Striving to be ‘Good’ Mothers: Abused Women’s Experiences of Mothering

So far, limited work has focused on women’s experiences of mothering in the context of domestic violence. This article presents the findings of a study that investigated women’s experiences of mothering in the context of domestic violence and, while it accounts for the difficulties and challenges these women face, it emphasises their desire to be ‘good’ mothers and the strategies they develop in order to achieve ‘good’ mothering. The findings demonstrate that abused women typically strive to be ‘good’ mothers, which requires them to put their children first and to protect and care for them. The recognition of these strategies provides ground to question current professional practices and to develop interventions that will best support women and children living with domestic violence. Copyright © 2010 John Wiley & Sons, Ltd.

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There has been, over the last two decades, a growing interest in the situation of children living with domestic violence, and research evidence has raised concerns regarding the consequences that violence has on children (for reviews, see Edleson, 1999; Hester et al., 2007; Kitzmann et al., 2003; Wolfe et al., 2003). In the same vein, concerns have been raised regarding women’s parenting in these circumstances, as the quality of maternal care has been identified as an important factor influencing how children are being affected by the violence (Cox et al., 2003; Hazen et al., 2006; Levendosky and Graham-Bermann, 2001; Levendosky et al., 2003). However, there is no consistent evidence on the impacts of domestic violence on women’s parenting. On the one hand, research findings suggest that domestic violence...
has a negative impact on their parenting, and that abused women are more likely to be abusive towards their children (Holden and Ritchie, 1991; Huth-Bocks et al., 2004; Jaffe et al., 1990; Levendosky and Graham-Bermann, 1998, 2000; Ross, 1996). On the other hand, findings from a number of quantitative studies challenge this view and some suggest that these women can compensate for the adverse environment (Casanueva et al., 2008; Létourneau et al., 2007; Leverndosky et al., 2003). Research findings also suggest that abused women are no more likely than other women to abuse their children (Holden et al., 1998).

Concerns regarding the situation of children living with domestic violence and their mothers’ parenting have also been present in practice, in both the domestic violence and the child welfare arenas. Indeed, refuges have long been providing resources for women as well as children, but recently there has been a greater emphasis placed on mother-child relationships and women’s mothering (Humphreys et al., 2006; Mullender et al., 1998). Overall, these developments appear to have been seen as positive and have been rated positively by both workers and service users (Humphreys et al., 2006), despite concerns raised by some authors regarding the ways in which mothering has been viewed in some refuges. For instance, Krane and Davies (2002, 2007) have argued that the theoretical perspective that traditionally underpins practices tends to either make mothering ‘invisible’ or make it visible in ways that do not take into account the complexities and challenges of everyday mothering.

While child welfare services have often been criticised for not taking domestic violence seriously (Humphreys, 1999; Mullender, 1996), there is now a growing recognition of domestic violence as a child welfare issue, which has led to changes in policies and practices (Humphreys and Stanley, 2006; Rivett and Kelly, 2006). In this context, it appears that women are generally expected to protect their children from their partners’ violence, which often requires them to put an end to their intimate relationships (Bourassa et al., 2008; Johnson and Sullivan, 2008; Magen, 1999). As a result, women who are unwilling or unable to leave their partners are often seen as ‘failing to protect’ or as ‘neglecting’ their children (Humphreys, 1999; Kantor and Little, 2003; Magen, 1999). Several commentators have argued that such practices are problematic, because they do not account for the complexity of women’s experiences – including the difficulties and threats they face when they go through domestic violence and when they attempt to leave their partners – and are often perceived as unhelpful and punitive (Johnson and Sullivan, 2008). In addition, these practices tend to shift the focus away from men’s violence onto women’s ‘failures’ as mothers (Magen, 1999; Strega et al., 2008).
Although women and their mothering have been central in both research and practices, so far limited work has focused on women’s own experiences of mothering in the context of domestic violence (Lapierre, 2008; Radford and Hester, 2001). Two qualitative studies on children’s experiences of domestic violence have considered women’s experiences, and have provided some insight into the difficulties they face as mothers (McGee, 2000; Mullender et al., 2002). More recently, Radford and Hester (2006) brought together findings from six different studies in the field of domestic violence, and highlighted the complex process by which abused women deal with violence on a daily basis and take steps to protect and shield their children; these observations challenge the view that women who live with domestic violence are ‘inadequate’ parents.

This article presents the findings of a study that investigated women’s experiences of mothering in the context of domestic violence. While it accounts for the difficulties and challenges these women face, the findings that are reported here emphasise their desire to be ‘good’ mothers and the strategies they develop in order to achieve ‘good’ mothering. As Radford and Hester (2001) point out, ‘a more constructive future research agenda would build on women’s efforts and experiences to consider ways of working with them in meeting the needs of children’ (p. 145). The article first reviews the modalities of the study, and then presents the findings as well as the implications for practices with women and children who have experienced domestic violence.

The Study

This research project was conducted between 2004 and 2007 in the Midlands, England, and was then realised in context of the author’s doctoral studies. The study was submitted for ethical scrutiny to a cross-departmental review process, and the women’s safety and well-being were paramount throughout the research project.

The study drew upon participative and qualitative research methodologies, combining group and individual interviews. The use of a participative methodology means that the research is conceptualised as a collaborative or collective enterprise, and the ‘research subjects’ as ‘research participants’ (Martin, 1994; Renzetti, 1997). Renzetti (1997) argues that an important benefit of a participative methodology is that ‘the most significant issues – from the perspective not only of the researcher but also of the researched – get identified and studied’ (p. 142). The main elements of a participative methodology were used in the early stages of the research, at which point, group interviews were primarily seen as a means of
involving women in the early stages of the research process and initiating a critical discussion with them. The outcomes of these discussions were used as a basis to develop the research questions, and to inform decisions regarding the practical and methodological considerations of the research. For instance, the outcomes made it clear that the research needed to account for women’s experiences of mothering through domestic violence as well as in the aftermath of domestic violence. Steps were taken to involve women in the analysis, but there were constraints of time and resources, and practical and ethical considerations made it impossible for the researcher to contact the women who had initially been involved in the study (e.g. all but one of the organisations that were involved in recruitment no longer existed).

A qualitative methodology provides a space for women’s ‘voices’ to be listened to and articulated (Maynard, 1994; Reinharz, 1992; Skinner et al., 2005), and has the potential ‘to enable silenced women to tell their own stories in their own voices’ (Davis and Srinivasan, 1994, p. 248) and to take into account – and account for – diversity amongst women. The individual interviews aimed at gathering data on the women’s personal experiences of mothering in the context of domestic violence. The participants provided informed consent prior to the interviews and they were advised that it was possible for them to end the interview at any time. A short questionnaire was also used to collect socio-demographic data on the participants, and fieldwork notes were recorded in a research diary.

In total, 26 women took part in the study, through five group interviews and 20 individual interviews (several women took part in the group interview and subsequently agreed to take part in individual interviews). The names used in this article are pseudonyms, in order to ensure the participants’ anonymity. The participants were recruited through a small group of women activists (who were primarily interested in issues around child contact and domestic violence) and through support groups for women who had experienced domestic violence (these groups were run in one community centre and two family centres), as well as through a refuge for Asian women. The following two selection criteria were identified: the women needed to have experienced domestic violence (self-defined), which could include physical, sexual, psychological, emotional or financial abuse; and the women needed to have at least one child under 18-years old at the time they were experiencing violence.

All the participants had experienced psychological and emotional abuse, the majority mentioned experiences of physical abuse, and a small number of women also talked about sexual and financial abuse. Most participants had experienced repeated and long-term violence including post-separation violence, but were
no longer in an intimate relationship with their violent partners at the time of the interviews. A number of women had mobility impairments caused by the violence. At the time of the interviews, the women were aged between 21- and 67-years old and had between one and five children, who were aged between one- and 44-years old – only one participant did not have children, but her sense of belonging to the group and her interest in the research meant that it would have been inappropriate to exclude her from the group interview. In terms of the women’s ethnicity, 16 women identified themselves as White-British, two as Irish, one as Scottish, one as Black-Caribbean, one as Black-Other, one as Indian, one as Pakistani and one as White-European. Two women were in a same-sex relationship at the time of the interviews.

The interviews were conducted in English, but an interpreter was required in two cases. All the group and individual interviews were tape-recorded and transcribed (verbatim) and content analysis was conducted using the N*Vivo software (OSR International). The analysis aimed at making women’s experiences visible and developing a feminist standpoint on mothering in the context of domestic violence (Kelly et al., 1994; Maynard, 1994), and the main task was to identify recurrent and significant themes that could be seen as ‘patterns’ in the data. The following general themes were first inducted from the data: motherhood/mothering, domestic violence, mothering through domestic violence, mothering during and after separation, and support/intervention. All the interviews were coded according to these categories, and the data within each of these categories were then examined and new codes were inducted; this process was repeated several times until each code was sufficiently narrow and specific to encompass only one unit of sense.

**Mothering under Difficult Circumstances**

The research findings reveal that domestic violence creates a context that complicates women’s mothering, which is partly due to the fact that men tend to target their partners’ mothering and mother-child relationships as part of their violent strategies. For instance, several women mentioned that their partners had threatened to use violence, and had used violence, towards the children in order to affect the women and undermine their mothering. In the same vein, men’s use of violence towards the women in front of their children was sending the message that the women were not able to protect themselves, let alone their children. These men had also used more subtle manipulation strategies to undermine their partners’ authority, such as routinely criticising them and accusing them of being ‘bad’ mothers. In this context, the
participants reported an increased sense of responsibility in regard to their children, while they felt that they had limited control over their mothering, as they had to act within the narrow boundaries established by their partners:

‘Being a mother is literally that you’re . . . If I said ‘in control’, that’s not the right word, but I can’t think of the right word. But you’re the one who has to manage the children, the house, everything basically. Or as much as the partner you’re with will allow you to . . .’ (Denise)

This sense of loss of control can be exacerbated by the fact that domestic violence often affects women’s physical and mental health, making it even more difficult for them to perform the hard and time-consuming work involved in mothering. In several cases, the men’s control over financial resources had meant that the women had been left with scarce resources to care for their children.

Moreover, the participants pointed out that their children had had greater needs due to their exposure to domestic violence. However, several participants reported that they could not rely on their partners’ support and that isolation had been an important feature of their experiences, leaving them on their own to protect and care for their children. Indeed, most women mentioned that they had received little support in regard to their mothering: ‘If I didn’t do it, who else would do it? Nobody else. Not their dad. So I had to do it.’ (Lorraine)

As mentioned above, most participants were no longer in an intimate relationship with their violent partners at the time of the interviews, which did not mean that they were no longer facing difficulties as a result of the past or continuing violence. In fact, it appears that there were some additional difficulties in this context. For instance, several women had to leave their houses, which meant that they had found themselves having to settle down with their children in a new and sometimes unknown environment:

‘They re-house you and it’s somewhere totally new: you don’t know anybody, you don’t know where the shops are, you don’t know where the bus stop is, you don’t know where the school is, you know nothing.’ (Angela)

In addition, several women mentioned that it had been very difficult to know how their ex-partners would behave towards their children, particularly during father-child contact:

‘When we [ex-partner and I] were living together, at least I could monitor that, you know, and stop it. But with him living separately and my children being . . . I don’t know what he’s saying; and that’s what I’m worried about.’ (Alison)
These findings highlight the difficulties that women face in regard to their mothering in the context of domestic violence, and demonstrate that separation does not constitute a straightforward solution to these difficulties. The findings presented in the next section reveal that these women typically strive to be ‘good’ mothers, and therefore develop multiple strategies in order to achieve ‘good’ mothering.

**Striving to be ‘Good’ Mothers**

The findings reveal that the notion of ‘good’ mothering is pervasive, as all the participants expressed a strong desire to be ‘good’ mothers – and to be seen as such. Despite the difficult circumstances that domestic violence creates, the notion of ‘good’ mothering seems to refer more to ‘perfect’ than to ‘good enough’ or ‘acceptable’ mothering: ‘To be this perfect mother who gets up, you know, functions and cleans the house, and cooks the dinner, makes everyone happy.’ (Lucy)

Despite the diversity amongst the participants, there was a high level of consistency in the women’s descriptions of what constitutes ‘good’ mothering, which was often seen as natural and universal. Indeed, the assumption that children are women’s responsibility seems to be rooted in women’s reproduction: ‘She [the mother] is the one who gives birth, she is the one who has them [children] and she is the one who has to deal with the kids.’ (Sunita) The participants therefore believed that, as mothers, they were responsible for their children, so that they were expected to put their children first and to protect and care for their children.

**Putting their Children First**

One of the most important themes emerging from the data is the idea that a ‘good’ mother always puts her children first, regardless of the circumstances. This implies that women ought to prioritise their children’s needs over their own need: ‘You always have to put your kids first.’ (Sunita) ‘A mother doesn’t care about herself; her thoughts are for her children.’ (Kate)

There were several instances in the women’s accounts where they had ignored their own needs in order to protect or care for their children. For example, one woman reported that she had managed to get her children to school, despite several injuries:

‘You don’t think about you, you don’t think about what’s hurting and what’s not hurting . . . You don’t care, you’ve just got to do what you have to do . . . Stitches at the bottom of my feet, I was told don’t drive, don’t do nothing, get off your feet. I had to drive my kids to school, so I still had to walk, even though he [partner] was there.’ (Lorraine)
In these circumstances, the women often had to juggle their children’s needs with their partners’ demands, and they felt that they had not always been able to prioritise their children. In this regard, one woman explained that the children’s needs have to be considered within their specific context, and that it is not possible to prioritise these needs without also considering their partners’ demands:

‘A mother always, in my opinion, always takes the back wall; you always put, you know, your children first or your partner first, it is always your needs that come at the back. . . You’ve got to, putting their [the children’s] needs and your partner paramount. . . . You’re more aware of what your partner’s needs are and how your children can cope, can live with those needs.’  
(Denise)

The following sections look at the strategies the participants had developed in order to protect and care for their children while they were going through domestic violence, as well as during the separation process.

**Attempts to Protect their Children**

All the participants stated that their upmost priority had been to protect their children from their partners’ violence: ‘You, sort of, try to do everything that is possible to put them out of harm’s way.’  
(Angela) The notion of protection was twofold. First, the women had been concerned with ensuring that their partners had not been violent towards their children, which excluded the broader idea of exposure to domestic violence. Second, they had been concerned with ensuring that their children had not witnessed the abuse of their mothers, and had not been aware of the problems present in their homes. There was therefore recognition that being ‘directly’ abused and witnessing domestic violence could both have negative consequences for children, and ‘direct’ abuse was perceived as being particularly damaging.

The women had developed a range of strategies to protect their children, and they all reported having used multiple and successive strategies. First, the women had been attentive to what had been happening in their homes and had tried to monitor their partners’ moods and behaviours, in order to predict forthcoming incidents of violence. In this regard, some women reported that, over time, they were able to identify the signs indicating an eventual incident of violence: ‘I sort of knew. Over time, I got to know the signs and when things were going.’  
(Angela)

The women had also tried to prevent such incidents, often by behaving in ways they had thought would not upset their partners. This could include being in the house when their partners wanted...
them to be in the house, cleaning and cooking what their partners wanted at the time they requested it, as well as being quiet and avoiding confronting them:

‘She [Razia] used to just to cook and clean and she used to try to keep him [ex-partner] happy. He never used to allow her to go out, but she wouldn’t challenge that or say ‘Why am I not allowed to go out?’ She just accepted it thinking that will make him happy.’ (Razia’s interpreter)

Behaving in ways that they had thought would not upset their partners could also include asking the children to be quiet and not to disturb their fathers. In this regard, the women had to be organised and resourceful in order to meet their children’s needs while also responding to their partners’ demands:

‘Nine times out of ten you could guarantee he would have a drink at a certain time of the day, he would go pass out on the sofa and he’d wake up usually around four o’clock and the first words out of his mouth was: ‘dinner, where the so and so is my dinner?’ So it was like get the kids in, get them upstairs quiet, you know, ‘Don’t make a sound. Don’t wake Daddy.’ Get in the kitchen, get the dinner on, get it done, get it on the table. So, as soon as he woke up, ‘Y eah, it’s there. It’s done’.’ (Angela)

However, men’s violence is often unpredictable and tends to happen regardless of women’s and children’s behaviours. During the incidents of violence, the women had tried to keep the children away, either in another room or outside the house: ‘I just remember just trying to get the kids out of the way whenever he comes in. I would try and make sure that they were in bed.’ (Shelly)

In addition to keeping the children away, the women had tried to avoid them overhearing the violence from another room or seeing the bruises or injuries caused by the violence: ‘You try your best so the kids can’t hear . . . I was used to put the hi-fi on, the music up loud . . . Make sure that the doors are closed.’ (Sunita)

Despite these efforts, in certain circumstances the women had not been able to prevent their children from witnessing the violence, particularly when their partners had intentionally used violence in front of the children in order to undermine their mothering. In these cases, the women’s main concern had been to ensure that their partners had not been violent towards the children, and several women had put themselves at greater risk of being harmed in order to protect their children:

‘I remember their dad lifted his hands to them [the children] and, even though I know he would have beat me up, I’d still jump on him, trying to protect them . . . In other words, ‘You can hit me, but you can’t touch my kids . . .’ It’s really hard to protect them, because you are so scared. Not scared that
you don’t protect your children, because it triggers something off in here, inside, so you always protect your children.’ (Joanne)

In addition, several women reported that they had challenged their partners’ violent behaviours, and some had asked them to leave their homes. In more extreme cases, a small number of participants talked about their own use of violence against their partners in order to protect their children:

‘I just told him [partner] to get out of the house and he went to go up and get my [six-month-old] son. He was taking my son with him. So I just got a knife and put it on his throat . . . He was not taking my son anywhere in the state he was in.’ (Sarah)

As mentioned above, most participants were no longer in a relationship with their abusive partners at the time of the interviews, and several women had left their partners in order to protect their children. Indeed, the final decision to end the relationship had often coincided with an increased risk to their children’s safety:

‘He [partner] came in the bedroom and poked me in the face, and my 7-year-old daughter jumped in front of me; and that was when I knew it was time to leave, for good.’ (Alison)

However, the end of the relationship does not ensure the end of the violence, and the participants had to develop strategies in order to protect their children in the context of post-separation violence. In this regard, the women had been particularly concerned with ensuring the safety of their children during father-child contact:

‘When he [ex-partner] does have them, it’s a proviso of mine that he has somebody else there at all times; that he is never alone with the children.’ (Angela)

Overall, the findings reveal that the participants had prioritised the protection of their children while they had been through domestic violence as well as during the separation process, but this does not mean that they had minimised the significance of other aspects of mothering, such as caring for their children.

Caring for their Children

The notion of care was seen as an expansive concept, as children were seen as having a wide range of needs and as requiring their mothers’ constant attention and attendance. Again, the
participants had developed a range of strategies in order to care for their children, and these strategies had varied greatly according to the woman and to the situation.

All the participants reported that they had generally managed to respond to their children’s ‘basic’ or physiological needs (i.e. ensuring that they were sheltered, fed, cleaned and clothed). For instance, one woman explained that she had developed the ability to decode the signs in her children’s behaviours that indicated their immediate needs:

‘You have to just sort of gauge the twitching and the looks and the body language to know what the child wants. I found that, if the children were constantly, like, licking their lips, they need to drink. I could tell if my kids were hungry, needed a drink, tired, wanted the toilet, needed nappies changing or whatever, without them ever opening their mouth.’ (Angela)

Another woman recalled that she used to bring food home from work and hide it from her partner, so that the children had something to eat:

‘I used to take up some of the stuff that was meant to go in the bin, like sandwiches and biscuits, and bring them home and give them the kids. And my kids had to go, it was like a attic house, and they had to go up to the top and eat it so he [ex-partner] would never know.’ (Alice)

In regard to their children’s physiological needs, a number of participants stressed the fact that their children had always been clean and wearing appropriate clothes, which was seen as a tangible indicator of the quality of their mothering. In the same vein, several women stated that they had managed to keep their homes clean and tidy.

In contrast, several participants talked about their perceived ‘failure’ to meet their children’s more emotional needs in the context of domestic violence. Nonetheless, the data reveal that they had developed a range of strategies to respond to those needs, which included spending time with the children, listening to them, reassuring them and doing activities. For instance, two women explained that they would take every opportunity to do fun things with the children:

‘When he [partner] is out of the way you think, ‘Right, we’ve got five minutes, let’s go and do something happy, let’s go and get soaking wet in the garden playing with the water . . . or let’s play hide and seek in the house.’ You know, stupid things, but for five minutes that child is happy.’ (Kate)

‘We used to go out like long walks in the dark with the kids, just to get out of the house. Walk around the block at ten o’clock at night. They loved it then, because it was out in the dark, it was being big people.’ (Lucy)
Furthermore, the women had to deal with the consequences of the violence, and a number of women also mentioned that they had tried to compensate for the situation, both in the context of violence as well as during and after the separation process:

‘All the time I give them compliments to build up their self-esteem. Like I tell them when they’re really good at something, they bring a certificate in from school . . . I suppose I’m a bit over the top about things.’ (Sunita)

In addition, some participants had been concerned with the model they had provided to their children, and had explained to their children that violent behaviours are not acceptable in intimate relationships. This was seen as having different implications for girls and for boys, and the women were concerned with their son’s actual and potential violent behaviours and with their daughters’ potential victimisation:

‘I’ve got a girl child and I’ve got boys, and I don’t want my daughter to think that if she is in a relationship and her boyfriend hits her it’s okay, put up with it. It’s not . . . My boys have had opportunity to hit their girlfriends, but my boys would just walk away.’ (Lorraine)

Overall, these findings reveal that the participants had developed a range of strategies in order to respond to their children’s ‘basic’ needs, but also to their more emotional needs. These strategies had varied greatly according to the woman and to the context in which they had to perform their mothering.

Discussion

The findings that are presented in this article demonstrate that, despite the difficult circumstances that domestic violence creates, women typically strive to be ‘good’ mothers, and develop a range of strategies in order to achieve ‘good’ mothering both in the context of violence as well as during and after the separation process. The article does not constitute an exhaustive list of the varied strategies women may develop, but the findings demonstrate that women are resourceful and creative in protecting their children and responding to their physical and emotional needs; actions that may appear simple and trivial may in fact constitute important strategies in these circumstances. Many of these strategies appear to have been successful, some of them in the short term and others in the long term.

The literature suggests that professionals do not always recognise these strategies, particularly in the child welfare arena (Johnson and Sullivan, 2008; Magen, 1999), and the findings reveal that the women themselves tend to underestimate the...
efforts they display in order to protect and care for their children. This is likely to lead to an incomplete and inaccurate assessment of the situation, which positions abused women as ‘neglectful’ or ‘bad’ mothers (Magen, 1999; Strega et al., 2008). Given the women’s desire to achieve ‘good’ or ‘perfect’ mothering, it is devastating for them to be seen as ‘failing’ as mothers.

Professionals working with women and children living with domestic violence should start from a positive stance that acknowledges that these women typically strive to be ‘good’ mothers, but that they do so under very difficult circumstances. Moreover, in order to provide a more accurate picture of the situation of these families, professionals need to recognise the multiple strategies that women develop, and to assess their short-term and long-term effects. These strategies and their effects always have to be understood within their specific context. An example of this relates to the need for abused women to leave their partners. Indeed, the literature reveals that professionals generally expect and require women to end their relationships (Bourassa et al., 2008; Johnson and Sullivan, 2008; Magen, 1999), and women who do not leave are routinely seen as ‘failing to protect’ or as ‘neglecting’ their children (Humphreys, 1999; Kantor and Little, 2003; Magen, 1999). This does not account for the difficulties that arise during and after the separation process, as well as for the multiple strategies that women may nonetheless develop in order to protect and care for them. Women’s inability or unwillingness to leave their partners does not mean that they do not put their children first and that they do not take steps to protect them.

Practice that recognises and acknowledges women’s desires to be ‘good’ mothers and the strategies they develop in attempting to achieve this is less likely to be experienced as blaming, as it emphasises women’s efforts and strengths. Moreover, carefully considering the strategies that have failed and those that have worked, and building on the ones that have been successful can also help to design more efficient intervention plans. This does not mean that the strategies are always successful and that there is no concern regarding the children’s safety and well-being, and the recourse to more drastic interventions – such as the removal of the children – is sometimes unavoidable. Even in this context, professionals can still acknowledge the fact that these women often do the best they can in order to protect and care for their children under very difficult circumstances.

Finally, professionals need to question what is expected from women who have experienced domestic violence and what these women expect from themselves, and whether these expectations are fair and realistic. Indeed, it is crucial to keep in mind that this particular context exacerbates the burden of responsibility that is placed on women and complicates the work involved in
mothering, while it is men who should be held responsible for the violence and its consequences.

**Conclusion**

So far, limited work has focused on women’s own experiences of mothering in the context of domestic violence. This article has presented the findings of a study that investigated women’s experiences of mothering in the context of domestic violence and, while it has accounted for the difficulties and challenges these women face, it has emphasised their desire to be ‘good’ mothers and the strategies they develop in order to achieve ‘good’ mothering. The recognition of these strategies provides grounds to question current professional practices and to develop interventions that will best support women and children living with domestic violence.

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