Exploring Reproductive Coercion and IPV: Findings from the Bandebereho RCT in Rwanda

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Reproductive coercion (RC) by a male partner is a lesser studied form of intimate partner violence that undermines women’s reproductive autonomy and can negatively impact their health and well-being.

Such coercion may take the form of:

- pressuring, threatening or directly interfering with a woman’s reproductive decisions
- it may or may not co-occur with other types of IPV
Bandebereho Intervention

A gender-transformative intervention for couples who are expecting or current parents (ages 21-35) of children under five years

Uses fatherhood as an entry-point to recruit men to:

- Prevent violence against women & children
- Promote reproductive, maternal, and child health
- Build healthier couple relations
- Promote men’s caregiving

**Pilot** with 1700+ couples from 2013-15
Research Question

Does the Bandebereho intervention – which prevents IPV and promotes couple communication & contraceptive use – have any impact on reproductive coercion?
A randomized controlled trial with 1,199 couples

Eligible fathers

Treatment (Bandebereho) 575 couples
Control (no intervention) 624 couples

Randomization at the individual level

Participants surveyed at multiple time points:

- Baseline 2015
- 9 months
- 21 months 2016
- 76 months 2021

1,162 women (97%)
1,020 women (85%)
5 questions adapted from the Freedom from Coercion sub-scale of the Reproductive Autonomy Scale (Upadhyay et al, 2014)

In the past year, my partner has:

- Pressured me to become pregnant
- Prevented me from using a contraceptive method when I wanted to use one
- Interfered with or made it difficult for me to use a contraceptive method when I wanted to use one
- Made me use a contraceptive method when I did not want to use one
- Forced or pressured me to use one type of contraceptive method, when I wanted to use a different method
The intervention targeted young couples, many of whom were pregnant when they entered the intervention:

- 65% expecting a child
- Average of 1.5 children already

Average age of participants at baseline:
- Men 28.7 years
- Women 26.6 years

We are sharing findings from two time points – at 21 and 76 months after the baseline

In the intervening years:
- Couples may have completed their childbearing
- There has been considerable policy, program and health service focus on increasing couples use of family planning
Reproductive Coercion

Women’s experience of any reproductive coercion by male partner in the past year

- Yes: 59.8% (21 months)
- No: 40.2% (21 months)

- Yes: 59.3% (76 months)
- No: 40.7% (76 months)
## Types of Reproductive Coercion

Among women reporting experiencing any reproductive coercion:

<table>
<thead>
<tr>
<th>Type</th>
<th>21 months (n=446)</th>
<th>76 months (n=408)</th>
</tr>
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<tbody>
<tr>
<td>Pregnancy coercion only</td>
<td>43.9%</td>
<td>33.8%</td>
</tr>
<tr>
<td>Contraceptive coercion only</td>
<td>22.9%</td>
<td>28.4%</td>
</tr>
<tr>
<td>Both pregnancy &amp; contraceptive coercion</td>
<td>33.2%</td>
<td>37.7%</td>
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Associations with IPV

At 21 months, women who experienced reproductive coercion in the past year were roughly **2.5 to 4 times** as likely to also report experiencing:

**Severe emotional IPV**  \( \text{OR}=3.95, \text{ 95% CI } 2.54-6.15, \ p<0.001 \)

**Sexual IPV**  \( \text{OR}=2.84, \text{ 95% CI } 2.18-3.70, \ p<0.001 \)

**Physical IPV**  \( \text{OR}=2.65, \text{ 95% CI } 2.08-3.39, \ p<0.001 \)

Findings similar at 76 months, with some variations
At 21 months, there is a significant association between RC and lower use of contraception.

**pregnancy coercion:**
(pressure to become pregnant)
*less likely to use contraception*
(OR=0.57, 95% CI 0.44-0.73, p<0.001)

**contraceptive coercion:**
(pressure/force to use contraceptives)
*more likely to use contraception*
(OR=1.23, 95% CI 0.90-1.68, p=0.19)

At 76 months, there is no overall association with RC and contraception; but similar trends are present for pregnancy and contraceptive coercion.
At both time points, Bandebereho participants were less likely to report reproductive coercion than women in the control group.
Conclusions

- The gender-transformative Bandebereho intervention positively impacted women’s experience of reproductive coercion.

- Addressing power imbalances and increasing couple communication may reduce men’s coercion over women’s reproductive decisions.

- However, interventions should consider and emphasize women’s reproductive autonomy, particularly when engaging men and in contexts with external pressures to use contraception.

- The growing number of interventions with men or couples that aim to address both IPV and family planning:
  - can be strengthened to prevent reproductive coercion
  - provide opportunities to better understand RC
Murakaze
Thank you
Gracias
Merci