

Pregnant people

Pregnancy has been shown to increase and escalate a person's **risk** and experience of domestic and family violence by their intimate partner [Walsh 2008]. The Australian Bureau of Statistics 2016 Personal Safety Survey [ABS PSS 2016] estimated that approximately one fifth of women who experienced violence from a current partner, and who were pregnant at some point in the relationship, experienced violence during their pregnancy. Further, approximately one half of women who experienced violence by a previous partner, and who were pregnant during the relationship, experienced violence during their pregnancy [ABS PSS 2016]. Homicide by an intimate partner is the principal cause of injury-induced death among pregnant women [Burch & Gallop 2004].

Escalation of physical violence or other forms of controlling behaviours during pregnancy may arise from the perpetrator's jealousy of the pregnancy or child, or the extra attention their partner may experience from family, friends and health care and support service providers. The perpetrator may also perceive the pregnancy as symbolic of their partner's independence and may use violence to reassert their control.

Research shows that unplanned or unwanted pregnancy is more common among women experiencing domestic and family violence [Williams et al 2008]. The perpetrator may have **forced or coerced the woman into pregnancy** through, for example, emotional manipulation, contraception sabotage or forced unprotected sex [Moore et al 2010]. The perpetrator may have intended the pregnancy to prevent the woman from working or studying, or to otherwise exercise control over her. Alternatively the perpetrator may refuse to accept the pregnancy, and accuse his partner of infidelity. Women who are concerned that the violence may continue during and after pregnancy and believe that having a child may make leaving the relationship more difficult, may seek to terminate their pregnancy [Chibber et al 2014].

Pregnancy and infancy also create greater dependence for women on their partners physically, emotionally and financially, increasing their vulnerability to domestic and family violence. Some women in abusive relationships may also believe that the pregnancy will make their partner more sympathetic and less likely to abuse [Burch & Gallop 2004], even though research does not support this.

People who are at particular risk of domestic and family violence during pregnancy are those who are: young; single, separated, divorced or in a defacto relationship; of low income and socioeconomic status; unemployed and; with lower levels of education.

Experiences of domestic and family violence during pregnancy may seriously and adversely affect the health of the pregnant person and foetus. Physiological responses caused by stress, as well as **physical injury** from violence, may include urinary tract and kidney infections, high blood pressure, **mental health disorders**, premature birth or miscarriage, low birth weight, and foetal injury or death [WHO 2021]. **Long-term poor health** and ongoing vulnerability due to the perpetrator's domestic and family violence may present serious risks to the safety, health and wellbeing of children of the relationship [Taft 2002].