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Provider, Caretaker, Nurturer, Hero: Perceptions of Parenting Changes among Women Who Experienced Intimate Partner Violence

Lynette M. Renner 1 · Carolyn Copps Hartley · Molly C. Driessen 1

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Abstract

In this study, we examined changes in mothers' reports of discipline, nurturing, and parenting satisfaction, along with their perceptions of how intimate partner violence (IPV) affected their role as a mother. Data were gathered from 85 women (86% identified as non-Hispanic White; mean age = 31.7 years; average number of children = 2.5) across three data waves. We used a convergent parallel mixed method design to examine women's parenting experiences. Two standardized scales assessed parenting discipline, nurturance, and satisfaction. Five additional items assessed perceptions of how IPV influenced parenting. Women responded to open-ended questions about perceptions of their mothering role and how IPV influenced this role over time. We found significant changes in discipline scores and women's ability to have their desired relationship with their children. Nurturing and parenting satisfaction scores did not significantly change over time. Four themes emerged for women's role as mothers: provider and nurturer, teacher and discipliner, challenges, and importance of the mother role. Seven themes emerged on how IPV influenced mothering: ability to be present, trouble with discipline, overcompensation and overprotective, learned behavior, no impact, finding strength, and self-doubt. These findings contribute to the growing scholarship assessing women's perceptions of their mothering roles and parenting in the context of IPV. Future research should examine the impact and nuances of parental interference in various contexts and over time.

Keywords Intimate partner violence · Parenting · Parent-child relationship · Domestic violence

Hiahliahts

- We used a convergent parallel mixed method design to examine how IPV influenced women's parenting over time.
- Women reported high levels of nurturing and parenting satisfaction that did not significantly change over time.
- Women placed a great deal of importance on their role as teachers and discipliners to buffer their children's exposure to IPV.
- Some women reported initial difficulties being present for their children due to the physical and mental effects of IPV.
- Women reported significant increases in disciplinary competence and having a better relationship with their children.

Intimate partner violence (IPV) includes physical, sexual, emotional, and economic abuse by a current or former intimate partner (National Center for Victims of Crime, 2018). In their lifetime, 32% of females will be victims of physical IPV, and 16% of females will be victims of sexual

IPV (National Center for Victims of Crime, 2018). The sequelae of IPV victimization among women includes various mental and physical consequences, such as fear, post-traumatic stress disorder, and physical injuries, which often require support services to meet legal, housing, and victim advocacy needs (Breiding et al., 2014). IPV has significant consequences not only for adults but also for children. An estimated 6.6% of children are exposed to IPV between their parents or between a parent and partner (Hamby et al., 2011). Exposure to IPV has substantial negative consequences for children, including increased risk for delinquent behavior (Huang et al., 2015), challenges with emotional and cognitive functioning (Sternberg et al.,



[☑] Lynette M. Renner renn0042@umn.edu

School of Social Work, University of Minnesota, 105 Peters Hall 1404 Gortner Avenue, St. Paul, MN 55108, USA

School of Social Work, University of Iowa, Iowa City, IA, USA

2006), and increased internalizing behaviors (Maneta et al., 2017; Renner & Boel-Studt, 2017).

The process model of parenting follows an ecological framework in which contextual sources of support and stress influence parenting perceptions and practices, such as a parent's psychological functioning and developmental history, including interpersonal violence experiences (Belsky, 1984; Vondra et al., 2005). Many women who experience IPV victimization are simultaneously parenting children while struggling to meet their physical, mental health, and economic needs. Although some researchers continue to demonstrate the consequences of IPV victimization on various aspects of functioning, the impact of IPV on the parenting role has received less attention (Ahlfs-Dunn & Huth-Bocks, 2016; Bentley, 2016; Calton et al., 2017; Goldblatt et al., 2014). More specifically, there is a lack of research focused on women's mothering experiences in the context of IPV (Lapierre, 2009; Peled & Gil, 2011).

Offenders' interference with women's parenting as a type of IPV is infrequently recognized in empirical research (Ahlfs-Dunn & Huth-Bocks, 2016). Some offenders use parenting as a target of their violence by mother-blaming and undermining women's authority to nurture, provide care, and discipline their children the way they want (Katz, 2019; Lapierre, 2009, 2010; Levendosky et al., 2000; Peled & Gil, 2011). IPV targeted at women's parenting role takes a variety of forms. Ahlfs-Dunn and Huth-Bocks (2016) conducted a longitudinal study with a sample of lowincome, single mothers (N = 120), who identified as African American (47%), Caucasian (36%), Biracial (12%), and other ethnic groups (5%). Within a year of giving birth, some of these low-income women described their partners as overruling their parenting decisions (28.1%), criticizing their parenting skills or telling them they were a bad mother (19.3%), or having their partners embarrass or criticize them in front of or to their children when they were not around (12.3%) (Ahlfs-Dunn & Huth-Bocks, 2016). Ahlfs-Dunn and Huth-Bocks (2016) saw this behavior as offenders taking advantage of women's identities as mothers and their desire to protect and nurture their children to victimize them further. This interference and criticism may have the deleterious effect of undermining mothers' confidence in their parenting role and their relationships with their children (Jones & Vetere, 2017; Lapierre, 2009; Levendosky et al., 2000; Semaan et al., 2013).

Society views women as primarily responsible for meeting all their children's needs (Breen & Cooke, 2005; Jolly et al., 2014; Mesman et al., 2016), and women experiencing IPV describe a myriad of harmful effects of IPV on their roles as mothers and their parenting behaviors. More generally, researchers have shown that IPV victimization is associated with challenges in various parenting domains. Consistent with the spillover hypothesis, which

asserts that emotions and mood generated in a woman's adult intimate relationships will flow into and negatively influence other significant (i.e., parent-child) relationships (Engfer, 1988; Erel & Burman, 1995; Krisknakumar & Buehler, 2000), IPV victimization has been connected with women's increased use of physical aggression, harsh discipline, and neglect (Chiesa et al., 2018), increased parenting stress (DeVoe & Smith, 2002; Renner, 2009), and decreased parenting efficacy and satisfaction (Renner et al., 2015). Mothers who experienced IPV reported lower levels of positive discipline, warmth and nurturing, and consistency than mothers with no history of IPV (Letourneau et al., 2007).

Delving more into the mothering role, participants from several studies described their identity as mothers as something that was 'stolen' by the partner who abused them (Bentley, 2016; Lapierre, 2009; Secco et al., 2016). The emotional impact of IPV can leave mothers exhausted, with limited energy to be present for their children (Holt, 2016; Lapierre, 2009; Levendosky et al., 2000; Pels et al., 2015) or to meet their children's basic needs (Pels et al., 2015). Mothers may struggle with feelings of guilt and try to compensate for the adverse effects of the violence their children witnessed (Holt, 2016; Levendosky et al., 2003; Pels et al., 2015). Some mothers also grapple with their children mirroring or mimicking their partner's abusive behaviors (Goldblatt et al., 2014; Katz, 2019).

Despite these challenges, mothers who experience IPV maintain a strong desire to be a 'good mother' and 'role model' to their children (Lapierre, 2009 2010; Semaan et al., 2013). For some women, the abuse amplified their sense of parenting responsibility (Lapierre, 2009) to provide for their children's needs (Peled & Gil, 2011). Some women describe motherhood as a source of self-worth that helped them protect themselves and their children from the abuse (Semaan et al., 2013).

Researchers have also shown that mothers express both a desire and struggles to communicate about IPV to their children with the hope of preventing their children from experiencing future violence (Goldblatt et al., 2014; Insetta et al., 2015). For example, mothers in Insetta et al.'s study (2015) expressed dual goals for communicating about IPV with their children. First, women wanted to help their children understand that IPV is neither normal nor healthy. Second, women wanted to establish open communication about IPV so their children would have positive relationships with them and healthy, non-abusive future relationships.

Despite evidence that links IPV with parenting challenges among women, some researchers have found that mothers in abusive relationships report no IPV impact on their parenting (Levendosky et al., 2000). Other researchers found that women report increased caring, empathy, and protective feelings towards their children, suggesting that



they have developed positive parenting strategies to reduce the consequences of violence on their children (Bentley, 2016; Rizo et al., 2016).

Few researchers have examined whether and how the effects of IPV on women's parenting and perceptions of their mothering role change over time (Chiesa et al., 2018; Goldblatt et al., 2014; Jones & Vetere, 2017). In a longitudinal study, Letourneau et al. (2007) found that mothers who experienced IPV showed a greater increase in positive discipline and a smaller decrease in their warmth and nurturing over time compared to mothers not experiencing IPV. A few retrospective studies of women's experiences parenting after IPV illustrate gains as well as ongoing challenges. In these studies, women described improvement in their overall well-being, which aided them in being more present and available as parents (Jones & Vetere, 2017; Pels et al., 2015). They also were able to develop new relationships with their children outside the context of the violence (Goldblatt et al., 2014; Pels et al., 2015). They also reported more freedom in making decisions about raising their children (Pels et al., 2015). However, women also described challenges in dealing with their children's problem behaviors and their fear of having ongoing contact with their abusive partners because of shared custody arrangements (Holt, 2016).

Study Rationale and Research Questions

Understanding women's parenting needs is essential for enhancing intervention efforts designed to meet the needs of women and children who experience IPV. Through this study, we sought to contribute to the literature on women's mothering experiences in the context of IPV. Using both quantitative and qualitative data, we examined changes in women's reports of discipline, nurturing, and parenting satisfaction, along with their perceptions of how IPV affected their role as a mother for one year after receiving civil legal services. Several theories provide a link between women's receipt of legal representation and changes in parenting over time. Survivor theory supports that people experiencing IPV engage in active help-seeking behaviors, and the gap between remaining in an abusive relationship or leaving the relationship is the amount of positive support and services available to the victim (Gondolf & Fisher, 1988). Thrivership theory builds upon survivor theory and posits three elements essential to women thriving after experiencing relationships characterized by IPV: (1) provision of physical and emotional safety, (2) story sharing, and (3) social response (Heywood et al., 2019). Engaging with an attorney to navigate the justice system provides physical safety through civil protective orders (CPOs) and emotional safety through women acquiring knowledge of their legal rights to protect them from current and future abuse. With their attorney's support, participating in a procedurally fair justice system allows women to tell their stories. Sharing their story publicly in court also contributes to women's thriving by empowering them to take ownership of their past and move forward in their healing (Heywood et al., 2019). Social responses, such as positive interactions with professionals who socially validate women's experiences, further enable and reinforce women's thriving (Heywood et al., 2019).

Civil legal representation more broadly supports women's transitions from IPV relationships and thriving (Heywood et al., 2019) by contributing to their psychosocial empowerment (Marmot, 2015; Payne, 2017). Moreover, the social-ecological model supports that IPV is simultaneously an issue of a person, relationship, family, community, and society (Centers for Disease Control and Prevention, 2020). For an individual to thrive, superordinate levels of influence must facilitate thriving. Social or legal services could act as violence disrupters. In this case, an attorney (community) offers proxy expert agency to an individual experiencing IPV to interrupt relationship patterns and enact the protections allowed under the rule of law (society).

Our research questions were: (1) As women exit abusive relationships, do their perceptions of their discipline and nurturing capabilities and their parenting satisfaction improve over time?; (2) How do women view their role as mothers?; and (3) How does IPV affect women's roles as mothers over time? We relied on quantitative data to examine the first research question and qualitative data to answer the second and third research questions. Based on the literature reviewed and the survivor and thrivership theories, we anticipated that women would report fewer challenges with discipline and greater nurturing and satisfaction over time. We also expected women to report that IPV had fewer effects on their mothering role over time.

Method

Data Source

We used data from three waves of interviews with women who had experienced recent IPV and sought civil legal services from Iowa Legal Aid (ILA) for a civil protective order (CPO) or a family law matter (e.g., divorce, child support or custody). Per ILA's case screening procedures, all women dealt with imminent legal needs due to ongoing IPV. The data were drawn from a larger study focused on the role of civil legal services on safety, psychological wellbeing, and economic self-sufficiency. At Wave 1, women (n=150) responded to survey questions about their parenting discipline and nurturance and their satisfaction with



the parenting role and parent-child relationship. Survey data were also gathered at Waves 2 (n=112) and 3 (n=85), which occurred 6 and 12 months, respectively, after Wave 1. At Wave 1, women responded to two open-ended questions about their role as a mother and how IPV affected this role. In Waves 2 and 3, women responded to the same openended question of how IPV affected their role as mothers. Data for this study captured responses from the 85 women who participated in all three data collection waves.

Data collection occurred between June 2012 and November 2015. A total of 150 women completed a Wave 1 interview. Recruitment was ongoing and continued throughout the entire study to maximize the sample size as some measures asked at Waves 1 and 2 did not require follow-up. As such, some women could never be interviewed in later waves (e.g., a woman was recruited and completed the Wave 1 interview one month before the end of the study) because the study ended. Approximately 75% (n = 112; 74.7%) of the Wave 1 sample was retained for Wave 2, and 75.9% (n = 85) of the Wave 2 sample was retained at Wave 3. However, these retention rates were not calculated based on the Wave 1 sample because women were not recruited as a single cohort.

We examined associations between demographic variables and study retention at Waves 2 and 3 separately using a series of chi-square tests and independent samples t-tests. Demographic variables included geographic location (urban vs. rural), race (non-Hispanic White vs. other), education (college degree vs. no college degree), employment (currently working vs. not working), type of legal services (family law vs. protective order), current relationship status with their abusive partner, amount of legal services received, age, number of children, and length of relationship with their partner. Women with higher scores on several IPV measures at Wave 1 were more likely to be retained at Wave 2 (p < 0.05). Geographic location and education were also associated with retention at Wave 2, with women living in rural settings and women with college degrees more likely to remain in the study. Location was the only variable related to retention at Wave 3, with women living in rural settings more likely to stay in the study.

Sample

Table 1 presents descriptive statistics for the 85 women in the sample. At Wave 1, the mean age of the women was 31.65 years (SD=7.23). All the women were mothers, having an average of 2.53 children (SD=1.63; range = 1–9). Most women identified as non-Hispanic White (85.88%; n=73), with 5.88% (n=5) who identified as non-Hispanic Black and 7.06% (n=6) who identified as Hispanic. Over 75% of the women had some post-secondary education (75.29%; n=64) and 51.76% (n=44) of the

women were working at least part-time. Women's mean income was \$1633 (SD = \$1130). Over half of the women resided in metro areas (55.29%; n = 47), with 16.47% residing in rural communities (n = 14) and 28.24% residing in urban areas (n = 24).

All women had male partners who perpetrated violence against them. The average length of the relationship between a woman and her partner was 6.86 years (SD = 5.57). All women reported high levels of physical and non-physical IPV at Wave 1 based on the Index of Spouse Abuse (Hudson & McIntosh, 1981), the Psychological Maltreatment of Women Inventory (Tolman, 1999), and the Women's Experience of Battering scale (Smith et al., 1999). The majority of women reported living with the abusive

Table 1 Wave 1 descriptive statistics and abuse characteristics (N = 85)

	Wave 1
	M (SD) or n (%)
Age in years	31.65 (7.23)
Number of children	2.53 (1.63)
Race and Ethnicity	
Non-Hispanic White	73 (85.88)
Non-Hispanic Black	5 (5.88)
Hispanic	6 (7.06)
Other	1 (1.18)
Monthly income	\$1633 (1130)
Education level	
Less than high school	8 (9.41)
High school degree	13 (15.29)
Some college/trade school	50 (58.82)
Bachelor's degree or higher	14 (16.47)
Currently working	44 (51.76)
Length of relationship with perpetrator of IPV	6.86 (5.57)
Was ever married to perpetrator of IPV	49 (57.65)
Had ever lived with perpetrator of IPV	81 (95.29)
Length of time since relationship with perpetrator ended	1.07 (1.83)
Geographic location	
Metro	47 (55.29)
Urban	24 (28.24)
Rural	14 (16.47)
Index of Spouse Abuse	
Total ISA (range = $0-100$)	50.57 (18.40)
Physical Abuse (cut-off = 10)	43.94 (19.22)
Non-Physical Abuse (cut-off = 25)	62.24 (21.67)
Psychological Maltreatment of Women Inventory	
Dominance-Isolation (range = 7–35)	26.31 (6.79)
Emotional-Verbal (range = $7-35$)	29.92 (5.04)
Women's Experience of Battering (range = 10–60)	51.04 (9.93)



partner at some point (95.29%; n=81), and 57.65% were married to him (n=49). All but two of the women reported no longer being in a relationship with their abusive partner at the Wave 1 interview; but by Wave 3, all women reported no longer being in a relationship with their former partner. The mean length of time since the relationship ended was 1.07 years (SD=1.83). Seventy-eight percent of women reported their relationship had ended within the past year. Nearly two-thirds of women (65.88%; n=56) received assistance from ILA for a CPO, and approximately one-third (34.11%; n=29) sought services for a family law matter.

Measures

We used a convergent parallel mixed method design (QUAN + QUAL) to examine women's parenting experiences (Creswell & Creswell, 2018; Morse & Niehaus, 2009). We utilized two scales to assess women's overall parenting discipline, nurturance, and satisfaction, along with five items to assess women's perceptions of how the IPV they experienced influenced their parenting abilities. We then asked open-ended questions to determine how women viewed their role as a mother and how IPV influenced this role. Our method included a core component (QUAN) and a supplementary component (QUAL) that constitute a complete method rather than single stand-alone studies (Morse & Niehaus, 2009, p. 9).

Parenting discipline and nurturance

The Self-Efficacy for Parenting Tasks Index (SEPTI; Coleman & Karraker, 2000) assessed domain-specific parenting self-efficacy. We used two subscales from the full 36-item scale to measure structure and discipline (8 items) and emotional nurturance (7 items). Example structure and discipline items included "You have more trouble with discipline than any other aspect of parenting," "You spend too much time with ineffective attempts to discipline your children." and "You really don't have much trouble disciplining your children." Nurturing items included "You know you're just not there enough emotionally for your children," "You try very hard to put your children's emotional needs before your own," and "You are definitely an adequately nurturing parent." Items were assessed using a six-point response scale ranging from strongly agree to strongly disagree. Average scores were computed for each subscale, with higher scores indicating greater self-efficacy. Cronbach's alpha at Wave 1 for the structure and discipline and nurturance subscales were 0.88 and 0.83, respectively. Cronbach's alpha for the SEPTI subscales for Waves 2 and 3 were 0.88 to 0.84 for the structure and discipline subscale and 0.81 and 0.84 for the emotional nurturance scale.

Parenting satisfaction

The 3-item Kansas Parental Satisfaction Scale (KPSS; James et al., 1985) assessed women's general satisfaction in the parenting role ("how satisfied are you with yourself as a parent?") and the parent-child relationship ("how satisfied are you with the behavior of your children" and "how satisfied are you with your relationship with your child (ren)?"). Response options include a 7-point scale ranging from *extremely dissatisfied* to *extremely satisfied*. Total scores range from 3 to 21, with higher scores indicating greater satisfaction and the clinical cut-off score is 15 (Nitsch et al., 2015). Cronbach's alpha for the KPSS in this sample were 0.76, 0.75, and 0.72 for Waves 1, 2, and 3, respectively.

Influence of IPV on parenting

We included five project-specific items at each wave of data collection to assess women's perceptions of whether the IPV they experienced specifically affected their abilities to discipline their child(ren): "The abuse you experienced from [your partner] affects your ability to (1) discipline your child(ren)"; (2) nurture your child(ren); (3) help your child (ren) with their school work; (4) spend time and play with your child(ren); and (5) have the relationship you want with your child(ren). The participants answered each statement by providing their general level of agreement on a six-point scale that ranged from *strongly disagree* to *strongly agree*, with higher scores indicating more agreement.

Influence of IPV on role as mother

In addition to the survey questions, we asked women two open-ended questions about their parenting and role as mothers. During the Wave 1 interview, women were asked, "How do you view your role as a mother?" This question was meant to capture the meaning of mothering in women's lives, and we did not expect this to change in one year. In Waves 1, 2, and 3, women were asked, "In what ways does the abuse you experienced from [the abusive partner] continue to affect your role as a mother?" These questions assessed change over time. Interviewers recorded the women's responses verbatim and we coded the themes in these responses.

Data Analysis

Quantitative

We performed a repeated-measures analysis of variance (ANOVA) with each of the three parenting scales (nurturing, discipline, and satisfaction) and each of the five



project-specific items to examine changes over time. Each ANOVA model used Waves 1, 2, and 3 data with no covariates. We conducted post hoc t-tests for all significant overall main effects to determine the pattern of change over time. Corrections for sphericity using the Greenhouse-Geisser correction did not change the significance of any results. The threshold for statistical significance was set at $p \le 0.05$. All analyses were performed using SPSS software version 25.

Oualitative

We used a conventional approach to content analysis to analyze the qualitative data (Hsieh & Shannon, 2005). After the open-ended responses from all participants were organized into a single Excel file, the first and third authors read the responses multiple times to fully engage with the data. The third author then engaged in open coding and developed in vivo codes based on the participants' own language from their responses to the interview questions (Creswell & Poth, 2018). The first author reviewed the initial themes to compare findings and ensure the trustworthiness and credibility of the data (Creswell & Creswell, 2018). To verify the final in vivo codes and themes and increase the trustworthiness and rigor of this study, the second researcher sorted and reviewed the coded text and identified any discrepancies in assigned codes. The first and second researchers then resolved these discrepancies. We further collapsed these initial codes into broader categories and constantly compared them to the data and emerging codes. This process of reducing the initial codes was based on identifying significant themes within the narratives across all three waves. This process continued until all of the data were reviewed, and we identified the saturation of key findings to be consistent across the sample. For the Wave 1 question, "How do you view your role as a mother?," four robust codes, which became the final themes, were apparent in the data. For the question asked in all three waves, "In what ways does the abuse you experienced from [the abusive partner] continue to affect your role as a mother?," we initially developed thirteen codes. We winnowed these codes down to seven final themes that emerged from the data. As the final list of themes developed, we counted the frequencies of the themes across each wave of data (see Creswell & Poth, 2018 & Maxwell, 2010) and identified illustrative quotes to define and describe the emergent themes.

Results

Quantitative

For the SEPTI structure and discipline subscale, a significant increase in scores between Waves 1 and 3, F(2,168) = 3.78, p = 0.025, was found (see Table 2). Post-hoc paired-samples t-tests showed that discipline scores at Wave 1 were significantly lower than scores at Wave 3, Wave 1/ Wave 3: t(84) = -2.45, p = 0.016, with no significant differences between other points of comparison. There was no significant change from Wave 1 to Wave 3 for the SEPTI emotional nurturance subscale scores, F(2, 168) = 0.37, p = 0.688. There was no statistically significant change in parenting satisfaction scores across Waves 1, 2, and 3, F(2,168) = 0.57, p = 0.565. Over one year, women's nurturance toward their children and their parenting satisfaction remained stable and relatively high, and women reported a significant increase in their ability to provide structure and discipline appropriately.

We found one change using the five single-item variables focused on whether IPV affected women's abilities to parent. For how IPV affected women's ability to have the

Table 2 Descriptive statistics for parenting measures at each wave and change over time

Variable	Wave 1		Wave 2		Wave 3		Overall	Overall <i>p</i> -value
	M	SD	M	SD	M	SD	F-statistic	
Structure and Discipline (range = 1–6)	3.90	1.09	3.99	1.10	4.14	1.03	3.78	0.025
Emotional Nurturance (range = 1-6)	5.37	0.68	5.37	0.66	5.41	0.67	0.37	0.688
Satisfaction (range $= 3-21$)	15.95	3.16	16.09	2.89	16.29	2.86	0.57	0.565
IPV affects ability to discipline child/children (range = 1-6)	2.88	1.92	2.78	1.83	2.92	1.97	0.26	0.743
IPV affects ability to nurture child/children (range = 1-6)	1.72	1.24	1.69	1.24	1.58	1.11	0.74	0.465
IPV affects ability to help child/children with schoolwork (range = 1-6)	1.52	1.14	1.42	0.96	1.33	0.78	1.34	0.265
IPV affects ability to spend time with child/children (range = 1-6)	1.91	1.44	1.66	1.27	1.62	1.20	2.05	0.132
IPV affects ability to have the relationship you want with your child/children (range $= 1-6$)	2.45	1.74	2.00	1.51	2.11	1.69	3.08	0.049

Overall F-statistic and p-value refer to repeated measures ANOVA with no covariates



relationship they wanted with their child(ren), we found a significant decrease in the level of agreement between Waves 1 and 3, F(2, 168) = 3.08, p = 0.049, suggesting women saw the IPV as interfering less with these relationships over time. Post-hoc paired-samples t-tests showed that IPV negatively affected women's ability to have the relationship they wanted with their children more at Wave 1 than at Wave 2 (p = 0.016), with no statistically significant differences between other points of comparison.

Qualitative

Role of mother

During the Wave 1 interview, women were asked, "How do you view your role as a mother?" Four themes emerged: provider and nurturer, teacher and discipliner, challenges in the mothering role, and importance of the role as mother.

Provider and nurturer Provider and nurturer, described by 65.53% of women (n=54), captures the participants' descriptions of their responsibility to love, protect, provide, and nurture their children. Women described an allencompassing role of providing care for their children. As one mother shared, "I'm the provider, the caretaker, the nurse, the nurturer, the hero. They depend and expect everything from me." Another stated, "I believe it's my job to make sure my children have everything they need and are healthy, happy and safe and able to be children." Several women described being both 'mother and father' to their children. Subsumed in this theme was wanting to provide their children with security, stability, and 'be there' for them. A participant reflected,

"I think I'm there to be a positive role model and their constant security. To be the one where it's safe to love in a loving environment. To show them that everything I do is for them. To help them feel loved and positive about life regardless of what we've been through."

Teacher and discipliner Teacher and discipliner was described by 22.35% (n=19) of participants. Women talked about wanting to teach their children 'right from wrong' or to be 'good people' generally, but also to teach them lessons learned from their partners' abuse. As one mother stated, "To teach her that she needs to be loved and not mistreated by anybody. And for her to learn that she doesn't need to be dependent on a man when she grows up. Not to fall into the same cycle I did." Part of teaching their children right from wrong was the need to discipline them, to "Make sure he behaves well and does well in school.

Disciplinarian first." These mothers described discipline not as a punishment but as a way of teaching their children to respect others.

Challenges in mothering role Some participants (18.82%, n = 16) described various challenges in their mothering role related to the stress of being a single parent, the impact of the IPV on their well-being, and difficulties with disciplining their children. One mother described being "always on the run" making it difficult to "sit and take time with her kids and give them her attention" because she is "always trying to make ends meet and think about what she has to do next." Another mother shared information about her emotional state, "I feel very broken but am taking the steps to remedy that. I realize it's a process, but I'm making good choices." Finally, several mothers talked about struggling with disciplining their children, needing to be "her mother more than her friend" or dealing with problems because "rules aren't the same at their dad's as they are with her."

Importance of the role as a mother The final theme related to participants' perceptions of the importance of their mothering role. Although described by only 14.12% (n = 12) of women, they provided powerful descriptions of the meaning of this role, "This role is what I live for. There is no point in my life besides being Mom. I get the most joy from being a mom.", "Most fulfilling role I have ever had. Most important role I've ever had," and, "It is my most important role, the role I care about most in my life."

Impact of IPV on role of mother over time

In Waves 1, 2, and 3, women were asked, "In what ways does the abuse you experienced from [your former partner] continue to affect your role as a mother?" Participants' responses were more varied to this question, with the same seven themes emerging in all three waves but the endorsed frequency changing for some over time (see Table 3).

Ability to be present The most prevalent theme in Wave 1 (29.41%, n = 25) for how participants saw the IPV affecting their mothering role related to factors that impacted their ability to be present—both with themselves and their children. Most participants described being unable to be present due to the physical, emotional, or mental health issues that resulted from the IPV. One mother shared, "my stress, anxiety, my depression was caused by the abuse. It affects my not being able to give my children my all. I'm easily agitated." Another mother said, "It's just been a lot, and I don't feel happy enough to play with them [her children]. I used to be with them, and now I'm not around as much." Some mothers described having "more of a temper now



Table 3 Frequencies of themes across the three waves of data for impact of ipv on role of mother (N = 85)

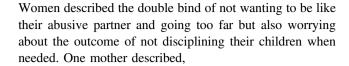
Theme	Wave 1	Wave 2	Wave 3
	n (%)	n (%)	n (%)
Ability to be present	25 (29.41)	13 (15.29)	14 (16.47)
Trouble with discipline	18 (21.18)	20 (23.53)	18 (21.18)
Overcompensation and overprotective	14 (16.47)	13 (15.29)	9 (10.59)
Learned behavior	12 (14.12)	19 (22.35)	17 (20.00)
No impact	7 (8.23)	17 (20.00)	20 (23.53)
Finding strength	9 (10.59)	5 (5.88)	3 (3.53)
Self-doubt	6 (7.06)	5 (5.88)	7 (8.23)

than before the abuse," feeling physically exhausted, and "having less patience" with their children. Some participants also described financial or work stress that limited their ability to be present with their children. A few mothers described their efforts to be positively present with their children by "compartmentalizing the abuse" to keep it separate from their parenting or being more affectionate with their children.

Fewer women identified difficulties being present with their children at Wave 2 (15.29%, n=13) and Wave 3 (16.47%, n=14), citing similar issues as in Wave 1. Yet, several mothers also spoke directly to their former partner's interference with their ability to be present for their children. One mother talked about having to have ongoing contact with her children's father, "Whole relationship in general. He's always going to be around, and it frustrates me and comes out in my parenting." Another woman described her fear of her former partner:

"I am still scared for both of our lives [self and child] at some points. I am more on edge when playing with my son because I think he [former partner] could show up at any time to hurt us. These feelings take away my ability to be an attentive, carefree mom."

Trouble with discipline Trouble disciplining their children was the next most prevalent theme described by participants in Wave 1 (21.18%, n=18), and these concerns remained stable across Wave 2 (23.53%, n=20) and Wave 3 (21.18%, n=18). Some women were reluctant to discipline their children for fear they would "hurt them or go too far." As one woman shared, "I have trouble disciplining her [daughter]. I get angry very easily." Some women were afraid of hurting their children as their partner had hurt them. One woman described her struggle as follows, "I find it hard to discipline them [her children] because I don't want them to feel the pain and emotional discomfort I felt."



"I'm always, when I discipline him [slap his hand], worried that I'm being like my ex. I'm afraid I will become abusive more than disciplining him. And I then think if I don't discipline him, he will think he can get away with everything."

Women also described feeling guilty when disciplining their children, which sometimes resulted in them being more lenient in their discipline than they wanted to be.

Overcompensating and overprotective Similar to mothers reporting leniency in discipline, mothers described both being more lenient overall and trying to 'make it up to' their children for the abuse. One mother stated, "I tend to overcompensate, trying to make up for things they've had to go through." Women's overcompensation with their children was connected to past abuse. As one woman stated,

"I always feel bad for them [her children] for the past, and I try to overcompensate for the past. I feel so sorry for them that I go out of my way to be kind to them. I don't want to make it bad for them."

The abuse women experienced also led some to be overprotective of their children, as illustrated in the following quotes: "The abuse I experienced has made me even more protective of my children," and "I'm more overprotective of my son now. I watch everything that goes on around him. I nurture him more." Some women talked about not wanting their children to find themselves in the same situation of being abused and were more careful about who they let into their family's lives. One mother shared that she is "paranoid and untrusting of men and bringing them into her kids' lives." Another reflected, "It affects me in looking for a potential father figure because I can't trust any man right now." The theme of overcompensation and overprotectiveness was described at a similar rate in the first two waves (Wave 1, 16.47%, n = 14; Wave 2, 15.29%, n = 13) and decreased slightly at Wave 3 (10.59%, n = 9).

Learned behavior

The theme of learned behavior captured women's struggles to address their children's learned behavior from IPV exposure. Women described how their children's learned behavior affected how they behaved towards them. One mother conveyed the effect in this way, "It has affected my ability as a mother because the kids saw him [former



partner] put me down. They have learned that behavior." Other mothers described how their children mimic the perpetrator's behavior. One woman shared,

"I think I made it harder because she [daughter] saw what [my former partner] did, which caused her to have bad behaviors. She heard him call me an idiot, so she still calls me that sometimes."

Another mother stated, "I feel like they don't listen to me because he didn't listen to me. By them seeing him treat me badly, they think they don't have to listen." Women also talked about their children not respecting them and feeling the perpetrator was still undermining their children's faith in them, even though the relationship had ended.

Women also expressed concerns about their children taking this learned behavior into their future relationships, and thus, they needed to correct the behavior. Some statements to this effect were, "My kids are going to see it's okay to get hit by their significant others," and, "My fear is that my son thinks it's [abuse] okay, so I work hard with him on this to teach him the abuse is not okay." Another mother shared that, "I worry about my kids seeing the abuse and my son carrying it on himself and my daughter allowing it." This theme of learned behavior was shared by 12 women (14.12%) in Wave 1, and the frequency increased in Wave 2 (22.35%, n = 19) and Wave 3 (20.00%, n = 17).

No impact Some women asserted the IPV never affected their parenting. One woman said, "It hasn't ever affected my role as a mother because I haven't let it. My children come first, and they are all I have." Another woman stated, "It doesn't. Pretty much, since he's been out of my life, I don't let any of that get to me." More women shared this perception in Wave 3 (23.53%, n = 20) than in Wave 1 (8.23%, n = 7), suggesting the impact of IPV on their mothering role decreased over time.

Finding strength A less frequently reported theme (10.59%, n = 9) at Wave 1; 5.88%, n = 5, at Wave 2; 3.53%, n = 3 at Wave 3) involved women finding strength in the aftermath of the abuse they experienced. These women described becoming "more reliant" on themselves and being determined to be a "better mom." One woman shared how the IPV "brought her closer to her daughter," and another shared, "It sort of unites you [mother and children] because you have that common ground of abuse and watch each other's backs."

Self-doubt Finally, another less frequently reported theme reflected women's self-doubt about their parenting role. This theme encompassed women feeling unsure about or second-guessing their parenting. Recounting her experience, one

woman shared, "I am less confident in myself since the abuse, so I second guess my ability to be a good mother. I fear I am not teaching them well enough, and my daughters will get in the same situation as me." Another woman talked about having to ask others to confirm her parenting. She stated, "Sometimes I don't feel good enough because he constantly put me down. So now I have to ask my mom, my therapist, and other parents for feedback on how I am doing as a parent." Another woman also doubted her decision to keep her child away from her former partner. She stated, "I'll have those moments where I don't feel like I'm doing the right thing, especially when I'm thinking about keeping her away from him." This theme of self-doubt maintained similar frequencies across each wave (7.06%, n = 6 at Wave 1; 5.88%, n = 5 at Wave 2; 8.23%, n = 7 at Wave 3).

Discussion

In this study, we considered women's experiences of mothering in the context of IPV. Specifically, we examined longer-term changes in their reports of discipline, nurturing, and parenting satisfaction, along with their perceptions of how IPV affected their role as a mother. As anticipated, on our quantitative measure, women reported a significant increase in their competence in disciplining their children over a one-year period. Women's increased confidence around discipline may be a result of women experiencing less interference by the perpetrator of IPV in their parenting decisions (Lapierre, 2009, 2010; Letourneau et al., 2007; Levendosky et al., 2000; Peled & Gil, 2011) after exiting the relationship; thus, allowing them to make more decisions and feel more confident over time. Our qualitative findings illustrate that women placed a great deal of importance on their role as teachers and discipliners. They saw this role as necessary to buffer or ameliorate the effects of their children's exposure to the IPV (Holt, 2016; Levendosky et al., 2000; Pels et al., 2015). For women who reported struggles with discipline, their primary concern was not related to their ability to discipline their children but rather about not wanting to replicate the perpetrator's behavior by going 'too far' when disciplining. Some women responded to this concern by overcompensating. They described being lenient in their discipline to make up for the abuse exposure. Women were also concerned about effectively dealing with their children's learned behavior from witnessing their partners' abuse. They described difficulties with their children listening to them or mimicking the perpetrator's behavior (Goldblatt et al., 2014; Katz, 2019). Thus, given the high levels of physical and nonphysical IPV women experienced, it is not surprising that women's concerns about the impact of their discipline on their children did not change over time.



Women parenting in the context of IPV have shown consistency in their nurturing (Letourneau et al., 2007; Levendosky et al., 2000) and a desire to compensate for the violence (Levendosky et al., 2003; Pels et al., 2015). Yet, some women report increased parenting stress and lower satisfaction (DeVoe & Smith, 2002; Renner, 2009; Renner et al., 2015). Still, the lack of significant change over time for nurturance and parenting satisfaction among women in our study was not surprising—especially given the high starting value of these two scores and how positively women spoke about their roles as mothers. Women expressed confidence in their abilities to provide for their children's emotional needs, express affection, and be there for their children emotionally. The women in our study may have reported consistently high levels of satisfaction and nurturance because they possess a high level of resilience, self-efficacy, and agency, in part due to their having left their abusive partner and sought legal services.

Through responses to open-ended questions, women in this study described a sense of responsibility to be both a provider and nurturer to their children. They provided stability and security for their children and saw this responsibility as all-encompassing. However, some women described initial difficulties being present for themselves and their children due to physical, emotional, or mental health issues that resulted from the IPV. These difficulties were exacerbated by taking on an even more singular responsibility caring for their children. Over time, their ability to be present with their children improved with distance from the perpetrator. However, some women reported that their former partners' interference continued to affect their ability to be present.

The consistent satisfaction with the parenting role over time could also reflect the importance of the role of mother being amplified in the context of IPV (Lapierre, 2009). A few women described feeling determined to be a "better mom" and more united with their children. Others found strength in being able to successfully parent since they left their abusive partners. A few women even described finding joy in parenting amid the abuse. Finally, some women did not view IPV as affecting their parenting, while others reported no IPV impact over time. Perhaps these women were not aware of the adverse effects the IPV had on their parenting. However, it is equally possible that they possessed positive coping skills and resilient characteristics that allowed them to buffer the effects of the IPV on their parenting. Women reporting the IPV as having significantly less impact on their relationship with their children from Wave 1 to Wave 2 may also be the result of experiencing less interference in their parenting role. They were freer to parent as they wanted and saw their relationship with their children as changing and stabilizing after exiting the abusive relationship.



Implications for Practice

During and after IPV, the mothering role appears to serve as a source of self-worth for women (Semaan et al., 2013). Still, our study also shows that IPV affects women's ability to parent. Peled and Gil (2011) described this as a "split narrative" wherein women devoted themselves to their mothering role but were nonetheless struggling to meet the societal expectations of mothering because of the violence (p. 471). Interventions for women parenting in the aftermath of IPV should build on the importance of the mothering role to women and the emotional nurturing strengths women possess in caring for their children during the violence.

Interventions should strengthen the mother-child relationships (Katz, 2015) and help mothers and their children learn how to 'live together differently' by establishing new rules, roles, and routines for the family (Wuest et al., 2004). Mothers may need assistance to bolster confidence in disciplining skills to directly address their children's behavior that mimics what they observed from the IPV. Interventions must also address the narratives of guilt and self-doubt they may carry after leaving their partnered relationships, specifically around discipline and overcompensating for the violence their children witnessed. Children may also need to be taught the difference between healthy and unhealthy parenting behaviors and to understand the harmful beliefs and behaviors they learned from the abusive parent (Katz, 2019). Finally, mothers experiencing IPV need mental health interventions to address the ongoing traumatic impact of the IPV to assure their ability to be present with their children.

Limitations and Implications for Future Research

Although our sample size of 85 women is larger than most of the qualitative studies on women's parenting experiences in the context of IPV, the qualitative data were part of a larger study and were limited in their level of detail. The majority of our sample was Caucasian, and almost all were low-income. Future studies should include more racial, ethnic, and socioeconomic status variation.

Most women in this study were in the process of exiting the abusive relationship, although some women had ended their relationships several years ago but were having ongoing issues with their abusive partner that prompted ILA to take their case. Thus, for women separated from their partners longer, the parenting changes they reported may have been different from the changes they saw right after leaving the abusive relationship. Future research should follow women when they first exit the relationship to capture a more nuanced understanding of how women's

parenting changes immediately after leaving an abusive relationship.

Future research on women's parenting changes should also consider if women are still being abused or if their former partners are interfering with their parenting through shared custody arrangements. Although only some women in this study reported their partners physically harmed them during the study period (24.71% at Wave 2 and 12.94% at Wave 3), over half of the women (58.82%) reported unwanted contact or being bothered by their former partner at Wave 2 and 35.29% at Wave 3. Future research also needs to examine women's mental health and perceived parental competence as possible confounding variables.

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Compliance with ethical standards

Conflict of interest The authors declare no competing interests.

Ethical approval Permission for the study was obtained from the University of Iowa Institutional Review Board (201105785). Before the first (Wave 1) interview, we obtained written informed consent from each woman who participated in the study. All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

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