efforts to prevent them (Comas-Diaz, 1995); Asians' fear of dishonor and "losing face" (Ho, 1990); and American Indians' emphasis on endurance of misfortune may contribute to reluctance by assaulted women to seek assistance (LaFromboise et al., 1994). This is not to imply that some cultural beliefs are necessarily maladaptive. In fact, these tenets may have helped minority families survive great adversity. They become cultural barriers when they impede help seeking through formal or informal avenues. The extent to which

cultural beliefs inhibit help seeking is governed by a combination of acculturation level, language skills, educational attainment, and socioeconomic status. For example, greater acculturated, educated, and second- and third-generation Latina and Asian battered women may be more familiar with, and accepting of, mental health services (Kanuha, 1994).

*Institutional Barriers.* Institutional barriers are characteristics of the agency delivery system that make it difficult for ethnic minorities to gain access to services (Rodriguez & O'Donnell, 1995). For instance, agencies may lack translators and bicultural/bilingual professionals, reading material in the client's native language, or ethnically sensitive treatment programs. Other structural barriers include rules against treating non-English-speaking or immigrant clients, geographic distance from minority communities, prohibitive fee structures, and inflexible or inconvenient hours of operation (Bachman, 1992; Chester et al., 1994; Comas-Diaz, 1995; Eng, 1995; Fontes, 1995; Williams, 1992). A political ideology that is contrary to community beliefs may present a challenge to help seeking as well. For example, shelters that discourage the involvement of men of color or agencies that attribute battering solely to sexism, rather than consider other forms of oppression such as racism and class privilege, may be perceived as unlikely sources of help (Crenshaw, 1994). Williams (1994) found evidence of the aforementioned institutional barriers in a national survey of 142 domestic partner violence treatment programs. In particular, program coordinators admitted that more than one half (55%) of the agencies were located in Anglo neighborhoods, 15% did not provide training on ethnic minority issues, 70% did not have manuals or literature concerning culturally sensitive practice methods, and 61% did not have bilingual counselors. When these institutional barriers were removed, community agencies reported an increase in ethnic minority clients (Rimonte, 1989).

*Racial Stereotypes.* Racial stereotypes have been hypothesized to pose barriers to help seeking for numerous reasons. Specifically, if legal and social service agency workers characterize people of color as inherently violent, they may view intervention efforts as futile (Hawkins, 1987). Stereotypes may also lead professionals to underestimate the impact of abuse on minority women or to overestimate

the ability of these women to cope (Brice-Baker, 1994). Ammons (1995) concluded that images of black women as "either very strong or somehow inherently bad, but never weak or passive" (p. 1007) have contributed to battered black women receiving less help from the criminal justice system.

Furthermore, the internalization of stereotypes (e.g., black women as "emasculating matriarchs," Latinas as "hot-blooded") may contribute to some women of color not perceiving themselves as victims or in less need of help (Brice-Baker, 1994; Rasche, 1988). The fear of reinforcing stereotypes, coupled with community and family loyalty, may encourage other women to hide their abuse. For example, one battered Korean American woman feared that her coworkers would believe that "there was something wrong with Korean people" if they learned of her abuse (Richie & Kanuha, 1993 p. 291).

### **What Are the Hallmarks of a Culturally Appropriate Assessment?**

A culturally appropriate assessment should include the same demographic and background information that would be gathered from any other client or family (e.g., history of substance abuse, mental illness). Therapists should also explore the following areas relevant to minorities (Abney & Priest, 1995; Chan & Leong, 1994; Comas-Diaz, 1995; LaFromboise et al., 1994; Okamura et al., 1995):

*Race/Ethnicity.* Ethnic identities of all family members should be carefully assessed. It would be a mistake to assume that every visibly black client identifies as African American. These clients may identify as West Indian or African-Caribbean. Among Asians, the father may be Chinese, the mother Laotian, and the children might define themselves as Chinese-Laotian Americans. The ethnic identity of Latinos and American Indians should also be considered. It is best to ask the client how he or she identifies.

*Economic Status.* Objective measures of economic status should be obtained (e.g., amount and source of income, ability to meet basic needs). Subjective measures should be considered as well. For example, how is the family's economic status perceived in comparison with others in the neighborhood or the extended family?

*Family Structure.* Clarifying boundaries and family roles (e.g., wage earner, child caretaker) will provide information about family power structure. Additional information about the family support network can be gathered by asking questions about, for example, the location and amount of contact with relatives and economic support provided to or obtained from family members.

*Level of Acculturation.* Information about acculturation can be gathered from language preference and immigration history:

- Several languages may be spoken or comprehended. Therapists should carefully assess preferred language among ethnic groups. For example, which language does the client prefer to speak at work and home? Awareness of language nuances is important as well; that is, *battering* may have a different meaning, depending on the language. Therapists should make sure that communication is clear.
- Premigration and postmigration history of the family will give clues about significant stressors. Important areas to explore include loss of property and homeland or significant people (through death and separation); changes in status (e.g., inability to obtain employment); and effects of culture shock and displacement.

*Prior Exposure to Violence.* Personal history of incest and child physical abuse (Lujan, DeBruyn, May, & Bird, 1989; West & Williams, 1997) should be assessed. It is also important to evaluate family history of trauma (e.g., lynchings, war atrocities) for several reasons:

- Prior exposure to violence, such as living in high-crime areas, may heighten the effects of a trauma, including partner violence (Allen, 1996).
- Interviews about partner violence may trigger memories of traumatic historic events (e.g., a Cambodian being interviewed about wife assault may remember the interrogations she faced in resettlement camps; Fontes, in press).
- Second and third generations may minimize partner abuse when they compare it with previous family and historic traumas (Yoshihama et al., 1991).

*Suicide Potentiality.* Battered Asian American (Crites, 1990) and black women (Stark & Flitcraft, 1995) are at increased risk for suicide attempts. It is wise to conduct a suicide assessment with clients from all ethnic backgrounds.

*Cultural Coping Strategies.* Therapists should assess family strengths, as well as past and current family coping strategies. These could include family rituals or religious practices, such as visiting healers (Comas-Diaz, 1995) or sweat lodges (Williams & Ellison, 1996).

### **What Are Culture-Specific Treatment Recommendations?**

An effective treatment program must take into account the specific culture, beliefs, and traditions of the treated population. For example, an "Afrocentric perspective" may be more appropriate for African Americans (a worldview framed by African American historic traditions of racial pride and respect for family and community; Abney & Priest, 1995, pp. 13-20; Campbell, 1993).

Although many treatment recommendations for ethnic populations are based on clinical and anecdotal accounts (Eng, 1995; Ho, 1990; White, 1994; Zambrano, 1985), they may be beneficial for some minority clients. The following sections review these recommendations:

#### ***Treatment of Female Victims***

Determining the appropriate therapeutic format is important. An ethnic minority woman who perceives someone outside her community as more objective and able to maintain confidentiality may prefer an ethnically different therapist, whereas other minority women may believe that only a person of similar ethnic background can understand their issues. These women may prefer community resources (White, 1994).

Support groups can reduce the level of isolation and provide social support if a woman experiences community ostracism. Shame and fear of bringing humiliation on the family, however, may make this a less effective milieu for some ethnic groups, such as Southeast Asians (Kanuha, 1987). The fear of reinforcing stereotypes about minority men or concerns about revealing family or community affairs to outsiders may make racially mixed groups uncomfortable for some Latinas (Zambrano, 1985) or black women (White, 1994). Mental health professionals should discuss these concerns in detail with clients before deciding on the appropriate therapeutic format.

With any client, establishing rapport is important. Providing legal and employment information for undocumented women without di-

rectly inquiring about the clients' immigration status is one method of building trust (Zambrano, 1985). Depending on the level of acculturation and assimilation, indirect questioning, use of metaphor, or third-party references may be more effective; for example, some Asian women respond better when asked about ways to help a fictitious friend who has been victimized (Huisman, 1996; Kanuha, 1987). Less acculturated or immigrant women may need more advocacy and help negotiating the system. They may prefer a hierarchical relationship, with the therapist being very directive, rather than asking open-ended questions (Franco, 1996; Rimonte, 1989). It is recommended that therapists take their lead from the clients.

Therapists are encouraged to discuss discrimination when appropriate. This discussion can be facilitated by pointing out the similarities and differences between institutional and individual abuse. For instance, it might be beneficial to explore ways the client experienced domination, isolation, and threats as a woman, minority, and victim of partner violence (Crites, 1990; NiCarthy, 1982). Addressing cultural barriers that impede help seeking might also be advantageous. One goal is to reframe cultural beliefs in a way that empowers battered women. For example, the therapist can reassure the client that revealing the abuse and seeking help are not a "loss of face" or betrayal to the ethnic community and that, instead, they can be acts of courage and means of improving the family and community (Dao, 1988; Dunwoody, 1982; Ho, 1990). Ultimately, therapists should respect a woman's right to choose which aspects of her culture to embrace, rather than force her to adhere to dominant cultural expectations.

Therapists are also encouraged to provide a welcoming environment for ethnic minority clients and their children. A visible display of books, artwork, and toys depicting characters of different racial backgrounds can convey openness (Coley & Beckett, 1988). If shelter services are necessary, culturally sensitive accommodation should be sought (e.g., those with bilingual counselors, ethnic foods, and hair care products; Sorenson et al., 1996). Cultural resources also can be used if the woman prefers. Some programs for American Indian battered women are now integrating traditional herbs, foods, meditation, and ceremonies to complement psychoeducational therapy (Kanuha, 1994). Additional options include consulting with extended family members, community elders, or healers (Ho, 1990). Translators have been recommended as well. If possible, children should not be asked to function in this role. Therapists should be aware of confidentiality and power dynamics if the translator is an influential community

member (Huisman, 1996). Whatever help sources are used, they should be supportive, knowledgeable about partner violence, and willing to adhere to the client's self-determination.

### *Treatment of Male Batterers*

Much of the research on male batterers is theoretical and addresses the treatment of African American men (Dennis, Key, Kirk, & Smith, 1995; Williams, 1992; Williams & Becker, 1994). Many therapeutic goals for abusive black men are similar to those for Anglo men: (a) preventing violence by focusing on conflict resolution, (b) developing interpersonal skills, and (c) improving poor communication (Campbell, 1993; Dennis et al., 1995).

Several recommendations, however, are made for culturally sensitive practice. First, treatment tactics that label black abusers as devoid of positive personal or social characteristics or that require clients to view themselves as "sick" should be avoided. African American men are likely to resist these strategies because they perceive them as punitive. Instead, the focus should be the client's capacity for change and his responsibility to participate in the treatment process. Therapists also must be prepared to discuss racism and other forms of discrimination while continuing to challenge the batterer to be accountable for his behavior (Williams, 1992).

Group therapy can be a particularly effective treatment modality for black batterers. Racially homogeneous groups are effective because they create an increased level of trust by group members. Black batterers often experience a greater identification with themes discussed in the group (e.g., experience with personal and institutional racism). The group environment is also consistent with black men's help-seeking patterns of confiding in community members. Mixed-race groups can be effective as well if therapists create a trusting environment. This entails resisting "color blindness" or attempts to respond to all clients as ethnically similar. In addition, it means a willingness to discuss the impact of racism within the group and to challenge racist comments if they occur. To be safe, it might be beneficial for groups to have at least two men of color (Williams & Becker, 1994).

In summary, despite stereotypes about ethnic minority partner violence and cultural and institutional barriers, these groups seek help from both formal and informal sources. When assistance is sought, a culturally appropriate assessment that takes into account

race, level of acculturation, economic status, and prior exposure to violence should be conducted. Effective therapeutic intervention requires culturally appropriate and ethnically sensitive treatment.

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### **Policy Recommendations**

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Based on the literature, the following policy recommendations are given (Franco, 1996; Jasinski, 1996; Williams & Becker, 1994):

1. Improved research on ethnic minority populations is required. Specifically, more information is needed on prevalence and incidence of partner violence, nature and characteristics of abuse, and contributing factors. In addition, more research should be conducted on ethnic group differences as well as generational status, gender, age, and socioeconomic differences in partner violence.

2. Future research efforts should focus on culturally appropriate education concerning partner violence. Information can be disseminated through word of mouth, community leaders, religious institutions, ethnic events, and English-as-a-second-language classes. Community hotlines can also be established for victims and batterers who are reluctant to be identified.

3. "Culturally competent" shelters and counseling services should be established. This entails networking with the minority community, using outside consultants with expertise in minority issues, and employing at least one bilingual counselor.

4. Most important, factors that contribute to minority partner violence, including poverty and lack of educational opportunities, must be addressed.

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### **Note**

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1. Although the Violence Against Women Act (VAWA), signed by President Bill Clinton in September 1994, provides greater protection for battered immigrants, it is still too early to tell whether they are benefitting from its passage. The reader is referred to the following resources for a more detailed discussion of legal matters faced by battered women: Anderson, 1993; Franco, 1996; Huisman, 1996; Jang et al., 1990; Narayan, 1995; and Orloff, Jang, & Klein, 1995.

# PARTNER VIOLENCE

*A Comprehensive Review of 20 Years of Research*

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