

Reproductive Coercion

Assessment & Response by Domestic Violence Advocates

Objectives

- ▶ Identify experiences of Reproductive Coercion as faced by clients
- ▶ Name opportunities to develop best practices in programs and communities to respond to reproductive coercion

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Reproductive Coercion

- ▶ Active interference with contraceptive methods
- ▶ Behaviors intended to pressure or coerce a partner to become pregnant
- ▶ Threats or acts of violence if a partner does not comply with the perpetrator's wishes regarding pregnancy, abortion, or birth control

Tactics include:

- ▶ *Destroying or disposing contraceptives (pills, patch, ring)*
- ▶ *Impeding condom use (threatening to leave her, poking holes in condoms)*
- ▶ *Not allowing her to obtain or preventing her from using birth control*
- ▶ *Threatening physical harm if she uses contraceptives*

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Pregnancy Pressure and Extreme Monitoring & Control



“He knows I don’t want to have another child; I’ve told him before. He says it will be ok, we will get a house soon. Thank god I got my period yesterday, but he was furious.”

—NDVH Caller

IPV increases women’s risk for unintended pregnancy.

- ▶ Adolescent girls in physically abusive relationships were **3.5 times more likely** to become pregnant than non-abused girls
- ▶ **One-quarter (26.4%)** of adolescent females reported that their abusive male partners were trying to get them pregnant.
- ▶ Men who perpetrated IPV in the past year were more likely to report:
 - ▶ Inconsistent or no condom use during vaginal and anal sexual intercourse
 - ▶ Forcing sexual intercourse without a condom

NDVH Survey:

1 in 4 callers reported their partners had:

- Told them not to use any form of birth control
- Tried to pressure or force them to become pregnant
- Made them have sex without a condom

1 in 6 callers reported their partners had:

- taken off a condom during sex so that they would become pregnant

Assessment

- ▶ Does your partner refuse to use condoms when you ask?
- ▶ Has he pressured you to become pregnant when you didn’t want to be?
- ▶ Does your partner pressure you to have sex?

Sometimes women who have experienced what you shared with me also have had situations where they were made to have sex when they didn’t want to or weren’t allowed to use birth control or make decisions about pregnancy --their partners also controlled these aspects of their lives. Have you experienced anything like that?

Asking the question makes a difference.

“If you hadn’t asked me those questions (focus survey), I wouldn’t have thought of it like that. I wouldn’t have thought that he was a manipulative person. I really wouldn’t.”

- NDVH Caller



Advocacy Response to Victims of Reproductive Coercion

- ▶ Offer support and validation.
- ▶ Explore safe birth control options with her health care provider (or women’s health clinic)
- ▶ Inform about emergency contraception (EC)
- ▶ Safety plan around safe partner notification of STI



Broadening the Intervention

- ▶ Advocate engagement
- ▶ Domestic violence education
- ▶ Safety planning
- ▶ Group programming
- ▶ On-site health care services
- ▶ Health care resource and referral



Lessons Learned

- ▶ Address advocate values and beliefs
- ▶ Increase staff members' comfort and confidence
- ▶ Prepare advocates for how to assess, as well as how to respond to disclosures
- ▶ Support staff who may be triggered
- ▶ Formalize the initiative

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Building Community Capacity

- ▶ Train health care providers
- ▶ Provide materials for patients
- ▶ Partner with medical/nursing schools
- ▶ Outreach to family planning clinics & OB/GYN practices
- ▶ Assist hospitals in developing reproductive coercion screening policies and procedures

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THANK YOU!

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