ORIGINAL PAPER

Who's Going to Keep Us Safe? Surviving Domestic Violence and Shared Parenting During Covid-19

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Abstract

This paper discusses the experiences during COVID-19 of mothers who have young children, are survivors of domestic violence and who share parenting to highlight the further unsafe situations survivors of violence and their children were placed in during the pandemic. Part of a larger mixed methods study, these participants ($n = 19$) from three Canadian provinces, Alberta, Manitoba and Ontario, engaged in virtual individual one-on-one interviews via zoom. Using thematic analysis, four themes emerged from the data: 1) increased use of coercive controlling behaviors; 2) fear of the unknown; 3) lack of supports; and, 4) finding balance. Direct quotes are used to highlight the meaning of each theme. We outline the challenges these women have that are in addition to those experienced by many during COVID-19 times (increased stress, isolation, disconnect from supports, financial challenges). These include managing the shared parenting arrangements with a former abusive partner who used the pandemic as a further opportunity for coercive controlling behaviors under the guise of the public health order. The mothers were left to manage the difficult exchanges with a former abusive partner and unknown circumstances of the pandemic without guidance and support from legal actors. There will need to be a prioritization of the safety of mothers and their children in post-divorce parenting arrangements both during times of a community lockdown such as during the pandemic and also during non-pandemic times.

Keywords Shared parenting · Domestic violence · Covid-19 · Young children

In Spring 2020 in Canada, the first wave of public health restrictions that included stay-at-home and quarantine orders were introduced. Immediately concerns were expressed that these lockdown measures would keep women and children in greater isolation with violent perpetrators and increase the risk of harm and injury (Campbell, 2020; Dahal et al., 2020; Donagh, 2020; Ferrara et al. 2021; Kofman & Garfin, 2020) and allow opportunities for perpetrators to exercise new forms of coercive control

(Koshan et al., 2021). First named in 2014 by the United Nations as a global pandemic (United Nations, 2014), domestic violence (DV), is now described as a 'hidden' or 'shadow' pandemic. The term recognizes that both pandemics occur simultaneously (Trudell & Whitmore, 2020; Xue et al., 2020); one that is visible and public and the other which has existed longer-term but with less public attention and resources (Koshan et al., 2021).

Early studies documented the impact of the Coronavirus 2019 (COVID-19) public health measures, including increased crisis line usage, mental health concerns, and deaths due to DV since the start of the pandemic (Trudell & Whitmore, 2020; Xue et al., 2020). Much of the focus of these concerns has been on situations in which women are living with abusive partners and the ways in which stay-at-home orders make difficult situations even more challenging wherein women either must decide to stay trapped in their home in the violent situation and without limited outside contact, or risk contracting Covid-19 by moving elsewhere (Campbell, 2020; Moffitt et al., 2020; Sower & Alexander, 2021). Less attention has been placed on examining the implication of lockdowns and restrictive

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public health orders for women who have separated or divorced their former partners, but have shared parenting agreements that bring them into continued contact and require them to find ways to continue to communicate with these former partners.

In the fall of 2019, our research group began to investigate the experiences of mothers with children aged 4 years and under who had shared parenting arrangements with former abusive partners. Our methodology included a survey with some follow up in-depth qualitative interviews. With the announcement of the global pandemic at the beginning of our study recruitment, we included additional questions about the impact of the public health restrictions in our qualitative interview questions. This paper reports the experiences of survivors of domestic violence, mothers with young children who share parenting during this time of a world pandemic, and aims to fill a significant gap in understanding.

Literature Review

Like previous pandemics and natural disaster situations, there has been an alarming rise in the incidents of DV during the pandemic and data is beginning to surface across the world (Boserup et al., 2020; Bradbury-Jones, 2020; Campbell, 2020; Mittal & Singh, 2020; Usher et al., 2020). Peterman et al. (2020) highlighted pathways that increased the likelihood of violence against women and children as a result of pandemics, which included: poverty-related stress, social isolation, reduced availability of health services, and women's reduced ability to leave domestic violence relationships (p. 5). The impact of "stay-at-home" orders meant that court hearings were postponed across the globe (Peterman et al., 2020). Evidence of shifts in DV were reported in China, where DV tripled in February 2020 from the previous year (Allen-Ebrahimian, 2020), increased by 30-36% in France, 25% in Argentina (Boserup et al., 2020), 40-50% in Brazil, and 20% in one area of Spain (Bradbury-Jones, 2020).

In a study by Smyth and colleagues (2021), 53% of women experiencing DV in Australia felt that it increased in frequency and severity since the start of the pandemic (Smyth et al., 2021). Within the US, individual states reported increases in DV between 21 and 25% (Wagers, 2020) and nine major cities reported between 20 and 30% increases in DV calls with some areas as high as 62% (Kofman & Garfin, 2020; Mittal & Singh, 2020). From limited Canadian studies, we can start to see the impact that Covid-19 has had on DV rates for women in the last year. In a study of 376 gender-based violence workers across Canada, 46% expressed that they saw changes in the severity of DV and prevalence of DV since the onset of the pandemic. Of these workers, 82% believe instances of DV have increased (Trudell & Whitmore, 2020). This study also

showed that 34% of workers saw negative changes in mental health and 20% saw additional ways violence was perpetrated (Trudell & Whitmore, 2020). The reporting of family violence in Canada decreased by 9% for women as of April 2020; it is recognized within the report that restrictions on women's ability to report due to living with the perpetrator, and perceived fears of a lack of services and the potential of Covid-19 transmission may have reduced the number of reports (Statistics Canada, 2021). It is also well known that women in shared parenting may not report DV due to the requirement of having ongoing contact with the perpetrator and fear of further violence during that contact (Douglas, 2018) and risks of not being believed (Feresin et al., 2018; Laing, 2017). To understand the impact of Covid-19 health restrictions, Statistics Canada (2020) created a new web panel survey. More than 4,600 people in the 10 provinces responded to this survey between March 29 and April 3 and 8% (10% of women and 6% of men) reported that they were very or extremely concerned about the possibility of violence in their home.

The stay-at-home and quarantine orders create a unique opportunity for DV perpetrators to capitalize on the pandemic conditions by utilizing coercive controlling behaviors that can further isolate women from their support networks; increasing dangerous situations for victims of DV (Lyons & Brewer 2021; Moffitt et al., 2020; Sower & Alexander, 2021). This perfect storm situation provides an atmosphere for increased coercive control through reduced mobility and increased surveillance by perpetrators and is particularly troubling given that these modes of control are a common factor in serious DV situations and remain harder to detect than physical violence (Lyons & Brewer, 2021; Smyth et al., 2021). While there is only a small pool of literature on coercive control during the pandemic, a study from Australia reported that 47% of women who have experienced coercive control stated these behaviors increased in frequency and severity since the start of the pandemic (Smyth et al., 2021).

Compounding the difficulty of increased rates of DV is the co-occurring problem of decreased availability to services that women would generally use as supports. Many community-based services have been temporarily shut down or seen a drastic decrease in capacity, including the number of shelter beds, to address social distancing (Kaukinen, 2020; Lyons & Brewer, 2021; Sower & Alexander, 2021). Where shelters remain open, and with crisis lines and outreach supports available, women may be confused about whether messages of 'staying home' mean that women should remain in their homes with their partners (Moffitt et al., 2020).

Much of the efforts to study DV during the pandemic has focused on situations wherein victims are living with or attempting to separate from abusive partners. Although we found a small number of papers that focussed on the impact of lockdowns and restrictions on child custody and

Table 1 Seven questions about the impact of COVID-19 on shared parenting

Question Number	Question
H1	In what ways did COVID-19 and the resulting restrictions (such as social distancing) impact your ability to co-parent?
H2	Are there or were there challenges with the practical and emotional support you received from your co-parent?
H3	Did you and the co-parent's relationship change during COVID-19 and, if so, in what ways?
H4	How has the division of labor changed during the pandemic?
H5	How does working from home impact parenting/ coparenting?
H6	If one of the parents is working outside the home, how does this affect the parenting plan?
H7	What does positive time with the children look like now?

visitation schedules (Kamińska, 2020; Szalma, 2020), less attention has focused on situations wherein mothers are sharing parenting with former abusive partners. The qualitative findings detailed in the remainder of the paper focus on the experiences of 19 mothers navigating shared parenting arrangements with a former male partner during a global pandemic. Ethical approval for the study was obtained from the research ethics board at the University of (masked for review).

Methodology

This mixed methods study was designed to understand the experiences of mothers with young children who are engaged in shared parenting arrangements, to gain an in-depth understanding of their experiences directly from participants (Creswell, 2013), describing and explaining what is happening in our social world (Morse & Field, 1995). In our initial phase of the study, we utilized an on-line survey. Based on the findings from the survey, we developed an interview guide to help provide further clarity to our data. We were interested in the influences of COVID-19 on shared parenting during this time of social distancing and sheltering in place. We added 7 questions (see Table 1) specifically about the impact of COVID-19 to the interview guide. For this paper, we focused specifically on the qualitative questions related to COVID-19, while we explored the following research question: how do women with young children who are survivors of domestic violence experience shared parenting during times of a worldwide pandemic? One-on-one individual interviews occurred virtually utilizing the on-line platform, zoom. We anticipated that it might be challenging for some participants to discuss their experiences during the interview. To mitigate this possibility, we provided information about support services as part of the informed consent. The research assistants who conducted the interviews were graduate or doctoral social work students with many years

of clinical practice, who were prepared to end the interview and offer support, if necessary.

Sampling and Recruitment

Participants had previously completed an on-line survey in another phase of the study. We understood the critical nature of community relationships when engaging in research with women who have experienced domestic violence (Hardesty et al., 2019; Logan et al., 2008; Sullivan et al. 2005) and the need to develop meaningful relationships with service providers who work with survivors of domestic violence (Bender, 2017; Brown & Dustman, 2019; Bushar et al., 2019; Dichter et al., 2019), and we moved to on-line only recruitment with community partner sharing the survey on their websites plus our Facebook recruitment strategy, yet, we were in the midst of a pandemic. Given that it is now common for research studies to use paid Facebook advertisements to recruit participants (Thornton et al., 2016) and we were unable to consider face-to-face recruitment, a paid Facebook strategy was utilized for recruitment of survey participants (masked for review). Using purposive sampling, participants were recruited electronically by Facebook algorithms, as it was believed that the participants may have an interest in the study given their lived experiences and be able to answer the research question (Hulley et al., 2007; Marshall & Rossman, 2016).

Our initial intent in recruitment was to include face-to-face at family court and community partner referral so that we might reach women who had experienced DV and those who had not. Given the general nature of our recruitment, we can only assume that mothers who participated wanted their experience of DV and coercive control tactics heard and known. The mothers who wanted to participate in a follow-up interview in this phase of the project left their email contact information for the researchers. Three research assistants made contact with participants who provided their contact information (email address or phone number).

Study participants ($n = 19$) were mothers with children ages 4 and under from Alberta, Manitoba and Ontario with former male partners. They all (100%) identified as experiencing domestic violence and coercive controlling behaviors both during their cohabitating relationship and after through their shared parenting communication and contact, more than half ($n = 11$) of which identified financial abuse from their former partner. The majority of mothers were over the age of 31 ($n = 13$) with six women between 21-30 years old. Half of the women reside in Alberta ($n = 9$), six in Ontario, and four in Manitoba. Four women indicated that their children were between 1 or 2 years old at the time of the interviews, while the rest ($n = 15$) indicated that their children were between 3 or 4 years old. The majority of participants had more than a high school education with ($n = 17$) earning a college or university degree, and a further two having some post-secondary education. Approximately half ($n = 9$) of the women earned less than $40,000, while eight ($n = 7$) earned between $40,000-$59,999, and three ($n = 3$) had an annual salary of over $60,000. The majority of participants identified as Caucasian ($n = 14$), three identified as Metis, one identified as Hispanic, and one identified as Status Indian.

Data Collection and Analysis

Information about the interviews was shared via email by the research assistants who then conducted the on-line individual interviews. Interviews lasted between 45 and 90 min. The analysis for this paper includes data from the COVID-19 questions that focused on the influences of the pandemic on shared parenting. Individual interviews ($n = 19$) were audio recorded and transcribed verbatim by graduate and doctoral research assistants. Informed consent was captured on the audio tape to provide anonymity of the data. Interviews have been described as a powerful and revealing method used in qualitative research to help the researcher see the world from the participant's perspective (McCracken, 1988). The interview guide utilized for the interviews contained 7 open ended questions (Kvale, 2006) that focused specifically on descriptive aspects of shared parenting during a pandemic and the day-to-day interactions of shared parenting relationships during this time for women who had all identified as experiencing coercive controlling behaviors, both prior to post-separation (see Table 1). The remainder of our interview questions centered on the mother's experiences of sharing parenting with a former abusive and controlling partner. Below we summarize the data about these ongoing experiences of shared parenting, which centered on the description brought forward by these participants that the continuing control exercised by their former partners

left them feeling like they were continuously "walking a tight-rope".

Thematic analysis was used to analyze the interview data (Clarke & Braun, 2017). In this form of data analysis, the researcher organizes the data into codes, categories and themes with the goal to seek patterns in the data (Clarke & Braun 2017). We added a phase to Braun and Clarke (2006) work, going from codes to categories to themes, instead of from codes to themes and sub-themes, and provided a further layer of reflection and organization of the data. This allowed for description and interpretation, keeping the codes close to the data and participant meaning. An inductive approach was used for coding, meaning we developed the codes from the data rather than a pre-existing coding frame. Inter-rater reliability was used to reinforce the trustworthiness of the findings. The research assistants independently reviewed the transcripts each creating codes and then the team met together to create categories and to identify emerging themes. Specific participant quotes were chosen to represent the identified themes. Two researchers then reviewed the work from codes to categories to themes, confirming consistency within and across transcripts.

Findings

Four themes emerged from the findings: increased use of coercive control tactics, fear of the unknown, lack of supports, and finding balance. Mothers who participated in our study all had experienced domestic violence prior to and post-separation. While engaged in shared parenting, the mothers reported that they were required to engage in a balancing act, like walking a tight-rope, which required them to manage ongoing abusive behaviors, such as verbal abuse and violent reactions, or coercive control in the form of child maltreatment from their former partners, while also attempting to ensure their own well-being, mental health, and keep themselves and their young children safe. With the advent of the pandemic and as a response to our questions about this unique experience, the mothers shared that the challenge of walking this tight rope was exacerbated. They reported increases in coercive control tactics, an overall lack of trust due to differences of opinion on adhering to the public health orders, and having limited access to supports due to social distancing restrictions. These experiences had a detrimental impact on the mothers in our study and their overall mental health and well-being. Despite these challenges, most mothers in our study reported that the changes from COVID resulted in a shift in their parenting styles and supported stronger relationships with their children.

Domestic Violence: Increased Use of Coercive Control Tactics

The notion of coercive control identifies that specific acts of physical, sexual, and emotional violence are tactics and expressions of control and power over used by perpetrators to both ensnare and entrap victims into relationships (Dutton & Goodman, 2005; Stark, 2007). When partners in relationships and cohabitating, emphasis is placed not just on verbally threatening and physical behaviors, but a dynamic process of everyday acts of power and control. Included in these acts of power are grooming activities, such as excessive compliments, affection, and gifts to gain trust and make the victim feel special (Dutton & Goodman, 2005). Further, the use of strategies to entrap the victim, such as isolating the victim from friends and family, withholding money, calling or texting to check on the victims whereabouts, restricting the physical movements of the victim, and promising to end the abuse or seek help for problematic behaviors (Dutton & Goodman, 2005). After a victim leaves an abusive partner, coercive control can continue to be exercised by a perpetrator through using attempts to prolong separation or divorce proceedings, bringing frivolous legal motions, seeking child custody or visitation to maintain contact with the victim, and increased communication to negotiate parenting arrangements or visits. These efforts to obtain or extend communication or interaction with the victim not only exercise continued power over the victim, but create additional moments when the perpetrator can act abusively by threatening or belittling. Through their interviews, the 19 mothers provided instances of these coercively controlling tactics used by their former partners similar to those outlined above. In response to our specific questions that focused on the impact of the health restrictions, these mothers described how the impact of COVID-19 created opportunities for increases in DV, specifically coercive control. Coercive control was demonstrated by co-parents through challenges to mothers' abilities to keep their children safe by following the health restrictions or how they were caring for their children when they were home during the school closures, as described by these two mothers : "There was a lot of criticism and judgment coming from [co-parent] in terms of the choices that I had to make, having the kids here with me during COVID" (P02), and:

> He turned it to, you're not capable of keeping the kids safe during this…because it turned into a way to turn it into power and control, being like…let's turn this into an opportunity to take the kids away from you. Sometimes it was just like a matter of him yelling at me on the phone being like, what are you doing,

you're not doing this and you're not doing that [not meeting the children's needs]. (P01)

Some co-parents attempted to use the social distancing and public health restrictions of COVID-19 to change and take control over parenting arrangements. This mother was told by her co-parent: "She's[child] safer here [dad's home]. You can pick her up, drop her off when you go to work, pick her up after…there was no option for that…it's just been pretty bad," (P30). Still other co-parents maintain control by refusing to discuss the best arrangements to keep children safe as they regularly moved between two households: "if there's any time when you should figure it out and try to work together for everyone's safety, and he refused even then…I came to the realization that it was not going to move forward" (P30), and: "We just didn't even talk about it like at all. Our sort of independent silo parenting" (P28). The idea that children should change parenting arrangements in favor of the perpetrator or that they did not know if their former partner would abide by public health restrictions or social distancing instilled fear, as we see here: "So it makes me nervous. And even when I broach like "are you going out with [child]? Is [child] wearing a mask? He wasn't doing any of the precautions. I don't know where he takes [child]," (P16) and another mother: "it's just been that I'm so strict on what's happening, and he'll do what he wants" (P15). Mothers were required to maintain a delicate balance between negotiating being bullied and threatened and a lack of response to their concerns by abusive partners during a world pandemic.

Fear of the Unknown

While mothers in our study attempted to maintain wellbeing for themselves and their children in shared parenting arrangements while navigating the threat of domestic violence, they were faced with the obstacles created by COVID-19 and the "unknown." This "unknown" transpired from the lack of trust in the relationship with a perpetrator of violence and the perpetrators' refusal to follow public health and safety guidelines or share information that these guidelines were followed when children were with the perpetrator. This lack of trust heightened mothers' sense of fear about the "unknown" that included their child's potential exposure to COVID-19 as we see here: "so I'm now having to deal with [co-parent] who is not the most responsible person. I don't know where he's going, I don't know who he's exposed to," (P16) and, "so that makes me really anxious because that's the unknown. And I also don't trust that he's being responsible," (P03). When there was a lack of communication, this fear of the "unknown" was intensified, as stated by this mother: "he wouldn't even tell me where she was going when he was going to work…it's a world pandemic and I don't even know where my kid is on his time," (P30).

Mothers also reported being fearful about how their co-parents would respond to them if they had to be tested or tested positive for COVID-19, as expressed by this mother:

> And the fear of me having to communicate to him [about obtaining a COVID test] was almost paralyzing…because I wasn't sure what he was going to do with that information. Whether he would say that the kids couldn't be around…and I feel like that will cause conflict. Especially if he loses his time. I shouldn't have felt that way. But I was too terrified of what it would mean (P21).

This was a reciprocal fear with concerns of their children being exposed to COVID-19 while on his parenting time, as we see here:

> There were some escalated anxieties around like 'well, are they going to get COVID?' And if they do, is he going to try and isolate them with him for 10 days or something like that…I was more concerned that he would try and force some sort of 10-day isolation. (P30)

Differing opinions around the need for social distancing during COVID-19 further challenged mothers' abilities to trust co-parents, as noted by this participant: "with COVID he didn't believe it was a thing, so he wasn't social distancing…so then there was just a fight over values, almost like I'm like I don't want you even meeting with her in our front yard…if you're not taking precautions," (P31). To manage the ongoing stress and the fear of the unknown, some mothers in our study reported that they took control of parenting arrangements as did this mother who did not allow for parenting time due to her child's medical concerns: "I just think I'm in a mode where I'm just kind of making decisions that I feel are the safest for her," (P09). Another mother indicated that she stopped contact between her child and co-parent for other safety reasons,

> I wanted her to see him because I understood the benefit, and I also wanted like a break even if they were in the backyard for half an hour, but if it wasn't safe, I really had to think about what was best for her…It was not seeing him for a while, and he didn't feel the same way. (P06)

The decision to pause their child's contact with a hostile co-parent means the mother may be accused by the courts to be alienating the child from their other parent. Lapierre et al. (2022) suggest that survivors of domestic violence have knowledge of the children's relationship to the perpetrator of violence and the negative impacts that witnessing or

experiencing the violence has had on the children so that after parental separation when the children continue to experience exposure to the multiple strategies used by perpetrators to control their mothers, these mothers can be left questioning their children's safety. In a qualitative study about the relationship between the perpetrator of violence and children ages 6-18, many children experienced relief to have limited or no contact with their other parent post parental separation (Lapierre et al. 2022). They did not feel alienated from their father. The decision to continue contact between children and the perpetrator of violence with the additional challenge of the Covid-19 pandemic on top of general concerns of their child's safety when with their father weighed heavily on mothers: "how do you navigate that when you have a child…and especially in the pandemic when it became another thing that divided us," (P25).

Lack of Supports

Mothers in our study had to balance all aspects of their children's needs, often acting as

single parents during school shutdowns when children were required to remain at home during the initial COVID-19 outbreak. Most mothers in our study managed employment schedules and full-time childcare with minimal assistance. This experience was reported as being overwhelming at times: "Honestly, I was so exhausted, because I just, I never had a break," (P01). Ensuring children engaged with schoolwork or managing young children without the assistance of daycare while they completed employment duties often created undue hardship and emotional frustration for both children and mothers, as noted by this participant:

> He [ex-parter] wasn't seeing her [child]. We[mother and ex-partner] got into a really huge fight…because of I think the built up stress on me and having everything on my plate and having zero breaks and zero help and zero support…he [was] just getting his CERB money and living happily and not having to see her, and [child] was sad about that…it was really hard (P31).

When children were not of school age, mothers who were required to work from home had to manage work schedules and the needs of their young children, often finding it difficult to manage: "so it was like absolutely chaos and I can't have that…" (P03). In many of these situations, mothers felt alone: "so it was tough, but then when I was working from home on my days, he [child] still came here [to mother's home]…while I was working from home…it was hard, it was super hard," (P32).

Some mothers in our study reported they had access to family or friends as supports to assist them with childcare

whereas others did not seek support due to fears of being reported to the authorities for violations of public health restrictions by their co-parents: "it was like physical support that I desperately need, and I had that revoked, just out of the fear of being like, oh my ex isn't going to like this," (P01). Additionally, there was an overall lack of guidance on how to manage shared parenting arrangements from the legal system during a world pandemic, as these mothers tell us: "like nobody knew what to do. In terms of visitation… well should you send your kids to places unsafe…" (P03), and, "what are their social bubbles? And the courts don't necessarily know. There isn't a written rule on how to deal with COVID because we're all kind of going by the seat of our pants with this right now," (P16).

Mothers in our study were also impacted by a lack of financial support during COVID-19. Feelings of stress and anxiety were reported by many mothers in our study when their co-parents did not assist them. Some mothers reported concerns around being able to provide basic needs for their children: "this year, hit me the hardest financially than I've ever experienced with any of my three kids… now we're at the point where I'm actually struggling to even meet basic needs. Um, so you[former partner] need to step in," (P09). Overall, mothers in this study reported greater needs for tangible and intangible support during the pandemic.

Finding Balance

Many mothers in our study reported that their relationships with their children benefitted from the shift due to stay-at-home orders. These changes included more one-on-one activities with their children and a slower pace of life: "there's lots of different things about that even about parenting for me that's become better because I don't have to rush out the door…" (P28). Some mothers took the opportunity to be focused on their children and live in the present: "I had to shift my focus from like survival mode… to like, okay I can't live in crisis anymore. I've got to be present in the moment and with my kids" (P02).

A couple of mothers reported improvements in their shared parenting relationship because of government restrictions and mandates (social distancing). They found the imposed mandates removed opportunities for face-to-face contact with their former partner and perhaps because it was government mandated, their former partner was more agreeable to alternatives. For example, some of the mothers were able to come to agreements with their co-parents to provide stability for children and reduce the risks of exposure. Accommodations, such as using Zoom phone calls instead of face-to-face contact were agreed upon, as noted by this mother: "but once COVID started and because we're in two different regions initially with travel cut off, he immediately agreed…He was like, 'it's fine. We'll do these video

calls," (P09). When they believed their children to be safe with the other parent, some of the mothers described that the parenting time with the co-parent was beneficial to them, as it provided a respite and time needed to work from home:

> Having no daycare, I was actually very thankful to have 50/50 parenting because stay at home parenting is not for me (laughs). It was very hard to be home with the kids all the time. And yeah, having their dad be able to take them during that time was very helpful. (P25)

The new way of life under the pandemic has left these mothers to negotiate a new way of coping/managing towards shared parenting. Social isolation mandates may help remove power from an abusive former partner in a sense and shift power to the survivor of violence who can rely on the mandates to enforce her distancing from him and sometimes the children by utilizing alternative such as zoom instead of face-to-face contact.

Implications

Along with increasing the vulnerability of women and children to violence, the impacts of Covid-19 lockdowns and 'stay-at-home' orders have created greater difficulty for many mothers with shared parenting arrangements with former partners who had been abusive to them. With the changes and rules brought by the public health restrictions and mandates, these mothers had the exiting stressors that go along with interacting with an abusive former partner and the added burden of negotiating new rules and arrangements with someone they likely were not able to communicate with well, and had to do so during a time of unknown health implications, isolation and disconnection from supports, increased alcohol consumption and unemployment (Boserup et al., 2020; Kaukinen, 2020; Kofman & Garfin, 2020; Usher et al., 2020; Van Gelder et al., 2020; Xue et al., 2020). In response to our questions about the impact of the global pandemic for themselves and their families, the mothers in our study expressed experiencing these same pressures of managing work from home, home schooling when schools shifted to remote learning, financial challenges due to lost income, and their own and children's general fears about the Covid-19 virus experienced by many families (Gadermann et al., 2021). The additional burden for these mothers was managing the shared parenting arrangements with a former partner, who continues coercive controlling tactics. Within this context, these mothers said they needed to follow public health mandates while ensuring their children's needs were met, yet they were experiencing coercive control behaviors from their former partners. Many of the mothers said they were

threatened; their ex-partner would report mothers for not following public health mandates. Their former partners refused to follow social distancing requirements with children, and some refused to follow court orders for shared parenting leaving the mothers with the sole parenting responsibilities during a time of the pandemic when other supports were unavailable, all to maintain power and control over the mothers. Although a small number of the women reported that they were able to find some agreement with their co-parent, most of the mothers described various ways through which their former partners used the public health orders to continue to exert control over them which included questioning their abilities as mothers to follow the public health mandates or, conversely refusing to describe their adherence to these guidelines which left the mothers fearful that their children might become infected. Anticipation of their former abusive partners reactions also increased fear and stress for some of these mothers, as they anticipated their partners' reactions if learning that they were diagnosed with the virus or if they brought their children to a family member for care.

Shared parenting is based on deeply held assumptions with many family law systems that parents will and should cooperate with each other to meet the best interests of their children (Kamińska, 2020). With the changes and restrictions brought as responses to the public health crisis, parents with shared parenting agreements were left to decide together how to manage child exchanges during the successive waves of the virus and through multiple changes to public health orders. Much of the guidance implored parents in co-parenting arrangements to work together and be flexible (Kamińska, 2020; Szalma, 2020), but without consideration of situation in which DV had occurred and one partner would deliberately use opportunities to control the other. The mothers in our study described the difficulty of achieving that needed cooperation with former partners, who have been physically violent or controlling during their cohabitating relationship. The lack of direction about how to continue to manage these exchanges between two homes and keep children safe was also troubling for many of these women, especially if their co-parent is denying the seriousness of the virus or has openly refused to follow the public health orders and restrictions.

Although exacerbated by the social and living conditions brought about through the pandemic, the concerns articulated by these mothers of continued control by their former partners and fears about the safety of their children are not new. There is a large body of research literature that documents the difficulties encountered by women who have experienced DV and their navigation of family law systems that fail to adequately provide protection from former abusive partners (e.g., Douglas, 2018; Elizabeth, 2017; Galátai et al., 2019; Gutowski & Goodman, 2020). In a review of Canadian family court decisions that included allegations of DV during the period of the strictest lockdown measures in Canada (March to June 2020), Koshan et al., (2021) note the decisions failed to consider coercive controlling tactics and the increased risks of DV during a global pandemic. The authors assert that these decisions reached during this period reflect a dominant pattern in family law jurisprudence established since the 1980s where claims of DV are minimized through a focus on discrete incidents of physical violence and threats, rather than patterns of ongoing and controlling behaviors embedded within relationships and a corresponding dismissal of fears of post-separation DV through a commitment to maintaining children's continued close contact with both parents post-divorce (Koshan et al., 2021). These researchers emphasize that the court-based decision-making during the first wave of the pandemic in Canada not only failed to take the allegations of DV into account but did not acknowledge the increased risk of DV as a result of the strict mandate measures such as social distancing and lockdowns.

In as much as the quarantine and stay-at-home measures created new opportunities for former partners to instill fear and exercise control, the experiences of the mothers who responded to our survey also demonstrate that they struggled with fears and control mechanisms used by their former partners that emerged through shared parenting arrangements that require that they maintain continued close contact with these co-parents. For example, when mothers told us they were fearful about testing positive for Covid-19 and what this would mean for parenting arrangements, the lack of flexibility in co-parenting schedules (changes in parenting time) and being afraid of "conflict" (verbal abuse, further controlling behaviors), is demonstrative of the pattern of coercive control and the resulting in the theme of fear of the unknown. These conditions existed pre-pandemic and will remain even as we begin to shift out of the pandemic. We appreciate that qualitative nature of this work and a sample size of 19 means our findings are not generalizable, yet, others noted above are highlighting similar concerns. The answer is not finding recommendations to keep women and children safe only during the pandemic, but to prioritize the safety of mothers and their children in post-divorce parenting decision-making. This call to action has been made in Canada (Canadian Women's Foundation, 2020; Ellis, 2021), the United States (Backes et al., 2020; Gutowski & Goodman, 2020; Khaw et al., 2021; Miller & Manzer, 2021), Australia (Douglas, 2018; Laing, 2017; Smyth et al., 2021), New Zealand (Elizabeth, 2017), Italy (Feresin et al., 2018), Sweden (Galátai et al., 2019), England (Barnett, 2015; Katz et al., 2020), and Ireland (Holt, 2017).

Compliance with Ethical Standards

Conflict of Interest The authors declare no competing interests.

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