

Reproductive coercion, intimate partner violence prevalent

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Enough women experience reproductive coercion – male behavior to control contraception and pregnancy outcomes – that a research team now recommends health care providers address the subjects with their patients and tailor family planning discussions and recommendations accordingly.

Researchers from Women & Infants Hospital of Rhode Island were part of a team that published "[Reproductive coercion and co-occurring intimate partner violence](#) in obstetrics and gynecology patients" in a recent issue of the *American Journal of Obstetrics and Gynecology*.

"Reproductive coercion, co-occurring with intimate partner violence, is prevalent among women seeking general obstetrics and gynecology care," notes Rebecca H. Allen, MD, of Women & Infants. She and Amy S. Gottlieb, MD, of the hospital's Women's Primary Care Center, participated in the study of 641 women ages 18 to 44, along with Chris Raker, ScD, a statistician in the hospital's Division of Research.

Study participants completed anonymous surveys. The survey defined reproductive coercion as:

- Pregnancy coercion, such as a male partner threatening to harm the woman physically or psychologically (with infidelity or abandonment) if she did not become pregnant
- Birth control sabotage, such as flushing oral contraceptive pills down the toilet, intentionally breaking or removing condoms, or

inhibiting a woman's ability to obtain [contraception](#)

"This is a far too common problem in this country. A study of 9,000 women by the National Center for Injury Prevention and the Centers for Disease Control and Prevention indicated that at least 9% of adult females in the United States have experienced reproductive coercion," Dr. Gottlieb explains. "Such coercion could have tremendous impact on a woman's ability to plan pregnancies or control her own fertility."

In addition, reproductive coercion has been associated with intimate partner violence, including threats, physical injury, or sexual abuse. This study is the first to examine both measurements – reproductive coercion and intimate partner violence – in the same relationship.

"We wanted to investigate the co-occurrence of these two types of male behavior toward female intimate partners," Dr. Gottlieb says.

Among the women who reported reproductive coercion, 32% experienced intimate partner violence in the same relationship. Nearly half of the women who experienced birth control sabotage also reported intimate partner violence, as did more than one third of the [women](#) who experienced pregnancy coercion.

"This is helpful information for [health care providers](#) who should tailor the reproductive care they deliver to each patient's particular situation," Dr. Allen says. "Asking questions about [reproductive coercion](#) and [intimate partner](#) violence is key to giving a woman the family planning counseling she needs."

Provided by Women & Infants Hospital

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