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## **Partner Abuse in Ethnic Minority and Gay, Lesbian, Bisexual, and Transgender Populations**

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This review seeks to synthesize the current state of knowledge regarding gender differences in rates of physical and psychological intimate partner violence (IPV) prevalence among the four largest racial/ethnic groups in the United States, compares rates of physical and psychological IPV between sexual minorities and heterosexuals and among subgroups of sexual minorities (gay men, lesbians, bisexuals), and summarizes correlates and risk factors that are associated with rates of IPV in both ethnic and sexual minorities.

A systematic search of the published literature in the past 40 years using various search engines (e.g., PubMed, PsycINFO, and Web of Science) was conducted. The review identified 55 studies that met criteria. Few gender differences in rates of physical and psychological aggression were found among African American, Hispanic American, Asian American, and Native American men and women. Psychological aggression was most frequently reported. Bidirectional violence, which primarily took the form of minor aggression, was the most frequently reported form of physical violence. When unidirectional aggression was assessed, it was more likely to be female perpetrated, particularly among African Americans. These gender patterns were consistent across general population, student, and community studies. Respondents who reported a history of same-sex cohabitation and those who identified as sexual minorities reported higher rates of IPV than those who reported only a history of opposite-sex cohabitation and those who identified as heterosexual.

Regarding sexual minority subgroup differences, bisexuals appeared to be at a greater risk of IPV, and victimization among transgendered individuals

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ONLINE TABLES: Detailed summaries of the 55 studies reviewed in this article can be found in five tables available online at <http://www.springerpub.com/pa>. Click on the link to the "Partner Abuse State of Knowledge Project" and go to Topic 6 in the online document.

has largely been neglected in the literature. Substance abuse and use, marginalized socioeconomic status in the form of family and neighborhood poverty, and exposure to violence during childhood as a witness or victim of violence in the family of origin were consistently linked to elevated rates of IPV. Associations also were found between level of acculturation and minority stress in the form of internalized homophobia and frequency of discrimination based on sexual orientation. However, the complex association among these variables was less clear across racial groups and sexual orientation. Research limitations and future research directions are discussed.

**KEYWORDS:** intimate partner violence; ethnic minority; same-sex partner violence; literature review

Intimate partner violence (IPV) victimization and perpetration can involve men and women of every race/ethnicity, age, socioeconomic status, sexual orientation, and relationship status, including married, cohabitating, and dating couples (Renner & Whitney, 2010). Most research has been conducted in the United States with predominantly White, heterosexual populations. Yet, it is imperative that researchers continue to investigate the differences in the incidence and prevalence of IPV based on racial/ethnic background and sexual orientation of the victims and perpetrators. People of color,<sup>1</sup> now roughly one third of the U.S. population, are expected to become the majority in the year 2042 (U.S. Census Bureau, 2008). In addition, there is a growing recognition of gay, lesbian, bisexual, and transgendered (GLBT) citizens and their relationships.<sup>2</sup> According to the 2008 American Community Survey, there are more than 500,000 households where an adult identified another adult of the same sex as either a “husband/wife” or “unmarried partner” (Gates, 2009).

Some ethnic minority groups reported significantly higher rates of IPV than White Americans. For example, with the exception of Asian Americans who consistently reported the lowest rates of domestic assault (e.g., Black et al., 2011; Tjaden & Thoennes, 2000), African Americans, whether as individuals or couples, consistently reported higher rates of overall, severe, mutual, and recurrent past year and lifetime IPV victimization and perpetration. To illustrate, estimates based on the National Crime Victimization Survey (NCVS) indicated that Blacks were victimized by intimate partners at significantly higher rates than persons of any other race between 1993 and 1998. Black men reported a rate of IPV that was 62% higher than White men and about 2.5 times the rate of other men of color. Likewise, Black women experienced IPV at a rate that was 35% higher than the rate found among White women and about 2.5 times the rate of women of other unspecified races (Rennison & Welchans, 2000). Moreover, Native Americans and Latinos consistently reported significantly higher rates of IPV than their White counterparts (Tjaden & Thoennes, 2000).

Despite their growing numeric presence and social and economic advances, racially diverse individuals continue to be overrepresented among demographic groups that are at increased risk for IPV: young (aged 16–24 years), separated, divorced or cohabitating, low annual income, and urban dwellers (Rennison & Welchans, 2000).

Generally, racial differences in rates of IPV disappear or become less pronounced when the aforementioned sociodemographic factors are taken into consideration (Rennison & Planty, 2003). Furthermore, higher rates of substance use and abuse, history of childhood victimization in the form of witnessing or experiencing physical child abuse, and residence in impoverished neighborhoods have been found among people of color, which have been associated with higher rates of IPV (Field & Caetano, 2004). Researchers have primarily focused on racial comparisons in rates of IPV rather than gender differences in rates of IPV within racial groups. Consequently, less is known about gender differences in the types, frequency, severity, and patterns of IPV that is sustained and inflicted by men and women of color. In addition, cultural factors such as level of acculturation, which also may account for elevated rates of IPV among people of color, have often been neglected (Caetano, Ramisetty-Mikler, Vaeth, & Harris, 2007).

Although there are existing data that indicate that IPV is a problem among sexual minorities, there is a relative lack of scholarly research to assess physical and psychological aggression within these populations. Based on recent literature reviews, sexual minorities reported more IPV than their heterosexual counterparts. More specifically, estimates of physical abuse have ranged from 15% to 46% for lesbian and bisexual women (Lewis, Milletich, Kelley, & Woody, in press) and similarly high rates were discovered among gay and bisexual men (Nowinski & Bowen, 2012). Survivors who identified as transgendered composed 4.2% of the total number of clients who sought services for IPV (National Coalition of Anti-Violence Programs [NCAVP], 2010a, 2010b). Yet, with few exceptions (Turrell, 2000), the experiences of transgendered men and women continue to be neglected by researchers.

Studies on IPV in same-sex relationships have been plagued with methodological problems (for a review, see Murray & Mobley, 2009). For example, the numerous, large probability-based surveys of victimization generally assume heterosexuality among respondents and with few exceptions (e.g., Renner & Whitney, 2010) do not assess the sexual orientation of respondents. As a result, many researchers have investigated IPV among respondents who attended large public GLBT gatherings or who were members of GLBT organizations; populations that may not reflect the demographics of sexual minorities are less open about their sexual orientation. Furthermore, who is categorized as a sexual minority has varied across studies. Some researchers have asked respondents to self-identify their orientation (Turrell, 2000), whereas others based sexual orientation on the cohabitation history of respondents (Tjaden, Thoennes, & Allison, 1999).

Despite these research limitations, this growing body of literature suggests that sexual minorities often experience more frequent discrimination and internalized homophobia, which has been associated with lower relationship quality and higher rates of substance abuse, which in turn has been linked to higher rates of IPV (Lewis et al., in press). In addition, GLBT individuals are often economically and socially marginalized, which may increase the probability that they will experience all forms of victimization including IPV. As evidence, the NCAVP, which comprises 41 antiviolence agencies that responded to all forms of violence in sexual minority

communities, observed a 15% increase in total reported cases of IPV between 2008 and 2009, from 3,189 to 3,658 cases of IPV (NCAVP, 2010a, 2010b).

The body of research examining the experiences of ethnic and sexual minorities has grown in the past 40 years; however, there is a need for more systematic reviews of the literature. Accordingly, my first goal is to synthesize the current state of knowledge regarding gender differences in rates of physical and psychological IPV prevalence among the four largest ethnic/racial groups in the United States. My second objective is to compare rates of physical and psychological IPV between sexual minorities and heterosexuals and among subgroups of sexual minorities (gay men, lesbians, bisexual men and women). Finally, I will summarize correlates and risk factors that are associated with rates of IPV in both ethnic and sexual minorities.

## **METHODS**

### **Eligibility Criteria**

Studies were included in the current review if they met three broad inclusion criteria. First, they needed to present empirical data regarding the prevalence of physical IPV and/or psychological aggression/control among African, Hispanic, Asian, or Native Americans. Second, rates of both male- and female-perpetrated IPV must have been assessed. Third, statistical analyses must have been conducted and reported on gender differences within ethnic groups. Fourth, statistical analyses must have been conducted between sexual minorities and heterosexual men and women or with subgroups of sexual minorities (e.g., gay men, lesbian women, bisexual men and women). Exclusion criteria included studies that examined gender differences between ethnic groups (e.g., only comparing rates of IPV between White and Black women or Hispanic and Black men).

### **Search Procedure**

A systematic search of the published literature was carried out using PubMed, CINAHL Plus, and MEDLINE (scholarly publications in the biomedical, life sciences, allied health, and nursing); PsycINFO and PsychARTICLES (scholarly publications in the psychological, social, behavioral, and health sciences); Social Science database of Web of Science and Academic Search Complete (comprehensive, multidisciplinary, full-text database); and Criminal Justice Abstracts and Family Studies Abstracts. The following key words or stems were used in separate and combined searches for race/ethnicity: African American, Blacks; Hispanic, Latin\*, Mexican America\*, Cuban or Puerto Rica\*; American Indian, Native American, Alaska Native, Indians of North America; and Asian American, Chinese American, Korean American, Native Hawaii\*, Filipinos, Vietnam\* American, Asian Pacific Islander, South Asian American. The following key words or stems were used in separate and combined searches for sexual minorities: bisexual, gay, lesbian, same sex GLBT, transgend\*, or sexual orientation.



The following key words or stems were used in separate and combined searches: intimate partner violence, domestic violence, dating violence, family violence, husband abuse, wife abuse, emotional abuse, and psychological abuse. Search terms also included indexed terms unique to each database (e.g., MeSH terms, PsychINFO index). Journal for hand searching included *Violence and Victims*; *Journal of Family Violence*; *Violence Against Women*; *Journal of Interpersonal Violence*; *Trauma, Violence, and Abuse*; and *Journal of Aggression, Maltreatment, and Trauma*.

Findings were limited to peer-reviewed journal articles that were written in English and studies sampling human subjects conducted in the United States between 1975 (the year when the first National Family Violence Survey [NFVS] was published [Straus & Gelles, 1990]) and 2012. These lead to an initial identification of 7,546 articles (including replicates) across databases and searches.

### **Review Process and Data Synthesis**

Next, a preliminary screening of the titles and abstracts to assess whether the content was likely to meet eligibility criteria was conducted. Elimination of replicates and a second review of study abstracts led to retrieval of 257 articles for further analysis. Full text was retrieved for these 257 articles and reviewed in detail for inclusion and data extraction. Results then were summarized and grouped according to sample type: population-based, university, and community samples for each of the ethnic and sexual minority groups.

## **RESULTS**

In total, 55 articles that reported gender differences within ethnic groups and made comparisons in rates of IPV between sexual minorities and heterosexuals and among sexual minority subgroups were identified. Characteristics of the articles included in the analyses are described in Table 1. Most of the articles focused on African Americans ( $n = 15$ ), Hispanic Americans ( $n = 18$ ), and sexual minorities ( $n = 14$ ), whereas few articles explored gender differences among Asians ( $n = 5$ ) and Native Americans ( $n = 3$ ). Information about IPV prevalence rates and correlates were gleaned primarily from national population samples, such as the 1995 and 2000 National Longitudinal Couples Survey (NLCS). Most of the studies ( $n = 42$ ) used the original or revised Conflict Tactics Scales (CTS) or some modified version of these scales. Although several studies considered severity of violence, most often researchers used a dichotomized measure of IPV and did not report the frequency of aggression. Other studies, which primarily assessed IPV among sexual minorities, used a single item or a non-normed checklist of violent acts to measure IPV.

In the following section, I will summarize the gender differences of rates of IPV for each racial/ethnic group and sexual minorities that were found in general population, university, and community samples. Next, I will discuss correlates of IPV for ethnic and sexual minorities.

**TABLE 1. Summary of Characteristics of Articles Included in Review ( $N = 55$ )**

<b>Characteristics</b>	<b>Number of Articles</b>
Race/Ethnicity	
African American	15
Hispanic American	18
Asian American	5
Native American	3
Sexual minorities	14
Sample Type	
Large population studies	32
University samples	8
Community samples	15
National Populations Samples <sup>a</sup>	
1975 National Family Violence Survey (NFVS)	1
1985 National Family Violence Resurvey (NFVR)	2
1995 National Longitudinal Couples Survey (NLCS)	15
2000 National Longitudinal Couples Survey (NLCS)	7
2000 National Household Survey on Drug Abuse (NHSDA)	1
National Latino and Asian American Study (NLASS)	1
National Violence Against Women Survey (NVAWS)	2
National Epidemiologic Survey on Alcohol and Related Conditions (NESARC)	1
Measurement Approach	
Conflict Tactics Scale	42
Single item	7
Other	6

<sup>a</sup>Two studies that used national nonprobability samples of sexual minorities were not included in the summary statistics; however, study details are available online: <http://www.springerpub.com/pa>

## **AFRICAN AMERICANS**

In general populations studies, samples sizes were lowest in the 1975 NFVS ( $n = 146$ ) and highest in the 1985 National Family Violence Resurvey (NFVR;  $n = 576$ ; Hampton, Gelles, & Harrop, 1989). The largest samples of Black couples ( $n = 358$ ) were found in the 1995 NLCS (Caetano, Cunradi, Clark, & Schafer, 2000). Among college samples, the numbers ranged from a low of 171 (West & Rose, 2000) to a high of 311 (Clark et al., 1991). Only 26 Black male undergraduates were surveyed in one study (Bougere, Rowley, & Lee, 2004). The mean age, early to mid-40s, of respondents in large population studies was older than the mean age of college students, which was early 20s. Gender differences are summarized in the following.

### Large Population Studies

In the earlier national studies, researchers discovered higher rates of male perpetrated violence. For example, in the first NFVS, overall (169 per 1,000) and severe (113 per 1,000) Black husband-to-wife violence was higher than overall (153 per 1,000) and severe (76 per 1,000) wife-to-husband violence. However, it appeared that for over a decade, Black wife-to-husband abuse increased, whereas Black husband-to-wife abuse decreased. To illustrate, the overall violence rate for Black women toward their husbands increased 33.3% from 153 per 1,000 in 1975 to 204 per 1,000 in 1985. Although not significant, the rate of severe violence against Black men increased 42.1% from 76 per 1,000 in 1975 to 108 per 1,000 in 1985. In contrast, with the exception of throwing something or using guns or knives, the occurrence of every act of violence toward Black wives declined in the past 10 years. In particular, there was a 55.9% decline in the rate of “slapping” from 118 per 1,000 in 1975 to 52 per 1,000 in 1985 and the 60.9% decline in the rate of “hitting or trying to hit with something” from 69 per 1,000 in 1975 to 27 per 1,000 in 1985 were the only statistically significant changes. These changes could be attributed to methodological differences between the studies (face-to-face vs. telephone interviews), changes in respondents’ willingness to report violence, or actual changes in behavior (Hampton et al., 1989).

Psychological aggression was the most frequently reported form of aggression. Approximately one half of Black couples reported minor psychological aggression and one third reported severe aggression. However, rates of psychological aggression did not vary by gender (Caetano, Field, Ramisetty-Mikler, & Lipsky, 2009). Regarding physical violence, mutual violence was most frequently reported. The rate of self-reported bidirectional IPV (61%) was 2 times that of unidirectional female-to-male partner violence (FMPV; 31%) and about 6 times higher than unidirectional male-to-female partner violence (MFPV; 8%). One third of Black couples who reported bidirectional partner violence described it as severe and defined as beat up, choked, raped, or threatened with a weapon (Caetano, Ramisetty-Mikler, & Field, 2005). Five years later, 17% of Black couples continued to engage in mutual violence and 11% of these couples progressed into severe IPV (Caetano, Field, Ramisetty-Mikler, & McGrath, 2005 ; Field & Caetano, 2005).

Female-perpetrated IPV was the next most frequently reported. More specifically, overall unidirectional FMPV was reported more frequently than unidirectional MVPV (30% vs. 23%). Regardless of gender, couples most often inflicted and sustained minor or moderate aggression, such as throwing objects, pushing, shoving, and grabbing (Caetano, Cunradi, et al., 2000). Although MFPV in 1995 was a significant predictor of FMPV in 2000 (Field & Caetano, 2003), at follow-up, men and women reported comparable rates of IPV. More specifically, 16% and 6% of Black couples reported minor and severe aggression, respectively; whereas 15% of Black couples used minor and 4% enacted severe MFPV (Caetano et al., 2009).

Independent of the sex of the perpetrator or the ethnicity of the couple, agreement between partners on incidence of psychological and physical perpetration



and victimization was generally low. However, African Americans had a higher level of agreement on the occurrence of severe violent acts, such as beat up or threatened with a weapon (Caetano, Schafer, Field, & Nelson, 2002). In addition, Black women and men identified the same proportion of female-perpetrated physical assault (Caetano et al., 2009), and Black women were more likely to identify themselves as perpetrators than men were to identify themselves as victims (Caetano et al., 2002).

### **University Samples**

Psychological aggression was the most common form of dating aggression reported among Black undergraduates. Between 80% and 92% of college men and women, as either victims or perpetrators, had experienced at least one act of verbal or psychological aggression in the year prior to the survey (Bougere et al., 2004; Clark, 1991). Although there were no gender differences in overall rates of psychological aggression, West and Rose (2000) discovered gender differences in types of victimization and perpetration. More women reported that their feelings were hurt by a date and that they had made a date feel guilty, whereas more men degraded their dates or made them feel inferior.

Regarding physical dating violence, approximately 40% of Black men and women had been perpetrators of at least one act of physical aggression in the previous year (Bougere et al., 2004). When both victimization and perpetration were considered, men and women sustained equal rates of dating aggression, whereas Black women inflicted more dating violence (Clark et al., 1991). On the other hand, West and Rose (2000) discovered gender differences in severity of violence. For instance, although more women made threats, threw objects, and slapped their partners, more men had choked a partner.

Clark and colleagues (1991) found that the perception of the dating partner's behavior to be more important than other variables in determining whether violence was used to resolve conflicts. Alternatively stated, when the partner was perceived to be physically or verbally aggressive, the respondent was more likely to reciprocate. However, men perceived their girlfriends to be more physically aggressive than women perceived their boyfriends to be physically aggressive. In a similar vein, men indicated that their partners were more likely to be psychologically aggressive and that physical assaults were equal between partners. Moreover, women acknowledged that they more frequently inflicted psychological aggression and were equally as likely to be physically aggressive (Bougere et al., 2004).

### **HISPANIC AMERICANS**

The 1995 NLCS used the largest sample of Hispanic couples (Cunradi, Caetano, Clark, & Schafer, 1999), and the number of Hispanic men and women surveyed ranged from a low of 711 in the NFVR (Straus & Smith, 1990) to a high of 2,547 in the National Household Survey on Drug Abuse (NHSDA; Cunradi, 2009). Among community samples, the smallest sample ( $n = 100$ ) surveyed Latino farmworkers and the largest

surveyed Mexican American in a Southwest community (Sugihara & Warner, 2002). The lowest mean age, mid-20s, was reported among college students (Ferguson, 2011) and the highest age, early 40s, among general population studies (Cunradi et al., 1999). Gender differences are discussed in the following.

### **General Population Studies**

There were no gender differences in psychological aggression, which was the most frequently reported form of IPV in the 1995 NLCS. For example, Hispanic couples reported comparable rates of minor (53%) and severe (28%) MFPV and minor (51%) and severe (30%) FMPV psychological aggression (Caetano et al., 2009). Regarding physical aggression, the rates of bidirectional IPV (45%) was higher than the rate of unidirectional FMPV (38%) and unidirectional MFPV (19%; Caetano, Ramisetty-Mikler, et al., 2005). This pattern of mutual aggression was present at follow-up (Field & Caetano, 2005).

The overall rate of MFPV and FMPV were comparable (17% vs. 21%, respectively; Caetano, Cunradi et al., 2000). At follow-up, minor MFPV was 17% and severe was 4%, whereas minor FMPV was 15% and severe was 4.5% (Caetano et al., 2009). However, over a 5-year period, FMPV was predicative of both MFPV and FMPV in 2000 (Field & Caetano, 2005). For both men and women, the aggression primarily took the form of throwing objects, slapping, and pushing (Caetano, Cunradi, et al., 2000).

Other general population studies revealed comparable gender rates of IPV. Severe Hispanic husband-to-wife (7.3 per 100) and severe wife-to-husband (7.8 per 100) violence were similar in the NFVR (Straus & Smith, 1990). Likewise, IPV perpetration between men and women (6.1% vs. 6.5%, respectively) and victimization between men and women (8.8% vs. 7.8%, respectively) were found among Hispanics in the NHSDA (Cunradi, 2009).

Regarding perceptions of IPV, Hispanic couple's agreement about the occurrence of several forms of physical aggression, such as beat up or threatened with a weapon, and use of psychological aggression was fairly high (60%). In addition, Hispanic women were more likely to identify themselves as perpetrators of IPV than men were to identify themselves as victims (Caetano et al., 2002).

### **University Sample**

One study in this sample investigated gender differences in rates of IPV among Hispanic college students. Ferguson (2011) discovered that the rates of overall physical victimization and perpetration, severe acts of physical aggression, and psychological aggression did not vary based on gender.

### **Community Samples**

In a sample of migrant and seasonal farmworkers, more women were hurt, insulted, and threatened by an intimate partner (Kim-Goodwin & Fox, 2009). In contrast, there were no gender differences in victimization or perpetration among nonmigratory

farmworkers (Duke & Cunradi, 2011). Mexican American men and women inflicted and sustained equal rates of psychological aggression, physical assaults, and injuries (Sugihara & Warner, 2002).

## **ASIAN AMERICANS**

Only one general population study in this sample focused specifically on IPV in this population, which included 1,470 Asian Americans (Chang, Shen, & Takeuchi, 2009). Undergraduate samples ranged from a low of 171 among Filipino students (Siewert & Flanagan, 2000) to a high of 289 among Chinese American students (Yick & Agbayani-Siewert, 2000). Community samples ranged from a low of 262 (Yick, 2000) to a high of 1,557 (Leung & Cheung, 2008). With the exception of college students who reported a mean age of 20 years (Siewert & Flanagan, 2000), the average age of respondents in general population and community samples was mid-40s. Furthermore, samples of adult Asians included a large number of respondents who were college graduates and earned more than \$60,000 (Chang et al., 2009; Yick, 2000). Gender differences are discussed in the following.

### **General Population Study**

Reciprocal violence, which accounted for one third of the aggression, was most frequently reported. Comparable rates of women and men reported minor violence victimization and perpetration among married/cohabitating Asian Americans. In response to the question, "When your arguments get physical, who usually starts it?", the majority of respondents (65% of women and 54% of men) indicated that there was no clear pattern in terms of who initiated the violence. However, ethnic subgroup differences were revealed. For example, Vietnamese women and men reported the lowest rates of IPV compared to respondents who identified as Filipino, Chinese, and those categorized as "Others" of Asian descent (Chang, et al., 2009).

### **University Samples**

Among undergraduates, there were no gender differences in dating violence victimization among Filipino Americans (Siewert & Flanagan, 2000) and dating violence victimization and perpetration among Chinese Americans (Yick & Agbayanti-Siewert, 2000).

### **Community Samples**

Consistent with general population and university samples, there were no gender differences in rates of IPV minor victimization in Asian American community samples. For example, gender was not a significant predictor of past year or lifetime victimization in a Los Angeles sample of Chinese Americans (Yick, 2000). Likewise, comparable

rates of Asian American men and women in a Houston sample experienced past year victimization. Regarding subgroup differences, Vietnamese and Filipino respondents reported more relationship violence than their Chinese and Japanese counterparts (Leung & Cheung, 2008).

## **AMERICAN INDIANS**

The smallest sample included 104 members of a Southwestern American Indian tribe (Robin, Chester, & Rasmussen, 1998). Although one community sample was larger ( $n = 1,006$ ), it was limited to American Indians who lived on or near reservations in Montana. In addition, only one item was used to measure IPV (Harwell, Moore, & Spence, 2003). The largest ( $n = 1,368$ ), most rigorous study included six tribes; however, specific tribes were not identified (Yuan, Koss, Polacca, & Goldman, 2006). The average age across studies was 40 years and most respondents were with low mean household incomes (less than \$20,000). Gender differences are discussed in the following.

Three community samples investigated IPV among American Indians. Using a telephone survey and a one-item measure of past year IPV, researchers discovered very low, nonsignificant rates of victimization among women (3%) and men (1%; Harwell et al., 2003). Higher rates were found in other community samples. For example, in a Southwestern American Tribe, both men and women reported some form of lifetime (91%) and recent (31%) intimate violence. Regarding gender differences, more women were victims in incidents where children were involved. In addition, women required more medical attention, used a weapon in self-defense and with the intent to injure their partner, and reported that their violence was a reaction to their partners' abuse (Robin et al., 1998). In a larger sample of six Native American tribes, more women had been slapped or hit and more men had been pushed or shoved. Overall, however, women reported significantly higher rates of physical assault compared to males (Yuan et al., 2006).

## **Sexual Minorities**

### ***Sexual Minorities Versus Heterosexuals***

*General Population Studies.* Five general population studies compared rates of IPV between sexual minorities and heterosexuals. Two studies used the National Violence Against Women Survey (NVAWS) and discovered that respondents with a history of same-sex cohabitation were at greater risk than those who only had a history of opposite sex cohabitation. When gender rates were combined, bisexuals had the highest rates of IPV and were most likely to be abused by an opposite-sex partner (Messinger, 2011; Tjaden et al., 1999). One study used the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) and discovered that more lesbians and bisexual women reported IPV than heterosexual women, whereas more heterosexual men reported IPV than gay men (Hughes, McCabe, Wilsnack, West, & Boyd, 2010).

Finally, one nonrepresentative national study was included in this sample. Using the CTS, one study found that sexual minority status was not predicative of IPV assault in the past year or ever have been injured by a partner. However, more GLB respondents reported lifetime psychological maltreatment than their heterosexual counterparts and were more likely to report at least one assault by a partner (Balsam, Rothblum, & Beauchaine, 2005).

*Lesbians/Bisexual Women Versus Heterosexual Women.* Among opposite-sex female cohabitants, 21.7% had experienced lifetime IPV; and among the 79 women who had lived with a same-sex partner during their lifetime, 39.2% reported lifetime IPV. However, closer inspection of these findings revealed that among same-sex cohabiting women who had experienced lifetime partner violence, approximately 30% reported being victimized by a man, compared to 11% who reported being victimized by a woman. It is difficult to interpret these findings because it appears that women with a history of same-sex relationships were more likely to be victimized by a man. Also, the NVAWS did not ask participants to identify as gay, lesbian, bisexual, or heterosexual. Rather, sexual orientation was determined based on whether individuals resided with a same-sex partner (Tjaden et al., 1999). When respondents were allowed to self-identify, lesbians and bisexual women reported IPV more than their heterosexual counterparts (Hughes et al., 2010).

*Gay/Bisexual Men Versus Heterosexual Men.* In the NVAWS, 23.1% of same-sex cohabiting men, compared to 7.7% of opposite-sex cohabiting men, reported a lifetime rate of IPV victimization. However, on closer inspection, 15% of same-sex cohabiting men had been abused by a female partner. Therefore, when lifetime measures are used, participants who identify as gay may have had histories of heterosexual partnerships (Tjaden et al., 1999).

**University Samples.** Two studies in this sample considered dating aggression among sexual minority and heterosexual college students. Neither study used a standardized measure of IPV. Using a single item, gay men reported a greater risk of IPV perpetration and victimization than their heterosexual peers (Rhodes, McCoy, Wilkin, & Wolfson, 2009). Using a 22-item checklist of various forms of verbal and physical abuse, sexual minority women (lesbians and bisexuals) experienced more violence than heterosexual women, whereas gay men were less aggressive than every other gender or sexual orientation. Bisexual students reported the highest rates of aggression (Bowman & Morgan, 1998).

### **Sexual Minority Subgroups**

General population samples that allowed respondents to self-identify ranged from 581 (Carvalho, Lewis, Derlega, Winstead, & Viggiano, 2011) to a high of 720 (Balsam et al., 2005). Researchers who categorized respondents based on cohabitation history used the smallest samples ( $n = 144$ ; Messinger, 2011; Tjaden et al., 1999). Among community samples, studies ranged from a low of 272 (Balsam & Szymanski, 2005) to more than 2,000 respondents (Kelly, Izienicki, Bimbi, & Parsons, 2011).

**General Population Studies.** Two of the general population studies also explored sexual minority subgroup. Carvalho and colleagues (2011) discovered that gay men and lesbians reported comparable rates of IPV. Messinger (2011) reported that for women with a history of same-sex relationships, frequencies of IPV victimization were approximately 44%, 56%, and 25% for verbal, controlling, and physical IPV, respectively. However, it is important to note that frequencies at which bisexual women reported experiencing IPV reflect victimization from a same-sex *and* an opposite-sex partner. Consequently, when considering the number of women who reported experiencing IPV from *only* a same-sex partner, the frequencies of IPV victimization are substantially lower with frequencies of approximately 13%, 7%, and 6% for verbal, controlling, and physical IPV, respectively. Collectively, these findings provide evidence suggesting that differences may exist in rates of IPV perpetration and victimization between lesbian and bisexual women.

**Community Studies.** Finally, five community samples investigated sexual minority subgroup differences. Two studies found no significant differences across sexual orientation. More specifically, researchers found comparable rates of IPV among gays, lesbians, and bisexuals. Instead, being female, regardless of sexual orientation, was a greater predictor of abuse (Bimbi, Palmadessa, & Parsons, 2007). Also, lesbians and their heterosexual sisters were equally as likely to be physically assaulted within their intimate relationships (Stoddard, Dibble, & Fineman, 2009). One study found that lesbians reported higher frequencies of IPV than gay men (Turrell, 2000). Two studies investigated the types of IPV experienced. When compared to unidirectional victimization and perpetration, mutual violence was the most frequently reported IPV among gays, lesbians, and bisexuals (Kelly et al., 2011). When compared to lesbians, bisexual reported more physical aggression against a female a partner in the past year. Although more lesbians than bisexual women reported more lifetime psychological aggression against a female partner, more bisexual women perpetrated more GLBT specific tactics of psychological aggression (e.g., “I forced my partner to show physical and sexual affection in public, even though she did not want to”) against their female partners (Balsam & Szymanski, 2005).

## CORRELATES AND RISK FACTORS

The prevalence of IPV among ethnic minorities and sexual minorities cannot be explained by any single factor but seems to be related to risk factors associated with the individual, the type of relationship between partners, and factors in the environment. Overall, substance abuse and use, socioeconomic status, exposure to violence during childhood, and level of acculturation and minority stress have consistently been found to be risk factors for IPV among ethnic minority men, women, and couples and among GLBT individuals and same-sex couples (Field & Caetano, 2004; Nowinski & Bowen, 2012).

General population studies, university, and community samples have provided substantial evidence linking IPV to alcohol use, drinking patterns, alcohol problems,



and other forms of substance use and abuse. In the 1995 and 2000 NLCS, problematic drinking and alcohol problems among Hispanics were associated with higher rates of IPV. However, across ethnic groups, drinking during the violent event and male and female alcohol problems were more frequent among African Americans, independent of gender (Caetano, Cunradi et al., 2000). Substance- and alcohol-use disorders also has been linked to higher rates of partner violence among Asian Americans (Chang et al., 2009) and Native Americans (Yuan et al., 2006). Likewise, substance-use disorders are associated with IPV across sexual orientation (Hughes et al., 2010). However, sexual minorities may be at increased risk for substance-abuse disorders, which may elevate their risk of IPV (Bimbi et al., 2007; Kelly et al., 2011).

Lower mean annual incomes and residence in impoverished neighborhoods have been linked to higher rates of IPV among African Americans and Hispanics (Cunradi, Caetano, Clark, & Schafer, 2000; Cunradi, Caetano, & Schafer, 2002). Although less research has been conducted on the demographic profile of sexual minorities, preliminary research indicates that IPV victims are often more economically and socially disadvantaged than their nonvictimized counterparts (NCAVP, 2010a, 2010b).

Exposure to childhood violence in the form of being the victim of child physical abuse or witnessing domestic violence in the family of origin also has been associated with higher rates of IPV among Hispanic and African American men, women, and couples (Schafer, Caetano, & Cunradi, 2004). More recently, similar links between history of childhood physical and sexual abuse have been found in community samples of Native Americans (Yuan et al., 2006), Mexican Americans (Ferguson, 2011), and Latino farmworkers (Kim-Goodwin & Fox, 2009).

Finally, factors that are unique GLBT and communities of color have been found to elevate their rates of IPV. More specifically, lower levels of acculturation were positively associated with higher acculturation stress, which was directly related to greater likelihood of involvement in IPV (Caetano et al., 2007). On the other hand, couples with at least one medium acculturated member were more likely to experience MFPV than couples with low acculturation (Caetano, Schafer, Clark, Cunradi, & Raspberry, 2000). Among Asian Americans, respondents who were more acculturated were twice as likely to have been victims of lifetime and severe IPV (Yick, 2000). Among Native Americans, greater fluency in the tribal language was a risk factor among IPV among women, whereas men who placed a greater value in the retention of tribal language were less likely to be physically assaulted (Yuan et al., 2006). Among sexual minorities, the expectation of prejudice and discrimination (Carvalho et al., 2011) and internalized homophobia and frequency of discrimination based on sexual orientation, which can lower relationship quality, have been linked to higher rates of IPV among lesbians (Balsam & Szymanski, 2005).

To conclude, a path model revealed that at the broadest level, childhood experiences with violence victimization was associated with impulsivity and drinking problems later in life, which in turn was associated with higher levels of reported IPV. However, the pattern of associations varied by race and gender. For example, a history of childhood physical abuse was an important risk factor for impulsivity

for all men and Hispanic women yet not for African American or White women (Schafer et al., 2004).

## DISCUSSION

I conducted a review of 55 studies, which used general population, university, and communities samples that were published since 1975, to summarize the current state of knowledge regarding gender differences in the prevalence rates of physical and psychological IPV victimization and perpetration among the four largest ethnic/racial groups in the United States. The main results of this review are that African American, Hispanic American, Asian American, and Native American men and women report few gender differences in rates of physical and psychological aggression. In all cases, psychological aggression is most frequently reported. Regarding physical abuse, mutual or bidirectional violence is most common with both men and women participating in the abuse. When physical abuse occurred, it typically took the form of minor aggression, such as throwing objects, pushing, slapping, and shoving. When unidirectional aggression was considered, it was somewhat more likely to be female perpetrated, particularly among African American couples. Independent of the sex of the perpetrator or ethnicity of the couple, agreement between partners on incidence of psychological and physical perpetration and victimization was generally low. However, couples had a higher level of agreement on the occurrence of severe acts of violence. These gender patterns were consistent across general population, student, and community studies.

My second objective of this review was to compare rates of physical and psychological IPV between sexual minorities and heterosexuals and among subgroups of sexual minorities (gay men, lesbians, bisexual men and women). In most cases, respondents who reported a history of same-sex cohabitation and those who identified as sexual minorities reported higher rates of IPV than those who reported only a history of opposite-sex cohabitation and those who identified as heterosexual. Regarding sexual minority subgroup differences, there were no consistent findings. Some studies found no significant differences across sexual orientation, whereas another study found that lesbians experienced higher rates of IPV than gay men. Bisexuals also appear to be at risk for IPV, and rates of victimization among transgendered populations have largely been unexamined in the literature.

The final objective of this review was to identify correlates and risk factors of IPV among ethnic and sexual minorities. Substance abuse and use, marginalized socioeconomic status in the form of family and neighborhood poverty, and exposure to violence during childhood as a witness or victim of violence in the family of origin are all factors that have been consistently linked to elevated rates of intimate partner assaults. Associations also have been found between level of acculturation and minority stress in the form of internalized homophobia and frequency of discrimination based on sexual orientation. However, the complex association among these variables is less clear across racial groups and sexual orientation.

These findings should be understood in the context of some limitations. First, most of the studies in this review focused on African Americans and Hispanics, whereas the research on Asian Americans and Native Americans remain sparse. Second, prevalence rates and correlates/ risk factors of IPV were primarily based on two general population surveys: the 1975 and 1985 NFVS (Hampton et al., 1989) and the 1995 and 2000 NLCS. Although these studies were methodologically strong, the typical respondents were married individuals and couples in their mid-40s, populations that are generally at lower risk of IPV (Rennison & Welchans, 2000). Third, most of the studies used the CTS. Therefore, there was limited information about frequency of aggression. Moreover, this review did not include prevalence of sexual aggression. Finally, the studies on sexual minorities should be interpreted with extreme caution. Several studies used nonstandardized measures, and there was not consistent definition of sexual orientation used across studies. These are methodological limitations that make it difficult to draw conclusion.

### **Future Research Directions**

Although the scholarship has advanced in the previous 40 years, future researchers should make greater efforts to recruit diverse samples, assess the various forms of IPV, and develop more sophisticated research methodologies.

**Sampling Diversity.** Ideally, researchers should strive to recruit samples that are of sufficient size and diversity to explore differences in IPV based on age, social class, gender, and other sociodemographic variables within and between racial/ethnic groups (Renner & Whitney, 2010). Given their extremely high rates of IPV and criminal victimization, there is an urgent need to learn more about American Indian and Alaska Native groups (Deer, Clairmont, Martell, & White Eagle, 2008). Methodological challenges such as their relatively small size compared to other ethnic groups and intra-ethnic diversity have made it difficult to conduct research on Asian Americans (Yick & Berthold, 2005). Although they reported lower rates of IPV than other ethnic groups, more journal articles (Yick & Oomen-Early, 2008) have documented the need for additional research on this population. The research, albeit limited, has indicated that interracial couples (Fusco, 2010) and men and women who self-identify as mixed race (Tjaden & Thoennes, 2000) were at elevated risk for IPV. Finally, there is a need to document IPV experienced by GLBT individuals and couples (NCAVP, 2010a).

**Poly-Victimization.** Researchers must move beyond defining IPV as minor or severe physical aggression and unidirectional MFPV and FMPV. Generally, IPV involves mutual violence and multiple forms of verbal/psychological and sexual aggression (Caetano et al., 2009). Partner violence can also involve stalking and control of reproductive or sexual health, such as the refusal to use a condom (Black et al., 2011). Rather than counting independent acts of physical, sexual, and verbal aggression, future researchers should also consider investigating the context of the violence,

as well as motivators for (e.g., self-defense, control, coercion) and adverse physical and mental health consequences (e.g., injury, emotional impact) associated with IPV (Lindhorst & Tajima, 2008; Malley-Morrison & Hines, 2007).<sup>3</sup> Moreover, there needs to be more critical discussions about women's use of violence toward their intimate partners, particularly in the lives of Black women who appeared to commit this form of violence in higher rates than other ethnic groups (West, 2007).

Although it is challenging to assess, researchers should consider exploring the connections between IPV and historical trauma, internalized oppression, and trauma associated with contemporary discrimination (Ferraro, 2008). Researchers may consider including additional items that can identify forms of IPV that are pertinent to the population under investigation. For example, among GLBs items such as "outing" a partner by revealing his or her sexual orientation to unsupportive friends and family members could be perceived as a form of victimization or technique used to gain power and control (McClennen, Summers, & Daley, 2002).

**Research Methodologies.** Ultimately, understanding the complexity of IPV in the lives of diverse populations requires more sophisticated research methodologies. For instance, no single scale can sufficiently gauge every dimension of IPV; thus, researchers should consider using multiple measures. Path models conducted for each racial group can offer insights into the complex way that risk factors shape IPV (Schafer et al., 2004). Longitudinal studies, which interview individuals or couples several times over the course of many years, can be expensive but can help us make causal inferences and understand the differences between nonviolent couples compared to couples who are persistently violent and those who cease their violent behavior. Multilevel models that allow researchers to examine and unravel individual-, partner-, and community-level correlates and risk factor can expand our understanding how structural inequalities shape the experience of IPV. Statistical data can be enriched with qualitative data and narratives that allow people to explain how violence has impacted their lives (Malley-Morrison & Hines, 2007).

To conclude, it is now time to go beyond the question whether IPV perpetration is more common among heterosexual men or women, Blacks or Whites, and gay men or lesbians. As Ferraro (2008) asserted,

Including race in a statistical model may provide important information about associations, but cannot be treated as an examination of a causal theory about any phenomenon. Without careful contextualization of data, these analyses can obscure the social processes of domination and lead to spurious conclusions about race as a cause. (p. 194)

## NOTES

1. "People of color" and "racially diverse" will be used to refer collectively to African American or Black, Hispanic or Latino, Asian American, American Indian, or Alaska Native. When possible, the specific ethnic subgroup will be identified (e.g., Mexican

- American, Chinese American). When reviewing studies, the author will use the racial terminology of the original article.
2. "Sexual minorities" will be used collectively to refer to gay, lesbian, bisexual, and transgendered individuals and couples.
  3. The interested reader may want to read other "Partner Abuse State of Knowledge" articles, including those on motives (Langhinrichsen-Rohling, McCullars & Misra, in press), the impact of physical and emotional abuse (Lawrence, Orengo, Langer, & Brock, in press), and risk factors (Capaldi, Knoble, Shortt, & Kim, 2012).

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