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PERCEIVED NEIGHBORHOOD SOCIAL DISORDER AND ATTITUDES TOWARD DOMESTIC VIOLENCE AGAINST WOMEN AMONG LATIN-AMERICAN IMMIGRANTS

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Abstract

In the present study we explore the relationship between perceived neighbourhood social disorder (perceived crime and insecurity in residential areas) and attitudes toward domestic violence against women in Latin-American population in Spain (N =350). Perceived severity of incidents of domestic violence, its acceptability, victim-blaming attitudes and knowing victims of domestic violence are analyzed among immigrant population. Results show that the perception of neighbourhood social disorder is associated with a lower perceived severity of incidents of domestic violence, with greater acceptability of violence, and higher degree of victim-blaming. Also, those residents of disorder neighbourhoods also know more victims of domestic violence. These results suggest the social characteristics in residential areas, such as disorder and deprivation, configure an impoverished social context that might favour attitudes that condone domestic violence against women.

Keywords: attitudes, social disorder, immigration, neighbourhood, domestic violence against women.

Resumen

El presente estudio tiene como objetivo explorar la relación entre la percepción de desorden social en el vecindario (percepción de crimen e inseguridad en el área residencial) y las actitudes hacia la violencia doméstica contra la mujer en la población de inmigrantes Latinoamericanos residentes en España (N =350). En este estudio se analizan la gravedad percibida de los incidentes de violencia doméstica, la aceptabilidad de la violencia contra la mujer, la culpabilización de las víctimas y el conocimiento de mujeres víctimas de violencia doméstica entre la población inmigrante. Los resultados indican que la percepción de desorden social en el vecindario está asociada a una menor percepción de gravedad de los incidentes de violencia, a una mayor aceptabilidad de la violencia y culpabilización de las víctimas y un mayor conocimiento de víctimas. Estos resultados sugieren que características de las áreas residenciales como el desorden y la privación constituyen un entorno social empobrecido que puede favorecer actitudes que condonen la violencia doméstica contra la mujer.

Palabras clave: actitudes, desorden social, inmigración, vecindario, violencia doméstica contra la mujer.

Introduction

A long tradition in social sciences research has aimed to understand the link between deprivation in communities and neighborhoods and rates of violence and crime. This research tradition that emphasizes the macrosocial or community level of explanation has also gain great appeal for those scholars who aim to analyze the phenomenon of domestic violence beyond the individual and situational levels of explanation (Short, 1985; Sampson & Lauritsen, 1994; Lauritsen & Schaum, 2004). However, although the relationship between rates of violence and different characteristics of communities and neighborhoods such as social impoverishment, poverty, or demographic composition, is well established, the way in which these neighborhood characteristics influence rates of violence still remains a matter open to debate and further research (Sampson, Raudenbush, & Earls, 1997; Korbin, 2003; Coulton, Crampton, Irwin, Spilsbury, & Korbin, 2007).

In this paper we analyze the relationship between perceived social disorder in the neighborhood and attitudes toward partner violence against women among its residents. A sizeable body of research has illustrated the relationship between rates of domestic violence and different neighborhood characteristics, such as deprivation, social disorder, or social impoverishment. This relationship has been observed for different types of domestic violence such as child maltreatment (Coulton, Korbin, & Su, 1999; Garbarino & Sherman, 1980; Gracia & Musitu, 2003; see Coulton et al., 2007, for a review), or intimate partner violence (Benson, Greer, Demaris, & Van Wyk, 2003; Browning, 2002; Cunradi, Caetano, Clark, & Schafer, 2000; O'Campo, Gielen, Faden, Xue, Kass, & Wang 1995). For example, in child maltreatment research, in addition to the observed link between various aspects of neighborhoods and greater rates of reported child maltreatment, a number of studies have shown that residents from

neighborhoods that vary in perceptions of neighborhood disorder have different views on issues such as the etiology, the definition, the severity of incidents, and what to do about it (Gracia & Herrero, 2006; Korbin, 2003; see Coulton et al., 2007, for a review). In intimate partner violence research, however, except for few exceptions (Herrero & Gracia, 2005; Gracia & Herrero, 2007), the analysis of the potential influence of neighborhood characteristics on residents' attitudes toward partner violence against women has received little attention.

A basic idea that motivates this study is that deprivation and disorder in residential areas contribute to create a climate of tolerance and acceptability of partner violence against women, which in turn may contribute to its greater incidence in these communities. In terms of Sampson & Lauritsen (1994) these community contexts "seem to shape what can be termed cognitive landscapes or ecologically structured norms (normative ecologies) regarding appropriate standards and expectations of conduct" (p. 63). For Sampson & Lauritsen (1994), structurally disorganized communities are conducive to the emergence of subcultural value systems and attitudes that seem to legitimate, or at least provide a basis of tolerance for, crime and violence. Drawing from ethnographic research, Sampson & Lauritsen emphasize the idea that dominant values become irrelevant in certain community contexts. In a context in which violence and crime is part of everyday life, and where it tends not to be condemned but, rather, tolerated, the probability of violent incidents will probably increase (Anderson, 1978; Horowitz, 1987).

Diminished social control has been also considered as a relevant factor responsible for the relationship between neighborhood characteristics and violence. Social control refers generally to the capacity of a group to regulate its members according to desired principles (Janowitz, 1975). For Sampson et al. (1997), a reason

why some neighborhoods show low levels of violence is that residents are able to control behavior in their own neighborhoods. Conversely, concentrated disadvantage and disorder in neighborhoods have been linked to the lack of social control in the community. According to these ideas, deprivation, disorder and social impoverishment can foster a culture of tolerance, where violence can be seen as an acceptable way to solve interpersonal conflicts or to increase personal status (Wolfgang & Ferracuti, 1982). When tolerance and acceptability characterize the values and behavioral expectations related to the use of violence in these communities, the informal social control of violence in general, and partner violence in particular, will be of little relevance. As some research suggest (Browning, 2002), informal social control has greater regulatory power in neighborhoods with lower tolerance of partner violence. As Browning (2002) noted, “violence between intimate partners may not be recognized as deviant in some communities and therefore would not trigger the mobilization of social control” (p. 835). On the other hand, attitudes of tolerance and acceptability of partner violence contribute to maintaining a climate of social tolerance that not only may reduce inhibitions for perpetrators, but also probably makes it more difficult for women to make partner violence visible, choosing not to report or abandon the relationship (Gracia, 2004; Gracia & Herrero, 2006).

The present study

The present study can be contextualized in a research tradition aiming to identify those social and contextual factors that contribute to create an acceptable climate for violence against women (Fagan, 1989; Gelles, 1983; Gracia, 2004; Gracia & Herrero, 2006, 2007; Klein, Campbell, Soler, & Ghez, 1997). Our aim is to analyze the relationship between perceived social disorder in the neighborhood and a set of attitudes

toward partner violence against women in a sample of Latin-American immigrants living in Spain. In this section we will describe briefly the main variables of interest of the study, the hypotheses to be tested, as well as the rationale behind the decision to test hypotheses using a minority group of the Spanish population: Latin-American immigrants.

Social disorder refers to people, and can be exemplified by the presence of people taking drugs on the streets, drug-dealing, fighting on street corners, prostitution, crime or other activities (both criminal and noncriminal) that create a sense of danger, and which are perceived by residents as signs of the breakdown of social control (Ross & Jang, 2000; Taylor & Shumaker, 1990). For Sampson and colleagues (Sampson & Raudenbush, 1999; Sampson, et al., 1997), social disorder is also an indicator of neighbors' unwillingness to intervene when a crime is being committed, or ask the police to respond.

Drawing from these ideas, we would expect higher levels of partner violence against women in neighborhoods characterized by social disorder. Therefore, our first hypothesis in this study is that residents from neighborhoods that vary in perceptions of disorder will have different levels of exposure to incidents of partner violence against women. Hence, we expect that residents perceiving high level of social disorder in their neighborhood will know more women victims of partner violence.

The main aim of this study is to analyze the relationship between perceived neighbourhood social disorder, and attitudes of tolerance and acceptability of partner violence against women. To do so, relationships between perceived neighborhood disorder and the following sets of attitudes toward partner violence against women will be explored: perceived severity of incidents, the acceptability of partner violence, and victim-blaming attitudes (see Gracia & Herrero, 2006, for a detailed analysis of these

variables). Our hypothesis, regarding these variables, is that high levels of perceived social disorder in the neighborhood will be associated with attitudes of greater tolerance of partner violence against women: lower perceived severity of incidents of partner violence, greater acceptability of partner violence, and more victim-blaming attitudes, than those respondents perceiving lower levels of social disorder in the neighborhood.

To test hypothesis, we use a sample of Latin-American immigrants living in Spain. The reason behind this decision is that in this population there are three characteristics that make it particularly appropriate for the objectives of the study. Firstly, there is a disproportionate high incidence of partner violence against women among immigrant population in Spain. Data of officially reported partner violence against women cases in Spain shows that about one third of all reported cases were perpetrated by immigrants (Instituto de la Mujer, 2007). On the other hand, Latin-American population is one of the largest and growing groups of immigrants in Spain (Ministerio del Interior, 2004). And, finally, immigrants tend to seek out housing in low-rent neighborhoods which are often deprived residential areas (Observatorio Permanente de la Inmigración, 2005). In this respect, it has been suggested that higher levels of involvement by minorities and immigrants in violence are mediated in part by the community context where they live -environments of extreme poverty or highly disadvantaged, segregation, social isolation (Benson, Wooldredge, Thistlethwaite, & Fox, 2004; Sampson & Lauritsen, 1994; Wilson, 1987). According to these ideas, we predict that immigrants perceiving higher level of social disorder in their neighbourhood will show more tolerance towards domestic violence than those immigrants perceiving lower levels of social disorder.

Finally, as some studies have found associations between sociodemographic variables and attitudes toward partner violence (Gracia & Herrero, 2006; MacMillan &

Gartner, 1999; Straus, Gelles, & Steinmetz, 1980; Straus, Kaufman, & Moore, 1997; Suitor, Pillemer, & Straus, 1990), we will use the following socio-demographic controls: gender, age, education, and income.

Method

Participants

For this study we used data from 350 Latin American immigrants living in the Valencian Community (Spain). Participants were identified following a two-step process. In the first step, researchers contacted non-governmental organizations and other legally established associations in the Valencian Community that worked with Latin American immigrants. These associations covered a wide range of activities (from legal assistance to spare-time activities) with immigrants.

In the second step, participants were contacted through these organizations and associations with the aid of the staff personnel, and invited them to participate in the study. Self-administered questionnaires were given to those who agreed to participate in the study with instructions to return them once completed.

With regard to sociodemographic distribution, there was a greater percentage of women (54.6%), averaged age was 33.5 years-old ($SD = 9.8$), and for the most part, participants had completed high-school (55.6%) or university studies (33.8%). In contrast with this distribution of education in the high-end of the scale, household income was concentrated in the low-end of the scale: 61.3% of participants indicated a annual household income of 12,000 Euros or less, being the averaged income level 6,000-12,000 Euros a year.

Instruments

Social disorder. The approach to measure social disorder used in this study is based on residents self-reports and, therefore, it refers to perceived or informed social disorder by residents (see Gracia & Herrero, 2007; Herrero & Gracia, 2005; Ross & Jang, 2000, for a similar approach). As Ross and Jang (2000) put it, although two persons might describe the same neighborhood in somewhat different terms, both are describing the same objective neighborhood. Moreover, prior research has found from moderate to high positive correlations between perceptions of social disorder and assessments of independent observers (Perkins & Taylor, 1996). As Korbin and Coulton (1996) noted, this approach would be in accordance to Bronfenbrenner's (1979) expanded ecological perspective which also encompass neighborhood ecology as subjectively experienced.

Social disorder was operationalized upon responses to the following questions: In the last six months, which of the following situations have occurred in your neighborhood?: Fights with weapons, violent arguments among neighbors, gangs fights, thefts or assaults in houses and acts of racism and xenophobia (Gracia, Herrero, & Lila, in press). Replies were coded (0) No, (1) Yes. The Perceived Neighborhood Social Disorder Index was computed summing up all the 'yes' responses for each participant. Participants were assigned to one of these groups: low disorder (65%, with a zero score in this variable); and high disorder (35%, $M = 1.1$, $SD = .33$).

Perceived severity. Perceived severity of incidents of partner violence against women was evaluated using a scale (Gracia, García, & Lila, 2008) in which participants had to rate on a 10-point scale the severity of 8 hypothetical scenarios of partner violence against women (e.g., "A couple has an argument, he hits the woman, and later asks for her forgiveness", "A woman is threatened and insulted constantly by her

partner, who sometimes pushes or hits her”). Cronbach’s alpha value for this scale was .92. Averaged score for this sample was 9.1 ($SD = 1.1$), that suggests that levels of perceived severity were high for most participants.

Acceptability of violence towards women. An indicator of acceptability of domestic violence elaborated for the Eurobarometer “Europeans and their views on domestic violence against women” (European Commission, 1999), was used. Participants were asked their opinion about domestic violence. Possible responses were: 1- unacceptable in all circumstances and always punishable, 2- unacceptable in all circumstances but not always punishable, 3- acceptable in some circumstances, and 4- acceptable in all circumstances (see also, Gracia & Herrero, 2006a). Mean was 1.3 ($SD = .7$) suggesting that participants in this study tended not to accept domestic violence against women.

Victim-blaming attitudes. We measured the tendency to blame the woman victim of domestic violence adapting the following question from the same Eurobarometer: a cause of domestic violence against women is the provocative behavior of women. Category responses ranged 1- completely disagree, to 5-, completely agree. Mean was 2.3 ($SD = 1.1$), indicating that participants tended to disagree with this statement.

Personal exposure to domestic violence. We asked whether participants knew in their social circle (friends, neighbors, or work) a woman victim of domestic violence (1- no, 2- yes). Almost half of participants (45%) knew a victim of domestic violence in their social circle.

Data Analysis

To explore the relationship between social disorder and covariates of the study, we conducted a Multivariate Analysis of Variance (MANOVA) to compare average

scores in all variables of the study across groups of social disorder (low and high disorder). We also previously analyzed the relationship of socio-demographic variables with all variables of the study to check if their inclusion in the analyses were justified.

Results

Regarding the relationships of socio-demographic variables with social disorder, we found that averaged age for the high social disorder group was lower than for the low social disorder group (ANOVA, $31.1 < 34.9$, $p < .001$). Gender, household income and education were distributed homogeneously across groups of social disorder.

Table 1. Results of Multivariate Analysis of Variance¹ for groups of social disorder (N =350).

Variable	<i>F</i>	<i>p</i>	Social disorder	
			Low	High
Know victim ^a	3.10	.010	0.52	0.60
Perceived severity	2.90	.014	9.23	8.93
Aceptability	3.11	.010	1.32	1.36
Victim-blaming	5.32	.000	2.20	2.50

Note: ¹ Results controlled for sociodemographic variables (age, gender, household income, and educational level). ^a 0 = no, 1 = yes. The averages are percentages (52% and 60%).

As for the relationships between each socio-demographic variable and covariates of the study, we found different patterns of statistical relationships. Compared to women, men perceived lower levels of severity (ANOVA, $8.8 < 9.3$: $p < .01$), showed

higher levels of acceptability of domestic violence (ANOVA, $1.5 > 1.4$; $p < .05$), and also informed of higher levels of victim-blaming (ANOVA, $2.6 > 2.3$; $p < .001$). Women expressed knowing other women victims of domestic violence more than men (61% vs. 47%) ($\chi^2 = 5.6$, $df = 1$, $p = .18$). Linear regression analyses showed that knowing a victim was positive and significantly related to age: older participants knew more victims than younger participants ($\beta = .14$, $p = .020$). Household income was negatively related with both victim-blaming ($\beta = -.14$, $p = .045$) and acceptability of domestic violence ($\beta = -.17$, $p = .012$): victim-blaming attitudes and acceptability of domestic violence are found more easily in the lower-end of household income level.

Given these patterns of statistical relationships, all socio-demographic variables in the analysis to control for spurious relationships between dependent variable and covariates were included. Results from a MANOVA can be seen in Table 1.

After controlling for socio-demographic variables (age, gender, household income, and educational level), all covariates significantly varied across social disorder conditions (low and high social disorder). Those participants who expressed living under low social disorder conditions knew fewer victims of domestic violence than participants living under high social disorder conditions. Under high social disorder conditions, the level of perceived severity of domestic violence is higher when compared to low social disorder conditions. Also, under high social disorder conditions, the acceptability of domestic violence is also higher. Finally, victim-blaming attitudes are more widespread under high social disorder conditions as compared to low social disorder conditions.

Discussion

This study was based on the idea that social disorder in residential areas can influence resident's attitudes toward partner violence against women, creating a climate of tolerance that can contribute to its greater incidence in these communities. The study supported these ideas, as the results obtained confirmed our hypotheses.

First, results confirmed that those immigrants that perceived higher levels of social disorder in their neighborhoods were more exposed to partner violence against women as they reported knowing more women victims (60%), as compared to those perceiving lower levels of social disorder in their neighborhoods (52%). These results support findings from other studies also finding higher rates of domestic violence in deprived and social impoverished communities and neighborhoods (e.g., Benson et al., 2003; Browning, 2002; Cunradi et al., 2000; O'Campo et al., 1995).

Second, the study also confirmed our expectations as results showed that perceived social disorder in the neighborhood was associated with attitudes of tolerance and acceptability of partner violence against women which, as some scholars have pointed out (Anderson, 1978; Horowitz, 1987; Sampson & Lauritsen, 1994), could help explain the higher rates of violence observed in deprived communities. Our results revealed a systematic pattern of statistical relationships, according to which, those immigrants that described their residential environment as characterized by social disorder reported a set of attitudes that appears to justify and condone partner violence against women. Thus, respondents perceiving high levels of neighborhood social disorder tend to perceived incidents of partner violence against women as less severe, accepted partner violence more, and also had a greater tendency to blame the victims for the violence. Overall, our results suggest that a climate of tolerance and acceptability of partner violence against women is more likely among immigrants living in

neighborhoods characterized by deprivation and social disorder, and support Sampson and Lauritsen's (1994) claim that structurally disorganized communities favour attitudes that legitimate, or provide a basis of tolerance for violence.

Public attitudes about partner violence against women play an important role in shaping the social environment in which the victims are embedded, a social environment that may contribute either to perpetuate or to reduce the levels of partner violence against women in our societies. As it has been emphasized by a number of scholars, without a fundamental change in the social attitudes that foster, condone and perpetuate partner violence against women we will not be able to respond effectively to this problem, by substantially reducing its alarming rates (Biden, 1993; Gracia & Herrero, 2006; Goodman, Koss, Fitzgerald, Russo, & Keita, 1993; World Health Organization, 2002). In this respect, what this paper adds to the extant literature is that attitudes of tolerance and acceptability of partner violence against women are also related to the concentration of deprivation, disorder and social impoverishment of residential areas where many immigrants live. Hence, it is important that future studies pay increased attention to the mediating role that neighborhood and communities' characteristics may play in the distribution of domestic violence across different cultural and ethnic groups (Benson et al. 2004).

Finally, the study presents some potential limitations so we should be cautious in interpreting our findings. First, the sample used in this study is not representative of Latin American immigrants in the Valencian Community and findings might not be generalized to the population. In Spain, it is almost impossible to create a random probabilistic sample of Latin American immigrants because of the lack of reliable census data on immigration. Therefore, the number and distribution on Latin American immigrants in the Valencian Community remains unknown, complicating the creation

of any random probabilistic sample. On the other hand, the study relies on individuals' perceptions (perceived neighborhood social disorder) that may not match with the realities of the ecological context in which respondents live. However, recent research on perceived social disorder have found that perception of social disorder in the neighborhood is positively related with more objective characteristics of the neighborhood (see Gracia & Herrero, 2007, for an analysis with Spanish general population) suggesting that those immigrants who perceive higher levels of social disorder in their neighborhoods do, in fact, live in more socially deprived neighborhoods.

Despite its limitations, we consider that given the limited attention that research has paid to the important issues that this paper has explored, this study illustrates the theoretical and empirical relevance of applying concepts such as social disorganization and disorder to the field of domestic violence (see also, Browning, 2002), and could stimulate further research on neighborhood and other contextual factors that may influence public attitudes of tolerance and acceptability of partner violence against women. A better understanding of neighborhood and other contextual factors that contribute to create an acceptable climate for partner violence against women would add relevant knowledge to the literature on the social conditions that foster or discourage partner violence against women, and would be useful to orientate public education and prevention efforts.

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