

Sexual and reproductive abuse - Key Literature

Australia

ANROWS, [Intimate partner sexual violence](#): Research synthesis.

This resource provides an overview of ANROWS evidence relating to intimate partner sexual violence (IPSV). It includes key facts on prevalence, as well as an overview of key issues, including evidence that:

- > IPSV is a high-risk indicator.
- > IPSV has serious and long-lasting effects.
- > IPSV usually co-occurs alongside other tactics of DV.
- > Community attitudes toward issues of sexual activity and consent show that sexual violence, and in particular IPSV, is not understood well, or taken seriously.
- > IPSV is difficult to name and recognise.
- > There are many barriers to reporting IPSV.
- > Incidents are underreported and hard to prosecute.
- > Responses to and services for IPSV need further resourcing and development.
- > Education and prevention programs do not sufficiently address IPSV.
- > Current research on IPSV faces limitations with small population groups and definitional issues.

Australian Bureau of Statistics, *4510.0 - Recorded Crime - Victims, Australia, 2020*

[Victims of Domestic and Family Violence-Related Offences](#)

This chapter presents experimental data about victims of selected Family and Domestic Violence (FDV) –related offences. Victims of selected offences have been determined to be FDV–related where the relationship of offender to victim, as stored on police recording systems, falls within a specified family or domestic relationship or where an FDV flag has been recorded, following a police investigation.

Key findings include:

- > FDV-related homicide victims accounted for over a third of total homicide victims, and females accounted for over half of all FDV-related homicide victims.
- > FDV-related assault is mostly likely to occur in the age range 25-34 years; and, across all states and territories, females are more likely than males to be victims – at least three times as likely, and up to

six times more likely.

- FDV-related sexual assault accounted for over a third of total sexual assaults and there are six times as many female victims as male victims.

Australian Bureau of Statistics (ABS), *Personal Safety, Australia, 2016* , ABS cat no. 4906.0 (2016).

This release presents information from the Australian Bureau of Statistics' (ABS) 2016 Personal Safety Survey (PSS).

The survey collected detailed information from men and women aged 18 years and over about their experiences of violence since the age of 18, as well as experiences of current and previous partner violence, stalking, physical and sexual abuse and harassment, abuse before the age of 15, and general feelings of safety.

Almost one in five women reported experiences of sexual violence (18% or 1.7 million), compared with approximately one in twenty men (4.7% or 428,800). Further, '[w]omen were eight times more likely to experience sexual violence by a partner than men. Approximately 5.1% of women (480,200) experienced sexual violence by a partner, compared with approximately 0.6% of men (53,000)'. See Table 3 for more detail.

Cox, Peta, *Sexual assault and domestic violence in the context of co-occurrence and re-victimisation: State of knowledge paper* (ANROWS, 2015).

This literature review examines the intersection between sexual assault and domestic violence. In relation to consent, the paper highlights that the ability to provide consent for sexual activity may be compromised when it is occurring within the context of the perpetration of intimate partner violence (IPV). This is because the perpetration of IPV creates a climate of ongoing fear or control (p 29). Additionally, for sexual violence perpetrated by intimate partners, demonstrating lack of consent is complicated because sexual violence may have been perpetrated in a context where consensual relations may have taken place before and/or after the assault, and in the context of established patterns of sexual behaviours that do not include verbalised consent (p 29).

Understandings of consent in established relationships affect how intimate partner sexual violence is framed both by victims as well as third parties. See pages 47-48 for a discussion of the way social norms affect what is understood as “real rape” (non-consensual sexual activity). Importantly, research has found that intimate partner sexual violence is viewed by the community as both less serious and more justifiable than sexual assault by a stranger or acquaintance (p 47). Indeed, the greater the familiarity between the victim/survivor and perpetrator, the greater likelihood that reports will be considered a lie or misinterpretation (p 47).

IPSV victims/survivors themselves often face difficulty in recognising sexual violence as violence, assault or rape (p 26). Similarly, research shows that younger women rarely identify sexually coercive behaviours by boyfriends as sexual assault, and tend to excuse sexually violent behaviour by saying that their own behaviour justified the assault or by pointing to extenuating circumstances (p 48). This again points to the strength of commonly held perceptions of what “counts” as consensual or non-consensual sexual activity.

Easteal, Patricia, and Christine Feerick, ‘Sexual Assault by Male Partners: Is the Licence Still Valid?’a (2005) 8(2) *Flinders Journal of Law Reform* 185.

This research examines appellate cases from various Australian jurisdictions, ACT Department of Public Prosecution files over a ten year period, Canberra Rape Crisis statistics, interviews with solicitors and counsellors and in-depth narratives of survivors. The research examines the crime that results from the intersection of domestic violence and sexual assault which they call 'partner rape'. It identifies low disclosure and reporting rates of partner rape, high discontinuance of prosecution and jury non-conviction in the ACT, and evidentiary issues of prior violence and reliability of victim/witness testimony. The authors do not deny judicial reasoning for not admitting evidence of prior violence, such as risk of unfair prejudice, however they argue for a more balanced approach in partner rape trials on the basis that evidence of prior violence brings context to the victim’s fear of the defendant: domestic violence and its sexual component are not discrete acts and can only be understood through looking at the big picture; this evidence also explains the victim’s feelings and the reasons for their reaction at the time. The authors express a view that a greater emphasis on the victim’s interests is required, and that this would be facilitated if judicial discretion to exclude evidence were not exercised as stringently against the victim in favour of the defendant with regard to evidence of prior violence.

Heather Douglas and Katherine Kerr, ‘Domestic and family violence, reproductive coercion and the role for law’ (2018) 26(2) *Journal of Law and Medicine* 341-355.

Although sexual abuse has been extensively analysed in the literature, little is known about the extent and nature of reproductive coercion – an issue that has far-reaching consequences which often manifest in poor

sexual and reproductive health outcomes, and may also result in pregnancy and parenting in a violent relationship. Reproductive coercion is broadly defined as the interference with a woman's reproductive and sexual autonomy. The authors draw on interviews conducted with women who had experienced DFV and were involved with the legal system. Results indicated a link between sexually abusive behaviour and reproductive coercion. Not only does reproductive coercion sometimes occur within a context of violent and controlling behaviours, but those behaviours may reinforce or co-occur with the perpetration of reproductive coercion. Some of the women in the study described being pressured into doing various sexual activities they were not comfortable with. Other women perceived sexual abuse as normal and did not usually name the behaviour as sexual assault or rape. In a violent intimate relationship, the underlying dynamic is one where the abuser uses numerous tactics to assert power and control over his partner. For some women, sex and reproduction are part of that dynamic.

Heenan, Melanie, 'Just "Keeping the Peace": A Reluctance to Respond to Male Partner Violence' (Australian Centre for the Study of Sexual Assault Issues No 1, Australian Institute of Family Studies, 2004).

This review provides a comprehensive overview of a variety of Australian and international research and literature on sexual violence in intimate partner relationships with specific discussion of women's (including Indigenous women) experiences. This review identifies some of the reasons victims might be reluctant to disclose a partner' or ex-partner's sexually abusive behaviour. These include fear of retaliation, fear of rejection by family and friends, fear of the loss of the relationship, feeling ashamed or that they have failed in their perceived duty as a wife, and hope that things will change. A victim may be at a heightened risk of sexual abuse by their ex-partner after the relationship has ended.

Hegarty, Kelsey, and Robert Bush, 'Prevalence and Associations of Partner Abuse in Women Attending General Practice: A Cross-Sectional Survey' (2002) 26 (5) *Australian and New Zealand Journal of Public Health* 437.

This research reports on the results of a survey of women attending general medical practitioners in Brisbane's inner South region during 1996. 1,836 surveys were completed. One in ten women reported they experienced sexual abuse in their intimate relationship.

Henry, Nicola, Asher Flynn and Anastasia Powell, *Image-based sexual abuse: Victims and perpetrators* (Australian Institute of Criminology Report No. 572 March 2019).

Report abstract:

Image-based sexual abuse (IBSA) refers to the non-consensual creation, distribution or threatened

distribution of nude or sexual images. This research examines the prevalence, nature and impacts of IBSA victimisation and perpetration in Australia. This form of abuse was found to be relatively common among respondents surveyed and to disproportionately affect Aboriginal and Torres Strait Islander people, people with a disability, homosexual and bisexual people and young people. The nature of victimisation and perpetration was found to differ by gender, with males more likely to perpetrate IBSA, and females more likely to be victimised by a partner or ex-partner.

Lievore, Denise, 'Non-Reporting and Hidden Recording of Sexual Assault: An International Literature Review' (Report, Australian Institute of Criminology, 2003).

Drawing on many previous studies this paper reports that women who are either married or living in a de facto relationship are less likely to report victimisation than unmarried women (p21-22). Women who were divorced or separated from the partners had higher victimisation rates (p22). The literature identifies that due to a belief that the law exists to control stranger violence, women assaulted by men known to them may refrain from seeking legal help because: they perceive that institutional reactions to sexual violence perpetrated by male partners or relatives will be less than sympathetic; they are aware that they may be blamed for their own victimisation and may not be taken seriously by police; they may also believe that the chances of a successful prosecution are slight, while high rates of attrition and the perception of police leniency towards offenders may also deter reporting (p33).

Mouzos, Jenny, and Toni Makkai, 'Women's Experience of Male Violence: Findings from the Australian Component of the International Violence Against Women Survey (IVAWS)' (Research and Public Policy Series No 56, Australian Institute of Criminology, 2004).

This paper reports on the findings of the International Violence Against Women Survey (IVAWS), which was conducted across Australia between December 2002 and June 2003. A total of 6,677 women aged between 18 and 69 years participated in the survey. The authors report that 5-7% of women who had a current or former intimate partner reported that their partner had forced them to have sexual intercourse at some stage during their lifetime. A further 3-4% of these women reported that their partners had attempted to force them to have sexual intercourse, and a similar proportion experienced unwanted sexual touching (pp44-46). The authors also consider the under-reporting of sexual violence.

Politoff, Violeta, et al. *Young Australians' attitudes to violence against women and gender equality*. Findings from the 2017 National Community Attitudes towards Violence against Women Survey (NCAS).

In 2017, ANROWS administered the National Community Attitudes towards Violence against Women Survey (2017 NCAS), a survey aiming to help understand attitudes toward violence against women, what influences those attitudes, and if there have been changes to those attitudes over time. Two of the key studied attitudes were “disregarding the need to gain consent for sexual activity”, and “mistrusting women’s reports of violence”.

This report focuses particularly on the attitudes of young people, given higher prevalence and particular impacts of violence on young women (p 5). Overall, across the measured themes, young people’s attitudes were least favourable on the theme “mistrusting women’s reports of violence”. Some of the key findings relating to consent were:

- > One in seven respondents believed that “many allegations of sexual assault made by women are false”.
- > Nearly one in eight respondents did not agree or were not aware that it is a criminal offence for a man to have sex with his wife without her consent.
- > Nearly a third of young men believed that “a lot of times, women who say they were raped had led the man on and then had regrets”.
- > More than one in four respondents believed that if a woman sends a nude image to her partner, she is partly to blame if he shares it without her consent.
- > One in eight respondents believed that women mean “yes” when they say “no”.

The link includes short videos on *Understanding consent: Findings from the 2017 NCAS Youth report*.

Taft, Angela, ‘Violence in Pregnancy and After Childbirth’ (Issues Paper No 6, Australian Domestic and Family Violence Clearing House, 2002).

While this Australian issues paper is directed to health practitioners, it reports on intimate partner violence in the context of pregnancy and considers coercion and/or the incidence of abuse in relation to pregnancy. This paper reviews relevant literature and identifies that for some women domestic abuse occurs for the first time during pregnancy. For women who were abused prior to the pregnancy, it was suggested previous abuse is a clear risk for abuse during pregnancy.

Tarrant, Stella, Julia Tolmie and George Giudice, [Transforming legal understandings of intimate partner violence: Final report](#) (ANROWS, 2019).

This report analyses a West Australian homicide case. The analysis shows how sexual violence against the defendant who was charged with killing her abusive husband, is rendered invisible in the case. Despite the evidence of sexual violence against the defendant, the sexually abusive behaviours played little or no part in the consideration of previous violence(see in particular pp 83-84). The defendant gave evidence of sexually abusive behaviours including that the deceased had forced her repeatedly to perform sexually in front of Skype cameras and that he had raped her when she resisted watching child sexual abuse on laptops in their bedroom. The report argues that old common law understandings of marital unity and rape immunity, despite law reform, still influence our legal understandings of sexual violence within intimate partnerships.

A summary of implications for policy and practice is also available at this link.

VicHealth, *The Health Costs of Violence: Measuring the Burden of Disease Caused by Intimate Partner Violence: A Summary of Findings* (2004).

This report is focused on health outcomes associated with intimate partner violence. The research reports that where sexual violence is involved bruising, tears and lacerations to the vaginal area and anus are common (p20). The report also identifies implications for reproductive health including sexually transmitted diseases, urinary tract infections, and terminations of pregnancy and complications of pregnancy (p21).

Webster, Kim, Diemer, K., Honey, N., Mannix, S., Mickle, J., Morgan, J., ... Ward, A, *Australians' attitudes to violence against women and gender equality* . Findings from the 2017 National Community Attitudes towards Violence against Women Survey (NCAS)(ANROWS, 2018).

In 2017, ANROWS administered the National Community Attitudes towards Violence against Women Survey (2017 NCAS), a survey aiming to help understand attitudes toward violence against women, what influences those attitudes, and if there have been changes to those attitudes over time. One of the key studied themes is attitudes toward consent for sexual activity.

The 2017 NCAS shows the pervasiveness of concerning attitudes toward consent, such as (pp 11-12):

- > 31 percent of respondents agreed that “a lot of times”, women who say they were raped had “led the man on and then had regrets”;
- > 42 percent agreed that sexual assault accusations are commonly used to get back at a man;
- > 23 percent agreed that women find it flattering to be pursued, even if they are not interested;
- > 12 percent still agree that women “often” say no when they mean yes;
- > 28 percent believed that when a man is very sexually aroused, he may not realise that a women doesn't want to have sex;

- > 33 percent agreed that rape results from men not being able to control their need for sex; and
- > 19 percent still do not agree that rape in marriage is a crime (p 6).

The 2017 NCAS also investigated whether or not Australians would justify non-consensual sex in different circumstances. The survey found that few Australians believed a man would be justified if he tried to have sex with a woman he was kissing after she had pushed him away. However, the proportion of Australians justifying the behaviour was greater in the scenario in which the woman had taken the man into the bedroom and started kissing him before pushing him away (p 13).

The findings show that a concerning number of Australians are unclear about what constitutes consent, and the line between consensual sex and coercion. The report states that “gendered power dynamics, expectations and stereotypes related to sexuality influence how consent is understood and negotiated” (for example, men as aggressive and women as submissive) (p 13).

Zilkens, Renate et al, ‘Sexual assault and general body injuries: A detailed cross-sectional Australian study of 1163 women’ (2017) 279 *Forensic Science International* 112-120.

Of 1163 Australian women seen at a sexual assault centre, 71% received a general body injury (52% mild, 17% moderate, and 2% severe) (p 115). Moderate to severe injury was observed more frequently in women assaulted by intimate partners than by strangers or acquaintances. In particular, the prevalence of non-fatal strangulation, biting, the use of blunt force and weapons was higher for women assaulted by intimate partners compared to any other group (p 117). The presence of mental illness in the victim also affected the severity of the injury (p 119).

International

Bows, Hannah and Nicole Westmarland, ‘Rape of Older People in the United Kingdom: Challenging the ‘Real-Rape’ Stereotype’ (2017) 57 *British Journal of Criminology* 1-17.

While advances have been made in understanding sexual violence broadly, this article addresses the gap in knowledge regarding older victims of rape and sexual violence (p 5). In order to do so, the researchers used freedom of information requests to obtain data from 45 police forces relating to 655 cases (p 6). The findings challenge dominant real-rape stereotypes, which involve a ‘white, young victim who is attacked at night by a stranger who is motivated by sexual gratification’ (p 3), and can lead to older victims of sexual violence being ignored or disbelieved (pp 3-4). Key findings include:

- > The ‘overall number of reported offences involving an older victim was low when compared with younger age groups’ (p 6);
- > Consistent with existing knowledge on younger groups, most victims were female, and most

perpetrators were male (pp 7-8);

- > Perpetrators of sexual violence against older people were likely to be younger than their victims, with the majority under 60 years of age (p 8);
- > Most perpetrators were known to the victim, with around 20% being a partner or husband (p 9); and
- > Most of the assaults occurred in the victim's home (p 9).

Center for Disease Control and Prevention, 'Intersection of Intimate Partner Violence and HIV in Women' (February 2014).

This report considers the intersection between women's experiences of intimate partner violence (IPV) and HIV. IPV can be both a risk factor for HIV, and a consequence of HIV (p 2). Exposure to IPV may increase a woman's risk of HIV, through forced sex with an infected partner (p 3), limited or compromised negotiation of safe sex practices, compromised treatment and prevention practices (p 3), and increased risk-taking behaviours (p 1). Women who are HIV-positive experience higher rates of IPV, and are likely to experience more frequent and severe abuse (p 2). Further, some women may be reluctant to be tested and treated for HIV due to fear of violence (p 2).

Grace, K.T., & Anderson J.C., 'Reproductive Coercion: A Systematic Review' (2018) 19(4) *Trauma Violence Abuse* 371-390.

A common feature of a violent intimate partner relationship is the use of a variety of tactics to achieve power and coercive control over the abused partner. This article focuses on non-violent control tactics, namely reproductive coercion – a behaviour that interferes with a woman's autonomy over her reproductive health. Reproductive coercion may take the form of birth control sabotage, pregnancy coercion or controlling pregnancy outcomes. The authors reviewed 27 research studies to gain insight into reproductive coercion, the strategies that women use to protect their reproductive autonomy from such coercion, and the interventions that may help to decrease its prevalence. The findings demonstrate a link between reproductive coercion, unintended pregnancy and IPV. Reproductive coercion was found to disproportionately affect women who experience concurrent intimate partner violence, women of lower socio-economic status, single women, and women of certain ethnicities (particularly African American or Latina). Further, women who experience reproductive coercion presented regularly for certain health services. There is a clear need for further research on strategies to resist coercion and interventions targeted towards survivors, perpetrators and healthcare providers.

Miller, Elizabeth, et al, 'Reproductive Coercion: Connecting the Dots Between Partner Violence and Unintended Pregnancy' (2010) 81(6) *Contraception* 457.

This paper reports that the prevalence of intimate partner violence reported among women utilizing sexual

health services and seeking care in gynecologic and adolescent clinics is generally double these population-based estimates. It reports that such victimization is consistently associated with increased pregnancy and sexually transmitted infection (STI), with abused women demonstrating disproportionately higher rates of seeking care at family planning and other health services related to sexual health, such as HIV and STI testing. Moreover, they report on evidence that unintended pregnancy occurs more commonly in abusive relationships. Forced sex, fear of violence if she refuses sex, and difficulties negotiating contraception and condom use in the context of an abusive relationship all contribute to increased risk for unintended pregnancy and STIs.

Moore, Ann, Lori Frohwirth and Elizabeth Miller, 'Male Reproductive Control of Women Who have Experienced Intimate Partner Violence in the United States' (2010) 70 *Social Sciences and Medicine* 1737.

This article reports on the histories of 71 women aged 18-49 years with a history of intimate partner violence recruited from a family planning clinic, an abortion clinic and a domestic violence shelter in the United States. 53 respondents (74%) identified 'male reproductive control' encompassing pregnancy-promoting behaviours as well as control and abuse during pregnancy in an attempt to influence the pregnancy outcome. The authors explain that pregnancy promotion involves male partner attempts to impregnate a woman including verbal threats about getting her pregnant, unprotected forced sex, and contraceptive sabotage. Once pregnant, male partners resort to behaviours that threaten a woman if she does not do what he desires with the pregnancy. This paper provides a thorough overview of the literature in the US on the relationship between intimate partner violence and pregnancy/reproductive health, and the characteristics of abusive relationships which affect 'poor pregnancy outcomes'.

Walker, Susan and Sam Rowlands, 'Reproductive control by others: means, perpetrators and effects' (2019) 45(1) *BMJ Sex Reproductive Health* 61-67

People exert control over women's reproductive rights in various ways, including persuasion or pressure, such as emotional blackmail, societal or family expectations, or threats of or actual physical violence. This article reviews the medical and social science literature on reproductive control of women. Reproductive control can be perpetrated by intimate partners, the wider family or as part of criminal behaviour. Contraceptive sabotage, or 'stealthing', invalidates consent by the covert removal of a condom during sex. Reproductive control is distinct from intimate partner violence, but they overlap to a certain extent. Reproductive control is reported by around one quarter of women who attend sexual and reproductive healthcare services. Therefore, people working in women's health must appreciate its extent in the community, and understand how to use screening tools which detect it.