An Historical Snapshot of the Relevance of Pregnancy for Lesbian Intimate Partner Violence

Intimate partner violence (IPV) has been taken up with respect to heterosexual couples for several decades and strategies to address/support this have been integrated into health and social service programs and support. Pregnancy is one factor that has been associated with IPV. Nevertheless, despite the increasing attention to the lesbian baby boom from the mid-'70s in North America and affirmation of the diverse families who comprise communities and increasingly visible programming and services to meet the diverse needs of lesbians, less visible has been lesbian IPV and particularly in relation to motherhood, pregnancy or postpartum. This paper reports on an examination of scholarly literature on lesbian IPV and lesbian mothering undertaken in 2003 that suggested the limited visibility of childbearing in relation to lesbian IPV had implications for research and programming in a Canadian context. As historical research, this inquiry aimed to be congruent with an advocacy stance, one that was accountable to lesbian communities The findings are situated in the current landscape of research and resources for childbearing lesbians given the uneven support for lesbian mothering and mothering-focused lesbian IPV.

Books on lesbian¹ parenting and online stories of women's experiences may describe both the hurdles of same-sex parenting and romantic views of lesbian motherhood (e.g., Clunis and Green 1995). However, as Jacquelyne Luce (2002) noted in her ethnography of queer Canadian women's experiences of assisted conception and reproductive health, along with the joyful narratives of home births and blended family configurations are stories that are not often told; these include those in which "lesbians have contracted sexually transmitted diseases through donor insemination, the negative side effects of fertility drugs and the grieving of missed opportunities to get pregnant" (2). Documenting the historical perspective on stories told by and/about mothers and made visible in particular times and places can offer insight into how diverse mothers such as lesbians experience and understand their lives over time. It provides a reference point for examining current contexts that shape their lives as well as potential supports.

This paper focuses on research on the relevance of pregnancy and mothering for lesbian intimate partner violence (IPV)² based on research that was undertaken one decade ago with a particular view to the Canadian context. At this time, lesbian motherhood, while certainly beginning to be more visible in the eyes of media and social service context, remained marginal given the prevailing heteronormativity in all social institutions (MacDonnell 2001). Although activism in gay and lesbian communities had contributed to supportive changes to the legal system such as amendment of the Ontario³ Child and Family Services Act to permit same-sex adoption in 2000 (Ross et al.), disclosure of lesbian mothering often remained fraught (CLGRO; MacDonnell 2001). In 2003, I undertook an inquiry that explored the relationships among and between lesbians, mothering, and IPV. This focus emerged from questions childbearing lesbians themselves raised in an indepth qualitative case study with one expectant lesbian couple (MacDonnell 2001). Each partner in that couple had been coparent and biological mother in their relationship and had professional and personal links to medical and midwifery communities. Having encountered enormous upheaval as they dealt with the demands of parenting, this couple, professionals familiar with academic resources, sought direction from the literature. Although they described their childbearing as "a wonderful dynamic," they encountered significant relationship difficulties during the first year, especially during the first six months postpartum for the coparent. They noted that childbearing relationship concerns and postpartum violence were well-documented for heterosexual couples, but could only find patriarchal models which they found irrelevant to their lives (MacDonnell 2001).

Given the historical exclusion of lesbians from health institutions and the sensitive nature of the research focus, and positioned as public health nurse and ally to LGBT communities (MacDonnell 2001), I initially turned to established local and online community networks of lesbians and allies in determine whether and how these issues had been addressed in practice and/ or research. Key informants (counselors, nurses, and social workers involved with childbearing lesbians, lesbian IPV, women-centered and/or public health services), indicated that there was a gap in knowledge and supported this line of inquiry. As I noted at the time, lesbian IPV is a sensitive issue, since lesbian relationships have often been depicted as loving, non-violent and equitable partnerships (Telesco). While health professionals have a role in supporting the health of diversely situated lesbians, given the deeply embedded heterosexism

in all social institutions, lesbian communities have well-justified concerns about the potential backlash of discussing lesbian IPV. These dynamics were (and in 2013) continue to be exacerbated by concerns with funding for cash-strapped women-centered supports.

This research used a critical feminist and postmodern lens to situate the significance of the visibility or invisibility of lesbian IPV and/or lesbian childbearing in relation to pregnancy or postpartum in the existing literature (Ristock). As Julianne Cheek indicates, «the what (or who) is absent or not stated in any research is of as much importance as what (or who) is present or stated» (21). This inquiry aimed to uncover gaps and silences in the current knowledge base about the complex realities of women's lives with a goal of creating support. I asked two questions: 1) Does the IPV literature reflect a focus on lesbian pregnancy, postpartum and/or childbearing? 2) Does the popular and scholarly literature focused on lesbian childbearing address IPV? In order to locate published research addressing lesbian IPV and childbearing I searched CINAHL, PsychInfo, CSA Sociological Abstracts, Dissertation Abstracts International and Masters Abstracts International databases up until July 1, 2003. I examined the grey literature, including a variety of books, feminist or popular articles on lesbian childbearing and related website, such as those written by childbearing lesbians, for content on conflict and violence in relation to childbearing in the pregnancy and postpartum periods.⁴ In the following section, I share the findings of this inquiry.

Situating an Inquiry on Lesbian IPV and Mothering: Pregnancy and Postpartum

Pregnancy has been identified as a critical event in the onset of relationship violence in some heterosexual relationships (Stewart; Wathen and MacMillan). Although statistics ranged widely, with admittedly significant variation in definitions and research methods used, Clark et al. (2000) indicated that 4-26 percent of American prenatal care patients experienced IPV during the year before their current pregnancy, and 1-17 percent were victims of violence during their current pregnancy. Canadian rates of abuse for women during pregnancy ranged from 5.5 percent to 6.6 percent (Murphy, Schei, Myhr, and Du Mont). Nadine Wathen and Harriet MacMillan's systematic review of the literature on effective interventions to reduce rates of abuse or reabuse excluded data on lesbian IPV, citing the small number of original studies available to complete a systematic review. In heterosexual couples, IPV was tied to factors such as capacity to handle relationship conflict, those that increase relationship stress (e.g., anticipation of parenthood, role transitions, economic tensions), as well as "pregnancy-related factors (first-time parent, unplanned

or mistimed pregnancies, young age at pregnancy)" (Jasinski 714; see also Epinosa and Osborne). IPV was also discussed in relation to immigrant and newcomer communities, given dynamics such as cultural dislocation, shifting gender roles, loss of extended family and community, and access issues which respect the particular needs for culturally sensitive support to meet the complex needs of diversely located visible minority women (Sokoloff). Once a child is born, the postpartum period was noted as bringing challenges to family adjustment. In Donna Stewart's study of heterosexual couples, many of the women physically abused prenatally were also victims of violence at the hands of their male partners postpartum. The extent of extended family or supportive kinship groups within communities was suggested as a key factor for healthy postpartum adjustment (Sobey).

I was aware of the limitations of limiting an inquiry that was based on a comparison of heterosexuals to lesbians rather than using lesbian-centred sources such as those foregrounding lesbian voices in research and attending to their agency. Some literature indicated that a tradition of silence existed in lesbian communities, given the sensitive dynamics mentioned earlier (Browning). Findings from examination of the scholarly literature that had been emerging from the mid-'80s on lesbian abuse or lesbian childbearing suggested that pregnancy and postpartum were rarely explicitly considered or visible in quotes taken from participant interviews or researcher comments, although children occasionally surfaced in studies on lesbian abuse. As my own study participants noted, pregnancy and the first six months postpartum periods occupied only a very short, but significant, time in their lives as a couple and this could influence how childbearing is taken up within this literature. A search for narratives which described abusive situations-named as such by lesbians themselves or researchers studying lesbian abuse-was limited by the availability of published data in journals or lesbian literature. Quotes which were available and cited in the following section had been selected by authors for purposes quite different from my own lens of addressing pregnancy or postpartum relationship dynamics and thus are decontextualized from potentially other relevant information although I was thoughtful about the context in which such selections had been originally framed.

Although neither pregnancy nor postpartum were mentioned in Kerry Lobel's edited book, considered a landmark publication on lesbian partner abuse, issues relating to children emerged across chapters. Linda and Avreayl identify that the lesbian community itself needed education to support victims of violence and their children with free child care and confidential, safe spaces for battered lesbians and their kids. Under a section called "What is best for the kids?" the authors briefly considered implications for supporting the non-biological mother if the biological mother is the batterer and dealing with mandatory reporting

laws for child abuse and family courts (104, 109). References to women's status as mother or parent were occasionally part of the narratives which I could locate of women's experiences of violence, although in all cases the children were past the infant stage. For instance, Cedar Gentlewind explained,

Thank god I left [13-year-old] Tomi in the car, and left the engine running. No child should ever see his mother beaten, and Amy might have hurt him, too, if he' been there. Thank god he wasn't there and didn't have to watch. (41)

As well, Kim, using a pseudonym, speaks of her violent relationship with Kris who had "lived through an abusive marriage and [who] had lost custody of her daughter because of her abuse of the child" (132). There was a reference to a woman who was coparenting her partner's two school-aged children. Parenting became one focus of the abuse:

She accused me of oppressing her as a lesbian mother. She demanded complete parental responsibility from me, and yet she retained strict control and decision-making power. She told me when and how to punish the kids, and resented any fun time I spent with them. (Istar 166)

In Claire Renzetti's study of 100 mostly White lesbians who had experienced partner abuse, 35 percent lived with children, and "30 percent of these children were also abused by the respondents' partners" (85). Motherhood status (e.g., biological, non-biological and/or adoptive mother) was not identified. In follow-up interviews with 40 women, Renzetti noted that batterers, in three of the four relationships with children, had legal custody of the children. In a section on women's motivations to stay with their abusive partners Renzetti (1992) indicated that because of the very real risks for lesbians of losing custody of children, whether or not they were biological mothers, "children may be used by batterers as means to manipulate either partner into staying " (84). The lack of legal recognition of lesbians and coparents as mothers in many locales had a significant impact on an abused woman's perceived choices to act (Pustil). Plans to leave the relationship and/or reporting processes which may include report of child abuse and partner abuse within the family could also provoke concerns about disclosure of lesbian identities with repercussions for both women and their children (Renzetti). With the change in adoption laws in Canada, non-biological mothers could have an opportunity to gain custody which had often been denied them based on biological grounds; however, violence within same-sex relationships still remained difficult to prove in court and this influenced the non-biological mother's prospects (Buist).

Janice Ristock interviewed 102 diversely situated lesbians who had experienced IPV. "18 percent of the interviewees were women who had children and 28 percent spoke of relationships in which children were involved" (32). She noted that some women "kept separate residences because of the children" (50). In her findings, she mentioned that two women described that partner abuse increased when they were pregnant (72). A concern for Ristock and others was the need to address the issue of children as witnesses to same-sex violence "as many more lesbians and gay men are adopting children and having children through artificial insemination in addition to raising children from previous heterosexual relationships" (90). A narrative excerpt from her participant interviews reflected a mother' vulnerability as she sought safety and shelter with a limited social network.

I would say, "Okay can we talk about this later, I need to get up in the morning. And if I wouldn't sit there and listen she would throw herself on the floor and start screaming and banging herself on the floor or just try to drink a lot more and run out to the car and drive off really drunk, fast.... And if I tried to walk toward the bedroom she would put herself in front of me and not let me get there, right? So there were several occasions where we were out on the street ... I would bundle up my [five-year-old] child and take him out where we would look for a 24-hour donut place or something. Just to have some—just to get away from it until things calmed down. 'Cause we didn't know too many people in the city. (Ristock 90)

The popular lesbian childbearing literature reviewed, while comprising over 20 books and articles produced only one narrative reference that was explicitly described as an abusive postpartum lesbian partner relationship.⁵ This was in a chapter in a feminist publication, Vida et al.'s lesbian resource book. Although there was no explication of what this violence entailed, Terri Boggis, a biological mother partnered with a woman who was biological mother to two children in a previous relationship, depicted the incredible upheaval of postpartum motherhood:

Our fantasy had been that we would quickly wean Ned from full-time breast to part-time breast-and-bottle, in order for Rosemary to participate in the key, rewarding responsibility of infant parenting: feeding. We didn't anticipate a baby who refused the bottle. It caused friction between us, with Rosemary resenting the secondary "daddy" role of work (there was no "paternity" leave), errands, and holding a crying baby who could only be comforted by sucking on the other partner's breasts. I was sore, exhausted, locked in an abusive relationship with postpartum hormones, stuck in a non-air-conditioned New York City apartment in one of the hottest Julys ever recorded. (56)

It is difficult to ascertain whether this excerpt that reflects relationship discord or adjustment during childbearing for lesbians was consistent with definitions of violence or abuse; in fact, lesbians have often exhibited resilience and creativity in dealing with adversity, in childbearing or other contexts (Epstein). Rachel Epstein, in her study of childbearing lesbians, identified breastfeeding as a particular stressor for lesbian couples postpartum. In my case study of one lesbian couple (MacDonnell 2001), participants also named exclusive breast-feeding by the biological mother as the one decision they would have changed in retrospect. Their baby would often settle during a fussy period by nursing and settled for naps or bed after breastfeeding, preventing the coparent from participating more equitably in care.

Graduate research studies offered insight into a range of approaches to understanding lesbian IPV. The sole narrative I located that mentioned the experiences of a pregnant lesbian experiencing violence at the hands of her female partner emerged from Margo Borland's (1999) thesis on lesbian abuse in Alaska.

I knew this was not a good relationship to bring a child into, and of course in my mind I even thought, well, maybe this will help.... I was fully eight or nine months pregnant and she was still shoving me around ... this is actually where I was going to start the suicidal sort of thoughts. if [sic] I was to die, that was the only way I could get out...and that became very serious when I was pregnant because I thought ...how could I have let myself get pregnant in this kind of an abusive situation ...this was a conscious decision ... I mean no one was holding a gun to my head, although maybe she would have ... if I had refused [to get pregnant], she wanted very badly to have her own child ... I thought maybe I could die on the table ... [tearfully] and I thought I can't do that because I can't leave this baby with [her].... (Borland 45)

Janis Weber's thesis on lesbian dyads explicitly considered lesbian family and abusive relationships. She asked participants how children arrive in the family: by in-vitro, adoption or heterosexual couplings and how they managed division of tasks and conflict resolution. However, childbearing issues were invisible in the narrative excerpts or discussion. Jude Pustil's thesis on power dynamics in lesbian relationships devoted significant space to concerns about parenting and/or abusive situations. In addition to many references about custody concerns, she shared that a number of stories of abuse surfaced in the group meetings, although pregnancy was referenced only in relation to the biological mother's social status.

It took me a long time to admit that I and my child had been abused in a very cruel way. We were not beaten physically.... The abuse we suffered was verbal, emotional, crazy-making, mind games and absolute lack of respect. (Pustil 149)

Stories of women's experiences of violence are painful, potentially conjuring up emotional response and questions of personal pain in the readers' relationships. Grace Giorgio, in her thesis on power and resistance in lesbian abusive relationships, also considered how dominance and marginalization play out in the spaces available for women to share their stories. She stressed that women who batter are often invisible in resources on lesbian IPV, noting that the "outrageous rage" (Giorgio 205) that emanates from these women as they contend with the possibility of "inaccurate" labeling as batterers and rejection in relationships from their communities and support services may not be deemed suitable for mainstream LGBT press.

Giorgio offered insight into both mainstream venues and underground press in which lesbians can share their lives. She advances the possibility of space in zines, such as *Drop Dead: The Zine of Lesbian Battering*, for the complexity and raw emotionality of stories and non-linear representations of lesbian's experiences of violence, stating,

This zine captures both lesbians' deeply complex and conflicted subjective negotiations of performed and conflicted marked difference and through the discourses of lesbian battering. Through poems, angst-ridden drawings, and selected diary entries, this twenty-page, handmade zine reveals a nightmare relationship and the survivor's rocky recovery. In confessional pieces that render the relationship peripheral and the survivor central, we learn this survivor is so butch that women have paid her for sex. We learn she is also a mother. (205-6)

Narratives such as this also make visible social dynamics, such as class, which run counter to the dominant discourses of social privilege that prevail in lesbian health research and parenting contexts and limit the ways in which communities and professionals construct the issues (Stevens).

Even in these few and decontexualized stories of intimate partner violence, women's own voices convey the everyday "messiness," and uncertainty inherent

in their lives as lesbian mothers contending with abuse, as well as their perceptions of actions available to them as they negotiate safety, survivor issues, and dashed expectations of postpartum relationships. Familiar themes resonate with the theoretical literature on lesbian IPV, hinting at factors such as substance use and child abuse. Yet, richer insights into diversely positioned mothers' lives offer snapshots of women's engagement with particular social dynamics shaping identities and roles. They encounter financial constraints, as well as the fatigue and frustration of breastfeeding, resentment and jealousy, control of parenting actions, and doubts about a conscious and possibly "equitable" process of decision-making to bear a child. While these narratives are in no way representative of lesbian mothers' lives, their in/visibility in academic and feminist texts must be juxtaposed against Giorgio's questions of the erasure of voice and visibility of "other" lesbians' lives, even in spaces that claim to support them.

Implications: Historical Research on Mothering as Advocacy Practice

Findings from this study raised several questions that included questions about disclosure, research, and supportive resources and were shared at conferences in order to create space for dialogue (MacDonnell 2004, 2005). Implications from the research point to questions such about conflict in lesbian mothering relationships; the lack of data to ascertain whether lesbian IPV occurs during prenatal and postpartum periods; how/why these issues are visible or rendered in/visible in scholarly or popular literature; and material supports for childbearing lesbians in general and those experiencing abusive situations.

As historical research this inquiry aimed to be congruent with an advocacy stance, one that was accountable to lesbian communities (Ristock). Findings were shared with Canadian service providers and researchers undertaking studies on the emotional health issues of childbearing lesbian, bisexual, two spirited, trans-identified and queer women : those pregnant, and/or parenting coparenting children up to one year of age. The researchers planned to incorporate a tool to examine relationship conflict; service providers involved with lesbian family/lesbian IPV supports considered changes to existing services for lesbian IPV (R. Epstein, L. Chesley, L. Ross, personal communications, June 5, 2003). Thus this research, while not based on the collection of new primary data, illustrates the value of a applying a critical feminist lens to existing data on lesbian mothers to offer new insights into gaps in knowledge and understanding, as well as enhance service provision. Just as LGBT communities are beginning to identify the consequences of silence around violence within same-sex relationships, it seems important to explore the possibility that lesbians experiencing childbearing, as coparent or biological and adoptive mothers,

may also encounter abusive dynamics at this time. The development of spaces for diversely located lesbians to share their stories of childbearing can foster greater understanding of supportive communities.

Fast -Forward to 2013

One decade later, the landscape for lesbian childbearing has changed markedly in Canada and to some extent in the United States and beyond with legal support for gay marriage currently pending in the fifteenth American state. An updated review of scholarly literature in 2013 in the same databases that were originally searched up until 2003 for this paper shows enormous scholarly interest in the subject of IPV in lesbian, gay, bisexual and trans communities and broader study of LGBT people and families, as well as diverse lesbians of colour. Bornstein et al. (2006) point to the importance of activists such as Barbara Hart and Suzanne Pharr in lesbian communities who were instrumental in laying the groundwork for research on lesbian IPV, setting the stage for the creation of such tools such as a LGBT-inclusive Power and Control Wheel which is at times integrated into some IPV resources and professional curricula (MacDonnell 2005). Certainly those referenced in this review share an activist stance as they make visible these difficult stories of lesbian mothering across these different contexts.

Relevant literature emerging over this decade addresses theoretical underpinnings of concepts that have been elaborated in relation to LGBT research over the last decade, including that of minority stress (Edwards and Sylaska, 2013), intersections of social determinants such as shelter, age, and ethnoracial dynamics that are linked to the vulnerability for violence of particular groups of lesbians appear more visible in the scholarly literature and attention to research methodology (e.g., Glass et al.; Sullivan et al.). Yet, few studies on lesbian perinatal period account for IPV-for instance, Ross addresses relationship conflict in a context of postpartum depression. Furthermore, little research on lesbian IPV explicitly accounts for children and mothering. As Jennifer Hardestry et al. stressed in their 2008 primary research with diverse ethnoracially-situated American lesbian mothers in relation to IPV, however, "We contend that remaining silent compromises women and children's safety and health and may also hide the unique strengths of lesbian mothering." It appears that although there is increased awareness and scholarly research related to lesbian and LGBT IPV, Hardestry's (and Oswald)'s team's current scholarly work on the explicit intersections among motherhood, lesbians and IPV remains novel in its focus on motherhood.

Even in 2013, although lesbian mothering in a Canadian context is more normalized in many urban contexts, material supports for lesbian mothers

and their capacity to disclose their mothering status remain uneven across the country (Rickard). There are currently online and programmatic lesbian-and LGBT-focused resources based in Toronto, Ontario such as Rainbow Health Ontario and David Kelley Family Services that are supported by provincial and municipal resources. Individuals can locate counseling and other resources on lesbian IPV and childbearing with attention to the diversity of motherhood across ethnoracial groups, languages and other social locations. Such material resources correspond to strategies that DiLapi (1989) identified as crucial to challenging lesbian mothers' status at the bottom of her "Hierarchy of Motherhood" but it would appear that there is yet more to do.

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¹I use the term lesbian, while recognizing the shifting meanings and boundaries that limit categorization for diversely situated women for whom same-sex childbearing may be relevant. This includes those who self-identify as queer, dyke, bisexual or heterosexual, for instance. The term LGBT will be used to reference communities defined by sexual minority and gender diversity (transsexual, transgender people), although trans issues are not a focus here. ²The term Intimate Partner Violence is used in this paper, however, terms such as woman abuse and domestic violence have been and continue to be used in the scholarly literature as well. Bornstein et al. (2006) describe the historical turning point in which lesbian intimate partner violence was identified: "In the groundbreaking anthology, Naming the Violence, published by the National Coalition Against Domestic Violence Lesbian Task Force, Barbara Hart defined DV in lesbian relationships in similar terms. Hart writes, "Lesbian battering is that pattern of violent and coercive behaviors whereby a lesbian seeks to control the thoughts, beliefs or conduct of her intimate partner or to punish the intimate for resisting the perpetrator's control over her. Individual acts of physical violence, by this definition, do not constitute lesbian battering. Physical violence is not battering unless it results in the enhanced control of the batterer over the recipient" (161).

³Ontario, Canada was one of 10 provinces in Canada. Toronto, Ontario is one of the three large cities in the country that had well-established LGBT communities and services.

⁴These findings were part of a larger exploration of the complex gender dynamics which shape IPV and childbearing for lesbians. This is beyond the scope of this paper.

⁵I had completed an extensive literature review as part of a masters' thesis on lesbian childbearing that included scholarly and popular works, including websites ranging from early works such as Hanscombe & Forster in 1981 to a wealth of resources dating in Canada from the early 90s increasing in number and variety through to 2003 and these were re-reviewed with IPV for this inquiry.

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