



**PA House Democratic Policy Committee Policy Hearing on Post-Roe PA  
August 11, 2022**

**Women's Center & Shelter remarks submitted and to be delivered by Nicole Molinaro, President/CEO**

Good morning. My name is Nicole Molinaro and I am the President and CEO of Women's Center & Shelter of Greater Pittsburgh, one of the first six domestic violence (DV) programs in the country and a leading DV organization in our state. Each year, WC&S serves over 7,500 adult domestic violence survivors and their children, and we also facilitate a large, county-approved batterers intervention program serving those who use violence.

I am here on behalf of the millions of Pennsylvanians who, over their lifetimes, have been victims of domestic violence. This includes many who have experienced reproductive coercion and rape at the hands of their partners. These victims often don't have a voice in their own lives, never mind a voice in the legislative process. Thank you for thinking of and caring about them during this process.

You may be wondering where the number comes from that I just quoted of "millions" of victims in Pennsylvania. This is based on the CDC statistic that 1 out of every 4 women and 1 out of every 10 men have experienced serious abuse, sexual violence, or stalking in an intimate relationship. Extrapolating this to the current population of Pennsylvania (13 million), there are over three million domestic violence survivors currently living in our state. And specific to sexual abuse, in a nationally representative sample, researchers Stockman et al reported that approximately one out of every four women reported coerced sex. These staggering statistics speak for themselves.

Domestic violence, also called intimate partner violence, is more than physical or sexual violence. It's a pattern of power and coercive control that one person uses over their partner that is aimed at lowering the victim's self-esteem and safety. This pattern of abuse typically puts the victim in more and more danger over time. It may look like physical violence, sexual violence, emotional abuse, psychological abuse, financial abuse, or all of these at once, plus any number of other types of abuse. For this hearing's purpose, though, we are talking specifically about sexual violence as part of a pattern of coercive control.

Those who abuse their partners use a manipulative pattern of power and control – and they maintain power within their relationships by undermining their partners' economic security, health, safety, and autonomy. They often weaponize survivors' sexual and reproductive choices as tools of violence. Taking away victims' or survivors' right to choose whether or not to have a baby jeopardizes their mental and physical health – and in some cases, their lives – and perpetuates the cycle of violence.

Those who use abuse often escalate and become more violent when their partner becomes pregnant. Pregnancy significantly increases the risk of intimate partner homicide, which is the leading cause of death among pregnant and postpartum people. Abusers may also intentionally impregnate victims against their will to keep them trapped in the relationship. If a survivor is forced to give birth, the physical, emotional, and economic toll of pregnancy, childbirth, and raising a child can make it harder for

survivors to leave. Furthermore, a shared child creates a legal relationship between the abuser and the victim that is nearly impossible to sever, keeping the victim trapped in the cycle of violence for decades.

So, what do the numbers say?

- Domestic violence is more common than any other health problem during pregnancy.
- Nearly 20% of pregnant people experience violence during pregnancy, with pregnant adolescents and those with unintended pregnancies at an increased risk.
- 1 in 6 cases of abuse start while the victim is pregnant.
- Lack of access to abortion care has a disproportionate impact on low-income people, Black people and other people of color, transgender and non-binary people who can get pregnant, rural communities, people with limited English proficiency, people with disabilities, and others who already struggle to access healthcare.

At Women's Center & Shelter of Greater Pittsburgh and in domestic violence programs across the state and country, we see the destructive impact and traumatic aftermath of abuse every single day. We hear the most private details of people's lives; and yet, survivors we've developed deep relationships with often only disclose they've been sexually abused when they trust us enough to feel safe to do so, which is sometimes months into the professional relationship. When we name "reproductive coercion," most of our clients know exactly what it is because they've experienced it, but, powerfully, they haven't realized it's so common that it is actually named and studied. And although no two survivors – or their stories – are the same, it is quite common for a survivor to tell us they experienced the first instance of abuse or more severe abuse while they were pregnant.

So who am I here on behalf of? I am here on behalf of Anne, whose partner raped her repeatedly and sabotaged her birth control throughout their marriage, resulting in pregnancy after pregnancy. When Anne was finally able to escape and reach out for our help, she had 7 children under the age of 8, and she had just discovered she was pregnant with her 8<sup>th</sup> child. She had complex medical problems caused by the repeated pregnancies in quick succession and from the physical injuries, including traumatic brain injuries, that she had endured over the years. She was exhausted, her self-esteem was non-existent, she had no money of her own, and she hadn't felt safe in her own home in longer than she could remember. Anne's life was at risk carrying the baby, due to both the violence and the damage to her own body from past pregnancies. She felt unable to care for herself, her children, and her current pregnancy. She knew the only way for her to live – and for her 7 young children to live – was to leave, and she dug deep for the bravery to do so. Anne got an abortion as soon as she was able. This courageous act of survival, of exercising her right to choose, allowed Anne to hit re-set on her life. She was able to start re-building a life free from violence for her 7 young children and herself. It has been a long road for Anne, and her journey has been difficult, but finally harnessing her right to choose to not have an eighth child, another child conceived of rape and violence, made all the difference for her and her children.

I'm also here on behalf of Shayla, a domestic violence survivor who was pregnant as a result of forced prostitution by her abusive partner. Shayla required a therapeutic termination of her pregnancy; this means there was a medical necessity to induce abortion because Shayla was at risk of substantial harm, and her pregnancy was unviable. Shayla's life was at risk if she didn't have an abortion. Her life was saved by receiving this urgent medical care from a reputable provider, financial help, and support from an empathetic advocate. The abortion kept Shayla medically safe, as well as helped her to take the first step toward physical and emotional safety from her abuser.

It can be remarkably difficult to overcome the numerous barriers to leave an abusive relationship, regardless of the circumstances. Add to the logistic and emotional barriers that leaving is the most dangerous time for a survivor, with 73% of those who are killed being killed when they try to leave or after they've left. And add to this when a survivor is pregnant; taking away their right to choose often also takes away the ability for a victim to safely leave their abuser and create a new life for themselves. When survivors are able to choose for themselves whether to continue a pregnancy that was conceived using manipulation, fear, and violence, and when they have access to safe and legal abortion if they choose to not continue the pregnancy, it protects victims and survivors of domestic violence, both at the time of pregnancy and for years to come. Access to reproductive healthcare can be nothing short of lifesaving for the many victims of domestic violence who are trying to live their lives free from abuse.

Everyone deserves to live free from abuse and violence. Thank you for your time and consideration of how reproductive choice greatly impacts such a vulnerable population, now and into the future.