

A Brown Paper: The Health of South Asians in the United States



The *Brown Paper* is a groundbreaking compendium and review of health research and literature on South Asians in the United States. Published in 2002, the *Brown Paper* evaluates and summarizes existing knowledge about key health indicators for South Asian Americans.

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Intimate Partner Violence

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Objectives: The author reviewed available literature on intimate partner violence (IPV) among South Asians in the United States and report on the unique socio-cultural issues that women face, including barriers to seeking help.

Key Findings: IPV is a great concern within South Asian American communities, with one studying finding 37% of South Asian women experiences violence in the past year. Particular cultural issues that influences women’s decisions to leave an abusive relationship include, duty to family, the “green card factor,” and financial dependence. Women who seek out services, continue to face barriers including the “model minority” myth and language differences.

Recommendations: IPV organizations should collaborate closely with South Asian American communities to determine effective and culturally acceptable methods for conducting research and outreach.

Introduction

Intimate partner violence (IPV), domestic violence, spousal abuse, partner abuse, and battering are all terms that refer to abusive behaviors that occur within intimate relationships. Such behaviors typically occur as part of a pattern of abusive behavior and control, rather than as isolated acts of aggression.¹ While IPV can take on a variety of forms, the five most commonly identified types of abuse are: physical, verbal, emotional, sexual, and economic.² Violence in intimate relationships almost always consists of more than one or all of the types listed, and the extent of abuse typically increases over time.³ Abuse is any form of coercion, power, and control – physical, sexual, verbal, mental, or economic – perpetrated on an individual by another that arises from social relations that may be created within the context of an intimate relationship.⁴ While violence is often aimed at men as well, for the purposes of this chapter, we discuss IPV against women because it accounts for the majority of cases.

¹ McGrath ME, Hogan JW, Peipert JF. A prevalence survey of abuse and screening for abuse in urgent care patients. *Obstet Gynecol.* 1998;91(4):511-4.

² Flichtcraft A, Hadley S, Hendricks-Matthews M, McLeer S, Warshaw C. *Diagnostic and treatment guidelines on domestic violence.* Chicago, IL: American Medical Association; 1992.

³ Rodriguez MA, Bauer HM, Flores-Ortiz Y, Szkupinski-Quiroga S. Factors affecting patient-physician communication for abused Latina and Asian immigrant women. *J Fam Pract.* 1998;47(4):309-11.

⁴ Abraham M. *Speaking the unspeakable: Marital Violence among South Asian immigrants in the United States.* New Brunswick: Rutgers University Press; 2000.



Epidemiology of IPV among South Asians in the United States

IPV is one of the most serious and widespread public health issues in the United States. Estimates reveal that two to four million women experience IPV each year in the US alone, and IPV may occur in as many as one in four US families.⁴ Research on IPV among South Asian families in the US is minimal, however preliminary surveys have found prevalence rates (percentage of cases in the population) greater than the US average, and closer to rates found in South Asian, which are at 30-47%.⁵

Asian American and Pacific Islander (AAPI) women in the United States are grossly under-represented in prevalence studies of partner abuse.⁶ A part of this under-representation can be attributed to racial bias that characterizes traditional research on battered women.⁷ For instance, historically, telephone interviews served as a major source of IPV data. However, such methodologies exclude women who may not speak fluent English or do not have access to telephones. In addition, many recent prevalence studies have excluded subjects who could not speak or read English.^{1,8,9} The paucity of data on IPV among South Asian American women is also, in part, due to women rarely seeking help outside of their community and a general reluctance of Asian American communities to portray themselves as problematic to outsiders (non-South Asian).⁹

Additionally, the few studies that do exist focus on immigrant and first generation married women. While such studies on the immigrant experience are important, little is known about the extent of IPV in second generation, unmarried, or same sex partnerships. Now that this generation is expanding in numbers, and the types of intimate partnerships are diversifying, there is a real need to understand how IPV differs in prevalence and in form.

Despite many challenges, several investigators have employed creative and innovative methodologies for pursuing IPV research in South Asian American communities. In 1999, Rag and colleagues conducted a community-based study with 160 South Asian women in the Greater Boston area. This study found that 40% of the surveyed women reported physical IPV, sexual IPV, and/or a need for health services due to IPV, and 37% of the sample indicated some form of IPV during the past year.¹⁰ The Asian Family Violence Report published in 2000, administered by the Asian Task Force against Domestic Violence, found that 44% of South Asian participants surveyed reported

⁵ Heise L, Ellsberg M, Gottemoeller M. Ending violence against women. Population Reports. Baltimore, MD: Johns Hopkins School of Public Health, Population information Program; September 1999.

⁶ Novello AC, Rosenberg M, Saltzman L, Shosky J. From the Surgeon General, US Public Health Service. JAMA 1992;267(23):31-32.

⁷ Huisman KA. Wife battering Asian American communities. Violence Against Women 1996;2:260-283.

⁸ McKenzie KC, Burns RB, McCarthy EP, Freund KM. Prevalence of domestic violence in an inpatient female population. J Gen Intern Med. 1998;13(4):277-279.

⁹ Pinn VW, CHunko MT. The diverse faces of violence: minority women and domestic abuse. Acad Med. 1997;72 (1 Suppl):S65-71.

¹⁰ Raj A, Silverman JG. Intimate partner violence against South Asian women in greater Boston. J Am Med Womens Assoc 2002;57(2):111-114.



knowing a women who has been abused or injured by her partner. Additionally, many respondents felt that in-laws often played a critical role in “family violence” within South Asian families.¹¹ Another survey of 94 Indian and Pakistani women in the US found a rate of 48% for experience of lifetime physical abuse.¹² Clearly, IPV is an issue of great concern within South Asian American communities.

Qualitative research has highlighted the interplay of limited research and resources, cultural and linguistic factors, and experiences with immigration collectively functioning to prevent many South Asian American women from seeking help. Still the image that they are passive victims is disempowering and misleading. Mehrotra found in a qualitative analysis that South Asian women experiencing violence often do engage in acts of resistance, such as taking money or calling relatives from a phone booth to cope with their situations and to claim a sense of empowerment.¹³

Some studies have also documented how certain cultural values and norms that are patriarchal in nature can influence to form of abuse and how South Asian women perceive and respond to a partner’s violence. For example, in an exploration of sexual abuse in South Asian immigrant marriages, Abraham documents how traditional ideas of natural male dominance and female submissiveness often lead to the legitimization of rape within marriage. Many men see sexual gratification as a marital right – 60% of the 25 women Abraham interviewed between 1991-1993 have been forced to have sex with their husbands against their will.¹⁴ Singh and Unnithan analyzed several cases of wife-burning in the US, a form of lethal abuse. They note that while rare among the general US population, wife-burning has a legacy in South Asian cultures as a traditional form of violence, and is employed by South Asian immigrant perpetrators.¹⁵

Experiences and Perceptions of IPV among South Asians

The literature is consistent in pointing to several key themes that influence women’s decision to seek help:

- *Due to Family:* From childhood, South Asian women are typically engrained with a sense of duty to be a good wife and a mother. In order to maintain peace within

¹¹ Yoshioka M, Dang Q. Asian family violence report: A study of the Cambodian, Chinese, Korean, South Asian, and Vietnamese communities in Massachusetts. Boston, MA: The Asian Task Force Against Domestic Violence;2000.

¹² Adam NM. Domestic Violence Against Women within Immigrant Indian and Pakistani Communities in the United States. Jane Addams College of Social Work, University of Illinois at Chicago; 2001. Available at: http://www.crescentlife.com/psychissues/dv_us_immigrants.htm. Accessed August 2002.

¹³ Mehrotra M. The social construction of wife abuse: experiences of Asian Indian women in the United States. *Violence Against Women* 1999;5(6):619-640.

¹⁴ Abraham M. Sexual Abuse in South Asian immigrant marriages. *Violence Against Women*. 1999;5(6):591-618.

¹⁵ Singh RN, Unnithan NP. Wife burning: Cultural cues for lethal violence against women among Asian Indians in the United States. *Violence Against Women*. 1999;5(6):641-653.



the family, women often are reluctant to speak their abuse.¹⁶ A 1996 qualitative study which interviewed 12 Asian Indian women who have been abusive relationships concluded that the women “expressed a strong desire to be true to their culture, which supposedly does not allow disintegration of marriage under any circumstances.”¹⁷ Children probably are one of the most important factors in deciding whether to leave an abuser.¹⁸ Such rigid adherence to cultural norms may be gaining strength among South Asians in the United States in the name of “maintaining culture.”

- *Saving Face:* South Asian culture often places a great emphasis on “saving face.” South Asian American families are often characterized as collective versus individualistic. Thus, women who experience IPV may be hesitant to unveil such information to outsiders out of fear of bringing shame to the family, as well as the community at large.¹⁶ Dasgupta and Warriar found in their interviews that women believed that the community would consider them “disloyal to the culture” if they stopped accepting the abuse.¹⁷
- *Financial Dependence:* In the South Asian community men typically have been the primary immigrants, whereas women entered the country as their dependents: wives and daughters. In South Asian, women had fewer opportunities than men to receive advanced education and thus, when arriving in the US often have lower incomes than their husbands. They may not be employed at all due to cultural or visa restrictions, leaving them financially dependent on their husbands.¹⁹ Such dependence leaves women vulnerable to additional threats from their husbands, and more importantly with no other means of support, makes it impossible for some women to leave.⁴
- *Isolation:* Many South Asian women in the US face extreme isolation as their family and friends often reside in South Asian and leaving a scarce support system within the US.²⁰ In her unstructured interviews in the late 1990s with 25 South Asian women experiencing IPV, Abraham explored issues of isolation by spouse, family and friends, and by the ethnic community and other formal institutions. Such feelings of isolation are often exacerbated due to the fact that many South Asian women have had arranged marriages, and thus have come to the US to become wives to men they hardly know. She concludes that, “isolation, was one of the most painful and disempowering aspects of marital abuse in a foreign country.”²⁰

¹⁶ Rahim H. Virtue, Gender and the family: reflections on religious texts in Islam and Hinduism. *Journal of Social Distress and the Homeless*. 2000;9(3):187-199.

¹⁷ Dasgupta SD, Warriar S. In the Footsteps of Arundhati: Asian Indian Women’s Experience of Domestic Violence in the United States. *Violence Against Women*. 1996;2(3):238-259.

¹⁸ Naresh H, Surendran A. *Silence: Domestic Violence*. Sangam. New York, NY; Columbia University: Fall 1996.

¹⁹ Dasgupta SD. Charting the course: An overview of domestic violence in the South Asian community in the United States. *Journal of Social Distress and the Homeless*. 2000;9(3):173-185.

²⁰ Abraham M. Isolation as a form of marital violence: The South Asian immigrant experience. *Journal of Social Distress and the Homeless*. 2000;9(3):221-236.



- “*Green Card Factor:*” In many situations women are dependent upon their spouses for immigration status and visa sponsorships. Husbands may threaten deportation as an abusive strategy to maintain power and control over their wives.^{4,21} Many women do not know about the Violence Against Women Act (VAWA), which allows battered spouses and children of US citizens and permanent residents to submit their own petition for alien relative to the Immigration and Naturalization Service and, if approved, to apply for adjustment of status to permanent resident.

In addition to the individual socio-cultural concerns that can discourage women from seeking help, South Asian Americans as well as immigrants face unique barriers within health and social services systems.²²

- “*Model Minority Myth:*” The “model minority myth” assumes that the Asian American population is a healthy, well-off community that does not require assistance or social services.²³ Much of the South Asian community, as well as society in general, still hold on to the belief that IPV and the cultural stigma that surrounds the issue, further contributes to the perpetuation of this myth.¹² Without accurate information, it is difficult to make a compelling argument that a significant problem regarding IPV exists. The dearth of data can be used in a “circular (and negative) manner, serving both to justify the status quo and to perpetuate or ‘reproduce’ ignorance and neglect of the issue at hand,”¹³ resulting in a lack of culturally relevant strategies, interventions, and programs to assist women who suffer abuse.
- *Language Constraints:* Having little or no English-speaking abilities, in a largely monolingual (English-only) service system, have been cited as a major challenge for South Asian American women experiencing IPV.¹⁴
- *Variations in Communication Styles:* Differing patterns of communication between Western IPV practitioners and Asian American clientele have been reported to hinder effective interventions in this population. For example, while Asian communication styles have been described as indirect and nonverbal, Western communication patterns are characterized as being direct and straightforward.¹⁵
- *Lack of Resources:* Mainstream shelters have a dearth of culturally-appropriate resources, such as bilingual or bi-cultural staff and foods. Similarly, IPV prevention and educational efforts, as well as batterer programs, are most often not designed with cross-cultural considerations in mind.¹⁶

²¹ Ho C. An analysis of domestic violence in Asian American communities: A multicultural approach to counseling. In: Brown L, Root M, eds. Diversity and complexity in feminist therapy. Binghamton, NY: Harrington Park Press; 1980.

²² Yoshiama M. Immigrants-in-context framework: Understanding the interactive influence of socio-cultural contexts. Evaluation and Program Planning. 2001;24:307-318.

²³ Takaki R. Strangers from a different shore: A history of Asian Americans. New York, NY: Penguin Books; 1989.



To counter these barriers, several organizations and support groups have sprouted nationwide to serve South Asian women experience IPV. Some temples, mosques and gurdwaras provide safe spaces for women to talk about abuse and other family problems, and help South Asians in the US preserve the family structure.¹⁸ Over 30 non-sectarian organizations throughout the country provide legal help, shelter, support and counseling to South Asian women using an empowerment approach. They have also contributed to the collective knowledge about South Asian Violence as well as best approaches for advocacy and intervention.^{19,24,25} These organizations are more visible and attract both first generation married women and second generation women experiencing violence in non-marital relationships. They work together through coalitions and share experiences at regularly held conferences.²⁶

Health care providers have an important role in helping people experiencing violence, as they are often the first to know. Health care providers can learn how to ask about violence in ways that their clients find helpful. They can give women empathy and support. They can provide medical treatment, offer counseling, document injuries, and refer their clients to legal assistance and support services.⁵

Conclusion

In order for IPV to be effectively addressed, outreach efforts must target both mainstream and South Asian American communities. IPV service providers must be trained in cultural competency and incorporate methods for addressing the needs of South Asian Americans (e.g., language, transportation, immigration laws) into existing services. By working closely with South Asian Americans, researchers will be able to better determine effective and culturally acceptable methods for collecting data and conducting research within this community. Community-wide education efforts must be implemented to target South Asian communities. Lastly, policies that seek to reduce classism, racism, and sexism must be supported in order to promote gender and cultural equity within the US.

Recommendations

- Encourage health care providers to screen for IPV and educate them on the importance of documentation in the medical records when treating a person who has been a victim of violence.
- Develop and advocate for effective national public policy and international instruments to improve the lives of women and their children in situations of violence.

²⁴ Preisser AB. Domestic Violence in South Asian communities in America: Advocacy and Intervention. *Violence Against Women*. 1999;5(6):684-699.

²⁵ Merchant M. A comparative study of agencies assistance domestic violence victims: Does the South Asian community have special needs? *Journal of Social Distress and Homeless*. 2000;9(3):249-259.

²⁶ South Asian Coalition Against Violence. Listserv. 2002.



- Produce culturally and linguistically accessible resources and provide technical assistance to better respond to the specific issues faced by women in situations of violence.
- Increase public awareness of the complex issues facing women in situations of violence and the obstacles that they face because of language and culture, immigration law and other barriers.
- Organize networks and coalitions to strengthen and coordinate efforts to assert the rights of women in situations of violence on the local, regional, national, and international levels.
- Collaborate closely with South Asian American communities in order to determine effective and culturally acceptable methods for conducting research and outreach.
- Support research on the extent of IPV in second generation, unmarried, and the same sex South Asian partnerships.

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