Intimate Partner Violence: advocates expertise on the complexity of maternal protection

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Abstract

For a long time, this country has pulled curtains and closed doors and said I don’t want to know. Now we are willing to put the microscope on ourselves and not put the blindfold on our statistics.

(Stacey Pepene, Women’s Refuge National Training Coordinator, 2017)

Intimate Partner Violence is a pervasive and insidious epidemic within Aotearoa New Zealand with one in three women experiencing psychological or physical abuse by their partners in a lifetime. The National Collective of Independent Women’s Refuges (NCIWR) seeks to prevent and eliminate violence and in doing so liberate women abused by their partners. This research is a contribution to the gap in psychological research which calls upon the expertise of refuge advocates from a feminist standpoint and additionally adds to valuable production of knowledge from a New Zealand context. The aim was to explore how advocates perceive and understand mothering and maternal protection in the context of intimate partner violence and moreover how advocates’ understandings impact their experience of client protection. A qualitative, thematic approach opened a space for advocates to voice their experiences and importantly challenge the socio-political landscape which maintains a focus on women’s responsibility as protectors, opposed to perpetrator accountability. Societal expectation of mothering does not take into account the context of intimate partner violence and as mothers fail to meet expectations, notions of mother-blame are ascertained. The analysis identified three major themes: The first theme concerns the severity of perpetrator harm and the direct interruption intimate partner violence has on mothering; shaping and complicating mothering. The second theme identifies a multitude of factors mothers juggle to protect their children within the context of intimate partner violence. The final theme involves understanding the mode of survival in which women come to live, how women navigate fundamental support systems, and finally how the role of the advocate is pivotal for the safety of women and children. Overall, findings showed an alignment between the expertise of advocates and existing international research.
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To my friends who I have laughed and laughed with, may the humour continue to keep us sane during such a deep and intensive study regime but most importantly through the fight to generate change for the lives of women and children. Thank you.
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CHAPTER ONE: Introduction

Family violence affects more than 20,000 New Zealand children every year, and it is essential that they are cared for correctly.

(https://www.facebook.com/womensrefugenz/)

Intimate Partner Violence and Positioning the Researcher

My inspiration for conducting this research emerges from personal, professional and academic experiences. From recollection, my growth as a feminist began in my teenage years. I was acutely aware of the privileged life to which I was born within deep seated western values and beliefs. My parents’ strong conviction of the value of education opened space for my critical thinking and questioning my surroundings. My parents believed an education would provide me with the necessary tools to continue my curiosity and thrive to learn, so attending a prestigious private, single sexed school paved the way in my learning journey and nurtured my parent’s confidence that a private education would aid future success. It was within the bounds of this prestigious school that I came to understand the value of healthy and mutually respectful relationships and how intimate partner violence (IPV) cuts across social classes; the wealthy are not immune and the poor are not infested.

I recall my first experience of IPV as a witness; a teenage girl shocked by the physical and verbal harm perpetrated against a friend’s mother. Behind the regal steel gates and the manicured tree lined drive of a Tuscan manor, I would not have dreamt that such destructive actions were possible. This incident sparked my curiosity about relationships, particularly in terms of power and control. My father’s role modelling and the loving relationship he had with my mother were so far removed from what I had witnessed. My experience forever changed the rose-tinted glasses I was accustomed to wearing. My eyes were open and this was a significant turning point in how I perceived relationships but more importantly, how power and control manifested within relationships.

Into my adult years accompanying my growing and strong voice of feminism, I also became a mother. From this point I was discernibly aware of my role and the expectations
placed on me. My mother showed strong traditional values and took a much gendered stance within the home and she held the same expectations for me; my career was to take a backseat and children were to be my priority. Although I had exceptional role models as parents growing up, I was not to experience the same mutually respectful relationships. My feminist voice was trampled and there were struggles to maintain societal expectation of the two-parent family as ‘best’ and meet expectations of the consummate mother. I did fall short on all accounts. Conversely, my career flourished.

Today, within my professional capacity I entrench myself within communities; collaborating and coordinating government contracts to make positive change in the lives of others. My own community is an example where wealth and rural isolation creates a recipe for societal destruction. The world of IPV is real and for women and children wealth does not make them immune. Some areas of the community are extremely isolated with no access to the internet or public transport. Local economy is highlighted by the wealth of three global industries; dairy farming, oil, and gas. Conversely, wealth brings opportunity for the volume of drugs produced, consumed or distributed and more specifically wealth does not necessarily bring mutual respect to a relationship. Counter to stereotype, the heterosexual married couple with three children who are educated Pākehā living in a large expensive property with earnings well above the national average is the family impacted by IPV in my community.

A particular image that comes to mind easily is a mother lying sprawled on the kitchen floor with her teeth protruding her jawline. Three children between the ages of twelve and eighteen continue to watch their regular evening television program while waiting for paramedics to arrive. Paramedics are first to report that this incident is not an accident. Police are called and the children appear completely desensitised to what has happened to their mother. The perpetrator is their father, an educated man reaping the rewards of his profession, who has left the house for work. This mother spent a considerable amount of time hospitalised. She and her children, along with the many other women and children in my community who I’ve worked with and for, have inspired this research.
**Feminist Standpoint Epistemology**

This thesis draws upon feminist research principles arguing knowledge is incomplete without being situated in place and time and exemplified by social and cultural constructions. Feminist epistemology identifies the way in which knowledge is created through dominant ideologies and disadvantages women (Kralik & van Loon, 2008). Feminist epistemologies challenge the construction of power and social positions to re-shape our understanding and ultimately aim to improve the situation for women (R. Campbell & Wasco, 2000; Kralik & van Loon, 2008). It is the aim of this research to develop an understanding of advocates’ perspectives of the complexities of maternal protection in an IPV context and so through the principles of feminist epistemology create a deeper understanding and ultimately explore the themes of mother blame, expectation and perpetrator accountability as highlighted in the literature. However, there is no single feminist principle applied to a way of knowing as context plays an important role; for example, many understandings of the same participant can be reflected by a participant’s location to or relationship with the researcher (Kralik & van Loon, 2008). Furthermore, feminist epistemology is not a set of rules but is an approach which informs, challenges perspectives and creates accountability between our thoughts and our behaviour. As such, the appropriateness of the National Collective of Independent Women’s Refuge advocates as participants is aligned with the intent of this research to capture and make sense of their views; raising consciousness which results from women’s perspective (Kralik & van Loon, 2008; Riger, 1992).

**Research Objectives**

The purpose of this thesis is to understand how advocates of the National Collective of Independent Women’s Refuges understand the complexity of mothering in the context of IPV. In particular, this thesis draws upon the expertise of advocates to question how the impact of intimate partner violence shapes mothering. How do the understandings of advocates impact their experience of client protection/mothering in the context of intimate partner violence? Importantly, this thesis aims to identify how advocates challenge notions of mother-blame, societal assumptions of women’s responsibility and expectations to protect their children and lastly, the significant lack of perpetrator accountability.
Research Overview

To understand the complexities of mothering and maternal protection in the context of IPV, Chapter Two reviews historical and current literature on intimate partner violence and the profound harm impacted on women and children, globally and nationally. In Chapter Two, the reviewed research unpacks societal expectations of mothers and the ideology of the social construction of mothering, including how mothers are expected to protect their children. The notion of mother-blame and the act of pathologising women who fail to protect their children is also illustrated. Within this chapter I discuss a feminist standpoint with regards to accountability; projecting a shift in focus from a mother’s responsibility to protect her children to perpetrator accountability. The chapter concludes by questioning who in terms of service provision is best equipped to respond to IPV. Chapter Three identifies and examines the literature on service providers in the field of IPV globally, in particular provision within the New Zealand social service framework, focusing on the National Collective of Independent Women’s Refuges, their role and responsibility. Finally, given the sparsity of research on advocates and their crucial role in supporting women and children who experience IPV, they are acknowledged as experts within the field and their expertise is sought to address questions about understanding maternal protection of children in the context of IPV. In Chapter Four I discuss the methodology I used including the research design based on feminist standpoint epistemology and both ethical and bi-cultural considerations of the study. The final section of chapter four discusses a narrative-thematic approach to analysis and my reflexivity as the researcher. Chapter Five is the first of three analysis chapters and illustrates the theme of interrupted mothering in the context of IPV. The theme covers ‘good’ versus ‘bad’ mothering and identifies the social expectations of mothers and how women protect their children in the adverse circumstances of IPV. Notions of mother-blame and responsibility to protect conclude this section of the analysis. In Chapter Six, I analyse advocates narratives of the complexity of the IPV context and the degree to which women juggle a multitude of factors in order to protect their children. Chapter Six also gives a clear illustration of the harm perpetrated against women and children in the context of IPV. Discussing the ill-equipped, unprepared and ineffective responses of social service providers (the system) and the negative impact this has for women and children concludes this chapter. The final analysis chapter, Chapter Seven, discusses the mode of survival which
women operate in the context of IPV and argues the types of supports needed; in particular the importance of the role of refuge advocates as experts in the field, holding both knowledge and understanding of women, their children and the overall complexity of mothering and maternal protection in the context of IPV. The thesis concludes with Chapter Eight where I review findings of the research in the context of the research goals.
CHAPTER TWO: Understanding Mothering in the Context of Intimate Partner Violence

“I don’t think I was in the best state, I was broken, I was a mess. He’d brought me to the point where I thought there was nothing else out there for me, I couldn’t get any further. I was on a destructive path of self-hate.”

(International Violence Resource Center)

Intimate Partner Violence

Intimate Partner Violence (IPV) is the physical, emotional, verbal, economic and sexual abuse by a current or former partner causing significant social and health problems across society, regardless of age, ethnicity, education, religion, spiritual or socio-economic status (Izaguirre & Esther, 2014). IPV has previously and remains predominantly an issue kept behind closed doors; putting IPV on the agenda for Government and communities is paramount (Nicholls & Hamel, 2015). The socio-political climate of the 1970s was the era where IPV was largely first exposed and societal discourse began opening burdensome societal wounds and, moreover, the nature of relationships became focus; how relationships were conducted, what was deemed healthy or dysfunctional (Nicholls & Hamel, 2015). Historically IPV was considered a marital issue; comparatively a wide range of contemporary literature shifts focus to a more inclusive approach; inclusive of partners, ex-partners, boyfriends but specifically whether or not partners were married (Nicholls & Hamel, 2015).

The World Health Organisation (WHO) states IPV is the immediate and long term cause of multiple poor health outcomes including mental health issues such as anxiety and depression as well as physical ailments such as gastrointestinal and chronic pain disorders (García-Moreno, Jansen, Ellsberg, Heise, & Watts, 2005; Organisation, 2002; Organization, 2013). Aside from poor health outcomes the social and economic impact is also accentuated; higher rates of unemployment among victims and the flow on effect of economic stress (García-Moreno et al., 2005). More alarming is the significant impact IPV has on women and children. Women are the largest cohort impacted by IPV; this includes all ethnicities, lesbian
women, women with disabilities and older women (García-Moreno et al., 2005). Rates of disease and death of women who are victims to IPV are significant (Bastos da Silva, Cocco da Costa, dos Santos Colomé, & Souza da Silva, 2013). Likewise, IPV complicates reproductive organs, birthing procedures and is associated with premature labour. Women who experience IPV have significantly increased rates of overall healthcare use in comparison to women who have not experienced IPV (Stockman, Hayashi & Campbell, 2015). There is ample evidence marking women as the largest cohort of victims suffering at the hand of a partner, ex-partner or family member ex-partner (González Cases et al., 2014). Moreover, the statistics are alarming. The World Health Organisation (WHO) “estimates that for 38% of the homicides of women worldwide, the perpetrator is a partner or ex-partners” (cited in González Cases et al., 2014, p. 842 ; Nicholls & Hamel, 2015). Importantly, IPV is a global issue, a public health problem, and preventable.

Statistical evidence on the prevalence of IPV is often debated within the literature due to the growing concern of unreported cases. Recently, national statistics obtained from the New Zealand Family Violence Clearing House [NZFVCH] (2017) report New Zealand Police (NZP) attended 110,114 family violence investigations in 2016. A study by Fanslow and Robinson (2011) investigated types of intimate partner violence (sexual, physical, emotional, and psychological) and the prevalence for women in a twelve-month period. A large sample size (2674), randomly selected between the ages of 18 and 65 from the largest populated city in New Zealand (Auckland) reveals alarming results. Data showed 55% of women had experienced at least one type of intimate partner violence but more significantly 32% had experienced more than one type (Fanslow & Robinson, 2011). These results coincide with estimates of 76% of incidences not reported to New Zealand Police (Clearinghouse, 2007).

Overall statistics show the prevalence of abuse perpetrated against women is both appalling and distressing. It is assumed these statistics reflect potential direct harm on mothering and heightens the complexity of maternal protection; hence this research sets out to explore how the impact of IPV specifically shapes mothering from the perspective of advocates and furthermore explore how advocates understand the complexity of maternal protection.

Mothering is an important and challenging role; however, within an IPV context the level of difficulty, demands and complexity is heightened. Typically, the IPV context is chaotic showing increased hypervigilance, physical abuse and stress over time. In the literature on IPV, understanding of the IPV context are linked with the concept of coercive control, which
informs currently proposed changes to legislation designed to protect victims in Aotearoa, New Zealand (New Zealand Parliamentary Service, 2017). “Coercive control entails a malevolent course of conduct that subordinate’s women to an alien will by violating their physical integrity (domestic violence), denying them respect and autonomy (intimidation), depriving them of social connectedness (isolation), and appropriating or denying them access to the resources required for personhood and citizenship (control)” (Stark, 2007, p. 15). Perpetrator physicality is characterised by extreme aggression, extreme agitation as well as physical acts of punching, hitting, verbal and sexual abuse (Krane & Davies, 2007; Romero-Martínez, Moya-Albiol, & Lila, 2016). Survivor stories of living through IPV often liken the abuse to facing death (Lewis, Henriksen, & Watts, 2015). The degree of complexity is shown statistically amongst the marked rates of stress in women and the overwhelming level of perpetrator needs that women are forced to address and consequently entrapped within the intimate relationship (Letourneau et al., 2011; Stark, 2007). Studies by Peled and Gil (2010, 2011) agree mothers are faced with a continuous struggle, the challenges are unique and abusers are characterised as harsh, authoritative and premeditative.

A large body of literature reports abusers undermining a mother’s role, using controlling tactics such as creating continuous pressure, manipulation, consistently criticising mothering abilities or making accusations of being a bad mother (Krane & Davies, 2007; Lapierre, 2010a). Moreover, the demands of perpetrators far outweigh the needs of both women and children further compounding the harmful circumstances in which women are mothering (Lapierre, 2010a; Letourneau et al., 2011). Mothers experience adversity through conflict, violence, financial strain, emotional stress and an overall desire to function on a day to day basis; caught between a rock and a hard place, juggling exhaustion and analysing methods of control from the abuser in an attempt to keep themselves and their children safe (Krane & Davies, 2007; Lapierre, 2008). Specifically, women are stretched between the demands of the perpetrators and responding to the needs of their children (Lapierre, 2010b). Mothers are “forced to care for children under conditions of a continuous terrorising relationship that eventually depletes their physical, emotional, social and material resources” (Peled and Dekel, 2010, p. 1225).

Mothering is interrupted by IPV, with much energy spent on protection strategies and overall assurance of the safety of children (Letourneau et al., 2011). A study by Peled and Gil (2011) demonstrates this point through examining the perceptions of women mothering
within an IPV context; mothers prioritise the protection of their children and attempt to provide daily normality as if the abuse does not occur. Mothers have an ability to deal with the demands of the abuser and the needs of the children, and often these needs are narrowed solely to concerns of protection (Lapierre, 2010b). A mother’s ability to juggle the complexities of an IPV context is characterised within some of the literature as organisational excellence and resourcefulness (Campbell, 2002; Lapierre, 2010b).

The complexities and demands of mothering in the context of IPV are well established however some literature assumes the context of IPV leads to maternal deficits. This research argues the deficits in mothers’ parenting are due to experiencing victimisation. Numerous studies focus on the therapeutic intervention and parenting intervention for mothers and children who are victims of IPV aiming to restore the mother-child relationship and decrease distress. However, few studies investigate the treatment of and intervention for the father-child relationship. Overall, mothers victimised by the impact of IPV are often seen to suffer low self-esteem and confidence which interferes understandably with parenting skills, such as setting boundaries (Strand, Jutengren, Kamal, & Tidefors, 2015). Casanueva, Martin, Runyan, Barth, and Bradley (2008) argue that “we should not assume that being a victim automatically diminishes parenting ability” (p. 534). There is no empirical evidence that abused women are careless or deficient mothers in comparison to non-abused mothers (Peled & Gil, 2011). Women fear the escalation of violence and so create strategies to reduce harm and continue a perception of family cohesion (Fleury-Steiner, Miller, Maloney, & Postel, 2016). Research shows the IPV context is complex and the stressors related to mothering and maternal protection is extensive however against all adversities women take the responsibilities of protecting their children seriously even though protection and mothering are often compromised by the actions of an abusive partner (Krane & Davies, 2007; Lapierre, 2010a, 2010b; Peled & Dekel, 2010). Krane and Davies (2007) advocate for a greater appreciation of mothers and the demands they face.

The complexity of mothering post-separation from abusive partners has also been studied. Societal assumption claims IPV can only be resolved by leaving. Research acknowledges that separation or leaving is not necessarily the solution to the difficulties but conversely can create further and on-going abuse (Lapierre, 2010b; Moulding, Buchanan, & Wendt, 2015; Weisz & Wiersma, 2011). Global research warns the aftermath of a relationship is as complex and post-separation violence is heightened (Lapierre, 2008; Peled & Gil, 2011).
An example of the impact of separation is an increase in financial strain such as legal and living expenses further marginalising women and children (Douglas & Walsh, 2010; Riger, Staggs, & Schewe, 2004). Additionally, separation may involve re-locating to escape abuse resulting in unfamiliar surroundings and limited networks of support. Mothers report that optimal mothering, in terms of direct emotional availability to their children, can only be improved in the absence of violence placing women in a volatile catch-22 position (Peled & Gil, 2011). The process of a woman leaving the abusive relationship is another factor which heightens the complexity of IPV for mothers.

How service providers or professionals in the field of IPV perceive a mother’s response to complex circumstances is pivotal (Douglas & Walsh, 2010; Hartwig; Wathen, Harris, Ford-Gilboe, & Hansen, 2015). Literature acknowledges professionals need to validate and reassure mothers, commending efforts within difficult circumstances. Importantly, emotional support, free of judgement and compassion, is required (Letourneau et al., 2011). Yet a deficit perspective has been found amongst professionals working within a women’s shelter (Peled & Dekel, 2010). Although the participants understood that their clients’ victimisation was implicated in deficiency, mothers were still described as ineffective, self-centred, indifferent, and loveless. A notion of mother-blame is prevalent amongst social service providers claiming mothering lacks empathy (Letourneau et al., 2011). Beyond doubt mothering is both complicated and compromised within an IPV context. Hence the argument of good versus bad mothering is created (Izaguirre & Esther, 2014; Lapierre, 2010a, 2010b).

**Mothering: good, bad or deficient**

The complex context of IPV mothering is not well understood (Hooker, Samaraweera, Agius, & Taft, 2016). Appreciation of the issues mothers face is complicated by societal expectations of mothers more generally. During the mid-1970s, Russo (1976) characterised the epitome of motherhood, as those having two children and an innate ability to raise children correctly. Furthermore there is a societal responsibility for women to mother and an obligation to fulfil this role to a given standard termed the “motherhood mandate” (Russo, 1976, p. 146). Society traditionally ascribes the role of wife and mother with a set of traits established as ‘womanly’, such as being passive and conforming (Russo, 1976). Society reinforces the role of women through examples in the media and directly within the family
Overall, society has constructed a prescription of what is an expected norm for women and, furthermore, what qualities, skills and practices constitute good mothering and bad mothering. Contemporary research by Nixon, Radtke, and Tutty (2013) state “a woman who is not a mother (unable to bear children) is not a complete woman… positioned as deficient” (p. 176). Elizabeth, Gavey, and Tolmie (2010) affirm mothering is still based on societal norms; thus, caring and protecting children within an IPV context is a “non-negotiable moral obligation” (p.257). Mothering does play a critical role in the development of children (Tailor & Letourneau, 2012). So, what are the outcomes or implications for women when societal norms are not met and subsequently how is mothering impacted by IPV?

The impact of IPV on the relationships between mother and child is debatable (Buchanan, Power, & Verity, 2014). There are two schools of thought amongst the literature; (1) mothering is directly and significantly impacted by IPV and (2) IPV has no significant impact on mothering. There is generous evidence to support either sides of the debate. The negative impact of IPV on relationships between mothers and their children is based on attachment theory and argues that abuse influences the types of attachments formed between the mother and her child(ren) (Tailor & Letourneau, 2012). Attachment theory discussed by Bandura (1977) differentiates between secure and insecure attachments in mother/child dyads. In summary, secure attachments show warmth and sensitivity to the child’s needs and when the child is separated from the mother, the child develops secure coping mechanisms. On the contrary insecure attachments within mother/child relationships show a lack of warmth and sensitivity to the child’s needs and thus a lack of coping mechanisms (Tailor & Letourneau, 2012). Attachment theory is based on the premise that a secure attachment is pivotal to early child development and more specifically secure or insecure attachments are the result of mothering (Buchanan, Wendt, & Moulding, 2015; Tailor & Letourneau, 2012).

Strong feminist critique argues attachment theory places responsibility and expectation on women alone while minimising the responsibility of others, especially fathers and other men in children’s lives. Furthermore, feminist perspectives argue the attachment between mothers and their children is socially constructed and there is an assumption that these relationships are determined biologically (Knudson-Martin, 2012). A longitudinal study by Birns (2009) challenges the assumptions of attachment theory. The study entailed
observations of infants with multiple members of family under varying conditions. Results showed infants were equally attached to fathers and grandparents in contrast to a sole focus on the mother.

A study by Tailor and Letourneau (2012) investigates the role of mothering and the relationships between mother and child in the context of IPV. This study involved extensive psychometric testing with 44 mother-child pairs. Findings reported women who had experienced IPV showed less warmth and sensitivity resulting in a lesser degree of secure attachment with their children and in turn placing children at a greater level of vulnerability to insecure attachments (Tailor & Letourneau, 2012). Arguably, ‘significant others’ in the child’s life or wider family connections are absent from the study again shifting focus for mothers to uphold responsibility. Another criticism concerns the exclusively quantitative approach where the absence of women’s lived experiences and their voices the women prevents a richer understanding.

A study by Buchanan et al. (2014) examined the relationships between mothers and infants within an IPV context. The cohort of 16 mothers reported their limitations and barriers to forming secure attachments with their babies, such as not having a quiet space to connect, but more specifically feelings of exhaustion, that impacted motivation and was a significant factor hindering time spent with their babies for the purpose of attaching. As with the study by Tailor and Letourneau (2012) who propose mothering as the single most influential predictor of vulnerability in children from abusive families, this study fails to take into account the role of the perpetrator and once more reproduces societal expectations and responsibility onto women.

Few studies have examined the relationships between mothers and their children into adulthood within the context of IPV. Chanmugam (2014) analysed mother-teen relationships in the context of emergency domestic violence shelters. Results showed young people’s perceptions of intimate relationships were skewed where violent relationships were both accepted and tolerated. Another finding showed teenagers sought to be the emotional stabiliser and confidant of their mothers where essentially the role of parent and child were reversed. Overall, Chanmugam (2014) concluded relationships are complex and when stress intervenes through the context of IPV then mothering is negatively impacted.

In summary, a large body of research asserts mothering in the context of IPV impacts the mother-infant relationship, the mother-child relationship, and moreover mother-teen
relationships negatively (Buchanan et al., 2014; Chanmugam, 2014; Hooker et al., 2016; Tailor & Letourneau, 2012). However, the literature often fails to acknowledge a feminist standpoint which consistently draws attention to social constructions of the expectation of mother-child relationships and consequently shifts the focus to fathers, other family members and more pertinently in the context of IPV, perpetrators.

The second school of thought discusses the notion that there is no impact to the mother-child relationship despite the adverse circumstances of IPV. As Casanueva et al. (2008) explains, women may endure on-going abuse with little or no impact on their mothering ability; however the assumption prevails that exposure to IPV directly impairs mothering. Casanueva et al. (2008) assert a common perception of mothering within the context of IPV deserves an unbiased appraisal. Mandatory programs for women assume women are unfit maternally and there is little acknowledgment that when support is given, “the experience of motherhood is enhanced” (Hooker et al., 2016, p. 92). A study by Levendosky, Lynch, and Graham-Bermann (2000) examined the stories of 95 women with children in the context of IPV. Findings showed 19 women associated their IPV experience as having a positive impact to mothering and 23 women reported there was no impact to their mothering. More specifically, results are equivocal with some reporting enhancement to their mothering and others reporting negative impacts (Levendosky et al., 2000).

Despite mothering and the role of women being central to these debates, research frequently adopts gender-blind terms such as ‘parents’ and ‘parenting’ and more importantly hides the differing expectations placed on women in comparison to men (Lapierre, 2008). An example is in the work of Keeshin, Oxman, Schindler, and Campbell (2015). They review a parent training program for mothers and young children residing within a domestic violence shelter. Results showed women displayed harsher parenting styles and overall had greater parenting obstacles to overcome. Women reported the program to be a safe place to share and express their feelings but overall their ability to parent was under scrutiny.

Fundamentally the research purports to focuses on ‘parents’ and ‘parenting’ yet arguably hones in on the inadequacies of women and their mothering. Attention remains on women’s failures and flaws as mothers in the context of IPV when conclusively attention is shifted from the cause of the issue in the first instance – the violence perpetrated by fathers (Lapierre, 2008).
The growing tendency for research to put women’s failures as mothers into the spotlight is referenced as the “deficit model of mothering” (Lapierre, 2008, p. 457). A large body of knowledge discusses ‘quality’ mothering, what the expectations of a quality mother looks like, and how quality mothers behave (Izaguirre & Esther, 2014). Within an IPV context, research by Wendt, Buchanan, and Moulding (2015) accentuates quality mothering as lessening the impact of violence and using strategies which act as a buffer between children and the IPV experienced in their home. Buchanan et al. (2014) emphasise quality mothering as provision of care, protection and responsiveness to children’s needs with specific attention to minimising harm. The deficit model of mothering is the consequence of the social construction of women and the level of expectation that prevails within society.

Another focal point of the literature is the notion of striving to be a good mother (Lapierre, 2010a). Good mothers are socially understood as those who maintain a functioning household, stay at home, spend time with their children and protect their children under difficult circumstances (Lapierre, 2010b; Russo, 1976). However, recognition of a good mother is a western social construction and can readily be disrupted by the interventions of social services eroding the good mother image (Peled & Gil, 2011). Krane and Davies (2007) explain the notion of the good mother is a myth and the research which finds deficits in women’s mothering skills in the context of IPV fails to acknowledge their stressful circumstances. Moreover, behaviours such as expression of negative emotion, which have been used to characterise mothering deficits, cannot be rationalised as a vulnerability or flaw to mothering because of both the intensity and severity of a mother’s victimisation (Krane & Davies, 2007; Strand et al., 2015). Service providers and professionals in the field of IPV also operate under the umbrella of assumptions fitting with the deficit model (Lapierre, 2008). An example is shown in a study by Nixon et al. (2013) where child protection services intervene because women are considered incompetent to protect their children.

The deficit model emphasises women’s deficiencies and the good mother highlights an unachievable expectation of mothering. Lapierre (2008) maintains an urgency to shift focus from deficiencies to competencies in mothering within the IPV context. Peled and Gil (2011) support the notion that women impacted by IPV develop a set of effective skills and conversely literature is inclined to highlight existing stereotypes neglecting to honour the complexity of an IPV context. The reality of IPV is complex so there is no surprise women fall short of the expectations encroached upon them and the rise in the notion of the bad
mother is simply a consistent reminder of an unachievable standard of mothering for women to meet (Lapierre, 2008; Strand et al., 2015). Mothers exposed and experiencing IPV face challenging circumstances and so the optimal mothering experience is compromised (Peled & Gil, 2011). IPV interrupts the mothering experience and as a consequence multiple needs are exposed (Letourneau et al., 2011). Thus, women subjected to IPV need to accommodate a range of complexities involved with their victimisation, as well as a lack of support systems and extensive criticism from social networks and family members (Letourneau et al., 2011).

The literature is extensive when investigating the negative repercussions and implications for women who display an inability to conform to social expectation (Elizabeth et al., 2010). One of the implications for mothers who do not meet expectation is the unfolding of the notion of mother blame and/or pathologising mothers as a result of highlighted flaws and inadequacies.

**Blame and Pathology**

There is a tendency for the literature to frame mothers only as victims which subsequently ensures that debilitating consequences of IPV are central to how the mother is portrayed. For example, a qualitative study by Tailor and Letourneau (2012) characterise mothers within IPV circumstances as helpless victims. Yet in other contexts, mothers are characterised as responsible and blameworthy. Comments from a retired judge maintain the judicial system minimises harm inflicted by the perpetrator and furthermore blames mothers for an inability to protect their children (Fields, 2008). Mother blame is emphasised in a study by Letourneau et al. (2011). Findings suggested mothers drew criticism and blame from friends and family members as well as perpetrators.

Mother blaming is socially validated and studies show that social service intervention in the aftermath of IPV also points blame towards mothers through mandating parenting programs, courses and workshops (Nixon et al., 2013). Through mandating parenting programs there is an overarching perception that women are responsible for deficits in their parenting skills. Overall, focus remains on the women and thus the problem is defined as ‘theirs’ (Nixon et al., 2013). The discourse of mother blame is evident in a study by Elizabeth et al., (2010) of women and children exposed to IPV. Participants showed children were more likely to grow up and continue the cycle of blame by blaming their mothers for any harm.
inflicted. Nixon et al. (2013) argue women who experience IPV gain heightened stress which in turn endangers the wellbeing of their children. Literature does not necessarily deny the complexity of the situation or the level of stress women feel however there is little recognition of the direct cause of stress and carelessly blame is aimed at women solely (Elizabeth et al., 2010; Nixon et al., 2013). Despite fathers being the single cause of harm, mothers are to the blame for any detriment imposed on the well-being of their children (Elizabeth et al., 2010). Of the 21 women interviewed in the midst of a custody dispute findings showed women were blamed for being hostile and alienating and there was a significant lack of recognition for a women’s positioning or for the experiences of abuse that had made significant impact. Instead women suffered a constant battle to justify their actions and behaviour (Elizabeth et al., 2010).

A large body of knowledge reports the negative health impacts for women and children who experience IPV (Elizabeth et al., 2010; Lapierre, 2008; Letourneau et al., 2011). Consequently, there is a tendency to label mothering behaviour patterns and pathologise women who have been victimised. Jaffe, Cranston, and Shadlow (2012) categorise mothers into three distinctive mothering behaviour patterns subsequent to abuse: permissive, authoritarian and authoritative. Similarly, Letourneau et al. (2011) categorises women as permissive, controlling and hypervigilant. The impact of IPV is undoubtedly severe and there is some evidence to show positive outcomes when women accept mental health diagnoses or intervention (Prosman, Wong, & Lagro-Janssen, 2014). Both Jaffe et al. (2012) and Prosman et al. (2014) report a mother’s psychological strength is compromised and in turn impacts the children illustrating both pathology of women and mother blame. On the contrary, Fields (2008) supports the findings of Lapierre (2008) that mental health rates showed no significant difference in comparing women who suffer the impacts of IPV to the general population of women.

Pathologising women is a direct attempt to focus on the deficits of women and although the impact of IPV is a controversial debate amongst the research, this focus shifts attention from the actions of men to women’s failures as mothers (Lapierre, 2010a). The full scope of the implications of mother blame is not clear within the literature, however categorising women does provide a deficit approach, failing to acknowledge the strength and resilience of all women (Lapierre, 2008; Stewart & Vigod, 2017). Jaffe et al. (2012) agree that contention remains over the emphasis on women and the consistent detracting away from
the violent behaviours of men who are the cause of IPV in the first instance. In summary, the implications of categorising mothers reproduces notions of mother blame and constrains women into a one-size fits all approach that ultimately does not measure up to societal expectations of women as mothers?

**Maternal Protection**

Children are predominantly dependent on their mothers and more so as infants. Generally, mothers form strategies to protect their children as they grow such as baby-proofing the house to reduce accidents or supervising a child at the playground or in the backyard (Power & Hill, 2008). So what does maternal protection mean in the context of IPV and how do mothers strategies to protect their children play out in adverse circumstances? Levendosky and Graham-Bermann (2001) agree the environment of IPV is complex however they argue complexity should not be correlated to a mother’s ability or inability to protect. Similarly (Lapierre, 2008; 2010b) acknowledges an IPV environment is complex and often hostile but mothers should not be blamed for failing to protect their children. He argues that what is needed is a shift from the responsibility of mothers to protect, to a focus on fathers’ responsibility for harm that remains largely ignored.

Research simplifies the issue of maternal protectiveness in the context of IPV as a matter of either staying or leaving the relationship with the perpetrator of abuse (Buchanan et al., 2015). The issue of staying or leaving is not easily resolved and the implications of post-separation abuse are many. An example of a more nuanced approach to maternal protection is reported in a study by Moulding et al. (2015). Interviews involving nine women and 16 children who lived within and grew up in the context of IPV captures their perceptions of maternal protectiveness and how mothers safeguarded their children from the abuser. Six themes of maternal protectiveness emerged: (1) mothers made every attempt to maintain a distance between the abuser and the children; (2) mothers made every attempt to keep the abuser calm, meet his needs and pacify any conflict; (3) mothers made every attempt to reassure the children that they were loved; (4) mothers jeopardised their own safety for the sake of their children’s, taking the blame for any issue of conflict, such as not cleaning the house; (5) speaking about the violence was discouraged; and (6) mothers planned ahead for the safety of the children such as staying at friends’ houses and participating in extra-
curricular activities to keep them away from the house. Similar studies by Bhandari, Bullock, Anderson, Danis, and Sharps (2011) recognise mother’s protective strategies such as keeping the abuser calm, safety planning, connecting with outside activities or employment, and enduring violence rather than allowing abuse to affect their children.

Mothers attempt to care for their children as if the abuse does not exist and maintain their mothering abilities under complex circumstances (Peled & Gil, 2011). Women put their children first so as to protect, to care and to enact every measure they can take to decrease the children’s exposure to violence. Maternal protectiveness is a perpetual and unrelenting process by way of constantly creating an environment as free as possible from violence so that some sense of normality remains for children (Lapierre, 2010a; Wendt et al., 2015). Studies by Alhusen and Wilson (2015) found similar results to Buchanan et al. (2015) with pregnant mothers living in the context of IPV. Mothers took numerous measures to protect their unborn child such as deflecting from the escalation of violence by walking out or giving space for the perpetrator to calm down. Mothers changed their approach towards perpetrators and how they responded in conversation and prioritised the safety of the unborn child over their own. IPV during pregnancy affects both the mother and the baby. These protective strategies are used in a context where a variety of pregnancy complications are caused by IPV, such as reproductive infections, haemorrhaging and in some cases fatality of either mother, infant or both (Grier & Geraghty, 2015).

Bhandari et al. (2011) looked at the protective processes mothers undertook in the context of IPV living in rural and low-income households. To add to the complexity of IPV mothers in rural settings bear greater barriers than women in urban settings; such as geographical isolation, lack of medical support for injuries, no transport and a lack of general social supports. Findings showed mothers used more emotional strategies such as denial and minimising harm in order to maintain privacy within a small community and they distanced themselves from the abuser by moving belongings and gaining employment. Additional factors such as closeness of relationship between the abuser and support professionals like police created a larger wedge for enabling safety planning or protection (Bhandari et al., 2011).

The ultimate protection strategy is often assumed as leaving the relationship and across much of the literature mothers who choose to stay are judged as un-protective. Women who do not leave are viewed as making poor choices for the safety of their children
Little consideration is given to the fear mothers face of the consequences should they leave, thus, many stay in fear (Moulding et al., 2015).

Terminating an abusive relationship appeared to be the best solution when protecting both an unborn child or children in studies by Alhusen and Wilson (2015) and Keeling (2012) respectively. Arguably here too, an assumption remains that leaving fixes the problem (Buchanan et al., 2015). Yet, there is considerable research that illustrates the increased risk to safety and the continued abuse for mothers and children when they leave (Buchanan et al., 2015; Coy, Scott, Tweedale, & Perks, 2015; Elizabeth et al., 2010; Harrison, 2008; Nixon et al., 2013). In many instances women leave the relationship for the safety of their children but then return as the implications of leaving bear greater stresses such as inability to find employment, financial constraints, solo parenting and no social supports; mothers may also believe it is necessary to have a father in the life of the child (Bhandari et al., 2011; Moulding et al., 2015).

Other issues that come to the fore after leaving involve custody disputes and contact arrangements. A study by Elizabeth et al. (2010) examines how maternal protectiveness continues despite leaving. Not only is abuse recognised as on-going but mothers battle the judicial system to reduce contact and therefore lessen exposure to abuse. Subsequently custody disputes usually are in favour of the father, and mothers are forced to be by-standers to the psychological abuse and often harsh disciplinary methods of the father. Custody disputes and contact arrangements usually result in a mother’s loss of control over strategies she previously used to protect her children (Elizabeth et al., 2010). Failing to protect children is a responsibility given by society to women and simultaneously there are powerful perceptions that children need a father, while solo mothering is stigmatised (Moulding et al., 2015; Weisz & Wiersma, 2011).

A failure to protect is entrenched in the notions of ‘mother-blame’ and ‘self-blame’ (Moulding et al., 2015). Mothers blame themselves for not protecting their children, which in turn leads to feelings of guilt. In one study interviews of nine mothers who had left abusive relationships described their failure to protect because they were always trying to satisfy the needs of the abusive partner, uphold the image of the father and finally concentrated on supporting the father to address his aggression and ultimately ‘fix’ the problem (Wendt et al., 2015). In numerous studies mothers display consistent attempts to protect however shielding children from witnessing violence is virtually impossible (Bhandari et al., 2011;
Interviews with children growing up in an IPV context show they were overall empathetic about the situation describing their mothers as emotionally drained and extremely withdrawn to help. However, children also acknowledged their mothers failed to protect them from witnessing violence which also resulted in a discourse of mother-blame. It is necessary to note children had a limited understanding about why their mothers stayed in the abusive relationship (Buchanan et al., 2015; Wendt et al., 2015).

Mothers are in a “concurrent and contradictory process of binding both the child and the abusive partner”, coined as a double-bind (Lutz, 2005, p. 835). Mothers undergo a process of striving for harmony within family life initially, not wanting to admit to the abuse, then tolerating the abuse and finally when children are born the focus shifts and protection overrides all other desires (Lutz, 2005). Yet, when professionals in the field of domestic violence and child protection deem mothers unfit to protect their children, children are removed from their mothers (Nixon et al., 2013). This type of intervention severely impacts the mother and often mothers present with low self-esteem, self-blame and a loss of identity. In general, child protection workers understate and devalue the maternal protection abilities of mothers in the context of IPV, so the significant disturbance this type of intervention has for mothers is not recognised (Nixon et al., 2013). Moreover, what child protection workers often fail to notice is that a mother’s protectiveness is both intuitive and strategically developed. Still, the most significant issue for mothers is that they are held to account for their failure to protect while a father’s responsibility for abuse is ignored (Nixon et al., 2013; Secco, Letourneau, & Collins, 2016).

**Accountability: mother or father**

Research discussed in the previous section illustrates how mothers are held to account for the impact of abuse on their children and consequently perpetrators evade responsibility (Devaney, 2009; Fields, 2008; Nixon et al., 2013). The role of perpetrators is dominated by a growing trend of a pro-contact model for fathers and children which entails little or no consideration of the history of IPV (Harrison, 2008). The pro contact model is based on the assumption that father-child contact is in the best interests of the child. Society assumes that loss of contact or fatherlessness is a poorer outcome for children than contact
with a perpetrator of violence against their mother. There is also a strong expectation for women to maintain father-child relationships irrespective of the impact IPV has had on them and their children (Elizabeth et al., 2010). Furthermore, within judicial systems globally, family court cases and custody arrangements suggest a non-negotiable relationship between perpetrator and child (Coy et al., 2015; Elizabeth et al., 2010). Research by Walker and McGraw (2000) argues fathers are what children need is simply an assumption. Empirical evidence recognises children ideally need a holistic approach to their upbringing which looks at their physical, emotional and social needs. However there is no evidence to support these needs be met by a parent of a particular gender (Walker & McGraw, 2000). Furthermore, a pro contact directive is concerning given what is deemed quality father contact and the protection of the child in the context of IPV (Coy et al., 2015). Children of abusive men are exposed to multiple, complex, negative experiences and in turn these have negative and adverse outcomes into adulthood (Peled, 2000). A study by Coy et al. (2015) examined how the judicial system responds to father-contact in situations of IPV. Interviews with 34 women during court proceedings involving custody arrangements with a former abusive partner showed decision-making by judges failed to consider safety factors and, in many instances, endangered both women and children repeatedly. Women’s narratives were characterised as fearful and emotional and accounts of abuse exemplified themes of intimidation, coercion, control and belittlement. Court proceedings resulted in the system’s failure to recognise IPV at all; and a heightened and overwhelming bias to believe the perpetrator when abuse was denied. Moreover, forced psychiatric assessments were used as evidence against the women’s account of the violence (Coy et al., 2015). Subsequently, unsupervised contact between perpetrator and child is granted more often than not, despite a history of IPV. Presumptions are made about the nature of the relationship between the child and the abusive father and a further assumption that women and children are unaffected by violence post-separation (Coy et al., 2015). Tragically many court directed contact arrangements have resulted in the death of women and children (Coy et al., 2015), clearly demonstrating the most severe consequences of discounting women’s accounts and not holding men to account for their abuse. Peled (2000) claims all abusive men can be classed as psychologically abusive fathers given they are not held to account for exposing their children to abuse. Moreover, if a pro-contact society urges shared
responsibility for children then taking responsibility also means being accountable for the abuse (Peled, 2000). The pro contact model continues as there is fear that weakened involvement of men in the lives of children will have a negative impact in generations to come (Harrison, 2008). Elizabeth et al. (2010) state a ‘clean break’ principle is not accepted within society’s social construction of fathering and the push for co-operative post-separation parenting and relationships is strong. Moreover, societal expectation for mothers to sustain father-child relationships is prevailing (Elizabeth et al., 2010). The question remains ‘is the expectation of cooperative parenting relationships in the best interest of the child where the father is abusive?’ Research suggests separation is not the predictor of poor outcomes for children but nonetheless a history of conflict does show poor outcomes (Harrison, 2008). Thus, in theory, if a history of IPV exists and the level of contact is increased between perpetrator and child post-separation then there is an increase in poor outcomes for children (Harrison, 2008). A study by Georgsson, Almqvist, and Broberg (2011) found children are at increased risk of mental health disorders and psychological symptoms as a result of IPV. Similarly, Stover, Van Horn, Turner, Cooper, and Lieberman (2003) report less frequent experiences of violence creates positive change not frequency of contact with the abuser. Studies by Naughton, O’Donnell, Greenwood, and Muldoon (2015) and Morrison (2015) suggest contact creates an opportunity for abuse to continue where children wear the brunt of this. Where pro-access prevails, a history of IPV is irrelevant to custody arrangements, and overall women are viewed as problematic while perpetrators are invisible. Literature acknowledges abuse for women and children increases post-separation, in spite of some supervised contact arrangements (Harrison, 2008; Lemon, Jaffe, & Poisson, 2003; Peled, 2000). Furthermore “children living in post-separation violence may be the most distressed of the population...when children have no contact with violent fathers, the harm they have sustained may be ameliorated” (Lemon et al., 2003, p. 386).

The post-separation pro contact assumption is based on the social construction that child contact is a father’s ‘right’, however the literature suggests all paternal responsibility is waived in respect of this right (Harrison, 2008; Hooker et al., 2016; Peled, 2000). Studies by Holt (2015) claim children become entangled in the conflict, fathers are unable to prioritise their children’s needs over their own and in the most extreme cases the death of a child has been related to contact arrangements. Controversially, fathers’ rights movements and groups
have risen over the first decade of the 21st Century as a reaction to feminist advocates and professionals in a drive to influence policy that undermines protection for women and children as paramount (Flood, 2010). Fathers’ rights groups are characterised by anger and blame towards ex-partners and the judicial system which they assume has depleted their rights and they claim discrimination against them (Flood, 2010). So the question prevails, do fathers have rights if no responsibility for their abuse is taken? Haddix (1996) advocates for ensuring abusive men are granted no contact initially but given the opportunity to rehabilitate. With positive changes, they would gain the opportunity to renew contact and begin attempts to restore, support and nurture the father-child relationship so acutely damaged by the impact of IPV. However, some fathers continue to voice a stance of minimising their violence; denying the degree of abuse or accusing ex-partners of concocting stories (Flood, 2010). Discouragingly, research illustrates children becoming objects used to continue their fathers’ control, undermine their mothers and sustain abuse in the aftermath of separation (Peled, 2000). Harrison (2008) claims a “father’s role continues to be inalienable even through continuing violence” (p. 382). Despite alarming statistics of abuse and even death “the majority of perpetrators are not arrested, not convicted, not sentenced and never held to account for their behaviour” (Devaney, 2009, p. 571).

Controversially women who reject a pro-contact model are recognised and labelled as bad mothers who do not put the interests of their children at the fore (Elizabeth et al., 2010). A study by Harrison (2008) investigated mothers’ perspectives of the judicial system in terms of protection and continued minimisation of abuse by the perpetrator. Findings showed women have difficulty authenticating IPV to a degree where there is judicial intervention to protect; instead women spend relentless hours attempting to convince professionals of the impact of IPV. Alternatively, if evidence of abuse is provided it is more often denied and the perpetrator’s actions minimised once again. Verbal accounts of abuse are completely disregarded and consequently become cases of ‘he said -she said’ (Harrison, 2008). A proven history of IPV has little traction; accounts of abuse are disregarded and women are tested on their willingness to cooperate with contact arrangements (Harrison, 2008; Peled & Gil, 2011). Perpetrator recollections of abuse are effectively treated as a contrasting interpretation of events in comparison to women’s accounts (Elizabeth et al., 2010). The judicial system minimises perpetrator violence and turns to the notion of ‘mother-blame’. Mothers are judged and therefore have to weigh up the implications of judgement over protection for
their children (Harrison, 2008). Mothers are viewed as revengeful and obstructing the fathers right to have contact with their children (Holt, 2015). Elizabeth et al. (2010) agree mothers are recognised as alienating, obstructive, immature, hostile and revengeful and moreover they are seen to have a moral obligation to protect their children that fathers do not. Essentially, the system directs attention to a mothers opposition to father-child contact which directly turns attention away from the actions of fathers themselves and in turn can be potentially life threatening (Elizabeth et al., 2010). “Attention across society needs to shift to understanding men’s violence as indicative of their failure to protect their families making them visible and accountable rather than hidden and protected” (Moulding et al., 2015, p. 258).

In light of societal expectations and an idealised portrayal of motherhood which results in discourse of mother-blame and self-blame, the ease of pathologising mothers to focus on their deficiencies and flaws, ignores accountability of the perpetrator and the constant struggle for mothers to protect their children. Mothering within the context of IPV is complex, so, to who do women and children call on for support? And how do the perceptions of service providers’ impact maternal protection and mothering in the context of IPV? The following chapter provides an introduction to the work of refuge advocates in Aotearoa New Zealand, as service providers whose understanding of maternal protection and support for mothers experiencing IPV is a key intervention in the field.
CHAPTER THREE: Refuge Advocates and the New Zealand Collective of Independent Refuges

We have a shortfall between the funding we receive to provide this vital service 24 hours a day, seven days a week and the actual cost to us, so there’s huge pressure on us to seek additional funding from our local community. When women need us, we must be available at the end of the phone and so it is crucial that we find the extra funding to cover this cost.

(https://www.facebook.com/womensrefugenz/)

The epidemic of IPV across the social landscape has resulted in the rise of advocates working to eliminate and prevent harm from women and children individually and collectively within communities (Thelen, 2000). The role of advocates is multi-faceted, challenged by the socio-political landscape and the social service framework that continues to re-victimise as well as pose numerous barriers for women and children living within the adversity of an IPV context (Thelen, 2000). Advocates maintain a high level of expertise within the field of IPV, stemmed from deep-seated attention and understanding of individual needs, grass-roots contact with the IPV context, but most importantly the knowledge of biases prevalent within the justice and social service systems (Thelan, 2000; Women’s Refuge, 2017).

New Zealand’s leading experts in protecting women and children from domestic violence are refuge advocates and many work within the context of the National Collective of Independent Women’s Refuges (NCIWR) (Women’s Refuge, 2017). NCIWR is a not-for-profit charitable organisation which provides specialist services, response and preventative strategies for women and children impacted by domestic violence. Advocates play an integral role in frontline support, education, awareness, and safety planning as well as collaborating and coordinating responses amongst social services such as New Zealand Police and child welfare services¹ (Thelan, 2000; Women’s Refuge, 2017). Furthermore, advocates assist with clarification of processes and procedures within social services and in particular the Courts.

¹ Child welfare services are managed by the Ministry of Vulnerable Children, Oranga Tamariki which sits within the Ministry of Social Development.
International research investigating service providers in the field of IPV includes various terms for those whose work is dedicated to IPV or DV intervention, including the following: shelter workers/social workers (SW), domestic violence advocates (DVA) or domestic violence interventionists (DVI). In New Zealand the NCIWR uses the term Refuge Advocates (RA) and thus will be the term referred to throughout this study.

International and national research reports initial contact and engagement with refuge advocates is vital. A study by Bastos da Silva et al. (2013) suggests women are more likely to report incidences of IPV to friends, work colleagues and other support networks in comparison to professionals or government agencies largely due to feelings of fear, embarrassment, guilt or self-blame (Rose et al., 2011; Thelen, 2000). Women’s Refuge (2017) believes there is a necessity to provide the reassurance of safety and present an open door of support so that women are empowered to overcome the influences of the perpetrator. A study by Jonker, Jansen, Christians, & Wolf (2014) agrees that the role of refuge advocates in providing on-going systematic safety planning, a personalised and respectful approach and coordination to address health, legal and financial issues is vital. Furthermore, Lewis et al. (2015) affirms the role of the refuge advocate as pivotal in the recovery process for women and children impacted by IPV.

International research suggests there is a high level of unpreparedness to manage IPV or the complexity of impact across the social sector particularly within a coordinated manner. Moreover many social services mandated to address IPV across New Zealand communities are still not equipped to do so adequately to address the health impacts for women and children (Family Violence Death Review Committee, 2017; Thelen, 2000; World Health Organisation, 2016). Research informs that the primary gateway of support for women is through the health sector but also concurs that state primary health care should only be the first basic point of contact where current or historical abuse can be identified (Bastos da Silva et al., 2013; Wuest et al., 2015). Professionals who are able to use evidence informed best practice can subsequently plan for safety, decrease exposure to IPV and ultimately increase the quality of life for women and children. Nonetheless there are constraints to basic primary healthcare services such as access, finance or isolation even if the sector is well resourced to address IPV (Hughes & Chau, 2013; Wuest et al., 2015). With the primary gateway of support unable to meet IPV victims’ needs, this study aims to highlight the expertise of RA grounded in extensive trauma-informed response training and strongly argues RA for the NCIWR are
experts within the field of IPV and are, therefore, best equipped in terms of appropriate responsiveness.

A study by Merchant and Whiting (2015) summarises the role of a RA as a balancing act between advocacy, safety, empowerment, and enforcing rules, policy and procedures. The complexity of an advocate’s role is described widely across the literature and key findings illustrate positive and successful responses to women and children impacted by IPV are centred on the RA’s ability to understand and pay attention to the context through (Velonis et al., 2017). Shrinking levels of social service support to address the impact of IPV across communities and thus, from a New Zealand perspective Veronis et. al.’s (2017) study also speaks to the important role of NCIWR advocates to implement widespread prevention strategies and path the way for women and children to live more safely.

The NCIWR is predominantly funded through sponsorship, grass roots fundraising, donations and philanthropy with some funding from central government for specific service delivery. Through a range of paid and volunteer staff, a total of 37 refuge sites provide counselling, advice and safety to women across New Zealand, 24 hours a day, seven days a week (Women’s Refuge, 2017). This level of response and the intensity involved in RA work has seen a substantial amount of literature focused on the prevalence of stress, burnout and exhaustion of RA in comparison to other professions but there is little evidence which draws on RA experience, expertise and knowledge in the field of IPV (Baker, O’Brien, & Salahuddin, 2007). An example of scope and expertise of the role is shown in a study by Hartwig (2013) acknowledging the work of RA in Western Australia. RAs accommodate over 500 women and children escaping IPV on any given night and the level of responsiveness is correlated to their high level of expertise and experience. The role of similar professions is evaluated in a study by Chanmugam (2014) claiming the workers studied have an excellent skill set due to their extensive experience with vulnerable groups and training in empathy and cultural responsiveness. Despite the complexity and often the bureaucracy associated to the role, RAs have the confidence and ability to manage crisis-laden situations, form close therapeutic relationships to clients and ultimately provide advocacy within a chaotic environment (Baker et al., 2007). Stover and Lent (2014) highlight the critical nature of the RA role to reduce and alleviate harm but also emphasise the gap in training to support a collaborative approach for clients. Even with extensive experience adequate training is essential (Stover & Lent, 2014).

The NCIWR delivers training and education to non-government and government
organisations both nationally and internationally. The Women’s Refuge training unit (Te Kowhai New Zealand Family Violence Training and Research Institute) has developed an advocacy training programme, certified by the national qualifications authority which covers a range of topics including working with women and children and domestic violence analysis (Women’s Refuge, 2016).

Literature focused on RA and service providers within a New Zealand context is sparse and thus identifies a significant gap in research which has elsewhere demonstrated RAs deeper understanding of mothering in the context of IPV and their deeper appreciation for the complexity of the situation based on their expertise (Krane & Davies, 2007; Peled & Dekel, 2010; Wendt et al., 2015). Furthermore research which involves RA as participants with expert training and experience, provides a space for RA to express the expectations and assumptions that inform their judgements about maternal protection (Krane & Davies, 2007).

A critical dimension for further local investigation is international research which suggests some may still RA uphold strong societal expectations about mothering that mothers struggle to meet, reproducing the social construction of motherhood and reiterating notion of mother-blame (Buchanan et al., 2015; Peled & Dekel, 2010). Similarly, Lapierre, (2010a) questions whether the expectations of advocates on mothers are realistic and fair and whether they recognise the strategies mothers use to protect their children. “The efforts that women living with violent partners may make to resist the violence and continue parenting on a daily basis are not adequately considered in research literature”(Radford & Hester, 2001, p. 145). Therefore, This research will explore RA understandings of maternal protection in the context of IPV, specifically to identify how RAs understand women’s desire to protect their children, whether they achieve this without blame; and how they attend to on mothering strengths, capacity, ability and efforts within a highly sensitive and volatile situation (c.f. Lapierre, 2010a; Wendt et al., 2015).
CHAPTER FOUR: Methodology

Our crisis line numbers remain high, our bed nights remain high, and our client numbers in general remain high.

Quantitative studies have assisted in understanding the prevalence of IPV and defining particular behaviours of women and children impacted by IPV. However, a quantitative approach falls short of hearing the voices of those affected or those who work at the grass roots of IPV intervention. A qualitative research method draws upon the knowledge and lived experiences of participants. Listening to the perspectives of refuge advocates opens a space to make sense of dominant ideologies, socio-cultural influences and the political climate which has the potential to shape the way in which refuge advocates respond to women and children. From a feminist standpoint epistemology, this research aims to challenge societal assumptions and question the status quo through the narratives of thirteen refuge advocates whom participated in this research, as experts in the field of IPV within a New Zealand social service context. In this way, the qualitative accounts of refuge advocates emphasise the importance of their role in the field of IPV and create knowledge which reveals societal assumptions and ideologies affecting refuge advocates responses within day to day operations.

Feminist Standpoint Epistemology

Historically feminists acknowledge that social and intellectual contexts influence science however and more importantly science as a culture and practice consistently neglected topics of special interest to women (Eagly & Riger, 2014). Allowing a women’s voice and thus, perspective identifies how women create meaning and experience life from their individual positioning within their social hierarchy (Riger, 1992). Those who are ‘knowers’ maintained standpoints of commonality which privileged perspectives of white middle class men and consequently silenced others with valid social science knowledge (Chafetz, 1997). Feminists have argued that quantitative science is unrelenting in the
subordination of women thus there is growing advocacy for more qualitative methodologies to be used in the field of psychology (Eagly & Riger, 2014). Through understanding the lived experiences of refuge advocates (RA) and honouring expertise, new understandings arise which reflect a women’s world view.

A **feminist standpoint** maintains social and political variables affect world views but pertinently those who hold less power usually perceive social reality more accurately because survival is dependent on understanding people who hold dominant positions (Eagly & Riger, 2014). A feminist standpoint seeks to understand social inequities to challenge or change the status quo which had previously devalued or disadvantaged women (Chafetz, 1997). If the main purpose of research is to develop an understanding of the way in which women understand the world, then a feminist standpoint favours qualitative methodology also.

This current research is designed to allow participants to express meaning in their own words and gives insight to the researcher of their specific experiences and everyday life (c.f. Eagly & Riger, 2014). The aim is to understand and interpret the complexities of maternal protection in an IPV context from the perspective of RAs rather than predicting behaviours or understandings about the phenomena. Traditional social sciences place the researcher as the expert. A feminist standpoint makes a clear shift where participants are the experts; thus a shift in authority (Riger, 1992). Furthermore, there is an emphasis on the cooperation and connection between researcher and participants instead of controlling participants’ data, as well as recognition for the research context (Riger, 1992). Riger (1992) argues that bias is generated from researchers who fail to capture a social context and moreover disregard the social context within the research.

This research aims to capture important contextual detail, validating the expertise of advocates and placing women’s experiences at the forefront. However, the influence of dominant discourses, as crucial to social context also needs to be considered. Assuming voice is not shaped by dominant ideologies and discourse also ignores the social context, justifies the status quo and dismisses social change (Riger, 1992). Instead, the influence of dominant discourse is considered, as is women’s resistance to domination.

R. Campbell and Wasco (2000) state “feminist methodologies embody an ethic of caring through the process of stories” (p. 778). This research comes from a feminist approach because it is a process which invests in the experiences and emotions connecting the
researcher and the participants. A feminist standpoint is reflexive, women centred and minimises hierarchical relationships (R. Campbell & Wasco, 2000; Paludi, 1992).

In summary, the methodology of this research is guided by feminist standpoint epistemology and the principles of feminist research. As outlined by Kralik and van Loon (2008) these principles involve: inclusion of the social context; valuing personal stories of experiences; analysing similarities and differences in women’s experiences; acknowledging the disadvantages of dominant discourse to women; and reflexively taking account of how research practice challenges dominant discourse. These principles have informed both the aim and the design of the current study.

Methodology

Given the aim of the research is to document and interpret the experiences of refuge advocates, generating qualitatively rich data for this study was guided by a narrative thematic methodology. A narrative approach addresses the traditional exclusion of women’s voices from research through collecting, interpreting and publishing women’s experiences. Moreover, a narrative approach provides insight into the events that have been of lesser interest within the literature. In relation to the research questions, a narrative approach provides the opportunity to gather richer data including stories of lived experiences which highlights authenticity (Riessman, 2005). Narrative thematic methodology involves the production of meaningful, co-constructed knowledge where participants and researcher create a relationally safe space; where hierarchy between researcher and participant does not reproduce traditional positioning of the researcher as expert, and participants are able to explore and give meaning to their experiences (Barnham, 2015; Braun & Clarke, 2013; Gergen, 1988; Hydén, 2014). These research practices are consistent with feminist standpoint epistemology, and privilege participants’ perspectives by collecting their experiential narratives through face to face interviews as described in more detail below.

Method

Interview Design.

The research questions of the present study specifically seek to explore how refuge advocates understand the complexity of maternal protection within an IPV context; how the
impact of IPV shapes mothering from the perspectives of refuge advocates. These research questions necessitated a data collection method that would provide refuge advocates an opportunity to share their views and experiences. Semi structured interviews were selected to meet this goal. There are a number of factors considered in the design and conduct of the interviews (Kralik & van Loon, 2008; Willig & Stainton Rogers, 2017) and semi-structured interviews were selected The semi-structured interview provides an opportunity for participants to voice their perspectives and can aid participants to arrive at new understandings or to make sense of their experiences (Andrews, Squire, & Tamboukou, 2013; Kralik & van Loon, 2008; Sandelowski, 1991). They use broad, open ended, clarifying questions to create space for open responses and participants are able to be articulate and describe experiences in detail. Questions guide areas of exploration but the order of questioning is dependent on issues as they arise and determined by the participant. I designed a set of questions designed to guide the interview (Appendix D) and used them as flexibly as possible in conducting each interview. This set of questions consisted of an interview starter and on-going prompts as well as the direct research questions to cover the central issues.

Interviews were conducted face to face to establish rapport and trust between myself and the participant and to ensure the quality of data collected with careful consideration of context. Moreover, the social interaction of a face to face interview offers contextual data such as emotion and non-verbal body language which assisted with my interpretation of the participants’ stories.

**Recruitment Strategy.**

During the initial phase of the research, consultation was sought with the National Office of NCIWR. The NCIWR is the key national organisation selected to collaborate and negotiate the research due to the direct access to refuge advocates who have experience with the phenomenon in question. In collaboration and negotiation with NCIWR National Office, women’s refuge sites were selected from multiple locations across New Zealand; rural -geographical isolation, urban-residential, town and inner city. Multiple locations allowed for participant diversity. Diversity is not confined to contrasting difference between location sites and consequently participants accounts but also by the difference in the way participants formulate their experiences /stories (Riessman, 1993). Contact with refuge site managers was initiated through NCIWR national office and information sheets disseminated (Appendix A)
through site managers. Refuge advocates with at least two years’ experience were approached by refuge site managers and invited to participate in hope of attracting multiple advocates from each refuge site. Six refuge sites were involved with recruitment. Once interest was indicated from refuge sites then initial email contact was made to interested advocates by the researcher. Refuge site managers were not informed about which advocates agreed to participate in the study.

**Participants.**

Thirteen refuge advocates participated in the study that had been involved with the NCIWR as employees or volunteers and collectively had over 55 years of refuge advocacy experience. Some participants disclosed that they had also experienced IPV in previous relationships. While the refuge sites that they worked at when they were recruited were all in urban or regional centres, some participants had previous experience in rural settings. Collectively, the advocates represented the NCIWR’s commitment to biculturalism, with both Māori and tau iwi participants.

**Data Collection.**

Participants were invited to a two-hour appointment in anticipation of a one-hour interview but allowing for flexibility should conversations need more time. A preliminary schedule of interview times was discussed and negotiated before confirmation. Invitations to participate also gave options for venues such as the advocate’s current office space or a local community venue such as a café. The options were offered to ensure convenience and that interviews were conducted in a location that was comfortable for participants. Where there was the utilisation of office spaces, mindfulness about the issues of confidentiality and privacy were noted as staff members could visually recognise the comings and goings of me as the researcher. In line with feminist standpoint epistemology, refuge advocates were recognised as experts in their own experience. Each interview began by explaining to the participant that I was interested in their lived experiences and so space was created for responding to questions in whichever way she viewed as best. Participants were then provided with a copy of the information sheet again and their rights should they choose to participate were discussed and clarified. Informed consent was obtained (Appendix B) before proceeding with the interview and all participants had access to transcriptions as an opportunity to make any necessary amendments. Finally, advocates signed a Transcript Release Form (Appendix C) as authority for me to proceed with the research analysis.
The interview guide enabled flow to the interview process. All interviews were digitally recorded and later transcribed verbatim inclusive of non-linguistic features (including utterances, laughter, crying, some facial expressions were noted and pauses in conversation) and any additional information to expose identification was removed. Given the emotive and sensitive nature of maternal protection, the relevance and value of non-linguistics is featured. The transcription process allowed an opportunity for me to personally re-engage with the data. The interviews produced a total of 12 hours and 37 minutes of talk and duration ranged from 45 minutes to 66 minutes. Overall, each transcription produced between 426 pages of text that comprised 109,669 words.

The stories refuge advocates shared told of a great deal of trauma and the harm perpetrated on women and children was woven throughout the interviews. As graphic detail of many stories also meant many emotions flowed throughout the interview process between me and refuge advocate. The advocates’ dedication to their women clients and their commitment astounded me; I felt privileged in every sense of the word that their stories were shared openly with me and I often thanked them as a way of acknowledging their expertise. The interview process involved a relationship built on a mutual process of listening and talking. At the end of every interview, I thanked advocates again and expressed sincere gratefulness. I also explained that I would be in contact as regularly as possible to keep them updated on the research’s progress; this contact was completed by email. In the following weeks I followed up with advocates by email to thank them again.

**Data Management.**

Participants chose pseudonyms or were assigned pseudonyms, depending on their choice and their participation in the research remains confidential. All identifying information was removed during transcription. All data collected was stored securely in password protected files on a password protected computer. Consent forms are stored securely in a locked filing cabinet in a locked office and will be destroyed after five years. De-identified transcripts are stored separately. Audio tapes were destroyed after transcripts had been analysed and any necessary amendments made.
Ethical Considerations

The initial stage of the research involved developing an ethical protocol according to the guidelines provided by the Massey University Ethics Committee (MUHEC). After review by senior researchers, the protocol was assessed as low risk ethics and notified to MUHEC.

Voluntary participation requires that coercion is not used during participant recruitment. Informed consent maintains any potential participants are fully informed and the risks and procedures involved including consent is gained prior to participation. Addressing voluntary and informed consent the NCIWR were sent a no obligation letter of request along with an information pack to be passed on to NCIWR managers across several refuge site locations. The information pack consisted of an information sheet which clearly states the purpose and aims of the research. Any potential participants were invited to make contact with the researcher or supervision team if any further information was required. Participants indicating a willingness to participate were informed prior to the interview that they were under no obligation to participate and that they could decline to answer any specific questions or withdraw from the project at any time until the final sign off of approval of the interview transcript. However, participants were acknowledged as key to the research given their expertise and direct experience. Participants who chose to continue were asked to sign a consent form as previously discussed. Following their consent to participate, the privacy and confidentiality of participants was protected as outlined in the data management section above.

Respect for participants was considered throughout the design and conduct of the study. The structure of the relationships formed between researcher and participants was based on the values of rapport, compassion and sensitivity but more importantly knowledge was co-constructed through upholding the expertise of participants by working with them while maintaining clear professional boundaries.

An ethical expectation remains that the research will contribute to a growing body of knowledge but more pertinently this research will inform future direction for (1) the well-being of participants and future clients, (2) strategic planning and policy change for the NCIWR and (3) to assist informed evidence based best practice across multiple refuge sites.

In the context of research in Aotearoa New Zealand, responsiveness to Māori is a significant ethical consideration. The research is based on a bi-cultural approach through
recognising and understanding the principles of Te Tiriti O Waitangi; protection, partnership and participation with Māori. Whakawhanaungatanga is the process of building and forming relationships in order to grow respect and rapport. This research considers the importance of whakawhanaungatanga through spending time with participants prior to the interview to establish social connection; understanding where each person is positioned in relation to the research and getting to know one another so that rapport and trust is built. Additionally, the principle of manaakitanga was very important throughout the research process.

Manaakitanga is interpreted as ‘hosting’ or ‘welcoming’; the process by which the researcher welcomes and hosts the participant to ensure warmth and comfortableness in the environment. Cultural supervision and advice was available to me through Te Taumata o Te Kōwhai, a core group within NZCIWR tasked to support culturally responsive services. I quickly built a rapport with refuge advocates, refreshments and snacks were shared and respectively I was able to walk through the heightened emotion of many stories. Listening acknowledged the level of expertise and their innate understanding of the IPV context for women.

**Reflexivity**

Reflexivity makes researcher visible and enables an appreciation of their impact throughout the research process. Particularly within qualitative methodologies it is imperative to acknowledge my role as the researcher and the situated nature of the research as a reflexive process. Moreover reflexivity provides transparency within the research (Finlay & Gough, 2003).

Conscious of the role I play in my working life, I acknowledged multiple perspectives and facilitated critical thinking including self-disclosure of my personal and professional experiences within the context of IPV throughout my engagement with participants. My openness initiated authentic dialogue with advocates and created a space to examine my own interpretations in the process of interviewing and analysis. Furthermore, throughout the transcribing process, my interpretation was recorded by means of including notes on body language, innuendoes, thoughts and silences; writing these after each interview to enable me to document my own responses to the participants’ stories. I was aware my own experiences aided my understanding of refuge advocates experiences and therefore also guided the
analysis process. Although as a feminist researcher my standpoint affects the research process, calling upon the expertise of refuge advocates is paramount; it is their understandings and perspectives which take precedence to produce meaningful knowledge and reveal hidden phenomenon. As the researcher, though, I remain aware of my own standpoint and the values which I bring to this research, knowing no research can be value-free.

**Narrative Thematic Analysis**

Applying a narrative thematic approach to this research provides meaningful knowledge as I sought to go beyond the description of stories by identifying patterns or themes which informed and created a voice to disrupt social assumptions as advised by (Gergen, 2001). As a feminist researcher, I reject the notion of “hierarchy of the researcher over researched” and so a collaborative process of listening and empathising with refuge advocates meant a greater understanding was formed (Andrews et al., 2013; Gergen, 2001, p. 21). A narrative thematic approach provided a flexibility which was best-fit to refuge advocates working for the NCIWR; their expertise in the field of IPV, their grass roots experience within the New Zealand social service framework and more importantly their understanding and perceptions of mothering and maternal protection in the context of IPV.

**Analysing the Data**

Once semi-structured interviews were transcribed verbatim, as the researcher I undertook a six phase approach as set out by Braun and Clarke (2013). Phase one meant reading and re-reading transcriptions until information was cognitively embedded and as the researcher I felt I had come to a point of saturation; recalling and reflexively working with the data and familiarisation was paramount. During phase one I handwrote reflexive comments about potential points of interest. Phase two of the analysis comprised of generating codes (Braun & Clarke, 2006). Coding is a process of organising the data into meaningful groups and this was completed by attending to all the data, giving equal attention to each advocate’s transcript and overall finding commonalities across the data set with the overall purpose to establish potential relevance to the research questions. Finally a table of codes was drawn up and I moved into phase three; actively searching for themes (Braun & Clarke, 2006). During
phase three both tables and mind maps were devised simultaneously organising data into piles or lists. In essence codes were clustered into broader topics or themes. Many codes work across multiple themes and I explored ways to combine codes following the advice so this phase (Braun & Clarke, 2013). At this stage of the analysis, themes began to create flow in order to tell the story and answer the relevant research questions. Noted, are multiple codes which made up a miscellaneous theme which gathered together material that did not readily fit or flow with other codes. However, codes from the miscellaneous theme were re-distributed in the process of finalising the themes. Phase four, exercised a review of the potential themes and as the researcher asking pertinent questions about which codes best contributed to which theme? Was richness of the data present? And how useful was the data to addressing the research question? Finally, after extensive review three distinct themes were established. Finally, at phase five the three themes were defined and named in light of producing a report which directly addresses the research questions and enables a report on the themes that is organised to build on the previous theme and provide an overall picture (Braun & Clarke, 2013).

The methodological approach outlined in this chapter sets out a research design to address how refuge advocates’ stories challenge dominant discourse and societal assumptions, in particular the social construction of the idealised mother which in turn illuminates mothering expectations and the notion of mother-blame. Through the process of telling their stories, refuge advocates identified the degree of complexity for women mothering in the context of IPV and the multitude of challenges mothers face internally (within the physical environment of IPV) and externally (social service provision and responses). The chapters that follow discuss each of the three themes that emerged from the analysis of the interviews.
CHAPTER FIVE: Analysis Part One

The Interrupted Mother

In addition to the violence you inflicted upon me, this entire legal process has added to the deterioration of my physical and emotional health. These feelings do not pass, especially without any resolve and there has been no acknowledgement, or apology or any remorse offered, so how does one start their recovery?

(The website provided is not readable.)

The Good Mother

Societal Expectation. The good mother is the epitome of mothering according to the motherhood mandate; the nurturer, the boundless carer, the protector and the glue (Peled & Gil, 2011; Russo, 1976). Society’s traditional picture is painted; the mother sat comfortably in the rocking chair nursing the baby, sheets are crisp as children are tucked warmly into bed. The meal is hot every evening, children’s bellies full and memories of fun and laughter are produced in the photos that sit eloquently in the living room. A good mother is unflappable; the house maintained immaculately and the list of chores complete for today and tomorrow. Moreover, the good mother makes children her focus. The romanticised image of motherhood is expressed across the literature and moreover Russo (1976) explains the idea of a women being anything but a wife or mother is implausible (Davies, Krane, Collings, & Wexler, 2007; Krane & Davies, 2007). Elizabeth et al. (2010) report mothers understand their moral responsibilities however this understanding is a social construct. Although motherhood is assumed to be natural and women are supposedly instinctively maternal, the literature suggests motherhood is a “socio-cultural product” Elizabeth et al. (2010, p. 255). Additionally, the set criteria for the good mother includes all-encompassing resilience, strength of character and specifically the selfless nurturer (Krane & Davies, 2007).

Social expectations of the role of women as mothers are regardless of circumstance or specifically the complexity that IPV brings to their environment. Krane & Davies (2007) state mothers are expected to cope despite barriers or obstacles and moreover a woman’s
work is only noticed in her absence. Advocates acknowledge the social expectations of mothering as women’s primary work.

Aroha: ...the woman has always been viewed as the main nurturer.

Pam: I think it’s seen as a woman’s job, that it’s a given. It’s not something that’s just um discussed, it’s just a given that this is women’s work...And I think it shows as society that we don’t value mums enough you know? We’re just giving them more work to do you know? Mums can do it, they can sort it out, women’s work you know.... yeah, it’s not questioned, it’s just expected.

Fleur: I think that society expects mothers to be in gender roles .... the one um you know who prepares the meals, at home doing the house work, gets them to school. So that’s more that gender role idea of how women should be.

Krane and Davies (2007) affirm society does not allow mothers to yield, fall to pieces or come unstuck. So, within the context of IPV, the weight of societal expectation is heightened and laden heavily on the shoulders of women. A mother is expected to cope and maintain the idealised image of motherhood even as she is victimised by her partner. A societal lens of motherhood is one of simplicity and as advocates explain, the context of IPV is far from simple: Complexity is real and the pressure for women to mother as ‘expected’ is prevalent.

Pam: I think it’s really hard to mother and to be the best mother you can be when you’re experiencing that, it’s too complex and from my experience and from what I’ve seen with women it’s almost like it [sigh] you can’t fully do that job because it affects what you have to give.

Lynda: I’ve talked to women about that all the time you know... you think that you’re doing a good job and I mean you are, you’re doing a great job but think about how much better it would be if you only had you and the kids to worry about, how much time and energy you’d have to do the job that you’re doing.
Krane and Davies (2007) argue raising children can be difficult because plainly and simply children are emotionally taxing and within the context of IPV, everyday tasks are far from the idealised image of serenity and smoothness. Furthermore, Ruby explains the social construct of women to maintain control and show resilience is also understood by women themselves mothering in the context of IPV.

*Ruby:* The minute she’s been abused carry on, yeah not to talk about it and just to carry on. Well each you know woman’s been conditioned um with their own beliefs and values but you know they….expect themselves to be able to carry on….carry on with domestic duties you know your mother duties; working you know providing for the family; coming home um you know normal. Yeah to carry on as they were. Yeah keep the ship running.

Advocates report societal expectation shapes mothering; through an expectation of what a good mother is, how daily life should be managed and more explicitly the notion that a good mother is one who upholds society’s image and adheres to the given gendered role. The good mother is one who is expected to keep up appearances. Peled and Gil (2011) argue by maintaining the idealised image of a good mother the gap between reality and expectation is widened and consequently women concede to the judgement and direct impact from society. This is manifested through feelings of guilt, anxiety and frustration. Within the context of IPV advocates report stories of societal judgement and a mother’s inherent understanding of her responsibility to maintain the idealised image;

*Fleur:* society is going to see their picture. Say if you’re looking at one particular family in one street and you know mum’s not there at the school gates or the child doesn’t turn up with the lunch or you know mums emotionally checked out for the day because she’s exhausted from psychological abuse well what’s society gunna see? They’re gunna see a crap mother who’s not living up to what they think a standard of a mother should be.

*Lynda:* I said to her….where is the boy going to school?….but you live with your mum and dad over in Porirua. Oh no, I left him with my cousin so he could go to school. So, the kids are just getting ditched, yeah to keep them going to school but you know
we’re talking about a really street wise woman who wouldn’t want truancy knocking on their door and to keep up appearances.

Jools: They don’t want anyone to know. They don’t want [child welfare] on their case. They don’t wanna be judged. You know their lives are a mess and they don’t want people looking in to it and you can see that.

Maintaining routines is a societal expectation of a good mother and as Krane and Davies (2007) point out ‘mother-work’ is only noticed in the absence of a mother. Women are unobtrusively aware of the expectation within the context of IPV to maintain routines women become characterised as hypervigilant. Hypervigilance to meet mothering expectations and the needs of the perpetrator can often fall short and subsequently women suffer the consequences directly at the hand of the abuser

Daisy:...routines are often out or very hypervigilant around routines. It can swing either way um you know a mum having to worry about having dinner on the table by five so the kids can’t go and play sport because she won’t have time and if she doesn’t have dinner on the table by five she will get into trouble by the abuser. Um again ugh I don’t know it could be if the children have done something wrong...spilt milk on the ground, the women will take the beating for it. Physical harm or say it was them, take the blame for the kids so the kids don’t get in trouble.

The image of the good mother emerges from the social construction that women have “an instinctive ability and desire to give, to care for and to sacrifice, for a child” (Peled & Gil, 2011, p. 458). Above, Daisy gives an example of a mother taking the blame for spilt milk, which illustrates the sacrifice she makes to protect her child. Yet, the assumptions about women’s instinctive self-sacrifice for their children also emphasise her exclusive responsibility for her child’s wellbeing. For example, attachment theory suggests the earliest relationships between mother and child are crucial for the child’s later wellbeing and mothers are the only ones to able to build this relationship and provide all early childhood necessities such as love and nurturance (Birns, 2009). Feminist literature in the field of IPV argues a “child’s earliest relationships are sometimes (but not always) critical as determinants of abuse and sometimes buffers against it”(Birns, 2009, p. 11). Emerging from the stories of advocates was
the comparable assumption that mothers are born caregivers and more specifically how the attachment or bond with your child/children shaped mothering in the context of IPV. Firstly, how the perpetrators actions can disrupt the bond between mother and child;

Pam: Well I guess if you’ve got a baby and you know, you’d understand about attachment theory, and how attachment would be interrupted. A baby can’t or a 9 or 10-month-old, oh cos dad’s being bad I hav
e to be with someone else. All the child will feel is my mum is gone.

Secondly, how a mother’s response to victimisation shapes the bond created with her child;

Ruby: I guess the bond you know one end of the scale it can make mum love their children even more and want to protect them more but on the other end there could be a stress within the bond ah from mother to child.

Fleur:...the parenting of mothers there was either an over attachment the child was over attached or there was a detachment. So, I wonder if sometimes....an over attachment because mother would be far more vigilant or far more worried about the child and are they going to be ok and there was the opposite where there would be...a detached where you didn’t see, there seemed to be a disconnect in the relationship.

Thirdly, how a mother’s bond is assumed to be instinctive;

Jools:...a good mum and you know some of them aren’t and some of them don’t have that maternal instinct....Yeah it is its very important....some of them don’t you know and that’s just being honest you know we’re not all born tailors and we are not all born natural mothers.

In this account, IPV interrupts mothering in the context of prevailing pressure to maintain societal expectation or achieve societal standards of a good mother; the complexity of IPV creates grave difficulties for the mother’s bonding and the child’s development. Consequently, emerging from the data was the common theme of the expectation for mothers to leave their partners in order to protect their children. A societal assumption that leaving solves the issue remains despite research evidence to the contrary. Lapierre (2010b) states “separation does not constitute a straightforward solution to these difficulties” and
moreover the abuse is heightened post-separation (p. 348). The following extracts illustrate the expectation of mothers to leave their partners in conjunction with the realisation that getting out has a harmful ongoing impact for mothers and their children.

_Pam_: messages from society about why don’t you leave? You know, why don’t you and the kids leave? Or why don’t you take the kids and go?...that’s a really strong message ...and so that’s a huge pressure for women because I don’t think there’s a lot of understanding in society about domestic violence.

_Dawn_: Yeah why don’t you leave? Why haven’t you left the area? Why haven’t you done this? Why haven’t you done that? Nobody is looking at the partner.

_Lee_: And you know they don’t factor in the fact that he’s completely isolated her from all of her strong friends or all of her strong family....because sometimes they’re there because they’re so scared to leave because he’s threatened the kids you know. And you can’t not think that because why else would she stay you know? Cos it’s the fear, overarching fear that keeps her there and he’s obviously completely scared the shit out of her if he’s been so violent...it’s a reality in her mind.

_Magenta_: They should get out as soon as anything happened and if they’re aware of anything happening then they should be getting out immediately.

Societal expectation extends to women’s gendered responsibilities within the family unit. Feminist literature argues women are forced through societal expectation to ‘marry-up’ and the family unit maintains and reproduces gendered roles; women are traditionally constrained by their partner’s role as provider and dominator and consequently holding superiority (Mack-Canty and Wright, 2004, p. 853). The traditional family exemplifies hierarchy in the relationships and poses little or no consideration to the complexity of the IPV context (Mack-Canty & Wright, 2004). Analysis of the current data shows the good mother consistently upholds an expectation that the quintessential family unit is comprised of two-parents (mother-father). Studies by Mack-Canty & Wright (2004) agree the role of the father is pivotal within the family unit but particularly in the lives of children. Moulding et al. (2015) argue the concept of a two-parent family is powerful and solo mothers are stigmatised.
Additionally, the lack of a ‘father-figure’ is socially recognised as detrimental to children and to the ideal of the family. Studies by Cater and Forssell (2014) describe the father’s use of violence in the context of IPV as controlling, self-entitled and both justified and fundamental. Advocates reveal stories centred on the societal expectation that it is a woman’s responsibility to stay in the relationship; situated as a maternal responsibility within the belief that the father-figure is also fundamental for their children.

Dawn: She could still see the abuse but she still...felt compelled to give that baby contact and um and an opportunity to have a father there on a day to day basis. Yeah you certainly see that lots with people when they first come to us; that they’re still trying to provide this idea of two parents in a home, having daily contact with that child and they’re juggling that against all of these abusive things that are happening. But seeing that somehow that this is the most important thing that you got to try and make that work.

Pam: I think a lot of the mums I come across feel that or somehow believe it’s better for kids to grow up with two parents than just one you know. So, there’s that belief that...the family unit might not hold together if they did anything about it so that’s the focus more than actually what the harm the violence will do... there’s huge pressure to get everything right and to stay together.

Betty:...a lot of women want the fathers to be involved with the kids passionately like they don’t want to deny their child a relationship with the dad.

Ruby: Maybe what I’m trying to say is you know nuclear families, the mum, the dad, the children um white picket fence, dog, pregnant or whatever that looks like um for them they still want that.

Advocates demonstrate a clear understanding of the way in which the motherhood mandate complicates women’s experiences of IPV due to social sanctions and stigma placed on women who fail to meet expectation regardless of the circumstance. Advocates are perceptive of the efforts mothers living within IPV make to continue to parent on a daily basis as well as maintain dominant ideology that a woman’s role is situated within the home.
Furthermore, advocates demonstrate a clear understanding of the social pressures for mothers to maintain a two-parent family again regardless of IPV, for the sake of the children.

**The Bad Mother**

Under complex circumstances, societal expectation is difficult to meet and so, the notion of the ‘bad mother’ emerges from failures to live up to the idealised images of mothers. Elizabeth et al. (2010) argue the conduct of the mother in relation to her children establishes the expectation of responsibility and society is the decision maker between what is deemed ‘good enough’ (those who fit the norm) and those who are questionable; lacking a mothering skillset or bad mothering. Mothering within adverse circumstances means mothering outside the norm. The result of this equation is simple; IPV is the driver behind the interruption of women’s mothering and when mothering is interrupted society views women as bad mothers or inadequate parents (Lapierre, 2010b). Society’s view of the bad mother is illustrated by advocates who talk about the impact of IPV altering a mother’s capacity and emotional availability (Hooker et al., 2016). Cameron illustrates the severity of the impact of IPV for some mothers, describing the level of exhaustion as so severe that the ability to mother has stopped completely.

*Cameron:*...*she just looked absolutely exhausted and she just couldn’t even function to be able to deal with them. We are quite used to seeing that especially when we are doing safe house intakes. It’s really normal for the mother to experience complete like a burn out, you know and um lack of ability. It’s like being frozen...she was just absolutely exhausted...just so exhausted...and it is really hard, difficult to explain that to other people that when some women (not all of them) but when some of the women that we see um they’re depressed, they’ve got anxiety, they just can’t function. We really try and that particular client um it was more around kind of we started doing like daily plans so she would just tick off like and start doing cos she got to the point where even getting dressed was just too much for her you know. So, it took a couple of weeks ok yip today...got dressed, tick. You know that’s how bad it impacts.*

Society assumes women are emotionally neglectful of their children in such a situation but gives little consideration to the complexity women navigate in the context of
IPV. Advocates unequivocally understand the impact of IPV for mothers, and show a deep-seated dedication to voicing an understanding of their world-view;

*Fleur*: All over the show chaotic um you may be there ready to meet the needs one day after school, the next day you may have to prioritise your own needs cos you’ve been hurt. Another day you may be... asleep cos you’re that just bloody exhausted from the emotional abuse. You may not make it there to pick up a child after school because the abuser may have you there. So, there are a lot of factors that would impact on parenting.

*Daisy*: I think that’s where a lot of planning comes into place, either if they’re out of the situation or not and talking about what they want and what they want for their kids. A lot of them will say I don’t want this, I don’t want a life like this and it’s not what I want for my kids and we’ll say, so ok how do you want to live? What do you want? How are we gunna get there? What’s the first step? What’s the first step tomorrow? What are we going to do differently tomorrow that was different from yesterday? Making it easier for them you know, not giving them well them not making unrealistic goals. It’s not about what we want for them; it’s about what they want for themselves. So, whether if it’s just to get up on time every day before school and walk their kids to school you know those little things, they matter a lot.

Beyond doubt women experience adverse effects as a result of IPV; psychological, sexual, physical, spiritual and financial harm. IPV has a direct traumatic impact and the consequences of trauma are often regarded as symptomatic of mental health distress such as depression, anxiety and hypervigilance (Stewart & Vigod, 2017). Yet mental health distress has a controversial status in the literature on IPV and mothering. Lapierre (2008) suggests society places a much greater emphasis on the relationship between mother and child and so the difficulty of performing as expected due to mental health distress resulting from IPV once again interrupts mothering. The bad mother displays an inability to function and measure up to the impossible standard (Nixon et al., 2013). Fields (2008) conversely argues that women who suffer mental health distress in the context of IPV have no greater rates of distress when compared to the general population. Overall the literature has a tendency to pathologize women who are mothering in the context of IPV (Fields, 2008; Lapierre, 2010a, 2010b).
Furthermore, when focus is on the children’s behaviours then society assumes this is due to the failures of the mother and immediately hone in on her deficiencies (Lapierre, 2008).

A number of advocates illustrated the impact of IPV for mothers, describing a mother’s distress and hypervigilance around their children; subsequently shaping how women mother. Dawn explains;

Dawn:...the whole thing has affected her so much that she’s highly anxious all the time and gets really depressed and so the way we saw that play out...She then became super focused on was the baby ok?....baby was giving all the normal signals for being fine and she had a feed and she was nodding and laughing. Should I get her to a hospital? Should I get her checked out by the hospital? Should I do this? Should I do that? And that carried on for a few days and just hyper anxiety.

Perpetrator harm is thus seen to have a profound impact on mothering. Harm to women and children can be both devastating and long-lasting. Studies by Lapierre (2010b) describe numerous women who suffered mobility issues as a result of IPV and numerous studies report sustained injuries, broken bones and severe bruising (Nixon et al., 2013). This type of impact to mothers can result in children employing the role of the care-taker for their mother. Role reversal may also take place when the child tries to meet emotional and psychological needs because their mother has suffered trauma or distress (Buchanan et al., 2015; Mayseless, Bartholomew, Henderson, & Trinke, 2004).

In the context of IPV a child taking on the role of mothering was a common theme amongst advocates’ accounts. Children took on parental responsibilities either as a form of protection or intent to parent when their mothers were at heightened risk of harm as has been found in research by (Semaan, Jasinski, & Bubriski-McKenzie, 2013).

Daisy:...older children looking after younger children grow up far too quickly. Older children keep the younger children quiet so the abuser won’t get angry. Making the older children do more motherly things, like they do a lot of cooking, do a lot cleaning and do a lot of looking after the younger ones.....make the abuser happy or yeah not explode. So, I think children can ...grow up far too quickly or have more responsibility than they really should be having. They take on a lot and they take on looking after mum... they take on a parent role when the mother is in bed crying they’re the ones looking after mum when things have happened especially when you start getting
things like mental health issues, like you know depression and anxiety because of the abuse. Um, a lot of mums can’t function very well.

Lynda: This recent lag that he’s doing he gave her a hiding and her son who is only seven, her son tried to distract him by asking for breakfast...“But dad can you make my breakfast”.

The role the child plays is assumed to demonstrate how the mother is irresponsible, characterising her as the bad mother. Advocates identify that children take an active role in safety planning and this should not necessarily be deemed as evidence of bad or irresponsible mothering.

Sam: She did tell us that she ended up using her older son cos her husband had um gang affiliations. She said when they used to show up she would send her son to like I think two houses from them, like the neighbours with notes to get the police to come...with a note to say call for help...her son was only six.

Advocates take a supportive stance for older children to assist younger siblings as a protective factor especially when risk of harm is heightened. Jools explains,

Jools: We talk to the kids, some of the kids about keeping ourselves safe...older ones about not getting involved in mums and dads stuff and to take the kids and go into another room...as soon as he kicked off the older kids grabbed all the other ones and took them into another room.

A common thread emerging from the data was the notion that women are most often unaware of the impact of IPV for their children until they are removed from the violence. Once removed from the context of IPV they begin to uncover a feeling of relief and capability to mother in the best way they can, and they begin to see how their victimisation has impacted on their children. Krane and Davies (2007) purports mothers’ reflections at this stage of their process is ambivalent; on one hand they are understanding the distress of IPV which can trigger opportunities for change and on the other hand they experience intolerable feelings of guilt. Society views the bad mother as the mother who is inadequate to protect her children and moreover who is oblivious to the impact. Without proposing blame,
advocates share a distinct understanding about how and when to raise awareness for mothers and slowly but consistently impart education and insight on how their children are affected by IPV.

*Lynda:* They think that their children don’t know what’s going on just because they aren’t physically in that room with them...so, I always say to a woman about how ever they’re parenting when they’re in that violent relationship is a fraction of how they could parent if they weren’t in it.

*Jools:* Even if they’re in that room and maybe they’re not seeing it they’re hearing it and they know what’s going on and mums don’t really really understand that...When you say that, they say “oohh I didn’t know that.” Some of them... “Oh ok” and then you can see that they’ve taken it in.

*Daisy:* I’ve said to women who say that their children haven’t witnessed or haven’t directly experienced violence...Did they see the looks you know the abuser gives you? They would feel the tension in the air even before or after and they say oh yeah, I’ve never thought of it like that cos they’d never seen an incident. I said, if you can feel the tension from your partner your kids can feel it or they can feel your tension if you’re feeling upset or anxious or um worried about something. They feel that um even if it’s not directly spoken about or witnessed...a lot of them are awake at night and a lot of that comes out in the programme.

*Cameron:* So much guilt um that they hold and doing the children’s section of our women’s programme is always the most difficult day...and it’s one where I, when I’m facilitating I always prepare them, preparing them all the time... it’s gunna be difficult, it’s gunna be yukky and you know most women don’t want to hear it. It’s awful to know the effects of witnessing abuse or having experienced the abuse directly from the abuser or mum.

Studies by Henderson (1993) and Peled and Gil (2011) report mothers downplay, minimise or deny the impact of IPV for themselves and their children. Minimising the impact of violence and the perpetrator’s behaviour is situated in the attempt to maintain the
idealised mother; the expectation of a two-parent family and the pro-father culture that society endorses. The act of minimisation is a coping strategy as women continue to try and live up to the impossible standards of a good mother; subsequently keeping the family intact. Minimising harm is a common thread found in the data.

Magenta: When someone tells me something I think oh my god that’s horrendous but if they’ve been living with it in their day to day lives they can tell it to me in this normalised type of way and it’s like whoa...I was working with a woman recently...It’s not fine if he’s doing stuff in front of them [children] like um he tried to slam the daughters head in the door, the car door the other day for example, and threw keys at her. Mum actually in this situation, mum did the right thing except that um I guess it’s just that the gravity of that. She gets that its serious but it’s just I think if she hadn’t had all this other stuff happen up till this point...she would feel like she was in crisis but like when she’s telling me the story she tells me in a kinda, this is what happened, it’s not ok but that type of scenario...the woman is minimising it, society’s already minimising it and he’s minimising it ... so if she’s minimising it too then it just means it’s even less likely to be taken seriously.

Daisy: I think society...is very judgemental...whether you don’t see it as bad you know minimising what’s going on, minimising what the kids are experiencing you know or directly being abused....society always blames the mothers...about the mother um protecting the kids but I mean we see it differently; why isn’t the father just not abusing you know?

Lynda: She was getting more hidings every week and nothing’s been reported...the last time he stabbed her and she went to the hospital and told a lie...because she still wants her family together...how do you reconcile that in your mind if you don’t minimise it? How do you justify it to other people?

Advocates demonstrate that through a socially constructed image of a good mother, women fail to meet expectation and are consequently characterised as bad mothers. Advocates are acutely aware of the pressures women are faced with in the context of IPV and the profound harm inflicted on women and children which subsequently interrupts
mothering. Advocates understand and express how the impact of harm provides society with further leverage to pathologise or label women as bad mothers. IPV shapes how women mother and advocates are perceptive about the role children play within the IPV context, specifically in safety planning. Advocates arguably perceive the role of older siblings in safety planning as a strength factor in opposition to societal judgement of being a bad mother. Finally, advocates understand the reasoning and rationale for women to minimise harm; repeatedly women are forced to live up to an impossible expectation.

The Protector

Societal discourse maintains an expectation and assumption mothers are the protectors of their children and moreover they are responsible for their protection in the context of IPV (Buchanan et al., 2015). Krane and Davies (2007) explain the difficulties of mothering within the context of IPV have a direct and profound impact on how mothers protect their children. To protect their children; mothers remove children from the violence, act as a physical shield for their children, and will appease their partners to lessen the blow (Buchanan et al., 2015). Drawing on the following examples, a number of advocates expressed the good mother in the context of IPV as a physical human shield for her child/children.

Pam: They place themselves in the firing line really...if they're keeping their children protected then they're the one that's gunna be being abused.

Magenta: Well literally putting themselves in the way of the abuser. So, I’ve had one very clear memory of a woman I worked with a few months ago and he was assaulting her and she had her two boys (were at school) ... she had her smaller child who was about one at home with her and she said can you take her out of the way so that she doesn’t get hurt? And so, he lifted up the child moved her out the way so he could carry on beating up mum.

Ruby: So, I’ve had a client who was pregnant and she was trying to protect her baby in her puku...he came home one night...angry from a party and took it out on her. It resulted in her losing her baby due to ah physical injuries that she had um but she
spoke of how she was...in a corner of the room huddled trying...so the corner of the room is here and she's trying to protect her puku...so he can kick her in the back and you know there’s nothing yeah can touch her tummy, but he got there and he went you know managed to pull her away and throw her.

The human shield without doubt causes enduring harm for women and isn’t always a successful strategy. Physical injuries endured to protect children also lessen the ability for women to protect their children on an ongoing basis (Keeling, 2012; Lapierre, 2010b). Across the literature, physical abuse and harm to women and children is prolifically discussed but conversely psychological and verbal abuse is rarely analysed in isolation (Stewart & Vigod, 2017). Psychological and verbal abuse is defined as “threats, jealousy, possessiveness, insults, belittling, ridiculing and instigating false accusations” (Stewart and Vigod, 2017, p. 2427). Advocates have a clear understanding of the insidious nature of psychological and verbal abuse, creating further escalating tension. Advocates explain women feel a sense of control with physical abuse in comparison to the debilitating process of ongoing psychological abuse

Sam: Mostly getting beaten up... they said they’d rather take that than be told that they’re dumb, useless. They would rather get a hiding cos it’s over and done with....and they’ve told us a few times they would rather get a crack cos it gets done faster...cos they said it plays, it gets stuck in their heads that they’re useless and that they’re worthless.

The literature predominantly focuses on the mother-child relationship and the actions mothers take to protect their children; conversely not always perceived as protective by society (Buchanan et al., 2015). Examples emerge from the advocates’ stories of mothers who discipline or sometimes go so far as to harm their children as a measure of protection by means of weighing up a harsher alternative carried out by the perpetrator.

Daisy: So, in an incident...women protect their kids by...either disciplining them first so sending them to bed early because they’ve been naughty so they don’t see.

Cameron: Women um will become really angry with the children and actually...some of them actually being abusive to their children to try and prevent him...being abusive to the children cos she knows that she will either smack them lighter than he may. She
actually prevents him...to try and stop him from hurting them she will try and jump in there. I know a woman has said to me that she slapped her daughter. She slapped her daughter because she was trying to get her daughter to calm down. She knew that the dad was gunna come in and...she needed her to stop so that was actually her reaction to try and protect her and herself. The child and herself. So, while that wasn’t good and I would never condone that that was a way for her to keep them safer ... the reason why she slapped her to keep quiet was the fact that he was known and had done it so many other times actually beat the children. So, she knew what the consequence for her daughter screaming was gunna look like.

Both the literature and the stories of advocates highlight the obstacles to leaving a violent partner; the assumption that mothers have control within the context of IPV to do so and the complications that arise for mothers and their children when they do so. Lapierre (2010b) agrees women make children their priority within the context of IPV however, when circumstances meant the risk to a child’s safety was heightened this usually resulted in finishing the relationship. A common thread amongst advocate’s stories revealed the catalyst for mothers to leave their partners was when direct harm to children by the perpetrator had occurred. The tipping point for mothers, and central to understanding why mothers leave, is the point at which children are explicitly harmed.

Cameron: The reason why she left, why she actually decided to leave this time because of the way he looked at her daughter. That was what made her leave. Not the continual beatings none of that. He looked at her daughter and she said I seen him look and I knew he looked at her like she was a woman and that was why she left. She knew she had to protect her child.

Lee: So, their protection kind of kicks in when it starts to happen to the children or they kind of start to realise that oh ok this is impacting on my children. Like you’ll have some that their boys will get to teenage years and start mimicking their father and that’s when they’re kind of like mmm this isn’t good for them so I think it looks very different....a really key reason why women leave in this situation is...generally because somethings happened further with the children; like he’s starting to get nastier to them or he is you know playing one child off against the other. So, that’s where her
protection and instincts kick in rather than staying and being able to see actually that just being in an environment where dads yelling at her horrible things is not a good environment for those children. And then because its starts to move on to the kids that’s when they kind of say hang on a second, he’s not being a good dad and it gives them the motivation and strength to leave.

Fleur: Tends to be more of the catalyst for women leaving the relationship in my experience that when it comes to um the greater the risk to the children that’s the catalyst. Often women will go actually that’s it for me; even if they disregard or not be so concerned about the abuse towards them...I dunno seems to be a higher level.

Advocates stories have evidenced the mother as the protector; a socially constructed responsibility. Furthermore, societal discourse assumes women have control over an IPV context. Stories demonstrated women are conscripted to the harsh reality of physical harm; adopting abuse personally for sake of protecting their children from more severe harm. Advocates demonstrate a clear understanding of the insidious nature of psychological abuse and how on-going psychological harm is debilitating; threats and intimidation, belittling and accusations heighten the complexity. Mothers are faced with such complexity that protecting their children is extremely challenging (Semaan et al., 2013). Additionally, advocates’ perceptions of the choices mothers make to protect their children are from a strength-based approach; while harming children is not condoned, a mothers’ foresight of harsher alternatives is understood. Finally advocates recognise that ‘leaving’ the context of IPV is a societal expectation and fundamentally this is gravely difficult.

Mother Blame and Responsibility

Societal discourse encompasses the notion of mother-blame. Elizabeth et al. (2010) agree women are evaluated in terms of their conduct in relation to their children and furthermore the mandate to protect is non-negotiable. A common theme among advocates that illustrates the ‘non-negotiable’ character of mother’s protection responsibilities is how children are taken away from their mothers as a consequence of their partners’ violence, which sends a direct message of ‘mother-blame’.
Pam: To keep their children with them...I talked to a [child welfare] social worker today and I said to her um so does the mum know that if she doesn’t do what you’re expecting now there will be a FGC [Family Group Conference] and does she know what that means? That you will then be looking at placing that child somewhere else? And she said oh she knows I’ve told her.

Cameron: She ended up doing all of these programmes...she had a clear file and she put all the certificates in, done numerous amounts of programmes. It was ridiculous. She wanted her children. They had been used as dangling carrots. You do all this and try and prove to us that you can have your children back. He did not do anything. Nothing at all. Not one thing. Not one thing. Oh, they suggested it but it was all based on her and she may be able to get her children back if you can do all of this stuff.

Sam: [Child welfare] actually came here and took the kids from her from here....in the end, her children got sent away yeah to his oldest daughter and he could still go and see them and she wasn’t allowed to. Yeah, she was banned from seeing them and he could do whatever he wanted to do, go and see the kids and she wasn’t.

The notion of mother blame appears across the literature and from all angles of advocate’s stories. Society continually reminds women of the standards a good mother takes to protect her children and when they do not measure up, the bad mother emerges and mothers experience an immense amount of guilt (Nixon et al., 2013). Lapierre (2008) agrees women view themselves as failing; failing mothers, failing to protect and failing to meet expectation. Advocates’ stories recognised that mothers hold a level of responsibility themselves and consequently, when the expectation of the good mother is not met, mothers blame themselves for not being able to protect their children.

Pam: I think mums in general tend to feel like they are responsible and that they feel guilty if they don’t do the right thing. They’re the main caregiver...to protect their children and do the best for their children so that their children grow up healthy and happy.
Magenta: She feels like she has really let her kids down over the last ten years. She’s been in this relationship. Most of them...they blame themselves for what he’s been doing but also think that how they respond to it in terms of it yelling back or that kind of stuff too is seen as bad and they are perhaps equally to blame for the environment that their kids have been in...Yeah and they’ve tried to make it work for so many years cos they’re super aware that it’s their responsibility as a woman to make their relationship work for their kids and for them...although they’re aware that they should have left straight away but they didn’t, so carry that guilt.

Daisy: I think there’s a lot of blame...blame from yeah, organisations, society, other people, the public and I think of themselves; I should have done more I should have done this, that and the other and then in reality they’re only living to survive so they’re not being the best parents that they can be...that ability has been taken away by the abuser. So, I think that them being able to protect and love their children in a way that they want to has been compromised a lot by both the abuser themselves and blaming themselves for not being able to provide what they need.

Qualitative studies by Moulding et al. (2015) investigate the issues of self-blame and mother-blame to reveal that ‘staying’ in a violent relationship although not condoned by society is in fact a form of protection. Statistically, the risk of violence for women and their children is significantly increased once a woman has left the relationship, therefore fear impacts leaving and staying is understood as immediately protective. The data showed children placed blame on their mothers for not protecting them from the violence or for not leaving the relationship.

Cameron: She raised her daughter and...even when the relationship broke up he actually went to prison for the assault on her um but the daughter was always angry at her mum...because yeah and actually a lot of the children we see blame their mum.

Daisy: Children blame their mum for staying in the relationship. Children blame their mum for what they experienced or for not being protected enough.
Advocates’ stories present the notions of mother-blame and self-blame; located with the mother and without recognition of the context. Advocates’ stories appreciate the level of responsibility placed on women and the societal pre-occupation of a mother’s conduct and relationship with her children. Advocates acknowledge the constant drain on women’s resources to think and act protectively while mothering in the context of IPV. Finally, advocates expose a distinct consideration for the complexity mothers’ face but more specifically and as analysed in the following chapter, advocates are attuned to the chaos of the IPV context and the multiple factors mothers juggle.
Domestic violence does not ‘take two’. No woman can make a man hit her; violence is a choice he makes and he alone is responsible for it. Blaming the victim is another way perpetrators maintain control over their victims—it shifts the responsibility to the woman.

Mothering is a demanding job at any given stage of a child’s life but when the context is posed with multiple challenges, the degree of complexity mother’s face raises questions about how IPV shapes their mothering (Lapierre, 2008, 2010a, 2010b). Amongst advocates, the impact of IPV is interpreted as chaotic and the chaos is juggled by mothers at home, in the community and within the NZ government social service framework. This chapter represents advocates’ perspectives on the chaos and the efforts mothers continue to make to juggle the chaos and, more importantly, protect their children. The chaos is explicitly unpacked to visualise the environment and take account of the complexity women juggle. Furthermore, this chapter looks at the perspectives of advocates’ work supporting mothers to navigate the social service system while specifically addressing the research questions.

Juggling the IPV Context

As advocates talk about the environment at home for mothers and their children, they take a strong empathetic approach in their understanding of the complexity that women are juggling. Krane and Davies (2007) agree the circumstances to which women are exposed and the difficulty of having to protect their children pose multiple barriers. The following extracts explain how the advocates understand juggling and stresses for mothers as they continue to protect their children amongst the chaos.

Fleur: I think the complexities of mothering for women is trying to actually be a parent and also juggling a domestic violent relationship...I mean how if every day they’re navigating domestic violence they don’t know whether if it’s going to be a good day or a bad day? Or they don’t know whether they’re walking on egg shells or they’re on a
honeymoon and flowers...I think ultimately to parent it comes from a place of you know stability; being in a place of stability emotionally, mentally, physically, and a place of safety. You’re going to be a better parent and so, if you’re not in that place because a person is abusing you then obviously then you’re parenting has potential to be up and down and all over the show.

Pam: Even at the dinner table um they’d be terrified if they [the children] dropped food on the floor cos he would just go off and she would kind of be hyper-aware at that time. Always be there and kind of trying to protect them from that stuff but also trying to keep the kids really calm...but actually they’re all living in this um I guess atmosphere of tension and walking on egg shells and all of that.

Aroha: When you are in an abusive relationship, your first thing is safety; um you’re always on high alert, so you’re constantly in that fight/flight. Your senses are heightened. You are very cautious in what you say and do, um anything to keep the peace to prevent further violence.

Advocates describe a constant state of hypervigilance for mothers and many talked about the daily living for their children. Juggling the chaos accentuates the efforts of mothers for protection in various ways within the context of IPV. As Buchanan et al. (2015) concur maternal protection is diverse. A pattern of hypervigilance is implicated in the mothers’ attempts to keep normal routines in place for their children, as well as understanding the children’s needs and their physical and emotional responses to their environment.

Dawn: I think it is about the basic stuff...like keeping the routines in place. So, most of the women run themselves ragged keeping the routines, going through the normal routines. Keep them going to school on time.

Daisy: You know some mums explain that you know they will have a completely normal life, go to day-care, go to preschool, come home and have their families and the minute dad walks in the door kids go to their rooms cos they know they don’t want to be around dad. They know mum is walking on eggshells. So, she does parent in that space but as soon as dad’s there the kids are like independent.
A pattern emerges around the hypervigilance for mothers to know where their children are at all times; outlined as a clear protective measure by the following advocate.

*Magenta:* I think it can make *ah some women super aware of where their child is at um because they are...used to being hypervigilant about what’s going on with their kids so they’re really...thinking a lot about what’s going on and how their child is at any given moment. I see several mums who yeah, they can really kind of lay it out for me, and you know want to have their kids engaged with the child youth advocate or the programmes that we run cos they are aware of the impact. Not all women are able to necessarily articulate the impact on kids and some will definitely minimise it but a lot of women are really aware of the impact on their kids.

The chaotic environment is taxing and as advocates explain, the multitude of factors mothers are tasked with is often difficult to maintain. Again, the notion of ‘good-enough’ mothering comes into play; what is assumed to be socially expected (Buchanan et al., 2015). Where some structure is imposed on the chaos and hypervigilance is maintained, there appears to be some success in protecting the children. Conversely, where the chaos is unmanageable this can interrupt the mother’s connection with the children.

*Fleur:* The DV parents that were vigilant they were probably more structured definitely, sort of on point. Where’s my child at any given time, who’s around them what’s happening? The parents that I see who seem more detached, there’s a lot more chaos ...so always struggling to keep a routine, always late, you know getting to daycare or school, always got um you know statutory eyes on her about the children, um very difficult in having a kept house and holding accommodation and paying bills. So, there’s quite a lot of chaos. Always some sort of crisis or chaos going.

*Pam:* It’s that role where she’s torn between um yeah wanting to do the best for her kids but dealing with the whole situation you know kind of yeah almost having to be everything to everybody.

In the following quote, Cameron explains mothers’ recognition of the intensity of the environment; the blame they ascribe to themselves for not upholding the idealised image of
a mother, juggling the environment, and giving weight to the expectation of what society holds as ‘good mother’.

Cameron: Basically, to be able to...be the be all and end all for everyone...in particular when I look at some of our working mums you know who are having a lot of pressure juggling the two ...the children but also on top of that is dealing with the abuse ...having to survive the abuse daily...and kind of the draining aspect of it about continually being on edge, watching for any signs. So, that hypersensitivity leads into absolute exhaustion...I've had so many women say to me I feel like such a bad mum cos I’m always tired all the time but its reminding them that they’re continually assessing and reading the signs...like are we safe today? Do I need to move that? Is he gunna be upset about this? So, that’s draining, its tiring. Being able to function to feed your children, bath the children, do all the other things that mean that the house runs, um and so women get disappointed...I've had so many of my clients say to me you know I feel like a useless mum um cos she may not want to cook that night, which is quite normal for any mum...Let alone when she’s continually being drained.

Advocates give a clear depiction of the context of IPV; visualisation conjures up descriptors of dishevelment, disruption of routine and hypervigilance. Adding to the complexity of the environment are other social harms such as alcohol, drug and substance use. Social issues such as these compound the level of harm in the context of IPV. In particular alcohol and drug issues fuel further fires; creating financial hardships as mothers adhere to perpetrator needs for the sake of safety as well as ensuring the children have their basic needs met such as food, water, clothing and shelter. The following example explains how their partners’ substance and/or financial abuse create further chaos for mothers to navigate.

Daisy: Some perpetrators’ um drug issues, so that always comes first and first before milk and bread. That’s not always the case though, some just like to have control ...’no we’re spending a hundred dollars this week on groceries for a family of six’...you know and that can be them not working, perpetrators not working, victims not working, um either way round cos perpetrator doesn’t want the victim to work and that could mean they get new friends or meet other males or hmm don’t want them to have their own money...to the opposite where um a perpetrator makes the victim go
and get them a benefit and put them at risk of being done for fraud and then they use that over them and then they collect the money.

_Jools_: The child there’s just one little boy and the drugs and all the stuff that’s going on and she’s managing it all and he floats in and out as he pleases.

_Dawn_: I think from the most basic things like trying to keep the household running as smoothly as possible so that doesn’t come to um a flashpoint. So, for some men um or partners the issues that cause those triggers can be meals not being on time, picking on the fact that the house is not tidy, you haven’t cleaned up, you haven’t done enough around the house, you haven’t shopped well enough, you haven’t seen to every eventuality around the house. Those could all be things. Finances you name it. Anything really. Literally any um can be anything from psychological violence, you know taking that on, avoiding it for the children, the picking on, the bullying, the wearing down. All of those things. Yeah...um really severe financial stuff going on in the background when they’re trying to protect their children...I know some women who have provided um complete financial support on a benefit for themselves, their children and the partner who’s not putting anything into the relationship whatsoever. No money, nothing and they’re still making that work and still providing for him, still paying the bills and still getting the children to all of these things. Still trying to keep things ok.

Perpetrators exercise coercive control in a multitude of ways and within the IPV context this is manifest in relation to the children, the mothers and their own actions and behaviours. The constant juggling within the IPV context involves managing perpetrator control in order to protect the children and the focus needed for managing creates a space that complicates mothering (Letourneau et al., 2011). Lapierre (2010b) reports that mothers focus on the demands of the partner in order to manage his moods that would otherwise impact the children. Meeting the needs of the perpetrator is viewed by advocates as a protective strategy. Mothers are prioritising his wants and needs in order to lessen the harm to both themselves and their children.
Jools: Too busy trying to keep ahead of him and his needs and some of the stories...women who have had to actually ask permission to go to the toilet, to eat, can’t go out anywhere cos he’s in complete control therefore the kids are, the kids are you know stuck in that too...that person is in complete control...it takes this long to get this child to school and if they’re not back by a certain time?

Dawn: So, I think that women when they’re still with the perpetrator and that stuff is still going on they will...be keeping everything perfect for the perpetrator, while making sure everything, trying to think about every possibility, how it might go to avoid that incident from happening. Yip keeping him happy and keeping things as even as possible. His needs are met. All the things you know, the meals are on the table and the house is taken care of and all of those things are kept ok. And I think you know when those incidences are approaching women will do whatever they can to keep the children out of the away. Yip getting them to bed early so they’re out of the way or taking them to other people’s houses or whatever you know, anything to keep them out of the way...women are really aware of that stuff. Trying to think of every eventuality.

Betty: I think they walk on egg shells to keep the peace. I think they do everything to please the man as much as they can or...there’s a whole range what they have to do to remain alive in the situation; give him the money for his cigarettes when they know when there’s not much food for their kids. Do what they have to do to please, to shut off his abuse towards her.

Aroha: the focus is on him and the mind is often thinking-fixated on what he’s doing or going to do, you know a chunk of it is on him.

Managing perpetrator control however becomes more complicated by the insidious and destructive nature of psychological abuse which mothers endure, juggling the abuse on top of maintaining safety and normality for their children. Advocates draw on examples which describe the psychological harm endured and adding another layer of complexity to the context.
Dawn: Gosh it makes it so difficult sometimes to do the most basic things. Like you know when you’ve got someone being really abusive around the home psychologically abusive, picking on you all the time and you’re really trying to get the children up and ready for school and to school on time or you’re trying to read them a story at bedtime and you just know that person is waiting near the room and has already had a go at you earlier, its gunna start again the minute...you walk back out and you’re trying to keep things ok and normal for the children and them safe...because you know that the whole of the time she’s balancing up all that stuff that’s going on, knowing fine well that the minute she’s finished doing this it’s kinda waiting there and she’ll have to deal with it then.

Jools: It’s really really difficult, psychological abuse...that woman that I was talking about before with the nine-year-old it was constant, she’s ugly, she’s fat, she’s nuts and a lot of them do that.

Pam: And I suppose it’s...a bit like if mum had a broken arm you know she wouldn’t be able to do some of the things as well or as quickly...but she doesn’t have the broken arm, but there is something is going on. It’s having an impact, it’s harder to see.

Advocates demonstrate a clear understanding of the context of IPV and the multiple factors related to meeting perpetrator needs and managing his control strategies that contribute to the complexity. Additionally, advocates interpret mothers focus on these factors as a protective measure; keeping an eye on their partner to safeguard potential harm from the children even while recognising that the harm of psychological abuse makes juggling all the tasks and demands involved far more difficult.

As previously discussed societal expectation rests on the notion that mothers should leave their partner to protect their children. Societal expectation states leaving the relationship is paramount for the safety of both women and children along with the assumption that when women fail to leave the relationship they are failing to protect their children (Buchanan et al., 2015; Lapierre, 2010b; Secco et al., 2016). Advocates understand that either leaving or staying with the perpetrator may serve as a protective factor as
discussed below. Advocates spoke of mothers staying in the relationship; often in fear of the consequences for her children should she leave. Lee explains that women stay in the relationship because although juggling the chaos of the IPV context is exhausting, the protective factor for mothers is the opportunity to keep a vigilant eye on the perpetrator, closely monitoring the situation and therefore protecting the children.

Lee: At that point it’s a clear decision. She stays with him for whatever reason, that might be…utter fear and trying to protect those children…If he’s drummed into her so much that he’s gunna kill those kids if she leaves.

Advocate’s stories identify the unreasonable and idealised expectation of mothers to have control of the IPV context to the extent that they meet social expectations for their children’s protection, as identified in the literature (Lapière, 2008, 2010b). The following extracts show expectation and responsibility for protection is centred on the women in the IPV context but little consideration is given to the lack of control a mother has over the perpetrator’s behaviour. Mothers juggle the chaos of the IPV context, powerless to influence his mood, behaviour and harmful actions, despite her ongoing efforts.

Cameron: The difficulty is that they can’t predict someone else’s behaviour…and if you’re trying to look after your children and you have to be careful…she has no control over the way that that behaviour, well obviously she had no control over it…so that’s the huge difficulty.

Magenta: I guess it’s that it’s the mixed messages about what a woman is supposed to do in that situation…it’s her responsibility to both take the child out of the situation and stop it from happening again and hold the relationship…that it is their responsibility ultimately to do that…and that the number one thing that they have to do is to somehow control the situation so that it doesn’t happen when they don’t have that power.

A lack of power to influence the behaviours of abusive partners or control the environment of IPV characterises mothers’ attempts to juggle the chaos of the IPV context, whether through hypervigilance, taking the blows or the blame, maintaining routines or
keeping the peace, staying or leaving. Regrettably, advocates affirm social service systems professing to protect do not; mothers are often powerless to affect outcomes and there is little understanding of the chaos women juggle given a mother’s only goal is to protect her children. The following section draws on the themes of advocates’ stories emerging in relation to the plight of women juggling the complexity of the system intended for social service and legal support and protection against domestic violence.

**Juggling the System**

The New Zealand social service framework is established with good intent to protect women and children in the context of IPV and furthermore there is strong societal expectation for the system to do so. However, and sadly, without intention the system can fail women and children (Family Violence Death Review Committee, 2017). Policy and legislative requirements as well as a multitude of social services are expected to perform in a particular way that protects women and children from harm or any on-going harm. Protection orders are an example where there is an expectation to support mothers but unfortunately the reality is a growing concern for advocates.

**Protection orders: friend or foe.** A protection order under the New Zealand Justice System is an order applied for and used by the family court system with intention to protect a victim in a situation involving alleged domestic violence (Ministry of Justice, 2017). Aroha’s perspective is a common thread amongst advocates expressing how a protection order must be utilised to protect women and children effectively.

* Aroha: * I see it as an extra form of protection however...because anybody can breach a protection order although it is law. It is invisible to many perpetrators and can be actioned/useful to the survivor if they ring police and report what is happening. This will lead to more charges against the perpetrator and the perpetrator does get held accountable. The person must use the protection order to its full potential in order to benefit from it.

While Protection Orders have legal standing, advocates explain the protection order is merely a tool and harshly, the reality of how the tool protects women and children is, at
times in stark contrast with the protection orders intent. The following extract identifies the reality of continued and on-going harm despite a protection order being in place.

Ruby: We are made to preach about safety from the courts perspective that they have this awesome piece of paper called a protection order that can keep them safe. BULL shit! It does its job. It does do its job but women put so much hope in to it that what they say the protection order will do, will keep them safe from further abuse doesn’t always tend to happen. So, ah one of my high-risk clients (so high risk is...any chance...he will try and hurt her whether it’s you know verbal, psychological, physical. He doesn’t care. He doesn’t care if police are around. He doesn’t care whose around if it’s in public or at home...he will just, he will try and thump her)....Forty-two incidents um reported... she was driving home um from a court proceeding ... because he was there um the police know that she’s at risk...so she is red flagged....she was escorted back home. So, she was in her car...the children weren’t present...the police were in front of her and she was in her car following the police. He was in a car behind her and trying to physically ram her off the road with his car. Police were in front and do nothing. They just carried on to her house...she was...flashing her lights and beeping and you know trying to stay on the road while he was behind her tapping her car with his car. So, the police pulled up outside her house. She pulled up into her driveway and he then drove his car up her driveway over some um pot holes...basically wanted to take her out with his car but her car was in the way and she was in front of the car. So that didn’t happen but he wanted to hit her...the police saw this happen. Now she’s got her protection order in place. They witnessed the nudging and trying to basically run her over in her own driveway um and the kids were standing outside on the porch, like what the fuck is going on? But yeah it got put down to reckless driving.

The expertise and support of advocates to assist women in navigating the system becomes pivotal. Once a protection order is arranged, advocates support women to understand the benefits of reporting when breaches to the protection order have taken place. Breeching the protection order develops a picture for the courts to understand the level and degree of harm to the woman and children by the perpetrator. However, as
advocates point out, when a protection order is breached the system often fails to act despite the need to protect women and children from psychological abuse and manipulation.

Fleur: We see clear breaches to children where the abuser will get rights to have the children and while they’ve got the children you know they may breech the order by saying, mum’s a slut, mum’s a whore...they will talk badly about mum and I’ve seen where um women have tried to do something about it but come up against barriers. So, for instance they may ring [child welfare] or ring police and say look this man is breaching this order and is breaching my child’s rights...but it’s not taken seriously...It’s not acted on. It hasn’t been acted on.

Lee: They have to use it and so when I’m doing my advocacy with them about protection orders I’m very blunt about this is the piece of paper. If he turns up at your house this is not going to save you, you need to use it and that’s really hard to get across to them because he’s always said to them, call the police and I’ll kill you or I’ll kill the kids...so breaching him on a text that’s saying I miss the kids is really hard. I’ve got this protection order but I might send you this text and if I don’t get breached then I’ve got one like toe in the door.

There is strong message from advocates with regards to the failure of the implementation of protection orders yet in many cases advocates also report that women are advised against applying for a protection order. Across advocates’ stories, the question commonly raised was “what is deemed enough?”; what degree of harm are women and children expected to endure before a protection order can be applied for and moreover utilised optimally? Betty and Aroha describe the struggle women encounter accessing a protection order, highlighting yet another demand to juggle in the context of IPV.

Betty: To do a protection order, it’s not enough for a protection order. What’s enough? Yeah what’s enough? This is beautiful. The elderly dad...went to the lawyer and the lawyer said I don’t think you’ve got enough to apply for a protection order and the dad said to the lawyer what does she have to do? Come in here with a black eye? Go dad! How much does she have to put up with? How much does she have to experience for it to be proven that’s she needs protecting from him?
Aroha: She’s seeing a lawyer...I feel that with some women they want to get a protection order however you have to have so much evidence. It’s like they need to become their own detectives nearly and gather their own evidence...in order to use that towards getting a protection order. Well they’re saying the more evidence you gather the better. I’d say the more once again depending on the severity but it’s not as easy as I feel it could be. Not all women make contact with police therefore the evidence of the police report is not available to these individuals whom do not choose this. For individuals whom do not seek police assistance the only other path is through a lawyer, where clients are told they do not always have enough information/evidence for a protection order and through the court process it ends up being her word against his. This is what I was talking about earlier where survivors need their own evidence and the timelessness of this process can be stressful and hard for the person seeking protection. There are individuals that give up and do not bother due to the length of time it can take to obtain.

The turning point in this section of the analysis demonstrates how the system is neither seamless nor streamlined. What appears to be legislated with good purpose becomes a problem for women to navigate in the complexity of gaining and utilising a protection order. The system is imperfect from the perspective of advocates. The kind of evidence the courts require and the gap between their requirements and what women can provide is pertinent to making any viable progress in protecting women and their children. Furthermore, it is argued that for many women the complexity of the system and more importantly protection orders, can set up expectations of protection that fail and leave them with a lack of faith in the system’s ability to provide protection.

A protection order poses a legal threat to the perpetrator and consequently increases the risk of the harm to women and children. Magenta’s example highlights the perspective of the perpetrator, threatened by the system and experiencing a potentially heightened sense of loss of control over the woman and child.

Magenta: I mean the protection order is not for everybody...because it can increase the whole thing about when you choose to leave is the most dangerous time and then
you put a protection order in the mix and that can really amp some guys up so...it also increases risk for at least for a short time.

**Forced engagement.** Studies by Fields (2008) explain how the system finds ways to blame mothers for the abuse and assist the perpetrator to evade accountability. The easy accessibility of mother blame creates a space for the complexity of IPV to exacerbate. Nixon et al. (2013) report mothers look to social services to connect and support them through the chaos of the system. Advocates’ stories also identify the mother-blame that their clients face as they navigate social services; they’re blamed for an inability to protect the children and blamed for the perpetrator’s harm. Interviews unfolded the power and control exercised by the system; the lack of control a woman has over the perpetrator’s actions and the system’s responses. Mothers understand all too well how statutory services are powerful, controlling and blaming. The following extracts explain how women are forced to engage with social services.

Daisy: *I have a client who I've been with pretty much since...the beginning of last year. She kept coming up on police um like polls [police reports on family violence incidents]...we tried calling her. She didn’t want our support or everything was ok until [child protection] got involved. No, she wasn’t engaged before. She came in and said [child protection] have taken my kids I need to do the women’s programme. That’s what they were making her do and that’s what initially started our contact. Forced engagement... they then had a FGC [Family Group Conference] cos the kids were taken out of her care and put into care of her father because of the violence of her partner. No, they never said it was about her parenting. They never said it was about neglect or anything like that around her parenting. Her parenting wasn’t the issue. The issue was the violence from the [children’s] father but yet the children were taken from her... this is still ongoing.*

Pam: *I suppose, in my experience the outside agencies are [sigh] they’re not as; I guess it’s more of a pressure than anything to start with...I don’t see that often that someone will come knocking on her door and say hi I’m here to help and what do you...*
need me to do? But it’s more like a knock on the door and hi what are you doing to
keep these kids safe? And what are you going to do? What are you gunna do um to
stop his violence? That type of thing.

**Fear and blame.** Within the context of IPV mothering is shaped by fear; fear of
perpetrator harm to their children and fear of child protection service responses. In Aotearoa
New Zealand, child protections services are provided a government agency bound by
legislation, tasked to provide a social work model of care for children who are impacted by
severe neglect or abuse. The services have the mandate to remove children from the home
and from the mother if the protection of the children is deemed unsatisfactory. Yet again the
responsibility to protect children is placed primarily on the mother and an inability to do so in
statutory eyes deems the mother as a failure (Lapierre, 2010a). Nixon et al. (2013) concurs
mothers who are involved with child protection services elsewhere are blamed and viewed as
irresponsible. Advocates’ stories express the fear mothers have of their children being
uplifted and how this response increases the complexity of IPV for women. Focus is shifted
again to the mother’s inability to protect as opposed to focusing on the perpetrator’s actions.
The advocate’s spoke of fear coming in the form of not reporting breaches to protection
orders in order to keep child protection services from becoming involved.

*Jools:* Well a lot of them are scared to call the police ‘cos [child welfare] will get
involved and everyone is scared of [child welfare]. [Child welfare] are gunna come take
the kids cos that’s what they say...they just came and took my kids.

*Lynda:* She’s been in that relationship eight years, they’re married and [she’s] getting a
hiding every week. ‘No one gave a fuck and now my phone won’t stop ringing,’ she
goes. The courts are ringing, the police are ringing her. She just manages the situation
as best she could.

Furthermore, Cameron justifies why mothers stay in the relationship despite the
responsibility child protection services place on mothers to leave. Advocates’ stories are
centred on the directives of child protection services and strong messages of mother blame.

*Cameron:* The other classic one is um you need to leave him or we’re taking the
children. So that ultimatum of...leave or the kids will be taken...how fearful and rightly
so she is. I think the difficult part is trying to explain to people you know the reasoning for a woman to stay is that a lot of the time they need to monitor the mood…it’s easier for them to actually safety plan while seeing him than it is to be away…to be scared about what it is.

Coming under the microscope of child protection services further complicates mothering and as shown in the extract below there is a strong prevalence of mother blame. 

_Daisy: so back when the FGC [Family Group Conference] happened um the plan was that there was no contact with the father…not to allow the children…to have contact or she’s not allowed contact due to the risk to the children and that’s child youth and family’s view again. That’s very victim blaming because she hasn’t done anything wrong. Has the perpetrator and the abuser and the violent person in the relationship? ...The children eventually came back in her care once this plan was in place; in her care but not her custody. So, [child welfare] still had custody but the day to day looking after was done by the mother. He the abuser then turned up. She rang the police; he smashed up her car while she was inside waiting for the police he then got put in jail. [Child welfare] then turned around and said well he’s in jail now we’ll start the watching period in your care...she’s done everything right. She's stuck to the plan. She's used her protection order. She’s done everything. She’s done the programme...she’s done...other parenting stuff. She’d done everything [child welfare] had asked her to do. They keep changing the goal posts. This case...we’ve gotta go back to another [child welfare] meeting. It’s still ongoing so it’s been nearly a year and a half...he got sent back for breaching again. So, she’s still doing everything right and yet [child welfare] are still blaming her. No, they’ve been taken away out of her care um because of apparently allegations that he was on her street and she said well that’s not my fault if he was walking down my street, then that’s his breach. That’s got nothing to do with me...they’ve turned around and said she was allowing him there and she said no I’ve never allowed him here...so again they’re blaming her for what his actions are.

_Daisy provides a specific example in her experience that encapsulates the grave difficulty for women to protect their children and complicates the chaos that is a
consequence of the partner’s violence. Daisy shows the women’s circumstances come under the spotlight, as the system brings a deficit model of mothering into play. The focus is not about the strategies this woman undertook to protect her child (reporting violence to police) but rather on the deficits in her mothering; the complication for mothers is attempting to protect their children and meet the demands of the system. Mothers are unable to protect their children when child protection services impose compliance with programmes and behaviours deemed fit by the agency and fail to recognise the protective strategies mothers are already using or hold the perpetrators accountable for the harm they mothers and their children are experiencing.

A study by Hughes and Chau (2013) investigates the practices and interventions of child protection service workers in the context of IPV. Findings showed the notion of mother-blame was prevalent. Mothers were the focus for education about the impact of violence on their children. The level of cooperation between the mother and the child protection service worker was a focal point and more specifically intervention to help the mother protect her children was narrowed to ‘leaving the relationship’ or being coerced to separate. This demonstrates how women are held responsible and expected to be the sole protector, despite being victimised themselves, by their partners. The following extract draws on the notion of systemic mother-blame in a situation where institutional expectations held that a woman could control the actions and behaviours of the perpetrator.

_Cameron: The whole FGC [Family Group Conference] was about her. She was not abusive to her children at all. The issue, the reason why they were even in the FGC [Family Group Conference] was because she was a victim of abuse from her partner. The whole FGC [Family Group Conference] was focused on her attending our programme um attending an anger management programme. She’d never shown any signs of needing anger [management] whatsoever. They had numerous stuff for her to complete, parenting and all this other stuff and I said to them so why is it that she needs to attend all of these?... The issue was that man sitting over there has been harming her, that’s why the children have been uplifted. Oh, you know she needs to show that she’s able to protect them. That was their response. She needs to show that she can protect them... so you’re not going to question the man that’s hurting them? Like he needs to stop hurting her! Direct blame on her. They didn’t say anything about_
the fact that he was not protecting his children by his own actions. There was nothing about that. It was all about...she needs to show them that she can protect the children...from blaming her to putting it to where it actually belongs, which is the abuser.

Magenta: Their big thing is about what mum is going to do to protect the kids and without understanding the dynamics of domestic violence necessarily and the complexity of that and that day to day these women are just surviving, getting through the day um and doing whatever they can to survive and to protect their children as much as they can; which isn’t necessarily what [child welfare] might consider to be protecting their children... those words have not exactly been said but that’s the implication and that...she’s not doing as much as she can. Why doesn’t she just leave?...without understanding all...the reasons, the complexities as to why women are staying in those relationships and why the focus isn’t being placed on to the abuser as to stop that behaviour.

The perceptions of both Cameron and Magenta present strong arguments which underpin how the assumptions made by child protection service workers overshadows women; the assumption mothers do not have the appropriate strategies to protect their children, the assumptions women are not equipped to protect their children and finally the assumption that women need to leave. All these assumptions pose further complications but ultimately blame women which in turn creates fear for mothers of the social services whom advocates would expect show a pragmatic stance in such adverse circumstances.

Mothering is complicated by social expectations. As reported in the extract by Magenta, advocates are comfortable to challenge societal and systemic assumptions that women are primarily responsible for protecting their children in the context of IPV.

Magenta: I guess what they think is protecting their child and then what [child welfare] tell them is protecting their child can be quite different...they’re a statutory power. [Child welfare] tell them that they have to engage with certain services...like refuge or other services and um we know...how we work with our philosophy. You can’t make someone engage...that’s not how it works and so sometimes we are
coming up against a [child welfare] social worker that’s telling us that this women has to engage with us...[child welfare] are purely focusing on...there’s still the idea that it’s their responsibility to be the primary caregiver and...it comes back to all those stereotypes that women are more nurturing and...it’s really embedded in [child welfare] and in government agencies especially...those ideas of roles of women and what they have to do to look after their kids.

Under the microscope of child welfare Dawn explains how statutory eyes are solely attuned to the mother. Mothers are forced to uphold child welfare expectations; child welfare maintains deeply systemic and institutional responses holding mothers to account for protecting their children despite on-going victimisation by their partners.

Dawn: [Child welfare] we will have to intervene if you don’t leave. We will intervene. We could take your children away...it would be the mother they get in and they won’t talk to the father...but I think it’s much easier to put that weight of responsibility on the women cos she’ll take it...she’ll see herself as responsible for these children and she’ll see herself as a responsible person. I suppose what I see with the women I’ve worked with is that they’re just really in tune with their children, they’re thinking about here and now, the physical safety and they’re also thinking about the stuff that’s gunna play out in the future.

Pam: I think that whenever there’s a domestic violence incident...and then [child welfare] often make contact with the mother it seems to me like there’s a huge responsibility on women and mothers to be responsible for that violence or protecting their children from that violence. Nobody contacts the dad...in some ways it could be I guess another support for the mum if [child welfare] had the resources to offer that support? But I think at the end of the day it’s just another kind of responsibility being placed on the mum...It’s on the mum and how she can keep her children safe ...[child welfare] get contacted...and they place an expectation on her that she will keep the kids safe.

Social service responses to IPV reproduce and advance the complexity for mothers. New Zealand Police (NZP) has continued involvement in the context of IPV with providing
resource for the safety of women and children as their mandate. Contact with police is vital for women and children especially when reporting incidences of harm. Consequently, women place a great deal of hope in NZP as a resource to eradicate or mitigate further harm. In cases where women remain in an IPV relationship, NZP are involved with safety plans and/or investigating incidents. Although NZP are recognised as a resource and positive response within the community, advocates reveal police presence in the context of IPV can create adverse ramifications and exacerbate the woman’s fear of her partner which in turn creates fear of legal intervention because of the partner’s response.

   Lynda: he’s [perpetrator] not gunna go, it was great the cops came and talked to us wasn’t it? They’ll be like...the fuckin cops turned up...what the fuck did they come to my house for?

Reporting an incident of IPV can heighten the harm as Lynda explains;

   Lynda: He [perpetrator] went and how the fuck do they know? Who told the? Even though he knows the police have been there...or there comes the sexual abuse, she’s given him shut up sex...you know he’s not gunna go, it was great the cops came and talked to us wasn’t it?

NZP responses to IPV are comparable to child protection/welfare services also placing expectations and responsibility on women to protect their children and engage with their [NZP] service.

   Pam: I think even police as much as they’re great and they do good work...I think often when they’re called to family violence situations they’ll take the women aside, they’ll say ok you need a protection order. You need to do this, you need to do that, and all of a sudden, mums got this, like she’s got all these other things to do.

The fight to protect the children. Emerging from the data is the notion of organisational requirements for women’s compliance with systems approaches to intervention. Mothers were compelled to follow directives of government agencies and moreover work with agencies in an amenable way. Fighting the system is taxing and the struggles are real.
Ruby: I had been working with the um family violence coordinator at that time but his view on her was that she was difficult...she had every right to be difficult. She had the odds stacked against her ... she was tired of fighting but in their eyes, she was the more difficult one and at times he was more the easier one to engage with.

Ruby reiterates that police had little recognition of the complexity the woman was navigating and so the woman was labelled as difficult. The context of IPV is comprehensively discussed in this analysis as complex; advocates see the challenges women face and juggling act they perform in ways that are understanding, non-judgemental and supportive.

Peled and Gil (2011) argue that mothering is challenged in extraordinary ways in the context of IPV and moreover mothers adopt a multitude of strategies and juggle numerous demands to protect their children. Furthermore, in pursuit of protecting their children, mothers create a barrier between two worlds; the violent world and the children’s world, (Peled & Gil, 2011). A mother’s determination to protect her children is widely recognised across some of the literature (Buchanan et al., 2014; Peled & Gil, 2011). The following extract explains the practicalities that institutional challenges pose to mothers in their fight to protect the children.

Magenta: Practical things like different schools and places...don’t necessarily take it seriously that the kids are in danger...for example, unless there was a parenting order already in place stipulating that a child can’t be picked up by you know the father um then if the father turns up at the school to pick them up, then the school will let them pick them up! So, this is a situation I faced today...I’m going to a lawyer’s appointment next week cos that’s the first time the lawyer can do... the school have told her even though he’s wanted for arrest at the moment um because there’s no parenting order and she wants protecting and she’s doing the right thing...talking to us, got lawyers appointment, talking to the school and doing her best to protect her kids and they’re saying, well you know legally he can come to the school.

The data shows protecting children within the constraints of the system and the complexity of the legislation is onerous for women. The advocates’ stories describe the system as a one-size fits all approach and the ability to manoeuvre within the constraints is again taxing and complicated. Additionally, the perceptions of advocates indicate how
essential having evidence is and where evidence is both difficult to obtain or there is reluctance to report, women are stuck in a dangerous dilemma.

**Courts and lawyer for the child.** Family law professionals (justice sector/NZ Courts and judiciary) may alienate mothers and interfere with relationships, complicating a mother’s ability to protect her children (Elizabeth et al., 2010). Through family court and custody cases mothers are often perceived as hostile and alienating; non-cooperative in response to the directives of judges for children to have contact with their fathers (perpetrator), and the key person alienating the child from their father (Elizabeth et al., 2010). Across the literature, there is evidence that courts interrupt a mother’s support and ensure parental responsibility is weighted solely on mothers. Fathers who are perpetrators of IPV are not held to account. Advocates’ stories of the complexity for mothers to navigate the courts are prevalent in the data. Advocates understand that courts take a strong stance in favour of the relationship between father/perpetrator and the child regardless of how extreme the history of violence. The courts without doubt reflect a pro-father culture and in turn create a context which further complicates mothering.

*Pam: The court system is set out to favour having both parents in the child’s life...* I think there’s a really clear message coming from the court or from the ministry of justice that dad’s presence in the kid’s life is paramount. That’s a message I get from the court system regardless of the circumstances...I’ve spent quite a lot of time at the family court with women and I’m sure that message is underlying everything because there’s stuff that happens and it’s almost like the judges have blinkers on because they need to stick to the law, that it doesn’t matter what dads like, he needs to be in that kid’s life...it’s a cultural thing coming through from the courts that we should all foster dad’s presence in the child’s life for the child to be a healthy human being. I have experienced um a boy who was 12 not wanting to see his dad and had experienced physical abuse a few years before and the judge ruled that he must see his dad regularly and that mum must encourage it...was a woman judge and I could not believe her whole attitude throughout the whole trial and we see that now...Like I say to women you know that he’s always going to have contact and he will, even if it starts off as supervised, he will get unsupervised eventually...some of the hardest ones are when there is psychological abuse only and he comes across as really charming in
court or um yeah, it’s not so visible in in the court room and it looks like you’ve got a decent dad who’s trying to do the best. If there’s physical abuse, it’s easier, well not easier, it’s clearer. But even then, um it’s still feels a lot like there is this um very strong message that dad needs to be in that kid’s life.

Pam provides a specific case in her experience that encapsulates the way family court prioritises contact between father and child over the safety of the children. The complication for mothers attempting to protect their children is emphasised by the judge’s ruling that the mother must encourage contact. In the absence of physical violence, the woman’s situation is even more complex because the kind of evidence of violence that is most valued by the legal system isn’t accessible to verify the abuse she has experienced. Field’s (2008) is a retired judge who is certain “violent men should be acknowledged as violent fathers and domestic violence offenders, who pose a continued risk of harm to children and their mothers” (p. 96). Mothers are unable to protect their children when the courts impose compliance with rulings to support father/child contact.

While, the lawyer for the child is a court appointed lawyer who acts as the child’s voice within court proceedings, the expertise of advocates in the field of IPV is completely disregarded within the courts. Privileging legal expertise over advocates’ knowledge of IPV further marginalises women as they fight to protect their children. Emerging from the data are stories based on the courts and the lawyer for the child who both show a considerable lack of understanding for the complexity of IPV from the perspective of advocates. Overall, courts view IPV as an issue of family dynamics as opposed to narrowing concentration on male perpetrators as serious criminals who are more likely to commit continued serious offences and harm (Fields, 2008). Advocates’ stories accentuate how perpetrator’s control in the system and the persona are both portrayed and perceived in the courts to the detriment of women and children’s safety. As Dawn’s story shows, through lack of understanding the court’s decision making can contribute to ongoing harm and even to subsequent death.

Dawn: I think over the ten years that I’ve been doing this role there are definitely...a small percentage but a percentage of times where you’d think they’d be better off...but the courts will hold um the contact with the father up above almost everything else regardless. I’ve seen...these guys go to jail for long sentences but they
still got some way to keep the relationship up with the child even when it’s been really extreme...it’s like the court process, they don’t have enough contact with the children to really see... anything apart from the snapshot view...I would get to see the kind of things that he was doing to her over the course of the day that would be having the effects on her and I was seeing her trying to keep all these things together for the children but also trying to deal with this other stuff, courts and various lawyer for child and all of that. So, you really get to see the flavour of what is going on with that ex-partner. You know in a way that a snapshot is not going to capture that relationship. This woman is I don’t know if you know May Fan who was in the news last year she was killed by her husband.

Within this section of the analysis advocates spoke of maternal alienation where the focus narrows to the mothers parenting skills and the responsibility to protect her children against all odds. Furthermore, women are consistent in their quest to protect their children within circumstances that complicates their mothering. Later, advocates acknowledge how the system insists on father/child contact, despite the level of harm women and children continue to endure. It is evident in these accounts that women are battling a system favourable to fathers/perpetrators and advocates understand the complexity which requires support for women through heightened complication.

As interviews unfolded advocates reported the lack of knowledge and understanding from social service providers and government agencies about the complexity of IPV and so the consequences for women and children was often compounded.

Betty: A lot of our lawyers are quite educated and...know what it’s going to be like standing in front of the judge. So, I think they are a bit of a gate keeper for what our judge will tolerate...well I guess the key thing for the judge is to have a really good analysis, be well trained in understanding the subtleties in yes psychological abuse or financial abuse, all the different, all the other abuses that don’t show broken arms and black eyes, broken jaw, red eyes through strangulation...to have an awareness.

In the literature, the pro-father culture is widely documented (Coy et al., 2015; Elizabeth et al., 2010; Fields, 2008). Social service providers tend to favour the perpetrator’s needs and continue to communicate a pro-father stance. Hill (2015) explains the success of a
court proceeding is determined by the increased contact between perpetrator and child. As Lee demonstrates mothers are trapped in the societal assumption that a two-parent family is ideal and moreover is in the best interest of the child, regardless of the level of harm a partner perpetrates.

Lee: oh he’s a good dad and you know the kids will miss him and so kind of talking herself into staying and all the reasons why she shouldn’t leave along with that fear thing...they always come in and they’re saying um you know he’s a great father but that great father to her looks like they took them to the pool once a year or you know and the rest of the time she did everything and he took all the money that sort of stuff. So, you really got to question that belief in them because but that’s what’s really strong in pulling them back because when the kids start to ask where’s dad? or I miss dad and she’s got to be strong enough to say well you can see dad but mum and dad are no longer together.

Responsibility is weighted on the mother to protect the children. Across social service providers the focus is located with the women, what she is doing, her compliance with interventions and how she cooperates with services (Elizabeth et al., 2010; Fields, 2008). The courts, NZP and child welfare intervention and practice in the context of IPV are centred on the mother. The spotlight is on the mother and perpetrator accountability concealed. In the following examples, the data accentuates the added pressure and complexity placed on women whilst little focus for accountability is set on the perpetrator.

Dawn: What’s happened is that the lawyer for child has come back in, done another interview with the children. The children cos they are of an age where they have been manipulated and just want things to be better and if you do this, this will make dad happy and things will be normal, they have told the lawyer for child that they just want to go back to shared care even though obviously he’s got some issues. Even if they’re undiagnosed...but the courts will hold um the contact with the father up above almost everything else...there is this priority. I think women in general do expect that of themselves...but there’s just this added ridiculousness...if you’re like working alongside [child welfare] with the women, they are just looking at the women. They’re saying well do this. If you don’t do that...they’re going to the father, the abusive partner.
Cameron: there was no um need for him to be accountable for any of his actions... all the responsibility was put on her.

Unquestionably, there is a social assumption that leaving an IPV relationship eradicates harm or reduces risk of harm for women and children. As previously discussed, leaving the IPV relationship or in the aftermath of separation harm and abuse is heightened (Bhandari et al., 2011; Lapierre, 2010a). Leaving adds another layer of complexity, notably when there are scarce resources for women to call upon. A common theme amongst advocates describes the issue of accommodation/housing; the lack of accommodation across numerous communities, or isolation from schools and support networks if women need to relocate with their children. Furthermore, perpetrators hold control over women and children enforcing non-removal court orders. Women are often unable to relocate for the safety of their children; they are mandated to reside in the same area as the perpetrator.

Cameron explains;

Cameron: If a mother comes in here and um she needs to leave for her safety and her children’s safety... the amount of times that our women having forced to stay in an area because of the legal system where the father (whether or not he has access to the children) has the right to put in a non-removal order, even if there’s a protection order. And normally that’s the ones that are really high risk... she can phone the police however many times, he can go to jail for a couple of months and he will do the exact same thing but she cannot leave... no matter where she is within [this area] is not very big... doesn’t take that long to find someone.

The heightened stress of accessing suitable accommodation and managing limited finances can sway decision making from leaving to staying. Advocates accounts show how complexity is intensified through levels of stress imposed by a lack of essential and necessary resources.

Aroha: And stressors... house hunting, the financial and other things, all these other stressors can interfere with healthy relationships of leaving... and of starting again. I mean um once again you need that strong foundation, that stability, that sense of
belonging, having somewhere you can call home. And the rest starts to fall in to place after that, but you really need to get that done first.

Emerging in this section of the analysis is the heightened and continued abuse despite leaving the context of IPV. The following example details the severity of harm experienced by a woman who had separated from her partner:

Cameron: This woman... she’d smashed cheek bones. In the end like her eye socket had you know like her eye was quite funny cos of eye socket damage from a beating she had quite a long time ago from him... the situation that we got involved with um he’d picked up a poker from the for the fireplace and he been walloping her with that so she had deep gashes all over her body.

The complexity of the IPV context is compounded by financial constraints; another balancing act for mothers to manage. Advocates tell of two sides of the coin; the struggle for women to manage finances in order to provide the basic needs for their children and their resourcefulness as protecting their children becomes the priority. Dawn explains;

Dawn: Severe financial stuff going on in the background when they’re trying to protect their children... some women who have provided um complete financial support on a benefit for themselves, their children and the partner who’s not putting anything in to the relationship whatsoever. No money, nothing, and they’re still making that work and still providing for him, still paying the bills and still getting the children to all of these things... I worked with a woman very recently who I was gobsmacked to see how she was managing to do that on a benefit and had done for the whole relationship with this guy. He’s getting a benefit of his own and she doesn’t know where the money goes... she’s managing to buy a car, she’s managing to pay all the bills. He’s never bought anything for the baby. She’s providing everything for the baby. She’s running around making sure that that baby gets all the checks that it’s supposed to have. The baby was born with one kidney so she’s getting the baby off to all the renal appointments and he’s just there providing nothing and being abusive. So, she’s doing everything she can to make it as normal as possible for her and the baby and protect the baby and keep the baby out of their way when things escalate at all times.
Fleur: Poverty is huge... and actually the other way too. Resources are huge in the fact that um I suppose whether you’re wealthy or low socio economic doesn’t matter, power and control can still impact you... but we do see that lower income is definitely harder because resources give you opportunities and get access to better lawyers, you get access to... transport, you get access across the board... even in the way you’re perceived by the system. If you have resources you’re even perceived different and I even think the level of support would be different.

This section of the analysis draws on the advocates’ perceptions of the New Zealand social service system and how the complexity of the system intersects with social expectations of mothering. The system continues to place responsibility on women to protect their children and in doing so there is a weighted expectation to leave the relationship. Advocates show there is a gross lack of understanding within the system and stakeholders to recognise the complexity of the context of IPV and moreover, what women juggle in order to protect their children. In turn, this heightens the complexity and chaos for women juggling perpetrator demands, the chaos of the IPV environment and navigating the system. Advocates’ stories invoke the notion of system compliance; mothers forced to engage with and/or forced under the system’s spotlight and scrutiny. Furthermore, advocates’ stories evidence a clear understanding of the purpose of protection orders however advocates give warning to the magnitude of potential harm and/or the shortfalls of such documents. In summary, the lack of understanding within the system, the pro-father culture and an expectation to leave promotes a system which misinterprets and is ignorant to the chaos.
CHAPTER SEVEN: Analysis Part Three

Survival and Support

*People need help, and they need support.*

And they do not need to be shamed or judged because believe me, that shame and judgement is built into that system just fine.

(https://www.facebook.com/womensrefugenz/)

Emerging in this section of the analysis is the advocates’ understanding of women’s survival strategies and support; addressing questions of how women survive in the context of IPV. How do women protect their children when they are just surviving? Sadly, too many women and children are killed as a result of the violence perpetrated against them. This section delves into the stories of advocates based on the tactics women employ to survive and to protect their children, as well as exploring the types of supports women need in order to survive. In particular, the role of the refuge advocate is discussed; how an advocate’s role is a pivotal support as an expert in the field.

**Survival**

Mothers juggling the chaos of IPV are in survival mode; constantly reading signs to neutralise the environment, de-escalate an incident and ultimately protect their children. Surviving means juggling the chaos and protecting their children in the best way mothers can even when mothering is complicated (Davis, 2002; Lapierre, 2010b; Semaan et al., 2013). Advocates recognise the mode of survival by which mothers operate.

*Fleur: It’s just navigating a domestic violence relationship and its survival and everything a woman is trying to do to survive herself ultimately the children are going to be part of that picture.*
Ruby: So not only have they got their own survival tactics that they use but they also got their own risk assessment in their head of ok how would that work in my environment would that work for this over here? Do I involve the children in that?

Literature affirms women employ multiple strategies to repel violence and in the face of an escalating incidence, a mother’s resistance and increased action to protect her children is extraordinary (Bhandari et al., 2011; Lapierre, 2010b). The complexity of mothering in the context of IPV is shown in the ways in which mothers protect their children. As Semaan et al. (2013) explain, through deploying strategies to protect their children, women may be able to assert themselves and thus find a sense of empowerment. Advocates talk strongly about the types of strategies women employ to protect their children. Strategies of distraction and removing the children are common.

Fleur: Try and distract the abuser or...may sorta try and take them away from the abuse or they might remove the abuser, take them outside, tell the children to go their room so that they are not exposed or hearing or seeing the abuse.

Magenta: the daughter went to live with another family member that was...the mum’s decision but basically by just taking the child out of the mix altogether.

Daisy: Sending the kids with someone, getting chucked in the car in the middle of the night yeah, it’s cold and dark but it’s better than being in a violent situation even if that means worse for the mother when she gets home.

Women endure grave assault to protect their children and this harsh reality is expressed consistently throughout the data.

Jools: She had a little baby and her partner threw a jug of boiling water at her while she’s holding the baby and she kind of turned [her body]so she got the boiling water away from the baby.

The impact of IPV on children. Widely recognised research reports the adverse impact IPV has for children witnessing and experiencing abuse (Levendosky & Graham-Bermann, 2001; Levendosky et al., 2000). Advocates clearly understand that mothers make the
protection of their children a priority in the context of IPV and are pivotal in the desistance of the abuse. Yet findings show the advocates also understand that the impact IPV on children is varied. Many advocates talked about the infiltration of the perpetrator’s views; vilifying the mother.

*Dawn:* one of the extreme things you see is where the abusive partner has been using the children against their mother…belittling them, making them look stupid, building up their own relationship with the child and pushing the mother out of that.

As Lee explains, children are used by the perpetrator within the system.

*Lee:* the kid is often used as a like draw card...and a lot of the time they are the cash cow cos that’s how you get your money out of winz...mum will leave with all the kids and dad will try and get one back so you know it’s like the unsafe stuff is using the children.

Children manifest behaviours which can be impulsive and mothers are responding to the children’s ever-changing needs. As Lee says;

*Lee:* We can see that kind of quick cycle of really alert and really like what the hell is going on? and naughty pushing the boundaries and then into that really calm and relaxed happy you know doing their own thing.

Advocates strongly identify with the ways in which perpetrators manipulate children as a position of power and control; women are surviving as mothers, to take their place, hold their relationships with their children and children equally take on specific roles manifested by the perpetrator.

*Lee:* Dad will say call mum a slut or something horrible like that...then there's like generally a protector for mum and then there's someone whose either picked on by dad and is mums favourite or like just kind of close by...so what you'll find is that dads informant will be really angry with mum quite often cos you’re taking me away...that’s scary for him cos he knows dad is going to be angry and therefore he should be angry with mum.
Harm perpetrated against women and children in the context of IPV is a grave reality woven throughout this thesis. Refuge advocates clearly articulate the complex actuality for women and children surviving in the context of IPV. A substantial amount of evidence across the literature discusses both the formal and informal tactics and assistance women call upon in order to survive within a context where women hold neither power nor control. Studies by Davis (2002) report mothers living with IPV acquire both psychological and social resources in order to survive: Personal attributes of resilience and inner strength and social networks and caring relationships.

**Supports**

Access to external resources such as community agencies, supportive family members, supportive friends, church communities, safe and secure housing, educational opportunities, access to transportation and childcare and finally stable finances strongly aids the survival of women and children living in the context of IPV, whether before or after separation from the perpetrator (Davis, 2002; Duffy, 2015). IPV creates multiple challenges, for example living without financial certainty or without basic needs such as housing. Advocates’ stories of external resources needed for women and children to survive, aligns with the literature reporting a similar stance.

*Dawn: Families are a great deal and when you don’t have them that’s real tricky because it’s just her dealing with everything the whole time and she’s gotta be responsible for everything even when she’s feeling at her worst and most stressed and finding it hard.*

Flinck, Paavilainen, & Ästedt-Kurki, (2005) and Davis (2002) both report seeking the necessary supports can be difficult but more importantly government agencies tend to view women as weak and as ineffective mothers so mobilising resources poses a greater challenge in the context of social services responses. As Letourneau et al. (2011) argue, the literature is commonly focused on the deficit model of mothering and supporting mothering within the context of IPV needs to focus on mothers’ strengths. The stories of advocates reiterate a strength-based approach and agree there is limited understanding from other social services.
Cameron explains that with the assistance of refuge advocates and important relationships built, supports put in place from a strength-based approach can create a positive impact. 

*Cameron: Putting in place some more supports...sometimes you know being able to go to child youth and family it might lead...to some respite care. This woman, a mother she had no other family, no other support systems so what ended up happening was that...a referral went through to open home foundation and open home foundation paid for every second weekend for the children to go to respite care. Every second weekend it meant that mum got a rest and that was great...actually can put in place supports that we can’t access without it showing, without revealing some of the issues.*

The role of refuge advocates is shown to be pivotal to accessing other social supports in the situation Cameron describes. Across multiple levels of the analysis, advocates display a wealth of knowledge and understanding in the field of IPV and their roles in supporting women’s and children’s survival and safety was also clear in their interviews. Advocates demonstrate a deep-seated desire to support and actively suppress societal assumptions and expectations which attributed blame to mothers for failing to protect their children and turn attention away from perpetrators’ accountability. As experts, advocates are able to acknowledge the complexity of the IPV context and the multitude of stressors which mothers juggle. Optimally, advocates have an ability to influence, implement and impart safety and survival strategies with an overarching aim to liberate women and children from IPV (Women’s Refuge, 2016). A study by Jonker et al. (2014) asserts the role of refuge advocates is about providing appropriate care; all-encompassing safety of the children, individualised and respectful planning, empathy, health and empowerment, assisting with financial and legal matters, increasing independence and finally coordination of overall care. Hughes and Chau (2013) explain the role of the advocate is demanding and advocates are forced to make complex decisions and as Hartwig (2013) and Stover and Lent (2014) point out, advocates are not always formally qualified.

Interviews revealed refuge advocates took a strong stance on individualised and respectful planning; encompassing all of the tasks Jonker et al. (2014) makes reference to.
Fleur: Listening ear... working out what the need is so that you can actually point them in the right direction or whether they stay with you, what service... that’s going to be the best fit for them. We see it that way even if they walked in the door, had a cup of tea and left it’s still a step forward and still reaching out to an organisation or a place that is not going to judge, that isn’t going to victim blame.

Daisy: A lot of them don’t see that engaging with refuge is one way... of keeping themselves safe. They just think they’re just coming in to have a bit of korero. What is it that they can get from us? So, they kind of already have something in place in their head. So, we need to figure that out, ask questions. For them it’s getting to know what is available, what we can provide for them, what is available for them and what they are going through. All of that emotional anxiety it can be crippling... and talking about what they want and what they want for their kids and a lot of them will say I don’t want this, I don’t want a life like this and it’s not what I want for my kids. And we’ll say so ok how do you want to live? What do you want? How are we gunna get there? What’s the first step? What’s the first step tomorrow? What are we going to do differently tomorrow that was different from yesterday? Making it easier for them... not making unrealistic goals it’s not about what we want for them it’s about what they want for themselves.

Aroha: We can’t tell them what to do and I’m always straight up with my clients, look I cannot tell you what to do however I can make suggestions. The client does not always know how to work the system... I have worked alongside many families that are very supportive and phone us concerned about their daughter. We clarify the processes and offer other supports that may be beneficial. Trying to put it across in a way that they will view it as being something they’d like to do but you know without forcing it. And kind of just planting that seed so should they choose to go down this path, people will take what they feel will be useful to them.

Betty: I think our refuge does this well of letting women know that we are here to support them if they need us and that we have an experience of women leaving and
coming and working alongside us to get support they need at that time and moving on with their lives.

Safety planning is a central component of all planning that advocates engage with their clients. Velonis et al. (2017) state women living within the context of IPV are faced with decision making which ultimately impacts their safety and the safety of their children. Parker, Gielen, Castillo, Webster, and Glass (2016) assert advocates assist women with safety planning including all of the following; a) assisting with any legal matters, b) assisting with formal networks such as counselling, c) assisting with informal networks such as friends and family supports, d) ensuring women are able to placate the perpetrator such as not crying during violent incidences and finally, e) resisting the perpetrator. A refuge advocate is acutely aware of the complexity of IPV and so safety planning with women and children is heavily weighted on the specific circumstances of particular women. Furthermore, advocates do not underestimate the level of planning women independently engage in order to keep themselves and their children safe. Magenta explains;

Magenta: When they’re engaged with us we’ve got safety plans so some of them will be thinking about their safety plans even if it’s not a safety plan with us they’ll have their own safety plan for when he revs up...we always encourage to call the police if it’s … crisis situation but that’s not always practical, that’s not always something that they want to do so it might be that they’ll go to a friend’s house or...they’ll take the beating once the kids have gone to bed.

Sam: we just mostly just talked with her gave her the plans, and just empowered her to do everything

Betty: And we’re looking at safety every time we visit someone. So, if we got into a house and it had been in perfect order and then it’s really chaotic, we need to then do some exploration about what’s happening...if there’s a change in how she we would present herself.
Free of blame and judgement advocates’ focus is on the strengths of the woman’s mothering. Lewis et al. (2015) report advocates transition women from a state of being controlled to a state of taking control. The following extracts illustrate a similar stance among participants:

*Aroha*: When we have clients that come to us we will be educating them all the time with their safety plans, trying to draw out of them, what do you see in the future? What do you want to be? What are your interests? Strength based but it’s also trying to shift their focus...from that negativity towards something positive...something for themselves to grow as a person, to be the best person they can be for themselves and for their family.

*Daisy*: Is it you doing something for you? Finding a hobby? Do you like to paint, sing? How do we best build you up so you can better parent?...a lot of people have no idea and lot of people have lost themselves years ago because of an abusive relationship. They don’t know who they are anymore. They don’t know what they like...they’ve been told what they like for ten years.

Studies show an advocate’s response to women is extremely personal, so how advocates respond and the supports they provide is best positioned from an empowerment model of practice (Czerny & Lassiter, 2016; Schuler, Lenzi, Badal, & Bates, 2017). Within their accounts, advocates understood empowerment as parallel to education. Stories revealed the importance of educating mothers about the impact of IPV, assisting women to identify the power and control inflicted upon them and more importantly educating women about their rights without blame, judgement or minimisation.

*Aroha*: People whom are not knowledgeable in the world of domestic violence underestimate the power of power and control. The victim/survivor knows themselves better than anyone else.

*Fleur*: I would be starting to think about her rights not to be abused and...so if a woman...takes some of those ideas and minimising the abuse cos he’s minimised the abuse or self-blame for the abuse that’s where you can start to plant some of those
seeds, some of the ideas and...they’re questioning it and sometimes...have the korero and the discussion. That’s where the richness or the growth can happen in all of us.

Across the literature education is regarded as a protective factor for women and children (Czerny & Lassiter, 2016; Schuler et al., 2017). Advocates agree the more women are informed and educated about the impact of IPV, the greater the strength of the mother to protect children and feel empowered about decision making. Pam and Jools explain;

Pam: The one situation I’m thinking of where there’s been a really positive outcome has been a mum who has three children she’s now on her own, she’s very close to her three children and really enjoys spending time with them...she’s had education around it. She’s done our women’s programme. So, she’s had a lot of education around how violence affects women and children and explores what she believes and what she wants for herself and her kids and that’s way more positive.

Jools: Education. Education is the most important.

This chapter has evidenced the strong understanding and respect advocates have for women surviving in the context of IPV juggling the complexity and consequently how IPV has a significant impact on children. A support framework (family, friends and resources) is shown to be important factors for women to assist the protection of children. However, it is the role of the advocate which is fundamental; not only due to an advocate’s knowledge and expertise of the IPV environment but in the proficiency of process – building relationships, collaborative and individualised safety planning, educating and more specifically how advocates are equipped and respond to women and children impacted by IPV. The way in which advocates respond can be summarised as both helpful and empowering; a strength-based approach without blame, without judgement and without expectation to a highly complex context.
Chapter Eight: Conclusion

The story was put in this global context of thousands of women being killed every year by their intimate partners; we would see the situation very differently. We might even ask: why has this been happening for thousands of years and what can I - and we - do to end it? We all have to take a stand, publicly and in our own lives, so victims of violence who come forward are believed rather than doubted.

This thesis explored the complexities of maternal protection in the context of IPV through the perceptions and understandings of refuge advocates working for the National Collective of Independent Refuges in Aotearoa, New Zealand. Refuge advocates hold a wealth of knowledge and expertise in the field of IPV and moreover it is a rarity for advocates’ expertise to be acknowledged and more importantly honoured in the research sector. Advocates are uniquely placed to provide detailed expert information as a specialist service provider and overall, there is an absence of expert voices from a feminist standpoint across the literature. This thesis enriches our understanding of the adversity faced by women in the context of IPV and in doing so draws deserved attention to the strategies employed by women and the resistance and mitigation of harm women strive to maintain in order to protect their children. Essentially, these issues have been identified as a gap amongst the literature (Tailor & Letourneau, 2012).

To reiterate, question one asked; how do advocates understand the complexity of mothering within an IPV context? Question two asked; how does the impact of IPV shape mothering from the perspectives of advocates? Finally question three asked; how do the understandings of advocates impact their experience of client protection/mothering in the context of IPV? With respect to the research questions this thesis argues advocates show an astute understanding of mothering in the context of IPV. In alignment with international and national research mothering is considered a social and cultural construction and thus, social expectations of mothering are produced (Peled & Gil, 2011). Furthermore, advocates’ perceptions report the complexity of the IPV context and the inevitable task of having to live
up to societal expectation. Widespread literature reports social expectation consequently creates a deficit model of mothering, specifically in the context of IPV; women are expected to protect their children in the most adverse circumstances and in failing to do so, are blamed, pathologized and held responsible.

Data collected showed advocates also have an in depth understanding of the complexities women juggle striving to live up to the social expectation of mothering and so this study focused on how the context of IPV shapes mothering. Aligned with widespread literature, advocates report the context of IPV creates a context which complicates mothering and moreover, mothering is interrupted. Advocates’ perceptions show there is a high level of hypervigilance amongst women, a constant struggle to maintain routines, and older children can become involved in caring for their siblings to assist protection. Importantly and controversially there remains a blatant lack of perpetrator accountability.

Key findings of this research support numerous studies about the gross lack of understanding and the deficit model of practice in terms of institutional responses to women mothering in the context of IPV; system responses can be unhelpful, often victim blaming and overall worsening the complexity of IPV. Conversely, this research shows how advocates manage the system, through continued safety planning, advocacy and a unique ability to respond in a way that meets the needs of mothers, without blame. More importantly advocates shift focus from mother-blame to draw attention to perpetrator accountability. Advocates continue to liberate women in a way that gives mothers a voice where a pro-father culture is enforced and promotion of support strategies is endured such as education and finding an ability to navigate the system. Through the ever-changing socio-political landscape this thesis compliments the work of advocates who are acutely aware of change and how to respond to the needs of women and children every hour of every day.

Gaps in the literature have guided this thesis to give a strong argument for developing quality professional practices that are informed by the expertise of advocates for women and their children and changing the overall social construction of mothering. The findings of this research will inform advocates for future evidence based best practice; to educate, to assist protection and to ultimately reduce harm and challenge societal expectations of mothers. The continued and extensive violence against women is prolific and the drive to change social expectations of mothering and bring perpetrators into the spotlight of responsibility is beckoning amongst advocates. Therefore, recommendations for future research involve
potential transformation of response interventions to give greater attention to the overall protection of women and children in a drive to eliminate the impact of IPV but pertinently to give greater kudos to experts in the field of IPV. Additionally, and more specifically this research may inform and influence government policy but overall will contribute to national and international debate regarding maternal protection.
References


Hartwig, A. Recognising skills, knowledge and expertise of domestic and family violence workers in Western Australia (WA). Parity, 26(2), 61.


Appendix A

Intimate Partner Violence: the complexity of maternal protection

INFORMATION SHEET

Researcher Introduction

My name is Melanie Loft and I am the researcher for this project. I am currently studying from the School of Psychology at Massey University as a part of a Master of Arts degree.

Your participation in this project is entirely voluntary and the information sheet provided should explain what is involved in the research clearly; however, I am happy to answer any questions about any aspect of the research before you decide to participate or not.

Project Description and Invitation

This project is designed to learn about the complexity of mothering in the context of intimate partner violence (IPV) from the perspective of experienced refuge advocates. This projects honors the expertise of refuge advocates, the influence advocates have in keeping women and children safe and their continuous quest to eradicate violence. By understanding advocates’ stories of working with mothers in the context of IPV and questioning how might IPV impact and/or shape mothering we are able to better understand the complexities that mothers face. We are also aiming to inform refuge advocates for the future on evidence based practice, education, assisting protection and ultimately reducing harm by challenging societal expectations of women. The project will be conducted in two parts, and I will be responsible for collecting and reporting your stories of your experiences of working with mothers who have experienced partner violence. I will also be responsible for thematically analysing participant data to identify the issues and complexities of maternal protection in the context of IPV from the perspective of refugee advocates’ expertise.

With the consent of participants, data will be archived so that my supervisor and her research team are able to analyse the resources that advocates’ stories provide to contribute to an evidence base on best practice for advocating for mothers and children in context of IPV. This component of the project is designed primarily to provide National Collective of Independent Women’s Refuges with information for education and feedback on best practice.
Overall the two components of this project will contribute to both national and international debates regarding maternal protection in the context of IPV.

I would like to invite you to be a part of this project and to work collaboratively with you to better understand the experiences and expertise of advocates and discover common themes that provide us with new insights about the impact of IPV for mothers and children.

**Participant Recruitment and Identification**

Recruitment for this project is being assisted by the National Collective of Independent Women’s Refuge (NCIWR). Dr. Ang Jury has provided this information sheet to service managers located at various sites throughout New Zealand and we expect it has been passed to you in your role as a refuge advocate. All participation in this study will be voluntary, so if you are interested in taking part please contact me to discuss your interest. I will not disclose whether or not you take part in this project to anyone other than my supervisor.

You are eligible to take part in this project if you have a minimum of two years’ experience working with NCIWR, you are over the age of 18 years and you are willing to share your experience. I am particularly interested in what you choose as important to share, and you are welcome to share as much of your experience and expertise as you wish.

**Project Procedures**

This project involves face to face interviews. An interview time and place will be negotiated for your convenience within a timeline of visits to refuge sites that has been planned collaboratively with Dr. Jury. By the time you receive this invitation, the timeframe for the visit to your refuge will be available. At the beginning of the interview there will be an opportunity to discuss the interview process and answer any questions you may have about the research project. Interview times are allocated in two-hour blocks and will take 1-2 hours of your time. If you agree, interviews will be audio-recorded. If at any time you wish to discontinue with the interview, you have the right to stop the interview immediately. You also have the right not to answer any questions that you don’t want to answer. The next step will involve transcription of your interview by me or a professional transcriber who has signed a confidentiality agreement. I will then return your transcript to you so that you can agree on what will be shared and make amendments to your transcript if you wish. This part of the process may take an additional two hours of your time for review. You will be asked for your consent before any extracts from the transcript are used in the final report. You can withdraw from the research at any time up until you consent for extracts from transcript to be used.

I will take every measure to ensure what you share is in confidence, however it is impossible to guarantee that no one will find out you took part in this project given the direct association to NCIWR and the level of networking between refuge sites within the collective. If you choose to share with others that you are participating in the project, you are free to do so but I will not discuss your involvement with anyone and only my supervisor will have access to any identifying information about you.
If you agree to your transcript being archived for my supervisor and her research team to analyse for the second component of the study, they will only have access to transcripts that have already had all identifying information removed from them. They will also sign confidentiality agreements as a further step to ensure your privacy is protected.

**Data Management**

Your identity will remain confidential and all identifying information removed during transcription. Audio tapes will be destroyed after transcriptions have been checked and amended if necessary.

All data collected will be stored securely in password protected files on a password protected computer, including transcripts that participants agree to have archived. Consent forms will be stored securely in a locked filing cabinet in a locked office. De-identified transcripts will be stored separately in my supervisor’s locked office at Massey University. At the conclusion of the project consent forms and transcripts will be stored securely in my supervisor’s office for five years then destroyed.

Findings from this project will be shared with you when requested through a short summary of findings and accessing the full research project will be available online through Massey University website once completed.

Please feel free to contact me or my supervisor for a summary or a copy of the full project.

**Participant’s Rights**

You are under no obligation to accept this invitation. If you decide to participate, you have the right to:

- decline to answer any particular question;
- withdraw from the study at any point prior to signing off your transcript;
- ask any questions about the study at any time during participation;
- ask for the recorder to be turned off at any time during participation;
- provide information on the understanding that your name will not be used
- be given access to a summary of the project findings when it is concluded.

**Project Contacts**

Please contact me or my supervisor at any point if you have any questions about the project:

Melanie Loft (Researcher)
School of Psychology
Massey University
Palmerston North
Phone: [Redacted]
Email: [Redacted]
Professor Mandy Morgan (Research Supervisor)  
School of Psychology  
Massey University  
Palmerston North  
Phone: (06) 350 57 99 ext. 85058  
Email: c.a.morgan@massey.ac.nz

This project has been evaluated by peer review and judged to be low risk. Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researchers named above are responsible for the ethical conduct of this research.

If you have any concerns about the conduct of this research that you wish to raise with someone other than the researcher(s), please contact Dr Brian Finch, Director, Research Ethics, telephone 06 356 9099 x 86015, email humanethics@massey.ac.nz.
Appendix B

MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PUREROA TANGATA

Intimate Partner Violence: advocates expertise on the complexity of maternal protection

PARTICIPANT CONSENT FORM - INDIVIDUAL

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I agree/do not agree to the interview being sound recorded. (if applicable include this statement)

I agree to participate in this study under the conditions set out in the Information Sheet.

Signature: ___________________________ Date: _____________

Full Name - printed ___________________________

Te Kām undera
Te Kura Pureroa Tangata
Private Bag 11222, Pohinui North 4442, New Zealand. T +64 6 359 8099 extn 85071 F +64 6 359 7966 http://psychology.massey.ac.nz
Appendix C

MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA POKEMOA TANGATA

Intimate Partner Violence: advocates expertise on the complexity of maternal protection
AUTHORITY FOR THE RELEASE OF TRANSCRIPTS

I confirm that I have had the opportunity to read and amend the transcript of the interview(s) conducted with me.

I agree that the edited transcript and extracts from this may be used in reports and publications arising from the research.

Signature: ____________________________ Date: ____________________________

Full Name - printed: ____________________________
Appendix D

Interview Schedule

The interview is semi-structured around a starter and prompt series of questions. Participants will be invited to share their own stories of experience and their account of any issues of concern in their own way.

The use of prompts ensures that the issues of interest to the researcher are raised. The interviewer/researcher will identify appropriate responses within the participant’s story as it is told from their own point of view and prompts are not used if the relevant information has been provided spontaneously.

Questions are unlikely to be asked in the order shown and contingent on what the participant shares; and/or some new questions will arise. The questions outlined below serve to ensure that information relevant to the research focus has been covered.

Introduction

Firstly, thank you for your time and consideration to participate in this research. As you are aware this project is seeking the expertise of those at the coal-face, working with women and children who are victims to intimate partner violence. We endeavour to look at the complexities of that mother’s face when they are trying to protect their children in the context of intimate partner violence. It is your experienced expertise that is most valuable to us at this stage. I will be asking you some open-ended questions however my aim is to have to opportunity to talk to you about your experiences.

The issue at hand as you will be well aware is both sensitive and often intense. If you feel any discomfort throughout the interview please do not hesitate to stop the process and if you are not sure about anything during the interview, please feel free to ask me at any time. Finding out about your experiences is important to understand complexity and learning ways to improve future practice.

Before we begin...do you have any questions or me?

Background

I would like to hear about your background and involvement with women’s refuge.

- Can you tell me how you have come to work with Women’s Refuge in (location)?
- In what capacity?
- And how long have you been involved in advocacy work?
- Have you worked in advocacy roles previously and if so is working for Women’s Refuge (location) different in comparison and why?

Maternal protection

(Seeking clear description of what maternal protection means in the context of IPV)

I am interested to hear your thoughts on mother’s responsibilities and the actions they take to protect their children when they are being victimised themselves by their partners.
How do you think society expects mothers to act in relation to their children when they’re being abused by their partners?

How do the mothers’ you’ve worked with understand their social expectations as mothers? What kind of expectations do they have of themselves?

Can you tell me a little about some of the cases where you think women have tried to protect their children in ways that are effective and helpful to their own safety and to the children’s safety?

Can you tell me a little about some of the cases where you think women have tried to protect their children in ways that are unhelpful to their own safety and to the children’s safety?

In your role as an advocate what difficulties do you see mothers facing when they’re trying to protect their children?

In your experience what kind of harm do women experience in order to protect their children?

In your experience, how does IPV affect mothering? Children relationships with their mothers?

Mothering is a challenging role despite adversity and in attempt to grasp a big picture view...

What are the complexities in your experience to mothering in the context of IPV?

What are the challenges mothers are faced with in terms of protection and why?

Can you describe (if any) barriers to your role in order to assist maternal protection?

Who do you believe is accountable for protecting women? Protecting children?

In your experience what makes a ‘good mother’ in the context of IPV and why?

Is there anything you would like to add that you think is important for me to know about?

Thank you for sharing your experiences, thoughts and time. This interview is valuable and your contribution is very much appreciated.