

## **"La Mujer": HIV-Positive Battered Latina Women**

HIV risk behavior and partner abuse are emerging as intersecting problems that threaten the welfare of inner-city Latino communities. In the last 15 years, dramatic increases in the incidence of both HIV/AIDS and domestic violence among Latina women have occurred. Latina women account for 9% of the female total population (U.S. Census Bureau, 1997). The incidence of HIV/AIDS among Latina women has increased from 7% in 1985 to 21% in 1998 (Centers for Disease Control and Prevention, 1998). In addition, Latina women are over represented (34%) in the reported cases of domestic violence (Bureau of Justice Statistics, 1996).

HIV risk behavior has been linked to partner abuse and violent traumas of all types among poor, urban women (Wingwood and DiClemente, 1997). Similar cultural factors put Latina women at risk both for acquiring HIV and for being victims of domestic violence (Land, 1994; O'Keefe, 1994). The identified cultural factors include stigma towards condom use, traditional gender roles, power differentials, attitudes, beliefs, perceptions, acculturation, immigration status, limited English skills, isolation, sexual customs, discrimination, alcohol or drug use, educational and socio-economic status, and religion (Marin, Tschann, Gomez, & Kegeles, 1993; Torres, 1991).

Findings are scarce regarding the relationships between partner abuse and other sexual risk variables such as bartering for sex, having sex with a risky partner (Gilbert, El-Bassel, Schilling, Catan, & Wada, 1996), and being afraid to negotiate safer sex (Amaro, 1995). Several factors may mediate the associations between partner violence and sexual risk behaviors. One such factor is childhood abuse, which research has shown to be associated with both partner abuse and sexual risk behaviors (Gilbert, El-Bassel, Schilling, & Friedman, 1997).

## Aims

This study explores the contexts and relationships linking partner abuse and sexual risk behaviors among Latina women. It has four primary aims. The first aim is to delineate the contextual phenomena underlying the co-occurrence of HIV risk behavior and partner abuse episodes that Latina HIV-positive women have experienced. The contextual domains investigated are elicited from the subjects' personal narratives. The domains are: relationship contexts, normative meanings, values and beliefs, affect and cognition, and event sequences of partner abuse and HIV risk behavior.

The second aim is to describe qualitatively and in-depth the relationships between HIV risk behavior and partner abuse among HIV-positive battered Latina women. The relationships include how physical abuse by a partner and fear of this abuse are related to sexual coercion, being forced to have unprotected sex, and failure to use condoms. Circumstances precipitating episodes of partner abuse are also being studied. These circumstances include the consequences of negotiating condom use, insistence on using condoms, disclosing HIV serostatus, STDs and extra relationship affairs, having a sexual relationship with a risky sexual partner, and exchanging sex for money or drugs.

The third aim is to examine the relationship between history of abuse and: (1) background variables (eg., age, ethnicity, acculturation, immigrant status, limited language proficiency); (2) HIV risk factors (a woman's insistence on using condoms, unprotected sexual acts, number of sexual partners, sex trading, and occurrence and disclosure of STDs); and (3) post traumatic stress disorder and the lasting effects of victimization.

The fourth aim is to generate research questions to study the development of an intervention for HIV-positive Latina women who are living in abusive relationships.

## Methods and findings

Participants for this study were selected from two agencies in the greater New York area, Victims Services and the Hispanic AIDS Forum, chosen because each agency serves a large number of Hispanic women. A sample of twenty women participated in focus groups and in-depth interviews. To qualify, participants were identified by each agency as having experienced some form of abuse (life-threatening, physical, sexual, emotional, or verbal), being of Latino/Hispanic background, HIV-positive, and between the ages of 18 to 55 years of age. After several meetings of researcher and staff at the agencies, participants were recruited by agency staff and by fliers.

Three focus groups held in Spanish and English and in-depth interviews were conducted with 20 Latina women. The initial questions concerned their experiences with HIV/AIDS and with partner abuse. Subsequent individual interviews were conducted with key informants who had participated in the focus groups.

The focus groups and in-depth interviews were audiotaped, transcribed, and then analyzed by two raters to obtain consistency of coding and themes. Using grounded theory approach (Strauss & Corbin, 1990) as a theoretical method, data were analyzed and further questions generated. Research questions were clarified using member checking techniques and the constant comparative method. Once the codes and themes were generated, findings were presented to two groups of participants to elicit responses and obtain feedback on the accuracy of the findings.

Four major themes emerged from an analysis of the data: abuse, vulnerability, living with HIV/AIDS, and belief in '*la suerte*'. Abuse included the social context of childhood experiences, family, and abuse by partners. All the women in the

study suffered from abuse both during their childhood and adult lives. For many of these women, the abuse created a pattern leading to further deprivation, victimization, and destructive behavior. Some women fell into prostitution and drug abuse as a way to survive financially as well as a way to deal with the scar of the abuse. Women spoke about cultural factors such as gender roles determined by '*Marianismo*', which can be broadly defined as the importance of motherhood and of deferring to men; '*Machismo*', which can be broadly defined as exaggerated masculinity; and the attitude toward virginity. They also defined the different types of abuse, listing verbal, emotional, physical, and HIV transmission.

Women in the study spoke about the intersection of socio-economic factors and the risk of contracting HIV. The factors raised included being foreigners, poor, uneducated, unemployed and possessing limited English skills. The women also discussed their growing vulnerability as they become increasingly more ill, await their residency, fear deportation and losing basic needs such as food, shelter and, especially medication.

The participants' health status influences their lives by determining the quality of their daily existence. The virus drives their everyday struggles to make ends meet, the quality of their relationships with families and significant others, and to whom they will disclose their status. The virus, in combination with traditional gender roles and undocumented status, creates these relationships. Traditional gender roles are implicated in the women's infection, including their own inability to negotiate safer sex, the traditional role of fidelity, and men's frequent infidelity. Being HIV-positive affects the women's current relationships and their ability to establish new relationships, including finding someone who can help support them.

*Suerte* means fate. Depending on the context, it can refer to good or bad fate. *La suerte* connotes powerlessness, a force capable of having a domino effect on a

life. The women in the study responded to HIV/AIDS with a fatalistic attitude, seeing it as beyond their control. The women reported that because they did not have *suerte* from the very beginning, they were destined to lead poor and desperate lives.

The study suggests that HIV/AIDS and partner abuse intersect and many times run parallel in these women's lives. The risks involved in their abuse are the same risks that put them at risk for being infected with HIV. Cultural factors such as '*machismo*', '*marianismo*', and *la suerte* provide a frame of reference of risk, but also of possible courses of prevention and intervention with Hispanic women.

*The study's principal investigator is Claudia L. Moreno, Ph.D.*

### References

Amaro, H. (1995). Love, sex and power: Considering women's realities in HIV prevention. *American Psychologist*, 50(6), 437-447.

Bureau of Justice Statistics. (1996). *Female victims of violent crimes*. Washington, D.C.: U.S. Department of Justice.

Centers for Disease Control and Prevention (1998). *HIV/AIDS Surveillance Report*. 10(2).

Gilbert, L., El-Bassel, N., Schilling, R., & Friedman, E. (1997). Childhood abuse as a risk for partner abuse among women on methadone maintenance. *American Journal of Drug and Alcohol Abuse*, 23(4), 581-595.

Gilbert, L., El-Bassel, N., Schilling, R., Catan, V., & Wada, T. (1996, November). Partner abuse and sexual risk behavior among women on methadone. *American*

Public Health Association 124th Annual Meeting & Exposition. New York, New York.

Inciardi, J., & Pottinger, A. (1991). Kids, crack and crime. *Journal of Drug Issues*, 2(2), 257-270.

Land, H. (1994). AIDS and women of color. *Families in Society*, 75(6), 355-361.

Marin, B. V., Tschann, J. M., Gomez, C. A., & Kegeles, S. M. (1993). Acculturation and gender differences in sexual attitudes and behaviors: Hispanic vs. non-Hispanics White unmarried adults. *American Journal of Public Health*, 83(12), 1759-1761.

Strauss, A., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. Newbury Park, CA: Sage.

O'Keefe, M. (1994). Racial/ethnic differences among battered women and their children. *Journal of Child and Family Studies*, 3(3), 283-305.

Torres, S. (1991). A comparison of wife abuse between two cultures: Perceptions, attitudes, nature and extent. *Issues in Mental Health Nursing*, 12(1), 113-131.

U.S. Census Bureau. (1997). *Hispanic Population in the United States: March 1997* (Update).

Washington, D.C.: Author.

Wingwood, G., & DiClemente, R. (1997). The effects of an abusive primary partner on the condom use and sexual negotiation practices of African-American women. *American Journal of Public Health*, 87(6), 1016-1018.