

## Intimate partner violence negatively affects parenting



See [Articles](#) page e1393

Violence against women adversely affects the exposed women's physical and mental health, as well as affecting children who witness abuse in the home.<sup>1</sup> Mothers exposed to intimate partner violence (IPV) have been shown to have poorer connectedness to and communication with their children than mothers not exposed to IPV, and to use more harsh and neglectful parenting.<sup>2</sup> Men's perpetration of IPV is also associated with harsh and poorer parenting, but has been less often studied.<sup>3</sup> Many of the other factors associated with poorer parenting—including poverty, substance abuse, and maternal or paternal depression—are also risk factors for IPV,<sup>4</sup> which underscores the value of longitudinal research and elucidation of the temporal sequence of exposures in understanding this area. Most research is currently based on cross-sectional research from high-income countries, which leaves unanswered questions around the interconnections between, and the relative importance of, different risk factors for and drivers of poorer parenting. Understanding the relationship between IPV and parenting is important for interventions to strengthen parenting, and thus contributes towards ending the intergenerational cycling of violence.

Carolina Coll and colleagues<sup>5</sup> present the findings of a large birth cohort from Pelotas, Brazil, in which mother-child dyads were studied at ages 4 years and 6–7 years to investigate the association between IPV experience and mothering practices. IPV exposure was self-reported by mothers when children were 4 years old, and parenting was assessed through direct observation of parent-child interactions (filmed at age 4 years) and self-reports in interviews conducted with mothers when children were 4 years and 6–7 years old. The researchers found prevalent IPV exposure: 21.9% of the mothers reported experiencing emotional IPV and 9.4% physical or sexual IPV in the past 12 months. IPV experiences were associated with less parental sensitivity and consistency, and more harsh parenting. These parenting practices negatively affected parent-child relationship quality. An interesting finding was that both emotional IPV and physical or sexual IPV exposures were associated with these adverse parenting findings. Maternal exposure to adverse childhood experiences was strongly correlated with coercive parenting.

These findings have some important implications: they provide further evidence of the role of maternal exposure to IPV in harsh and less positive parenting behaviours. The implication of this finding is that IPV prevention is crucial for strengthening parenting, with a host of subsequent benefits for children's mental, physical, cognitive, social, and educational development.<sup>4,6</sup> Children who are exposed to IPV and who receive less caregiver emotional support are likely to have poor mental health, show more anger, aggression, and delinquency in adolescence than children not exposed to IPV, and thus commence patterns of intergenerational cycling of violence.<sup>7,8</sup> Coll and colleagues' findings confirm the adverse effects of IPV and underscore the crucial role of IPV prevention in improving parenting. Interventions to ameliorate the effect of IPV exposure on women, including on their mental health, are also vital.

Coll and colleagues' research shows that emotional IPV exposure is just as impactful on parenting as physical or sexual IPV, which is important because emotional IPV has been given much less emphasis globally than physical or sexual IPV. For example, surveillance of emotional IPV is not included as a Sustainable Development Goal 5.2 indicator, despite it being known to be highly prevalent globally. Thus, this research provides further evidence of the need to strengthen measurement of emotional IPV, better understand its importance as a risk factor for health and social development challenges, and improve its reporting and prevention across different global settings.

Finally, the research does not explore the parenting role of the children's fathers or other male partners of the mothers, and yet the measured IPV exposure of the mothers was perpetrated by these partners. Understanding and unravelling the interconnections between male-perpetrated violence towards women and their parenting of children is crucial for strengthening home environments within which mothers live and children are raised. There are valuable examples of interventions that seek to strengthen fathering and prevent their use of IPV.<sup>9</sup> Most notably, the Bandedereho intervention in Rwanda has been shown to have a lasting effect 6 years later.<sup>10</sup> Interventions should seek to strengthen both mothering and

fathering, with a focus on concomitant prevention of IPV and building of gender equality.

We declare no competing interests.

Copyright © 2023 The Author(s). Published by Elsevier Ltd. This is an Open Access article under the CC BY 4.0 license.

\**Rachel Jewkes, Pinky Mahlangu*  
*rjewkes@mrc.ac.za*

Gender & Health Research Unit, South African Medical Research Council, Pretoria 0001, South Africa (RJ, PM)

- 1 García-Moreno C, Zimmerman C, Morris-Gehring A, et al. Addressing violence against women: a call to action. *Lancet* 2015; **385**: 1685–95.
- 2 Chiesa AE, Kallechey L, Harlaar N, et al. Intimate partner violence victimization and parenting: a systematic review. *Child Abuse Negl* 2018; **80**: 285–300.
- 3 Fulu E, Miedema S, Roselli T, Ko Ling Chan E, Jewkes R. Pathways between violence against children and intimate partner violence and child maltreatment: findings from the cross-sectional UN Multi-country Study on Men and Violence in Asia and the Pacific. *Lancet Glob Health* 2017; **5**: e512–22.
- 4 Gibbs A, Dunkle K, Ramsoomar L, et al. New learnings on drivers of men's physical and/or sexual violence against their female partners, and women's experiences of this, and the implications for prevention interventions. *Glob Health Action* 2020; **13**: 1739845.
- 5 Coll CVN, Barros AJD, Stein A, et al. Intimate partner violence victimisation and its association with maternal parenting (the 2015 Pelotas [Brazil] Birth Cohort): a prospective cohort study. *Lancet Glob Health* 2023; **11**: e1393–1401.
- 6 Frosch CA, Schoppe-Sullivan SJ, O'Banion DD. Parenting and child development: a relational health perspective. *Am J Lifestyle Med* 2019; **15**: 45–59.
- 7 Shamu S, Gevers A, Mahlangu BP, Shai PNJ, Chirwa ED, Jewkes RK. Prevalence and risk factors for intimate partner violence among Grade 8 learners in urban South Africa: baseline analysis from the Skhokho Supporting Success cluster randomised controlled trial. *Int Health* 2015; **8**: 18–26.
- 8 Jewkes R, Gevers A, Chirwa E, et al. RCT evaluation of Skhokho: a holistic school intervention to prevent gender-based violence among South African Grade 8s. *PLoS One* 2019; **14**: e0223562.
- 9 Kerr-Wilson A, Fraser E, Gibbs A, et al. What works to prevent violence against women and girls? Evidence review of interventions to prevent violence against women and girls 2000–19. Pretoria: South African Medical Research Council, 2020.
- 10 Doyle K, Levitov RG, Barker G, et al. Gender-transformative Bandedereho couples' intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: findings from a randomized controlled trial. *PLoS One* 2018; **13**: e0192756.