

Making the Connection: Intimate Partner Violence (IPV) and Family Planning, Birth Control Sabotage, Pregnancy Pressure and Unintended Pregnancy

**Family PAC**  
Planning • Access • Care • Treatment

**Making the Connection:**  
Intimate Partner Violence (IPV) and Family Planning, Birth Control Sabotage, Pregnancy Pressure, and Unintended Pregnancy

Rebecca Levenson, MA - Family Violence Prevention Fund  
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June 15, 2010

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Of 2 Participant(s)  
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Feedback Results

Participants

2

**Floating Toolbar**

▶ Use the floating toolbar to communicate in today's session.

Participant List

Q&A

Chat

3

**Q&A**

Type Question

Type your question here. There is a 256 character limit.

Send

Ask: All Panelists

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4

**File Transfer**

2 Press Download

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5

**INTRODUCTIONS**

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Family Violence Prevention Fund


# Making the Connection: Intimate Partner Violence (IPV) and Family Planning, Birth Control Sabotage, Pregnancy Pressure and Unintended Pregnancy

**Goals for Today's Meeting :**

- Consider opportunities to educate providers about using enhanced EM and EC coding to pay for more staff time associated with more complicated visits
  - Documentation/Compliance/ Reporting--New Tool
- Train FPACT providers on assessment and intervention for reproductive control
  - Webinar/ other Training Opportunities
  - Jump Start Toolkits FPACT providers

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**WHAT WE KNOW**



**1 in 4** (25%) U.S. women and **1 in 5** (20%) U.S. teen girls report ever experiencing physical and/or sexual IPV.

CDC Morbidity and Mortality Weekly Report, February 2008, Silverman et al, 2001

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**VIOLENCE AND REPRODUCTIVE HEALTH ARE STRONGLY LINKED**



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**DATING VIOLENCE AND TEEN PREGNANCY**



Adolescent girls in physically abusive relationships were **3.5 times more likely** to become pregnant than non-abused girls.

Roberts et al, 2005

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**IMPACT OF VIOLENCE ON CONDOM USAGE**



Women who were *sexually abused as children* are more than **twice as likely** (58.6% vs. 24.9%) to have unprotected sex compared to women who did not experience child sexual abuse (CSA).

Fergusson et al, 1997

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**DATING VIOLENCE AND CONDOM USE**



Girls who experienced physical dating violence were **2.8 times more likely** to fear the perceived consequences of negotiating condom use than non-abused girls

Wingood et al, 2002

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**KNOWLEDGE ISN'T ENOUGH**

Under high levels of fear for abuse, women with high STI knowledge were **more likely to use condoms inconsistently** than nonfearful women with low STI knowledge.

Rafford et al, 2009

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**MALE PARTNER PREGNANCY INTENTION AND CONDOM MANIPULATION**

“ Like the first couple of times, the condom seems to break every time. You know what I mean, and it was just kind of funny, like, the first 6 times the condom broke. Six condoms, that's kind of rare I could understand 1 but 6 times, and then after that when I got on the birth control, he was just like always saying, like you should have my baby, you should have my daughter, you should have my kid.”

Miller, et al, 2007

17 yr. old female who started Depo-Provera without partner's knowledge

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**TEEN BIRTH CONTROL SABOTAGE**

Among teen mothers on public assistance who experienced recent IPV:

- **66%** experienced birth control sabotage by a dating partner
- **34%** reported work or school related-sabotage by their boyfriend.

Raphael, 2005

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**IPV AND ABORTION**

Prevalence of physical and/or sexual IPV among women seeking abortions:

**Lifetime: 27.3% - 39.5%**  
**Past year: 14.0% - 21.6%**

Lifetime: Evins et al, 1996; Glander et al, 1998; Keeling et al, 2004; Leung et al, 2002  
Past Year: Evins et al, 1996; Keeling et al, 2004; Woo et al, 2005; Weibe et al, 2003; Whitehead & Fanslow, 2005

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The risk of being a victim of IPV in the past year was nearly **3X HIGHER** for women seeking an abortion compared to women who were continuing their pregnancies.

Bourassa & Berube, 2007

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**ADOLESCENT RAPID REPEAT PREGNANCY**

Adolescent mothers who experienced physical abuse within three months after delivery were **nearly twice** as likely to have a repeat pregnancy within 24 months.

Raneri & Wiemann, 2007

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# Making the Connection: Intimate Partner Violence (IPV) and Family Planning, Birth Control Sabotage, Pregnancy Pressure and Unintended Pregnancy



## SEXUALLY TRANSMITTED INFECTIONS AND INTIMATE PARTNER VIOLENCE

More than one-third (38.8%) of adolescents girls tested for STI/HIV have experienced dating violence.

DECKER ET AL, 2005

### Partner Violence and STI/HIV

- Teen girls who are abused by male partners are **3x** as likely to become infected with STI/HIV
- Women and girls who are victims of IPV are **4x** as likely to be infected with HIV
- Men and boys who are abusive to female partners are **3x** as likely to have an STI

(Decker, 2005; Silverman, 2007)

### Male reproductive control of women who have experience intimate partner violence in the United States

<sup>1</sup> Guttmacher Institute  
<sup>2</sup> Family Violence Prevention Fund  
Moore, AM, Frohworth, L, Levenson, R, James, L and Miller, E. (Under Review)

### Sample Characteristics

- Three-quarters of the total sample had experienced pregnancy-controlling behavior
- ¾ of those women had experienced more than one type

### Destroying contraception

...By telling me not to use it or like when I had the pill, he used to act out and ask me why I am using them, [...] I am hiding to use it and stuff like that. Then, there was another time I started using the ring and he pulled it out of me. [He asked:] "What's this, who be advised you to be using this kind of stuff?" [...] I was like, "I thought I could actually hide this one, not knowing you will come up inside of me and pull it out of me."



— age 24, African American, some college

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## Threats to Promote a Birth

He really wanted the baby—he wouldn't let me have—he always said, "If I find out you have an abortion," you know what I mean, "I'm gonna kill you," and so I really was forced into having my son. I didn't want to; I was 18. [...] I was real scared; I didn't wanna have a baby. I just got into [college] on a full scholarship, I just found out, I wanted to go to college and didn't want to have a baby but I was really scared. I was scared of him.

*age 26, white, some college*


## Reproductive Coercion Defined:





- **BIRTH CONTROL SABOTAGE**
  - Active interference with contraceptive methods (flushing pills; poking holes in condoms; refusing to wear condom)
- **PREGNANCY COERCION:**
  - Threats or acts of violence by a male partner to promote a pregnancy
  - Extends to controlling behaviors regarding outcomes of a pregnancy




## Sexual Coercion Defined:





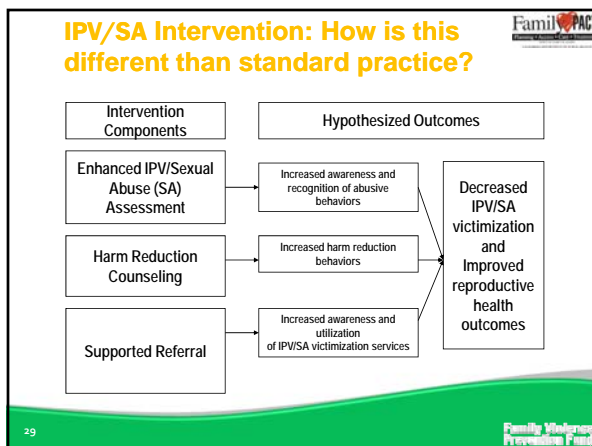


- Threats or acts of violence if woman doesn't agree to have sex when her partner wants it
- *Intentionally* exposing a partner to STIs
- Forced condom nonuse
- Threats or acts of violence related to STI partner notification



## A Community-Based Family Planning Intervention to Reduce Partner Violence

Elizabeth Miller, MD, PhD  
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 Jeffrey Waldman, MD  
 Jay G. Silverman, PhD

## Enhanced IPV/SA Assessment

- Assessment specific to sexual and reproductive health and relevant to visit
- Normalizing IPV/SA experiences and connecting those experiences to reproductive health
- Outcome: Increased awareness and recognition of abusive behaviors including reproductive control

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## Harm Reduction Counseling

- Harm reduction planning specific to sexual and reproductive health, for example:
  - Birth control that your partner doesn't have to know about
  - Emergency contraception
  - STI partner notification in clinic vs. at home
  - Safety planning regarding partner violence
- Outcome: Increased harm reduction behaviors

## Supported Referral

- Family planning counselors may help client contact relevant resources
  - Annotated referral list for violence related community resources
    - Names of staff, Spanish speaking, bus lines
- Educate clients that family planning clinic is safe place for women to connect to such resources
- Normalize use of referral resources
- Outcome: Increased awareness and utilization of IPV/SA victimization services

## FVPF Intervention/Education Tool:

Are you in an UNHEALTHY relationship?

**Ask yourself:**

- ✓ Does my partner mess with my birth control?
- ✓ Does my partner refuse to use condoms when I ask?
- ✓ Does my partner make me have sex when I don't want to?
- ✓ Does my partner tell me who I can talk to or where I can go?

If you answered YES to ANY of these questions, your health and safety may be in danger.

## Did you know...

Controlling and violent relationships come in many forms including unwanted or mistimed pregnancies?

**Ask all pregnant women:**

"Was your partner trying to get you pregnant when you didn't want to be?"  
 "Did your partner boss you or make you afraid?"

**Be supportive:**

- "I'm so sorry that happened to you"
- "You didn't deserve that- no one deserves that"

**Talk to your patients about:**

- Pregnancy options—"Are you worried he will hurt you if you don't do what he wants with the pregnancy?"
- Hidden or invisible birth control options like Depo-Provera, IUD, Implanon and emergency contraception to prevent future unwanted pregnancies

**Provide Referrals:**

All national hotline numbers for violence will connect patients to local resources and provide safety planning.

**Encourage your patients to call:**

National Domestic Violence Hotline  
1-800-799-7233 TTY 1-800-787-3224  
Non Domestic Violence Hotline  
1-800-531-4674  
Sexual Assault Hotline  
1-800-656-4674

Family Violence Prevention Fund  
www.endabuse.org

• Talk to your patients about: **Pregnancy options**—"Are you worried he will hurt you if you don't do what he wants with the pregnancy?"

• Hidden or invisible birth control options like Depo-Provera, IUD, Implanon and emergency contraception to prevent future unwanted pregnancies

## DID YOU KNOW YOUR RELATIONSHIP AFFECTS YOUR HEALTH?

Are you in a **UNHEALTHY** relationship?

**Ask yourself:**

- Does my partner make me have sex when I don't want to?
- Does my partner refuse to use condoms when I ask?
- Does my partner make me have sex when I don't want to?
- Does my partner tell me who I can talk to or where I can go?

If you answered YES to ANY of these questions, you are not alone.

- ✓ Pregnancy is a life decision for registered voters and should be an informed choice.
- ✓ Many have regretted their decision to become pregnant when they had to.
- ✓ If you're not sure, there are many options to help you decide.

If your partner is messing with your birth control or not using condoms with you, talk to your healthcare provider about the morning after pill to help prevent unwanted pregnancy.

If you or someone you know is afraid or needs help, call:

National Domestic Violence Hotline  
1-800-799-7233  
Non Domestic Violence Hotline  
1-800-531-4674  
Sexual Assault Hotline  
1-800-656-4674

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## Pilot Study

- Pilot study (T1: N=121, T2: 86),
  - 1 clinic
- Allowed the team to refine:
  - Intervention training
  - Survey instruments
- T1 (pre-intervention), exit survey (immediately post-intervention), T2 (3 months later)

## Intervention RCT

- 2-armed randomized-controlled trial (T1: N=1200, T2: ~900)
  - 4 large, urban, family planning clinics in the Western United States
  - Young adult women, 16-29 years old
  - T1 (pre-intervention), exit survey (immediately post-intervention), T2 (3 months later)

## Measuring Intervention Effectiveness

- What did we assess?
  - Lifetime and current experiences of physical and sexual violence, including forced sex
  - Sexual history, including STI
  - Reproductive history, including contraceptive use and pregnancy
  - Knowledge and attitudes about violence
  - Knowledge and use of violence services

## Baseline Results: Findings from Pilot Study

UC Davis School of Medicine, Sacramento, California  
 Harvard School of Public Health, Boston, Massachusetts  
 Family Violence Prevention Fund, San Francisco, California  
 Planned Parenthood Shasta Diablo Affiliate, Concord, California

## Baseline Cross-Sectional Sample of Sexually Active Women

Age	% Sample
16-19	42.8
20-24	33.2
25-29	24.0
Race/Ethnicity	
White	22.3
Black/African American	28.6
Hispanic	29.8
Multi-racial/More than one race	7.0
Other	12.4

N=1299 sexually active women

## Physical and Sexual IPV

- **53%** of women reported a lifetime experience of physical or sexual violence by a partner
- **17.6%** reported violence in the past three months.

N=1278 sexually active women (16-29)

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**Birth control sabotage was assessed via five items:**  
**“Has someone you were dating or going out with ever:”**

- 1) taken off the condom while you were having sex so that you would get pregnant?
- 2) put holes in the condom so you would get pregnant?
- 3) broken a condom on purpose while you were having sex so you would get pregnant?
- 4) taken your birth control (like pills) away from you or kept you from going to the clinic to get birth control so that you would get pregnant?
- 5) made you have sex without a condom so you would get pregnant?

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**Pregnancy coercion was assessed using an investigator-developed assessment consisting of the following six items: Has a partner ever:**

- 1) told you not to use any birth control (like the pill, shot, ring, etc)
- 2) said he would leave you if you didn't get pregnant?
- 3) told you he would have a baby with someone else if you didn't get pregnant?
- 4) hurt you physically because you did not agree to get pregnant?; and
- 5) tried to force or pressure you to become pregnant?

The final item for this assessment was:

- “Have you ever hidden birth control from a sexual partner because you were afraid he'd get upset with you for using it?”

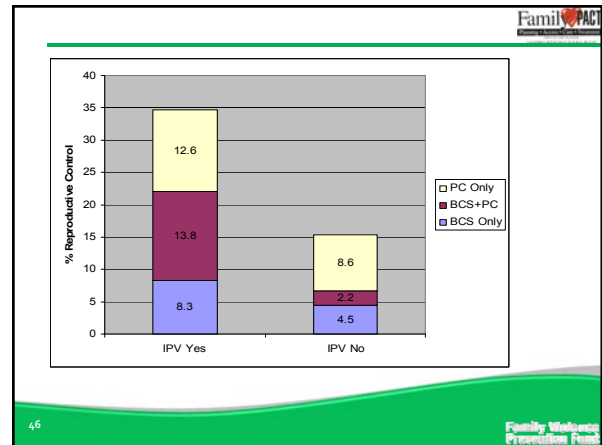
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**Reproductive Coercion, Pregnancy Coercion and Birth Control Sabotage**

- **25.7%** of women reported a lifetime experience of *reproductive coercion* by a partner
- **19.1%** reported *pregnancy coercion* from a partner
- **15.0%** of women experienced *birth control sabotage*

N=1278 sexually active women (16-29)

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**IPV, Reproductive Coercion and Unintended Pregnancy**

Among women reporting reproductive coercion (pregnancy coercion and birth control sabotage):

- **IPV increases risk for unintended pregnancy two-fold**
- IPV appears to be a necessary condition for reproductive coercion to increase risk for unintended pregnancy

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**Sexually Transmitted Infections and Partner Notification**

- Women exposed to IPV were accused of cheating in response to STI notification.
  - **5.4%** experienced threats of harm or actual harm in response to STI notification.
- Fear of partner response was more common among those women exposed to IPV and did not notify their partner (**43.8% vs. 17.7%**).
- Women exposed to IPV were more likely to be afraid to notify partners of an STI in the future.

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# Making the Connection: Intimate Partner Violence (IPV) and Family Planning, Birth Control Sabotage, Pregnancy Pressure and Unintended Pregnancy

**Awareness of Violence Related Services**

- While **60%** of IPV victims reported awareness about services
- **58%** NO IPV also aware of services
- Of those women who experienced IPV in the last **3** months only **13%** accessed victim service programs or utilized hotline numbers

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**Given the threats to sexual and reproductive health in this population, does an integrated clinic intervention work?**

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**Our Pilot Data Says, YES!**

Among women in the intervention who experienced recent partner violence:

- **71% reduction in odds for pregnancy coercion compared to control (0.29, CI 0.09-0.91)**
- Reduction in birth control sabotage not significantly different (0.71, CI 0.17 – 2.94)
- Awareness of IPV/SA-related services and reports of utilization of those services increased in both intervention and control groups (McNemar's Test p value <0.001) These increases did not differ between intervention and control arms.

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**Our Pilot Data Says, YES!**

- Post hoc analyses: Women receiving the intervention were 60% more likely to end a relationship because it felt unhealthy or unsafe (p= 0.013)
- In analyses stratified by recent IPV at baseline, these differences were not due to greater numbers of women reporting recent IPV in the intervention arm

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**Conclusions: Clinical Implications**

- Assess for reproductive coercion and pregnancy coercion and part of routine reproductive health
- Assess for both physical and sexual violence
- Assess reproductive coercion *before* discussing contraceptive options
  - Offer invisible BCM (IUC,EC, Implanon)
- Assess safety with positive pregnancy tests and STI partner notification
- Develop deeper relationships with local DV and SA organizations

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**Provider Perspectives:  
Planned Parenthood Shasta Diablo Sites**

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# Making the Connection: Intimate Partner Violence (IPV) and Family Planning, Birth Control Sabotage, Pregnancy Pressure and Unintended Pregnancy

**PP Shasta Diablo Experience**

- Implementation is a process
- Staff training/site roll out post study
- Staff support (EAP, staff's personal exposure, affiliate policies, opt out of assessments)
- Many staff hungry for these changes
- Handling resistance
- Goals and next steps
- PPLA and PPSB
- EHR

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**Integrating IPV/SA Intervention into Standard Clinical Practice: Providers Speak**

- *"I had a client that was using oral contraceptives but the partner kept getting them lost, so she decided to get an IUD after I explained her other options."*
- *"(A patient had) a positive pregnancy test where the patient did not want to be pregnant. (She) Needed a way to hide pills she got on the shot." (post abortion)*

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**Thank you for your dedication to patients and your commitment to improving women's safety, health and reproductive freedom.**



For patient education on the issue of reproductive control:  
[www.KnowMoreSayMore.org](http://www.KnowMoreSayMore.org)

For FVPF materials go to our website:  
[www.endabuse.org/store](http://www.endabuse.org/store)

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**Questions?**

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**Evaluation and Other Forms**

At the conclusion of session complete:

1. Evaluation Form
2. Sign-in Sheet

Forms can be downloaded at the end of this session by file transfer.

Those without web access can get forms by calling  
1-877- FAMPACT

**Thank You!**

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