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Commentary: Jennifer Barber's Landmark Research on the Connection Between Intimate Partner Violence and the Onset of Pregnancy

William J. Doherty[†]

Introduction

Among its other contributions, Jennifer Barber's study, *The Relationship Context of Young Pregnancies*,¹ is landmark research on the connection between intimate partner violence (IPV) and the onset of pregnancy. The study has four unique features. First, it focuses on the cohort of young women most at risk for both IPV and pregnancy.² Second, it uses a large population-based sample as opposed to clinical or social services samples often used in the study of IPV.³ Third, it combines structured and semi-structured approaches to data gathering, allowing for both quantitative and qualitative analyses.⁴ Fourth, and most striking, are the weekly follow-up surveys over a two-and-a-half year period, yielding the kind of time-sensitive findings almost unheard of in population-based social science research.⁵

In Part I, I will highlight how some of the findings are consistent with the relational/systemic perspective used by many family therapists. In Part II, I then turn to discussing the complexities of IPV not captured in the study, followed by thoughts, in Part III, about how adult attachment theory can shed light on Barber's findings.

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1. Jennifer S. Barber et al., *The Relationship Context of Young Pregnancies*, 35 *LAW & INEQ.* 175 (2017).

2. *Id.* at 182.

3. *Id.* at 177–78, 182.

4. *Id.* at 181.

5. *Id.*

I. A Relational/Systemic Perspective

A key—and in some ways counter-intuitive—conclusion of the Barber study is that the link between ongoing IPV and pregnancy may be produced by the time-varying aspects of relationships rather than stable individual- and relationship-level characteristics.⁶ Family systems theorists and clinicians think of this distinction as between traits or characteristics of the individuals in a relationship and the emergent interaction patterns they create together over time.⁷ Stated metaphorically, a systems perspective emphasizes the “dance” of couple and family relationships, i.e. how people interact and change together over time and end up in places that could not be predicted in advance from knowing the two individuals.⁸

One of the reasons the relational/systemic features of relationships are hard to capture in research (as opposed to ongoing therapy) is that nearly all studies sample behavior at one time or, at most, several points in time. Time-invariant factors such as age differences or a prior history of violence are easier to capture and then try to connect with outcomes like IPV and pregnancy. A recent break-up conflict that involved IPV, however, followed by a reconciliation that involved sexual intercourse, can only be captured by a study that checks in with people frequently.

From an applied perspective, focusing on emergent interaction patterns can lead to practical public health and individual educational interventions. People can't change the historical features of their relationships, such as prior experiences of rape, but they can learn to avoid current and future risky situations, such as not fighting when either partner is drunk or high.⁹ Similarly, women and men can be alerted to the temptation to not use contraception when having “make-up sex,” and thus avoid pregnancy in an unstable relationship.

In sum, emergent interaction patterns open a window to a more complex understanding of the connection between IPV and

6. *Id.* at 196.

7. Gail G. Whitchurch & Larry L. Constantine, *Systems Theory, in SOURCEBOOK ON FAMILY THEORIES AND METHODS: A CONTEXTUAL APPROACH* 325 (Pauline G. Boss et al., eds., 1993); accord WILLIAM J. DOHERTY & SUSAN H. MCDANIEL, *FAMILY THERAPY* 29 (2010).

8. DOHERTY & MCDANIEL, *supra* note 7, at 29.

9. At “The Family-Inequality Debate: A Workshop on Coercion, Class, and Paternal Participation” held on November 17, 2016, Barber mentioned that substance use was commonly reported in the interviews as a prelude to IPV.

pregnancy, and invite ideas for public health education to ameliorate risks.

II. A Common Form of IPV Not Identified in the Study

Recent scholarship on IPV has moved beyond a monolithic view to one that sees different kinds of violence in couple relationships—the kind of distinctions that Barber admits she was not able to address in this study. As originally articulated by Michael Johnson and supported by a variety of studies, IPV can be categorized around the level of the control involved in the relationship.¹⁰ In Johnson's terms, intimate terrorism is violence in a relationship characterized by coercive control; that is, when one partner uses violence and other control tactics to take overall control of the other partner (for example, which friends they can see, what they wear).¹¹ Intimate terrorism is the kind of violence that feminist theories have highlighted and the public often thinks of when referring to IPV. It is most commonly perpetrated by men against women.

The second, and by far most common type of IPV, is situational couple violence, which involves arguments that escalate to verbal aggression and then to physical violence. Situational couple violence can be infrequent or chronic. Distinguishing situational couple violence from intimate terrorism makes sense of the well-documented research consensus that women are as violent as men in couple relationships.¹²

A problem for research on IPV, however, is that intimate partner violence is difficult to detect in large surveys, which mainly measure situational couple violence.¹³ Johnson et al., however, were able to document intimate terrorism in a national survey by asking about violence in ex-spouse relationships. Johnson found that 22% of ex-wives and 5% of ex-husbands reported a pattern of intimate terrorism in the prior marriage.¹⁴

This more complex understanding of IPV types is important for drawing conclusions from Barber's research. It is tempting for

10. MICHAEL P. JOHNSON, A TYPOLOGY OF DOMESTIC VIOLENCE: INTIMATE TERRORISM, VIOLENT RESISTANCE, AND SITUATIONAL COUPLE VIOLENCE 7–10, 26–30 (2008).

11. *Id.* at 7–10.

12. John Archer, *Sex Differences in Aggression Between Heterosexual Partners: A Meta-Analytic Review*, 126 PSYCHOL. BULL. 651, 664 (2000).

13. Michael P. Johnson et al., *Intimate Terrorism and Situational Couple Violence in General Surveys: Ex-Spouses Required*, 20 VIOLENCE AGAINST WOMEN 186, 196 (2014).

14. *Id.*

readers of her Article to assume that violent episodes mainly intimate terrorism based on coercive control, whereas it is likely that the majority of these episodes involve situational couple violence that both partners contributed to in some way—even if the emotional and physical damage was greater for the women. Furthermore, in terms of intervention, it can be appropriate to think of “rescue” interventions—such as law enforcement and shelters—for women who become pregnant in response to a male partner who intimidates, controls, and forces her to have sex when he is displeased with her. These kinds of interventions can backfire, however, for women who are involved in situational couple violence that lacks the element of coercive control; the women may not be afraid of their partner and may justifiably see themselves as sharing some of the responsibility for escalating conflicts that lead to mutual violence followed by make-up, unprotected sex. These women, and their partners, may respond better to programs that relieve everyday stress—especially economic stress—and that encourage them to learn constructive conflict skills and avoid arguing when drunk or high.

III. Attachment as a Factor in Couple Relationships

When considering romantic relationships involving violence and coerced pregnancies, it can be easy to take a rational choice approach¹⁵ that leaves us in the dark about why women stay—unless they fear for their safety, which, although alarming, is by no means universal or even the most common explanation. Adult attachment can help shed some light here. As articulated by Mikulincer & Shaver¹⁶ and Rholes & Simpson,¹⁷ adult attachment theory offers a framework for understanding human pair bonding based on original work by Bowlby on infant/caregiver attachment.¹⁸ When a couple has become romantically involved with an expectation of exclusiveness (whether true in practice or not), adult attachment theory suggests that enduring emotional connections often create anxiety and ambivalence when deciding whether to leave even a very distressed relationship. Such reactions are heightened in individuals with anxious attachment

15. By “rational choice approach,” I mean asking whether the benefits of the relationship are worth the costs.

16. Mario Mikulincer & Philip R. Shaver, *Adult Attachment Orientations and Relationship Processes*, 4 J. FAM. THEORY REV. 259, 259–62 (2012).

17. ADULT ATTACHMENT: THEORY, RESEARCH AND CLINICAL APPLICATIONS 3–9 (W. Steven Rholes & Jeffrey A. Simpson eds., 2006).

18. JOHN BOWLBY, ATTACHMENT AND LOSS 177–98 (1969).

styles involving fears of rejection and abandonment by a partner, based in part on childhood experiences of insecure attachment with parent figures.

Applied to the population Barber is studying, adult attachment theory points to the “non-rational” side of reasons for staying and putting up with violence. Some women are deeply in love with their partner, feel sorry for him when he lashes out under stress, are emotionally dependent on his attention and affection, and may worry that if he leaves no one else will show interest in them romantically. A childhood history of anxious attachment may complicate decision-making about having sex and a baby to keep the man close. My intent here is not to pathologize women in this situation. Rather, I use adult attachment theory to suggest the emotional complexities that are not always apparent from outside rational choice perspectives that dominate research and public policy perspectives.

In ending, I want to restate my admiration of Professor Barber's important research, which counts, as few studies do, as a landmark in the field.