

REPRODUCTIVE COERCION **Assessment tool** for domestic violence advocates

PRE-SCREENING CONSIDERATIONS AND PREPARATIONS

When working with people being victimized by their intimate partners, as always, be sure to establish a safe, comfortable, private, and supportive environment for whomever you may be speaking with, as this may put the person more at ease and promote full disclosure.

You should discuss the limits of confidentiality and mandatory reporting with every individual you serve. If you are not familiar with the limits and laws around confidentiality and mandatory reporting in your state or territory, contact your state domestic violence coalition or sexual assault coalition for information. If you are working with a minor being victimized, contact child protection agencies in your city or state for reporting requirements for minors experiencing violence.

Be sure to incorporate questions and information about reproductive coercion into all of your conversations with everyone you serve. A woman may not overtly realize that she is being victimized, she may not understand her rights in the relationship, or she may not know how to go about obtaining birth control or other family planning services.

If you haven't already done so, establish good relationships with organizations in your local area and state that provide services for and information about women's reproductive health and wellness so you can refer victims to these places when needed. Feminist women's health clinics and/or local Planned Parenthoods provide non-biased, comprehensive information, resources, and services about women's reproductive health and wellness.

To find a local reproductive health clinic or organization, please visit: www.ncadv.org/programs/reproductive-coercion/Resources.pdf

For more information about reproductive coercion, please visit: www.ncadv.org/programs/reproductive-coercion/Quick-facts-awareness-raising.pdf





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SAMPLE SCREENING QUESTIONS FOR ADVOCATES TO ASSESS FOR REPRODUCTIVE COERCION

- Are you currently pregnant or planning to become pregnant?

IF SHE IS NOT PREGNANT:

- Do you feel safe asking your partner to use birth control/condoms when you have sex?
- Does your partner respect your thoughts and wants around having children?
- Do you feel like your partner is pressuring you to become pregnant?
- Has your partner ever accused you of being unfaithful or tried to make you feel guilty for wanting to use birth control?
- Has your partner ever threatened you in any way in order to get you pregnant, or done something to you because you did not wish to become pregnant?
- Does your partner refuse to use birth control (e.g., condoms) or refuse to allow you to use birth control (e.g., oral contraceptives)?
- To your knowledge, has your partner ever tampered with any birth control method you have used (e.g., poked holes in condoms, purposefully not pulled out before ejaculating into you against your wishes, pulled out a vaginal ring, ripped off contraceptive patches, hid or destroyed birth control pills, pulled out an IUD)?
- Has your partner forced or pressured you to have sex when you did not want to (tried to guilt you, verbally or physically abused you, or threatened you in any way)?
- Does your partner refuse to help you financially with birth control?
- Has your partner ever forced you to get an abortion?
- Do you secretly use a form of birth control that your partner is not aware of to prevent a pregnancy because you are afraid of his reaction if he found out?
- Has your partner tried to convince you that using birth control is wrong or bad for you?
- Has your partner used language suggesting that if you had a child together you would be bound to him forever?
- Are you interested in obtaining birth control that cannot be easily detected such as an IUD or birth control shot?

IF SHE IS CURRENTLY PREGNANT

- Is this a pregnancy you wanted and currently want?
- Are you fearful of your partner regarding this pregnancy for any reason?
- Has your partner denied paternity?
- Do you feel your partner is forcing you to have this baby against your will?
- Do you feel your partner is trying to convince you to terminate the pregnancy against your will?
- Are you receiving prenatal care, and if not, is your partner doing anything to prevent you from doing so?
- Has your partner done anything to hurt you or tried to do something that may make you miscarry?
- Do you feel you have financial support from your partner to help you through this pregnancy (or abortion if chosen)?
- Has your partner threatened you in any way because you want to continue the pregnancy (or because you want to terminate the pregnancy)?
- Has your partner either refused to help pay for the costs of raising the child, or said or done something to make you believe he won't help you financially?
- Has your partner's behavior become more erratic or aggressive since you became pregnant?
- If you are continuing the pregnancy, are you fearful of how your partner may behave after you have the baby?
- Are you fearful or concerned about how your partner may treat the child after it is born?
- Do you feel you have the emotional support you want and need from your partner regarding this pregnancy?
- Do you feel you have the support you may need after the baby is born either from your partner or from others?

