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A Qualitative Exploration of the Nature of Domestic Violence in Pregnancy

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This article presents a small, qualitative study of 16 women who had experienced domestic violence in the previous 12 months. The violence was perpetrated by a current or former partner in all but one case. Ten of the 16 women had experienced domestic violence during their recent pregnancy, of whom four women had also been assaulted in at least one previous pregnancy. Three women had been assaulted by their partners in a previous pregnancy but not during their recent pregnancy, and three had experienced domestic violence outside of pregnancy only. Some women reported increased feelings of insecurity, jealousy, and possessiveness in their partner during their pregnancy. Abuse within the relationship centered around the arrival and care of the new baby: financial worries, the woman's lessening physical and emotional availability during pregnancy, the lack of practical and emotional support from the male partner, and doubts about paternity.

Keywords: *impacts of abuse; midwives; violence in pregnancy*

A number of non-U.K. studies have estimated that between 5.2% (Torres & Han, 2000) and 33.7% (Huth-Bocks, Levendosky, & Bogat, 2002) of pregnant women experience partner abuse. U.K. prevalence studies of domestic violence in pregnancy are lacking, although three studies have reported prevalence rates between 2.5% and 5.8% (Bacchus, Mezey, & Bewley, 2004; Bacchus, Mezey, Bewley, & Haworth, 2004; Johnson, Haider, Ellis, Hay, & Lindow, 2003). It has been suggested that domestic violence may commence during pregnancy, although in some cases it represents a continuation of violence that preceded the pregnancy, and is likely to continue following the baby's birth (Campbell, Oliver, & Bullock, 1993). There is a paucity of research

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exploring women's experiences of partner abuse during pregnancy. In a recent study, Jaskinski (2004) concludes that although much of the research indicates that pregnancy may be a time of increased risk for violence (Berenson, Stiglich, Wilkinson, & Anderson, 1991; Webster, Chandler, & Battistutta, 1996), the reliance on anecdotal reports from pregnant women or hospital-based samples does not make it possible to empirically test whether pregnancy per se increases the risk for violence.

An early paper by Gelles (1975) suggested five explanations for domestic violence during pregnancy: male sexual frustration, hormone-induced mood swings in the woman, the stress of imminent parenthood, the woman's increased physical vulnerability and helplessness, and a conscious or subconscious desire to terminate the pregnancy. However, this work has been criticized for its victim-blaming approach and for minimizing the male partner's responsibility for the violence (Campbell et al., 1993). Later research indicates that domestic violence may be the result of increasing jealousy and resentment toward the unborn child (Campbell et al., 1993; Mezey, 1997).

Women who are in abusive relationships struggle to retain control over their sexual and reproductive health and experience difficulties in accessing health care during pregnancy. In many abusive relationships, sexual access is obtained through threats and the use of physical force. The woman's ability to practice family planning may be controlled by her abusive partner (Campbell, Pugh, Campbell, & Visscher, 1995), resulting in an unwanted or unplanned pregnancy. Several studies have found an association between domestic violence and unwanted or unplanned pregnancy (Campbell et al., 1995; Cokkinides & Coker, 1998; Hillard, 1985; Leung, Leung, Lam, & Ho, 1999). Abused women may be prevented from seeking medical care by their abusive partners, which may result in delayed care or missed appointments (Dietz et al., 1997; Gazmarian et al., 1995; McFarlane, Parker, Soeken, & Bullock, 1992; Purwar, Jeyaseelan, Varhadpande, Motghare, & Pimplakute, 1999; Taggart & Mattson, 1996).

Although a relationship between domestic violence and termination of pregnancy has been found in some studies, it is difficult to establish domestic violence as the antecedent factor (Coggins & Bullock, 2003; Evins & Chescheir, 1996; Hedin-Widding & Janson, 2000; Webster et al., 1996). In a study by Glander, Moore, Michielutte, and Parsons (1998), women cited a "problematic relationship" as the primary reason for choosing a termination. Women were less likely than nonabused women to inform their partner of their decision to have a termination and also reported receiving little partner support for the termination. Excluding the partner from the decision to terminate may represent an attempt by abused women to assert control in their relationship (Dattel & Chez, 1996). Within the context of an abusive relationship, the decision to terminate a pregnancy may have negative consequences in terms of provoking suspicions as to the paternity of the child and feelings of jealousy, leading to further violence.

This research set out to explore the nature of any association between domestic violence and pregnancy by seeking the views of women who have experienced domestic violence.

Method

Background to the Study

This study was one of 20 national projects funded by the Economic and Social Research Council under its Violence Research Program (VRP) discussed throughout this issue. The overall aims of the study were (a) to examine the prevalence and nature of domestic violence during pregnancy and the postpartum period; (b) to assess whether women were more likely to discuss domestic violence with their midwives if they were asked specific questions about abuse as part of routine care; (c) to explore any association between experiences of domestic violence and maternal and fetal health; and (d) to evaluate the practice of routine inquiry for domestic violence from the perspective of users and providers of maternity care. Between September 1998 and January 1999, 892 women initiating maternity care at a teaching hospital in southeast London were asked about domestic violence by trained midwives on three occasions: at the first appointment (booking), at 34 weeks, and postpartum (within 10 days). Eighty percent of midwives in the maternity service received training on domestic violence awareness and good practice in relation to responding to women affected by domestic violence.

The study found the prevalence of domestic violence in pregnancy to be between 1.8% and 5.8%, with more women reporting violence during the latter part of the pregnancy (Bacchus, Mezey, Bewley, & Haworth, 2004). The practice of routine inquiry for domestic violence by trained midwives appeared to increase women's willingness to talk about violence and the effects of the training and raised awareness within the maternity service, increasing midwives' confidence in supporting abused women (Mezey, Bacchus, Haworth, & Bewley, 2004). Many women welcomed the opportunity to talk about domestic violence, and even those who did not want to make immediate changes to their situation found it helpful to have someone to confide in and to learn about sources of help in the community (Bacchus, Mezey, & Bewley, 2002). However, the midwives faced a number of challenges in their efforts to engage in the training and provide assistance to women experiencing domestic violence, including time constraints, safety issues, difficulties in obtaining time alone with women, staff shortages, and midwives' personal experiences of domestic violence (Mezey et al., 2004). Although many of these problems are not insurmountable, a number of supportive strategies, resources, organizational policies, and guidelines need to be in place to enable health care providers to address domestic violence effectively and safely.

Aim of the Current Study

The aim of this study was to qualitatively examine women's experiences of domestic violence during pregnancy, associated with the larger project outlined above. Full details of the methodology are described elsewhere (Bacchus et al., 2002). Ethical approval was obtained from St. Thomas's Hospital Research Ethics Committee.

During the postpartum period (up to 14 months), purposive sampling was used to select women who had participated in the domestic violence screening study for an in-depth, semistructured interview. Purposive sampling was used to enable the researchers to choose the most appropriate women to be interviewed to answer the research questions (Dixon, Bouma, & Atkinson, 1987). Women were contacted by telephone or letter and invited to participate in a survey of women's views of their care during pregnancy. Women who responded to the invitation were then provided with a full explanation of the study. Women gave verbal consent after reading through an information sheet.

The sample consisted of 16 women, 10 of whom had experienced domestic violence in the past 12 months (including the current pregnancy) and 6 who had experienced domestic violence in the past 12 months but not the current pregnancy. In-depth interviews were conducted by one of the authors (L. B.) at a venue selected by the woman (e.g., general practitioner's surgeries, health centers, at home) and lasted between 2 and 3 hours. Every effort was made to ensure safety and confidentiality when arranging and conducting interviews. Interviews were tape-recorded and transcribed, or written down if the woman preferred. All women received a £10 gift voucher in recognition of their time.

Women were asked to describe their experiences of violence before pregnancy, during the current and any previous pregnancy, and during the postpartum period. Specific emphasis was placed on exploring women's understanding of the triggers to violent episodes, the nature of the violence, injuries sustained, and their feelings and responses to the violence. In addition, women were asked about their own and their partner's feelings about the recent pregnancy and whether they thought the violence was related to the pregnancy in any way.

The semistructured interviews were analyzed using content analysis (Bowling, 1997; Burnard, 1998). Data were stored in a word processing package (Word for Windows). Each semistructured interview was transcribed and read through by one of the authors (L. B.) before conducting the next interview. Brief notes were made regarding the main categories thematically identified. Categories and their accompanying data were stored in separate files in Word. These were revised and added to as the data collection progressed. Coding and recoding continued until all the data were classified (Miles & Huberman, 1994). To check for reliability, the first author (L. B.) and one of the coauthors (G. M.) reviewed the codes and selected quotations to ensure that the data reflected the categories identified.

Results

Physical Violence

All 16 women had been physically assaulted in the past 12 months. Four women had also experienced sexual violence. The violence was perpetrated by a current or former partner in all but one case where male family members were responsible. The nature of the violence was similar to that described in studies of nonpregnant women

and included being kicked, punched, thrown down stairs, threatened with a knife, choked, scalded with a hot iron, pushed out of moving cars, having objects thrown at them, and forced to have sex. Resulting injuries and symptoms included cuts, bruises, burns, broken bones, broken teeth, and persistent headaches.

When I was pregnant he kicked me down 16 stairs and he started to slap me. He took the shoe and hit me in my head. I was faint for about 15 minutes.

Ten of the 16 women had experienced domestic violence during their recent pregnancy, of whom 4 women had also been assaulted in at least one previous pregnancy. Three women had been assaulted by their partner in a previous pregnancy but not during their recent pregnancy, and the remaining three women had experienced domestic violence outside of pregnancy only. A number of the women had been punched or kicked in the abdomen by their partner and had been terrified about the effects of the violence on their pregnancy and their unborn child. Other studies have similarly reported that women who are assaulted by their partners during pregnancy are more likely to have multiple sites of injury, including the breasts and abdomen (Helton & Snodgrass, 1987; Hilberman & Munson, 1977-78; Hillard, 1985; Stark, Flitcraft, & Frazier, 1979). It could be argued that such violence represents an attack on the woman's sexual and procreative powers as well as her unborn child (Mezey, 1997). Some of the women regarded the violence as a reflection of their partner's profound ambivalence, if not hostility, toward their unborn child.

He picked up the phone and he hit me around the head with it two times and started kicking me in the stomach and my back. He kicked my hand and broke my finger. I had to have stitches in my head. I was just so frightened 'cos he was kicking me in the back and stomach and I was just worried about the baby.

I had burns from the iron. He held the iron onto my belly. I've got a burn here [indicating abdomen and lower arms]. That's from a cigarette. He put me flat on the cushion and he used a cigarette to burn me.

Four women had suffered a total of six miscarriages between them, which they attributed to a blow to the abdomen.

I had three miscarriages because of the violence. He used to kick me in my stomach, in my back. He always used to go for my stomach. He didn't want kids, it was me that wanted kids.

We had a fight and I went to the hospital and miscarried. He'd knee'd me here [indicates genital area]. He wanted me to have the baby. He was really happy and then I miscarried. He said that I wasn't really pregnant, that I was just saying it. Because I'd miscarried he didn't believe I was really pregnant, he thought I was lying.

It is perhaps understandable that women would attribute any obstetric complications, including miscarriage, to the effects of domestic violence. In a study by Coggins and Bullock (2003), complications that women attributed directly to an assault by their partner include spontaneous abortion and premature delivery. However, studies that have attempted to ascertain whether there is true association between domestic violence and miscarriage have been inconclusive (Kovac et al., 2003; Renker, 1999; Richardson et al., 2002).

Sexual Violence

The abuser's controlling behavior extended into women's sexual lives. Mezey (1997) states that pregnancy may block the man's free access to his wife's body, resulting in disputes and resentment within the relationship. Sexual coercion and forced sex have been identified as common features of abuse during pregnancy and immediately after delivery (Campbell & Alford, 1989; Coggins & Bullock, 2003). The abuser may resort to sexual violence as the ultimate form of power and control over the woman. Four of the women in this study described experiences of sexual abuse and rape during pregnancy.

He became more aggressive and violent when I became pregnant. When I was pregnant I was exhausted and I just wanted to sleep at the end of the day. He would accuse me of being insensitive because he wanted sex and I didn't. Sometimes I had to compromise.

I told him that I didn't want to sleep with him anymore. He couldn't accept it. He started slapping me around the face. He basically pinned me down to the bed and slapped me. He'd just lost control of me. I just used to do things he wanted, but now I do what I want and he couldn't accept it.

The sexual violence is the worst and the fact that he'd just wake up and pick up anything, the closest thing to him and start beating me with it. Like one morning I got up and told him I was going out to the shops and for some reason he thought I was going to see someone else and he just went mad. I had bruises and lumps all on the back of my head where he'd tried to strangle me and tried to bang my head on the wooden bed. I remember having carpet burns where he'd ripped my clothes off me.

Sexual violence was not confined to the pregnancy but continued into the postpartum period for some women. It would appear that some men felt threatened by and were unable to tolerate changes in their partner's libido following delivery.

After the birth it got worse. My libido had gone completely. He didn't even wait that long and I was in a lot of pain when we were having sex. It was too soon after but he insisted I do it so that I get used to it.

Influence of Drugs and Alcohol

Alcohol and substance misuse is associated with both the experience and perpetration of domestic violence (Campbell, Poland, Waller, & Ager, 1992; Cokkinides & Coker, 1998; Gielen, O'Campo, Faden, Kass, & Xue, 1994; Martin, English, Clark, Cilenti, & Kupper, 1996; Wiemann, Agurcia, Berenson, Volk, & Rickert, 2000). It can have a significant impact on the power dynamics of an abusive relationship by worsening the emotional state of the woman and making her more vulnerable to manipulation and increasing the volatility of the abuser. In this study, ten women reported that their partners had assaulted them while under the influence of illicit drugs or alcohol. There has been considerable debate about the causal role of drug and alcohol misuse in domestic violence. However, violence was not confined to periods of intoxication, and all ten women reported that their partners were also abusive when they were not under the influence of drugs and alcohol.

The crack used to make him bad, it used to make him more violent. He'd go through spells with the crack.

I'd been to a funeral and I came home and he was drunk. He just got up out of his sleep and started beating me, severe beating. I think I came home late and he was like "why did you go to that fucking funeral, I told you not to go." This happened a week before I was supposed to go on holiday, so I ended up going on holiday with my arm in plaster.

When he drank he was definitely more aggressive. He was aggressive anyway, but when he'd had a drink it just got worse.

He wasn't very happy about friends coming round. It would be his excuse to walk out and go to the pub. Consequently it would make everyone feel uncomfortable. It got to the point where I didn't want friends to come round because that would make him go to the pub, he'd get drunk and then it all happens again [referring to the violence].

Psychological Abuse

As described in studies of nonpregnant women, control was often achieved through the use of psychological abuse, which engendered feelings of fear, insecurity, and dependency. Women reported being constantly criticized, humiliated, demeaned, and undermined, as well as being verbally abused and threatened with violence. Their independence and freedom of movement were restricted, and many reported a reduced sense of autonomy, self-esteem, and confidence.

I have to do things his way. I can't disagree with him because I'm a woman and I should be on his side. If we have an argument I'm not allowed to talk back or express my opinions.

He'd pick my friends, the ones that he liked.

Psychological abuse during pregnancy was often directed toward aspects of the woman's sexual identity or changes in her physical appearance, which increased feelings of vulnerability and inadequacy.

When I was pregnant he'd go "look at yourself, you're fat, you should go and change." You see I haven't got that much confidence in myself about the way I look and he knows that.

He'd tell me, you are rubbish, you are nothing, you are useless in your life, you're not the kind of woman I can spend my life with, you're ugly and stupid.

He calls me slag, he calls me skinny. When I was pregnant he called me fat. He said I need to do some exercise to lose weight.

Understanding Domestic Violence in Pregnancy

To explain why the risk of domestic violence during pregnancy may increase for some women, it is important to understand the characteristics of men who batter.

Power and Control

All women referred to issues of power and control within the relationship, regardless of when the violence had occurred. Pregnancy symbolizes the woman's autonomous control over her body and her independence from her partner. During pregnancy, women are likely to want and to receive more attention from friends, family, and health professionals, thus creating the potential for the violence to be detected by others. It becomes more difficult to keep the violence secret or to explain away bruising and physical injuries (Mezey, 1997). Given the fact that control is such a key aspect of domestic violence, it is therefore not surprising that an event such as pregnancy may be associated with increased violence by the abusive partner as he attempts to reestablish his control.

One of the ways in which men seek to control and limit their partner's freedom within violent relationships is by limiting access to money. Pregnancy is often associated with increased financial pressures on the family, and the women in this study reported that episodes of violence were frequently precipitated by increased demands on, or requests for, more money. Pregnancy was associated with a significant reduction in income for women who were previously employed, and the birth of the baby represented a further drain on the family's resources. Women were therefore more financially dependent on their partners and having to negotiate money from them, a potentially dangerous exercise that was liable to provoke a violent response.

We were a bit short of money, I said to him could I have some money. He says, where the hell am I gonna get money from? I said to him you don't give me money for food,

what's gonna happen when the baby's born? Then he started arguing and told me I was a user and that I only got pregnant to trap him. He started slapping me.

He always said to me I was making his life difficult by getting pregnant, financially, and he doesn't want a baby. I was happy [about the pregnancy] until the pressure got very bad. I was at the point where I was going to abort the baby.

A pregnancy that is unwanted by the male partner may also trigger abuse in a relationship. Analysis of data from a U.S. longitudinal survey (National Survey of Families and Households) showed that although pregnant women were no more likely to experience partner violence than women who were not pregnant, persistent violence was more likely to occur among couples where the male partner perceived that the pregnancy of his female partner occurred sooner than intended (Jaskinski, 2001). In the current study, one woman attributed an increase in arguments and physical violence by her partner to her refusal to have a termination.

I told him I was pregnant and he told me to get rid of it, but I didn't want to because I don't believe in abortion. He said that if it's the money to pay for it, then he would pay for it. It was bringing problems in the house, he changed, got angrier. Like when I'm feeling morning sick he would say, if I listened to him I wouldn't be feeling this way. Like if I didn't have any money he'd say, if I did the abortion I could have gone out to work. So every little thing I do or say he uses the baby as an excuse.

Jealousy and Possessiveness

Men who are violent toward their partners are often described as emotionally insecure, inadequate, and dependent men whose violence is often triggered by sexual jealousy or possessiveness (Dobash & Dobash, 1984). It is perhaps not surprising that the unborn baby may be perceived as a direct threat to these men and as a rival for the woman's attention, care, and labor. During pregnancy, a woman is likely to be preoccupied with her physical changes and the forthcoming birth and be less emotionally available to her partner (Mezey, 1997). Abusive men may find it difficult to respond in a supportive way to the increased emotional and physical demands of their partners during pregnancy and resent the restrictions that the new baby places on them.

I think that having the baby has made the relationship worse. Like we used to go out a lot. He hasn't adjusted. I was saying we can go out and take the baby with us, but he don't want that, he just wants it to be me and him.

For some women in this study, pregnancy triggered accusations of infidelity and to their partner's questioning the paternity of the child, a feature of domestic violence that has been noted by other authors (Campbell, 1986; Coggins & Bullock, 2003).

I think because I wanted a termination he just took it personally and he accused me of messing him around. He just couldn't understand why I wouldn't want to keep it and he started to question whether the baby was really his.

He totally rejected the pregnancy. He was like "it's not my problem." In fact at one point he was even saying it wasn't his baby, that it was someone else's.

He didn't believe I was pregnant when I told him, we ended up getting into a fight. In a previous relationship his girlfriend told him she was pregnant to try and trap him and he thought I was trying to do the same, emotionally.

He wasn't happy about it [the pregnancy], he'd already got nine kids. His attitude changed. There was no form of communication for a few weeks after that incident [referring to violence] and then he totally rejected the pregnancy.

Many partners appeared to be jealous of and resented their partner's close relationships with friends and family members. Women described being followed by their partners when they went out, prevented from going out at all, or being interrogated about where they had been and what they had talked about.

Every time I go out I leave a note for him to know exactly where I am. I don't go out that much. When I got home I found the flat in darkness. I pushed my key in the door and he's standing there in front of me. Instead of him asking me how I'm feeling because he knew I was pregnant, he punched me in the face. Then I went upstairs and he took his foot and just pushed me down the stairs.

I think I'd go so far as to say he was even jealous of my children. Me giving time to my daughter, it causes a hell of a lot of grief. It was there during my pregnancy as well.

Some women felt that when they were pregnant, their partner became more jealous and possessive toward them.

When I was pregnant he got worse. Because I was wearing short things, not for me to show myself off, but short in a way that I would feel comfortable [indicates to her knee]. He thinks I'm offending him and he wants me to wear skirts that go right down to my ankle.

However, other women thought their partners were less jealous, and they were therefore less likely to get hit, when they were pregnant.

It actually calmed down a bit when I was pregnant. Before the pregnancy he was a total control freak. I would look at the floor or the ceiling when I was in a pub with him because if I looked anywhere else, he thought I was eyeing somebody up. Then he'd go into one and he'd lose it. He'd tell me I was nothing but a dirty old slag. Clothes, nothing short, nothing revealing. Whereas when I was pregnant I was wearing leggings, sweatshirts whatever. He didn't believe anyone would be interested in a heavily pregnant woman.

Lack of Emotional and Physical Availability

Abusive men are generally described as emotionally insecure and dependent; they need their partner to provide emotional reassurance and are sensitive to rejection. It has been suggested that abusive men tend to accompany their partners to health care appointments in order to avoid detection of the abuse by health care providers (Gayford, 1975; McFarlane & Parker, 1994).

However, some women in this study described a lack of emotional support from their partner during pregnancy and a general lack of involvement or interest in their maternity care. This lack of support and commitment extended to the postpartum period.

I've suffered really bad postnatal depression. At one point he went "oh for God's sake when are you just gonna snap out of this." I don't think he really understands what postnatal depression is. If I'm unwell or something like that he can't deal with it.

He used to come round here to see the baby once in a while. I don't want somebody who's gonna walk in and out of our life because that's really disruptive for me and the baby. He thinks what he's doing is all right, but his level of responsibility and my level of responsibility are too different.

Perpetrators of domestic violence also tend to hold conventional sex role attitudes, expecting the woman to take sole responsibility for household chores and child rearing (Dobash & Dobash, 1984). Some women reported that during pregnancy, physical exhaustion and reduced mobility meant that they were unable to perform routine household tasks, which frequently resulted in violence.

I was tired and I came in and switched off the TV. That was it, he went mental. He was hitting me on the side of my face, kicking me in my thigh. I remember crouching down on the floor. In a way it was related to the pregnancy because I was a lot more tired than normal. He just didn't allow for the fact that I needed extra sleep when I was pregnant.

When I was pregnant he used to wake up in the morning, assault me and tell me I couldn't eat this or that. It was hard for me to cook because the smell would make me sick, but he wouldn't understand that.

Fear of Abandonment

It has been suggested that for some women, pregnancy acts as an impetus to leaving an abusive partner as they begin to consider their future and the possibility of violence being witnessed by, or directed toward, the baby (Mezey, 1997).

It was easier to split up because I was thinking of myself and the baby. I didn't want the risk of being in a relationship like that. Anything could have happened to the baby. I was thinking the baby cries a lot in the night. Probably that would make him angry and he would take it out on the child.

However, it is recognized that the risk of violence increases when a woman is preparing to leave (Binney, Harknell, & Nixon, 1981; Kurz, 1996). Nine of the women reported leaving their partner on at least one occasion, of whom three had left during the current pregnancy. Four women reported that their partners had threatened that they would kill them if they ever tried to leave. In one case, a woman reported that her partner kept a knife, which he threatened to use, if she tried to leave or call the police. Two women's attempts to end the relationships during pregnancy prompted violent attacks from their partners.

I was about to leave because he'd said something to me. He got upset and he just pushed me around, took a towel and strangled my neck. He held on to the towel. I don't know what clicked that made him stop. After that he just put me back down, picked up his jacket and walked out.

I said to him I'm not staying here anymore. My friend came for me and she helped me pack. He said "what do you think you're doing" and I said I'm leaving you and he just went mad. He started throwing things at me. Then he grabbed me and started slapping me in my face and pushed me out the room. He just threw my bags with all my clothes over the balcony and they exploded at the bottom of the stairs. He said "if you go, when I see you on the street I'm gonna kill you, you fucking bitch and your friend." It was almost like my friend's safety was being invaded. I felt so bad, so I told her to go and I stayed there in the end.

The difficulties and dangers associated with leaving violent relationships would appear to be increased for women who are pregnant or have recently given birth. Many women referred to feeling "trapped" by their pregnancy and their fear of having to cope alone with a new baby.

It's more difficult [to leave] when you're pregnant because you feel stuck. You want someone to help you through the pregnancy and be with you. It's not just financial it's the accommodation too. I was scared that if I ended the relationship I was taking the risk of being alone with a small child.

It's harder to leave when you're pregnant because you're making a commitment that you can't pull out of. The baby needs a father and a mother.

The miscarriage was a blessing in disguise. Can you imagine me now? If I'd had his child it would have been entrapment basically. It would have trapped me into staying with him.

Ambivalence About the Relationship

Women often described their partners as kind, gentle, and caring fathers and partners in spite of the violence and abuse they had been subjected to. The pattern of violence within most of these relationships was similar to that described by women

outside pregnancy, with violent assaults and outbursts interspersed with loving and considerate behavior.

He didn't acknowledge what he was doing to me. It was like he literally switched off and didn't know who he was, and then he went back to his normal self. 'Cos literally straight afterwards he'd be his lovable self, the way he was when I first met him.

In the beginning they're the most loving, caring, they're just your ideal partner and then they turn into a monster overnight.

I made a comment and in that one sentence he switched from being normal and just went ballistic in the street and tried to throttle me and I ended up with bruises around my throat.

Some women became attuned to their partner's moods and were able to identify behavioral cues in their partner prior to a violent episode.

I used to know when he was gonna switch 'cos the look in his eyes was just so cold. The worst thing was you're just waiting for it to happen. It's horrible 'cos you even get to the stage where you're flinching 'cos you think he's gonna hit you. He used to laugh at me when I used to flinch.

There'd be a steady build up to it because of his irrational behavior when he was drunk and chucking things about. So even though I was kind of ignoring it I could kind of see it coming.

If he hit me or whatever, he bought me things. We used to go shopping and he'd spend loads of money on me, almost like a sorry. It was him just being caring and buying me things.

Most women blamed themselves for the violence and believed that they were responsible for their partner's behavior. Women talked about changing or modifying their own behavior in certain respects and trying to mollify their partner in the hope of deflecting him from violence. Some women appeared to recognize their partners' emotional insecurity and saw themselves as both the cause of and the remedy for the problem.

I just stayed with him 'cos I thought maybe he is sorry. Because I loved him I thought that I was the only person that he had. I felt his happiness was my responsibility, 'cos the way he used to make me feel was I was what made him happy. Maybe it was even my fault 'cos I should have sat down and talked to him about it instead of just leaving him when he needs me. I always said to him that I would be there for him and I felt like I was going back on my word.

I knew he was wrong, but I just kept making excuses to stay with him. I always felt maybe if I help him, maybe if I do this or that he'll be the way he was. You think you

can fix it 'cos you've seen the good person they are and you just want to bring it back. You just feel like you can't give up.

He said he was depressed, he was miserable. I felt sorry for him. I felt guilty when I saw him so depressed, I thought it was my fault.

Women who already had children expressed concerns about depriving them of a father figure and a stable home environment, about disrupting their schooling and friendships, becoming a burden to friends and family, and fearing that they would constantly be "on the run" if they left their partner.

Discussion

The results of this study suggest that pregnant women's experiences of partner abuse are similar to those who are abused outside of pregnancy. Violence often stemmed from the abuser's emotional insecurity and the need to enforce power and control. The pregnancy had a significant impact on the power dynamics of these women's relationships and appeared to increase their vulnerability to violence. The women's perceptions of the abusive nature of their relationships provide us with some valuable insights into the emotional state of the abuser. However, our understanding of domestic violence in pregnancy is limited by the fact that the accounts provided were obtained from survivors of domestic violence, and nothing is known about the perceptions of the abusers or their interpretations of the abuse.

In terms of enhancing our understanding of domestic violence, it would appear that particular problems may arise when this occurs during pregnancy. Although the results are based on a small sample, they suggest that pregnancy may be specifically threatening to emotionally insecure and jealous men, which increases the risk of violence and makes it particularly difficult for women to escape the abuse. There is a need for more qualitative studies exploring women's perceptions and experiences of partner abuse during pregnancy (Aston, 2004). A better understanding of how pregnancy may affect an abusive or potentially abusive relationship will facilitate the development of supportive interventions targeted at abused, pregnant women.

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