



Intimate partner violence is associated with a decrease in women's contraceptive use

Global study shows women who experience domestic violence are less likely to use contraception, exposing them to sexually transmitted diseases and unintended pregnancies

Domestic violence takes many forms. The control of a woman's reproductive choices by her partner, called reproductive coercion, is one of them. A major study published in PLOS One, led by McGill PhD student Lauren Maxwell, showed that women that are abused by their partner or ex-partner are much less likely to use contraception, which may expose them to sexually transmitted diseases and lead to more frequent unintended pregnancies and abortions. These findings could influence the way that physicians provide contraceptive counselling.

Examining all studies that addressed the relationship between violence and contraceptive use published over the last 30 years, researchers found that women who experience physical or sexual intimate partner violence are less likely to use condoms, which may explain the higher incidence of HIV among women in violent partnerships. Women in violent relationships may resort to contraceptive methods that they don't need to negotiate with their partners; for example, contraceptive injections or sterilisation in developing countries, or intrauterine devices in Western countries.

These results come from an analysis that synthesizes findings from the highest quality studies existing on the subject, from populations in the US, India, South Africa, Zimbabwe, and Nicaragua. The results suggest that partner violence has a causal effect on women's use of contraception and may affect women's use of male condoms with their partners. The research team selected studies that excluded other potential factors that could confound the relationship between violence and contraceptive use and studies in which questions on violence were always asked before questions on contraception. Researchers found that the odds of using contraception were 53% lower for women who experienced intimate partner violence than for women who did not experience violence.

"When talking to abused women, I had often heard them mention that they were opting for contraceptive methods that they could hide from their male partners," Maxwell says. "I wanted to know whether, across countries, women who experience intimate partner violence are less able to use contraception, which might explain why rates of abortion and HIV transmission are higher among women abused by their partners." The World Health Organisation cites studies in African countries that found that women who experience partner violence are three times more likely to contract HIV than women who do not experience violence.

What these findings mean for family planning

This study indicates that global efforts to improve access to contraception, like the recently announced Family Planning 2020 initiative, need to take intimate partner violence into account. One of the Millennium Development Goals set by the United Nations in 2000 was to achieve universal access to reproductive health by 2015. “We have not met our targets in terms of access to contraception,” Maxwell says. “This is detrimental to maternal and child health and to women’s education. To improve both, we should consider partner violence when creating programs designed to improve women’s access to contraception.”

For example, some NGOs involve male partners in contraceptive counselling in an effort to improve contraceptive uptake or continuation. This research suggests that it is important to screen for intimate partner violence before including men in the conversation around contraception. If not, the presence of violent partners could undermine efforts to help women access contraception.

These research findings have implications for medical training. “This study means physicians should be trained to screen for intimate partner violence whenever they do a contraception consult,” says Dr Angel Foster, an Associate Professor of Health Sciences at the University of Ottawa whose research focuses on improving the training of health professionals and who did not participate in the study. “Learning how to screen for domestic violence would be valuable for family doctors, OBGYNs, nurse practitioners and midwives.”

“This study is a powerful reminder of the impact of intimate partner violence on the lives of women, says Dr Foster, who holds a chair on Women’s Health Research.

Study co-authors included Karen Devries (London School of Hygiene and Tropical Medicine, UK); Danielle Zions (McGill University); Jacquelyn Campbell and Jeanne L. Alhusen (Johns Hopkins University School of Nursing, USA). This study was supported by the Maternal and Child Health Equity Project (MACHEquity), funded by the Canadian Institutes of Health Research.

Estimating the Effect of Intimate Partner Violence on Women’s Use of Contraception: A Systematic Review and Meta-Analysis.

Maxwell L, Devries K, Zions D, Alhusen JL, Campbell J

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