

A SOCIOLOGICAL OVERVIEW OF GENERAL STRAIN AND FEMINIST THEORY:
EXPLORING THE EFFECTS OF PREGNANCY ON INTIMATE PARTNER VIOLENCE IN
CANADA

Sarah Dias

250743580

Sociology 4439G

Dr. Joseph H. Michalski

April 12th, 2017

Abstract

The following study explores the effects of pregnancy on intimate partner violence (IPV) through the sociological lens of general strain and feminist theory. Strain includes the presentation of negative stimuli and the loss of positive stimuli. The transition into parenthood is a major life event conducive to strain that is experienced during the loss of positive stimuli. Couples transitioning to parenthood take on the responsibility of child rearing which may produce a loss or restraint of one's personal freedom. Living in patriarchal family dynamics generates a presentation of negative stimuli within the household that may promote male violence and aggression towards pregnant mothers. The following analysis uses the 2009 GSS and an meta-analysis and finds a statistically significant relationship between IPV and pregnancy. Pregnant women are at a higher risk of becoming victimized by IPV than non-pregnant women. Therefore, pregnancy is a relevant factor in explaining IPV. The study also discovers that patriarchal family dynamics generate more violence and aggression in the home relative to egalitarian family dynamics.

Keywords: patriarchy, feminism, intimate partner violence, general strain.

Introduction

According to Agnew (as cited by Gelles)¹, violent behaviour and aggression are the outcomes of an individuals' frustration and anger experienced within social relationships where the individual is treated poorly. Frustration and anger are exacerbated by strain – leading to the use of violent behaviour and aggression as a coping mechanism. Agnew develops three types of strain including: “the loss of positive stimuli, the presentation of negative stimuli, and new categories of goal blockage”². The following analysis will use only two facets of general strain theory – namely: the loss of positive stimuli and the presentation of negative stimuli. The former includes an individuals' experience of a major life transition such as the instance of conception leading to parenting and child rearing – the transition towards parenthood may contribute to individual experiences of strain. The presentation of negative stimuli is relevant regarding the patriarchal ideologies upheld within contemporary society as a consequence of supporting male dominance and the oppression of women in the past. The following analysis will focus on intimate partner violence (IPV) experienced during pregnancy through the lens of general strain and feminist theory. IPV often involves a set of controlling behaviours such as social isolation and limiting or restricting one's access to information and help. The World Health Organization (WHO), defines IPV as “acts of physical aggression, psychological abuse, forced intercourse, and other forms of sexual coercion”³.

Feminist theory is relevant in explaining some of the consequences of patriarchy.

Patriarchy refers to the “power of fathers”⁴ in which men occupy the largest proportion of power

¹ Richard Gelles. *Intimate Violence and Abuse in Families*. New York: Oxford University Press, (2017):137.

² Robert Agnew. "Building on the Foundation of General Strain Theory: Specifying the Types of Strain Most Likely to Lead to Crime and Delinquency." *Journal of Research in Crime and Delinquency* 38, no. 4 (2001): 319

³ World Health Organization. *Intimate Partner Violence*. (2002): 1.

⁴ Jayashree George and Sandra M. Stith. "An Updated Feminist View of Intimate Partner Violence." *Family Process* 53, no. 2 (2014): 179.

and control within various societal institutions such as the family. Karakurt and Cumbie state: “the patriarchal social system is perceived by many feminist perspectives as justifying and condoning physical violence against women”⁵. Victims of IPV during pregnancy experience varying degrees of “coercive control” by their intimate partners. Not only can feminist theory be applied on a broader macro sociological level – feminist perspectives can also be examined from a micro sociological perspective. For example, the differences amongst family dynamics; an unequal patriarchal dynamic is different from an egalitarian dynamic in which gender roles are relatively equal and responsibilities are shared. Furthermore, the different family structures may influence one’s experiences of strain. Therefore, strain is proposed to occur between intimate partners during pregnancy – leading to a higher risk of IPV.

The risk of becoming victimized by IPV is heightened during pregnancy due an increased level of relationship vulnerability regarding several changes such as: “physical, emotional, social and economic demands and needs”⁶. The transition to parenthood poses many challenges for intimate relationships to address involving both the transition of the mother, as well as the transition of the father. Researching the effects of pregnancy on IPV is important due to many risk factors regarding the health and safety of pregnant mothers and their infants such as: preterm labour, premature rupturing of membranes, low birth weight infants, miscarriage/abortion, vaginal bleeding, diabetes, infection, fetal injury, severe nausea and vomiting, and perinatal death ⁷⁸. There are also extensive psychological/ mental health consequences including:

⁵ Gunnur Karakurt and Tamra Cumbie. “The Relationship between Egalitarianism, Dominance, and Violence in Intimate Relationships”. *Journal of Family Violence* 27, no. 2 (2012): 116.

⁶ An-Sofie Parys et al., “Intimate Partner Violence and Pregnancy: A Systematic Review of Interventions,” *Plos One* 9, no. 1 (January 17, 2014): 2.

⁷Camille Burnett et al., “Negotiating Peril: The Lived Experience of Rural, Low-Income Women Exposed to IPV During Pregnancy and Postpartum,” *Violence Against Women* 22, no. 8 (2016):944-5.

⁸ An-Sofie Parys et al., “Intimate Partner Violence and Pregnancy: A Systematic Review of Interventions,” 2.

depression, post-traumatic stress disorder (PTSD), anxiety, attempted suicide, and maternal malnutrition⁹.

Literature Review

Previous literature supports an association between pregnancy and IPV. In the United States (U.S.) alone, there are approximately 1.5 million women who have reported experiencing physical or sexual abuse at the hands of their intimate partner; an underestimated approximation of 324,000 women were pregnant while the violence took place¹⁰. Gelles¹¹ found that pregnant women are significantly more likely to become victimized by their intimate partners relative to non-pregnant women however, the comparison was lost after accounting for statistical controls such as age. Hunt and Martin¹² cite various studies showing 60-70% of domestic violence (DV) victims are pregnant during the time of the abuse. However, the pattern of violence against women during pregnancy has not been proven with consistency. The range of pregnant women experiencing IPV ranges from 1% to 20%¹³.

Previous research also explores the instance of pregnancy as a trigger for IPV. In some cases, a woman merely announcing her pregnancy leads to an assault by her intimate partner¹⁴. Bacchus, Mezey and Bewley¹⁵ explore the importance of understanding men who batter their intimate partners during pregnancy, identifying five factors relevant in explaining both the

⁹ Ibid., 2.

¹⁰ Neha A. Deshpande and Annie Lewis-O'Connor, "Screening for Intimate Partner Violence During Pregnancy," *Reviews in Obstetrics & Gynecology* 6, no. 3 (2013): 141.

¹¹ Richard J. Gelles. Violence and pregnancy: Are pregnant women at greater risk of abuse? In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families: Risk factors and adaptations to violence in 8,145 families (1990)*: 279-286.

¹² Sheila C. Hunt and Ann M. Martin, *Pregnant women: violent men: what midwives need to know* (Oxford: Books for Midwives, 2001), 16.

¹³ Sherry Lipsky et al., "Police-reported Intimate Partner Violence During Pregnancy: Who is at Risk?" *Violence and Victims* 20, no. 1 (2005): 69.

¹⁴ Sheila C. Hunt and Ann M. Martin, *Pregnant women: violent men: what midwives need to know* (Oxford: Books for Midwives, 2001), 16.

¹⁵ Loraine Bacchus et al., "A qualitative exploration of the nature of domestic violence in pregnancy". *Violence Against Women* 12, no. 6 (2006): 588-604.

commencement of abuse during pregnancy and the heightened risk of pregnant women to become victimized by IPV. The factors include: power and control, possessiveness and jealousy, lack of emotional and physical availability, fear of abandonment, and ambivalence regarding the relationship.

Power and control represents a threat to male dominance due to the independence and control women gain over their bodies during pregnancy¹⁶. The man in the relationship attempts to reestablish control through violence and abuse. Furthermore, the man attempts to control the woman by limiting access to finances; a factor leading to the woman's dependency on the man which, in turn, may lead to abuse. Possessiveness and jealousy leads to IPV during pregnancy because the male views the unborn child as a "rival", in which the male will eventually have to compete with to gain the mothers' attention and affection¹⁷. Women within the study also reported intimate partners as lacking emotional availability due to a disinterest in providing paternal care. IPV also emerged in connection with the limited mobility and physical capability of the pregnant woman to fulfill duties pertaining to conventional gender roles such as completing household tasks and chores¹⁸. Fear of abandonment produces an increased level of IPV due to a decision on the part of the pregnant mother to seek an alternative lifestyle free from abuse. Often, violent attacks occur when the mother is caught leaving the man – who ultimately fears abandonment. Finally, relationship ambivalence involves the mother's choice to stay in the abusive relationship. In some cases, the violence partner has the ability to be calm, loving and respecting while simultaneously contributing to random outbursts of violence¹⁹.

¹⁶ Ibid., 595.

¹⁷ Ibid., 596.

¹⁸ Ibid., 598.

¹⁹ Ibid., 599-600.

Other characteristics of the male batterer were examined by Shupe, Stacey and Hazlewood²⁰ such as age, education, occupation, and income. Most men attending batterer intervention programs (BIPs) were of a young age. Stress peaks in young men because the man is attempting to establish occupational security. Education appears to be higher in BIPs because higher educated men are more likely to seek professional assistance with violent behaviour. Men who are unemployed experience more stress than those who are able to secure employment. Unemployment contributes to experiences of strain within the household due to a limited amount of financial resources²¹. Therefore, income contributes to the overall model of strain aggravating family tensions, leading to male violence against women within the home.

A variety of antecedent variables have been investigated within previous research regarding the relationship between pregnancy and IPV. O'Donnell et al²² discuss various risks of becoming victimized by IPV during pregnancy such as socioeconomic status and age. Women in adolescents and young adulthood appear to be more at risk than women of older age groups. Furthermore, economically disadvantaged women also appear to be at a higher risk of becoming victimized by IPV during pregnancy. O'Donnell et al²³ discovered high rates of IPV among unintended pregnancies and women experiencing fertility issues. Ravert and Martin²⁴ investigate the relationship between teen pregnancy and family stress however, no significant relationship was established between the two.

²⁰ Anson D. Shupe, William A. Stacey, and Lonnie R. Hazlewood. *Violent men, violent couples: The dynamics of domestic violence*. Lexington, Massachusetts/Toronto: Lexington Books. (1987): 29-33.

²¹ *Ibid.*, 31.

²² Lydia O'Donnell, Gail Agronick, Richard Duran, Athi Myint-U, and Ann Stueve. "Intimate partner violence among economically disadvantaged young adult women: Associations with adolescent risk-taking and pregnancy experiences". *Perspectives on Sexual and Reproductive Health* 41, no. 2 (2009): 84-91.

²³ *Ibid.*, 89.

²⁴ Ravert, A. A., and J. Martin. Family stress, perception of pregnancy, and age of first menarche among pregnant adolescents. *Adolescence* 32, no. 126 (1997): 266.

Kesselman (as cited in George and Stith) states: “feminism is a social movement whose goal is to eliminate the oppression of women in all its forms”²⁵. George and Stith attempt to veer away from traditional feminisms identifying patriarchy as the primary cause of IPV, especially when it comes to treatment options for batterers. Identifying patriarchy as the primary cause for IPV separates the couple from one another and avoids understanding the nature of the conflict from both female and male perspectives. Instead, traditional feminism assumes the male as the batterer and does not consider the context of the situation.

Although the following analysis identifies patriarchy as a contributor to IPV, patriarchy is not viewed as *the only* factor attributable to IPV experienced by pregnant women. Other factors including: level of stress, level of education, and income are considered in attempts to situate the nature of violence and abuse during pregnancy. The analysis also considers patriarchy on a micro-sociological level within family dynamics. Investigating the risk factors for women during pregnancy in connection to IPV will help to show the increased strain couples may face in the transition toward parenthood. Therefore, pregnant women may be at a higher risk of becoming victimized by IPV relative to non-pregnant women. Furthermore, the instance of IPV may show prevalence in a patriarchal family dynamic relative to an egalitarian dynamic because strain is not evenly distributed.

Objectives

²⁵ George and Stith. “An Updated Feminist View of Intimate Partner Violence”: 182.

The objective of the current analysis is to convey the heightened instance of IPV during pregnancy relative to non-pregnancy. The major life transition individuals face towards parenthood causes many strains on the individual, as well as on the intimate relationship. The different family structures regarding an egalitarian, or a patriarchal structure directly influence the amount of strain an individual will face during the transition. The current analysis aims to compare instances of IPV between pregnant versus non-pregnant women, as well as instances of IPV within patriarchal versus egalitarian family dynamics.

Research Question/ Hypothesis

What effect does pregnancy have on IPV in Canada relative to non-pregnancy? Does pregnancy increase the risk for IPV relative to non-pregnancy? Is the instance of conception a possible predictor of IPV given the circumstances of living in a patriarchal society? More specifically, is a patriarchal family dynamic more prone to experiencing strain than an egalitarian family dynamic? Will general strain theory be directly connected with pregnancy regarding a major life transition potentially leading to IPV? Such questions are relevant in explaining IPV.

Research Design

The dependent variable chosen for the current analysis is IPV; inferences will be made on all female Canadians surveyed within the 2009 General Social Survey (GSS) who reported instances of domestic violence/abuse. Emphasis will be placed on women who reported experiencing violence during and/or initiated by pregnancy. A scale was developed outlining the specific instances of IPV that occurred during the pregnancy. The scale is composed of 10 variables identifying the type of IPV the individual experienced in the past five years including their ex-spouse or partner. Respondents were asked whether or not their ex: threatened to hit you

with his(her) fist or anything else that could have hurt you, threw anything at you that could have hurt you, pushed/grabbed/shoved you in a way that could have hurt you, slapped you in the past, kicked or bit you or hit with fist, hit you with something that could have hurt you, beat you in the past, choked you, used or threatened to use a gun or knife on you, forced you into any unwanted sexual activity by threatening or use of force. A meta-analysis was also developed from several external studies to operationalize patriarchy within family dynamics in connection to findings obtained through GSS data. The unit of analysis is all women in heterosexual relationships who have experienced IPV.

The independent variable relevant in explaining IPV is pregnancy. Two variables relative to pregnancy within the 2009 GSS include: (1) whether instances of IPV began while the individual was pregnant and (2) whether instances of IPV occurred while the individual was pregnant in the past five years. A positive association is anticipated between the instances of IPV and pregnancy. Pregnant women are predicted to be at a higher risk of becoming victimized by IPV during the major life transition into parenthood than non-pregnant women.

A multivariate analysis is used to show the relationship between IPV and pregnancy. Therefore, other variables are incorporated as statistical controls. The current analysis uses level of education, level of stress, and income. Individuals with higher levels of educational attainment are expected have a lower likelihood of becoming victimized by IPV during pregnancy. Individuals who self-report higher levels of stress are expected to have a heightened risk of IPV victimization. Conversely, women who report low stress-levels are expected to have a low risk regarding IPV victimization. Finally, individuals who are economically disadvantaged and have a low income are expected to be victimized by IPV relative to those of high socioeconomic status.

The meta-analysis combines previous data from 10 studies looking at factors conducive to patriarchal family structures and male dominance within society. The meta-data analysis was created to analyze family dynamics. Individuals within patriarchal family dynamics are expected to be at a higher risk of IPV victimization relative to those within an egalitarian family dynamic.

Coding and Data Analysis

The current study uses cycle 23 of the 2009 Canadian General Social Survey (GSS). The GSS is a self-report survey conducted using computer assisted telephone interviews (CATI) to assess criminal victimization within Canada. GSS data was collected in 5 waves between February and November of 2009. The GSS targets individuals residing in Canada aged 15 and older. The current study uses multivariate analysis including a series of nested models to display results. The dependent variable in the current analysis is interval-ratio therefore, ordinary least squares (OLS) linear regression was used to calculate results using statistical software package “SPSS”.

The dependent variable “IPV” was created using an additive scale, combining 10 variables from the GSS. Independent variables were coded in accordance with the variables’ level of measurement. For example, both independent variables of interest regarding pregnant women and IPV are nominal therefore, they have been treated as “dummy variables”– responses have been dichotomized. Females who responded to the question: “Did this incident or any of these incidents happen while you were pregnant?” were coded in the following manner: 1= “Yes” and 0= “No”.

Several antecedent variables were considered in the multivariate analysis such as: level of education, annual personal income and self-reported stress level. Level of education and self-

reported stress were recoded into dichotomous variables for each category within the variable. For example, respondents reporting their daily level of stress had five options: “not at all stressful, not very stressful, a bit stressful, quite a bit stressful, and extremely stressful”. Each category was recoded as: 1= “Yes”, and 0= “No”. Income was treated as an interval-ratio variable in the current analysis therefore, no recoding was necessary for annual personal income.

Presentation and Interpretation of Results

The first nested model (as displayed in Table 1) is a simple regression showing a statistically significant relationship between IPV and incidents of violence occurring while the

Table 1. Intimate Partner Violence Regressed on Selected Independent Variables, 2009 GSS Victimization Survey, Unstandardized Coefficients

Covariates	Model 1	Model 2	Model 3
Constant	0.078	0.085	0.095
Incident occurred while respondent was pregnant in the past 5 years	4.778***		5.325***
Any incident began while pregnant		4.370***	-0.977***
Level of Education			
Some secondary/elementary/no schooling			-0.033
Some university/community college			-0.062*
Obtained diploma/certificate from community college or trade			-0.035
Obtained doctorate/master's/bachelor's degree			-0.077***
Level of Stress			
Not at all stressful			-0.058*
Not very stressful			-0.016
Quite a bit stressful			0.023
Extremely stressful			0.100**
Annual personal income of respondent			0.005
N	10694	10694	10694
R ²	0.132	0.056	0.159

P-values: **P-value* < .05 ***P-value* < .01 ****P-value* < .001

Reference categories: level of education= high school diploma; level of stress= a bit stressful; incident did not begin while pregnant; incident did not occur while pregnant in the past 5 years.

respondent was pregnant in the past five years. On average, women are 4.8 times more likely to become victimized by IPV during pregnancy than non-pregnant women. The association is positive; as the independent variable increases, the likelihood of becoming victimized by IPV

increases also. The standardized coefficients (as displayed in Table 2) shows a moderate relationship of 0.364.

The second nested model (as displayed in Table 1) is another simple regression. The results of the regression indicate a statistically significant relationship between whether any act of violence/abuse began with pregnancy and IPV. On average, women are 4.4 times more likely to have triggered IPV through pregnancy. The standardized coefficients (as displayed in Table 2)

Table 2. Intimate Partner Violence Regressed on Selected Independent Variables, 2009 GSS Victimization Survey, Standardized Coefficients

Covariates	Model 1	Model 2	Model 3
Incident occurred while respondent was pregnant in the past 5 years	0.364***		0.429***
Any incident began while pregnant		0.174***	-0.055***
Level of Education			
Some secondary/elementary/no schooling			-0.017
Some university/community college			-0.031*
Obtained diploma/certificate from community college or trade			-0.022
Obtained doctorate/master's/bachelor's degree			-0.047***
Level of Stress			
Not at all stressful			-0.025*
Not very stressful			-0.009
Quite a bit stressful			0.014
Extremely stressful			0.026**
Annual personal income of respondent			0.019
N	10694	10694	10694
R ²	0.132	0.056	0.159

P-values:

**p-value < .05*

***p-value < .01*

****p-value < .001*

Reference categories: level of education= high school diploma; level of stress= a bit stressful; incident did not begin while pregnant; incident did not occur while pregnant in the past 5 years.

indicate a moderate relationship of 0.174.

The third nested model (as displayed in Table 1 and Table 2) is a multiple regression. The regression includes whether the incident occurred while the respondent was pregnant in the past five years, whether the incidents of violence began with pregnancy, level of education, level of stress, and annual personal income. Variables appearing to be statistically significant include:

both variables measuring the relationship between pregnancy and IPV, respondents who have obtained a doctorate/masters/bachelor's degree, respondents who have some university/community college, respondents with "extremely stressful" levels of stress and respondents whose daily lives are self-reported to be "not at all stressful". The Pearson's r^2 associated with Model 3 has a value of 0.159 therefore, approximately 16% of the variance on the dependent variable (IPV) is explained by the variables included within the multiple regression. The unstandardized coefficients (as displayed in Table 1) indicate that respondents who attend post-secondary education are at a lesser risk of becoming victimized by IPV. With some university/community college respondents are on average -0.062 less likely to become victimized by IPV. Obtaining education has a greater effect if the respondent obtained a doctorate/masters/bachelor's degree - individuals who have obtained degrees are on average -0.077 less likely to become victimized by IPV. Women who report an "extremely stressful" stress level are 0.100 more likely to become victimized by IPV. Conversely, woman who report stress levels being "not at all stressful" are -0.058 less likely to become victimized by IPV. Income is not statistically significant and therefore, does not appear to have an impact on IPV. The two independent variables regarding pregnancy seem to both become weaker after considering statistical controls. In fact, the instance of IPV being triggered by pregnancy becomes inverse while controlling for other variables.

The meta-analysis (displayed in Table 3) shares common themes of patriarchy, male dominance, violence against women, the power structures of marriage, and the dynamics of couples among 10 different studies. The meta-data were combined to portray the increased prevalence of IPV and abuse within family dynamics that condone patriarchal ideologies.

Women victimized by IPV often have a male aggressor. Levels of aggression are associated with patriarchy. Therefore, the ideology supported by the male within the relationship is important in

Table 3. A Meta-Analysis of Patriarchal Family Dynamics in Connection with Intimate Partner Violence

Study	n	Measures	Participants	Design	Findings
Smith (1990)	604	Conflict Tactics Scale (CTS) measures of wife beating; patriarchal ideologies held by husbands; other socioeconomic variables.	Women between the ages of 18-50 who are currently or formerly married or cohabiting.	Telephone interviews using Random Digit Dialing (RDD); averaging 23 minutes per call.	$r^2 = 0.18$ and 0.20 ; 18% of the variance in wife beating can be explained by the husbands' beliefs/ideology; 20% can be explained by beliefs, attitudes, income and education
Lenton (1995)	8418	Class, patriarchal ideology; childhood socialization; wife abuse.	All female respondents within the Violence Against Women Survey (VAWS), conducted by Statistics Canada.	Tests power and feminist theory using the VAWS: ordinary least squares regression and logistic regression also used.	$r^2 = 0.251$; Patriarchal index, childhood socialization, previous experience of assault (for the female), and disability account for 25.1% of the variance in wife abuse.
York (2009)	27	Gender role variables; social capital variables.	Respondents within the respective data bases used; analyzes 27 countries within the United States (U.S).	Cross-sectional research using the Leigh Stowell and Company Media Market Studies (1989-2006); and the Federal Bureau of Investigations National Incident-Based Reporting System (2004).	$r^2 = .27$; gender attitudes significantly predict sexual assault including domestic violence.
Cannon, Hamel and Ferreira (2016)	238	Approaches to domestic violence such as: feminism, patriarchy, power control, and child witnesses.	Domestic violence perpetrator programs or, batterer intervention programs (BIPs) in the U.S. and Canada.	North American Domestic Violence Intervention Program Survey (NADVIPS), a 15-page questionnaire given to domestic violence (DV) programs/ institutions.	97.3% of the programs taught the effects of violence on children; 94.6% addressed power/control tactics in the programs; 83.9% raised awareness regarding gender roles.
Hanrahan (1997)	722	CTS measures of spousal violence; husbands' ideology; wife's relative resources; legitimacy of marital power structure; husbands' dissatisfaction with division of household labor and; marital conflict.	Respondents within the National Family Violence Survey (1975)	The National Family Violence Survey (1975) using logit and maximum likelihood estimation (MLE).	Marital conflict and marital power structure legitimacy are significant in predicting rates of violence: -2 Log Likelihood = 369.031

Leduc (2005)	1854	Patriarchy; courtship; gender roles and gender deviance; power and control.	Women who have a median age of 20 years.	The Canadian National Survey (CNS) of dating violence in university and college.	$r^2 = 0.139$; women who reject patriarchal attitudes and transgressions, and as a result contribute to minor violence (such as self defense) because of their experiences of oppression due to patriarchy.
Brownridge (2002)	7396	Male partner violence against women. Specifically, acts of physical assault.	Heterosexual women living married or common law.	Cycle 13 of Statistics Canada's General Social Survey (GSS-1999). Uses logistic multivariate analyses.	Patriarchal dominance in connection to male violence against women in Quebec and Canada combined: -2 Log Likelihood: 2144
Karakurt and Cumbie (2012)	87	Couples' dynamics: tests egalitarianism, dominance and intimate partner violence (IPV)	Heterosexual couples from a large Midwestern university campus.	Questionnaires assessed using Actor-Partner Interdependence Model (APIM).	Males have significantly higher levels of: (1) hostile sexism ($t(53) = -2.489$); and (2) need for authority ($t(54) = -2.495$).
Coleman and Straus (1986)	2143	The power structure of marriage; power norm consensus; level of marital conflict.	Couples either married or cohabiting.	Interviews using cross-tabulation of data through a variety of indices.	Male-dominated couples have a low consensus over the legitimacy of power structures and high conflict in regards to family responsibilities: $\chi^2 = 17.1$ (p -value < 0.009)
Yllo (1984)	2143	Violence against wives; marital equality; family conflict.	Couples either married or cohabiting.	Secondary analysis of interviews in Straus (1986) data.	3% of egalitarian couples experienced violent episodes in previous years. Violence is high in women-dominated couples, yet remains high in male-dominated couples: (p -value < 0.000 f -value =11.82, $df =3$); loss of patriarchal control.
Yodanis (2004)	27	Violence and fear and; status of women.	Countries in Europe and North America including Canada and the U.S.	International Crime Victims Survey (ICVS) and data from the United Nations (UN)	The greater the amount of sexual violence, the greater the amount women fear it - accounting for 50% of the variance in women's fear ($r^2 = 0.50$); 40% of the variance in sexual violence is explained by a women's' occupational status ($r^2 = 0.40$).

determining the family dynamic within the household. If the male supports patriarchy there will be more violence and aggression within the home; the scenario is widely different if the male does not support patriarchy. Violence appears to be less prevalent in egalitarian family dynamics where men embrace equality within the household, sharing responsibilities with their female counterparts.

Discussion and Conclusion

The current study focused on the effects of pregnancy on IPV in Canada. More specifically, the research examined the risk of IPV during pregnancy relative to non-pregnancy. A statistically significant relationship was uncovered between IPV and pregnancy, showing that pregnant women are at a greater risk of becoming victimized than non-pregnant women. Women are also at a greater risk of experiencing IPV for the first time due to pregnancy. This is likely due to a heightened level of stress experienced by the mother during pregnancy. The introduction of a child into the family creates a large number of strains on both parents – especially if the pregnancy was unintended. The stress experienced by couples making the transition towards parenthood is connected to the loss of positive stimuli discussed by Agnew²⁶. The moment of conception begins a major life event that will effect the individual for the rest of his/her life.

The multiple regression maintained the statistical significance between IPV and pregnancy however, the notion that IPV was triggered by pregnancy is questioned as the relationship became inverse while controlling for variables such as level of education, level of stress and income. Results were consistent with previous findings regarding the relationship between IPV and education. Women who obtain higher levels of education are less likely to

²⁶ Robert Agnew. "Building on the Foundation of General Strain Theory: Specifying the Types of Strain Most Likely to Lead to Crime and Delinquency."

become victimized by IPV. Women facing extreme stress are at risk of being victimized by IPV, while women who experience close to no stress at all are less likely to become subject to IPV. Interestingly, income did not have a significant relationship with IPV; previous literature suggested socioeconomic status plays a role in predicting IPV victimization however, the current study did not come to the same conclusion. Perhaps the group of women included within the study was too homogenous.

The meta-analysis was used to analyze patriarchal family dynamics in relation to egalitarian dynamics. Findings suggest that violence is more prevalent in patriarchal family dynamics, consistent with Karakurt and Cumbie's²⁷ research which found that males have higher levels of hostile sexism and a higher need for authority within the family leading to violence and aggression. When male dominance is threatened by pregnancy leading to a potential child, males who are supportive of patriarchal ideologies have a tendency to react in a negative manner. The reaction may include violence against one's intimate partner. The presentation of negative stimuli identified as influencing strain by Agnew²⁸, is evident within patriarchal family dynamics and ideologies.

Limitations to the current study include a relatively small sample size of 10694 women within the GSS. Only 44 women responded positively to the question regarding whether or not the instance of IPV occurred while the respondent was pregnant in the past five years. Furthermore, only 22 respondents (50% of women who experienced IPV during pregnancy) answered positively to whether the instance of IPV *began* during pregnancy. Therefore, perhaps qualitative research would generate more meaningful results. Generalizations cannot be made to

²⁷ Gunnur Karakurt and Tamra Cumbie. "The Relationship between Egalitarianism, Dominance, and Violence in Intimate Relationships".

²⁸ Robert Agnew. "Building on the Foundation of General Strain Theory: Specifying the Types of Strain Most Likely to Lead to Crime and Delinquency."

all women because further research is required in studying the effects of pregnancy on IPV. Researchers have not maintained consistent enough results to make solid conclusions on the matter.

Future research should look further into the reasons why pregnancy triggers IPV. A qualitative analysis looking at male batterers would be helpful to explore the difficulties that men face while their intimate partners are pregnant. Another interesting perspective might be to investigate the lives of batterers who have assaulted their intimate partners during pregnancy. Looking at the level of education, level of stress and income of the male would complement some of the research regarding women experiencing IPV during pregnancy. The current study did not take into consideration the women's' race and ethnicity. Extensive research has been conducted investigating the intersections of race, sex, and class on some dependent variable. Perhaps the same can be done for IPV.

The major life transition towards parenthood poses strains for a large proportion of couples. The current study discovers a connection between IPV and pregnancy. Pregnant women are more at risk than non-pregnant women to become victimized by IPV. The prevalence of patriarchal social institutions such as the family promotes and generates male violence and aggression. With various feminist movements highlighting the effects of patriarchy on society and within the home, societal structures have begun to shift away from male dominance and aggression, moving towards ideologies practicing equality and egalitarianism.

References

- Agnew, Robert. 2001. "Building on the Foundation of General Strain Theory: Specifying the Types of Strain Most Likely to Lead to Crime and Delinquency." *Journal of Research in Crime and Delinquency* 38, (4): 319-61.
- Bacchus, Loraine, Gill Mezey, and Susan Bewley. 2006. A qualitative exploration of the nature of domestic violence in pregnancy. *Violence Against Women* 12 (6): 588-604.
- Burnett, Camille, Donna Schminkey, Juliane Milburn, Jennifer Castello, Linda Bullock, Jacquelyn Campbell, and Phyllis Sharps. 2016. "Negotiating Peril." *Violence Against Women* 22, (8): 943-65.
- Cannon, Clare, M.A., John Hamel L.C.S.W., Fred Buttell PhD., and Regardt J. Ferreira PhD. 2016. A survey of domestic violence perpetrator programs in the united states and Canada: Findings and implications for policy and intervention. *Partner Abuse* 7, (3): 226-276, <https://www.lib.uwo.ca/cgi-bin/ezpauthn.cgi?url=http://search.proquest.com/docview/1806618332?accountid=15115> (accessed April 11, 2017).
- Coleman, Diane H., and Murray A. Straus. 1986. Marital power, conflict, and violence in a nationally representative sample of American couples. *Violence and victims* 1, (2): 141-57, <https://www.lib.uwo.ca/cgi-bin/ezpauthn.cgi?url=http://search.proquest.com/docview/208564243?accountid=15115> (accessed April 11, 2017).
- Deshpande, Neha A., and Annie Lewis-O'Connor. 2013. "Screening for Intimate Partner Violence During Pregnancy." *Reviews in Obstetrics & Gynecology* 6, (3): 141-48.

- Gelles, R. J. 1990. Violence and pregnancy: Are pregnant women at greater risk of abuse? In M. A. Straus & R. J. Gelles (Eds.), *Physical violence in American families: Risk factors and adaptations to violence in 8,145 families* (pp. 279-286). New Brunswick, NJ: Transaction.
- Gelles, Richard. 2017. *Intimate Violence and Abuse in Families*. New York: Oxford University Press.
- George, Jayashree, and Sandra M. Stith. 2014. An updated feminist view of intimate partner violence. *Family Process* 53 (2): 179-93.
- Hanrahan, Deborah M. 1997. Gender and spousal violence: A test of social control and power-control theories. *Free Inquiry in Creative Sociology* 25, (2) (11): 189-197, <https://www.lib.uwo.ca/cgi-bin/ezpauthn.cgi?url=http://search.proquest.com/docview/61594591?accountid=15115> (accessed April 11, 2017).
- Hunt, Sheila C., and Ann M. Martin. 2001. *Pregnant women: violent men: what midwives need to know*. Oxford: Books for Midwives.
- Karakurt, Gunnur, and Tamra Cumbie. 2012. The Relationship between Egalitarianism, Dominance, and Violence in Intimate Relationships. *Journal of Family Violence* 27, (2): 115–122.
- Leduc, Lisa R. 2005. Understanding female-to-male violence in canadian university and college dating relationships: A test of the rebellion thesis. Ph.D. diss. <https://www.lib.uwo.ca/cgi>

bin/ezpauthn.cgi?url=http://search.proquest.com/docview/60495798?accountid=15115
(accessed April 11, 2017).

Lenton, Rhonda L. 1995. Power versus feminist theories of wife abuse. *Canadian Journal of Criminology* 37, (3) (07): 305-330, <https://www.lib.uwo.ca/cgi>

bin/ezpauthn.cgi?url=http://search.proquest.com/docview/216103142?accountid=15115
(accessed April 10, 2017).

Lipsky, Sherry, Victoria L. Holt, Thomas R. Easterling, and Cathy W. Critchlow. 2005. "Police -reported Intimate Partner Violence During Pregnancy: Who is at Risk?" *Violence and Victims* 20, (1): 69-86.

O'Donnell, Lydia, Gail Agronick, Richard Duran, Athi Myint-U, and Ann Stueve. 2009. Intimate partner violence among economically disadvantaged young adult women: Associations with adolescent risk-taking and pregnancy experiences. *Perspectives on Sexual and Reproductive Health* 41 (2): 84-91.

Parys, An-Sofie, Annelien Verhamme, Marleen Temmerman, and Hans Verstraelen. 2014. "Intimate Partner Violence and Pregnancy: A Systematic Review of Interventions." *Plos One* 9, (1): 1-10.

Ravert, A. A., and J. Martin. 1997. Family stress, perception of pregnancy, and age of first menarche among pregnant adolescents. *Adolescence* 32 (126): 261-70.

Shupe, Anson D., William A. Stacey, and Lonnie R. Hazlewood. 1987. *Violent men, violent couples: The dynamics of domestic violence*. Lexington, Massachusetts/Toronto: Lexington Books.

Smith, Michael D. 1990. Patriarchal ideology and wife beating: A test of a feminist hypothesis. *Violence and victims* 5, (4): 257-73, <https://www.lib.uwo.ca/cgi-bin/ezpauthn.cgi?url=http://search.proquest.com/docview/208554970?accountid=15115> (accessed April 10, 2017).

World Health Organization. 2002. "Intimate Partner Violence." <http://www.who.int/en/>.

York, Melinda Roberts. 2009. Violence against women: The dynamics associated with traditional gender attitudes and social capital. Ph.D. diss., Washington State University, <https://www.lib.uwo.ca/cgi-bin/ezpauthn.cgi?url=http://search.proquest.com/docview/305017980?accountid=15115> (accessed April 10, 2017).