

# Ethnic Differences in How Domestic Violence Affects Mothers' View of Their Infants

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## Introduction

Research has consistently found that adolescents, young children, and infants are likely to experience many adverse outcomes in homes where domestic violence occurs (Kitzmann, Gaylord, Holt, & Kenny, 2003; Mahony & Campbell, 1998; McGuigan, 2007), including a higher likelihood of child abuse and neglect (Appel & Holden, 1998; McGuigan & Pratt, 2001). There is an absence of research examining differences in how domestic violence impacts child abuse potential in Hispanic and white non-Hispanic mothers, and little consistency in how Hispanic and white non-Hispanic mothers reportedly differ in their reactions to domestic violence (Aguilar Hass, Dutton, & Orloff, 2000; Edelson, Hokoda, & Ramos-Lira, 2007).

Examining the impact of domestic violence on the child abuse potential of Hispanic mothers is important because in the United States, one fourth of the children younger than 5 years of age are Hispanic (Latino, 2009, citing U.S. Census Bureau). Research on this question may contribute timely knowledge and direction to child abuse prevention and intervention efforts.

To better understand parent-child relationships in Hispanic families, most human service professionals would agree that it is important to consider how traditional Hispanic culture may influence family roles. Hispanic individuals represent a diverse group of people with varying national origins, from Mexico (64%), Puerto Rico (10%), Cuba (4%), and other Central and South American countries (U.S. Census Bureau, 2009). But despite their diverse nationalities, a majority of Hispanic families express similar cultural values regarding the importance of family, distinct gender roles, and parenting practices (Galanti, 2003).

For Hispanic people as a group, *familismo* (loyalty and solidarity shared by family members) is a central concept, and gender roles may be more rigidly defined and influenced by the cultural concepts of *machismo* and *marianismo*. *Machismo* dictates that Hispanic fathers have an obligation to the family and should be courageous, honorable, dominant, authoritarian, and aggressive. *Marianismo* expects Hispanic women to be good mothers, submissive to their

husbands, self-sacrificing, and tireless caregivers who nurture their husbands and children before themselves (Bauer, Rodriguez, Quiroga, & Florez-Ortiz, 2000; Perilla, Bakeman, & Norris, 1994). Husbands may provide discipline and direction to older children; however, for infants and children under age 3, nurturing (e.g., hugging, kissing) and mastery of developmental tasks (e.g., toileting, learning to speak) are primarily the mother's duty (Cabrera, Shannon, Mitchell, & West, 2009; Solis-Camara & Fox, 1995). These gender roles and parenting practices may influence how domestic violence impacts child abuse risk and may also contribute to a lack of help seeking among Hispanic women who have been victimized by their male partners (Bauer et al., 2000; West, Kantor, & Jasinski, 1998).

In the United States, the lifetime prevalence of violence against women by a domestic partner is 22%, and worldwide rates reach 69% (Kapoor, 2000). Sadly, the majority of female victims of partner violence live in households with young children (Tjaden & Thoennes, 2000). Studies in Mexico have found prevalence rates within that same range, reporting that between 34% to 46% of adult women have experienced partner violence (Edelson et al., 2007; Natera, Tiburcio, Berenzon, & Lopez, 1997).

A review of the domestic violence literature reveals a paucity of empirical studies examining the effects of domestic violence on infants, and particularly the effect of domestic violence on mothers' view of their infant. (For an exception, see McGuigan, Vuchinich, & Pratt, 2000.) More research is needed on the relationship between domestic violence and mothers' cognitions about their infant, since it is during pregnancy or immediately after childbirth that many women first experience domestic violence (Saltzman, Johnson, Gilbert, & Goodwin, 2003; Tjaden & Thoennes, 2000). It is well known that couple relationships are usually the most discordant during the first years of child rearing. Likewise, domestic violence during a child's first year can have a profound influence on the child's future psychological development (Bogat, DeJonghe, Levendosky, Davidson, & von Eye, 2006) and on physical health (McGuigan, 2007).



Since the seminal study by Fauber and Long (1991), researchers have demonstrated that conflict in the parents' relationship indirectly affects children through negative changes in the quality of the parent-child relationship and can also increase parents' negative cognitions about their child. Violent interactions between parents have spillover effects that influence children both within and outside the family (Carrell & Hoekstra, 2008; Fincham, Bradbury, & Scott, 1990). Parents with unrealistic expectations regarding their child's behavior show increases in their negative attributions toward their child (Azar, 1997). Other parenting characteristics correlated with negative outcomes for children include the perception of the child as difficult or demanding (McGuigan et al., 2000) and diminished parental acceptance of the child (Krishnakumar & Buehler, 2000). However, studies are lacking that directly examine the relationship between domestic violence and mothers' negative view of their infant.

One study that directly addressed the effect of domestic violence on parents' view of their infant found that both mothers and fathers who experienced domestic violence showed a more negative view of their infant than did parents who had not experienced domestic violence (McGuigan et al., 2000). However, the study did not examine whether the impact of domestic violence on maternal attributions varied across ethnic groups.

Together, these studies prompt a more detailed investigation of how domestic violence influences mothers' perception of their infant in two major ethnic groups in the United States, white non-Hispanics and Hispanics. Information regarding Hispanic mothers is particularly relevant considering that the proportion of Hispanic children born in the United States has increased faster than that of any other racial or ethnic group (Federal Interagency Forum on Child and Family Statistics, 2003).

## Method

The current exploratory study reviewed 5 years of archived data (1997–2001) from the Oregon Healthy Start (OHS) program. Oregon Healthy Start continues to be a voluntary home-visiting program designed to help families at risk of poor family functioning to give their firstborn infants a healthy start in life. The OHS program was modeled after the Healthy Families America program, which is sponsored by Prevent Child Abuse America. The OHS program addresses family dysfunction and child abuse prevention by promoting positive parenting practices. At the time of this study, OHS was serving 19 Oregon counties.

To identify at-risk families, OHS used an extensive two-stage screening and assessment process. The screening was initially completed by hospital nurses or trained Family Assessment Workers (FAWs) in the hospital shortly before or shortly after a child's birth. Mothers provided yes-no answers to the 15-item Hawaii Risk Indicator (HRI) checklist (Hawaii Family Stress Center, 1994). Mothers who were unmarried, who had inadequate or no prenatal care, or who showed any two other risk characteristics (i.e., history of substance abuse, fewer than 12 years of education, inadequate income) were further assessed using the Kempe Family Stress Inventory (KFSI). The KFSI is an in-depth interview that assesses 10 psychosocial factors related to poor family functioning and the risk of child abuse (Korfmacher, 2000). Healthy Start FAWs conducted KFSI interviews after receiving extensive training in the interview protocols. Interviews took one hour and were conducted in the hospital or in the home shortly after the child's birth as part of a "welcome baby" visit. Based on KFSI scores, families considered at-risk for poor family functioning were offered weekly home visiting services.

Family Support Workers (FSWs) provided weekly visits to participating families for the first few months and gradually reduced these

to bi-weekly or monthly visits, depending on the family's needs. Family Support Workers received at least 96 hours of initial training and over half (58%) had college degrees in health or human service-related fields (e.g., nursing, public health, social work, human services). The FSWs who provided home visits to Hispanic families were fluent in Spanish, with the majority being second-generation immigrants from Mexico. Home visits focused on child abuse prevention by providing parenting education, child development information, and referrals to needed social services.

The 1,447 mothers in the current study sample resided in semi-rural or small metropolitan areas, and the majority (75%) had never been married. This study included only mothers who had volunteered to receive home visiting services for one year and who were either white non-Hispanic (72.5%) or Hispanic (26.5%). On average, the mothers were 21.1 years of age ( $SD = 4.7$ ) when their child was born, and most (79%) did not work outside the home. Over half (51%) of the mothers had less than a high school education, and 89% were enrolled in the Oregon Health Plan, a state medical plan for low-income families. The majority (58%) lived independently with their husband or partner; one third (34%) lived with parents, relatives, or friends (and might also include their husband or partner); and the remaining 8% lived alone with their newborn child.

## Measures

Self-reports on how mothers viewed their children would be susceptible to social desirability bias. To avoid this, FSWs took detailed notes of family interactions during the home visits, including notes on the mothers' view of their child. On alternate weeks, the FSW would meet with a multidisciplinary team to review each family's progress. The assessments of the mothers' view of their child were based on the assessments completed by FSWs and multidisciplinary teams at 6 and 12 months. Mothers' view of their child was measured with the following five items (rated yes = 1 and no = 0): (a) "Mother has rigid or unrealistic expectations of the child's behavior," (b) "Mother sees child as difficult," (c) "Mother sees child as deserving of punishment," (d) "Mother sees child as deliberately disobeying and annoying," and (e) "Mother shows a lack of bonding with child." Scores were summed to produce a total index score ranging from 0 to 5 with higher scores indicating a more negative view of the child. Factor analysis showed all items consistently loaded on one dimension with good internal reliabilities at both the 6-month (Cronbachs alpha = .59) and 12-month (Cronbachs alpha = .79) assessments.

For this study, *domestic violence* was strictly defined as "any act of physical aggression between partners with

the intent to do harm during the first year of child rearing." Research has established that while different types of domestic violence exist, the majority involves the male partner as the perpetrator or both partners in mutual couple violence (Johnson & Ferraro, 2000). In the current study, no distinctions were made regarding the frequency or typology of the violence. The conceptual basis of this study focused on how any type of physical aggression between partners confirmed during the first year of child rearing would affect the mothers' view of their child.

The FSWs were trained to recognize signs of relationship volatility. The frequent home visits with observations of family interactions increased the likelihood that domestic violence would be detected. To insure the mothers' safety and to promote open disclosure when violence was suspected, mothers were asked in private if their spouse or partner had been physically aggressive toward them. Victims were informed of their options regarding shelter services, legal action, and counseling.

## Results

Of the 1,447 mothers in this study, 140 (10%) were assessed as having experienced domestic violence. There was no significant association between domestic violence and the mothers' race or ethnicity. Specifically, of the 1,063 white non-Hispanic mothers, 109 (10%) experienced domestic violence, and of the 384 Hispanic mothers, 31 (8%) were assessed as having experienced domestic violence.

Separate t-tests were conducted to examine the effect of domestic violence on the mothers' view of their child. Table 1 shows the effect of domestic violence on mothers' negative view of their child at 6 and 12 months for all mothers in the study sample. Table 2 includes only white non-Hispanic mothers, and Table 3 shows the effect of domestic violence on Hispanic mothers' negative view of their child. While scores on the mothers' negative view index were low, there was variation at the lower levels.

Table 1 shows that for all mothers ( $n=1,477$ ), those who were assessed as experiencing domestic violence during the first year of their child's life developed a significantly more negative view of their

Table 1. All Mothers' Negative View of Their Child ( $n = 1,447$ )

Group	6 months		12 months		<i>t-value</i>	<i>p</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
DV parents	.30	.64	.60	1.12	4.15	.000
Non-DV parents	.13	.44	.14	0.48	0.42	.673

**Table 2. White Non-Hispanic Mothers' Negative View of Their Child (n = 1,063)**

Group	6 months		12 months		<i>t-value</i>	<i>p</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
DV parents	.35	.68	.72	1.22	4.36	.000
Non-DV parents	.15	.45	.16	0.51	0.41	.679

**Table 3. Hispanic Mothers' Negative View of Their Child (n = 384)**

Group	6 months		12 months		<i>t-value</i>	<i>p</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
DV parents	.13	.43	.16	.52	0.30	.768
Non-DV parents	.10	.39	.10	.39	.115	.908

child ( $p < .001$ ) from the 6-month assessment ( $m = .30$ ) to the 12-month assessment ( $m = .60$ ). There was no significant change in the view of the child for mothers who had not experienced domestic violence.

Table 2 shows that for white non-Hispanic mothers ( $n=1,063$ ), those who were assessed as experiencing domestic violence during the first year of their child's life developed a significantly more negative view of their child ( $p < .001$ ) from the 6-month assessment ( $m = .35$ ) to the 12-month assessment ( $m = .72$ ). There was no significant change in the view of their child for white non-Hispanic mothers who had not experienced domestic violence.

Table 3 shows that for Hispanic mothers ( $n=384$ ), there was no significant change in the mothers' view of their child regardless of whether or not the mother had been assessed as experiencing domestic violence. Domestic violence during the first year of child rearing had no significant effect on the Hispanic mothers' view of their infant.

## Discussion

This exploratory study revealed some important findings for programs seeking to improve family relations and reduce the risk of child abuse in violent families. A continuing challenge when researching the connection between domestic violence and child abuse is why only a small proportion of mothers in violent homes go on to commit child abuse. Changes in mothers' view of their

infant is one way domestic violence could influence child abuse potential. It follows that an increase in negative maternal cognitions would lead to a higher likelihood of the child becoming an eventual target for abuse.

This is one of the first studies to illustrate variation in the impact of domestic violence on maternal cognitions by comparing white non-Hispanic and Hispanic mothers. The results extend previous research and show that for white non-Hispanic mothers, domestic violence increased the negative cognitions about their infant children. Despite the assessment of domestic violence, Hispanic mothers showed no significant change in the view of their infant from 6 months to 12 months.

Exploring the causes of ethnic differences in the impact of

domestic violence will be an important next step for researchers. We speculate that differences in Hispanic and white non-Hispanic mothers' view of their child may be related to the families' cultural values. Studies have found higher levels of *familism* in Hispanic families (Losada et al., 2006; Shaull & Gramann, 1998). It is well known that motherhood (*marianismo*) is seen as the most culturally accepted identity for Hispanic women. A recent study of a home visiting program found that parent-child interactions improved over the child's first year for Hispanic mothers to a significantly greater degree than white non-Hispanic mothers (Middlemiss & McGuigan, 2005). These findings suggest the need for more exploration of ethnic differences in parenting in both violent and nonviolent households.

Generalizability of this study is limited to white non-Hispanic and Hispanic mothers who voluntarily participated in a home visiting program in one state. Statistical limitations must also be acknowledged. No measures of interrater reliability were available in the archived data. However, home visitor training emphasized independent assessment of each family's characteristics, and visitors were unaware that items would be combined to form the negative view of the child index. Having the input of the county's multidisciplinary teams on all of the 6- and 12-month assessments minimized the extent to which any associations between constructs may have been due to shared method variance. Future studies should include more rigorous designs to tease out the causal linkages among domestic violence, mothers' negative view of their infant, and confirmed child abuse.

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