

2015

“Dominicana de Pura Sepa”: A Comparison of Dominican Women Across Cultures

Rosalyn Maldonado Rosado
rmaldon2@emich.edu

Follow this and additional works at: <https://commons.emich.edu/mcnair>

Recommended Citation

Maldonado Rosado, Rosaly (2015) “Dominicana de Pura Sepa”: A Comparison of Dominican Women Across Cultures,” *McNair Scholars Research Journal*: Vol. 8 , Article 8.
Available at: <https://commons.emich.edu/mcnair/vol8/iss1/8>

This Article is brought to you for free and open access by the McNair Scholars Program at DigitalCommons@EMU. It has been accepted for inclusion in McNair Scholars Research Journal by an authorized editor of DigitalCommons@EMU. For more information, please contact lib-ir@emich.edu.

“DOMINICANA DE PURA SEPA”:
A COMPARISON OF DOMINICAN
WOMEN ACROSS CULTURES

Rosalyn Maldonado Rosado
Dr. Yvette Colon, Mentor

ABSTRACT

Latinos are one of the prevalent immigrant populations in the United States, and the number of immigrants from the Dominican Republic grows every year. Dominican women are faced with the process of acculturation, and as a result their traditional values and beliefs can be both challenged and changed. The purpose of this research is to compare Dominican women who reside in the United States (U.S.) to Dominican women who reside in the Dominican Republic. We will examine their relationships with men, with a focus on their (1) sexual practices, (2) independence, and (3) sexual health. We anticipate finding marked differences in both the values and practices, as conditioned by the process of acculturation, between the two groups.

INTRODUCTION

According to Hernández (2004), emigration from the Dominican Republic to the United States increased dramatically in 1962, after the death of former Dominican dictator Rafael Trujillo. The new President, Joaquin Balaguer, implemented initiatives that motivated large numbers of Dominicans to seek new lives in the United States. Hernández (2004) shows that the number of emigrants kept increasing every year, and in both 1991 and 1992, more than 40,000 Dominicans were admitted to the U.S. annually. Nwosu and Batalova (2012) state that by the end of the decade more than 960,000 immigrants from the Dominican Republic were residing in the U.S., constituting 2% of the total U.S. foreign-born

population of 40.8 million. Between 1970 and 2012, about 56% of all Dominican immigrants residing in the U.S. were female; women have dominated Dominican immigration. Much research has been conducted to examine the lives of Dominicans residing in the U.S., but little has specifically focused on the lives of Dominican women. Hernández (2004) notes that Dominican immigrants tend to immigrate to large urban areas; thus this research will focus on Dominican women who reside in either New York City or in Santo Domingo, the capital of the Dominican Republic.

LITERATURE REVIEW

Motel and Patten (2012) write that Dominicans constitute the fifth largest ethnic population in the U.S., accounting for 3% of the total population. Dominicans are less likely than other Hispanics to be married. Fifty-four (54%) percent of Dominican women between 15 and 44 years of age who gave birth in the 12 months prior to the survey were unmarried. This was higher than the rate for all Hispanic women, which was 42%; the overall rate for U.S. women is 36%. As of 2012, twenty-two percent (22%) of Dominican women did not have health insurance, compared to 31% of all Hispanics and 16% of the general U.S. population. Because Dominicans are the fifth largest Latino population, this research will serve social work professionals to better understand the Latino population and the effects of acculturation on women's relationships with men, including their sexual practices, attitudes about their personal independence, and their sexual health.

Dawson (2008) reports that the Dominican population is 54.7% female. Dawson and Panchanadeswaran (2010) write, "It is plausible that experiences of discrimination may exacerbate acculturative stress among Latina/o immigrants, negatively affecting their acclimation to the United States" (p. 217); immigrant Latino populations are affected by different acculturative stressors, such as learning a new language and being exposed to culturally different people.

Dawson and Panchanadeswaran (2010) recruited 283 participants from four school-based community programs and measured different variables such as reports of discrimination,

daily racial hassles, and major racist events. Other covariates were their acculturation, transnationalism and demographic variables. Eighty-five percent (85%) of the participants were female, between 18 and 49 years of age; most of them had lived in the U.S. for 20 years or less and were of low socio-economic status (SES). Dawson and Panchanadeswaran (2010) found that discrimination was responsible for 35% of the variance in acculturative stress experienced by the participants. The study had some limitations regarding causation of the cultural stress reported by the participants in the study, but it concluded that acculturation could produce stress in the Latino population.

Rudmin (2003) questions the common assumption that a person can appreciate, practice, or identify with two different cultures independently of one another. Each culture can have a positive or negative valence, representing a person’s positive and negative attitudes, preferences, attachment, identification, and other inferred psychological states, or representing the presence or absence of cultural behaviors, language use, ethnic names, dress, foods, and other observable manifestations of culture. In maintaining a focus specifically on the Dominican population, Manjon (2005) concluded that immigrants strive to fit into American culture, and that this process is easier for third-generation Dominicans, whose parents were born in the U.S.

Breitbart, Morales, Brown, Betances, and Kahalnik (2010) conducted focus groups with Dominican women residing in New York and the Dominican Republic, focusing on different experiences regarding (1) health information, (2) relationships with men, (3) gender violence, (4) sexuality, (5) contraceptives, and (6) pregnancy. They also found that women in the Dominican Republic tended to get health information from other Dominicans who resided in the Dominican Republic. Women in New York, however, got their health information from TV, magazines, and the Internet. It was found that Dominican women who resided in the Dominican Republic sent medications that were difficult to obtain in New York to their Dominican family and friends in the United States.

Breitbart et al. (2010) report that Dominican women in New York felt they had more job opportunities, so they were more

financially independent. Women in the Dominican Republic, by contrast, felt more dependent on men regarding money and also had relationships with numerous men because of the dependency they felt on male partners. Women in both locations reported more incidents of Intimate Partner Violence (IPV) from men in the Dominican Republic, because in the U.S. there are more options to report IPV, and women benefit from police response.

According to Breitbart et al. (2010), most Dominican women in New York were willing to use birth control pills and to have abortions because they were legally accessible, while in the Dominican Republic, women reported that they were not comfortable using the birth control pill; they preferred condoms. This research provides valuable information on lifestyle discrepancies between Dominican women residing in New York and in Santo Domingo.

The Centers for Disease Control (CDC) report that at the end of 2011, “23% of all people living with HIV in the United States were women. Black/African American and Hispanic/Latina women continue to be disproportionately affected by HIV, compared with women of other races/ethnicities” (Centers for Disease Control and Prevention, 2013). These statistics show that Latinas are at higher risk of being infected with HIV than other races. Awareness of these data is of critical importance for social work professionals and other practitioners, whose response may play a vital role in addressing the threat to these communities.

Salabarria, Lee, Montgomery, et al. (2002) assert that Latino women tend to have different views about the use of condoms, depending on how acculturated they are; the more acculturated they are to American values, the more open they are to the use of condoms. Equally, the more traditional their beliefs, the more negative their views about condom use. This study recruited a total of 175 women between the ages of 18-50, who had lived in the U.S. from 1 - 20 years. The method used to obtain the results was an open interview, including different questions regarding the use, advantages, and disadvantages of condoms; the interview also included semantic scales with bipolar adjective pairs, and a Likert scale. Eighty percent (80%) of the participants were either married or had been cohabitating with their partner from 1-10 years. Ninety-

four percent (94%) reported having sex with only one partner in the previous six months. Fifty-six percent (56%) of participants reported it unlikely that their partners were being faithful. Eighty-six percent (86%) reported the use of a birth control method or sterilization. More than half of the participants were unfamiliar with the use of male and female condoms. Only 8.6% of the women reported using male condoms with their partners.

Women’s knowledge about the accessibility of condoms was higher for male condoms than for female condoms, with $t(174) = 4.96, p = .004$; being aggressive about the use of condoms was less likely when dealing with male condoms ($M = 3.34, SD = 2.31$) than with female condoms ($M = 4.58, SD = 2.02$). The researchers recommended that information about condoms should be emphasized when implementing educational programs about sexuality and protection (Salabrina et al., 2002).

Galanti (2003) conducted research on male-female relationships among a Latino population, in which he described the partner relationship as the male being dominant, and the female submissive to male requests. The two structures he characterizes as the male role are *patriarchal authority* and *machismo*. *Machismo* can have both negative and positive connotations; it can mean that a man will provide for his household, while being a heavy drinker. Because this might be socially acceptable, it may increase the risk of IVP in the male-female relationship. Galanti (2003) states that the relationship between men and women differentiated, depending on their age, educational level, time spent in the U.S., and other characteristics. Men place a high value on being able to provide for and protect their family but also need to prove their masculinity. The need to demonstrate their masculinity may result in a high level of alcohol intake, which may lead to violence in the home.

Galanti (2003) defined *patriarchal authority* as the belief that men are dominant and should be head of the household. Although women may make decisions in the home, they must consult their husband about every decision made, even medical decisions about their own health. Women must be submissive to their husbands; they do not have the right to disagree. Women must

at all times be tolerant of the man's behavior. These beliefs have a strong correlation with decisions made about sexual practices and with the high incidence of IPV in the Latino community. Ceballos (2003) asserts that a man can use *machismo* to maintain his position as head of the household, adding that, "Understanding male perceptions of machismo can potentially enhance a social worker's ability to empower clients, in working with individuals to help them view machismo in a positive manner and to avoid abuse among partners, relatives or professional relationships" (p. 33).

Hazen and Soriano (2007) conducted research focused on estimating IPV in the Latino population; IPV was measured by examining different rates of physical, sexual, and psychological abuse. Participants were female, between the ages of 18 and 45, with a Latino ethnic background, English or Spanish as a primary language, and in a relationship with an intimate partner. Interviews were completed with a total of 292 participants (Hazen & Soriano, 2007). Intimate partner violence (IPV) was measured as (1) reports of psychological aggression, (2) physical assault, and (3) sexual coercion, using the Revised Tactics Scale; each category had a range of 0-6 (0 = *never*, to 6 = *more than 20 times*). The Psychological Maltreatment of Women Inventory Short Form (PMWI-SF) was used to obtain data on instances of IPV. The PMWI-SF consists of 14 questions about the frequency a woman experiences psychological abuse. Participants also used the Alcohol Use Disorders Identification Test (AUDIT) to report their partner's alcohol intake, by providing information regarding the consistency and times of alcohol use, major life problems caused by alcohol use, and their partner's symptoms of alcohol dependency.

The 295 participants (Hazen & Soriano, 2007) were Latinas, with 93.1% self-identifying as Mexican or Mexican American. Their mean age was 27.85 years; 54.8% had less than a high school diploma or equivalent, and 30% were employed fulltime. Nearly thirty-four percent (33.9%) of the entire group reported being physically assaulted by their partners at some point in their life; 32.9% reported at least one incident of less severe assault. Of the U.S.-born group, 48.4% of the women reported incidents of IPV, and 47.6% of the women reported experiences of less severe physical assault over the course of their lifetimes. By contrast,

22.2% of the immigrant women reported having experienced at least one physical assault. Hazen and Soriano (2007) also examined the correlation between physical abuse and substance use by the participant's partners; 32% of the women who experienced physical abuse in the previous year also reported having a partner with substance use problems. Correspondingly, 31.7% of women who faced psychological abuse reported partner substance abuse.

Shedlin and Shulman (2004) conducted qualitative research on attitudes and awareness of HIV/AIDS in Dominican, Mexican, and Central American immigrant populations. Focus groups were used to “identify the range of experiences, attitudes and beliefs relating to HIV services by men and women of different ages from different countries, and with different experiences relating to the HIV epidemic in their countries of origin and in the U.S.” (p. 436). A total of 57 individuals from five countries participated in this research, including 27 men and 30 women representing an age range of 19-61. Videotapes, notes, and transcripts were used for the data analysis. Participants' knowledge about HIV/AIDS varied, depending on country of origin, length of time in the U.S., and involvement in care services. The stigma held by participants was different; they associated HIV/AIDS with immorality, death, and with prostitutes and homosexuals.

Shelman and Shudman (2004) report that those participants at risk for HIV/AIDS believed they had been infected by their spouse in the U.S. or in their home countries. The participants appeared to have general information about HIV/AIDS, but not about their own bodies and how HIV affects the body. It was noted that information in Spanish and English was available to participants, but that women were more eager than men to obtain information. Of all Latino populations, Dominicans were shown to be the most knowledgeable about information and resources regarding HIV/AIDS.

Shedlin and Shulman (2004) identified some of the obstacles preventing the participants' awareness of HIV/AIDS as problems associated with acculturation, *machismo*, lack of English language skills, an inability to communicate with health care providers, fear of deportation, lack of money, and lack of immigration documentation. The participants also had erroneous

beliefs about undocumented people being deported for seeking health care; this explained why many Latinos might avoid seeking health services.

Edwards, Fehring, Jarrett and Hugland (2008) conducted a study in which they measured the effects of religiosity, gender, and language preference acculturation on sexual activity, with 570 Latino/a adolescent respondents. Similar to Schuster (2003), they found that the men were more sexually active than the women. Researchers have said that this could be due to the traditional roles of males in the Latino population and the influence of *marianismo*, which represents the ideology that women are morally and spiritually superior to men, as well as prevalence of *machismo*. Subjects in their early 20s were selected as a nationally representative sample.

Data for this research were collected in confidential interviews lasting from 60-90 minutes (Edwards et al., 2008). Five hundred and seventy (570) respondents, who self-identified as Latino, were selected for this study. Two hundred and eighty-three (283) respondents were between the ages of 15 and 22, with the mean age of 17.7. Sixty-eight percent (68%) of the participants identified themselves as Roman Catholic, 21.6% identified as Protestant Christians, and 12.5% claimed to have no religion.

In Edward et al.'s (2007) study, the independent variable of religious activities was influenced by factors such as the importance of religion, the frequency of attendance at religious services, and a combination of four variables that reflected traditional attitudes on human sexuality: (1) Sexual acts between two consenting adults is okay; (2) it is acceptable for unmarried 16-year-olds to have sex if there is strong affection; (3) it is acceptable for unmarried 18-year-olds to have sex if there is strong affection, and (4) it is acceptable for an unmarried woman to have a child. The variable of language preference was measured by which language the participants chose for the interview. Although this would not determine a direct correlation with acculturation, language use at home was measured as well.

The researchers found that 23.4% viewed religion as *very important* and were less likely to have had sex than those

adolescents who viewed religion as *not important*. Those who viewed religion as *very important* also had fewer lifetime sexual partners than those who viewed religion as *not important*. The number of virgins at the age of 21 was 19.8%, compared to the 4.6% who did not see religion as important. Of adolescents who attended church services at least once a week, 39.5% were less likely to have had sex and reported significantly fewer lifetime sexual partners.

Edward et al. (2007) also reported that Latinas were less likely to engage in sex than Latinos, and women had also had fewer sexual partners in the previous 12 months. With regard to language, there was no difference shown between English and Spanish speakers in the number of those who had sex. Nonetheless, the non-assimilated adolescents had significantly fewer lifetime sexual partners and fewer sexual partners overall during the previous 12 months.

This research concluded that religiosity, gender, and language preference had a correlation with engaging in sexual activities and the participants' number of sexual partners (Edwards et al., 2007). The study offered little explanation of the different ways that acculturation occurs beyond language; this is why acculturation and its effects on sexuality should be researched more extensively.

Afable-Munsuz and Brindis (2006) conducted research measuring acculturation, sexual reproductive health, and the correlation between these two variables. The researchers looked for abstracts in different databases with keywords; each abstract was analyzed to determine the eligibility of each abstract. Seventeen studies were selected out of all the studies previously reviewed. The researchers found that all the studies but one explained how acculturation influences sexual and reproductive health. Acculturation can be viewed as losing or keeping certain values, or norms, set by the traditional culture.

All of the studies considered by Afable-Munsuz and Brindis measured four variables regarding acculturation: (1) time in the host country, (2) language proficiencies, (3) cultural norms, and (4) place of residency. Of the studies, 13 focused on sexual

activity, and all found a relationship between acculturation and sexual activity; the greater the acculturation, the more sexual risk-taking the youth engaged in (2006). The researchers recommended further research regarding acculturation, time in the host country, beliefs and norms about birth control and fertility desires, and norms and beliefs that have to do with gender expectations, family formation, and gender roles. The researchers believe that this type of research will help shape policies that will benefit the Latino population (Afable-Munsuz & Brindis, 2006).

CONCLUSION

This literature review discusses research that examines some of the correlations that acculturation and relationships between Latino men and women have with sexual practices, sexual health, and personal independence. More research should be conducted to strengthen our understanding of the direct connections between those factors. This research can inform social work professionals, and other support practitioners, about the struggles that Latino women in the United States face regarding their sexual practices, sexual health, personal independence, and acculturation. It can also provide a better understanding of our relationships with such clients and will be vitally important in policymaking.

REFERENCES

- Afable-Munsuz, A., & Brindis, C. (2006). Acculturation and the sexual and reproductive health of Latino youth in the United States: A literature review. *Perspectives on Sexual and Reproductive Health*, 38(4), 208-219.
- Breitbart, V., Morales, H., Brown, J., Betances, B., & Kahalnik, F. (2010). Con un pie en dos islas: Cultural bridges that inform sexual and reproductive health in the Dominican Republic and New York. *Culture, Health & Sexuality: An International Journal for Research, Intervention and Care*, 12(5), 543-554.
- Ceballos, M. (2003). Machismo: A culturally constructive concept. Retrieved February 10, 2015, from <http://scholarworks.calstate.edu/bitstream/handle/10211.3/105401/MiriamCEBALLOSpdfA.pdf?sequence=1>.
- Centers for Disease Control and Prevention (2015, March). *HIV among women*. Retrieved March 10, 2015, from http://www.cdc.gov/hiv/pdf/risk_women.pdf.
- Dawson, B. (2008). Discrimination, stress, and acculturation among Dominican immigrant women. *Hispanic Journal of Behavioral Sciences*, 31(96), 96-111.
- Dawson, B., & Panchanadeswaran, S. (2010). Discrimination and acculturative stress among first-generation Dominicans. *Hispanic Journal of Behavioral Sciences*, 32(2), 216-231.

*“Dominicana de Pura Sepa”: A Comparison of
Dominican Women Across Cultures*

- Edwards, L., Fehring, R., Jarrett, K., & Haglund, K. (2008). The influence of religiosity, gender, and language preference acculturation on sexual activity among Latino/a adolescents. *Hispanic Journal of Behavioral Sciences, 30*(4), 447-462.
- Galanti, G. (2003). The Hispanic family and male-female relationships: An overview. *Journal of Transcultural Nursing, 14*(3), 180-185.
- Hazen, A., & Soriano, F. (2007). Experiences with intimate partner violence among Latina women. *Violence Against Women, 13*(6), 562-582.
- Hernández, R. (2004). *On the age against the poor. Journal of Immigrant & Refugee Services, 2*(1-2), 87-107.
- Manjon, S. (2005). The experience of immigration and acculturation of four generations of Dominican women in California. 1-99.
- Motel, S., & Patten, E. (2012). *Hispanics of Dominican origin in the United States, 2010*. Retrieved November 17, 2014 from <http://www.pewhispanic.org/2012/06/27/hispanics-of-dominican-origin-in-the-united-states-2010/>.
- Nwosu, C., & Batalova, J. (2012). *Immigrants from the Dominican Republic in the United States*. Retrieved December 22, 2014, from <http://ftp.migrationinformation.org/article/foreign-born-dominican-republic-united-states>.
- Rudmin, F. (2003). Critical history of the acculturation psychology of assimilation, separation, integration, and marginalization. *Review of General Psychology, 7*(1), 3-37.
- Salabarría, Y., Lee, J., Montgomery, S., Hopp, H., & Muralles, A. (2002). Determinants of female and male condom use among immigrant women of Central American descent, *7*(2), 163-174.
- Shedlin, M.G., & Shulman, L. (2004). Qualitative needs assessment of HIV services among Dominican, Mexican and Central American immigrant populations living in the New York City area. *AIDS Care, 16*(4), 434-445.