Intimate Partner Violence and Parenting: A Qualitative Study with Immigrant Latinas

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INTIMATE PARTNER VIOLENCE AND PARENTING: A QUALITATIVE STUDY WITH IMMIGRANT LATINAS

by

Karina Loyo, M.Ed.

A Dissertation submitted to the Faculty of the Graduate School, Marquette University, in Partial Fulfillment of the Requirements of the Degree of Doctor of Philosophy

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INTIMATE PARTNER VIOLENCE AND PARENTING: A QUALITATIVE STUDY WITH IMMIGRANT LATINAS

Karina Loyo, M.Ed.

Marquette University, 2021

Intimate partner violence (IPV) is widespread among women, including those that are mothers (Austin et al., 2017). The impact of experiencing IPV is considered a significant health problem for women and their children (Amerson et al., 2014). The deleterious effects of IPV on parenting have been documented, including less effective parenting, engagement, communication and greater harsh discipline and neglect (Chiesa et al., 2018). Despite being the second fastest growing ethnoracial group, IPV research on Latinas specifically has been sparse and represents a critical public health concern that requires empirical attention (Paat et al., 2017). Immigrant Latinas may be particularly vulnerable due to isolation, greater economic disparities, and other immigration-related stressors (Stockman et al., 2015).

The purpose of the present qualitative study was to conduct an in-depth exploration about the influence that experiencing IPV has on parenting among immigrant Latina mothers. To that end, 11 immigrant Latina mothers who had exited the relationship participated in individual, semi-structured interviews where they shared their perspectives on the implications of IPV on various aspects of their parenting. Grounded theory methodology (Charmaz, 2000; Strauss & Corbin, 1990) was used for data analysis.

Results revealed IPV has lasting effects on mothers, children, and parenting into the post-separation period. These included reduced maternal psychological health, lower family functioning, and diminished parental competence. Nonetheless, mothers developed constructive parenting goals and behaviors in response to IPV and utilize internal resources to persevere through IPV- and immigration-related challenges as single mothers. Limitations, implications and suggestions for practice and future research are discussed.
I would like to express my deepest appreciation to my dissertation committee, Drs. Lisa Edwards, Alan Burkard, and Robert Fox. Dr. Edwards, as my dissertation chair and academic advisor you have been a source of unwavering support throughout my doctoral studies. Your compassion and warmth cannot be underestimated. You helped nurture my professional identity and taught me the importance of engaging with community members to develop meaningful and impactful research. Thank you for your mentorship and for helping bring this dissertation to completion. Dr. Burkard, I am grateful for your constructive feedback. It helped strengthen this study’s methodological approach and writing. In addition to your contribution to this project, you have supported me as department chair and program training director. Thank you for all your words of encouragement. Dr. Fox, thank you for continuing to graciously offer your time through your emeritus appointment. I appreciate your expertise and practical suggestions that helped me successfully carry out this study.

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Chapter I: Introduction

Background

As the nation’s second fastest growing ethnoracial group, Latinx people accounted for 18% of the total United States (US) population in 2019 (Krogstad, 2020). Latinxs have accounted for over half of all US population growth in the past decade (Krogstad, 2020). Immigrant Latinas accounted for half of all births to foreign-born women (Livingston, 2019). They and their children will continue to stimulate US population growth and contribute to rising ethnoracial diversification in the US through 2065 (Flores, 2017; Johnson & Litcher, 2016; Livingston, 2019; Zayas & Sampson, 2014).

As immigrant Latina mothers raise children in a new country, they negotiate their parenting role within a broad context of social and cultural factors. Scholars conceptualize this context as involving multiple systems (Bronfenbrenner, 1994). They include larger structures that individuals have indirect contact with (e.g., governmental agencies, social services, social policies), as well as institutions or people who individuals interact with directly in their immediate environment (e.g., family, peers, the workplace). These nested systems influence how parenting is practiced and how effective parents may be at meeting the needs of their children (Bronfenbrenner, 1979; Bronfenbrenner & Morris, 1998; Hoghugi, 2004). Similarly, experiences of intimate partner violence (IPV) have implications for parenting. They occur at the most immediate level of immigrant Latina mothers’ ecological environment. IPV can impact parenting in myriad ways, from specific parenting practices to the ways parents think about themselves as caretakers of their children. In order to fully understand parenting among immigrant Latinas in the US who have
experienced IPV, the sociocultural context of their lives and parenting beliefs and practices must be examined.

**The Context of Immigrant Latina Mother’s Parenting**

Several scholars have examined parenting among Latinx immigrants through a wide lens that expands the scope beyond family context to include external systems and parents’ larger social environment (e.g., Aldoney & Cabera, 2016; Brabeck et al., 2016; Salas et al., 2013; Vesely et al., 2019). Using Bronfenbrenner’s ecological systems framework, parenting can be understood as shaped by dynamic interactions within and between several systems of an ecological environment. This milieu is organized in a set of nested, multi-leveled structures (Bronfenbrenner, 1979). This study places immigrant Latina women at the center of these nested, ecological structures. At the largest, outermost level lies the *macrosystem*. This refers to overarching patterns within economic, social, educational, legal and political structures. The macrosystem includes social values, customs, cultural beliefs, political ideologies, and laws embodied within the lower-level ecological systems (Bronfenbrenner, 1979, 1994; Paat, 2013). Such large-scale factors stimulate acculturation processes, involving a variety of cultural and psychological adjustments in individuals and groups exposed to novel cultural environments (Baldwin-White et al., 2017; Berry, 2006). Researchers have related the stresses that may result from acculturation to less optimal parenting and greater family conflict among Latinx families (Williams et al., 2017). For Latina immigrant mothers, immigration legislation and policies are critical at the macrosystem level. There is a long-standing history of exploitation, marginalization, and stigmatization toward Latinx immigrants in the US (Marger, 2012). As a consequence of negative social constructs, Latinx immigrants have struggled to achieve societal acceptance (Vázquez, 2011). Today,
the growing convergence between immigration and criminal law serves to perpetuate their social marginalization and persecution (Vázquez, 2011).

The increased criminalization of immigration and strict enforcement of immigration policies have disadvantaged Latinx immigrant parents in several ways (Androff et al., 2011). For one, Latinx immigrants tend to have low socioeconomic status. For example, they have comparatively low household incomes and educational levels (Flores et al., 2017). And they often reside in economically disadvantaged neighborhoods — communities with less physical, economic, and social resources (Cruz-Santiago & Ramirez Garcia, 2011; Yoshikawa & Kalil, 2011). Yet, anti-immigrant policies compound these conditions, limiting work opportunities for immigrants (Androff et al., 2011) and withholding access to federal benefits that provide financial assistance (Fuligni & Yoshikawa, 2003). In general, poor socioeconomic conditions negatively impact parenting behavior and parenting stress (Casselles & Evans, 2017). Notably, Latina immigrants report greater parenting stress than White women, primarily due to structural disadvantages, like having less income (Nomaguchi & House, 2013). Additionally, Latina immigrants may endure discrimination based on the current political climate (Androff et al., 2011; Vesely et al., 2019). As expected, discrimination impacts the mental health of Latinx immigrant parents (Ornelas & Perreira, 2011). Such negative experiences can affect their parenting behavior. For example, parents with high discrimination profiles report lower levels of monitoring, less consistent parenting, and higher levels of harsh parenting (Ayon & Garcia, 2019).

Finally, the microsystem, the innermost level of the ecological system, encompasses an individual’s relationships and interpersonal interactions within their immediate environment. There are many possible experiences that occur at this level
that can impact parenting among Latina immigrant mothers. The experience of violence between mothers and their partners is a prominent stressor and the focus of the current study. This type of interpersonal violence is often termed intimate partner violence (IPV), or the physical, emotional, psychological, and sexual abuse that occurs between intimate partners (Hattery, 2009). A recent meta-analysis of 21 studies demonstrated the adverse effects of IPV on parenting. Chiesa and colleagues (2018) reported IPV scores were inversely related to positive parenting (e.g., effective parenting skills, engagement, communication) and positively related with physical aggression and neglect. The next section discusses the effects of IPV on Latina immigrant mothers.

**Effects of Intimate Partner Violence on Latinx Immigrant Parenting**

In the general population, research shows IPV has negative implications on maternal parenting behaviors. This includes “poor parenting,” less parenting engagement, harsh intrusive parenting, poor disciplinary strategies, and low parenting competence (e.g., Gustafusson & Cox, 2012; Huth-Bocks & Hughes, 2008; Levendosky & Graham-Bermann, 2001; Murray et al., 2012; Postmus et al., 2012). This body of work has furthered our understanding of the effects of IPV on parenting experiences and parenting behavior. Still, it does not capture the unique experience of parenting among Latina immigrant mothers who have survived IPV within a marginalized, hostile social and political context. To date, only limited research has explored parenting in the context of IPV among Latina immigrants in particular. More specifically, only one quantitative and three qualitative studies have investigated this phenomenon.

Altschul and Lee (2011) examined the effects of IPV on the use of child-directed physical aggression by Latina immigrant mothers in a quantitative study.
Their findings did not support IPV as a predictor for child-directed aggression, nor did they find that acculturation factors explain the effects of IPV on child-directed aggression among mothers (Altschul & Lee, 2011). While the authors included proxies of acculturation (e.g., nativity and years living in the U.S.), they did not examine specific cultural norms related to parenting or parenting cognitions (e.g., attitudes about physical discipline). This omission matters, as they could produce alternative results than the null findings reported in their study.

Two qualitative studies examined the perceived impact of IPV on parenting among Latina immigrant mothers (e.g., Acosta, 2017; Orozco & Mercado, 2019). First, Orozco and Mercado (2019) have shown that mothers perceive IPV and depression as barriers to their functioning as parents. The authors reveal that mothers are able to provide and take care of their children’s basic needs despite these barriers. Overall, this study begins to point to the challenging parenting environment that IPV, depression, and immigration-related stress creates. Orozco & Mercado (2019) also uncover potential cultural and social influences on the parenting beliefs and attitudes of mothers. However, they do not explore the specific ways that IPV impacts parenting, including changes in practices or shifts in how Latinas think about themselves as parents.

Second, an unpublished undergraduate, ethnographic study found that mothers perceive IPV as a contributing factor to poor mental health and a lower sense of efficacy as a parent, as well as poorer attitudes and treatment of their children (Acosta, 2017). Still, as with Orozco & Mercado’s (2019) study, mothers engaged in practical parenting tasks that took care of their children’s basic needs (Acosta, 2017). Acosta’s investigation provides valuable information about the numerous ways that
IPV impacts parenting. However, they also chose not to pursue a comprehensive inquiry of parenting beliefs and practices.

Finally, Kelly (2009) looked at decision-making processes about abusive relationships among immigrant Latina mothers. This work highlights the significance of the parenting role in making decisions about staying or leaving an abusive partner. It also highlights the protective nature of mothers parenting under violent conditions. While it also contextualizes the challenges experienced by single mothers once they have exited the relationship, this study does not analyze how IPV impacts parenting practices.

Taken together, the existing literature that considers the impact of IPV on parenting in the general population, as well as the four studies among immigrant Latinas, underscore its deleterious consequences. Among Latina immigrant mothers, IPV may be related to lower sense of efficacy as parents (Acosta, 2017) and interfere with mother-child relationships (Acosta, 2017). Yet, narratives from Latina immigrant mothers suggest a high level of involvement with their children and an ability to care for their basic needs, despite IPV’s negative mental health effects (Acosta, 2017; Orozco & Mercado, 2019). Latina mothers appear to prioritize and attempt to protect children from IPV exposure (Kelly, 2009). Furthermore, mothers are motivated to teach their children the importance of respect and non-violence in intimate relationships (Acosta, 2017). These findings are consistent with other studies in the general population that suggest mothers may compensate for IPV through increased attentiveness and sensitivity towards their children (Letourneau et al., 2007), report more effective parenting and secure attachment with their children (Levendosky et al., 2003), and engage in diverse strategies to protect their children from IPV exposure (Nixon, 2017). Lastly, qualitative studies highlight several cultural, social, and legal
factors related to immigration: language barriers, employment stress, low socioeconomic status, and discrimination. Such factors make ordinary, day-to-day activities difficult to navigate and compound parenting stress.

While the above studies on Latina immigrants have helped establish greater understanding of IPV’s impact on parenting in Latinx immigrant communities, several gaps remain. Both Orozco and Mercado (2019) and Acosta (2017) limited their findings to only a few cognitive aspects of parenting (e.g., parenting goals, sense of parenting efficacy, and attitudes of discipline). Parenting cognitions include an array of concepts, including parental perceptions, goals, expectations, attitudes, beliefs, attributions, and knowledge (e.g., information about child development) (Bornstein, 2016; Okagaki & Bingham, 2005). Therefore, a more thorough analysis of how IPV influences a wide-range of parenting cognitions is necessary to gain a broader understanding of its impact on parenting. Another gap in the literature related to IPV and parenting among Latina immigrants is a lack of attention to how mothers navigate parenting issues with their partners. Acosta (2017) reveals how partners may undermine and complicate a mother’s parenting experience — both in the relationship and even after she leaves. However, the specific ways that Latina immigrants manage co-parenting relationships is unaccounted for.

Purpose

Building on the literature outlined above, this study conducted an in-depth exploration of IPV’s influence on parenting from the perspective of Latina immigrant mothers who had exited the abusive relationship. First, it aimed to expand scholarly understandings of IPV by exploring a wide range of parenting cognitions and practices. To do so, it examined how experiences of IPV have shaped Latina immigrant mothers’ ideas related to parenting and the behaviors they engage in as
parents. Second, the study explored parenting experiences, including the quality of co-parenting relationships and how mothers negotiate parenting with partners after exiting their relationships. Lastly, this study investigated the influence of anti-immigrant policies and other immigration-related issues on Latina immigrant mothers who have experienced IPV. This was carried out against the backdrop of the Trump presidency whose administration’s actions around immigration policies and enforcement led to a climate of fear and anxiety for immigrant communities (Sirin et al., 2020).

Understanding IPV’s impact on parenting is an important area of concern for both mothers and their children. Research has demonstrated the important contributions of parenting on children’s adjustment following exposure to IPV (Austin et al., 2017). For example, Levendosky and Graham-Bermann (2001) note parenting qualities, such as warmth, child-centeredness, and effectiveness, play a significant role in the adjustment of children experiencing IPV in the home. Careful consideration of contextual factors that function as added disadvantages aids in helping to recognize the unique needs of this community. It facilitates a more comprehensive understanding of how to best serve mothers and support they and their children’s welfare (Austin et al., 2017).

**Research Questions**

The primary research question of this study was “How does the experience of IPV impact parenting among immigrant Latina mothers?” The study addressed the following sub-questions: (a) “In what ways does IPV impact cognitive aspects of parenting (e.g., parenting self-efficacy, parental attitudes, parenting expectations and goals)?” (b) “In what ways does IPV impact behavioral aspects of parenting (e.g., activities concerning basic care, setting boundaries, promoting development)?” (c)
“How do contextual factors (e.g., sociopolitical climate, immigration, culture, relationship status, custody arrangements) influence parenting among immigrant Latina mothers who experience IPV?”

Methodology

This study addressed these research questions using grounded theory methodology (Strauss & Corbin, 1990), implemented through a constructivist lens (Charmaz, 2006). Given the relatively limited research on IPV and parenting among immigrant Latinas, this methodology is suitable because of its inductive nature. This methodology allows researchers to start with the data and then generate an abstract theoretical understanding of the topic studied (Charmaz, 2003, 2006). Furthermore, supplementing Strauss & Corbin’s analytic procedures with a constructivist underpinning fosters participant understanding and empowerment within their cultural context (Ponterotto, 2010). It also helps elucidate the complexities of the many realities mothers face when parenting in the context of IPV (Charmaz, 2006). The study invited participants to share their experiences and perspectives through semi-structured, individual interviews.

Definition of Terms

For the purposes of this study, the term intimate partner violence refers to violence between two partners in a dating and/or sexual relationship, marriage, or domestic partnership. This term includes many forms of partner violence and differentiates violence between other family members (Hattery, 2009). The term intimate partner may include current or former spouses, common-law spouses, civil union spouses, domestic partners, boy/girlfriends, dating partners and ongoing sexual partners (Breiding et al., 2014).
In the current study, intimate partner violence can include the four types of violence outlined by the Center for Disease Control: physical, sexual, stalking, and psychological aggression (Breiding et al., 2014). Physical violence can include a range of behaviors that inflict physical harm. Acts considered less severe in terms of probable injury include slapping, pushing, or shoving. Severe acts of physical violence include being beaten, burned on purpose, choked or attempted to suffocate, hurt by pulling hair, hit with something hard, kicked, slammed against something hard, and threatened with a knife or gun.

Sexual violence refers to sexual acts perpetrated against a victim, including rape, being made to penetrate someone else, sexual coercion, unwanted sexual contact, and non-contact unwanted sexual experiences. Stalking involves repeated harassment or the use of threatening tactics that are unwanted and cause fear or concern for the victim’s own safety. It can also include tactics that elicit fear that someone close to them would be harmed or killed as a result of the perpetrator’s behavior. Finally, psychological aggression refers to expressive aggression such as naming-calling, insulting, and humiliating an individual. It can also include behaviors that are deliberate tactics to monitor and control a partner through threats of harm, isolation of friends or family, and limiting access to money.

The term Latino reflects a collective constellation of subgroups with people originating from various countries in Latin America (Comas-Díaz, 2001). The current study uses the term Latinx in place of Latino when referring to people of Latin American lineage to foster gender inclusivity. However, it also uses the gendered term Latina when referring to specific individuals who identify as women (Monzó, 2016).
Lastly, immigrants can be identified under three categories: (a) legal permanent resident, referring to a person who has gained lawful residence through the process of immigration; (b) naturalized citizen, meaning an immigrant person who acquired U.S. citizenship by fulfilling criteria established by Congress; and (c) unauthorized immigrant, which denotes a foreign-born person who entered the U.S. without inspection or stayed in the U.S beyond the authorized admission time period (Zagelbaum & Carlson, 2011). For the purpose of this study, the former two categories will be considered under a broader umbrella as documented immigrant or status and the latter as undocumented immigrant or status. These reflect differences in legal rights and benefits in U.S. (Zagelbaum & Carlson, 2011).
Chapter II: Literature Review

The following chapter provides an overview of the literature regarding the current study’s focus on parenting and intimate partner violence among immigrant Latinas. This review will begin by presenting information about Latinx immigrants including demographics and their environmental context in the US. Then, discussion of key concepts, theories and research about parenting will be offered. This is followed by review of intimate partner violence literature and current research on the effects of IPV on parenting outcomes.

Latinx Immigrants in the United States

General Demographic Data on the Latinx Population

More than any other group, the Latinx population has contributed to the US population growth since 2000. Recent estimates indicate that over 62 million Latinxs live in the US, accounting for 18.7% of the total population (Jones et al., 2021). This number is projected to expand to 107 million by 2065 (Flores, 2017). About 33% of Latinx people living in the US are foreign-born (Krogstad & Noe-Bustamante, 2021). And, the Latinx population has shown rapid diffusion to areas outside of traditional counties with long demographic histories of Latinx settlement, such as metropolitan and non-metropolitan cities in the South and Midwest (Johnson & Lichter, 2016). From 2010 to 2019, the South saw the largest regional growth (26%), followed by the Northeast (18%) and Midwest (18%) (Krogstad, 2020). Currently, the three states reporting the highest Latinx populations are California, Texas, and Florida (Noe-Bustamante & Flores, 2019). The vast majority of Latinx people living in the US are of Mexican descent (61.9%), while Latinxs of Puerto Rican origin constitute the second-largest group (9.7%) (Krogstad & Noe-Bustamante, 2021).
Between 1980 and 2000, immigration was the main driver of Latinx population growth in the US (Flores, 2017). Since 2000, the share of Latinx immigrants in the total Latinx population has declined. (Flores, 2017). Despite this slow-down, Latinx immigration continues to shape the demographic composition of the US through high fertility rates, low mortality, and domestic migration (Johnson & Litcher, 2016). When considering fertility, immigrant mothers — the majority of who are Latina — have accounted for a disproportionate share of all US births over the past two decades (Livingston & Cohn, 2012). In fact, almost half of US born Latinxs today are children of immigrant parents (Patten, 2016). Looking ahead, the demographic impact of immigrant Latinas in the US will endure, as they and their children influence overall population growth and diversity (Johnson & Litcher, 2016; Zayas & Sampson, 2014).

**The Context of Immigrant Latina Mother’s Parenting**

Immigrant Latina mothers in the US are embedded within a larger social structure, which provides a social context wherein parenting takes place. As such, an ecological approach is useful to understand processes that facilitate healthy development and adaptation for immigrant mothers and their children (Paat, 2013). This perspective is also helpful for contextualizing stressors in the lives of Latinas that may impact parenting. Guided by Bronfenbrenner’s (1979) ecological systems theory and an updated version of Belsky’s determinants of parenting process model (Tarabian & Shaw, 2018), the current study examined the impact of a specific stressor, IPV, on parenting among immigrant Latina mothers. This study also considered the individual and social/contextual factors within various systems that influence parenting.
According to Bronfenbrenner (1979, 1994), five nested, interactive systems influence human development: the microsystem, mesosystem, exosystem, macrosystem, and chronosystem. The innermost system is the microsystem, which refers to the relations and interactions between the individual and their immediate surroundings, including family, peers, the workplace, or school (Bronfenbrenner, 1979; 1994). Next, the mesosystem can be thought of as a system of microsystems, since it encompasses relationships and processes that occur between two or more settings in an individual’s immediate environment. For example, interactions between family and peers (Bronfenbrenner, 1979; 1994). The exosystem represents the linkages and processes taking place between settings in an individual’s immediate environment (e.g., family) and non-immediate environment (e.g., neighborhood). The macrosystem is the second outermost system. It represents the large overarching social and cultural customs, values, beliefs and constitute structures that an individual has indirect contact with — governmental agencies, social services, laws, and social policies (Baldwin et al., 2017; Bronfenbrenner, 1994; Paat, 2013). Finally, the chronosystem is the outermost system. It signifies life transitions and changes in individuals across time. For example, migration to a new country or developmental transformations (Baldwin-White et al., 2017; Bronfenbrenner, 1994; Paat, 2013).

The position children and parents have within the macrosystem determines how they and parents are treated or interact with one another in different settings (Bronfenbrenner, 1979). As Taraban & Shaw’s (2018) process of parenting model demonstrates, these nested systems can be conceptualized as the environmental context in which parenting occurs. Drawing an ecological perspective, the following section reviews the milieu in which Latinx immigrants (parents and non-parents) are situated. It describes challenges they may face while living in the US, including
acculturation, discrimination, and poor socioeconomic conditions (Vesely et al., 2019). This milieu influences the experiences of being an immigrant, as well as relative risk of experiencing IPV. For example, low-income status (Cunradi, Caetano, & Schafer, 2002) and acculturative stress (Caetano et al., 2007; Perilla et al., 1994) are predictors of IPV among Latinxs. Discrimination and acculturation primarily occur during interactions within the micro-, macro-, and chronosystem (Baldwin-White et al., 2017). On the other hand, socioeconomic conditions and opportunity structures lay within the macrosystem (Salas et al., 2013; Vesely et al., 2019). Literature examining the specific relationships between these contextual factors and immigrant Latinx parents and their parenting is discussed in a later chapter.

**Acculturation Processes**

Macro-level factors, such as culture, customs, and values stimulate processes of “acculturation” (Baldwin-White et al., 2017). Acculturation refers to the ways in which cultural and psychological changes — shifts in values, belief systems, and behaviors — occur in response to extended contact with a new culture (Berry, 2003, 2006). It involves a multitude of accommodation processes between two or more cultural groups, which lead to enduring adaptations among these groups and their individual members over time (Berry, 2006). For immigrant Latina mothers, adapting to dominant US cultural norms involves negotiating tensions between cultural beliefs and expectations about parenting. Such expectations differ in the US versus their country of origin (Vesely et al., 2019). Scholars have traditionally conceptualized acculturation as a unidimensional process in which an individual incorporates most of the attitudes, values, and behaviors of the mainstream or dominant culture (e.g., Triandis, 1983). However, researchers have increasingly accepted it as a multifaceted process by which a person does not simply reject or replace their culture of origin, but
rather take part in both cultures to varying degrees; people might maintain aspects of the original culture (Berry, 2006; Szapocznik et al., 1980). For example, when it comes to parenting, immigrant mothers attempt to maintain traditional cultural practices and foster values, such as familism and collectivism. Concurrently, they may instill aspects of American culture like autonomy and individualism in their children (Vesely et al., 2019). Acculturation may occur seamlessly, while in other situations it can produce strain or conflict (Berry, 2006). For example, conflict can arise between the preference to maintain and identity with the culture of origin and the inclination to participate in the mainstream, dominate culture (Berry, 2006).

During the process of acculturation, immigrants confront several challenges and demands that can result in acculturative stress. Acculturative stress is a stress reaction to life events or circumstances that stem from intercultural contact (Berry, 1997, 2006). Acculturative stress arises when an individual perceives an imbalance between cultural demands and the resources or means available to manage such demands (Smart & Smart, 1995). Caplan (2007) identified three interrelated dimensions of acculturative stress: (a) instrumental and/or environmental, (b) social and/or interpersonal stressors, (c) and societal. The instrumental and/or environmental dimension refers to difficulties in obtaining basic needs. This includes economic hardship, language barriers, lack of access to health care, unsafe or poor housing, and occupational difficulties (e.g., unemployment, exploitation, or hazardous work conditions). Stressors within the social/interpersonal domain are related to changes in relationships, roles, behaviors, and cultural norms that stem from immigration. For example, loss of social networks or separation from family, loss of social support, and intergenerational conflict within families. Finally, stressors within the societal domain encompass difficulties related to discrimination and political and historical factors,
such as historical waves of anti-Latinx and anti-immigrant sentiment in the US (Caplan, 2007). Research has consistently associated acculturative stress with poor mental health outcomes among Latinxs, such as depression (e.g., Capielo et al., 2015; Hovey, 2000; Umana-Taylor et al., 2011) and anxiety symptomology (Hovey & Magana, 2000) and depression among Latinx adults (Torres, 2010).

There is a significant amount of variability in the acculturation process, which is largely determined by how an individual engages in the process (Berry, 2006). For example, researchers have recognized four acculturative strategies: assimilation, integration, separation, and marginalization (Berry, 2006). The extent to which one engages with the dominant culture and retains their culture of origin varies based on the strategy used (Berry, 1980). Further, acculturation processes and outcomes, including the level of acculturative stress, vary significantly from person to person. They are known to be influenced by intrapersonal factors, such as cognitive attributes (e.g., hopefulness, open-mindedness), emotional stability, social initiative, knowledge of new language and culture (Hovey, 2000; Ward & Geeraert, 2016). However, individual-level factors operate within the broader ecological context in which intercultural contact takes place. They should be considered with respect to psychological well-being and positive sociocultural functioning (Ward & Geeraert, 2016).

Consistent with the ecological systems framework, the acculturation process can unfold within a family context, institutional and organizational contexts (e.g., schools, work), and at the societal level (e.g., societal acceptance of diversity) (Ward & Geeraert, 2016). Likewise, the types of stressors related to the acculturation process (i.e., acculturative stress) may also be considered within an ecological systems framework, as demonstrated by Caplan (2007). This helps to further explicate the
challenges faced by Latinx immigrants within various ecological systems. One of these challenges is discrimination. As the next section shows, experiences of societal discrimination and their influence on immigrant Latina mothers is reflective of their social milieu and impacts their parenting.

**Discrimination**

At the macrosystem level, cultural values and societal factors and patterns shape the larger society. This impacts immigrant family’s adjustment to the United States (Paat, 2013). Experiences of structural discrimination are one such influence at the macrosystem level that has negative consequences for Latinx immigrants. The US has an extensive history of anti-immigrant political discourse linking immigration with crime. This connection has influenced public policy throughout the Twentieth Century (Pendergast et al., 2018). Over time, Latinx immigrants have been socially constructed as criminal threats and the source of rising crime rates. Contemporary rhetoric positions Latinx immigrants as a threat to national security (Pendergast et al., 2018). Due to these negative social constructs, Latinx immigrants have struggled to attain social acceptance. The increasing confluence between immigration and criminal legislation has served to perpetuate the marginalization of Latinx communities further (Vázquez, 2011). Recent state and federal policy changes to immigration enforcement have enabled a range of oppressive and discriminatory practices that target immigrants, especially those perceived to be undocumented (Pendergast et al., 2018). Policies that reflect exclusionary approaches are restrictive in nature. They may include prohibiting government licenses for undocumented immigrants, denying admissions at public universities, declining in-state tuition, or withholding health coverage for up to five years (Watts & Astone, 1997). A recent meta-analysis found that the number of residents who live in states with exclusionary immigration policies
is predictive of poor mental health. Latinx residents reported the highest number of poor mental health days. Additionally, those living in states with more negative attitudes toward immigration experienced greater psychological distress than non-immigrant groups (Hatzenbuehler et al., 2017). Therefore, anti-immigrant policies criminalize, isolate, and facilitate discrimination toward Latinx immigrants and their families. This undermines social integration and adversely impacts mental health (Ayon & Garcia, 2019).

In addition to the structural discrimination effected through laws and policies, interpersonal discrimination may occur within the microsystem (Baldwin-White et al., 2017). Sue and Sue (2016) define interpersonal discrimination defined as “negative or prejudicial treatment toward an individual or a group based on biased beliefs and stereotypes” (pp.785). This type of discrimination may be based on various attributes — age, gender, race, sexual orientation, religious affiliation, and disability (Banks et al., 2006). However, this section focuses on ethnic/racial identity, racial discrimination and the supremacist ideologies that reinforce perceptions of racial difference (Williams et al., 1999).

A recent survey on Latinx experiences of discrimination in the U.S. showed that 38% of Latinx respondents experienced at least one discriminatory incident in the past year. Some were told to go back to their country of origin. Others had offensive names directed toward them. Some shared being criticized for speaking Spanish in public. Still others received unfair treatment due to their Latinx background (Lopez et al., 2018). Importantly, Latinx immigrants and second generation Latinxs experienced a greater number of discriminatory incidents compared to later generations (Lopez et al., 2018). A growing literature conceptualizes discrimination as a psychosocial stressor (Williams et al., 1999), which can disrupt psychological, emotional and social
well-being (Kalbermatten, 2012). For Latinxs in particular, a meta-analysis of 51 studies examining the relationship between experiences of discrimination and mental health outcomes among Latinxs revealed a moderate effect size of discrimination on mental health (Lee & Ahn, 2012). Specifically, discrimination was positively associated with depression, anxiety, psychological distress, job dissatisfaction, and unhealthy behaviors. Though discrimination had the strongest association with anxiety and depression (Lee & Ahn, 2012). Taken together, this research suggests that experiences of structural and interpersonal discrimination are relatively common. And they have negative consequences that affect the lives of Latinx immigrants. The next section goes further, reviewing socioeconomic conditions that typify Latinx immigrants and the impact of macro-level constraints by immigration policy on these their social standing in the U.S.

Socioeconomic Conditions

While significant heterogeneity exists, Latinxs are generally overrepresented among the poor, workers in low-status occupations (e.g., service jobs), and people with lower educational attainment (Marger, 2012). Recent estimates show that Latinxs are more likely than White and Asian Americans to be among the working poor (United States Bureau of Labor Statistics [US BLS], 2021). In 2019, the poverty rate among Latinxs was 15.7%, while the rate for “non-Hispanic” Whites and Asians was 7.3% (Semega et al., 2020). Disparities are also observed in median household income; Latinxs made $56,113, which is less than 75% of “non Hispanic” White household income ($76,057) that same year (Semega et al., 2020). In 2017, Latinx immigrants showed similar rates of poverty to the overall Latinx population but had a lower median annual household income ($45,200) compared to US born Latinxs ($53,000) (Noe-Bustamante & Lopez, 2019). Latinx immigrants also have lower
levels of educational attainment. For example, 71% Latinx immigrants reported their educational attainment at or less than high school level, while 47% of native-born Latinx and white, Black, and Asian people (Flores et al., 2017).

Latinx immigrants migrate to the U.S. to escape extreme poverty and the lack of educational opportunities in their home countries. They aim to improve their social and economic status. Yet, in addition to acculturative stress and discrimination, lack of economic power adds significant stress to Latinx immigrants and their families (Zagelbaum & Carlson, 2011). Demand for low-wage workers across US industries — free of language requirements — means Latinx immigrants often take jobs that are laborious, dangerous, and offer minimal compensation (Androff et al., 2011). For example, immigrants are more likely to be occupied in service jobs, construction, maintenance, and production industries (US BLS, 2020). Latinxs represented nearly half of the immigrant labor force in 2019. Despite their participation in the workforce, they face serious economic hardship (Androff et al., 2011). COVID-19 has exacerbated the poor economic conditions facing Latinx immigrants. It has disproportionately impacted sectors occupied by Latinas and immigrant workers, leading to both loss of income and disparate vulnerability to disease (Gould et al., 2020; Kochhar, 2020).

At the macro-level, immigration policies and their enforcement economically marginalize Latinx immigrants, especially among the undocumented (Androff et al., 2011). In general, Latinxs enter the US under family reunification provisions or without authorization, as opposed to occupational provision (Fuligni & Yoshikama, 2003; Salas et al., 2013). Pathways of entry result in varied immigration statuses.
Immigration policies inform the social and economic opportunities of immigrants in the US. For example, structural features of immigration policy, such as differential eligibility for federal benefits, impact the socioeconomic health of Latinx immigrants; eligibility is based on immigration status (e.g., refugee, authorized immigrant, or unauthorized immigrant) (Fuligni & Yoshikama, 2003). Benefits such as Medicaid, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and the Supplemental Nutrition Assistance Program (SNAP) financially aid those in need. Such services are available to refugees yet withheld for years or denied all together for both authorized and unauthorized immigrants (Fuligni & Yoshikama, 2003). This type of policy is a barrier for Latinx immigrants who live in poverty and need economic assistance.

As mentioned in the previous section, policies that deny admission to public universities and financial aid to undocumented immigrants poses another structural barrier. Such policies deter immigrants from pursuing higher education (Androff et al., 2011). Restrictive legislation, including policies that prohibit employers from knowingly hiring unauthorized immigrants, has also hold significant consequences for Latinx immigrants eager to obtain and keep jobs (Androff et al., 2011; Ayon et al., 2012). To avoid large penalties, some employers are reluctant to employ Latinx immigrants (Flippen, 2014). In addition to labor force participation, these policies also influence labor supply. Immigrants may be restricted to low-wage occupations, with unstable working conditions and limited hours (Flippen, 2014). Furthermore, unauthorized Latinx immigrants may be subjected to exploitive practices, like not being compensated for labor, and risk detention or even deportation (Ayon et al., 2012; Flippen, 2014). Underemployment and unemployment are significant sources of stress (Androff et al., 2011). As indicated by Brabeck and colleagues (2016), job-
related stress and immigration challenges are felt most acutely by those familiar with the immigration system (e.g., personal experience with detention or deportation). Overall, restrictive policy and anti-immigrant sentiment may maintain forms of economic inequality, impeding opportunities to improve socioeconomic status. For example, increasing educational attainment and acquiring stable, higher-paying jobs among Latinx immigrants.

In conclusion, as the second fastest growing ethnoracial group, Latinxs share of the total US population is expected to reach 24% by 2065 (Flores, 2017). This growth is anticipated to come primarily from U.S. births. High fertility rates among immigrant women, a large percentage of who are Latina, suggests that Latina immigrants and their children will account for a significant proportion of overall population growth, as well as the nation’s racial and ethnic diversification through 2065 (Johnson & Litcher, 2016; Livingston, 2019; Zayas & Sampson, 2014). Immigrant Latina mothers raise their children within a broad social context that influences the development and adaptation of Latina mothers and their children (Paat, 2013). An ecological perspective helps locate several macro- and micro-level conditions that may influence parenting. For immigrants, including immigrant Latina mothers, these may include acculturation processes, discriminatory experiences, and poor socioeconomic conditions. A circumstance that can disrupt the lives of immigrant Latina mothers at the micro-level is intimate partner violence. These various conditions shape the particular demands that Latinx immigrants experience in their lives that often have negative consequences for the social and psychological functioning of this community. For Latina immigrant mothers, this context also influences their parental functioning — a topic discussed later in this chapter.
Parenting

A wide range of professionals, including child and developmental psychologists, sociologists, educators and policymakers have long viewed parenting and family as the most important influences on the developing child (Bjorklund et al., 2002). Parenting has an important role in domains of survival, reproduction, nurturance and socialization (Lerner et al., 2002). In the broadest sense, it is defined as purposeful activities intended to guarantee the survival, development, and welfare of children (Hoghugi, 2004). In the following section, theoretical frameworks related to parenting and the impact of parenting on child outcomes is reviewed.

Theoretical Contributions of Parenting Processes

A number of major theoretical contributions to parenting literature have been made to understand parenting processes, including those by John Bowlby (1951), Mary Ainsworth (1970), Baumrind (1968), and Bronfenbrenner (1979) (Hoghugi, 2004). While out of the scope for this current review, their contributions to the literature will be briefly described. John Bowlby articulated the basic tenets of attachment theory, which was further expanded upon by this colleague Mary Ainsworth. Ainsworth extended this theory to include the attachment figure (e.g., a parent) as a secure base from which an infant can explore their environment while maintaining a sense of security and comfort (Bretherton, 1992). Ainsworth (1970, 1978) proposed three main classifications of attachment styles: secure, avoidant, and ambivalent/resistant. Attachment styles reflect patterns of infant behavior that largely result from repeated interactions and anticipated caregiver responses to infant distress (Benoit, 2004). Secure attachment is a critical outcome of parenting. A substantial body of literature provides support that infants are likely to develop a secure
attachment relationship with their parent if the infant is provided with sensitive and responsive parenting (Hoghughi, 2004; Lerner et al., 2002).

Another major contribution to the parenting field was the work of Baumrind (1966) who introduced three distinct parenting styles: authoritarian, authoritative, and permissive. Parenting style captures broad parenting patterns, which revolve around issues of control and socialization (Darling, 1999). Two key features of parenting behavior are used to distinguish these different styles: demandingness and responsiveness (Baumrind, 2005). In general, authoritative parenting style is characterized by high demandingness or control toward their child, while maintaining a responsive, warm and rational stance. This style is consistently associated with positive outcomes such as good academic performance and social competence and lower levels of behavioral problems across developmental periods (Darling, 1999).

Though not solely a parenting theory, Bronfenbrenner (1979) provided important contributions to recognizing the importance of the context for human development (Lerner et al., 2002). As mentioned previously, he posited human development occurs within an ecological environment and viewed the family as the principal context in which development takes place. However, he also recognized that multiple systems surrounding the family serve as sources of external influence (Bronfenbrenner, 1986).

Understanding which factors affect the ways individuals parent is at the core of contemporary parenting scholarship (Bornstein, 2016) and is clearly linked to an understanding of Latinx immigrant parenting. Drawing from Bronfenbrenner’s work, Belsky (1984) developed an influential model on determinants of parenting (Okagaki & Bingham, 2005). Belsky aimed to understand the general processes that influence parenting within the range of “normal functioning” (Belsky, 1984, p.84)
(1984) model, parenting is theorized to be multidetermined and influenced by three broad domains. These include: (a) characteristics of the parent (e.g., the personality and developmental history), (b) characteristics of the child (e.g., temperament), and (c) contextual sources of stress and support (e.g., social networks, employment, marital relationship). Over the past three decades, a vast body of empirical evidence has supported Belsky’s assertion that parenting is influenced by the characteristics of the parent, the child and the social context (Taraban & Shaw, 2018). For example, Prinzie and colleagues (2009) found small but significant effect sizes between the Big Five personality traits and parenting behaviors, including warm parenting, gentle control and structure, ability to cognitively stimulate and show respect for child’s autonomy. In another meta-analysis, maternal depression has been linked with harsh parenting and lower levels of sensitive parenting (Lovejoy et al., 2000). Consistent with Belsky’s (1984) assertion, parent characteristics such as personality and psychological functioning may impact parenting practices. With regard to child characteristics, higher levels of negative emotionality, which refers to the tendency to respond to one’s environment with high levels of negative emotionality or distress, is generally associated with lower levels of positive parenting (Crockenberg & Leerkes, 2003). Lastly, the marital relationship as a characteristic of the social environment in Belsky’s (1984) model has been the subject of much research (Taraban & Shaw, 2018). Evidence from a meta-analysis suggests marital conflict, such as disagreement between partners and overt verbal or physical aggression, is related to poor parenting behaviors. These included less parental acceptance, harsh punishment, and inconsistent discipline or control (Krishnakumar & Buehler, 2000).

Based on Belsky’s (1984) original model and robust empirical advances related to contextual predictors of parenting since its emergence, Taraban and Shaw
(2018) recently proposed an updated process of parenting model. Consistent with Belsky’s (1984) model, this updated model proposes three broad categories or domains: parent characteristics, child characteristics, and family social environment. In this updated model, parenting characteristics include personality, parental depression, parent cognitions and affect, gender, and developmental history. Child characteristics were expanded to include stress response, genetics, and emotion regulation. Lastly, family social environment includes original predictors in Belsky’s model, such as social support and martial quality. However, it also included culture and family structure (e.g., single-parent home) in the updated model.

The three domains (i.e., parent characteristics, child characteristics, and family social environment) in Taraban and Shaw’s (2018) model are posited to directly influence parenting as Belsky originally theorized. However, moderating paths between each domain were added in the updated model to reflect the interactive nature between these domains and possible indirect effects on parenting. For example, parental characteristics such as neuroticism and extraversion personality traits both predict controlling or forceful behaviors in disciplinary situations with young children (Clark et al., 2000). This study also demonstrated an interaction effect between negative emotionality in children and parent extraversion. As such, parents who endorse high extraversion show more controlling or forceful behaviors when children demonstrated high negative emotionality. Parents with low extraversion did not show controlling or forceful behaviors toward children with either high or low negative emotionality (Clark et al., 2000).

Taraban and Shaw’s (2018) process of parenting model is pertinent to the current study for three reasons. First, this model expands parents’ contribution to processes to include parenting cognitions. Parenting cognitions refer to beliefs,
perceptions, attitudes, goals and expectations, attributions and knowledge related to childrearing (Bornstein, 2016; Okagaki & Bingham, 2005). Parenting cognitions shape parenting practices and ultimately influence children’s development and adjustment (Bornstein et al., 2018). Therefore, parenting cognitions serve an important role in influencing parenting. Given the general emphasis on parenting behavior in past research, this study intended to add to literature by investigating how parenting cognitions may be shaped by the experience of IPV. In a later section, terminology and classifications of parenting cognitions and parenting practices will be reviewed separately.

A second reason Taraban and Shaw’s (2018) model is helpful in conceptualizing the current study is that it expanded the social environment where parenting takes place to include cultural influences. Broadly, culture shapes childrearing by providing a framework of normative or optimal parenting, including expectations about how to care for children and beliefs about what traits or behavior in children is desirable (Bornstein & Lansford, 2010). Despite intergroup heterogeneity, Latinx parents raise their children in ways that emphasize cultural values such as *familismo* and *respeto* (Harwood et al., 2002). *Familismo* refers to the importance of family closeness, unity, and loyalty among family members (Cauce & Domenech-Rodríguez, 2002). While *respeto* refers to the importance of obedience and deference to authority (Dixon et al., 2008). These values influence parenting cognitions such as forming parenting goals or beliefs about how children should behave, which in turn may shape parenting practices (Bornstein & Lansford, 2010). For example, socialization messages to promote *respeto* predicted more authoritarian parenting among immigrant Latina mothers. This suggests they depend on forceful control strategies to uphold the importance of obedience in their child (Calzada et al.,
As already mentioned, an important aspect of immigrant Latina mothers’ context in the US involves the acculturation processes. During this process, cultural tensions may arise when they are exposed to U.S. cultural ideals about parenting that may conflict with beliefs about parenting and gender role expectations from their country of origin (Vesely, et al., 2019). In turn, acculturative stress can negatively impact parenting. For example, Latinx parents categorized as experiencing greater acculturative stress report less desirable parenting practices and greater family conflict (Williams, et al., 2017).

Additionally, although not explicitly mentioned by Taraban & Shaw (2018), issues faced by Latinx immigrants such as experiences of discrimination could be represented in the family and social environment domain of the updated model. As previously stated, the increasingly restrictive and punitive nature of immigration policy today has contributed to the anti-immigrant social climate which functions to socially marginalize Latinx immigrants (Androff et al., 2011). Within this hostile climate, immigrant Latina mothers may experience individual and structural discrimination (Androff et al., 2011; Vesely et al., 2019). These experiences are related to lower levels of monitoring children’s activities, less consistent parenting, higher levels of harsh parenting (Ayon & Garcia, 2019) and adverse interactions with children (Gassman-Pines, 2015). Additionally, Latinxs immigrants may be subject to immigrant policing and surveillance that target unauthorized Latinx immigrants (Nichols et al., 2018). Heighted racial profiling practices towards Latinx immigrants following the 2016 presidential election was associated with negative health consequences for this community (Nichols et al., 2018). For Latinx immigrant parents specifically, changes in immigration-related practices under the Trump administration was related to behavioral adjustments. These included cautioning their children to
avoid authorities and talking to their children about changing the places where socialize (Roche et al., 2018). Importantly, undergoing these behavioral modifications were related to greater odds of parental psychological distress, including anxiety, depression and somatization (Roche et al., 2018).

Third, with the addition of socioeconomic factors, the updated framework (Taraban & Shaw, 2018) calls attention to issues related to economic hardship and its impact on parenting behavior and stress (Casselles & Evans, 2017). To begin, many Latinx immigrants tend to be economically disadvantaged and have lower economic resources to invest in their children’s needs or ability to afford housing in safe and adequately resourced neighborhoods (Casselles & Evans, 2017). Further, economic insecurity in Latinx immigrant families has intensified as anti-immigrant policies and enforcement of these policies have made it more difficult for immigrants, especially undocumented Latinx immigrants, to obtain employment (Androff et al., 2011). If Latina immigrants are able to gain employment, they may be limited to lower-status jobs with poor work conditions (Flippen, 2014) and run the risk of deportation or detention at the workplace (Androff et al., 2011). Involuntary removal of a parent in the case of deportation or detention disrupts the family structure and often compounds existing economic hardship as it results in income loss (Hagan & Rodriguez, 2002). Under the abovementioned conditions, immigrant Latinx mothers report inconsistent work schedules and/or long work days compete with demands of parenting such as establishing routines or spending time with their children (Aldoney & Cabrera, 2016). Another study demonstrating the impact of economic hardship on parenting reports parent financial stress is positively related to depressive symptomology, which in turn is linked to lower levels of academic monitoring of their children among immigrant Latinx parents (Gilbert et al., 2017). On the other
hand, immigrant Latinx parents living in low-income, high-crime neighborhoods demonstrate a high degree of control-oriented practices such as strict monitoring of their children’s activities thought to be a protective strategy against neighborhood threats (Cruz-Santiago & Ramirez Garcia, 2011). Therefore, like parents in the general population, economic hardship influences parenting practices. However, immigrant Latina mothers, particularly Latina immigrants not authorized to work in the US, likely face additional constraints on their economic health through limitations on labor participation, low-paying employment opportunities, unstable work conditions and potential economic burden of deportation under current immigration legislation.

Taken together, immigrant Latina mothers confront numerous tensions and constraints as they navigate life in the U.S., including acculturative stress, discriminatory experiences, and poor socioeconomic conditions (Vesely et al., 2019). The added dimension of immigration may create an additional burden of stress for immigrant Latinx families (Ayon & Bercerra, 2013) that clearly has several implications on parenting among immigrant Latina mothers. Using Taraban and Shaw’s (2018) model to help conceptualize this context, the current study examined how IPV influences parenting cognitions and behaviors among immigrant Latina mothers. It also in explored important determinants of parenting outcomes in participants’ broad social context (e.g., cultural values and expectations and immigration-related challenges). To begin, the terminology and research on parenting cognitions will be described below.

**Parenting Cognitions**

Parenting cognitions help organize and structure parenting by constituting “the how, what, when, and why of caring for children” (Bornstein, 2016, pg. 181).
Therefore, parenting cognitions are thought to be an important guiding force for parenting behavior or practices (Sigel et al., 2002) and serve as a framework, from which parents perceive and interpret their children’s behaviors (Bornstein, 2016). Generally, a number of concepts are grouped under the term parenting cognitions, which include parental beliefs, perceptions, attitudes, goals and expectations, attributions and knowledge about parenthood and childhood as well as one’s own parenting and children (Bornstein, 2016; Okagaki & Bingham, 2005).

*Parental beliefs* refer to ideas or information that parents consider factual (Okagaki & Bingham, 2005). For example, parents might have beliefs about the responsibilities and role that parents play in their child’s life. *Parental perceptions* involve interpretation about the quality, abilities or behavior of their own parenting behavior (Okagaki & Bingham, 2005). These perceptions may involve parent’s feelings of competence and satisfaction in their role as a parent (Bornstein, 2016).

*Parental attitudes* denote a person’s proclivities and response to supposed facts about a topic, object or situation, therefore add an evaluative component to beliefs or topics related to parenting (Bornstein, 2016; Okagaki & Bingham, 2005). For instance, parents may judge one form of discipline superior to another (Okagaki & Bingham, 2005). *Expectations* and *goals* refer to expectations parents hold about a child and developmental norms and the outcomes parents aim to achieve, including behaviors or qualities they hope to instill in their child (Bornstein, 2016; Okagaki & Bingham, 2005). For example, culture in some societies such as those in Latin America, encourage interdependence and cooperation which are manifested in the socialization goals and strategies used to instill such values in children living in these societies (Bornstein & Lansford, 2010; Harrison et al., 1990).
**Parenting attributions** are causal interpretations and meanings assigned to a child’s behavior (Bornstein, 2016). These interpretations usually differentiate between internal attribution, which involves interpreting a child’s behavior as a dispositional and intentional, and external attribution, which refers to interpreting a child’s behavior as situational, temporary and possibly unintentional (Bornstein, 2016). Lastly, *parenting knowledge* of child rearing and development involves having an understanding of the biological, socioemotional, and cognitive needs of children based on factual or scientific grounds and strategies for maintaining children’s health (Bornstein, 2016). Having an understanding of developmental norms and milestones of children, for example, provides parents with the information necessary to interpret children’s abilities and achievements and modify their own behavior or interactions accordingly (Bornstein, 2016; Bornstein et al., 2011).

Parenting cognitions have been postulated to shape parenting practices and mediate their effectiveness (Darling & Steinberg, 1993; Goodnow & Collins, 1990). A recent, longitudinal study found support that linked parenting cognitions to parenting practices, which in turn was related to child behavioral outcomes (Bornstein et al., 2018). Specifically, findings suggested mothers with greater maternal parenting knowledge, satisfaction, and internal attribution of parenting success (i.e., parenting cognitions) when the child was two years old engaged in greater supportive parenting two years later, which in turn was related to lower externalizing behavior problems in the classroom six years after that (Bornstein et al., 2018). Others have also found a link between other parenting cognitions and parenting practices. For example, Shumow and Lomax (2002) explored how parental self-efficacy pertaining to their capacity to help their teenagers with peer-related problems and community issues was related to parenting practices and adolescent outcomes in a multiethnic sample. Using
structural equation modeling, this study found parental self-efficacy predicted parental monitoring and parental involvement, which in turn predicted academic adjustment, including better school grades, higher academic achievement and less behavioral issues at school among adolescence (Shumow & Lomax, 2002). In the section below, parenting practices are discussed.

**Parenting Practices**

While parenting cognitions represent the abstract or intangible aspect of parenting, parenting practices give expression to parenting cognitions and constitute an array of activities and behaviors parents engage in with their children (Bornstein, 2016; Bornstein et al., 2011). Darling and Steinburg (1993) refer to parenting practices as “specific, goal-directed behaviors” by which parents perform their parenting responsibilities (p. 488). Parents engage in a wide range of core activities that can be conceptually subsumed within three domains that reflect functional areas in which such activities aim to promote children’s well-being (Hoghugi, 2004). Core activities (e.g., care, control and development) and the related functional areas they support will be briefly discussed within each domain.

**Care.** Activities grouped under this category are related to meeting the survival needs of their children. This includes providing for the physical, emotional and social needs of children (Hoghugi, 2004). Activities that involve physical care include actions intended to provide a child with basic necessities such as food, shelter, warmth, and adequate hygiene, in addition to prevention and remediation of harm, illness, or injury. Emotional care refers to support intended to ensure a child’s emotional wellbeing by creating experiences of unconditional love, regard as an individual and opportunities to exercise choice. Lastly, social care involves helping
children become well integrated across social settings (e.g., peers, siblings, extended family) by developing social skills or competence (Hoghugi, 2004).

**Control.** Control involves activities that set and enforce boundaries for children. Generally, this pertains to children’s behavior and often in reference to monitoring activities, which involves supervision of children’s activities to ensure that children’s activities stay within reasonable boundaries (Hoghugi, 2004). Control also involves disciplining children when they behave in a manner that in unacceptable or violates boundaries set forth by parents (Sanders & Mazzucchelli, 2018). These activities are guided by an interaction of parents’ disposition and cultural expectations or beliefs.

**Development.** Activities within this group encompass actions or opportunities that parents generate in order to promote children’s cultural, artistic, intellectual growth. An important task within this domain involves instilling values or cultural knowledge in children. Parents’ motivation behind these activities is their desire to see their children reach their full potential (Hoghugi, 2004).

In sum, parenting cognitions structure and influence parenting practices, which in turn constitute a significant portion of children’s life experiences (Bornstein, 2016). It is recognized that the quality of parenting a child receives has significant influence on the course of child development (Bronfenbrenner, 1986). The influence of parenting in the lives of children is pervasive and has the potential to be enriching and supportive or conversely diminishing and hinder opportunities for a child (Sanders & Mazzucchelli, 2018). In the parenting literature, parenting is considered in terms of two broad domains – positive and negative. Positive parenting is an inclusive term used in reference to dimensions of parenting such as warm, sensitivity, limit setting, and contingency-based reinforcement while negative parenting encompasses
dimensions such as inconsistent, over-reactivity, controlling and harsh (Taraban & Shaw, 2018). Research consistently links parenting low in positivity and high negativity to wide-range of negative child outcomes, such as internalizing and externalizing behavior problems, lower socioemotional functioning (e.g., self-regulation capacities and lower social competence), academic achievement and language development. On the other hand, parenting that is characterized as positive is associated with positive child outcomes in these same areas (Dallaire et al., 2006; Leerkes et al., 2009; Pungello et al., 2009; Sanders & Mazzucchelli, 2013, 2018; Stormshak, et al., 2000).

In addition to the influence of parenting on child general developmental outcomes, parenting also has implications on children’s positive adjustment in the context of adversity. Resilience generally refers to the pattern of positive adaptation in the context of present or past adversity (Wright & Masten, 2005). Researchers have used a variety of terms and meanings to describe concepts related to resilience, however, in general adversity is understood as environmental conditions that interfere with or threaten achievement in age-appropriate developmental tasks. These can include, but are not limited to conditions such as poverty, child maltreatment, or family and community violence. Several criteria have been used to determine positive adaptation in children including, the absence of pathology, successful achievement of developmental milestones, and subjective well-being (Wright & Masten, 2005). A wealth of literature has pointed to factors related to resilience in children that encompass characteristics of the individual child (e.g., adaptable temperament, effective emotional and behavioral regulation, good cognitive abilities), family characteristics (e.g., stable and supportive home environment, parental involvement), community characteristics (e.g., safe neighborhood, effective school system, low
community violence), and societal characteristics (e.g., protective child policies and low acceptance of physical violence) (Masten, 2001). These factors are considered “protective” and thought to moderate the impact of adversity on adaptation (Wright and Masten, 2005).

The adaptation of children facing significant stressors or difficulties is embedded within a context of multiple, interacting systems and the extent of children’s resilience is dependent upon these systems (Roberts & Masten, 2004). Family is considered as one of these systems. Active family involvement and parenting responses that are characterized by warmth, nurturance, and sensitivity help facilitate resiliency and adaptive adjustment (Maccoby & Martin, 1983; Sheridan et al., 2005). While a multitude of adversities may occur within the lives of children, the current study is interested in parenting within the context of IPV and the impact IPV has on parenting among Latina immigrant mothers. The following sections will review literature regarding the psychosocial effects of IPV on parenting and children and the role that parenting has on child adjustment to IPV exposure.

**Intimate Partner Violence**

IPV is the physical, emotional, psychological, and sexual abuse that occurs between intimate partners (Hattery, 2009). According to the National Intimate Partner and Sexual Violence Survey in 2015 approximately 36.4% of women in the general population have experienced some form of intimate partner violence in their lifetime (Smith et al., 2018). For Latinas specifically, some inconsistencies for ethnoracial differences in lifetime prevalence rates of intimate partner violence exist. However, most indicate Latinas experience comparable rates of IPV relative to other non-Latina women (e.g., Breiding et al., 2014; Cuevas et al., 2012; Sabina et al. 2015; Tjaden & Thoennes, 2000), particularly when sociodemographic variables are controlled
National survey data indicate 34.3% of Latinas reported any lifetime prevalence of IPV (Smith et al., 2017). When differences between nativity are examined among Latinas, immigrant Latinas generally report experiencing lower rates of intimate partner violence compared to U.S born Latinas. For example, U.S born Latinas are 2 to 3 times likely to experience IPV than immigrant Latinas (Lown & Vega, 2001; Sabina et al., 2015). In another study, lifetime and past year prevalence for physical violence were the highest among U.S. born Latinas (48.4%), followed by migrant-seasonal workers (24.5%), and immigrant Latina women (22.2%) (Hazen & Soriano, 2007). These differences appear to be consistent with national survey data indicating U.S.-born women report significantly higher rates of lifetime rates of IPV compared to foreign-born women (Breiding, et al., 2014). IPV victimization is widespread among women, including those who are parents (Austin, et al., 2017). The National Survey of Children’s Exposure to Violence indicated nearly 16% of children in the US have been exposed to IPV in their lifetime (Finkelhor et al., 2015). Among Latinx children, data from the National Survey of Children’s Health indicate 12% of children from U.S. native families compared to 6% of children from immigrant families have been exposed to IPV (Caballero et al., 2017).

Ample research has documented the negative, enduring social, emotional, physical health outcomes for both women and children who experience IPV (Austin et al., 2017). In a fairly recent systematic review of 75 studies (Dillon et al., 2013), depression, posttraumatic stress disorder, anxiety, suicidal thinking, gastrointestinal issues, respiratory and cardiovascular conditions are among some of the mental and physical health consequences most consistently associated with IPV among women. For children, exposure to IPV is related to problematic outcomes in psychological,
physical, and social domains across developmental stages with the greatest burden on social functioning (e.g., developing healthy relationships with peers) (Howell et al., 2016). Therefore, the impact of experiencing IPV is considered a significant health problem for women and children (Amerson et al., 2014). While there is a large body of research that highlights the wide-range of effects of IPV, the following sections will review the psychosocial impact of IPV among mothers and children with a focus on the influence IPV has on women’s parenting.

**Psychosocial Effects of IPV on Mothers**

Mothers who experience IPV demonstrate similar psychosocial effects as women without children. For example, experiencing IPV was positively related depressive symptomology (Renner et al., 2015; Murray et al., 2012) and greater odds of reporting depression (Postmus et al., 2012) in addition to PTSD (Chemtob & Carlson, 2004) among mothers of multiethnic samples. For Latina immigrant mothers specifically, high levels of depression and low levels of self-esteem were reported for those with a history of IPV (Perilla et al., 1994). Psychological abuse (e.g., verbal insult or humiliation) was significantly correlated with Major Depressive Disorder (MDD) and comorbid MDD/PTSD, while physical abuse was only significantly associated with MDD (Kelly, 2010). Additionally, number poor mental health days that interfered with daily activities was positively correlated with PTSD and MDD diagnosis and comorbid PTSD/ MDD. Similarly, in a sample of Latina immigrants, majority of which were mothers, a positive history of IPV increased the odds of meeting criteria for PTSD (Fedovskiy et al., 2008).

Unlike women without children though, mothers may confront a unique form of IPV, which involves the manipulative use of her children and her parenting role. For example, threatening or using violence towards children or threatening to take
children away with them to illicit compliance from mothers (Dutton & Goodman, 2005; Lapierre, 2010). Mothers report these types of strategies are used to harass, intimidate, and keep track of them (Beeble et al., 2007). This form of IPV appears to overlap with general experiences of IPV (i.e., psychological, sexual, physical forms of IPV), but significantly accounts for a unique variance in maternal outcomes above and beyond that of general types of IPV commonly assessed (Ahlfs-Dunn & Huth-Bocks, 2016). Specifically, IPV involving children and the parenting role significantly predicts maternal anxiety, PTSD, and greater frequency of parental daily hassles (Ahlfs-Dunn & Huth-Bocks, 2016).

**Effects of IPV on Mothers’ Parenting**

The deleterious effects of IPV on parenting were demonstrated in a recent meta-analysis of 21 studies (Chiesa et al., 2018). Data showed a significant inverse relationship between IPV scores and positive parenting (e.g., effective parenting skills, engagement, communication). IPV also demonstrated a positive relationship with both physical aggression (e.g., harsh discipline, hitting, kicking, slapping the child) and neglect with overall moderate effect sizes (Chiesa et al., 2018). Several studies have attempted to understand the mechanisms underlying the relationship between IPV and parenting. For example, Levendosky and Grahman-Bermann (2001) found IPV had a significant direct effect on maternal psychological functioning, which in turn impacted parenting behavior. Specifically, experiencing depressive symptoms, posttraumatic symptoms and other negative psychological symptoms including insomnia and anxiety follow after experiencing IPV in the past year. Consequently, mothers who experience poor psychological functioning demonstrate less warmth, control and effective parenting (Levendosky & Grahman-Bermann, 2001).
Another study sought to examine how parenting stress may indirectly influence the relationship between experiencing IPV and emotionally unsupportive parenting behaviors, such as psychological control, hostility and emotional unavailability (Loucks and Shaffer, 2014). Results suggested greater IPV is related to more emotionally unsupportive parenting behavior as well as higher parenting stress. With regard to the role of parenting stress, this study found greater IPV scores predict higher levels of emotionally unsupportive parenting behavior through parenting stress (Loucks & Shaffer, 2014). Further, this relationship depends on how much parenting stress is experienced such that mothers reporting higher levels of IPV were more likely to engage in higher levels of emotionally unsupportive parenting behavior at high levels of parenting stress compared to mothers that endorsed low or moderate levels of parenting stress (Loucks & Shaffer, 2014.) This study therefore demonstrates that parenting stress can help explain the relationship between IPV and unsupportive parenting, particularly when parenting stress is high.

The effects of IPV on parenting over time and the potential mechanisms underlying this relationship have also been examined. For example, Postmus and colleagues (2012) studied the unique effects of different types of IPV, including physical, psychological and economic IPV on maternal mental health and parenting longitudinally. Findings revealed that psychological IPV at year one predicted less parenting engagement in parent-child activities at year five (Postmus et al., 2012). On the other hand, mothers were more likely to use spanking if they experienced economic IPV and psychological IPV at year one (Postmus et al., 2012). In another longitudinal study, mothers who reported IPV when the child was six months old showed an increase in depressive symptoms when the child was 15 months old, which in turn was related to increases in maternal harsh intrusive parenting when the child
was a toddler (Gustafson & Cox, 2012). While examining the role of depression and social support in the relationship between IPV and parenting practices among low-income mothers with pre-adolescent children, Murray and colleagues (2012) reported IPV at baseline was associated with increases in mother’s endorsement and use of harsh physical punishment or discipline as well as lower maternal involvement one year later, however, this study did not find depression or social support to have significant mediating effects on the relationship between IPV and parenting. Together, this body of work suggests mothers who experience IPV may display negative parenting behavior and mechanisms such as psychological functioning and parenting stress may help explain the nuanced ways this relationship occurs.

In addition to the overwhelming evidence that suggests IPV impacts parenting practices negatively, evidence for the negative impact on parent’s perceptions of their competence in the parenting role has also been reported in one study (e.g., Renner et al., 2015). Specifically, the direct negative association between physical IPV and parenting competence was found, such that mothers who experience IPV at time 1 reported lower sense of satisfaction with and efficacy in their parenting role at time 2. Additionally, depressive symptoms and mastery (i.e., sense of personal mastery and control) were found to sequentially mediate the relationship between physical IPV and parenting competence (Renner et al., 2015). This suggests IPV exerts its influence on a mother’s sense of parenting competence initially through psychological effects and subsequently via the degree of personal mastery and control mothers perceive in their lives.

Overall, these studies point to the harmful impact IPV has on mothers’ parenting behaviors, including less parent engagement, more harsh discipline and intrusive parenting, and a mother’s sense of parenting efficacy and satisfaction in her
parenting role. Literature also highlights the complex relationships between IPV, parenting and child outcomes. Broadly, exposure to IPV refers to children who are aware of the violence that occurs between their parents, which may encompass witnessing violent acts or coercive behavior between parents, overhearing arguments or observing indications of violence, for example, bruising or broken household items (Mullender et al., 2002; Holt et al., 2008). Children exposed to IPV often exhibit internalization problems, for example, depression, low self-esteem, withdrawal as well as external or behavioral issues, such as aggression, rebellion, hyperactivity, and delinquency (Evans et al., 2008; Kitzmann et al., 2003; Wolfe et al., 2003). In a community sample, children exposed to IPV were almost 4 times more likely to develop internalizing and externalizing behaviors, however, 54% were identified as resilient suggesting that positive adaptation in light of IPV exposure can and does occur (Martinez-Torteya et al., 2009).

**The Role of Parenting on Child Outcomes in the Context of IPV**

Researchers have begun to elucidate how parenting practices influence children’s adjustment in the context of IPV in particular. For example, while studying child disruptive behavior as an outcome, Grasso and colleagues (2016) found mothers who report greater occurrence of psychological IPV are more likely to demonstrate psychological (e.g., name calling, threaten to send away or spank) and physical forms of harsh parenting (e.g., pinch, slap, hit with fist or object). This is consistent with the notion that IPV is related to negative parenting as discussed in the previous section. Further, this study found support for the indirect effect of psychological harsh parenting such that psychological IPV is related to greater disruptive behavior through psychologically harmful parenting behaviors (Grasso et al., 2016).
Another study also examined the role of parenting practices between physical IPV and externalizing child behavior over three time points (Greeson et al., 2014). Parenting practices in this study reflected mothers’ engagement in authoritative, authoritarian and permissive parenting. Across an 8-month span, only authoritative parenting practices at time 2 was related to lower child externalizing behavior at time 3. Contrary to findings discussed in the studies already reviewed, higher IPV at baseline was related to higher authoritative parenting at time 2, which subsequently was associated with lower child externalizing behavior at time 3 in this study. In other words, lower problematic child behavior in the context of high levels of IPV can be explained by the increased use of parenting practices characterized as authoritative parenting (e.g., warm, responsive, sets boundaries). Ehernsaft and colleagues (2017) report a relatively similar pattern with regard to parenting practices and child trauma symptomology as an outcome. A significant interaction between positive parenting and IPV was found such that mothers demonstrating higher positive parenting was related to lower trauma-related symptoms in their children when IPV scores were low while no interaction effect was found for those with high IPV scores (Ehernsaft et al., 2017). Results suggests that supportive or positive parenting may protect children from the sequela of IPV, such as PTSD symptomology, but for children living in homes marked by high levels of IPV the buffering effects of positive parenting may not be as adequate (Ehernsaft et al., 2017).

Finally, using linear growth modeling, Gewirtz et al., (2011) explored parenting correlates (e.g., parenting practices and maternal distress) of child internalizing symptoms, including fears, depressive and trauma-related symptoms in the weeks following exposure to a severe IPV incident. Baseline levels of positive parenting significantly predicted decreases in child internalizing symptoms over time
suggesting that mothers’ engagement in positive parenting has a protective effect on child’s internalizing outcomes. Therefore, parenting has important influential role of parenting in children’s recovery over the few weeks following IPV exposure (Gewirtz et al., 2011).

In conclusion, the majority of existing literature indicates IPV has negative consequences on mothers’ parenting behavior. With few exceptions (e.g., Greeson et al., 2014; Murray et al., 2012), IPV often exerts its influence on parenting through the psychological state of mothers such as the presence of depression or parenting stress. Furthermore, the importance of parenting behavior on child outcomes in the context of IPV is shown. In the studies reviewed here, the quality of parenting behavior may either hinder or support children’s positive adaptation to IPV exposure. For example, spending quality time and displaying child-centered parenting practices may buffer the negative effects of IPV such as child trauma symptomology (e.g., Ehnersaft et al., 2017). These studies also point to the complexity of these relationships such as the potential influence of high instability or stressful circumstances (Greeson et al., 2014) and high levels of IPV (Ehnersaft et al., 2017), suggesting the protective effects of positive parenting on child outcomes is nuanced.

Importantly these studies highlight that despite experiencing IPV, mothers may be able to display positive parenting, contrary to the predominantly held notion that mothers’ parenting in the context of IPV is deficient (Lappierre, 2008). Qualitative data indicates mothers experience an increased sense of responsibility to care for and protect their children from harm (Lappierre, 2010). Furthermore, mothers use a variety of strategies to protect their children from the harmful effects of IPV (Nixon et al., 2017). Proving emotional support and nurturance was the most commonly used strategy and perceived to be highly effective by mothers (Nixon et al., 2017). A
handful of studies have reported mothers may attempt to compensate through increased attentiveness and sensitivity (Letourneau et al., 2007), more effective parenting and increased healthy attachment with their children (Levendosky et al., 2003), and engage in greater authoritative parenting (Greeson et al., 2014). Therefore, it is important for future research to not only document the difficulties and negative influences IPV has on mothers but also examine the ways in which mothers use strategies and adopt positive parenting approaches in the context of IPV (Lapierre, 2008).

**Effects of IPV on Parenting among Immigrant Latina Mothers**

Research regarding the effects of IPV on parenting among immigrant Latinas in particular is limited. To date, four studies have explored these phenomena. First, Altschul and Lee (2011) investigated the direct and indirect effects of acculturation indicators and psychosocial risk such as IPV on child-directed physical aggression using a subsample from the Fragile Families and Child Wellbeing Study. Among immigrant Latina mothers, no support was found for the direct effect of IPV on child-directed aggression or indirect effects of acculturation indicators (e.g., nativity, greater religious attendance, time in the US, endorsement of traditional gender norms) between IPV and child-directed aggression (Altschul & Lee, 2011). However, nativity was shown to be a significant predictor of physical aggression toward children, such that foreign-born Latinas were less likely to report child-directed aggression. This suggests children of immigrant Latina mothers may be at lower risk of experiencing maternal physical aggression and foreign-born or immigrant status may have an important protective effect (Altschul & Lee, 2011). These authors suggest early socialization and cultural norms related to parenting, such as conceptions of children’s capacities and use of aggression toward children may explain this
relationship. However, cultural values or ideas related to parenting were not captured in this study, which limits one's ability to draw these conclusions. Another limitation to this study was the focus on only one parenting outcome—use of physical aggression. As already discussed, parenting involves an array of practices and cognitions, including parenting beliefs and attitudes (Bornstein, 2016). It is possible that significant relationships among IPV, acculturation, and other aspects of parenting exist among immigrant Latina mothers, which could be elucidated by future research.

One qualitative study compared the influence of maternal depression, IPV, and sociocultural factors on the perceptions of their capacities as mothers between Mexican mothers living in Mexico and immigrant Mexican mothers residing in the US (Orozco & Mercado, 2019). With regard to the influence of IPV, results indicated that mothers, regardless of where they reside, report IPV as an impediment on their performance in the parenting role. While the specific effects of IPV on parenting were not explicitly stated, it is assumed that IPV exerted its influence through consequences of IPV such as low self-esteem, anxiety, depression, fears, and sleep difficulties which made parenting more difficult for these mothers. Depression in particular interfered with mothers’ ability to be attentive to their children and plan their day-to-day activities (Orozco & Mercado, 2019). This study also noted important cultural influences on mother’s beliefs about their role as mothers, such as being highly attentive to children, protective and involved in children’s activities (Orozco & Mercado, 2019). Ideas and attitudes about discipline were also discussed such that mothers’ thought talking to their children and explaining what behavior is appropriate was more efficacious than physical punishment. Lastly, numerous challenges while living in the US were described by immigrant Latina mothers. These included language barriers, poor economic conditions in addition to difficulty
obtaining employment, lack of access to federal benefits and fear of deportation for undocumented immigrants (Orozco & Mercado, 2019). Overall, this study has important contributions to increasing awareness with regard to how mothers understand the influence of IPV in their lives and on their parenting behavior. Additionally, while not explicitly aiming to study parenting cognitions, this study reported that immigrant Latinas hold negative attitudes about punitive or physical punishment. With that said, this study did not explicate how IPV impacts parenting practices or cognitions specifically. Rather, IPV was described a general “barrier” to functioning in the parenting role and attitudes about discipline were discussed in the context of cultural influences than IPV explicitly. Therefore, the unique influence on parenting practices and cognitions within the context of IPV, including possible shifts in the way mother’s think and what they do as parents remains unclear.

Similar to the study conducted by Orozco and Mercado (2019), one unpublished undergraduate, qualitative study also investigated the perceived effects of IPV on the parenting of immigrant Latina mothers (Acosta, 2017). Findings suggest mothers perceived IPV to activate a heightened sense of protectiveness towards their children yet at the same time felt they were unable to adequately protect their children from the harm of IPV exposure. Additionally, the contribution of IPV to the development of mental health concerns such as depression, anxiety, stress and low self-efficacy were perceived to influence mothers’ increased harsh attitude and use of physical punishment toward children, ability to enjoy their children and fostered doubt related to her ability to take care of them (Acosta, 2017). Even so, most mothers indicated that their ability to complete parenting tasks that meet children’s basic needs were not negatively impacted (Acosta, 2017). Mothers in this study also described how IPV motivated their desire to foster values of respect and non-violence
in intimate relationships as well as instilling the importance of education. Overall, mothers in this study perceived IPV negatively impacted their mental health, sense of efficacy related to their parenting, and increased use of punitive parenting behavior, yet mothers indicated they were able to perform parenting tasks related to the children’s basic needs. This study provides valuable insight about IPV’s effects on parenting practices, such as discipline and care practices, as well as aspects of parenting that can be considered parenting cognitions (e.g., parenting goals and parental efficacy). However, this study did not conduct a comprehensive assessment of various parenting cognitions and behaviors.

Finally, Kelly (2009) examined the decision-making process to stay or leave abusive relationships among immigrant Latina mothers. Though this study did not provide data about the effects of IPV on parenting, it offers some insight about the significance of their mothering role in these decisions. Furthermore, findings suggested how mothers make efforts to protect their children from IPV exposure and feel significant guilt as mothers when children are negatively impacted by IPV (Kelly, 2009).

In addition to the above-mentioned research, Edelson and colleagues’ (2007) study is mentioned here due to its focus on Latinas. However, since immigration status of Latinas included in this study is unknown it may limit the generalizability to immigrant Latinas. Nevertheless, this study suggests Latinas endorse more parenting stress, lower emotional attachment to their child, lower parental competence and social isolation compared to non-Latina mothers. Since nativity, level of acculturation, or immigration-related stressors were not included this study, possible explanations for these differences cannot be clarified. Additionally, it is unclear how
increased parenting stress translates to actual functioning because this study did not examine specific parenting behavioral outcomes.

Together, findings from these four studies among immigrant Latinas show some convergence, such as the negative influence of IPV on maternal mental health functioning and increased parenting stress (e.g., Acosta, 2017; Orozco & Mercado). Further, despite mothers’ perception that IPV negatively influenced their parenting activities (Orozco & Mercado, 2019) and decreased their sense of efficacy as a parent (Acosta, 2017), mothers reported a high level of involvement with their children (Orozco & Mercado, 2019) and indicated they were still able to provide for their children’s needs (Acosta, 2017; Orozco & Mercado, 2019). Important contextual influences were also highlighted by Acosta (2017) and Orozco and Mercado (2019), such that immigrant Latina mothers face several structural barriers and challenges as immigrants (e.g., traditional gender norms, SES, language barriers, discrimination) that shape their experiences of parenting in the context of IPV, thereby making it difficult to navigate the parenting difficulties that arise from IPV (Acosta, 2017; Orozco & Mercado, 2019). While these studies begin to demonstrate how IPV influences behavioral and cognitive components of parenting several gaps will be described next.

First, a thorough analysis of parenting cognitions has not been conducted. For example, cognitive aspects of parenting discussed in these studies were limited to attitudes about physical discipline (e.g., Acosta, 2017; Orozco & Mercado, 2019), parenting goals such as instilling values of traditional Latinx culture and attitude of nonviolence attitude (e.g., Acosta, 2017; Orozco & Mercado), and parenting self-efficacy generally (e.g., Acosta, 2017). Since parenting cognitions constitute an array of ideas, perceptions, and attitudes there is still more explore. In particular, mother’s
opinions about how to best facilitate positive adjustment in their children when IPV has occurred in the home. Additionally, what expectations mothers may have for themselves as parents and how they view themselves as a mother given their experiences of IPV is also missing from the literature.

Second, while Acosta (2017) highlights the challenges of parenting while in an abusive relationship and after leaving an abusive partner, the manner in which mothers may negotiate their parenting duties or navigate disagreements related to parenting has not been explored among this population. Exploring this issue may offer insights about potential areas of maternal strength (e.g., adaptive strategies for co-parenting) or areas of challenge. This would help providers working with this population know potential needs and resources for mothers who co-parent after exiting the relationship.

The purpose of the current study was to investigate how the experience of IPV impacts parenting among immigrant Latina mothers using grounded theory methodology. To address the gaps described above, this study conducted an in-depth exploration of parenting practices and cognitions. It also examined the parenting experiences of immigrant mothers, both who parent and do not co-parent. Finally, it also explored the ways that an anti-immigrant climate impacts the lives of immigrant Latina mothers who have experienced IPV and possible influences on how they think and what they do as mothers. The methodology that was used for this study is discussed in detail in the following chapter.
Chapter III: Methodology

The purpose of this study was to explore the impact of IPV on parenting among immigrant Latina mothers. While previous research has examined the influence of IPV on parenting, these studies have primarily focused on behavioral aspects of parenting, such as parenting engagement and disciplinary strategies using combined multiethnic samples (e.g., Gustafsson & Cox, 2012; Huth-Bocks & Hughes, 2008; Levendosky & Graham-Bermann, 2001; Murray et al., 2012; Postmus et al., 2012). Only four studies investigating this topic area have focused on immigrant Latinas, specifically (e.g., Acosta, 2017; Altschul & Lee, 2011; Kelly, 2009; Orozco & Mercado, 2019). Although these studies have helped to elucidate some of the effects of IPV on parenting in this population, more research is needed to better understand this topic. The overarching question of the current study was: How does the experience of IPV impact parenting among immigrant Latina mothers? The following sub-questions were also addressed in this study: (a) In what ways does IPV impact cognitive aspects of parenting (e.g., parenting self-efficacy, satisfaction, parental attitudes, parenting expectations and goals)?, (b) In what ways does IPV impact behavioral aspects of parenting (e.g., activities concerning basic care, setting boundaries, promoting development)?, and (c) How do contextual factors (e.g., sociopolitical climate, immigration, culture, relationship status, custody arrangements) influence parenting among immigrant Latina mothers who experience IPV?

Due to the dearth of research on this topic of and population of interest, an exploratory approach was taken that emphasized understanding the phenomena or experience from a personal perspective. To this end, grounded theory methodology (Strauss & Corbin, 1990) was used to collect and analyze data to expand on existing
yet limited literature. The overarching goal of grounded theory is to generate a theory based in the lived experiences and social context of participants who engage in dialogue with interviewers (Fassinger, 2005; Ponterotto, 2010). The procedural methods of Strauss & Corbin (1990) employed in this study were augmented by a constructivist lens or philosophical stance. A constructivist lens acknowledges that multiple human realities exist rather than a single, universal “truth” (Charmaz, 2000; Higginbottom & Lauridsen, 2014). A resulting theory is then understood as an interpretation of a particular reality that is co-constructed by the research and participants. Complementing Strauss and Corbin’s (1990) grounded theory methods with a constructivist stance also allowed researchers to understand the complexities of participants’ constructed realities within the cultural context in which they are embedded (Charmaz, 2006; Higginbottom & Lauridsen, 2014; Ponterotto, 2010).

In grounded theory methodology a theory is developed in an inductive fashion, involving an iterative process where data is collected, coded, organized and conceptualized concurrently (Fassinger, 2005). While codes are being compared and organized into preliminary categories, researchers conduct theoretical sampling, which refers to seeking and gathering relevant data to further explicate preliminary categories (Charmaz, 2006). New data continues to be collected until no new categories, properties, or relationships emerge; this is referred to as saturation (Charmaz, 2006). At that point, the features and relationships among constructs are specified into a substantive theory (Fassinger, 2005). A detailed discussion of data analytic procedures is presented later in this chapter.

**Ethical considerations**

Due to the sensitive nature of this topic, recommendations regarding issues of safety and confidentiality proposed by the World Health Organization (2001) were
implemented in order to ensure this study was conducted ethically and appropriately. The physical safety of respondents and research team is paramount when conducting research on violence against women (World Health Organization [WHO], 2001). The current study recruited and interviewed individuals who were not experiencing IPV at the time of the interview. All potential participants were screened using a six-item, criteria-based screening form that was developed by the primary investigator. One forced-choice (i.e., yes/no) question was used to screen for current IPV. No participants endorsed current IPV.

While the exclusion of individuals with current IPV may have mitigated some issues of immediate safety, several strategies were used to minimize risk of participating in this study and to maintain confidentiality. First, interviews were conducted in a private setting. The first six interviews took place in a confidential room at the United Migrant Opportunity Services (UMOS) Latina Resource Center where participants were recruited. The remaining five interviews were conducted remotely due to the coronavirus pandemic. The interviewer and participant participated in phone interviews, which took place in private rooms or areas in their respective homes. Second, protecting confidentiality was another consideration to ensure participant safety (WHO, 2001). The following measures were taken to maintain confidentiality: (a) participants were only required to provide verbal consent, (b) participant names were excluded from demographic forms and instead given a code, (c) the use of participants’ or participants’ family names were avoided. (d) all identifiable information was redacted from the interview transcript. Further, all study documents, including screening questionnaires, demographic forms, interview transcripts were kept in a secure location. Audio recordings of interviews were stored in a private, password-protected electronic drive. Only authorized individuals,
including the primary research team, auditor and transcriber, were given access to these data. Third, active efforts to reduce distress caused by participating in the current study were taken. The interviewer actively attended to indications of distress and continuously assessed whether the level of distress necessitated early termination (WHO, 2001). No interviews were terminated prematurely due to psychological distress. Also, a list of local community services and resources was prepared by the primary researcher and offered to participants at the conclusion of the appointment.

An additional ethical issue pertinent to the current study was the limits of confidentiality related to reported child abuse as required by law. In Wisconsin, Wis. Stat. sec. 48.981 requires 29 different types of professionals, including mental health professionals, to report child abuse or neglect. Conduct and acts that constitute child abuse or neglect that must be reported to child protective agencies are defined by state civil laws (Child Welfare Information Gateway, 2019). Statutes in Wisconsin define different types of child abuse, including physical abuse, neglect, sexual abuse, and emotional abuse. Some state laws include a child’s witnessing of domestic violence as a form of abuse or neglect (Child Welfare Information Gateway, 2016). Wisconsin statutes do not define circumstances that constitute witnessing domestic violence, however, may be considered under statute 948.04, as a situation that may ensue mental harm to a child. Substantial harm to a child’s psychological functioning that may be demonstrated through substantial and observable change in behavior, emotional response or cognition.

Participants were informed of the interviewer’s duty to report cases of real or suspected child abuse, negligence, or exploitation to the appropriate authorities. Additionally, the interviewer consulted with the UMOS Latina Resource Center agency director to understand the intake process for their programs and services,
including what their procedures are for reporting child abuse. As a result of these intake procedures, participants in this study were thoroughly screened for any history of abuse targeted toward their children or report of children witnessing IPV. Therefore, issues related to child abuse and had been adequately addressed by the agency. In cases where participants disclosed vague information suggestive of past physical harm to children, they were reminded of the limits of confidentiality and queried if information had been previously reported to the UMOS Latina Resource Center.

**Participants**

The current sample consisted of 11 participants living in the Milwaukee metropolitan area who had experienced IPV in the past and parented their children while experiencing violence. Participants were at least 18 years of age and met the following criteria: (a) experienced IPV in a previous or current relationship, (b) identified as Latina/Hispanic or of a country that was considered Latin American, (c) had been the biological mother, step-mother, or adoptive mother of one or more dependent children between under 18 years old, (d) parented their children while experiencing IPV, (e) qualified as a foreign-born immigrant (i.e., born outside of the continental US). Individuals were excluded from participating if they were actively experiencing IPV at the time of the screening and were not English- or Spanish-speaking. All participants were recruited from UMOS Latina Resource Center.

With regard to sample demographics, the average age was 36.9 (range = 27-48 years). In terms of the highest level of education achieved, 45% (n = 5) reported primary school or elementary school, 36% (n = 4) had secondary or middle school, and 18% (n = 2) had a high school degree. The majority were employed (81%) and reported an annual family income was less than $20,000 (90%). With regard to
country of origin, most women (81%) were from Mexico. Average time living in the US was 12.9 years (range = 5-20 years). Participants were not directly asked about their documentation status on the demographic form; however, two different sources were used to appraise women’s immigration status. First, an optional, forced choice question regarding legal authorization to work in the US was included in the demographic form. Of those that responded, two participants were authorized to work in the US, while four were not authorized to work. Second, documentation status was assessed qualitatively through discussion of immigration-related issues during the interview. Based on these sources, it is estimated that the majority (n = 9) of the participants had undocumented immigration status. The median number of children per household was 3 (range = 2-4) with an age range from 1 to 20 years old. Average length of time since last incident of IPV was 1.8 years (range = 3 months – 4 years). All participants indicated they had exited the relationship. Five participants indicated they were co-parenting with their former abuser.

**Research Team**

The primary investigator (this author) was responsible for data collection and conducted all interviews. The current study also used a research team to complete data analysis. Utilizing a research team contributes to study quality assurance, which is described further in a later section of this chapter (Morrow, 2005). The primary research team included the principal researcher (PI) and two doctoral level counseling psychology graduate students. The background of the research team included, one White, European American, queer, cis-gender woman and two second-generation Mexican American, cis-gender women. All had varying degree of prior experience with grounded theory methods through previous graduate training or conducting their own research using grounded theory. Still the primary investigator provided (or
reviewed) education and training, including an overview of the background, methodology, and key concepts of grounded theory prior to and throughout data analysis.

In addition to the primary research team, an auditor also served on the research team to assure study rigor. This auditor was the dissertation advisor and is a professor in counseling psychology with research experience in grounded theory methodology as well as considerable research and clinical experience with the Latinx community. Two external consultants were also utilized throughout the study design and recruitment process. These individuals were staff from the UMOS Latina Resource Center, the study recruitment site. They assisted with refining the study’s focus and protocols as well as recruiting potential participants.

**Measures**

**Screening Form**

Eligibility was determined by screening potential participants with a six-item form developed for this study. Each forced-choice item corresponded with exclusion and inclusion criteria. Please see Appendix A.

**Demographic Form** The demographic form included questions about several characteristics of the sample, including the participants’ age, their children’s age, relationship status, and nature of previous or current relationship(s) that involved IPV. Additionally, participants were asked provide information regarding their country of origin, employment status, education and income level. The pencil-paper form had an open-response format, with the exception of the query for income level. Forms were available in Spanish and English, however, all participants completed Spanish language forms. The PI remained available to explain any questionnaire items or answer any questions. Please see appendix B for the demographic form.
**Interview Protocol**

Consistent with grounded theory methodology, data were collected through individual interviews (Fassinger, 2005). For the purposes of this study, semi-structured interviews—the most commonly used format—was used (Madill, 2012). This method involves preparing a schedule of open-ended questions and prompts relevant to the research study topic, however, remains flexible enough to make adjustments. For example, interviewers can change the ordering of questions while conducting an interview and to examine unexpected areas of inquiry raised by a participant (Madill, 2012). Therefore, this format facilitates rapport and provides greater latitude for the interviewer to cover material more deeply or broadly (Smith & Osborn, 2003). Given the sensitive nature of the topic examined, the interview schedule was organized in a manner that asked more sensitive questions or areas of inquiry toward the latter half of the interview to allow time for the participant to acclimate to the interview process and build rapport with the participant (Smith & Osborn, 2003). The original interview protocol underwent minimal modifications after the first few interviews that were mostly rephrasing and incorporating more explicit language for clarification. Please refer to Appendix C for the interview protocol.

**Data Collection Procedures**

**Recruitment**

Participants were recruited from the UMOS Latina Resource Center in Milwaukee. The PI approached the Latina Resource Center with the proposed study and established a collaboration with agency staff. A staff member that worked closely with mothers and families through the agency’s child programming served as the primary liaison between the PI and potential participants. After study materials and inclusion/exclusion criteria was finalized, the consultant obtained a list of potential
participants (present or former agency clients) and contacted them to provide information about the study purpose. Those that were interested were invited to complete a face-to-face interview. At the time of the scheduled appointment, the staff member acting as the liaison personally introduced the participant to the PI. After introductions, the PI and participant moved to a private room where a final screening process was completed to confirm eligibility (see Appendix A). Six participants were recruited in this manner before recruitment and data collection procedures were modified in response to the COVID-19 pandemic in March 2020.

Due to COVID-19, changes to the protocol were then developed and approved by Marquette University’s IRB in March 2020 to allow the PI to conduct research activities remotely. Adjustments to recruitment involved obtaining a list of potential participants with their contact information from the agency consultant. Individuals were contacted and provided details about the study purpose, data collection procedures, and potential risks and benefits. Those interested were assessed for eligibility. Eligible participants were invited to participate and scheduled for a phone interview at a later date. At the date of the scheduled interview, participants were screened using the screening form and if eligibility was confirmed the PI proceeded with the interview.

**Obtaining Consent**

Consent was obtained on the date of the scheduled interview. Participants received a written copy of the consent form and provided with a verbal explanation of all components of the document. Participants were oriented thoroughly to the nature of the study and any potential related risks and benefits in participating, including the ethical and legal mandate to break confidentiality in instances of suspected child abuse or neglect. After questions related to consent were answered and participants
acknowledged understanding of their participation, they were asked if they would like to proceed. To ensure additional protection for women’s safety and confidentiality, participants were not asked for written signatures and instead provided verbal consent.

**Interviewing**

Once verbal consent was obtained, participants completed the demographic form. This was followed by an individual, semi-structured interview led by the PI. Based on participant preference, all interviews were conducted in Spanish. Originally all interviews were planned to be in-person. However, due to COVID-19, only six interviews were conducted face-to-face and the remaining five were completed via phone. Interviews conducted in-person were completed in a private room at the Latina Resource Center. Phone interviews were completed from a secure, private location in the respective homes of the PI and participant.

Interview duration ranged from 60 to 90 minutes. All interviews were audio recorded. Throughout the interview participants were monitored for signs of distress by attending to non-verbal and verbal behavior (Smith & Osborn, 2003). A protocol was designed and used throughout the interview to guide the PI on how to appropriately respond to distress. As anticipated some individuals became tearful while reflecting on their experiences, however, severe distress prompting premature termination did not arise in any cases. At the conclusion of the interview, all participants were debriefed, and the participants’ distress level and safety were appraised. Participants were provided with a list of bilingual mental health resources in the community. After any additional questions or needs were addressed, the participants were thanked for their participation and received a gift card valued at $20 as compensation.
Transcribing

Each interview was transcribed verbatim in Spanish and then translated to English. Eight interviews were transcribed by the PI, one interview was transcribed by another primary research team member and the remaining were completed by an external transcriber in the community. Similarly, the PI translated most transcripts with the exception of four, which were also done by another primary research member and an external transcriber. To safeguard confidentiality, participants were assigned a numerical code to store written and digital data. Further, any identifying information disclosed by the participant during the interview (e.g., child’s name) was removed from transcripts.

Data Analytic Procedures

Data were analyzed using grounded theory coding procedures outlined by Strauss and Corbin (1990) as these are widely accepted and used (Fassinger, 2005). The grounded theory analytic approach involves the concurrent collection and analysis of data through an iterative process where analytic procedures are influenced by emerging data (Fassinger, 2005; Ponterotto, 2010). Data is analyzed through coding. Coding involves defining what the data is saying to elevate raw data into conceptual significance (Corbin & Strauss, 2008). It is crucial link between collecting data and generating an emergent theory (Charmaz, 2003). The coding process involves three types of coding: open coding, axial coding, and selective coding (Fassinger, 2005).

At each analytic level during the coding process a constant comparative method is used which entails comparing new data with existing data to explore similarities and differences (Charmaz, 2003, 2006). This involves various types of comparisons, for example, comparing data across participants or different points
within an individual’s narrative as well as comparing categories with other categories (Charmaz, 2000, 2003; Fassinger, 2005; Glaser & Strauss, 1967). The coding process continues until saturation is met, which refers to the point in which no new categories, properties, or relationships emerge from the data (Charmaz, 2006) The following sections will detail coding procedures used for analysis.

Open Coding

Open coding is the first level of analysis where data is broken down into concepts or units of meaning and labeled (Fassinger, 2005). Open coding was approached using line-by-line coding (Charmaz, 2000; Strauss & Corbin, 1990). As the process unfolded, open codes were identified and documented directly onto the electronic copy of the transcript using track changes. The first two transcripts were open coded by all team members during weekly phone meetings. Team members would alternate taking the lead on reading transcript lines aloud and facilitating discussion about labels or codes. All members would collaboratively brainstorm potential labels until agreement was reached. After sufficient practice and comfort with data analysis procedures, team members were assigned a transcript which was coded independently. Upon completion, the transcript and codes were reviewed by each remaining team member separately and offered feedback as to whether they were in agreement or disagreement about each code. Then, all team members met to arrive at consensus on all codes for each transcript. Often this resulted in modifications of the proposed codes or double coding of data to ensure relevant phenomena was captured accurately and comprehensively.

After each transcript was open coded, team members transferred the codes onto an Excel document that helped organize and track emerging concepts across transcripts. These concepts were then compared and organized into tentative,
modifiable categories that encompassed concepts grouped under it (Fassinger, 2005). As new data was compared to existing data, concepts were reorganized based on team discussion and these categorizations gradually increased in level of abstraction (Fassinger, 2005).

The final product of this level of analysis yielded a range of concepts and emerging themes that was further refined in the subsequent level of analysis. Approximately 1,725 labels emerged during the open coding level of analysis. To illustrate, the following open codes are provided for the reader: “having difficulty navigating language barrier in children's school,” “finding it more difficult to raise children alone,” and “being confronted by children about ‘accepting’ IPV and failing to stop violence.” Additionally, about 40 tentative categories or themes were identified at this stage. Examples included: “navigating difficult communication around parenting,” “saliendo adelante,” and “experiences of self after IPV.”

**Axial Coding**

Axial coding is the second level of coding, which entails arranging and further clarifying relationships among categories by grouping them into key categories that subsume several (sub)categories (Fassinger, 2005). New data continues to be compared to existing data with attention to relating subcategories to categories and further defining the nuances within them (Fassinger, 2005). Therefore, the primary objective of this stage of analysis is piecing data back together in a relational way that specifies what gives rise to a particular phenomenon (Strauss & Corbin, 1990).

Category refinement and integration was guided by a simplified coding paradigm by Corbin and Strauss (2008), which allowed the data to be examined with the following three components: (a) conditions (e.g., why, where, how, what), (b) inter/actions and emotions (e.g., responses to situations or events), (c) consequences
(e.g., outcomes of inter/actions, emotional responses or inaction). Tentative categories were periodically reviewed and discussed in terms of their properties and dimensions throughout the initial stages of coding. During axial coding, the PI took primary responsibility of reviewing and further condensing tentative categories into more substantive ones by using “the paradigm” to identify and subsume subcategories with their categories (Corbin & Strauss, 2008; Strauss & Corbin, 1990). When salient properties and relationships between categories were identified, the research team met to review and further refine categories. This was done concurrently with remaining initial coding activities as researchers often alternate between first and second level of analysis (Strauss & Corbin, 1990).

Memo-writing and verification methods were utilized for analytic development. Memo-writing documents the emerging assumptions, insights, feelings as well as analytic decisions made by the researcher (Fassinger, 2005). It helps researchers examine their ideas about their codes and organization of these codes during the analytic process (Charmaz, 2006). Verification methods involve returning to the data and looking for evidence that support or refute the developing theory (Strauss & Corbin, 1990). Therefore, a thorough review of initial codes as well transcripts were completed to continue advancing the emerging theory.

In later stages of axial coding, categories explicated were shared with the external auditor for review. Auditor feedback was considered, and categories were revised. This exchange was repeated until consensus on final categories were reached. In terms of numbers, 3 major categories, 7 subcategories and 20 further subcategories were identified. The three major categories that emerged through axial coding procedures were: “parenting as a Latina immigrant,” “effects of IPV on mother and child,” and “effects of IPV on parenting.”
**Selective Coding**

Finally, selective coding is the third level of coding and involves selecting a central or main category that incorporates all other categories into a comprehensive narrative (Strauss & Corbin, 1990). This core story, or “story line,” is a brief statement that accounts for the most important aspects of the data and articulates the relationships between the core story and all categories and serves as the substantive theory (Fassinger, 2005; Ponterotto, 2010). Constant comparison methods were utilized to examine the emerging theory against the data to ensure the theory is based in it (Fassinger, 2005). Memo-writing and diagraming were also used as analytic tools.

Given this study’s overarching research question, the “effects of IPV on parenting” was selected as the core theme. The remaining categories and subcategories were integrated with this through-line by way of the paradigm. Thus, identifying them as conditions (context), inter/actions, and consequences and ordering them into subcategories around the core theme. The story line is presented in Chapter IV along with corresponding categories and subcategories.

**Trustworthiness**

Trustworthiness refers to the degree of confidence in data interpretation and methods used that uphold the quality of a study (Connelly, 2016). Several commonly accepted criteria of trustworthiness have been proposed, including credibility, authenticity, dependability, confirmability, and transferability (Lincoln & Guba, 1986). These were intended parallel criteria to test rigor of conventional, quantitative paradigms such as internal/external validity, reliability and objectivity (Lincoln & Guba, 1986). Credibility is concerned with the confidence in the truth in the study findings (Connelly, 2016). Authenticity refers to the degree to which findings fairly
and comprehensively demonstrate a range of different realities and realistically convey participant experiences or lives (Connelly, 2016). Transferability is related to the extent to which results are useful and applicable to other settings (Korstjens & Moser, 2018; Lincoln & Guba, 1986). Dependability is concerned with stability of study findings over time as well as degree to which analytic procedures are consistent to standards for a particular research design (Korstjens & Moser, 2018; Lincoln & Guba, 1986; Patton, 2002). Finally, confirmability refers to extent to which other researchers can confirm study findings are clearly based or grounded in the data (Korstjens & Moser, 2018; Lincoln & Guba, 1986). In order to ensure trustworthiness or analytical soundness, this study implemented the approaches described below (Fassinger, 2005; Morrow, 2005, 2007).

First, this study employed a reflexive approach in order to ensure that researcher subjectivity did not dominate analytic processes and participant perspectives were well represented (Morrow, 2005, 2007) A reflexive approach involves making researcher bias or assumptions and its influence analytic process explicit (Fassinger, 2005). This was accomplished by openly discussing preconceptions and biases and possible impact of data analyses at the outset of the study. Assumptions or biases reported included: (a) xenophobia and racism worsen consequences of IPV on participants, (b) expect to see more connectedness between mothers and children after IPV (e.g., having to rely on each other more), (c) participants will still want father to be involved in children’s lives or in parenting, (d) participants will be self-sacrificing and draw from cultural strengths to care and protect children, and (e) participants may feel responsible for the impact of IPV on family. Additionally, all team members engaged in memo-writing throughout analyses to document and make researcher preconceptions, reactions, insights overt to
the team (Fassin, 2005). This also served to facilitate trustworthiness by
documenting analytic processes and decisions made throughout the study.

Second, this study used investigator triangulation. This refers to the use of a
research team that involves multiple investigators in the process of analysis and
analytic interpretations are compared and agreed upon (Korstjens & Moser, 2018;
Lincoln & Guba, 1986). Further, an auditor who was not directly engaged in data
analysis, in this case the dissertation chair/advisor, served as an evaluator of the
methodological procedures implemented in this study to ensure dependability and
confirmability (Korstjens & Moser, 2018; Lincoln & Guba, 1986).
Chapter IV: Results

The aim of this study was to explore the impact of IPV on parenting among immigrant Latina women. The primary question of this study was: How does the experience of IPV impact parenting among immigrant Latina mothers? To understand this phenomenon, 11 immigrant Latina mothers participated in individual semi-structured interviews to share their perspectives on how experiencing IPV impacted various aspects of their parenting. Findings will be presented in this chapter. The overarching storyline that emerged from data analysis is as follows:

*Latina immigrant mothers use internal strengths to persevere through obstacles and adapt their parenting in response to IPV experiences.*

In the following sections, categories and subcategories that emerged will be reviewed. An overview of the major categories and subcategories, including the frequencies at which these themes were observed across participants are presented in Table 1.
Table 1

Overview of Main Categories and Subcategories

<table>
<thead>
<tr>
<th>Category and Subcategory</th>
<th>Further Subcategory</th>
<th>Frequency, n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parenting as a Latina Immigrant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Characteristics of mother’s broader social context</td>
<td>Missing family and their support</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Facing discrimination and marginalization</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Difficulty with adjusting to English</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Gender roles and acculturation</td>
<td>5</td>
</tr>
<tr>
<td>Parenting cognitions and behaviors</td>
<td>Nurturing and instilling values</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>Strict parenting practices</td>
<td>8</td>
</tr>
<tr>
<td>Parenting challenges</td>
<td>Language barriers as a parent</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Difficulties of raising children within US parenting norms</td>
<td>5</td>
</tr>
<tr>
<td>Effects of IPV on mother and child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effects of IPV on mother</td>
<td>Depression/Sadness</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Reduced self-esteem and self-worth</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Guilt</td>
<td>4</td>
</tr>
<tr>
<td>Effects of IPV on children</td>
<td>Increased misconduct and aggression</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Mistrust and resentment toward participant</td>
<td>4</td>
</tr>
</tbody>
</table>
Effects of IPV on parenting

<table>
<thead>
<tr>
<th>Parenting cognitions and behaviors</th>
<th>Helping children adjust and cope</th>
<th>11</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Perceived ineffectiveness</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Commitment to instill non-violence</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Adjustments in discipline</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Navigating being a single mother</th>
<th>Using intrapersonal psychological resources to move forward</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Challenges of being the sole caretaker</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Co-parenting expectations and realities</td>
<td>8</td>
</tr>
</tbody>
</table>

Using a system developed by Rhodes, Hill, Thompson, and Elliot (1994) and adapted by Richie, Fassinger, Linn and Johnson (1997), the descriptors used to present the findings will be operationally defined as: (a) “generally,” “most,” “often,” “many,” “the majority,” “usually,” “typically,” and “commonly,” to indicate the characteristic response of a majority of participants (6 or more); (b) “some,” “several,” and “a number of” indicate responses from 4 to 5 participants; (c) “a few,” and “a small amount” indicate responses from 3 participants. More specific language (e.g., all, four) is also occasionally used. Illustrative quotes will be utilized to present the findings.

**Parenting as a Latina Immigrant**

To fully explicate the ways that IPV may influence parenting, this study sought to understand the contextual factors that influence and interact with outcomes related to IPV and parenting. Mothers were asked to describe the cultural norms and
expectations of the Latinx culture as well as their experiences and perceived challenges of raising children in the United States. As already mentioned, all participants identified as Latina immigrants and therefore shared a similar cultural background. The following section describes the social, political, and economic environment in which participants parent. First, data related to their broad sociocultural context, including general issues related to immigration and acculturation are discussed. Then, parenting practices and challenges for immigrant Latinas specifically are presented.

**Characteristics of Mothers’ Broader Social Context**

The following describes the sociocultural setting of participants in the United States, which include the following subcategories: (a) missing family and their support, (b) facing discrimination and marginalization, (c) difficulty adjusting to the English language, (d) gender roles and acculturation.

**Missing Family and Their Support.** (9) With respect to the experiences that participants shared as immigrants in the United States, the majority discussed having difficulty with being apart from parents, siblings and other extended relatives residing in their country of origin. Women described a strong yearning to see and physically be with their loved ones yet feeling pained with the reality of not having the resources or opportunity to visit with their family. As Paula shared:

There are many times that time passes, years pass and one does not see their family...because one is an immigrant, not having the resources of going and returning. That one goes and can’t return and leave their kids here. So, they are between a sword and a wall.
Furthermore, participants reported loneliness and greater difficulty navigating hardships in the United States without family who are a source of instrumental and emotional support. For example, Mia stated:

Well it is very difficult. More than anything we, immigrants of this country, because for example when we are in one’s own country, we have dad and mom who could help. But in this country, we have no one...we see it more difficult when we raise our children alone.

**Facing Discrimination and Marginalization.** (8) Many participants expressed a sense of unfairness and rejection as a Latinx immigrant, especially those who were undocumented in the United States. Sofia commented, “sometimes they make us feel like criminals, even if we are not. There are some racist people who don’t accept us and sometimes it feels like the very president promotes this criminal image.” Describing a sense of alienation, Amanda said, “...we all work the same, are all doing the same thing, I think we are the same, we have been here for a while now, but we are not considered in anything...”

As a result of marginalization and immigration policies, participants shared feeling vulnerable to detention or deportation. This generated a sense of fear and uneasiness while in public and mistrust of local law enforcement. For example, women described apprehension when driving without possessing a license or identification due to worry of being stopped by the police while running errands. As Julia noted, “...[when going] to the store one has to worry or the fear of breaking a law or to do something you shouldn’t do. It affects you...in being able to move about like...go to an appointment that one has.” Paula also shared her concern with engaging in ordinary activities:
So much separation of families. That is what hurts. But one cannot go out confidently, for example, one goes to the store or takes them [children] it’s the same either way. One takes them and you do not know if the police are going to detain you with the harsh laws, taking away your kids and they send you to Mexico.

Others avoided reporting intimate partner violence to authorities due to risk of deportation or experienced mistreatment from police such as Isabella, “... not everyone is the same, but there are racist police officers. That by just looking at your face and seeing you as Latino, they discriminate against you without even knowing if that Latina has documents or not.”

In addition to feeling unprotected and restricted in their day-to-day activities, women also described limitations in acquiring stable and well-compensated jobs when not having a permit to work. Carla noted:

It's difficult to find a steady job here as well as a good salary. One does not have a steady job or good pay...you can work for a month and then you are told you know what it's over because you don't have a fixed job. That was the hardest part for us.

Furthermore, being restricted to low-paying jobs that did not provide benefits (e.g., paid leave or medical insurance) had negative implications for their health and economic well-being. Sofia described how the lack of proper documentation impeded the possibility for improved standards of living:

I have seen many people working and getting better positions and it's more money for their families. And they have more time to go out or go on vacations because they let you take vacations and unfortunately, we don't have this kind of benefit, such as vacation or medical insurance in case you get sick.
Sometimes because of your job, the salary is very small, and you prefer to save that money as opposed to pay[ing] for medical insurance and if you do get sick you don’t have the chance to get any help. And all that affects you. These inequities were compounded by COVID-19, in that women were left without work or had significantly reduced hours and not provided with governmental economic aid (i.e., stimulus checks).

Difficulty Adjusting to Speaking English. (6) Many participants reported having no or little English language proficiency. This made everyday tasks challenging. Describing her difficulty with grocery shopping Camila said:

At first I didn’t want to go to the store because no...no,no,no. I did not want them to speak to me in English. Especially when I was going to Walmart. Oh, it was a mess, it was a mess, oh man. And I would say since the father of the kids knows English...well I would wait for him to get there and everything. Additionally, limited English proficiency had more consequential effects such as limiting women from pursuing job opportunities. For instance, Sofia said, “you also miss out on a lot of job opportunities because you don’t speak English. It’s very frustrating because you have the will, but if you don’t speak correctly people will mock you so you better stay quiet…”

As expected, language difficulties were most prominent upon arriving in the United States. Some gradually learned a few English words through exposure at work. However, overall, the majority continued to have limited English skills despite length of time living in the United States. As Elena noted, “English doesn’t stick to me no matter how much I try...I have almost 20 years [here] and I only know a few things here and there.”
Gender Roles and Acculturation. (5) Several participants discussed previously conforming to patriarchal ideals in which their male partners were seen as holding the authority in the household, while mothers were submissive and did not hold equal influence in the relationship. Within this framework, each performed traditional gender norms; partners or husbands were primarily responsible for earning income and making financial decisions whereas women managed domestic duties in the home and were almost exclusively responsible for child rearing. For example, Amanda commented, “...they say that since they are men they must work and as women we have to take care of the children because we are women, we can’t work.”

However, women noted a change in their beliefs, stating that they no longer ascribe to strict gender roles and expectations. As they assimilated to US culture and began working outside of the home, participants described becoming less submissive and believed that household responsibilities, including childcare, cooking, cleaning should be shared equally among partners. For example, Mia shared:

In our Latino families, the woman has to be in the kitchen and men are not. From my point of view now, I don’t see it that way... I think that if we are all going to eat then we are all going to help, amongst everyone we are going to do it. Now women are working like the men so then why can’t they [men] also help.

Parenting Cognitions and Behaviors

Participants were asked to identify attributes of Latina immigrant mothers’ parenting and describe potential cultural influences that inform specific parenting beliefs and practices. Two subcategories will be reviewed: nurturing and instilling values and strict parenting practices.
Nurturing and Instilling Values. As participants shared what they strived to teach their children, several notable values emerged, including (a) respect, (b) independence and self-sufficiency, (c) education, and (d) morals.

Respect. (11) All participants discussed the importance of teaching their children about respect, as illustrated by Carla: “above all respect. Respect for both older and younger people no matter their situation or status. We are all equal and everyone deserves respect.” Lola also commented, “there is one thing that one instills in them from over there and it is the fact that they must be respectful and to know how to respect their elders.”

Independence and Self-sufficiency. (6) Many mothers also indicated they foster self-reliance. For example, Camila said, “I have to work. I can’t be there all the time, so I am raising my kids so that they are a lot more independent so that they not depend on me so much. I want them to be independent.” Likewise, Isabella stated, “the only thing they have to do is clean their room…things that they have to help me with, like folding the laundry, so that they can learn to do things and not always depend on other people.”

Education. (5) Several participants discussed their efforts to encourage and support their children’s education, as Mia stated:

I say that I will support you with anything, but you have put a lot of your part. Take advantage of this opportunity...They can study with the support of the parents…[I am] always with the children, to do homework, [one should] always have a rule, a routine. Be disciplined more than anything in studying. Education was believed to offer children an opportunity to establish a better future than their own. For example, Amanda shared her hopes for her daughters:
...that they study and to get ahead all by themselves...to have a college degree so they can elevate themselves. That they are not being boss around, humiliating us. Because sometimes as a Hispanic, you suffer from humiliation, in the jobs more than anything. And having a degree means that you can have a much better job position. You don’t study in vain; nobody is going to scold you... I’ve always told my daughters that they have to aim high, they have to study so that they don’t end up doing the same thing as me.

Similarly, Paula mentioned, “I simply tell them that they need to behave, have to study to be someone in life and not have to work...more than anything like me, for example they go to a restaurant to work and be mistreated.”

**Morals.** (5) Additionally, some mothers talked about guiding their children to know “good” from “bad” behavior, for example, Elena said:

I tell them that they are not aggressive, that they are not rude. That they are not like that because they can fall into what we are seeing in the other person’s behavior. If they misbehave, obviously, things are going to go wrong. They need to behave well and observe appropriate people...I tell him if you go with a little friend who likes to steal, that likes to make trouble, who likes to hit, obviously the police will catch up to you and are going to teach you. But if you go to the park, to play or do chores, do good activities and return home nothing dangerous will happen to you, nothing bad will happen to you.

Mothers also cautioned children against using alcohol or other substances, like Carla who mentioned, “You know that nowadays they go out partying and they go and drink a beer. All that we shouldn’t instill any of that. They shouldn't do it, rather they have fun safely.”
**Strict parenting practices.** (8) The majority of mothers characterized traditional Latinx parenting as strict. Women are brought up to show deference to their parents and elders, which was shown through compliance without protest. Sofia mentioned, “...we always had to respect parental decisions...those were the rules, and we couldn’t talk back to them. You couldn’t say you were right even if you were because they are the ones who are supposed to always be right.” Additionally, corporal punishment was acceptable and typically employed to enforce obedience. Women shared that spanking and using a belt are commonly practiced by parents in their country of origin to reprimand children for perceived misbehavior. As Isabella stated, “...if you didn’t go or did something naughty, well, obviously they beat you...they hit you with a belt, basically they hit you with whatever they can find, that is Mexico...”. Similarly, Julia shared, “...there are times that they behave so badly that well one has to, like they say in Mexico, one has to give him a spanking...”

Participants noted that strict tendencies become embedded into their own parenting approaches, which are implemented in the US. Compared to parents in the US, including US-born Latina mothers, participants described establishing more boundaries with their children and greater monitoring of their activities. For example, Mia commented “they are more liberal and we are like I don’t know like we overprotect perhaps... we still bring our beliefs from over there, of putting certain limits..” Likewise, Lola shared, “a little strict, overprotecting them...like my daughters I have control of how they watch TV...[I tell them] don't be watching that, that's not for you. You are ten. You are a girl, I don't like you to see those things.” Issues related to these parenting methods will be reviewed next.
**Parenting Challenges**

Two specific issues emerged from the intersection of two identities—mother and Latina immigrant. The two subcategories are: language barriers as a parent and difficulties of raising children within US parenting norms and are presented in this section.

**Language Barriers as a Parent.** (6) As expected, the majority of mothers shared how their lack of English translated into additional challenges for parenting specifically. For example, it placed limitations on helping their children complete homework or navigate school conferences, which was emotionally difficult for mothers. Julia illustrated this in the following commentary: “one is limited in the language. Well, for me it was something difficult, in their studies, to help them in the homework...the limitations of, the powerlessness sometimes of wanting to help them well in their homework assignments for school.” Likewise, Sofia stated:

> I feel frustrated when my kids ask me for help and I cannot. They come to us because we are supposed to know and when I don't know I feel frustrated not being able to tell them ‘oh you are wrong in this or that, it goes like this’. Or they ask things that I don't know and cannot answer. Or when we go somewhere and I need my kids to translate for me and I cannot do things for myself.

Notably, mothers also shared that they struggled to understand and talk to their own children due to some children having low Spanish language skills, particularly the younger siblings. Understandably, this caused issues with communicating practical needs as well as in providing emotional support as stated by Isabella:

> The 7 year old...there are things that I don’t understand because his first language is English. Everything he says to me is in English, there are things
that he tells me in Spanish because I try to get him to repeat it again and again. There [are] words that I don’t understand. My little girl, 10 years old, is the one that helps me with that. She helps me to translate, like ‘what does he say?’, ‘what does he want?’ And there are times that I understand, so I don’t have to tell the girl I need her help. It's communication more than anything.”

Olivia also commented: “I think the biggest problem I have had right now is the language..in communicating with them. Because the older ones, Spanish was the first language they heard. Well now they speak more English, so you know that it is very difficult for me to express myself with them. I think that is when I sometimes confuse them in the things that I try to say. Yes, I believe that it is the language that is affecting me more with them right now... The older one speaks better Spanish, but the seven- and four-year-old don't speak Spanish at all. So it is difficult.”

**Difficulties of Raising Children Within US Parenting Norms.** (5) As mentioned in the previous section, participants found parents in the United States to be more lenient than immigrant Latina mothers. A number of mothers described difficulties related to having different expectations and practices than mothers in the United States. This contributed to tensions between mothers and their children and interfered with participants’ ability to parent confidently. For example, Paula noted disagreements with her daughter about spending time with friends:

...in Mexico [there are] different customs. Yes, one is not that liberal, that oh I have a ton of friends and they go to my house or I go to their house. That does not happen there... My parents never let us have friends [over] or that they go to the house. Never... And here they want to make it like for friends. “Can my friend come? Can my friend come?” No... [I] didn’t let her and she was
upset...But, I do not know them… you do not know who they are, right? ...She is not a friend, she is your classmate.

Another area of contention was related to discipline. Olivia commented about getting push back from her children about raising her voice based on what they were taught in school:

I have seen kids from here are not given bad attention for anything...I don’t know why everything is considered child abuse or I don’t know, but when I try to get my children’s attention, I can’t do it in a way by raising my voice… Sometimes they have said, “oh you can’t raise your voice much because if so I am being mistreated and I can call the police”... they do bad things, things that they shouldn't be doing and you try to get their attention and they tell me no, at school they told me that you can't tell me anything... So it is a little difficult to raise children like that.

Effects of IPV on Mother and Child

Participants offered their perspectives regarding the impact IPV on their personal well-being and the changes they observed in their children as a result of IPV exposure. The adverse effects on mothers are discussed first, followed by the perceived effects on children.

Effects of IPV on Mother

The following negative effects on mothers are reviewed: (a) depression/sadness, (b) reduced self-esteem and self-worth, and (c) guilt.

Depression/Sadness. (5) Several women reported depression or depression symptomatology such as low mood, apathy and increased emotional sensitivity persisting into the post-IPV separation period. Reasons underlying their sadness varied; two participants mentioned sorrow due to the loss of the relationship and
family unity while another noted sadness is triggered by recalling experiences of violence. Isabella shared her perspective on the adjustment following separation from her ex-partner, “…it is hard at the beginning, the first months. I’ll say I lasted about a year emotionally affected…I couldn’t talk to someone about him because I would start crying…I was depressed.”

**Reduced Self-esteem and Self-worth.** (5) Some participants reported ongoing effects of violence on their sense of value and dignity. Experiences of sexual abuse, physical violence, and verbal assault led to a sense of humiliation and worthlessness. For example, Paula shared, “they just humiliate you. They humiliate you. They make you feel like you're worthless.” Criticisms by their ex-partner’s appeared to be internalized, making it difficult to integrate positive comments from others about their character such as Lola who said:

> They tell me nice things about what they see that I do for my daughters because I raised them alone...they tell me “you are strong, you have courage, we admire you”... And they say nice things to me and I feel good, but sometimes I feel like I wasn't that person they’re talking about...that they speak of another.

A different participant, Olivia, commented on how constantly being silenced and devalued by her ex-partner hindered her ability to communicate her thoughts: “it affected me a lot, like that I was not allowed to express myself like I have gotten to the point that I don’t know how to express what I want to say.”

**Guilt.** (4) A number of women described a sense of culpability for their children’s exposure to violence. They used words, such as “allowed,” “accepted,” “permitted,” to assume responsibility for being victimized and ultimately failing to protect them from witnessing abuse. This sentiment is illustrated by P6: “…I feel guilt
for allowing them to see all of that...of having let them go through all of that...I let
them see how someone mistreated a person and that person who was me, did not do
anything about it...” Feelings of guilt appeared to be more prominent when mothers
observed their children struggle emotionally or when children themselves criticized
mothers for allowing IPV to continue. For example, Sofia said:

You feel like you fail your children and things happen that they expect you to
protect them [from] and you cannot even protect yourself from. They have
memories of what they witnessed or that happened. They sometimes blame
you for things, without meaning to, they blame you for things that you could
not avoid.

Effects of IPV on Children

Next, the impact of IPV exposure on children are discussed. This included
increased misconduct and aggression as well as mistrust and resentment toward
participant are discussed.

Increased Misconduct and Aggression. (7) A common remark made by
participants about the effects of IPV on their children was related to increased
behavioral issues, including aggression toward mothers or siblings as well as non-
compliance and delinquency (e.g., stealing from mother, sneaking out of the home).
Camilia shared her observation of her child’s behavior, “the youngest got very
aggressive. He even threatened me with a knife. He became aggressive and there was
when I said, no, I have to take him to a psychologist because this is not normal.”

Two women in particular noted a pattern of more misbehavior upon returning
home from a weekend spent with the children’s father, for example, Paula
commented, “it is worse and I see it more and more. They leave more or less (in
reference to children’s behavior), but when they come back, there is a very bad
rebellion. Bad. Bad. It is very difficult.” Attributions about causes of children’s behavior included changes in schedules, differences in parenting approaches and ex-partner’s deliberate attempts to portray mothers negatively. The latter will be elaborated further in the following section.

**Mistrust and Resentment Toward Participant.** (4) Several participants indicated that their children developed a negative attitude toward them that manifested in various ways such as skepticism about mothers’ opinions, criticism about not leaving their abusive partner or judgement about parenting. As already mentioned above, resentment was thought to be generated through negative commentary children were told by the children’s father, while another participant felt that children lost trust in her due to the perceived lack of safety and protection from IPV. Oliva commented on her children’s reproach:

> Every time they go, they go happy, they leave fine, they leave saying I love you mommy, I will miss you and they come back telling me, I don’t want to live with you, I don’t love you because you are a bad mom, I don’t love you because you are hurting my dad.

With regard to losing trust in their mothers, Sofia indicated:

> Family bonds are broken...my son grew apart from me... And it isn't easy to say or promise that it's never going to happen again and maybe you try and tell him that no it is not going to happen again... but they don't trust you or they close themselves off from you.

**Effects of IPV on Parenting**

Participants were asked to share how they believed IPV may have impacted various aspects of their parenting. The findings below are divided into two sections.

First, beliefs and behaviors of participants following the epoch of violence are
discussed. Then, changes to motherhood as a result of IPV, including being a single parent and experiences of co-parenting are reviewed.

**Parenting Cognitions and Behaviors**

The following subcategories are discussed: (a) helping children adjust and cope, (b) perceived ineffectiveness, (c) commitment to instill non-violence, and (d) adjustments in discipline.

**Helping Children Adjust and Cope.** All participants discussed ways they tried to promote positive adjustment in their children. The following strategies emerged from the data: (a) determining discourse of IPV, (b) comforting and assuring children, (c) shielding children from participant’s negative emotions, (d) seeking professional help, and (e) prioritizing children.

**Determining Discourse of IPV.** (10) One of the most prominent themes that emerged was related mothers’ communication about violence that occurred and the subsequent separation from their father. While some mothers noted they were open and honest about IPV, others described withholding or limiting information deemed inappropriate or harmful for children. This was illustrated by Elena:

[I tell them] things they can understand and that they know what…because I’m not going to tell my seven-year-old girl, your dad abused me, I was forced to have sex…nor to the fourteen year old because he still does not know…the more intense things, the things that he told me, the insults…[that]. I try to tell the bad things that happened, those that they saw.

Still others opted to minimize children’s recollection of IPV or avoid the conversation, for example, Isabella said:

As time goes by, they ask you again “did he hit you?”, and I tell them, no, nothing happened. We are no longer with him, he went to Mexico, he is not
here anymore...I don't like them remembering bad episodes. I think that now that they are older, I think that they forget.

Overall, participants appeared to undergo a judgement process to determine the discourse about IPV with their children. Factors such as age, beliefs about the impact of recalling negative or potentially traumatic events, and whether children witnessed violence were considered in their decision-making.

**Comforting and Assuring Children.** (5) Additionally, several mothers described how they attempted to comfort and provide a sense of safety after separating from their partners. They did so by assuring children that violent episodes will not occur again and instilled hope for a better future. For example, Carla stated, “I tell them that the fact that I suffered domestic violence doesn’t mean it has to happen to them... that life is more than that...I give them that assurance that it won’t happen to them, god willing.”

**Shielding Children from Participant’s Negative Emotions.** (4) Some women also shared efforts to shield children from their own negative emotions (e.g., mother’s sadness or distress) due to concern for the impact on children and wanting children to see mom as “strong”. Mia stated, “yes, it is very difficult because there are moments, what [do is] I go and lock myself in the bathroom and I cry…that they don’t see me. I want them to see that I am strong.”

**Seeking Professional Help.** (4) Another way a number of participants helped their children cope was by seeking professional help, including taking their child to a behavior specialist, psychologist, and support groups. Olivia stated, “I try to give them the best help I can. Take them to the best therapies they can have so that they can understand this [IPV] in the best way.”
Prioritizing Children. (4) Lastly, some participants indicated they prioritized children by focusing on them and putting their needs first. For instance, Elena commented, “I have to see my children, take care of my children...my children are more important to me than that person and I focus more on them and I continue to focus more on my children…”

Perceived Ineffectiveness. (9) Most participants expressed self-doubt about their capacity to raise their children after IPV. Four women described their lack of confidence about their capacity to support their children’s wellbeing stemmed from the actions of their partner to belittle their role in making parenting decisions or disparaging their parenting abilities. For example, Julia said:

You sometimes feel that you are not going to do the right things, they can affect your decision making. You have the doubt of, am I doing well?...I think that one is already with that trauma of what if I do something right or not. Am I doing them well or am I not doing them well?

Similarly, Amanda indicated:

I felt bad, I felt less because I couldn’t give my opinion. I don’t say the right things, I know that I am their mother but maybe I don’t know what I am telling them, he would tell me to be quiet and that I didn’t know what I was talking about...yes, sometimes I do feel hesitant of whether I am saying the right thing or not, if this way it’s better than the other.

Self-doubt after IPV was especially present when faced with particular parenting tasks, such as controlling their children's behavior, providing emotional care, or helping with school. These incidents left participants feeling powerless and disconcerted. When asked about how she manages her children’s behavior, Paula said, “it gets confusing and one says ‘I do not have the words to talk to them...to calm
them down’...there comes a moment that one says, ‘maybe I do not know how to raise them.’” Further, participants expressed reduced authority to promote values and elicit compliance due to perceived loss of respect after experiencing violence. Olivia noted that encouraging non-violence and respect was particularly difficult:

The most where I have been affected is instilling respect…I feel that I can’t…I feel that right now. I can’t tell my kids, you have to respect a woman when I did not give that example. Even though I was the one that was beaten I feel that my obligation should have been to call sooner to be able to give that example that you have to respect, and you have to respect me...I feel that right now I can’t demand of my kids and tell them, you have to respect [me].

Commitment to Instill Non-violence. (7) As a consequence of IPV, the majority of mothers underscored the importance of promoting non-violence to their children to prevent children’s future involvement with IPV. This was performed through modeling (e.g., leaving relationships or using IPV experiences to explain consequences) and teaching children alternative ways to address conflict and manage emotions (e.g., taking pause, breathing first, devaluing verbal and physical tactics). Elena described what she tells her children: “When you are adults behave yourselves, and [if you] have any problem, talk with your partner. Talk...and if you do not understand each other, separate...but do not come to mistreatment, do not come to abuse.” Mia described how making the decision to leave her partner was also a lesson for her children:

Well I think to stop [it]...no more violence. From my point of view. That is like respecting yourself in front of your children. That it is not good, that it is bad... I don’t want my children seeing this all the time then they will think that it is normal...That is not normal.
Adjustments in Discipline. (5) Several women noted adjustments in their discipline strategies by moving away from corporal discipline and yelling at their children to instead taking away enjoyable activities and items or having children do something unpleasant as a means of discipline. For example, Lola said, “I punish them. You like the phone, right?...You are not going to pick up the phone. Or if there are about 5 dirty dishes, I tell her, ‘you are going to wash those dishes.’” This shift in discipline was motivated by wanting to avoid psychological injury to their children as Sofia noted:

I thought that if I hit him, it would create more violence, the same violence we lived through. And if he can’t overcome certain things from his past, how am I going to get him to forget [it] or that we went through that situation if I generate violence in my family again.

Furthermore, mothers drew from their experiences of being assaulted and berated by their partners to understand how children may feel when being shouted at or disciplined physically by a parent. Paula explained her thought process when deciding what to do when her children are misbehaving:

If the kids do not listen and you call their attention, many times one says, but if they experience the same as I did? Or they get scared in the same manner that I did...in the sense that not hurting them is not yelling at them so harshly, so they do not feel similarly to how I [did when I] was yelled at.

Navigating Being a Single Mother

As participants adjusted to their new family structure, several findings emerged, including (a) using intrapersonal psychological resources to move forward, (b) challenges of being the sole caregiver, and (c) co-parenting expectations and realities.
Using intrapersonal Psychological Resources to Move Forward. (10) While mothers restructured their lives following IPV, they demonstrated fortitude and underwent a process of making sense of their experiences. The following subcategories are reviewed: (a) persevering through post-IPV difficulties with hope and (b) post-traumatic growth.

Persevering Through Post-IPV Difficulties with Hope. (7) Many participants persisted in their duties as mothers despite multiple obstacles. They used hope and determination to continue supporting their parenting goals as demonstrated by Paula: “I have hopes to be with them for a long time in order to help them succeed. I have faith in that. More than anything [I wish], that they do not experience violence.” Carla also shared the following insight about her experience:

[One has] to work hard. Do not get stuck in a negative cycle or not meet your goals. Because yes, you have problems and you don't want to move forward like I did because of what I went through. But it can be done. You can move forward and you have to accept the past. [Moving forward means] to have many goals for my children and myself. To push them forward. To be a better person everyday.

Post-traumatic Growth. (5) Several women derived strength and positive growth from their experiences with IPV and difficulties as a single mother. For instance, Amanda stated, “It helped me a lot to become a better mother, in terms of being 100 percent with them...Overall it was a lesson to keep moving forward with my children and for my children, and not letting it bring me down.” Camila mentioned seeing herself as stronger: “Stronger...no one can decide for me. No one can force me
to do anything I don’t want. In that I had to start from zero [to] fight for what one wants.” Similarly, Mia noted an unexpected positive change:

I have to demonstrate that although I am a single mother that my children will succeed... here it was backwards. Instead of me getting something bad it's like I got more courage to help my children succeed. Perhaps before I trusted the father a lot, to say ok well he will help me like I was more relaxed. But after everything happened I said ok then now I have to be stronger than before.

**Challenges of Being the Sole Caregiver.** (8) The majority of mothers shared difficulties related to carrying all responsibilities for children and the household without instrumental support (e.g., economic or caregiving support), regardless of if mothers were co-parenting or not. For example, Paula stated:

I’m always the one that is going there to the dentist, the clinic, for whatever they need. Not him. He is content with the days he takes them over the weekend, and he comes back, and it’s over. He doesn’t know anything because everything...complaints from school with me, from the clinic well with me...everything with me.

Participants also shared challenges with balancing work with taking care of their children as single parents, a few working outside of the home for the first time following separation. They described having fewer personal resources (e.g. time, energy) to spend with children or providing for their needs while holding a job. For example, Carla said:

Sometimes I have to work from 6:00 in the morning to 10:00 in the evening and when I get home I'm not 100% with them like how I would like to be with them, to be well. Right now my jobs absorb me a lot and the small moments that I am with them I try to talk with them and be well.
Likewise, Julia stated, “before I did have a little bit more time to help them. I did not feel so pressured but now...one leaves work they leave more tired and well one has to go looking for things that are needed.” She also commented on the stress of bearing the financial responsibility, “having to think that one has to work for the rent, electricity…it has one [feeling] very pressured to go to work in order to have food in the house or the basic things that they need…”

**Co-parenting Expectations and Realities.** (8) Most mothers offered their perspectives about their ex-partner’s involvement in their children’s lives, regardless of their co-parenting status. Six of eight participants who did share their perspectives indicated they believe fathers should continue to be present in their children’s lives, provide financial support, and share parenting responsibilities. For example, Sofia mentioned:

[I am] always trying to talk with him and telling him to see his daughters because they are his daughters and [now] is when they need him….I try to tell him, you have to put your part because there are times when I can’t do it and I need you to help me because they are our children and our responsibility and he both have to be in agreement for the good of the girls.”

On the other hand, two women were less keen on having their ex-partner be involved in parenting their children, as stated by Mia: “I say what would happen if he was here or comes back. The truth is I would not like to share my children with him because I don’t know how he would treat them…my trust in him is lost”. Lola shared stronger dissent regarding the father’s role: “…never in my life would I want them to stay with them [their fathers]...because I knew them as violent...I don’t want anything from them… I don't want to be robbed of that peace that I have with my daughters.”
While most mothers described the strain of being a single mother, those that continued to co-parent with the children’s father dealt with additional challenges. To remind the reader, five out of 11 participants in this sample were co-parenting with their former abuser. First, although agreements between parents were made, mothers encountered variable or inconsistent support and communication from ex-partners. Understandably, mothers felt frustration when ex-partners showed poor follow-through on parenting commitments. Camila commented on the financial weight of caring for three children alone even though her ex-partner had agreed to help contribute, “I am carrying all the burden…I have to pay for art classes…I have to pay for basketball classes…buy uniforms … that burden I carry it all. So, he forgot that he too has to be responsible with his children.”

Second, as co-parents, participants had to continue interacting with their ex-partners which left them vulnerable to boundary violations. Mothers had to establish clear parameters for co-parenting communications. For example, Olivia shared her attempts at setting boundaries, “...You can call me and everything only related to the kids, but no, he called me for other types of issues...everything that he would talk about were only complaints, so it is very difficult to deal with that man.” While seeking safety through a restraining order granted legal protection, three women shared how it also created some challenges for them to communicate parenting issues effectively with their ex-partner. The stipulations of a restraining order limited communication to solely text messaging. Paula illustrated the difficulties related to this constraint:

You cannot have a conversation with him or ask him for support and to write him the whole message, can you imagine? I know that there isn’t any [help] so why ask him. It’s impossible. You can’t and it is very difficult... It is very
difficult because you cannot really have a conversation about what you need support with.

Lastly, a few participants faced ongoing psychological victimization while continuing to share parenting responsibilities. For example, Isabella shared, “when I dropped my son off with him, he would tell me why I was dressed like that, so I told him that I wasn’t with him anymore, that I can dress as I want.” Camila described her ex-partner’s efforts to find out where she lived without her consent: “...he put a GPS on the kid’s cell phone and he found me...when I found out that he knew where I was living I, ugh, the world fell on top of me, because it was like my zone of protection.” Additionally, ex-partners would use children to harm mothers as noted by Olivia, “I thought that after the separation my children would have a calmer life….Maybe he doesn't hit me anymore, maybe he no longer touches me, maybe it doesn't insult me anymore, but he is hurting me through the children.” Camila provided a similar account: “…he would cry in front of him, and ‘your mom told me that’…that ‘I am sad’. The oldest is more sentimental …and it would affect him. ‘Mom, you are a liar.’ So, he would turn them against me.”

**Results Summary**

Taken together, participants recognized the enduring effects of IPV on their psychological well-being, children’s adjustment, and mother-child bonds. They also linked diminished maternal competence with perpetrators’ exploitation of the mothering role. Therefore, results suggest mothers continue to be negatively impacted by intimate partner violence after they exit the relationship. However, results also revealed that mothers implement a variety of strategies to help children cope and develop new parenting goals and behaviors in response to IPV. These include
instilling non-violence and adopting alternative disciplinary approaches to corporal punishment.

As mothers negotiate the aftereffects of IPV, they face additional or new stressors as single parents that are compounded by their marginalized position as immigrant Latinas. Hence, recovery from IPV is complicated by heightened parenting stress under structural conditions that restrict economic opportunities and social integration. Still, as illustrated by participants’ narratives, immigrant Latinas utilize personal strengths to overcome obstacles and persevere toward their goals. The storyline that emerged from the data was the following: *Latina immigrant mothers use internal strengths to persevere through obstacles and adapt their parenting in response to IPV experiences.*
Chapter V: Discussion

To understand how IPV influences parenting among Latina immigrants, 11 Latina immigrant mothers who survived intimate partner violence participated in semi-structured individual interviews. This study asked participants to share their perspectives on how their experience with IPV shaped their parenting beliefs and practices. Participants also discussed the social and cultural factors that influenced their parenting and elaborated on their experiences co-parenting. This study used grounded theory methodology (Corbin & Strauss, 2008; Strauss & Corbin, 1990) to analyze its data, an approach that resulted in the following story line: *Latina immigrant mothers use internal strengths to persevere through obstacles and adapt their parenting in response to IPV experiences.*

Parenting as a Latina Immigrant

The current study highlighted the influence of mothers’ environments in shaping their parenting. Given that the participants were all Latina immigrants, the study identified several acculturation-related issues. These include general adaptation processes (e.g., changes in gender role beliefs), as well as particular challenges faced (e.g., missing family and their support, discrimination and marginalization, and difficulty with adjusting to the English language). These acculturation concerns provide the backdrop in which Latina immigrants parent, and influence their parenting and experiences of motherhood in the US. The following section will discuss immigration-related circumstances and potential areas that may interact with IPV-related issues for immigrant Latina mothers.

Acculturation and Parenting

Immigrants undergo acculturation as they are exposed to customs and ideas in the US that result in certain modifications in values or behaviors (Berry, 2006). These
changes can involve varying degrees of cultural maintenance and assimilation. In line with this process, participants continue to instill core values based on Latinx cultural norms and childrearing practices in their home country. For example, “respeto,” or respect, is one of the most central values in Latinx culture. It is fundamental to establishing mothers’ expectations for their children’s behavior (Calzada et al., 2010). Not surprisingly, participants endorsed this value strongly. Therefore, respect continues to help define socialization goals while parenting in the US (e.g., obedience, deference, decorum; Calzada et al., 2010).

Mothers in this study also described nurturing values and beliefs that may be considered more aligned with US-based norms, such as promoting independence, self-sufficiency, and gender equality in their children. Scholars have pointed to influences of migration, labor participation, and engagement with American society in shaping gender role ideology and dynamics within Latinx families (Umana-Taylor & Updengraff, 2013). In this context, women take on increased financial and decision-making responsibilities and men are more involved in parenting (Umana-Taylor & Updengraff, 2013; Vesely et al., 2019). Latinx parents who ascribe to more US oriented values tend to not show differential treatment towards children based on gender (McHale et al., 2005). Thus, the emphasis of some participants in this study on treating sons and daughters equally and teaching children the benefits of egalitarian relationships mirror the shift in overall gender role attitudes. Similarly, they may integrate and instill aspects of American values, like autonomy and independence, with the traditional Latinx values while navigating life in the US (Vesely et al., 2019).

In addition to nurturing values that reflect both Latinx traditions and cultural adaptations in the US, participants endorsed strict parenting practices. This was revealed in their expectations for obedience and a high degree of monitoring and limit
setting when children engaged in recreational activities. Latinx parenting is generally portrayed in studies as more restrictive and controlling than other cultural groups (Umana-Taylor & Updengraff, 2013). This is more common among less assimilated Latina mothers (Halgunseth, 2019). US-oriented and, to some extent, bicultural Latinx parents emphasize parental authority less than parents with greater Latinx cultural orientation. They may also believe that youth should have more autonomy at a younger age. This is associated with less supervision, fewer rules, and granting youth more decision-making power (Roche et al., 2014).

Participants related boundary setting and close monitoring to protection. They did so to safeguard their children from negative influences or harmful experiences. Consistent with these goals, research supports the concept of “protective parenting” among Latinx immigrant families (Halgunseth, 2019). This is related to granting children less autonomy and monitoring them closely, while also expressing warmth. Although scholars have associated aspects of strict parenting (e.g., restrictiveness, monitoring) with positive outcomes for Latinx youth (Halgunseth, 2019), it may also be a source of stress when cultural tensions arise between parents and their children. This will be discussed in the following section, which focuses on the challenges or acculturative stressors that mothers encounter and their influence on the parenting environment.

**Acculturative Stress and Parenting**

As the acculturation process unfolds, it can produce *acculturative stress*. This is when an individual believes cultural demands exceed their personal resources to manage intercultural conflict (Smart & Smart, 1995). Participants shared a number of stressors that spanned several interrelated domains: (a) social/interpersonal, (b) instrumental and/or environmental, and (c) societal (Caplan, 2007). This discussion
begins with challenges in the immediate environment and then moves outward to contextualize the influence of broader social forces on parenting and motherhood.

Within the social/interpersonal domain, participants communicated difficulties around separation from family, reduced social support, changes in roles, and intergenerational conflict. Consistent with past research (e.g., Vesely et al., 2019), participants faced increased stress and demands in the US without the emotional and practical support from family members. Participants felt the strain of not having the assistance customarily provided in their country of origin where entire family systems help raise children (Halgunseth, 2019; Vesely et al., 2019). This was especially challenging as mothers adapted to greater responsibility as a single parent following separation from their partner which will be discussed later in this chapter.

Participants also encountered challenges when navigating their role as parents in the US who embrace cultural differences in parenting ideas and approaches. They reported less confidence in handling specific issues that arise in the US and that may not occur in their country of origin. For instance, feeling embarrassed to discuss sexual issues with daughters or feeling self-conscious about not having familiarity with US childhood experiences, as Latina mothers born in this country know well. Other difficulties involved participants experiencing cultural tensions with their children when it came to disagreements over aspects of strict parenting. For example, differing cultural norms around socializing with friends and high levels of parental monitoring proved contentious between mothers and youth. A few participants also reported children’s objection to mothers raising their voices at them, or the use of spanking based on how they are socialized in the US. When children directly negated parental authority, participants felt confused and frustrated, undermining their ability to parent assertively.
These findings are consistent with the literature on cultural tensions within Latinx families in the US. In general, Latinx children adopt mainstream customs and ideas faster than their parents (Halgunseth, 2019). These cultural disparities can lead to greater parent-adolescent conflict, lower positive parenting and parental involvement, as well as reduced family cohesion among Latinx families (Schwartz et al., 2017; Smokowoki et al., 2008). Some participants in the present study felt less self-assured as parents due to cultural discrepancies within the parenting domain. For Latina immigrants who experience IPV, this may interact with lower parenting confidence reported by mothers as a result of partner abuse that targets her mothering role. While only a few participants shared that their children had rebuffed mothers’ disciplinary approaches due to how children are socialized outside of the home, this could be a particular challenge for Latinx mothers who have experienced IPV. In some instances, schools provided children with violence prevention education which may shape children’s ideas about violence and interpret mothers’ discipline as mistreatment or abuse. The above findings add to the literature exploring potential culture-bound parenting issues faced by Latina immigrants in the context of IPV.

Regarding challenges faced within the broader social context of Latina immigrants, participants also encountered various forms of structural discrimination and marginalization. This was largely due to limited English language proficiency and immigration status across various settings, including the community and workplace. Structural discrimination and marginalization correspond with both instrumental and/or environmental and societal dimensions of acculturative stress (Caplan, 2007). As a result of anti-immigrant policies (e.g., family separation) and rhetoric (e.g., social discourse about Latinx immigrants as criminals), women felt vulnerable to deportation and discrimination. Their fear of deportation has prevented them from
confidently engaging in daily public activities and seeking out law enforcement assistance. Therefore, as participants raised their children under the threat of deportation and discrimination, they experienced added parenting stress and undue vulnerability to interpersonal violence (Lopez et al., 2018; Saleem et al., 2020).

Furthermore, participants faced structural barriers to establishing economic well-being without legal employment authorization. This was compounded by limited English language proficiency — a likely factor in both job availability and job selection. In turn, participants struggled to obtain stable, well-paying jobs. Consistent with existing research (e.g., Androff et al., 2011), immigrant mothers occupied low-status jobs, such as labor-intensive and low-paying cleaning service work or factory jobs. Accordingly, all but one participant reported annual family income less than $20,000. This echoes economic disparities for Latinxs in the US, a community disproportionately counted among the working poor (US BLS, 2021).

Acculturative stress arising from structural challenges (e.g., discrimination, economic hardship, poor work conditions) hindered participants’ ability to realize some of their parenting goals and tasks. For example, systemic constraints challenged mothers’ goals of continuing to support their children financially, or improve their family’s living conditions. Difficult work conditions also prevented mothers from spending quality time with their children. Research has related acculturative stress to increased difficulty establishing routines or making space for quality time (Aldoney & Cabrera, 2016), lower parental monitoring (Gilbert et al., 2017) and harsher parenting (Ayon & Garcia, 2019). However, these constraints may have particular implications for parenting among Latina immigrants who survive IPV. For example, practical issues (e.g., long work hours) may prevent mothers from providing additional time
and the attention needed to help children recover from the negative effects of IPV exposure or repair family cohesion.

Finally, language barriers created specific parenting challenges for participants. Low English language skills precluded them from fully contributing to their children’s education (e.g., assisting children with homework or engaging in school conferences) without the necessary language accommodations (e.g., Halgunseth, 2019). Another, perhaps more significant consequence was that mothers’ low English proficiency led to communication issues with children who had low Spanish language skills. This disparity likely reflects data suggesting that, over nearly four decades, US-born Latinxs have steadily driven higher rates of English proficiency and lower rates of Spanish use at home (Krogstad & Noe-Bustamante, 2021). Parent-child language differences resulted in problems with communicating needs and expectations, as well as eliciting emotional support. Logically, this can have repercussions for parenting. Research has shown that differences in language use and proficiency among Latinx youth and their immigrant parents may compromise the effectiveness of positive discipline and warmth, thereby affecting adolescent development (e.g., self-control and aggression) (Schofield et al., 2016).

To summarize this study’s findings so far, it is clear that Latina immigrants have to navigate a complex set of cultural and social issues when parenting in the US. From an ecological perspective, mothers are exposed to and interact with societal norms, beliefs, and policies. As they adapt to their environment, they retain traditional cultural beliefs, while also adopting select US values. This process informs the immediate environment they parent in. As such, they pass on Latinx cultural norms and values, as well as some US beliefs, to their children. As participants negotiated these developments, they dealt with acculturative stressors within all three domains...
proposed by Caplan (2007): intergenerational conflict, lower social support, and language barriers. Furthermore, structural barriers arising from policies that restrict economic well-being and social integration perpetuate harms for mothers and their families (Saleem et al., 2020). Stresses produced by these difficult realities extend to parental functioning. Taken together, this study offers insights about Latina immigrant mothers’ parenting milieu in the context of the US. In keeping with a cultural ecological lens, understanding participants’ parenting beliefs and environment helps inform how IPV influences parenting, especially as it may interact with the above contextual factors.

Effects of IPV on Mother and Child

The following section will focus on the perceived effects of IPV on mothers and their children. First, the personal impact of experiencing IPV, including depression/sadness, reduced self-esteem and self-worth, and guilt will be reviewed. Then, participants’ perspectives on how IPV affected their children’s conduct, attitudes toward mothers, and adjustment are discussed.

Effects of IPV on Mothers

The psychological and emotional impacts of IPV on study participants, including low mood, apathy, increased emotional sensitivity, and reduction in self-esteem or self-worth, coincides with the literature examining the psychosocial effects of IPV on mothers. Research supports the relationship between IPV and greater depression symptoms, as well as lower self-esteem in multiethnic samples (e.g., Murray et al., 2012; Postmus et al., 2012; Renner et al., 2015) and among Latinas (e.g., Kelly, 2010; Orozco & Mercado, 2019; Perilla et al., 1994). As participants discussed their adjustment and emotional state after exiting their relationship, they provided multiple explanations for their underlying depression, sadness, or low self-
esteem. They related sadness to the grief of ending their relationship with their partner, no longer having an intact family, and feeling sorrow when recalling the violence of the relationship. Psychological control and verbal insults had particularly lasting consequences on mothers’ self-conceptions — such that participants integrated abusive language into personal narratives. Consequently, they had less confidence to make decisions or express themselves.

An additional implication of IPV for maternal mental health was feeling guilty in relation to children’s exposure to IPV. Mothers implied that by permitting IPV to occur and continue they were responsible for children bearing witness to abuse. Other qualitative studies have documented the intense guilt mothers felt about not being able to protect children in the context of IPV and concern about long-term effects of experiencing and witnessing violence (Wendt et al., 2015). This may explain why guilt, as a result of their perceived failure to protect their children from IPV exposure, was so notable in moments when children had adjustment difficulties or questioned mothers’ decisions about staying in relationships with abusive partners. Indeed, Kelly (2009) reported that Latina immigrants expressed persistent guilt for not adequately protecting children from perpetrators; knowing that IPV had significant effects on their children was most distressing. Scholars have pointed to the complex ways that maternal blame is woven into IPV and becomes entangled with maternal protectiveness (Moulding et al., 2015). Actions taken by mothers to shield children from harm (e.g., taking blame in situations to detract attention away from children) can result in reproach from their children later. Therefore, mothers’ psychological well-being is not only negatively impacted by IPV itself, but also from the potential stress, worry, and guilt stemming from parenting in a violent situation (Sousa et al., 2021) and the grief that comes with ending a relationship.
Effects of IPV on Children

With regard to the effects of IPV on children, ample evidence suggests that children and adolescents exposed to IPV exhibit internalizing and externalizing behaviors (Evans et al., 2008). Longitudinal studies suggest that IPV exposure is positively associated with child difficulties months and even years after exposure (Vu et al., 2016). Therefore, it is unsurprising that participants in the current study reported similar observations with the passage of time. First, mothers indicated that children showed increased misconduct and aggression towards them, siblings, or people in the community (e.g., bullying peers). They described other behavioral issues, like children failing to comply with mothers’ wishes or rules, as well as stealing. This is similar to behaviors (e.g., drinking and theft) documented by others researching post IPV separation (Buckley et al., 2007). Mothers also perceived that their children developed mistrust and resentment towards them, as expressed through doubt, criticism, and emotional distancing. For example, children criticized mothers for tolerating violence or for staying with abusive partners. Some children blamed mothers for parental separations or for difficulties they experienced.

Research points to possible mechanisms underlying socioemotional functioning and behavioral problems among youth exposed to IPV. These include physiological dysregulation and reduced emotion-regulation skills, as well as cognitive processes (e.g., appraisals of threat, self-blame and attitudes about the use of force or aggression) that shape responses to violence (Howell et al., 2016; Jouriles et al., 2014). When considering negative attitudes towards mothers specifically, qualitative studies have captured ongoing child-to-mother criticism and hostility (e.g., calling mother’s bad names, disrespectful behavior). This was believed to be in response to witnessing violence (i.e., learned behavior) and as a reaction to women’s
reduced emotional availability during abusive relationships (Goldblatt et al., 2014; Renner et al., 2021). Evidence from research on children’s perspectives of IPV echo the current study’s findings, such that child-parent relationships were disrupted (Noble-Carr, Moore, McArthur, 2020), children reported criticizing mothers’ positions on staying in abusive relationships, and children accusing mothers of dividing families (Lapierre et al., 2018; Mullender et al., 2002).

Additionally, scholars have associated IPV with adjustment difficulties in children by way of co-parenting relationships (i.e., degree of support, childrearing agreement, satisfaction of division of labor, and difficult family dynamics) among married (Katz & Low, 2004) and unmarried parents (Kolsky, & Gee, 2021). In line with this, two participants noted that their children’s behavior worsened after returning from their father’s care. They believed that their children’s misconduct was based on scheduling inconsistencies and different parenting approaches between mother and father, in addition to intentional efforts by ex-partners to negatively portray mothers. Thus, ex-partners contributed to children’s resentment by vilifying mothers and misleading children to turn against mothers even after parental separation.

One final consideration for this sample is consequences of divorce or separation, given that all participants exited the relationship. Children exposed to IPV commonly report feelings of disruption and loss, alongside worry, powerlessness, and sadness (Noble-Carr et al., 2020). One of these losses or changes can be parental separation or divorce. As such, a few mothers noted that their children had a hard time accepting a divorce, while other participants said that their children missed their father’s presence due to incarceration, deportation, or having freely moved back to their home country. Compared to children of married parents, studies have
consistently found that children of divorced parents are at higher risk of socioemotional, behavioral, and academic functioning. This can persist into adulthood (Amato, 2010). Therefore, IPV and divorce or parental separation increase the likelihood for both internalizing and externalizing behavior. Participants’ observations may reflect the confluence of these risks.

In summary, children and mothers’ experiences with IPV resulted in negative psychological and behavioral consequences. The effects on mothers appeared while participants actively experienced violence in their relationship and persisted to some extent following IPV separation. However, it is important to note that several mothers also reported improvements in their mental health over time, after separation. A small number even reported better-quality connections with children through communication. They found more opportunities to spend quality time together after exiting the abusive relationship. Participant observations of children’s difficulties also emerged during the abusive relationship. Yet some mothers perceived these challenging behaviors to worsen post-separation. The present findings highlight how IPV exposure may tarnish children’s perceptions of mothers in several ways, including cultivating mistrust for unmet needs and expectations during IPV, observing violence that normalizes hostility towards mothers, and ongoing ex-partner manipulation of children. Furthermore, it is possible that when IPV and divorce co-occur, the effects of IPV complicate the inherent negative effects of divorce. Ongoing parental conflict post separation is directly linked to internalizing and externalizing behaviors in children; it is partially mediated by parenting behaviors (e.g., parental hostility, intrusive parenting) and family dynamics (e.g., low parenting support and role diffusion) in non IPV affected families (van Dijk et al., 2020). IPV may put families at a higher risk for interparental conflict post-IPV separation. Emerging data
suggests that poor co-parenting relationships mediate the relationship between IPV and child adjustment in low-income families of color with unmarried parents (Kolsky, & Gee, 2021).

**Effects of IPV on Parenting**

The third and final major category that will be discussed in this chapter concerns the impact of IPV on participants’ parenting. Two secondary categories emerged. The first pertains to the perceived impact of IPV in shaping cognitions and behaviors. The second focuses on notable changes to participants’ experiences of motherhood.

**Parenting Cognitions and Behaviors**

The current study shows that IPV influences several parenting beliefs and practices among Latina immigrants. Among participants, this involved both positive and negative parenting outcomes. The parenting beliefs and behaviors of participants reflected parental responsiveness and constructive changes. These included implementing strategies to help their children adjust and cope with exposure to IPV, committing to instill non-violence in their children, and making adjustments in disciplining their children. With regard to detrimental effects on parenting, only one subcategory emerged: perceived ineffectiveness.

Under positive parenting outcomes, this study found that mothers used a number of strategies to promote their children’s wellbeing following exposure to IPV. Findings highlight participants’ beliefs and practices for helping their children through potentially traumatic experiences. Determining how to discuss IPV, protecting their children’s emotional well-being, seeking out professional resources, and prioritizing their children’s needs all reflected participants’ cultural and social backgrounds as Latina immigrants.
The current study investigated how Latina immigrant mothers communicate with their children about IPV. Findings showed that mothers underwent a decision-making process to determine a discourse around IPV. That process resulted in variable approaches. Some described having transparency with their children. Others withheld details, or limited information shared to what children themselves observed. Still others avoided the conversation, or minimized children’s recollection of IPV (e.g., negating its intensity or its consequences). Latina immigrant mothers considered the following three factors in their judgements: the child’s age, participant beliefs about the effects of remembering or discussing potentially traumatic events, and whether children witnessed violence. While there was some individual variability, participants mostly censored discussion of IPV by attempting to speak of the violence generally, limiting details, or minimizing the significance of IPV when children brought up the topic or recalled memories of violent episodes. It may be that Latina immigrants balance their cultural beliefs about not discussing sensitive topics like IPV, their concerns about harming children, and responding to their children’s needs to understand what occurred or make sense of the changes that have occurred as a result of IPV. Understanding Latina immigrant mothers’ parenting knowledge (e.g., developmental perspectives) and beliefs about the benefits or harms of discussing IPV offers advocates and providers a context for interpreting women’s parenting behaviors around communication with children about violence following IPV exposure. This can allow mental health providers or social workers to build on existing strategies that mothers purport to be effective. At the same time, providers can offer evidence-based information about trauma recovery in a culturally sensitive manner. An added consideration for Spanish-speaking Latina immigrant mothers and their English-speaking children is lack of a shared language. Though participants in this study did
not state it explicitly, it is likely that language complicated discourses around violence. This matters because children may express an emotion, feeling, or concern that a mother cannot adequately respond to. If mothers decide to talk about a violent episode or process the impacts of IPV as a family, not sharing a common language makes it harder to do so.

The current study found that Latina immigrant mothers were responsive to their children when actively engaging in strategies that buffered the effects of IPV exposure. These approaches appear to align with cultural values, such as *familismo* and *marianismo*. For example, participants made efforts to preserve their children’s sense of connection as a family and images of their fathers. They also attempted to shield children from seeing mothers’ own suffering in the aftermath of IPV. Participants believed it was important to their children’s well-being to see their mothers as “strong.” This corroborates previous findings that Latina immigrant mothers try to protect children from IPV exposure and damaging relationships with fathers during the abuse (Kelly, 2009). Mothers in the present study also assured and comforted their children when they worried about future occurrences of IPV in order to promote recovery and hope.

Additionally, as other scholars have noted (e.g., Sousa et al., 2021), participants sought out professional resources for their children. This resulted in benefits for both mother and child, as participants in the present study found solace in seeing improvement in their children’s behavior. Latina immigrant mothers stressed the importance of having services for children available in their community. This demonstrates that Latina immigrants may be receptive to interventions following IPV, especially programs or services that support their children’s well-being following IPV exposure. Finally, participants prioritized their children by focusing attention on
children’s needs and the mother-child relationship after exiting a violent relationship. Latina immigrant mothers tend to prioritize children above their own needs and actively make decisions about staying or leaving abusive relationships with their children’s best interests front of mind (Kelly, 2009). After leaving, participants focused on strengthening their bonds with children by taking opportunities to spend more quality time and increasing communication with them in general.

In line with parenting adjustments considered to be productive, participants demonstrated attitudes and behaviors that reflect a commitment to non-violence. Like Latina immigrant mothers in Acosta’s (2017) qualitative study and qualitative work with non-Latina samples (e.g., Renner et al., 2021; Lapierre, 2010), participants in this study intended to teach their children the importance of non-violence. They believed that promoting non-violence in their children would help prevent them from future involvement with IPV. Motivated to “break the cycle,” mothers demonstrated that violence was not ethical or normal by leaving their relationships or by using their experiences with IPV to explain its harmful consequences.

Mothers also taught children alternative methods to manage disagreements and negative emotions. For example, participants encouraged taking a break from an argument when emotions ran too high, using breathing to self-regulate, and devaluing the effectiveness of aggression to handle disputes. Additionally, with few exceptions, mothers believed that their attitudes about and practices of discipline had changed as a result of IPV. In contrast to participants’ socialization that produced acceptance for the use physical discipline, mothers sought to avoid using corporal punishments post IPV. Alternatively they relied on non-corporal methods that featured a combination of negative and positive punishments (e.g., taking away privileges or adding cleaning chores to children’s responsibility for the day). Mothers gained perspective from their
own involvement with IPV and used it to develop empathy for what children may feel when reprimanded harshly.

With this in mind, participants wanted to avoid actions that would produce the same fear or pain, especially as children were in the process of recovering from the effects of IPV and parental separation. Therefore, in recognizing the potential psychological harms of scolding or corporal punishment, mothers looked for alternative disciplinary methods. This adds to previous studies (e.g., Orozoco & Mercado, 2019) by explicating the role of experiencing IPV in making adjustments to disciplinary approaches among Latina immigrants. The current study also adds complexity to the evolving nature of parenting within the context of IPV. Latina immigrant mothers may develop negative attitudes (e.g., resentment) and behaviors (e.g., increased use of corporal punishment) toward their children (Acosta, 2017) throughout an abusive relationship. However, this study’s participants exhibited the potential and desire for positive parenting adjustments following IPV.

Finally, participants identified a perceived ineffectiveness as mothers as the negative effect of IPV on their parenting. Most mothers described having reduced confidence in their ability to raise children effectively, doubting their capacity to be a “good mom.” Other qualitative studies (e.g., Orozco & Mercado, 2019; Renner et al., 2021) have captured this phenomenon. For some participants, self-doubt developed from partners’ psychological abuse targeting their mothering (e.g., undermining mothers’ authority, ridiculing her parenting decisions, or explicitly naming her as a bad mother). Scholars understand tactics aimed at denying mothers’ parental power or obstructing their caretaking to be one of the ways that IPV leads to a reduced sense of parenting capacity (Sousa et al., 2021).
The present study found mothers’ sense of incompetence was particularly salient when it came to performing specific parenting activities. These included managing their children’s behavior and providing emotional support. Participants did not report self-doubt related to performing basic care tasks. This lends support to the idea that efficacy beliefs can vary across distinct activities within a functional domain (Bandera, 2006). For instance, discipline elicited feelings of ineffectiveness. In moments when children’s behavior was difficult to control, participants questioned their ability to adequately raise or care for them. In the context of IPV, Latinas report lower parenting competency and greater stress due to their child’s negative behaviors and adjustment than non-Latinas (Edelson et al., 2007). Latinas may interpret child-related problems to be their failing as mothers based on cultural expectations of women as good wives and mothers (Edelson et al., 2007). Therefore, it is possible that participants in this study were more likely to interpret their children’s behavioral and emotional difficulties as reflective of their ineffectiveness as mothers.

Interestingly, a few participants reported believing that they could not demand compliance, command respect from their children, or discuss the importance of non-violence. Mothers considered this to be hypocritical. To this author’s knowledge, no previous study has documented this finding. Considering the cultural context, such beliefs suggest that violence engenders shame or “verguenza,” the experience of humiliation or dishonoring oneself (Adames & Chavez-Dueñas, 2016). This may undermine respect from others. Given that respect is a highly regarded value in Latinx culture — one that helps maintain a hierarchical structure within a family (Adames & Chavez-Dueñas, 2016) — mothers may believe that they have lost authority with their children when they feel like they have lost their children’s respect. This may suggest
that IPV could disrupt mothers’ confidence to teach children respect, a key parenting goal identified by participants.

In summary, participants described a number of ways that the experience of IPV shaped their parenting. As previous qualitative studies have shown, participants demonstrated positive changes in parenting goals (e.g., promoting non-violence) and in their behaviors (e.g., using non-physical forms of discipline) in response to IPV. Additionally, unlike the deficit perspective of mothering in the context of IPV, participants reported sensitivity and responsiveness to their children’s needs, actively promoting their children’s adjustment in diverse ways following IPV.

As posited by Taraban and Shaw’s process of parenting model (2018), parenting cognitions and behaviors go hand in hand. Cognitions provide a framework for parenting behaviors, which then represent tangible manifestations of parental beliefs and goals. Participants revealed precise cognitions underlying their parenting behaviors. For example, they shared beliefs about what facilitates and hinders children’s recovery, as well as developmental perspectives on how children understand IPV. Participants also drew on cultural resources, such as familismo and marianismo, to guide their behaviors. For example, participants attempted to preserve family connectedness by assuring children that they continued to be a unified entity and protected their children’s image of their father. Mothers appeared to be guided by two gender role beliefs of marianismo: (a) women as the family pillar, and (b) women are self-silencing to maintain harmony (Castillo et al., 2010). With these beliefs in mind, women strive to be the family’s primary source of strength, willing to suppress their own needs and interests in service of their children (Castillo et al., 2010). This was apparent in participants’ efforts to present emotional stability in front of their children and prioritize their children’s needs above all else.
While these potential influences related to IPV may have supported participants’ mothering in some ways, the effects may also be double-edged. For example, mothers seemed to experience emotional difficulties and lower parental self-efficacy at the same time that their children exhibited greater internalizing and externalizing issues. It is possible that negative perceptions of parenting abilities get reinforced and persist long after IPV, in part, by challenging parenting tasks. When it comes to discipline, specifically, it is important to reiterate that children are more likely to exhibit externalizing behaviors as a consequence of IPV exposure (Martinez-Torteya et al., 2009), perhaps creating frequent opportunities for mothers to experience inadequacy and powerlessness. This highlights the reciprocal ways that parenting affects children and, in turn, children affect parenting cognitions and behaviors. Still research has largely focused attention on child outcomes following IPV, with parenting as a predictor. Understanding the bi-directional relationship between parent and child may further explain post-IPV difficulties for mothers and provide additional avenues for intervention.

Navigating Challenges Post Separation

The second half of this section concerns how IPV shaped experiences of motherhood. This includes discussion of challenges with becoming a single mother and co-parenting as well as how mothers move forward in their parenting roles and lives with children.

The majority of mothers, regardless of co-parenting status, discussed the strain of managing all child-raising and household duties alone. A recent mixed methods study highlighted similar challenges of navigating post-IPV separation difficulties as single mothers among majority White women (Renner et al., 2021). Although participants were accustomed to completing most caregiving responsibilities as
practiced in traditional Latinx households, their partners served as ancillaries. That is, in some cases partners provided support during emergencies or watched children while mothers ran errands or even helped ease language barrier difficulties. When separation became necessary, participants essentially lost these types of support while also losing the financial contributions of fathers. For some, that required working outside of the home for the first time. Therefore, balancing work with taking care of their children became a significant undertaking, especially as participants had jobs that were physically taxing and/or demanded long hours (typical for this population). Additionally, without family physically near them to provide instrumental support, participants did not have any assistance with childcare when mothers needed to work. Further, participants’ low economic status precluded them from affording childcare from centers or daycare. Therefore, immigrant Latinas mothers may face more demands with less resources following separation.

This study adds to gaps in current understandings of co-parenting relationships between Latina immigrants and their children’s fathers after exiting abusive relationships. Acosta (2017) highlighted the ways that partners might continue to harm Latina immigrant mothers through children — a shared finding in the current study. However, the present investigation explicitly examined how mothers manage ongoing contact and parenting tasks while sharing parenting duties with former partners. Results demonstrated participants who co-parented faced additional challenges. With few exceptions, participants believed that their children’s fathers should continue to participate in parenting duties. Despite these expectations, as well as making formal or informal agreements about parenting arrangements, they described fluctuating engagement, communication, and parental support from children’s fathers. As a result, mothers experienced frustration and stress when co-
parenting expectations went unmet. Though both co-parenting and non-coparenting mothers experienced reduced parenting support, the unreliability of father’s involvement among those who did co-parent may add stress and make it harder for mothers to create predictable routines for their children.

Another challenge was balancing communication of parenting needs and maintaining boundaries with former partners. Participants set boundaries by firmly requesting that all communication with their ex-partners be about the children or only responding to communication that the mother deemed important. Some pursued a restraining order, which offered them protection from harassment but also created an obstacle when mothers looked to effectively communicate about parenting matters. Participants illustrated the difficulty of conveying thoughts freely through text messaging when that was their only chosen form of communication. These constraints likely prohibit co-parents from bolstering the co-parenting relationship and limit Latina immigrants’ ability to elicit help from children’s fathers without thorough discussion and parenting concerns.

Finally, a handful of mothers dealt with continued psychological harm through the co-parenting relationship. Tactics of psychological harm included partners’ efforts to estrange and turn children against participants. Researchers have reported this in divorce literature. Such strategies can involve interference with parental contact with the child, disparaging the targeted parent, and developing unhealthy alliances with children to the detriment of the other parent (Baker & Darnall, 2006). Not surprisingly, efforts by partners to estrange children from mothers proved distressing.

The final area of discussion relates to how IPV shapes the mothering experience. It highlights Latina immigrants’ ability to harness internal resources to overcome multiple obstacles. As participants adjusted to their new realities and began
rebuilding their lives, they tapped into psychological resources to persevere through the challenges they faced and found meaning in their hardships. One personal resource that came through in their narratives was hope. Hope refers to one’s perceived ability to generate pathways toward selected goals and utilize agency to stimulate engagement with those pathways (Snyder, 2002). In hope theory, “pathways” or pathways thinking refers to the routes or avenues generated to confidently reach goals, while “agency” or agency thinking is the belief that one has the capacity to reach their goals (Snyder, 2002). In pursuing objectives, individuals encounter and work around barriers or obstacles to reach desired outcomes (Snyder, 2002).

The current findings can be interpreted through a cultural context lens of hope (Edwards & McClintock, 2018). Participants’ overarching goals following IPV were to continue to help their children prosper in spite of challenges related to IPV, nurture them to be productive members of the communities they live in, and break the generational cycle of IPV. Since culture is important in goal formation (Edwards & McClintock, 2018), these desired outcomes cannot be considered without the cultural influences that shape parenting goals among Latina immigrants, as discussed earlier in this chapter (e.g., respect, self-sufficiency). Participants’ definition of “productive members” likely involves high levels of respect towards others in the community, which may be different for an acculturated US-born Latina or non-Latina mother. With regard to pathways, participants saw stable employment as a path to help their child succeed, as it would allow her to provide better housing and safety for them. Yet, as discussed previously, Latina immigrants in this study (mostly undocumented) faced additional obstacles in light of systemic constraints in the US. As mothers dealt with these structural barriers, in addition to more demands and pressure as single
parents, they primarily utilized internal resources like familism and determination to move towards their goals. One aspect of familism is the expectation that family has the obligation to provide economic, social, or emotional support (Sabogal et al., 1987; Valdivieso-Mora et al., 2016). This appeared to serve as participants’ motivational source in goal pursuit (Edwards & McClintock, 2018). Mothers also used determination to maintain motivation. As one of seven recognized psychological strengths of Latinx individuals, determination is the endless drive and courage to do what is necessary to meet goals despite encountered barriers (Adames & Chavez-Duenas, 2016).

In addition to utilizing hope, mothers identified a sense of personal growth from their experiences with IPV and the challenges they faced as single mothers. Some described themselves as “stronger” and “better mothers,” suggesting that these mothers had positive changes in their self-perceptions over time. This is consistent with the concept of posttraumatic growth (PTG) which refers to the positive psychological change that follows suffering in the face of significant adversity or trauma (Calhoun & Tedeschi, 1998; Tedeschi & Calhoun, 2004). Changes can be observed in several domains, including in perceptions of the self, relationships with others, and in life perspective or philosophy (Tedeschi and Calhoun, 1995 as cited in Elderton et al., 2017). Growing attention on PTG in the context of IPV survivors offers a more comprehensive view of sequelae following IPV, since the negative effects are well-documented. A recent systematic review of 16 studies by Elderton and colleagues (2017) reported PTG is not an uncommon occurrence among survivors of interpersonal violence; positive change is most predominantly seen in the appreciation of life and personal strengths domains of PTG. This implies that
individuals may come to gain profounder gratitude for life and an enhanced self-perception following IPV.

In line with the theory of PTG, participants reported significant distress and negative impacts on their self-perceptions as mothers as a result of IPV. It may be that participants made meaning of their suffering to derive empowerment and inspiration for a new life with their children. The current study did not explicitly explore specific cognitive processes theorized to underlie PTG (i.e., alterations in assumptions about self, others and world; Janoff-Bulman, 2006). Therefore, they remain unclear. Assumptions about the world may become significantly more positive one year post baseline assessment for women who do not experience IPV revictimization (Valdez & Lilly, 2015). In turn, greater positive world assumptions (e.g., “there is more good than evil in this world”) is associated with PTG. The small, majority-Black and English-speaking sample from Valdez and Lilly’s (2015) study limits generalizability to the current sample. Future research could examine the mechanisms that underlie PTG among Latina immigrants to elucidate potential cultural influences on women’s responses to IPV, as well as additional factors (e.g., age, acculturation, parenting stress) that facilitate or hinder PTG.

**Conclusion**

Taken together, the current findings provide a comprehensive understanding of Latina immigrant mothers’ perspectives on how IPV has shaped their parenting and experiences of motherhood. Their reflections highlight the direct and insidious ways that IPV is harmful to mothers, children, and the mother-child relationship. Mothers endorsed decreased emotional functioning and observed that their children developed increased behavioral problems and hostility towards them. Therefore, IPV had a significant negative impact on psychological functioning for children and mothers,
separately. Yet, it also disrupted bonds between mother and child. IPV exerted its influence on mother’s parenting through reduced emotional availability, depression, and direct undermining of mothers’ role. This lends support for the “spillover” theory, in which negative interactions within the parenting relationship impact parent-child interactions via parenting. Ultimately, this affects children’s adjustment (van Dijk et al., 2020).

The effects of IPV on Latinx mothers, children, and parenting continued well into the post-separation period, some even years later. Mothers’ parenting continued to be negatively impacted by IPV, primarily through persistent self-doubt and perceived ineffectiveness to parent their children. However, mothers also discussed the many positive ways that surviving IPV shaped their parenting. They committed themselves to teaching their children non-violence and used non-violent methods of discipline. They also demonstrated an unrelenting commitment to their children and implemented a number of strategies that helped promote positive adjustment.

Therefore, this study adds to the existing literature suggesting mothers who experience IPV are capable of positive parenting (Lappierre, 2008; Levendosky et al. 2003; Letourneau et al., 2007) and may develop an increased sense of duty to care and protect children (Lappierre, 2010) in response to IPV. However, as Latina immigrants navigate single motherhood, they continue to parent under stress due to structural constraints: economic instability, marginalization, and minimal support. Latina immigrants who co-parent experience additional stressors related to ongoing communication with ex-partners; inconsistent or wavering co-parental involvement and support; and even the sustained threat of psychological harm through parental alienation tactics employed by ex-partners. Under these conditions, mothers may struggle to implement new parenting goals and repair perceived parenting
competencies and mother-child relationships. Nonetheless, Latina immigrant mothers utilize personal and cultural strengths to continue moving towards their goals. In the process, some experience positive psychological growth.

Limitations

The present findings should be considered in light of several study limitations. All participants were recruited from the same social service agency and received IPV-related services. Interventions and other support services received by participants may have influenced the themes observed in this study. Furthermore, at the time of this study, all participants had exited the violent relationships under discussion. Therefore, these findings may not be representative of mothers who remain with perpetrators or those who are experiencing ongoing IPV.

This study did not recruit mothers with children from a particular age group, therefore the age range of children across participants varied widely. This limited potential analysis of IPV and parenting for any specific developmental period. Thus, the practice implications from this study may not be as applicable to settings that serve families with children of a distinct age group (e.g., under the age of three). Additionally, while some participants disclosed details about the violence they experienced, the nature and severity of IPV history was not explicitly assessed in this study. This reduces the ability to draw conclusions about how these IPV-related characteristics could affect parenting.

Considering the broad nature of the current study’s research scope, the author kept interview questions generally open-ended. Consequently, delineation of parental functioning between concurrent IPV and post-IPV is not always clear. When possible, the author asked clarifying questions for further context and the temporal location of participant reports. However, since this study does not systematically query “pre-
post” functioning within parenting domains, comparisons between these two time points are limited. Furthermore, while the aim of the current study was to capture the perspectives of Latina immigrant mothers, gathering data about the perceived effects of IPV on mothering from the perspective of children and adolescents may have strengthened its findings. An additional limitation is related to social desirability, which tends to emerge more frequently when research topics are perceived as sensitive or controversial (Grimm, 2010 as cited in Bergen & Labonté, 2020). Issues such as the use of corporal punishment and experiences with IPV may have constituted delicate issues for participants to discuss and resulted in positively biased responses. Therefore, caution should be used when interpreting the current findings.

Additionally, given ethical considerations of confidentiality and safety when conducting research on violence against women (WHO, 2001), participants were not contacted after the interview. This precluded opportunities for follow-up interviews or member checks to further clarify or verify analytic findings.

**Implications and Considerations**

Despite these limitations, the current study adds to the small body of literature that explicates how experiencing and surviving IPV impacts parenting among Latina immigrants in the US. While there were many similarities across studies using multiethnic (often majority White women) samples, there were some nuances that distinguish Latina immigrant mothers. For example, Latina immigrants parent in a context of heightened stress. This is due to their legal status in the US and cultural tensions between mothers and their children that carry negative implications for parenting. As a result, these contextual factors may add to or intensify the effects of IPV. Cultural expectations within Latinx culture also appeared to play both a facilitative and detrimental role for women mothering in the context of IPV.
Therefore, this study helps illustrate how IPV intersects with various forms of marginalization and oppression among immigrant women of color.

The present study also examined two areas neglected in previous research among Latinas and parenting in the context of IPV. First, this study helped elucidate how mothers experience and manage a co-parenting relationship after exiting an abusive relationship. Second, it explored mothers’ communication with children about IPV. The findings offer providers and agencies who work with IPV-affected Latina immigrant mothers and their families perspective on potential areas to assess and provide specific interventions. The following considerations are offered for clinical practice and future investigations of this topic.

**Future Research**

Future studies examining the effects of IPV on mothers and parenting may expand upon the current study by gathering data about the experiences and perceptions of Latinx children exposed to IPV, but specifically how they see their mothers’ parenting. This would offer a more thorough understanding of how mothers’ parenting is impacted and highlight areas of parenting that children themselves find important, so as to strengthen the parent-child relationship. Second, a notable finding in this study — one that is not well-represented in the literature — is communication about IPV in the post-separation period. Participants made conscious decisions about how and what they discussed with their children. Subsequent research may help clarify these judgement processes with particular attention to Latinx cultural beliefs about the effects of talking about trauma with their children. It would be important to examine the relationship between these beliefs and acculturation profiles as well as other demographic considerations (e.g., mother’s age, country of origin). Third, this study observed the reciprocal nature of children’s behavior and parenting. However,
researchers have largely ignored the effects of children’s maladaptive adjustment, including expressions of aggression and hostility towards mothers in the context of IPV. Future investigations examining parenting outcomes following IPV could enhance current understandings by including children’s adjustment difficulties or externalizing behaviors as potential moderators. Lastly, the current findings suggest that the intersecting stress from acculturation and parenting under the context of IPV may compound mothers’ reduced sense of parental competence. To this author’s knowledge, this has never been tested quantitatively. Thus, doing so may advance the field’s understanding of this specific risk for Latina immigrants and how it relates to parenting outcomes for this population.

Clinical Practice

As observed in previous studies on the effects of IPV on mothers, Latina immigrants experience reduced self-esteem and perceived parenting competence. Addressing shame and self-doubt in individual therapy or parenting intervention programs is warranted for Latina immigrant mothers seeking support. These interventions should be culturally responsive. Particular attention to the role of marianismo in either exacerbating or aiding psychological well-being is suggested. A prominent issue that emerged from the current study was Latina immigrant mothers’ distress around children’s externalizing issues. Therefore, this may be a salient issue to address for Latina immigrants and may be prioritized in family services. Attending to areas of tension between mother and child as a result of acculturation discrepancies could offer additional avenues for intervention to improve family cohesion following IPV.

Furthermore, agencies that serve children exposed to which aim to increase awareness and prevention should consider how their IPV programming (e.g., violence
prevention programs) may impact children’s beliefs or attitudes towards their parents’ discipline approaches. Addressing potential conflict between mothers and children related to discipline may promote communication and compromise within the family. Additionally, findings from the present study revealed that mothers may be motivated to make adjustments in their disciplinary practices that excludes physical punishment towards children. Therefore, providers should provide education on effective, alternative methods of discipline and support mothers implementation of these behavioral changes. This area of concern may also function as an effective buy-in for mothers to engage in counseling or attend support groups for their own emotional health.

Mothers who co-parent with former abusive partners may face ongoing attempts by the children’s father to undermine their parenting or relationship with their child. Social workers and mental health service providers working with co-parenting Latina immigrants should assess for these issues and assist mothers in maintaining a close, loving relationship with children and show them how to approach conversations about misinformation (Baker & Darnall, 2006).

Finally, the current study revealed significant communication issues between parents and children due to language barriers. To help address this issue, domestic violence service agencies could offer Latina immigrant mothers free English classes onsite. This important service should account for common barriers reported by mothers, including access to childcare and having accessible hours. Family therapy, parenting programs, or behavioral therapy programs for children should have bicultural and bilingual clinicians available. Interventions may also be adapted or tailored for parents and children who do not adequately share the same language. For
example, families could benefit from engaging in more non-verbal activities (e.g., play, art, etc.) to promote bonding or process difficult issues related to IPV.
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Appendix A
Screening Form

Instructions: Thank you for your interest in this research study. I am interested in learning about how experiencing intimate partner violence might affect parenting among immigrant Latina women. Intimate partner violence (IPV) involves violence or aggression between people who are married, dating, or have a sexual relationship. The violence or aggression can take many forms. For example, it can be physical such as hitting, slapping, and pushing someone or sexual like forcing another person to have sex. It can also be mental such as controlling what someone can or cannot do or making someone feel unsafe by yelling at them or threatening to hurt them. To determine if you are eligible to participate in this study, please respond to the following statements by circling the yes or no as they accurately apply to you. You will be informed immediately after you complete this form about your eligibility.

1. I am Latina/Hispanic
   Yes No

2. I was born outside of the United States
   Yes No

3. I have experienced intimate partner violence in my lifetime
   Yes No

4. I was the biological, step- or adoptive mother of a child under 18 years of age during the time I experienced intimate partner violence
   Yes No

5. I raised my children during a period of time that I was experiencing intimate partner violence
   Yes No

6. At this time, I am experiencing intimate partner violence
   Yes No

*If you are no longer experiencing intimate partner violence, how much time has passed since your current or former boyfriend/husband/dating partner was violent with you?
______________________________________________________________________
Appendix B
Demographic Form

Code Number: ______________________ (For researcher)

Instructions: In order to understand basic information about people who participate in this study, please complete the following questions below. This information will be kept confidential. To protect your identity, please do not include your name on this form. If you are uncomfortable with answering any particular question, you may leave it unanswered.

1. What is your age? ______________________
2. What is your current relationship status? (e.g., single never married, married, divorced) ______________________
3. What is the highest level of education you completed? ______________________
4. What is your country of origin? ______________________
5. How long have you been living in the United States? ______________________
6. Are you authorized to work in the United States? (Optional) ______________________
7. Are you currently employed outside of the home? ______________________
   If yes, what is your current occupation? ______________________
8. Please indicate which below reflects your annual household income:
   ___ Less than $20,000
   ___ Between $20,000 and $50,000
   ___ Between $50,000 and $70,000
   ___ Between $70,000 and $90,000
   ___ Greater than $90,000
9. How many children do you have? ______________________
10. How old are each of your children? ______________________
11. Are you currently in a relationship with a partner who was previously violent with you while parenting your children?
    a. If yes, please indicate how long you have been in this relationship. ______________________
    b. If no, how long did your previously violent relationship last? ______________________
12. How long has it been since you experienced violence in a relationship with your co-parent? ______________________

Appendix C
Thank you for being a part of this study. I want to learn how going through domestic violence affects parenting among immigrant Latinas. Domestic violence is violence or aggression between two people who are married, dating, or have a sexual relationship. The violence or aggression can take many forms. For example, it can be physical such as hitting, slapping, and pushing someone or sexual like forcing another person to have sex. It can also be mental such as controlling what someone can or cannot do or making someone feel unsafe by yelling at them or threatening to hurt them. I will ask you to tell me how these experiences have affected your behaviors and thoughts around parenting. If you have a history of domestic violence with more than one romantic partner, you may want to respond to the questions by thinking about your experiences as a whole. However, please feel free to give examples or details of your experiences that stand out. Lastly, sometimes talking about sensitive topics, such as domestic violence, can be difficult. If at any point during the interview you feel too upset and think you cannot continue the interview please let me know. We can talk about ending the interview early if that is best. You can stop participating in the study at any point.

1. How do you think the Latino culture influences parenting beliefs and practices?
   
   Prompt: In general, what expectations exist for mothers within the Latino culture?

2. How does being a Latina immigrant in the US affect the way you bring up your children?

   Prompts:
   
   Are there ways you bring up your children that are different from Latina mothers born in the US?
   
   What challenges do you face that non-immigrant mothers might not face? (e.g., language barriers, getting used to a new way of life, being far from family of origin, etc.)
   
   How does the U.S.’s current attitude and laws around immigration affect you as a Latina immigrant parent and your family? (e.g., sense of belonging, trust in local authorities, feelings of safety or security for you and your children, etc.)

Now I am going to ask you how your experience of domestic violence has affected your parenting.

3. Tell me how domestic violence may have affected how you raise your children.

4. I want to talk about how domestic violence may have influenced certain practices or methods you used or are using now to raise your children. So, in what way do you believe domestic violence has affected you:
   
   …How you monitor your children?
…discipline your child(ren)? (For example, how you handle their behavior or how they know what is acceptable or unacceptable behavior)

…any values or beliefs that you try to instill or teach your children?

5. Next, I am going to ask you to describe your beliefs around parenting and how you see yourself as being different or changed as a result of domestic violence.

Prompts:

How would you describe yourself as a mother now, after experiencing domestic violence?

What hopes do you have for yourself as a mother and your children now?

I would like to ask how domestic violence has affected your confidence as a mother. Note that your level of confidence may be different across all the things you do as a mother, such as providing basic care, giving emotional support, to teaching your child(ren) different skills, etc.) How has domestic violence affected your confidence in your ability to raise your child(ren)?

What are the ways that mothers help their children when domestic violence has occurred in the home?

Next, I would like to ask what parenting is like for you when you share children with a partner who has been abusive towards you. If you do not or never shared children with that partner(s) or no longer have contact with that partner(s) we can move onto question number 7.

6. What has it been like to co-parent with your (current/former) partner who was abusive towards you?

Prompts:

Tell me how you have worked with your (current/former) partner to raise your child(ren).

How have you handled disagreements about parenting?

What have you learned about co-parenting with someone who has been abusive towards you?

7. Do you have any advice for other Latina immigrant mothers who go through domestic violence?

8. What services and resources do you wish Latina immigrant mothers who go through domestic violence could have in the community?

9. Is there anything else I have not asked you about parenting and domestic violence that you would like to share?
Debriefing Process

As we finish up our conversation about this topic, I would like to give you an opportunity to ask any questions or share concerns you might have related to this study. What questions or concerns do you have at this time?

As I mentioned before, domestic violence can be a sensitive topic for some people and talking about it can bring up discomfort or distress. I am wondering how you are feeling emotionally after having done this interview. *Follow distress protocol if deemed necessary/appropriate.*

If as a result of your participation in this study you would like to get mental health support, I will be providing a list of local Spanish-speaking and bilingual counseling referrals.

Thank you for your participation in this study.