We are mindful that not all pregnant people identify as female and not all perpetrators of abuse are male intimate partners. However, to acknowledge the experience of most patients of the Women’s we will use the language ‘woman’, ‘she/her’, ‘male’ and ‘he/him’ to reflect the statistics at the Abortion and Contraception Service.

The Royal Women’s Hospital listens to the experiences of many women. Some are in relationships that aren’t supportive or could be described as violent or abusive. They often tell us these relationships affect them and their decisions when pregnant and make it difficult for them to access help and support services.

What is violence against women?
One in four Australian women will experience family violence at some time in their life. Family violence can include:

- physical, emotional and sexual abuse
- controlling behaviour such as isolating women from family and friends
- harm to things women love such as pets or treasured belongings
- control of finances and money
- use of spiritual or religious beliefs to cause hurt or harm.

This violence is often from someone they know – partners, ex-partners, family members or friends. The following are ‘red flags’ or warning signs that may indicate a risk of experiencing violence or that current violence may increase:

- pregnancy and early years of motherhood
- recent separation
- unemployment
- threats of harm to a woman or her children
- access to weapons
- drug or alcohol misuse
- stalking.

The Women’s recognises that family violence and sexual assault are unacceptable and illegal. We believe that women have the right to live a life free from violence and can make decisions about what is best for their lives. We support women by:

- referring them to organisations that will explain their legal rights
- giving them information about support services
- providing information and education about what family violence looks like in women’s lives.
What is reproductive coercion?
Unplanned pregnancy can happen in relationships where women don’t always have control over their sexual and reproductive lives. Partners (or others) can pressure women emotionally, psychologically, or physically. It can be the pressure to:
• have sex
• get pregnant
• continue a pregnancy
• have an abortion.
This is called reproductive coercion. It includes:
• birth control sabotage (contraception is deliberately thrown away or tampered with)
• threats and use of physical violence if a woman insists on condoms or other forms of contraception
• emotional blackmail to pressure a woman to have sex or to fall pregnant, or to have an abortion as a sign of her love and fidelity
• forced sex and rape
• women and girls with disabilities being forced to take contraception to control their fertility.

Reproductive coercion can be the only type of violence a woman experiences, or it may be experienced along with other types of ongoing violence in their relationship.

Is this happening to me?
Being in an abusive relationship can make your decision about an unplanned pregnancy even harder. You may feel pressure from your partner to decide one way or the other. Such pressure can include name-calling, threats, intimidation, blackmail and assault.
Take a moment to read and reflect on the following statements. Has your partner or anyone in your life ever made similar comments to you?
• ‘I will leave you if you don’t have an abortion/have this baby.’
• ‘You’ve probably slept with other men anyway. I don’t believe it’s mine.’
• ‘If you loved me you would have an abortion/have this baby.’
• ‘I will tell your parents, friends, family or workplace if you don’t have an abortion.’
• ‘You are making me be violent because you won’t have an abortion/have this baby.’
• ‘You are killing your baby.’
• ‘You must have an abortion as I don’t want a kid.’
• ‘You must have this baby as I won’t let you have an abortion.’
• ‘If you don’t have an abortion, I will take the baby when it’s born.’

Take a moment to read and reflect on the following questions.
• Do you feel able to talk to your partner or sexual partners about using contraception like condoms or the pill?
• Has anyone ever messed or tampered with your contraception to try to make you become pregnant?
• Do condoms seem to break often, or your pills go missing?
• Does your partner respect your decision if you do not want to have sex?
• Have you ever been forced to have sex when you did not want to?
• Do you feel ok about talking to your partner about if or when you might want to get pregnant? Would he always respect your wishes about this?
• Has anyone ever made you feel afraid if you didn’t do what they wanted you to do with a pregnancy – whether forcing you to continue OR end your pregnancy?

If any of the above statements, behaviours or threats are familiar you may be experiencing reproductive coercion, and it is important to reach out to a trusted health professional for support like your local doctor (GP), a counsellor or social worker.

**Regaining control**

Unplanned pregnancies in violent relationships can lead to a ‘double crisis’. Women often feel the crisis of the actual violence and the crisis of the unplanned pregnancy. It can feel as though power and control over a situation have been taken away. It’s during the crisis of an unplanned pregnancy that women often begin to regain power and control over their lives. This can happen when women make the best decision they can, for themselves, and for the future direction of their lives.

If you have an unplanned pregnancy, you might find it helpful to discuss your situation with a pregnancy options counsellor or family violence service.

**Useful phone numbers**

1800MyOptions 1800 696 784

Lifeline 13 14 11

[Safe Steps - Family Violence Response Centre](1800 015 188)

[1800 RESPECT](National Sexual Assault, Domestic Family Violence Counselling Service 1800 737 732)

[InTouch - Multicultural Centre Against Family Violence](1800 755 988)

[Police 000](

**Do you need an interpreter?**

If you need an interpreter, remember you can ask for one.

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**Disclaimer:** This fact sheet provides general information only. For specific advice about your or your baby’s healthcare needs, you should seek advice from your health professional. The Royal Women’s Hospital does not accept any responsibility for loss or damage arising from your reliance on this fact sheet instead of seeing a health professional. If you or your baby require urgent medical attention, please contact your nearest emergency department.

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