PROTECTIVE STRATEGIES OF MOTHERS ABUSED BY INTIMATE PARTNERS: RETHINKING THE DEFICIT MODEL.

Kendra L. Nixon, PhD, Associate Professor, Faculty of Social Work, University of Manitoba (Winnipeg, Manitoba, Canada) kendra.nixon@umanitoba.ca

Leslie M. Tutty, PhD, Professor Emerita, Faculty of Social Work, University of Calgary (Calgary, Alberta, Canada) tutty@ucalgary.ca

H. L. Radtke, PhD. Professor, Department of Psychology, University of Calgary (Calgary, Alberta, Canada) radtke@ucalgary.ca

Christine A. Ateah, PhD, Professor, College of Nursing, Faculty of Health Sciences, University of Manitoba (Winnipeg, Manitoba, Canada) Christine.Ateah@umanitoba.ca

E. Jane Ursel, PhD., Professor, Department of Sociology, University of Manitoba (Winnipeg, Manitoba, Canada) Jane.Ursel@umanitoba.ca

Correspondence should be addressed to kendra.nixon@umanitoba.ca or 204-474-9292; fax: 204-474-7594: Mailing address: Dr. Kendra Nixon, 500C Tier Building, Faculty of Social Work, University of Manitoba, Winnipeg, Manitoba, Canada, R3T 2N2

FUNDING: The following funders are very gratefully acknowledged: SSHRC (Social Sciences and Humanities Research Council) Community University Research Alliance (CURA); Alberta Centre For Child, Family, & Community Research; Alberta Heritage Fund for Medical Research; The Prairie*action* Foundation; and TransCanada Pipelines

KEYWORDS: domestic violence, protective strategies, mothering

ABSTRACT

Exposure to intimate partner violence is detrimental to children, but can abused mothers protect them and, if so, what can they do? This study of 350 Canadian abused women represents the first quantitative examination of such protective strategies. The actions that mothers most commonly used and perceived as effective include showing affection and being nurturing to their children. The strategies often suggested by professionals, such as contacting police and obtaining protection orders, were used less and considered less effective than informal strategies. Professionals are urged to ask mothers what strategies they use, especially those that do not involve formal systems.

In Canada, intimate partner violence (IPV) is a disturbing reality for many women. In 2011, approximately 78,000 women reported partner violence to the police; a rate of 542 victims per 100,000 women aged 15 years and older (Sinha, 2013). The issue is even more problematic for women living in Canada's prairie provinces. According to the 2009 General Social Survey, Saskatchewan (8.2%), Alberta (7.6%), and Manitoba (7.4%) had the highest rates of self-reported spousal violence (the national average was 6%) (Statistics Canada, 2011).

Further, in 2011 over half (52%) of Canadian victims of spousal violence reported that, in the previous five years, their children had heard or seen them being assaulted (Sinha, 2013). Since first identified as a concern, there have been numerous studies on the immediate and long-term impact of children's exposure to violence in the home, concluding that such exposure may be damaging to a child's physical, emotional, psychological, and social well-being (see Øverlien, 2009). Children exposed to IPV often exhibit depression, low self-esteem, withdrawal, aggression, rebellion, hyperactivity, and delinquency (Evans, Davies, & DiLillo, 2008; Kitzmann, Gaylord, Holt, & Kenny, 2003). Moreover, children exposed to partner violence have often also been physically abused, sexually abused, or neglected, typically by the perpetrator of the woman abuse (Edleson, 2001; Hamby, Finkelhor, Turner, & Ormrod, 2010).

Given the increased attention to the negative impact on children's well-being, professionals, notably child protection services, have begun to respond. In the last decade or more, significant changes to child protection policy and practice allow workers to intervene when IPV is reported and to remove children from the home (Nixon, Tutty, Weaver-Dunlop, & Walsh, 2007). This has sparked a contentious debate and the capacity of abused mothers to protect their children has been questioned. Mothers are often viewed as "failing to protect" their children from the abusive actions of the perpetrator if they remain in violent relationships,

sometimes resulting in the removal of children from the home (Ewen, 2007). Such decisions however do not necessarily consider how the mothers, who are often the primary abuse target in the home, may act to protect their children. This is the focus of the current research.

MOTHERING IN THE CONTEXT OF INTIMATE PARTNER VIOLENCE

Compared to their non-abused counterparts, abused women experience increased levels of depression, lowered self-esteem (Zlotnick, Johnson, & Kohn, 2006), and greater psychological distress, including posttraumatic stress disorder (Jones, Hughes, & Unterstaller, 2001). A number of researchers purport that these emotional and psychological effects have a direct and negative impact on the victim's parenting, in turn endangering their children's well-being (Holden & Ritchie, 1991; Holden, Stein, Ritchie, Harris, & Jouriles, 1998; Levendosky & Graham-Bermann, 1998, 2000; Levendosky, Lynch, & Graham-Bermann, 2000). Some argue that abused women may not respond to their children effectively (Levendosky & Graham-Bermann, 1998); have low maternal warmth (Levendosky et al., 2000); are more likely to use physical aggression than non-abused mothers (Holden & Ritchie, 1991; Holden et al., 1998); and are less able to assert authority or control over their children, putting them at risk for anti-social behaviors (Levendosky & Graham-Bermann, 2000).

Until recently, this deficit model of abused mothers' parenting has dominated the literature. However, more recent research refutes claims that abused mothers are generally helpless, incompetent and aggressive parents, purporting that abused mothers frequently compensate by being very attentive and sensitive to their children (Letourneau, Fedick, & Willms, 2007; Sullivan, Nguyen, Allen, Bybee, & Juras, 2000; Van Horn & Lieberman, 2002). Author (under review) found that abused women were not compromised in their parenting responses with their children in regards to positive interactions and behavior management; and

Van Horn and Lieberman (2002) described abused mothers as "remarkably similar" to non-abused mothers in their beliefs about parenting, parenting behaviors, and interactions with their children (p. 83). Sullivan et al. (2000) concluded that abused mothers are available, closely supervise their children, and enjoy being parents. Edleson, Mbilinyi, and Shetty (2003) remind us that abused mothers' parenting capabilities are often thwarted or undermined by their batterers, a process that frequently continues post-separation. Thus, it is important to not assume that abused mothers are deficient or inadequate per sé, especially since their parenting often improves when they live safely away from the batterer (Edleson et al., 2003). Moreover, in addition to violence, parenting behavior can be influenced by the context of people's lives, such as poverty, isolation, racism, and other life stressors.

Several scholars have recently turned their attention to abused mothers' protective behaviors, contending that abused mothers are concerned about their children's well-being and take active steps to protect their children despite the violence in their lives (Haight, Shim, Linn, & Swinford, 2007; Hardesty, Oswald, Khaw, Fonseca, & Chung, 2008; Kelly, 2009; Peled & Gil, 2011). This body of research has been qualitative in nature, primarily involving semi-structured interviews with small samples of women (fewer than 25). These researchers identified a multitude of factors that mothers use in the moment to help keep their children physically safe during the violence, for example, separating the children from the violence by putting them in another room or sending them to a neighbor's/relative's house (Haight et al., 2007; Hardesty et al., 2008; Kelly, 2009; Peled & Gil, 2011); calling a third party for assistance, such as a relative, friend, or police (Haight et al., 2007); preventing a violent episode from occurring by placating (Haight et al., 2007; Hardesty et al., 2008; Kelly, 2009; Peled & Gil, 2011), avoiding the abuser (Peled & Gil, 2011) or keeping peace in the home (Mohr, Fantuzzo, & Abdul-Kabir, 2001); and

filing for an order of protection (Haight et al., 2007). Some mothers also mentioned keeping the abuse secret and not notifying outsiders, such as police, medical professionals, and social workers as strategies to protect their children from physical and emotional distress (Kelly, 2009).

Researchers also have described longer-term strategies to protect children, such as sending children to live with relatives (Haight et al., 2007; Hardesty et al., 2008) or permanently ending the relationship with the abuser (Kelly, 2009). However, for some, remaining with the abuser was a strategy to protect their children from violence because they feared for their own and their children's physical safety if they were to separate (Brownridge et al., 2008; Kelly, 2009).

Several researchers have identified various ways that abused mothers attend to children's emotional needs as a way to recover from their exposure to IPV. These include providing reassurance and support (Haight et al., 2007; Hardesty et al, 2008); exhibiting a positive attitude as a way of overcoming negative perceptions of their situation as abused women (Peled & Gil, 2011); openly communicating with them about the situation (Hardesty et al., 2008); instilling hope in them (Haight et al., 2007); educating them on the dangers of violent relationships and developing positive conflict resolution skills (Haight et al., 2007); limited truth-telling so not to traumatize them (Haight et al., 2007); avoiding discussions of the violence (Peled & Gil, 2011); hiding the abuse from them (Hardesty et al., 2008; Kelly, 2009); and normalizing or minimizing the abuse to make it less frightening for them (Haight et al., 2007).

Taken together, this research identifies a diverse set of creative and well-organized strategies (Haight et al., 2007) that exemplify mothers who have been abused as active agents who can care for and protect their children. These strategies appear to be highly adaptive in providing what is best for the children in the particular circumstances of IPV, which often vary

from one day to the next depending on the physical and emotional needs of their children (Kelly, 2009). However, although these small-sample, qualitative studies provide some insight to the types of strategies used, they do not offer an assessment of the extent to which women raising children in the context of IPV utilize such strategies. Our research aimed to explore the use of protective strategies in a large sample of diverse mothers who had experienced IPV.

METHOD

Sample

The sample was recruited for a longitudinal study of Canadian women living in the Prairie Provinces (Alberta, Saskatchewan, and Manitoba) who experienced IPV within the five years prior to the first wave of data collection. The study explored the history of the women's partner abuse as well as their physical and mental health, overall well-being, utilization of resources, and mothering. The women were recruited through women's shelters and other organizations delivering services to women who have experienced IPV.

Within the total sample of 665 women, 602 are mothers. However, only 350 mothers were eligible to complete the protective strategy questions. They included those who had been in an abusive relationship within the 12 months prior to completing the questionnaire and had children under the age of 18 years who resided with them. Additionally, 66 mothers were lost between wave one and wave two due to attrition.

Procedure

The research protocol was approved by the ethics review boards at the seven universities with affiliated members on the research team. Beginning in 2005, data were collected every six months for 3.5 years, resulting in seven waves of data. Due to the comprehensive nature of the study, the questionnaires were divided into two packages, and each package was administered

once a year. Thus, in the second wave of each year, mothers completed an in-depth self-report survey composed of questions that addressed their children's needs and well-being, their parenting and the services they utilized to assist with their parenting, and the strategies that they used to protect their children from direct abuse or from any negative consequences associated with living in a violent home. This yielded three waves of data relevant to the women's parenting. The protective strategies questionnaire consisted of a 20-item list developed by the research team and was based on the various protective strategies identified in the literature prior to 2004 (Irwin, Thorne, & Varcoe, 2002; Mohr et al., 2001; Zink, Elder, & Jacobson, 2003).

To mitigate any problems with literacy, trained interviewers read the questions and recorded the participants' answers. All interviews were completed in person in a safe location, usually an interview room in a local organization that delivered services to women who have experienced IPV. Mothers who completed the protective strategies questionnaire first indicated if they had used any of the 20 strategies (yes/no response) in the last year. They also ranked the effectiveness of each strategy used (with 0 not being helpful and 4 being very helpful). In our analysis, we consider strategies to be "helpful" if respondents selected either "quite a bit helpful" or "very helpful". Furthermore, they identified the three *most* helpful and three *least* helpful strategies and explained why they were most helpful or least helpful. Participants were not given a definition of what constitutes a "helpful" strategy. Instead, women were only asked to rate how helpful the strategies were in protecting their children and, therefore, it is likely that the women rated the helpfulness of their strategies on either protecting their children from direct physical abuse or from the harms associated with living in a violent home. Finally, participants were given an opportunity to add strategies to the list. The findings discussed in this paper are based on data collected during the first time that the women completed the protective strategies

questionnaire.

Mothers' experiences with IPV in the 12 months prior to their participation in the study were measured using the Composite Abuse Scale (CAS; Hegarty, Bush, & Sheehan, 2005) during the first wave of data collection. The CAS is a widely used self-report measure containing 30 items, categorized according to four different types of abuse: (i) Severe Combined Abuse (consisting of 8 items that represent severe physical abuse items, all sexual abuse items, and the physical isolation of emotional abuse), (ii) Physical Abuse (consisting of 7 items of less severe physical abuse), (iii) Emotional Abuse (consisting of 11 items that include verbal, psychological, dominance, and social isolation), and (iv) Harassment (consisting of 4 items about actual harassment) (Hegarty & Valpied, 2013).

Data Analysis

Data were entered into Microsoft Access and then exported into SPSS where they were cleaned prior to analysis. SPSS 20.0 was used to conduct statistical analyses. For the three open-ended questions—helpful services or support not identified in the protective strategies list, three most helpful strategies and the reasons they were helpful, and three least helpful strategies and the reasons they were not helpful—codes were generated from the data and then used by two independent raters to code 10% of the cases for purposes of establishing inter-rater reliability. Cohen's kappa ranged from .73 to .91. A single rater coded the remaining cases. It was not possible to code the reasons associated with the most helpful strategies, however, as they were very diverse and dependent on the specific protective strategy.

RESULTS

Mothers' Characteristics

The 350 mothers were an average age of 34 years (SD = 7.8) and half (*n* = 176) self-identified as Aboriginal (includes First Nations and Métis) (see Table 1). Approximately 44% (*n* = 156) of mothers self-identified as of European heritage (e.g., British, Irish, Scottish, German, Polish, etc.), "Canadian", or Caucasian. The remaining (*n* = 19 or 5%) self-identified with a variety of ethnic/cultural categories (e.g., Caribbean, Somali, Asian, Mennonite, Mixed). Slightly more than half of the mothers had two or three children. Of the children aged 18 years and younger, the average age was eight years (*SD* = 4.8). The majority of mothers were not working in paid employment (less than one-quarter were working full-time), thus it is not surprising that most mothers reported low incomes (almost 60% reported annual incomes < $20,000), with the average annual income being slightly more than $23,300. For comparison purposes, in 2006, the LIM (low income measure) in Canada for lone parent households with three children (average number of child per participant in the current study) was $29,208 (Statistics Canada, 2008).

The majority of the mothers (82%) were no longer in relationships with their abusive partners when they completed the protective strategies questions. However, all mothers rated their experiences of IPV on the Composite Abuse Scale (Hegarty & Valpied, 2013). Total scores for the 350 mothers, ranged from three to 139, with a mean of 55.14 (*SD* = 28.5). More specifically, 86% (*n* = 302) of mothers experienced Severe Combined Abuse; 93% (*n* = 325) Physical Abuse; 92% (*n* = 322) Emotional Abuse; and 92% (*n* = 297; 27 missing) Harassment. Less than 3% of mothers reported no physical or sexual violence from their partner (*n* = 15); two mothers (0.6%) reported no emotional abuse, and 23 mothers (6.6%) reported no harassment from their partners.

Table 1 about here

Mothers' Use of Protective Strategies and Perceived Effectiveness

All but seven mothers reported using at least one of the 20 listed strategies to protect their children from the harms of either witnessing abuse or from direct abuse by their abusive partner in the last year, but most used a variety of tactics (see Table 2). More than half of the 350 mothers (57% or *n* = 201) reported using 10 or more tactics to protect their children from abuse. Being affectionate with their children or doing things with their children to make them feel good about themselves were the most common (94%, *n* = 324; and 92.5%, *n* = 319, respectively). Both strategies were rated as helpful (i.e., "very helpful" or "quite a bit helpful") by the mothers who reported using them, 89% (*n* = 279) and 84% (*n* = 258), respectively.

Some mothers had told a third party about the abuse. Approximately three-quarters reached out to family or friends (*n* = 248) and slightly more than half of the sample (56% or *n* = 188) contacted professionals or community agencies (e.g., crisis shelter, lawyer/legal assistance, doctor, etc.). However, slightly less than two-thirds who told their families or friends (67.9% or *n* = 161) rated this as "very helpful" or "quite a bit helpful", whereas of the mothers who had contacted professional or community services for assistance, approximately 74% (*n* = 133) rated it as helpful. Thus, a smaller proportion of mothers perceived telling family and friends to be helpful compared to contacting professionals. Interestingly, a minority (n = 75, 21%) noted that they had contacted a crisis shelter for assistance but did not rate the helpfulness of that assistance. In contrast, almost half (47.3% or *n* = 157) contacted the police for assistance but less than half (49.4% or *n*=75) considered this helpful in protecting their children. Notably, 24 women (15.8%) rated contacting the police as "not helpful". Even fewer mothers (34.5% or *n* = 114) had tried to get an order of protection against their abusive spouse, with less than half (46.8% or *n* = 52)

finding this helpful. Few mothers (15% or *n* = 50) had contacted child welfare officials, with slightly less than half (46.9% or *n* = 23) seeing this as a helpful strategy.

Table 2 about here

Almost 82% (*n* = 281) saw parenting their children alone as a way of protecting their children from their partner's abuse, with 85% (*n* = 227) seeing this as helpful. We did not define "parenting alone" for the participants but assume that this would have different meanings for them. For example, for some women it may mean that they had to terminate the abusive relationship to parent their children effectively; while for others, it may mean that they simply did not rely on their partner for parenting support. Consistent with this, more than 61% reported (*n* = 202) ending the relationship with their abusive partner during the past year in order to protect their children; a large majority (82.9% or *n* = 160) considered this helpful. Mothers also tried to protect their children by separating them from their abusive partner during an abusive incident - slightly more than half of mothers (51.8% or *n* = 169) had done so, with approximately 72% (*n* = 118) considering it a useful strategy. When asked to elaborate about the separation, more than half (51.5% or *n* = 87) did so by immediately leaving the abusive incident (e.g., went to family or friend's house, took a walk, or took children to the park) or by sending their children away from home (e.g., to a family member's, friend's, or neighbour's house). Half of mothers tried to teach their children a safety plan to protect them from abuse (50% or *n* = 170) but of these, almost three-quarters considered it helpful (70% or *n* = 119).

Some mothers (34.7% or *n* = 118) reported remaining with their abusive partners to protect their children, but less than one-quarter (*n* = 26) rated this as a helpful strategy. Rather, the largest proportion of mothers (50.9% or *n* = 55) responded that staying with their partner was "not helpful". Less than 19% (*n* = 63) of mothers returned to their abuse partner as a protective strategy,

and few (*n* = 12) rated this as helpful. Many women who returned to their partners assessed it as "not helpful" in protecting their children (38.6% or *n* = 22).

The remaining strategies entailed intervening in the abuse process in some way. More than three-quarters of mothers (78%, *n* = 272) had avoided a potentially violent situation to protect their children, with slightly more than two-thirds (69% or *n* = 185) rating this as helpful. Less common strategies included physically fighting back (37.2% or *n* = 121; less than one-quarter, *n* = 27, rated it as helpful), threatening their partner (36%, *n* = 117; 26%, *n* = 30, rated it as helpful), disciplining their children so their abusive partner would not (35%, *n* = 112); 56.5%, *n* = 61, rated it as helpful), and provoking a violent incident while their children were not around (17%, *n* = 56; 54.8%, *n* = 29, rated it as helpful).

The Three Most Helpful Protective Strategies

In response to an open-ended question about the three most helpful strategies for protecting their children, the mothers provided a list that was similar to their responses to the forced-choice questionnaire. The top three were: *I ended the relationship with the abusive partner* (*n* = 131); *I parented my children alone* (*n* = 96); and *I did things to help my children feel good about themselves* (*n* = 93) as the most effective.

Clearly, not being in a relationship with their abusive partners and not having them around their children, were the most commonly endorsed strategies. In elaborating on ending the relationship with the abusive partner, the women noted the benefits to their children, indicating sensitivity to the needs of their children and the negative consequences of living in a home with IPV. For example:

> *I left the relationship. He was no longer in the picture and a darkness lifted. The children were freerer* [sic] *and so was I. This protected the kids from witnessing.*

> *Ending relationship sent a clear message to my kids about what was acceptable or not. The abuse was beginning to affect our son so I left and I am glad I did.*

They made similar comments about parenting alone. For example:

> *They are not influenced by bad role model or scenes of abuse.*

> *Parenting alone because they are not getting mixed messages,* [they] *get different responses for some behaviors from my ex. My son's soul has become happier; he has more confidence and is slowly opening up more.*

> *By parenting alone I could explain it's not right to hit and fight, and showed them violence is not an option, and to love one another.*

Finally, the third most helpful strategy emphasized mitigating the negative effects of living in a violent home. For example,

> *They got to realize that they could do things well, that they could do things right. When I was in the relationship, they couldn't do anything right.*

> *It* [doing things to help my children feel good about themselves] *builds their characters and self-esteem. They know they are important, they know I'm there.*

> *I did things to make them feel good about themselves*. [It's] *helpful to create confidence* [and] *be more aware, so they won't put up with violence the way I did.*

Although not ranked within the top three most helpful responses within the open-ended question, women still considered being affectionate with their children as one of the more popular strategies (similar to their forced-choice responses), with almost one-quarter of the total sample noting it (26% or *n* = 92). Notably, of the 320 participants who completed this section, only 36 (11%) identified contacting the police as one of the three most helpful strategies to protect their children from exposure to violence.

The Three Least Helpful Protective Strategies

The three least helpful strategies identified in the open-ended question were among those least commonly reported by the mothers when completing the forced-choice questions: *contacting the police* (*n* = 58 or 16.5%), *physically fighting back against their partner* (*n* = 54), and *remaining with their partner* (*n* = 45 or 13%).

In elaborating on why contacting the police was not helpful, the women identified problems with lack of response and sometimes the practice of dual charging. For example:

The first time they [police] *were going to charge me!*

They [police] *couldn't do anything unless they witness the assault*.

They [police] *never come right away*.

For [them] *to do anything, he had to really, really hurt me.*

Physically fighting back exacerbated the problem of IPV. For example,

I would get beaten up more and the children were witnesses sometimes.

I got more injured.

I fought back, he was stronger. I got beat up and the kids witnessed it.

Similarly, remaining in the abusive relationship merely supported the status quo. For example,

Remaining with my partner. The abuse does not stop; it escalated.

By staying, my kids think it's okay to treat a wife and a mother in this way - by abusing. Remaining in the relationship because it was still going on and my son was right there. He witnessed a lot of stuff because I stuck around.

Additional Ways that Mothers Protect Their Children From Exposure to Violence

When asked to identify any strategies they had used to protect their children in addition to those listed in the forced-choice questionnaire, a few mothers identified four additional approaches. Twenty-three mothers reported talking to their children about the abuse as a way to deal with their children's emotional trauma and to educate them about violent relationships. For example,

I make them aware of abusive relationships and the dangers of what can happen. I talk to them, explain to them what is going on. I think informing is protecting.

I talk to him about the abuse and what he is scared of. I reassure him. It's very helpful.

I'm always talking to my children about abuse, letting them know it's not okay and it's not their fault.

Seven reported relocating to another community, city, or country. For example,

I moved to another community.

We moved to a new house away from my partner. This was helpful for a bit until he found out where we lived.

I moved them from my home in the reserve to a safer shelter home.

Five admitted to hiding the violence from their children. For example,

I make excuses to my children when they see us argue.

Finally, three attempted to keep their children quiet so they would not upset and provoke their abusive partners. For example,

I controlled their [children's] behaviour so they are not loud and argue when around him.

I kept them quiet so they would not get him angry. That was helpful in protecting them.

DISCUSSION

The present study represents the first large quantitative study on the strategies that abused mothers use to protect their children from the harms associated with exposure to IPV, including direct violence from the abusive partner. All but seven of the 350 mothers used at least one of the 20 protective strategies listed in the forced-choice questionnaire; most used a variety of tactics. Strategies ranged from separating their children from the abuser or avoiding potentially violent situations to protect their children from immediate harm to acts and behaviors that may not have stopped the violence but mitigated the harms of exposure, such as spending more time with their children to being more affectionate and nurturing.

The protective strategies most identified by participants and ones deemed most effective were often more informal strategies; for instance, those that do not involve formal or organized systems, such as the police, the legal system, and shelters. A common informal strategy included separating their children (even temporarily) from their abusive partner. This seems reasonable that many women would try to protect their children from physically separating their children, but it is also plausible that, for some women, having children present is also a protective strategy. In other words, their abusive partner may not engage in violent behaviors in front of the children, therefore, the presence of children may be a protective strategy itself. Our study did not include this as a potential protective strategy but in hindsight it may be worth assessing in future

research. Other participants noted that as an attempt to protect their children, they avoided potentially violent situations. The women were not asked to describe *how* they did this; however, in a previous study Peled and Gil (2011) reported that abused mothers thwarted potentially abusive situations by refraining from speaking, putting off arguments, placating their abusive partner, and keeping information from them. In the current study, two-thirds of the women who reported avoiding potentially violent situations considered it to be effective. Likely, the unpredictable and volatile nature of partner abuse and the lack of women's control of their partners' anger and explosive behavior may account for the variability in effectiveness ratings. Thus, although seemingly effective for some women, this strategy does not offer a solution to the general problem of IPV as it may simply defer the abuse to a context in which the children are not present.

More than half of the sample reported that they permanently ended their relationship with their abusive partner to protect their children. Of these women, about two-thirds considered it a very helpful strategy, suggesting that leaving an abusive situation is not a guarantee for protecting children. Indeed, separation from an abusive partner can escalate risk of physical injury to both the mother and child (Brownridge et al., 2008; Hardesty, 2002). Further, children who are exposed to high conflict during marital separation (for example, during custody and access disputes) involving IPV can experience significant emotional trauma, including stress, depression, and suicidal thoughts (Fotheringham, Dunbar, & Hensley, 2013).

Participants also tried to protect their children by mitigating the harms associated with exposure to violence. Providing emotional support and nurturance to their children was one of the most common protective strategies employed by the mothers, and one that they perceived to be highly effective. This can be difficult and exhausting, however, especially for mothers who

are involved in violent relationships, so it is important that they be supported in their mothering. For example, this might entail regular respite care that would allow the mother some time for self-care.

Mothers also identified parenting their children alone as a common and effective strategy. This is not surprising given that partners who are abusive often attempt to control their female partners by undermining or destroying their partners' relationships with their children (Beeble, Bybee, & Sullivan, 2007). To be able to parent their children alone, mothers who have been abused (and their children) need to live safely away from their violent ex-partners and to be financially secure so they can provide for their children's needs. Financial resources are critical for abused mothers and their children to remain safe and independent (Moe & Bell, 2004).

A smaller portion of women remained with or returned to their abusive partners but only a very few assessed these responses as "very helpful". Remaining in (or returning to) abusive relationships is a complicated decision for abused women where there is no clear "right or wrong" answer. Some women may stay because they feel safer in an abusive situation more so than facing the unknowns of leaving, believe their children will be financially better off, and/or believe their children will benefit from having a father or male role model in their life (Zink et al., 2003). Nevertheless, women's choices about their involvement in violent relationships frequently revolve around their children's needs, and are often the most significant reason for staying in, leaving, or returning to relationships where there is IPV (Zink et al., 2003).

Women also used their informal supports, such as family and friends, as a means to protect their children. In fact, women reported reaching out to family and friends more than to professionals or community agencies. This confirms the results of other studies in which participants rarely relied on the police for protection and instead relied more heavily on informal

supports, including neighbors, teachers, and church leaders (Meyer, 2011; Mohr et al., 2001). In this study, it was not clear that women make such decisions in order to protect their children specifically, but given the centrality of children in women's decision-making as noted earlier, it is not unreasonable to infer that their choice to access formal or informal supports revolves around their children's needs. Moreover, many abused mothers lack access to police or formal support services for abused women (i.e., live in isolated or remote areas) or may be reluctant to use their services for fear of retaliation by the abuser or simply because they are fearful or mistrusting of formalized systems, most notably the police or child welfare authorities. Therefore, it is critical that service providers understand the usefulness and protectiveness of informal systems and how they can be incorporated into women's safety plans (Wilcox, 2000). Professionals also need to give credit to women for using their supports as an attempt to protect their children.

Although less than informal supports, mothers accessed formal supports to protect their children from violence. Less than half of mothers called the police as a protective strategy, and less than half of those found the police to be helpful. In fact, when asked to identify the three least helpful strategies, contacting the police ranked first. This is not surprising given issues of dual charging, ineffectual responses, and slow response times, which are often identified as reasons for not perceiving police as helpful (Coulter, Kuehnle, Byers, & Alfonso, 1999; Johnson, 2007). Half of the mothers contacted a professional or community service for assistance, and the majority of them identified this as a helpful strategy to protect their children. Few mothers contacted a crisis shelter specifically, which is not surprising, as most abused women do not access shelters. For example, according to Statistics Canada, only 11% of women abused in the past five years had used a shelter, and only 7% were residents (Brzozowski, 2004).

Approximately one-third of the mothers had tried to obtain a protection order against their abusive partners; however, less than half rated it as helpful; again understandably since perpetrators may breach the order and police may not enforce order violations (Burgess-Proctor, 2003). Child welfare authorities were the least utilized, which is not surprising given the negative reputation of child protective services. However, as a potential source for ensuring women's and children's safety, this may be an oversight, given child welfare's increasing involvement in domestic violence situations, mainly due to the increase of mandatory reporting requirements (Mathews, 2014; Nixon et al., 2007). If women reach out to child protection services to protect their children (and themselves), it is imperative that these systems are equipped with specialized or trained staff and adequate resources to do so.

It is informative that abused mothers preferred strategies, such as being affectionate with their children, parenting them alone, and accessing informal supports (and found them to be effective) over more formal supports, such as accessing police or shelters or filing a protection order. Typically, professionals deem these formal supports to be more legitimate or useful and rely upon them when intervening with abused mothers; and in the case of some systems, notably child protective services are mandated (Nixon, 2002). Thus, professionals may ignore or underestimate the value of less formal protective measures. Such oversight may result in safety plans or interventions that do not take into account the realities, strengths, and capacities of their abused clients. To be clear, we are not saying that abused mothers should not be encouraged to seek the assistance of police or shelters, as they are indeed points of safety for many abused women; however, professionals must understand that abused mothers employ a variety of strategies or measures that are not always obvious or reflect what professionals deem as appropriate but are, nevertheless, effective.

Although the study did not gather in-depth qualitative information about strategies used, it seems likely that the wide variation in the kinds of strategies reported reflects how women's decisions on how best to protect their children depends on their children's particular needs and experiences, the nature of their partner's violence (e.g., severe, predictable), mothers' (and their children's) particular social and economic location, and previous experiences with particular protective strategies. Our analysis questions the narrowly constructed notion that protection from harm requires removal from danger by exiting the violent relationship or by contacting formal systems, notably the police (Nixon, 2002; Paterson, 2010). Further, it suggests that women who remain with their partners do not lack personal agency and are not passive, helpless victims; nor are they "bad mothers" who prioritize their own needs and desires over their children's. The women in the present study took active steps to protect their children from the harms associated with domestic violence. Blaming mothers for the violence perpetrated against them and considering them as "failing to protect" their children is not only misguided but creates a formidable barrier in our work with abused mothers and their children (Radford & Hester, 2006; Stark, 2002).

IMPLICATIONS FOR PRACTICE

Children are a central focus of women's lives and mothering is often an important aspect of their lives. Therefore, practitioners, particularly in the field of child protection, and policymakers must view IPV within the context of mothering. As part of that understanding, women's efforts to protect their children from exposure to violence should be recognized. Understanding the various strategies abused mothers employ to protect their children from direct abuse or to buffer them from the negative consequences of exposure to violence in the home is critical when developing interventions to support mothers and to protect children.

Interestingly, the strategies most likely to be encouraged by professionals, such as accessing shelters, contacting the police, or obtaining protections orders often were not used frequently or perceived to be effective. Services providers need to be aware of the range of strategies that mothers employ, including those that are not always embraced or deemed effective by professionals. Women should be viewed as experts in their own situations and their perspectives should be taken into account when developing a plan for intervention. Whereas service providers may be tempted to interpret the decisions that abused mothers make as irrational or non-protective and characterize the mothers as passive, weak, and simply "bad" mothers who put their own needs before their children's or do not take their children into account, our results support the view that women's decisions are often strategic attempts to manage abusive situations and to protect their children (Dunn & Powell-Williams, 2007).

Moreover, a narrow conceptualization of protection ignores the social and economic barriers that abused mothers face and how these barriers constrain mothers' choices of protective strategies. By narrowly defining protection, we may jeopardize women's and children's safety. If the focus is limited to more typical or legitimate forms of protection (e.g., contacting police, going to shelter, filing a protection order), service providers could miss strategies that may actually lead to greater safety for women and children. Further, if abused mothers believe that their mothering choices (including their use of protective strategies) will be judged and labeled as deficient by service providers, it is unlikely that they will reach out to service providers. Motherhood serves to preserve a woman's sense of self and being a good mother helps women heal and cope with their experiences of abuse (i.e., serves as a buffer or respite for the abuse) (Irwin et al., 2002). By devaluing women's mothering and labeling them as inadequate parents, service providers remove a key source of strength. Women may internalize the negative

messages given by service providers, possibly resulting in lowered self-esteem and self-efficacy, thereby potentially decreasing their capacity to protect themselves and their children. Asking women about the various ways they have tried protect their children sends a powerful message that service providers view them as knowledgeable and invites them to be active participants in planning interventions. Asking about (and appreciating) the range of protective strategies may result in less intrusive interventions, such as removing children from the home. Moreover, empowering abused mothers "is the best way to keep children who are exposed to domestic violence safe and healthy" (Stark, 2002, p. 130). Research demonstrates that children fare best when their mothers are in good mental health and supported in their parenting (Graham-Bermann, Howell, Lilly, & Devoe, 2011).

CONCLUSION

Although the present study yields important information, it is not without limitations. First, most participants were recruited from formal organizations, including women's crisis shelters. The protective strategies employed by these mothers may be different from those who elect not to access formal supports. Second, our list of protective strategies is not exhaustive so we may have not captured the complete range of strategies or responses that abused women utilize to protect their children. Third, we looked only at the protective strategies used by abused mothers and mothers' perceptions of effectiveness. We did not study the effectiveness of these strategies by examining the outcomes for their children.

Nonetheless, the major study conclusion is that abused mothers commonly intervene in multiple ways intended to protect their children from the harms of exposure to violence. The present study is the first large quantitative study that examines women's usage of protective strategies and their perceptions of effectiveness. More formal strategies most likely encouraged

by professionals, notably contacting the police and accessing shelters, were used less often and deemed less effective than informal strategies. Informal strategies, such as those that mitigate the harms associated with children's exposure to violence in the home, including being nurturing and emotionally supportive, were commonly used and viewed as highly effective. It is critical that mothers have the appropriate supports to employ these informal strategies. Mothering in the context of an abusive partner relationship can be dangerous and exhausting, and professionals must support women so that they can offer the emotional support their children require.

Professionals must rethink the commonly held assumption that mothers who have been abused play a passive role with their children and instead consider the mothers' strengths and protective abilities. This may empower abused women by encouraging those working directly with them to focus on the women's strengths and limit unnecessary, inappropriate, or intrusive interventions.

REFERENCES

Beeble, M. L., Bybee, D. I., & Sullivan, C. M. (2007). Abusive men's use of children to control their partners and ex-partners. *European Psychologist, 12*(1), 54-61. doi:10.1027/1016-9040.12.1.54

Brownridge, D. A., Chan, K. L., Hiebert-Murphy, D., Ristock, J., Tiwari, A., Leung, W. C., & Santos, S. C. (2008). The elevated risk for non-lethal post-separation violence in Canada: A comparison of separated, divorced, and married women. *Journal of Interpersonal Violence, 23*(1), 117-135. doi:10.1177/0886260507307914

Brzozowski, J. E. (2004). Family violence in Canada: A statistical profile 2004. Ottawa, ON: Canadian Centre for Justice Statistics Retrieved from http://www.canadiancrc.com/PDFs/PHAC_2004_family_violence_profile_e.pdf

Burgess-Proctor, A. (2003). Evaluating the efficacy of protection orders for victims of domestic violence. *Women & Criminal Justice, 15*(1), 33-54. doi:10.1300/J012v15n01_03

Coulter, M. L., Kuehnle, K., Byers, R., & Alfonso, M. (1999). Police-reporting behavior and victim-police interactions as described by women in a domestic violence shelter. *Journal of Interpersonal Violence*, *14*(12), 1290-1298. doi:10.1177/088626099014012004

Dunn, J. L., & Powell-Williams, M. (2007). "Everybody makes choices": Victim advocates and the social construction of battered women's victimization and agency. *Violence Against Women, 13*(10), 977-1001. doi:10.1177/1077801207305932

Edleson, J. (2001). Studying the co-occurrence of child abuse and domestic violence in families. In S. A. Graham-Berman (Ed.), *Domestic violence in the lives of children* (pp. 91-110). Washington, DC: American Psychological Association.

Edleson, J. L., Mbilinyi, L. F., & Shetty, S. (2003). *Parenting in the context of domestic violence*. San Francisco, CA: Judicial Council of California, Administrative Office of the Courts, Center for Families, Children and the Courts. Retrieved from: http://www.courts.ca.gov/cgi-bin/search.cgi?q=Parenting+in+the+context+of+domestic+violence&Search.x=0&Search.y=0

Evans, S. E., Davies, C., & DiLillo, D. (2008). Exposure to domestic violence: A meta-analysis of child and adolescent outcomes. *Aggression and Violent Behavior, 13*(2), 131–140. doi:10.1016/j.avb.2008.02.005

Ewen, B. M. (2007). Failure to protect laws: protecting children or punishing mothers? *Journal of Forensic Nursing, 3*(2), 84-86. doi:10.1111/j.1939-3938.2007.tb00108.x

Fotheringham, S., Dunbar, J., & Hensley, D. (2013). Speaking for themselves: Hope for children caught in high conflict custody and access disputes involving domestic violence. *Journal of Family Violence, 28*(4), 311-324. doi:s10896-013-9511-3

Graham-Bermann, S. A., Howell, K. H., Lilly, M., & DeVoe, E. (2011). Mediators and moderators of change in adjustment following intervention for children exposed to intimate partner violence. *Journal of Interpersonal Violence, 26*(9), 1815-1833. doi:10.1177/0886260510372931

Haight, W. L., Shim, W. S., Linn, L. M., & Swinford, L. (2007). Mothers' strategies for protecting children from batterers: The perspectives of battered women involved in child protective services. *Child Welfare, 86*(4), 41-62.

Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2010). The overlap of witnessing partner violence with child maltreatment and other victimizations in a nationally representative

survey of youth. *Child Abuse & Neglect, 34*(10), 734-741. doi:10.1016/j.chiabu.2010.03.001

Hardesty, J. L. (2002). Separation assault in the context of post-divorce parenting: An integrative review of the literature. *Violence Against Women, 8*(5), 597-625. doi:10.1177/107780120200800505

Hardesty, J. L., Oswald, R. F., Khaw, L., Fonseca, C., & Chung, G. H. (2008). Lesbian mothering in the context of intimate partner violence. *Journal of Lesbian Studies, 12*(2), 191-210. doi:10.1080/10894160802161364

Hegarty, K., Bush, R., & Sheehan, M. (2005). The Composite Abuse Scale: Further development and assessment of reliability and validity of a multidimensional partner abuse measure in clinical settings. *Violence and Victims, 20*(5), 529-547.

Hegarty, K., & Valpied, J. (2013). *Composite Abuse Scale manual*. Victoria, Australia: The University of Melbourne.

Holden, G. W., & Ritchie, K. L. (1991). Linking extreme marital discord, child rearing, and child behavior problems: Evidence from battered women. *Child Development, 62*(2), 311-327. doi:10.2307/1131005

Holden, G. W., Stein, J. D., Ritchie, K. L., Harris, S. D., & Jouriles, E. N. (1998). Parenting behaviors and beliefs of battered women. In G. H. Holden, R. A. Geffner, & E. N. Jouriles (Eds.), *Children exposed to marital violence: Theory, research, and applied issues* (pp. 289-334). Washington, DC: American Psychological Association.

Irwin, L. G., Thorne, S., & Varcoe, C. (2002). Strength in adversity: Motherhood for women who have been battered. *Canadian Journal of Nursing Research, 34*(4), 47-57.

Johnson, I. M. (2007). Victims' perceptions of police response to domestic violence incidents. *Journal of Criminal Justice, 35*(5), 498-510. doi:10.1016/j.jcrimjus.2007.07.003

Jones, L., Hughes, M., & Unterstaller, U. (2001). Post-traumatic stress disorder (PTSD) in victims of domestic violence: A review of the research. *Trauma, Violence, & Abuse*, *2*(2), 99-119. doi:10.1177/1524838001002002001

Kelly, U. A. (2009). "I'm a mother first": The influence of mothering in the decision-making processes of battered immigrant Latino women. *Research in Nursing & Health*, *32*(3), 286-297. doi:10.1002/nur.20327

Kitzmann, K. M., Gaylord, N. K., Holt, A. R., & Kenny, E. D. (2003). Child witnesses to domestic violence: A meta-analytic review. *Journal of Consulting and Clinical Psychology*, *71*(2), 339-352.

Letourneau, N. L., Fedick, C. B., & Willms, J. D. (2007). Mothering and domestic violence: A longitudinal analysis. *Journal of Family Violence*, *22*(8), 649-659. doi:10.1007/s10896-007-9099-6

Levendosky, A. A., & Graham-Bermann, S. A. (1998). The moderating effects of parenting stress on children's adjustment in woman-abusing families. *Journal of Interpersonal Violence*, *13*(3), 383-397. doi:10.1177/088626098013003005

Levendosky, A. A., & Graham-Bermann, S. A. (2000). Behavioral observations of parenting in battered women. *Journal of Family Psychology*, *14*(1), 80-94. doi:10.1037//0893-3200.14.1.80

Levendosky, A. A., Lynch, S. M., & Graham-Bermann, S. A. (2000). Mothers' perceptions of the impact of woman abuse on their parenting. *Violence Against Women*, *6*(3), 247-271. doi:10.1177/10778010022181831

Mathews, B. (2014). Mandatory reporting laws and identification of child abuse and neglect: Consideration of differential maltreatment types, and a cross-jurisdictional analysis of child sexual abuse reports. *Social Sciences, 3*(3), 460–482. doi:10.3390/socsci3030460

Meyer, S. (2011). 'Acting in the children's best interest?': Examining victims' responses to intimate partner violence. *Journal of Child and Family Studies, 20,* 436-443. doi:10.1007/s10826-010-9410-7

Moe, A. M., & Bell, M. P. (2004). Abject economics: The effects of battering and violence on women's work and employability. *Violence Against Women, 10*(1), 29-55. doi:10.1177/1077801203256016

Mohr, W. K., Fantuzzo, J. W., & Abdul-Kabir, S. (2001). Safeguarding themselves and their children: Mothers share their strategies. *Journal of Family Violence, 16*(1), 75-92. doi:10.1023/A:1026580526895

Nixon, K. (2002). Leave him or lose them: The child protection response to woman abuse. In Tutty, L., & Goard, C. (Eds.), *Reclaiming self: Issues and resources for women abused by intimate partners* (pp. 64-80). Halifax, NS: Fernwood Publishing and RESOLVE.

Nixon, K. L., Tutty, L. M., Weaver-Dunlop, G., & Walsh, C. A. (2007). Do good intentions beget good policy? A review of child protection policies to address intimate partner violence. *Children and Youth Services Review, 29*(12), 1469-1486. doi:10.1016/j.childyouth.2007.09.007

Øverlien, C., (2009). Children exposed to domestic violence: Conclusions from the literature and challenges ahead. *Journal of Social Work, 10*(1): 80–97. doi:10.1177/1468017309350663

Paterson, S. (2010). “Resistors,” “helpless victims,” and “willing participants”: The construction of women’s resistance in Canadian anti-violence policy. *Social Politics: International Studies in Gender, State & Society*, *17*(2), 159-184. doi:10.1093/sp/jxq001

Peled, E., & Gil, I. B. (2011). The mothering perceptions of women abused by their partner. *Violence Against Women*, *17*(4), 457-479. doi:10.1177/1077801211404676

Radford, L. & Hester, M. (2006). *Mothering through domestic violence*. London: Jessica Kingsley Publishers.

Sinha, M. (2013). *Measuring violence against women: Statistical trends*. Retrieved from http://www.statcan.gc.ca/pub/85-002-x/2013001/article/11766-eng.pdf

Stark, E. (2002). The battered mother in the child protective service caseload: Developing an appropriate response. A report originally developed for Nicholson v. Williams. *Women’s Rights Law Reporter*, *23*(2), 107-131.

Statistics Canada. (2008). Low income cut-offs for 2007 and low income measures for 2006 (Cat. no. 75F0002M N.004). Retrieved from http://www.statcan.gc.ca/pub/75f0002m/75f0002m2008004-eng.pdf

Statistics Canada. (2011). Family violence in Canada: A statistical profile (Cat. no. 85-224-X). Retrieved from http://www.statcan.gc.ca/pub/85-224-x/85-224-x2010000-eng.htm

Sullivan, C. M., Nguyen, H., Allen, N., Bybee, D., & Juras, J. (2000). Beyond searching for deficits: Evidence that physically and emotionally abused women are nurturing parents. *Journal of Emotional Abuse*, *2*(1), 51-71. doi:10.1300/J135v02n01_05

Van Horn, P., & Lieberman, A. (2002). *Domestic violence and parenting: A review of the literature*. San Francisco, CA: Judicial Council of California, Center for Families, Children and the Courts.

Wilcox, P. (2000). “Me mother’s bank and me nanan’s, you know, support!”: Women who left domestic violence in England and issues of informal support. *Women’s Studies International Forum, 23*(1), 35-47. doi:10.1016/S0277-5395(99)00093-X

Zink, T., Elder, N., & Jacobson, J. (2003). How children affect the mother/victim’s process in intimate partner violence. *Archives of Pediatric Adolescent Medicine, 157*(6), 587-592. doi:10.1001/archpedi.157.6.587

Zlotnick, C., Johnson, D. M., & Kohn, R. (2006). IPV and long-term psychosocial functioning in a national sample of American women. *Journal of Interpersonal Violence, 21*(2), 262-275. doi:10.1177/0886260505282564

Table 1: Participant Demographics

Variable	*N* = 350
Age	Min. Age: 18 yrs.; Max. Age: 57 yrs.; Average = 33.8; *SD* = 7.8
Cultural Background (Missing = 1)	Aboriginal: *n* = 176 (50.1%) European heritage: *n* = 80 (22.8%) Canadian: *n* = 56 (16%) Caucasian: *n* = 20 (5.7%) Other: *n* = 19 (5.4%)
Paid Employment (Missing = 5)	Full-time: *n* = 80 (23%) Part-time: *n* = 48 (13.9%) Casual: *n* = 14 (4.1%) Unemployed: *n* = 203 (58.8%)
Highest Level of Education (Missing = 1)	Did not complete secondary/high school: *n* = 127 (36.4) Grade 12 (includes GED): *n* = 82 (23.5%) Some post-secondary (technical/community college): *n* = 16 (4.6%) Completed post-secondary (technical/community college): *n* = 49 or 14.0% Some post-secondary (university): *n* = 32 (9.2%) Completed post-secondary (university): *n* = 43 (12.3%)
Reported Annual Income (Average income = $23,380) (Missing = 29)	<$9,999: *n* = 62 (19.3%) $10,000-$19,999: *n* = 127 (39.6%) $20,000-$29,999: *n* = 66 (20.6%) $30,000-$79,999: *n* = 54 (16.8%) >$80,000: *n* = 12 (3.7%)
Number of Children (Average = 2.8; average age of child = 8 years, *SD* = 4.8)	1 Child: *n* = 68 (19.4%) 2 Children: *n* = 113 (32.3%) 3 Children: *n* = 72 (20.6%) 4 Children: *n* = 46 (13.1%) 5+ Children: *n* = 51 (14.7%)
Relationship Status	Married: *n* = 22 (6.3%) Common-law: *n* = 22 (6.3%) Divorced: *n* = 42 (12.0%) Separated or Ex-common law: *n* = 198 (56.6%) Boyfriend/girlfriend: *n* = 15 (4.3%) Ex-boyfriend/girlfriend: *n* = 48 (13.7%) Other: *n* = 3 (0.9%)

Table 2: Participants' Use of Protective Strategies and Rating of Effectiveness (Ranked in Order of Usage) (N = 350)

	Yes	No	Very helpful = 4	Quite helpful = 3	Somewhat helpful = 2	A little bit helpful = 1	Not helpful = 0
I was affectionate with them	*n* = 324 (94.2%)	*n* = 20 (5.5%)	*n* = 212 (67.5%)	*n* = 67 (21.3%)	*n* = 29 (9.2%)	*n* = 3 (1%)	*n* = 3 (1%)
I did things to help them feel good about themselves	*n* = 319 (92.5%)	*n* = 26 (7.5%)	*n* = 172 (56%)	*n* = 86 (28%)	*n* = 41 (13.4%)	*n* = 5 (1.6%)	*n* = 3 (1.0%)
I parented my children alone	*n* = 281 (82.2%)	*n* = 62 (17.8%)	*n* = 148 (55.4%)	*n* = 79 (29.6%)	*n* = 31 (11.6%)	*n* = 7 (2.6%)	*n* = 2 (0.7%)
I avoided a situation that I thought might lead to violence	*n* = 272 (77.7%)	*n* = 76 (21.7%)	*n* = 129 (48.1%)	*n* = 56 (20.9%)	*n* = 56 (20.9%)	*n* = 14 (5.2%)	*n* = 13 (4.9%)
I told my family and friends about the abuse	*n* = 248 (72.5%)	*n* = 94 (27.5%)	*n* = 110 (46.4%)	*n* = 51 (21.5%)	*n* = 40 (16.9%)	*n* = 14 (5.9%)	*n* = 22 (9.3%)
I tried to make up for their witnessing violence by giving them more attention or spending more time with them	*n* = 225 (66%)	*n* = 116 (34%)	*n* = 73 (33.2%)	*n* = 54 (24.5%)	*n* = 61 (27.7%)	*n* = 19 (8.6%)	*n* = 13 (5.9%)
I ended the relationship with my partner	*n* = 202 (61.2%)	*n* = 128 (38.8%)	*n* = 134 (69.4%)	*n* = 26 (13.5%)	*n* = 19 (9.8%)	*n* = 7 (3.6%)	*n* = 7 (3.6%)
I taught my children about the problems associated with drug and alcohol abuse	*n* = 191 (55.7%)	*n* = 152 (44.3%)	*n* = 98 (54.4%)	*n* = 47 (26.1%)	*n* = 29 (16.1%)	*n* = 2 (1.1)	*n* = 4 (2.2%)
I contacted a professional or community service	*n* = 188 (56%)	*n* = 148 (44%)	*n* = 92 (51.1%)	*n* = 41 (22.8%)	*n* = 22 (12.2%)	*n* = 14 (7.8%)	*n* = 11 (6.1%)
I taught my children a safety plan	*n* = 170 (50%)	*n* = 170 (50%)	*n* = 82 (50%)	*n* = 37 (22.6%)	*n* = 27 (16.5%)	*n* = 12 (7.3%)	*n* = 6 (3.7%)
I separated my children from my partner	*n* = 169 (51.8%)	*n* = 157 (48.2%)	*n* = 83 (50.6%)	*n* = 35 (21.3%)	*n* = 31 (18.9%)	*n* = 7 (4.3%)	*n* = 8 (4.9%)
I contacted the police	*n* = 157 (47.3%)	*n* = 175 (52.7%)	*n* = 43 (28.3%)	*n* = 32 (21.1%)	*n* = 30 (19.7%)	*n* = 23 (15.1%)	*n* = 24 (15.8%)
I physically fought back against my partner	*n* = 121 (37.2%)	*n* = 204 (62.8%)	*n* = 18 (15.4%)	*n* = 9 (7.7%)	*n* = 20 (17.1%)	*n* = 18 (15.4%)	*n* = 52 (44.4%)
I remained in the relationship with my partner	*n* = 118 (34.7%)	*n* = 222 (65.3%)	*n* = 11 (10.2%)	*n* = 15 (13.9%)	*n* = 16 (14.8%)	*n* = 11 (10.2%)	*n* = 55 (50.9%)
I threatened my partner so he/she would stop abusing me	*n* = 117 (36%)	*n* = 208 (64%)	*n* = 18 (15.7%)	*n* = 12 (10.4%)	*n* = 26 (22.6%)	*n* = 17 (14.8%)	*n* = 42 (36.5%)
I tried to get a protection order	*n* = 114 (34.5%)	*n* = 216 (65.5%)	*n* = 36 (32.4%)	*n* = 16 (14.4%)	*n* = 14 (12.6%)	*n* = 6 (5.4%)	*n* = 39 (35.1%)
I disciplined them so my partner would not	*n* = 112 (34.5%)	*n* = 213 (65.5%)	*n* = 31 (28.7%)	*n* = 30 (27.8%)	*n* = 28 (25.9%)	*n* = 9 (8.3%)	*n* = 10 (9.3%)

I returned to the relationship with my partner	*n* = 63 (18.8%)	*n* = 273 (81.3%)	*n* = 6 (10.5%)	*n* = 6 (10.5%)	*n* = 15 (26.3%)	*n* = 8 (14.0%)	*n* = 22 (38.6%)
I provoked a violent incident when my children were not present so that the episode would be finished by the time they returned	*n* = 56 (17.2%)	*n* = 269 (82.8%)	*n* = 18 (34%)	*n* = 11 (20.8%)	*n* = 12 (22.6%)	*n* = 3 (5.7%)	*n* = 9 (17%)
I contacted child welfare	*n* = 50 (15%)	*n* = 284 (85%)	*n* = 17 (34.7%)	*n* = 6 (12.2%	*n* = 8 (16.3%)	*n* = 5 (10.2%)	*n* = 13 (26.5%)