

Reproductive Choices:

Understanding Your Rights







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What is reproductive coercion?

If your partner (or another family member with power over you) is controlling your reproductive health and decisions, you are experiencing reproductive coercion. This is a form of violence and you deserve care and support.

Victims of reproductive coercion are less able to protect themselves against sexually-transmitted infections, plan for if/when they want to have children, and have safe and pleasurable sex.

Reproductive coercion includes any time a partner:

- Pressures, guilts, or shames you to make reproductive decision you don't want to make
- Makes it harder for you to freely exercise your reproductive choice(s)
- Uses the possibility of a future child to trap you in the relationship or makes it harder for you to leave the relationship.

Examples of reproductive coercion before sex:

- Removing, hiding, or destroying birth control methods
- Lying about methods of birth control
- Monitoring your menstrual cycle and pressuring you to have sex during certain times of your cycle.

Examples of reproductive coercion during sex:

- Stealthing intentionally breaking or removing a condom during sex
- Not withdrawing during intercourse when that was the agreed upon method of contraception
- Refusing to use contraception or not allowing you to use contraception

Examples of reproductive coercion after sex:

- Forcing you to get an abortion or preventing you from getting one
- Threatening or acting violent towards you if you don't agree to continue a pregnancy or end one

Who is at risk?

Studies show that 25% of survivors experienced reproductive coercion in some form.

Reproductive coercion can happen to people of any gender, sexual orientation, backgrounds, and marital statuses however, women, girls, people with disabilities, immigrants, and LGBTQIA+ folks are more vulnerable to reproductive coercion. In South Asian cultures, people outside the intimate relationship—such as in-laws or older relatives—may also coercively regulate a victim's reproductive decisions.

What is Sexual Coercion and Violence?

If your partner (or someone with power over you) is tricking, threatening, or forcing you to have sex, you are experiencing sexual coercion. This is one form of sexual violence. Sexual violence is any sexual contact, behavior, or act that occurs without explicit consent of the victim.

Sexual coercion manipulates the victim into thinking they owe sex, usually to someone who has power over them (e.g., an abusive partner).

Some examples of sexual violence include:

- Attempted rape and rape
- Sexual threats and intimidation
- Incest sexual contact with a family member
- Child sexual abuse
- Sex trafficking
- Unwanted fondling or sexual touching
- Sexual harassment and street harassment
- Posting or sharing sexual pictures without permission
- Non-consensual sexting



Who is at risk?

Over half of women and almost 1 in 3 men will experience sexual violence in their lifetime. This staggering statistic is most likely an underestimation because sexual violence is often not reported due to cultural stigma, shame, fear of not being believed, or threats of further harm.

Anyone can experience sexual violence, but it is most likely to happen within an established relationship. Women and those in historically marginalized communities are more vulnerable to sexual coercion.

Consent

Consent is an active and ongoing process where both you and your partner can freely communicate desires, limits, and boundaries with fear or coercion. Consent allows partners to feel safe, communicate what they want, and how they want to continue forward. Some examples of questions that can ensure consent throughout sex include:

"Are you comfortable?" "Is this okay?" "Do you want to slow down?" "Do you want to go any further?"

Facts About Consent:

Consent is never implied. You must have consent every time you engage in sexual activity. Consent for one activity does not mean consent for another activity. You can change your mind at any time during the sexual activity. You are never required to have sex with someone else.

Getting Help:

Sexual violence and reproductive coercion are both tools that abusers use to gain and maintain power and control over their partner. If you have experienced these types of abuse, it is not your fault and help is out there. Remember, there's no timetable when it comes to recovering from sexual violence so take your time and be gentle with yourself.

Helplines:

24/7 National Domestic Violence Hotline: 1-800-799-7233

24/7 National Sexual Assault Hotline: 1-800-656-4673

<u>Daya Houston:</u> **713-981-7645** <u>www.dayahouston.org</u>

<u>Forensic Center for Excellence:</u> 281–306–6893 www.forensiccenterofexcellence.com

Sexual Assault Forensic Exam:

A **sexual assault medical forensic exam** is an empowering way for survivors to seek justice and make sure their body is safe. This exam is performed by specially trained medical professionals to treat you for trauma and possible infections as well as collect evidence, should you choose to report your assault.

What to expect:

- Immediate medical care will be provided.
- A detailed medical history will be taken during a talk with your nurse.
- A head-to-toe examination will be conducted, including the genital area, in order to document trauma to any part of the body.
- Forensic evidence will be collected including blood, hairs, pictures, and swabs.

How to prepare:

 Call for an exam as soon as you can after the assault. However in Texas, evidence is collected up to 120 hour after contact with the perpetrator.

- Avoid bathing/showering, combing your hair, or using the restroom (to the extent possible). If you have done any of these activities, evidence is still useful to collect and the exam can still provide safety.
- Avoid changing your clothes or place the clothes you were wearing in a paper bag to safely preserve evidence.

Your rights:

- You may obtain this exam and have evidence collected while you consider whether you want to report the assault. You do not need to call the police to have the exam.
- The exam is free to you.
- No part of the exam should be painful and if you feel pain, you should tell your nurse who is there to help.
- Your health matters. An exam can help you make sure your body is safe, get the treatment you deserve, and be connected to other supportive services.

If you need a sexual assault exam:

- During normal business hours, call Daya at 713–981–7645 for referrals and accompaniment to a sexual assault exam.
- Contact the The Forensic Center of Excellence 24/7 hotline at (281) 306– 6893.
- Make an appointment with The Forensic Center of Excellence online: <u>https://forensiccenterofexcellence.com/forensic-interview-scheduling</u>

Contraception & Local Resources

One way to protect yourself is to get educated about types of contraception that may be right for your personal situation. You can learn about <u>common methods of birth control</u>, explore what would meet your needs, and access contraception by:

- Talking to your individual doctor.
- Getting support from a community clinic in our area:
 - Hope Clinic: <u>https://www.hopechc.org/about-us/services/ob-gyn/</u>
 - Legacy Community Health: <u>https://www.legacycommunityhealth.org/services/obgyn-maternity/</u>
 - **Planned Parenthood**: <u>https://www.plannedparenthood.org/get-</u> <u>care/our-services/birth-control</u>
- Exploring mail options if you are facing transportation barriers:
 - o <u>https://heyfavor.com/consultation/birth-control/signup</u>
 - o <u>https://www.nurx.com/birthcontrol/</u>
 - <u>https://www.simplehealth.com/birth-control/get-birth-control-</u> <u>online</u>

Emergency Contraception:

Many victims of sexual violence and reproductive coercion are kept from using regular birth control. Emergency contraception can be a safe and effective way to prevent pregnancy after unprotected sex. Emergency contraception is not the same as an abortion. Pregnancy doesn't happen right after you have sex and emergency contraception can prevent pregnancy safely:

Three Main Types of Emergency Contraception

1. Levonorgestrel morning-after pills (such as Plan B)

- Works best when you take it within three days after unprotected sex.
- Effective for people up to 165 lbs.
- A prescription is not required and the medication can be purchased at your local drugstore or pharmacy.
- 2. Non-hormonal emergency contraception pills (such as ella)
 - Can be used for up to five days after unprotected sex
 - Effective for people up to 195 lbs.
 - Requires a prescription
- 3. **IUD**
 - Must be inserted within 5 days after unprotected sex
 - Effective for people of any weight
 - Requires an appointment with a doctor who will insert the device.
 Call your doctor or the community clinics in this toolkit as soon as possible since a same-day appointment may not be available.

Other considerations when choosing emergency contraception:

- Can you access emergency contraception without your abuser knowing? Consider any risks of retaliation and contact Daya to develop a safety plan.
- Take a pregnancy test if you haven't gotten your period within three weeks after taking the morning-after pill.
- While emergency contraception is safe, ask your pharmacist or doctor to explain potential side effects and what to expect.
- Emergency contraception does not protect you from sexually transmitted diseases.
- While an IUD can prevent pregnancy for 7–12 years after insertion, Plan B and ella are not effective as regular birth control methods.

Abortion

Rape-related pregnancy is a public health problem where a person becomes pregnant as a result of forced sex. These pregnancies occur because a victim no longer has control over their body or reproductive choices due to coercion, threats, violence, and control.

There are two types of abortions:

- 1. Medication abortion using two different hormonal medications
 - <u>https://www.plannedparenthood.org/learn/abortion/the-abortion-pill</u>
 - <u>https://www.plancpills.org/states/texas#pharmacies</u>
- 2. In Clinic abortion, a medical procedure to end your pregnancy
 - <u>https://www.plannedparenthood.org/learn/abortion/in-clinic-abortion-procedures</u>
 - <u>https://www.abortionfinder.org/</u>

If you're in Texas, you will need to travel out-of-state to get an abortion unless the abortion is required to save your life or to prevent serious risk to the your physical health. It is legal for you to leave Texas and get an abortion out-ofstate. Keep in mind that each states has different requirements including waiting periods before having your abortion appointment.

Supporting Survivors

Every 68 seconds, an American is sexually assaulted and almost 3 million women in the U.S. experienced rape-related pregnancy during their lifetime. Following the Supreme Court's ruling overturning Roe v. Wade and without a rape or incest exemption in Texas, there is a great need to support survivors who confide in you, start conversations about reproductive justice with those in your life, speak out in solidarity with survivors of sexual assault.

Best Practices to support survivors that confide in you

If someone reaches out to talk to you about their abuse, your job is to be as supportive and non-judgmental as possible while honoring your own boundaries. Support can mean providing resources, helping survivors connect to services, and listening.

Use simple and powerful statements of support:

- I believe you.
- It's not your fault.
- You are not alone.
- I care about you and am here to listen or help in any way I can.
- You didn't deserve this.
- I'm glad that you are sharing this with me, it takes a lot of courage.

Be a safe person for survivors to share their story with:

- Leave out "why" questions and don't try to investigate.
- Remind the survivor, more than once, that they are not to blame.
- Do not push the survivor to take actions or share information if they are not ready.
- Check in periodically. The event may have happened a long time ago, but that doesn't mean the pain is gone.
- Help the survivor identify people and organizations that can trust.
- Know your resources and honor your boundaries. If you feel overwhelmed, communicate with the survivor and help them locate a professional for help.

Starting the conversation

Topics like abortion, reproductive justice, and sexual violence are coming up around water coolers and across dinner tables. These conversations are not always easy, but they can help move the needle on how our society addresses sexual violence.

Tips for conversations:

- Stay civil by remembering you are talking to people who you love. Aim for a conversation rather than a debate.
- Set and adhere to boundaries. You can agree when and what to discuss and ensure everyone feels respected and heard.
- Ask questions that are open ended and allow you and your loved ones to examine the motivations and values behind your beliefs.
- Frame opinions appropriately. Start with "I feel..." or "I believe..."
- Share facts see below for some important statistics and information.



Facts to help frame the discussion:

- The CDC defines rape-related pregnancy as a public health problem where sexual violence and reproductive health connect.
- Every 68 seconds, an American is sexually assaulted and almost 3 million women in the U.S. experienced rape-related pregnancy during their lifetime.
- 8 out of 10 rapes are committed by someone known to the victim.
- Approximately one third of women report having unwanted sex with their partner and 14% of women report being raped by their spouse.
- Marital rape has the same physical and emotional effects of rape by a stranger.
- Of women who were raped by their partner, 20% reported that their partner tried to get them pregnant when they did not want to or tried to stop them from using birth control and 23% reported their partner refused to use a condom.
- <u>One in five</u> men have impregnated someone who's had an abortion.
- Abortions are overwhelming safe, common, and access is supported by 85% of women in our community.
- The Reproductive Justice movement, started by a group of Black women in Chicago in 1994, advocates for the human right to maintain personal bodily autonomy, have children, not have children, and parent children in safe and sustainable communities.



Advocacy Efforts

Reproductive freedom is critical to empowering survivors of violence. Abortions allow survivors to maintain autonomy over their body, life, and future. Around the world, communities are advocating in solidarity with survivors. Here are ways to support and join their efforts:

- Learn about South Asian SOAR and their commitment to Reproductive Justice: <u>https://www.southasiansoar.org/reproductivejustice</u>
- Follow the Youth Abortion Support Collective, a <u>national network of</u> <u>young people</u> committed to supporting other young people who need abortion care, information, and resources.
- Review the Guttmacher Institute's overview on state abortion laws to stay up-to-date: <u>www.guttmacher.org/state-</u> <u>policy/explore/overview-abortion-laws</u>
- Vote! Visit the League of Women Voters <u>website</u> to learn about the candidates in your district and what's on your ballot.
- Follow, support, and learn from advocates in Texas:
- <u>National Asian Pacific American Women's Forum Texas Chapter</u>
- The Lilith Fund
- <u>Texas Equal Access Fund</u>
- <u>Avow Texas</u>
- Donate to local direct service organizations like <u>Daya</u> to help survivors access services including counseling, case management, legal support, and accompaniment to a sexual assault exams.



Sources for toolkit:

Rainn.org

Indiana Coalition Against Sexual Assault

https://www.rainn.org/pdf-files-and-other-documents/Public-Policy/Issues/Marital_Rape.pdf

CDC.gov

https://www.cdc.gov/violenceprevention/sexualviolence/understanding-RRP-inUS.html

https://www.napawf.org/

Planned Parenthood:

www.plannedparenthood.org/files/3613/9611/7697/IPV_and_Reproductive_Coercion_Fact_Sheet_2012_FINAL.pdf

