

If you need help, please call...

**National Domestic
Violence Hotline**

1.800.799.SAFE or 1.800.799.7233
1.800.787.3224 (TTY)
www.ndvh.org

National Dating Abuse Helpline

Call or visit website for hours of operation.
1.866.331.9474
1.866.331.8453 (TTY)
www.loveisrespect.org

Hotlines provide crisis intervention,
information, referrals and safety planning.

All hotlines are toll-free, confidential and
anonymous and most operate 24 hours a day
365 days a year.

Se habla Español

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represent the official views
of the Nevada State Health Division.



**The Nevada Network Against
Domestic Violence (NNADV)...**

...is a statewide organization that was
formed in 1980 to work toward the elimi-
nation of domestic and sexual violence
against all persons and the empower-
ment of women and children.

NNADV helps Nevada's communities
respond creatively and effectively to the
needs of domestic violence victims by
providing information to service providers
in the fields of domestic and sexual vio-
lence. In addition, NNADV provides edu-
cation and advocacy to the general pub-
lic and actively educates legislators on
issues of concern to Nevada families.



**Nevada Network Against
Domestic Violence**

250 South Rock Blvd. Suite 116
Reno Nevada 89502

Phone: 775.828.1115 or
800.230.1955 statewide
Fax: 775.828.9911
Website: www.nnadv.org

A program in your area:



**Nevada Network Against
Domestic Violence**

**Reproductive
Choices &
Intimate
Partner
Violence**



**"Controlling and violent relationships
come in many forms including
unwanted or mistimed pregnancies."**

NNADV wishes to acknowledge the information
and research provided by
Futures Without Violence
www.futureswithoutviolence.org &
www.knowmoresaymore.org.

Reproductive Choices & Intimate Partner Violence

How are reproductive choices related to intimate partner violence (IPV)?

Intimate partner violence is characterized by physical, sexual or emotional abuse that is used to control another person. It may also include coercion or threats made against a partner's reproductive health or reproductive decision-making. It includes a partner pressuring a woman to become pregnant against her will, forced sex and interference with the use of birth control methods. These tactics are referred to as "reproductive coercion."

Many people are unaware of reproductive coercion, which may include the following behaviors:

- Pressure to become pregnant early in the relationship or before the partner felt ready and/or threatening to leave her if she does not get pregnant;
- Pressure not only to become pregnant, but following with pressure to have an abortion;
- Intentionally exposing a partner to sexually transmitted infections (STIs);
- Attempting to impregnate the partner against her will;
- Intentionally interfering with the couple's birth control; and
- Threatening or acting violent if a partner does not comply with the abuser's wishes regarding contraception or the decision whether to terminate or continue a pregnancy.

How common is reproductive coercion and intimate partner violence?

Violence against women is a costly and pervasive problem, and women of reproductive age—in particular those ages 16 to 24—are at the greatest risk.

- As many as two-thirds of adolescents who become pregnant were sexually or physically abused some time in their lives.
- A study of over 450 adolescent mothers on public assistance found that 51 percent—and two in three of those who experienced IPV at the hands of their boyfriends—experienced some form of birth control sabotage by a dating partner.
- Forty percent of pregnant women who have been exposed to abuse report that their pregnancy was unintended, compared to just eight percent of non-abused women.
- Women disclosing physical violence are nearly three times more likely to experience a sexually transmitted infection than women who don't disclose physical abuse.

Source: "The Facts on Reproductive Health and Violence Against Women." Futures Without Violence (formerly Family Violence Prevention Fund), www.futureswithoutviolence.org.



Brochure developed 6/6/2011

If you are being abused...

If you recognize any of the behaviors relating to reproductive coercion, there is help available. There are people in your community (advocates & health care professionals) that can offer support and assistance. No one deserves to be hurt physically, emotionally, or sexually. You did not make the other person hurt you. It is not your fault and you are not alone!

Call the Nevada Statewide or National Hotline to locate a community-based advocacy program in your area and ask to speak with an advocate. All services are premised on support, empowerment, options and safety for you and your children. For a list of programs, visit the NNADV website.

If you are health care professional, you can make a difference...

Clinical professionals can discuss intimate partner violence and ask their patients:

- Has your partner ever used verbal demands, threats and physical violence in an attempt to force you to become pregnant?
- Has your choice of birth control ever been sabotaged by flushing birth control pills down the toilet, intentional breaking of condoms and removing contraceptive rings or patches?

If the woman's response is "yes" offer suggestions on "invisible" methods of pregnancy protection and forms of emergency contraception.

Conducting this brief screening for reproductive coercion, referring women to community-based advocacy programs and educating them about healthy relationships may significantly reduce the odds of abuse.

For more information on screening tools for health care professionals, contact the NNADV office.