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REPRODUCTIVE COERCION IN CALIFORNIA DOMESTIC VIOLENCE LAW

Written by Judge Mark Juhas*

California has a forty-plus year history of protecting domestic violence victims and survivors. The Domestic Violence Prevention Act (DVPA) initially started out in the Code of Civil Procedure, and ultimately became part of the Family Code, where it now resides¹ The legislature recently made two significant additions to Family Code section 6320; effective in 2021 the legislature statutorily defined "coercive control" ² and beginning in 2022 the legislature further expanded coercive control to include reproductive coercion³

"Coercive control" is a statutory subset of "disturbing the peace". Specifically, section 6320^4 defines "coercive control" as: "a pattern of behavior that in purpose or effect unreasonably interferes with a person's free will and personal liberty"⁵ As of 2021, the section provided further explanation:

Examples of coercive control include, but are not limited to, unreasonably engaging in any of the following:

(1) Isolating the other party from friends, relatives, or other sources of support.

(2) Depriving the other party of basic necessities.

(3) Controlling, regulating, or monitoring the other party's movements, communications, daily behavior, finances, economic resources, or access to services.

(4) Compelling the other party by force, threat of force, or intimidation, including threats based on actual or suspected immigration status, to engage in conduct from which the other party has a right to abstain or to abstain from conduct in which the other party has a right to engage.

Following these 2021 amendments, the Judicial Council quickly changed the mandatory DV forms to reflect this new language. The DV-100 request for restraining order now contains a plain language definition of disturbing the peace, including coercive control⁶ The DV-130's orders closely parallel the DV-100's language.

Beginning in 2022, the legislature added section 6320(c)(5) expanding coercive control to specifically include "reproductive coercion". New section 6320(c)(5) reads:

[Coercive control includes unreasonably] engaging in reproductive coercion, which consists of control over the reproductive autonomy of another through force, threat of force, or intimidation, and may include, but is not limited to, unreasonably pressuring the other party to become pregnant, deliberately interfering with contraception use or access to reproductive health information, or using coercive tactics to control, or attempt to control, pregnancy outcomes.

Because this statutory language is slightly over one year old, to date, there are no appellate decisions interpreting it. In January 2023, the mandatory Judicial Council forms

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DV-110 and DV-130 were again modified to account for the addition of reproductive coercion²

Most of us may not fully appreciate the far-reaching effects of reproductive coercion. The story line of potential grandparents endlessly pressuring newlyweds for a grandchild is a constant grist for many screenwriters and authors. Several years ago, Pete Davidson⁸ joked that his then fiancée, singer Ariana Grande, pays \$60,000 for rent while all he must do is "stock the fridge." He noted further: "last night I switched her birth control with Tic Tacs. I believe in us, and all, I just want to make sure she can't go anywhere."⁹

Not to be out done, the British columnist Liz Jones wrote that she wanted a baby so badly that she stole her then husband's sperm from a used condom and inseminated herself. In her words: "The 'theft' itself was alarmingly easy to carry out. One night, after sex, I took the used condom and, in the privacy of the bathroom, I did what I had to do. Bingo." $\frac{10}{10}$

On a less flip note, Ms. Jones states, without citation, that a 2001 survey demonstrated that 42% of women would lie about contraceptive use to get pregnant despite their partners wishes.

Only recently has the law specifically recognized reproductive coercion as an act of Domestic Violence. However, reproductive and sexual coercion have been a topic of discussion for several years in the medical, academic and gender-based literature¹¹ There is a substantial body of literature available in this area exploring the repercussions and significance of this type of domestic violence. Over ten years ago The American College of Obstetricians and Gynecologists¹² and Planned Parenthood¹³ among others, published opinions, papers, and fact sheets on reproductive and sexual coercion. The endnotes cite several articles that are readily available on the internet¹⁴

Understandably, most of the literature appears to focus on women as victims and survivors, however, statistical information on the prevalence of reproductive coercion may be of limited reliability due to a lack of conceptual clarity and inconsistent measurement.¹⁵ As an example, the reported rates of reproductive control in different studies ranged from 8.6% of women to 37.8% of women;¹⁶ however, younger women and women in lower socioeconomic status, as well as women who are Latina, African American or Multi-racial are disproportionately affected.¹⁷ Finally, in one study over 30% of women reported experiencing reproductive coercion and abuse¹⁸ in addition to other forms of DV; the interconnection between reproductive coercion and other acts of domestic violence is a common theme throughout the literature.

The issue of reproductive coercion as a male victim phenomenon has not been extensively studied. However, comparing DV victims, 15.3% of female and 17.5% of male victims reported experiencing reproductive coercion and 8.6% of female victims and 15.1% of male victims reported that their partner tried for a non-mutual pregnancy.¹⁹

While little seems to have been written about it, women with disabilities face additional challenges with reproductive coercion. $\frac{20}{20}$ A perpetrator may abuse by withholding or damaging medicines or adaptive devices for a partner or disabled child, withholding necessary assistance or preventing access to needed medical or social services. $\frac{21}{20}$ While these actions may be in addition to coercive control, they may also form the basis of reproductive coercion as well.

WHAT IS REPRODUCTIVE COERCION?

The perpetrator's intent is to develop and maintain control over an intimate partner through finances, individual freedom, or sexual activity. These nonviolent actions are the very essence of coercive control. Generally, reproductive coercion is behavior that interferes with another's decision-making concerning their reproductive health. Reproductive coercion occurs in three broad time categories:²²

(1) Pre-intercourse, in the form of pregnancy coercion, where the male partner uses verbal demands, threats and physical

violence to put pressure on his partner to become pregnant;

(2) During intercourse, in the form of birth control sabotage, where the male partner uses direct acts to ensure a woman cannot use contraception or to render the contraception ineffective; and

(3) Post-intercourse, in the form of controlling pregnancy outcomes, where the male partner uses threats or acts of violence to ensure a woman complies with his wishes regarding the decision to continue or terminate a pregnancy.

While the above is mostly directed to a female victim or survivor, all these time frames may equally apply to male victims and survivors. Women too may press a male partner for a child, sabotage birth control, or once pregnant control her pregnancy outcomes. Same sex victims and survivors may experience coercion most often, but not exclusively, during intercourse. None of these time categories are rigid, nor divided by bright lines.

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Women experience reproductive coercion and abuse in many ways. This list is intended to provide no more than a general indication of the various types of actions and motivations perpetrators have employed based on the victim's and survivor's actual experience. $\frac{23}{2}$

1. Blocking, disposing, or interfering with contraceptive use or availability (including perpetrator physically removing an IUD or

other internal contraceptive device) $\frac{24}{24}$ and "stealthing";

2. Preventing or interfering with contraceptive information, including intentionally providing misinformation, such as stating that hormonal contraception will cause serious health problems;

3. Monitoring menstrual cycles;

4. Preventing or interfering with access to medical professionals;

5. Promoting pregnancy, by threatening to end the relationship or telling extended family member that the couple was starting a family without the partners knowledge;

6. Sexual violence, such as rape;

7. Pressure or coercion to terminate a pregnancy, including removing the pregnant partner from the family home;

8. A failure to allow, or at least support pre-natal care during pregnancy;

9. Pressuring a partner to have a tubal ligation during a breakup so that she could not have a child with a subsequent partner; 10. Violence with the intent to end the pregnancy; including physical violence, or covertly "spiking" food or drink with an abortifacient²⁵

11. Denial of paternity, or refusing to acknowledge the pregnancy;

12. Pressure or coercion not to terminate a pregnancy, withholding funds to pay for the procedure, denying transportation to the appointment or sabotaging appointments, forcing her to eat so that she could not have a general anesthetic, making a scene at the clinic so the procedure could not go forward;

13. Gender selection through abortion of female fetuses or, if the first-born child was female, demanding an immediate second pregnancy;

14. Strictly defining gender roles put pressure on woman's "biological imperative" to reproduce;

15. Securing the relationship through a pregnancy, for example if the male is being incarcerated, to make female less attractive to other partners; and

16. Securing positive housing outcomes through impregnating the partner.

Men too can experience reproductive coercion in several of the above categories. For example, either partner can indicate that they are unable to have children, when in fact they can. Either partner can hide from the other their STI status. Women can engage in stealthing or sabotage an abortion procedure through any number of means. It is important to keep in mind that both sexes may have financial or emotional motivations to keep a partner in a relationship through a child.

STEALTHING

Stealthing is generally defined as the non-consensual removal of a condom during sex. While stealthing may constitute reproductive coercion, California has, in a first in the nation law, also made it a tort.²⁶ Civil Code section 1708.5 was amended effective January 1, 2022, to include stealthing by adding in the following sections:

a) A person commits a sexual battery who does any of the following:

(4) Causes contact between a sexual organ, from which a condom has been removed, and the intimate part of another who did not verbally consent to the condom being removed.

(5) Causes contact between an intimate part of the person and a sexual organ of another from which the person removed a condom without verbal consent.

(d) For the purposes of this section:

(2) "Offensive contact" means contact that offends a reasonable sense of personal dignity.

At least one commentator argues that stealthing is rape.²⁷A partner consents to protected sex, not unprotected sex; the removal of a condom is an act outside of the given consent. Further, if consent is fraudulently achieved, it is not consent at all; one partner gives consent with the assurance that a condom would be used when in fact, the other partner intended to remove the condom.²⁸

While the current provisions in the Family Code are couched in terms of "reproductive autonomy", the Civil Code provisions are not. While it is arguable that the reproductive coercion provisions only apply to heterosexual partners, it

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seems that the legislature intended to include and protect same sex relationships as well. In a same sex relationship, as in a heterosexual relationship, the purpose of sexual coercion may not be pregnancy, "it is a disempowering, demeaning violation of a sexual agreement" that puts same sex individuals at risk for sexually transmitted infections.²⁹In addition to the possibility of being "outed", or threats of being "outed", it carries the same breach of trust, lack of respect, removal of personal dignity and many of the other effects that are expressed in heterosexual relationships. Finally, if either partner conceals their HIV or other STI status, that can have significant adverse effects on the other partner's health.

THE EFFECTS OF REPRODUCTIVE COERCION

The effect of coercive control spans numerous ailments, some of which may be obvious, many of which are less obvious. The specific effects of reproductive coercion are also multi-fold and can affect a survivor's physical and mental health. The results can be:

- 1. Sexually transmitted infections;
- 2. Fear of requesting that the partner use a condom;
- 3. A failure to seek treatment for sexually transmitted infections; $\frac{30}{30}$
- 4. Unwanted/ unplanned pregnancy;
- 5. Unplanned pregnancy poses a risk to the health of mother and child; $\frac{31}{2}$
- 6. Physical violence to terminate or force termination of the pregnancy;
- 7. Homicide of the pregnant partner; $\frac{32}{32}$
- 8. Financial instability regardless of the pregnancy outcome;
- 9. Further entanglement in an inappropriate relationship;
- 10. Depression, suicidal ideation, shame, anger, insecurity, and confusion; and

11. A general feel of loss of control over the victim's and survivor's ability to control their own body and reproductive choices, including feelings that result from the termination of a pregnancy.

WHAT DOES THE LAW CHANGE MEAN TO FAMILY LAW PROFESSIONALS?

Anecdotally, the majority of litigants in domestic violence cases are Self-represented (SRL's). Further, if there is an attorney involved, it is not uncommon for only one of the parties represented. The plight of SRL's in family law is well known and well documented. In domestic violence, especially coercive control and reproductive coercion, family law professionals need to be particularly vigilant to protect the legal process. The recent Netflix show "Maid" is based on a true story of one woman's experience with domestic violence and the court system. In a courtroom scene, both the process and the courtroom language baffle the domestic violence victim. The script writers brilliantly illustrate this as both the judge and opposing counsel simply substitute the word "legal" over and over instead of any understandable dialogue.³³ Additionally, all the legal professionals, including the bench officer make no effort to make sure that she understands any part of the process.

Anna Carpenter, a law professor at Utah, with her colleagues Colleen F. Shanahan from Columbia Law School, Jessica K. Steinberg from George Washington University Law School, and Alyx Mark from Wesleyan University, have done extensive work on SRL's in the courtroom. They note:

In America's civil justice system, millions of low- to middle-income people without counsel or legal training must protect and defend their rights and interests in courts designed by lawyers and for lawyers. Making matters worse, the issues at stake in these courts are deeply connected to fundamental human needs such as safety, intimate relationships, housing, and financial security. Many of those who find themselves pulled into civil court for issues ranging from medical debt to guardianship of an aging parent are already suffering the consequences of America's frayed social and economic safety nets. Too many people who represent themselves in civil trial courts are already living at or nearing the edge of any person's capacity for self-advocacy.³⁴

Whether the parties are represented or not, recent appellate decisions serve to remind legal professionals to be aware of and account for biases that may color the perception of a domestic violence litigant.³⁵ Justice O'Leary in *In Re Ma. V*²⁶ stated:

[T]his court has observed a recent, and troubling trend, of what we perceive as mothers being punished as victims of domestic violence. (See *In re I.B.* (2020) 53 Cal.App.5th 133, 266 Cal. Rptr.3d 814 (I.B.); *M.G. v. Superior Court of Orange County* (2020) 46 Cal.App.5th 646, 259 Cal.Rptr.3d 834.) We recognize issues of domestic violence often put children at risk. The cases we refer to, however, are akin to this one, where children are brought into the dependency system because

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of domestic violence between the mother and a romantic partner. (*Ibid.*) Even after a mother manages to distance herself from the abuser, however, SSA and the juvenile court continue to use the history of domestic violence as a basis to remove the children. Indeed, it seems as if once a woman is battered, she will forever be faced with losing her children. This is not the legal test. "When evaluating the complexity of domestic violence relationships, not every case will be the same. Unlike drug and alcohol addiction, there are no Alcoholics Anonymous (AA) meeting cards, coins, or clean tests to measure success [as a victim of domestic abuse]." (*I.B., supra,* 53 Cal.App.5th at p. 156, 266 Cal.Rptr.3d 814.) We are also mindful of society's preconceptions that often damage the "credibility of victim-witnesses who present on the stand in atypical and non-paradigmatic fashions." (Kohn, Barriers to Reliable Credibility Assessments: Domestic Violence Victim-Witnesses (2003) 11 Am. U. J. Gender Soc. Pol'y & L. 733, 734, fn. omitted.) We expect such victims to be "sweet, kind, demure, blameless, frightened, and helpless" (*id.* at p. 734) and "not a multi-faceted woman who may or may not experience fear

or anger" (*id.* at pp. 743-744, fn. omitted). "These are the preconceptions that judges and jurors bring with them into the courtroom when they assess the veracity of a victim-witness's story." (*Id.* at p. 734, fn. omitted.) We encourage continued diligence and education to guard against such preconceptions. $\frac{37}{2}$

These observations are particularly applicable in the area of sexual violence and reproductive coercion. The domestic violence litigant must testify in a room full of strangers about some of the most intimate details of their life- what happened in their bedroom. For a litigant in a same sex relationship, these challenges may be far greater.

Practitioners are charged with determining the facts of the case and making strategic determinations as to how best to proceed. Family Law practitioners would be well advised to have a checklist that is used for every client, addressing all types of domestic violence, including coercive control and reproductive coercion. Screening every client as a matter of course for all types of domestic violence will assure that any potential bias is removed, and all facts are being developed to best protect not only the parties, but any children as well.³⁸

For example, the American College of Obstetricians and Gynecologists recommends screening questions related to reproductive coercion, $\frac{39}{20}$ and also has suggested protocols that will facilitate the assessment process. $\frac{40}{20}$

- Has your partner ever forced you to do something sexually that you did not want to do?
- Has your partner ever refused your request to use condoms?
- Has your partner ever tried to get you pregnant when you did not want to be?
- Are you worried your partner will hurt you if you don't follow their wishes regarding the pregnancy?
- Does your partner support your decisions about when or whether you want to become pregnant?

While these types of closed ended questions may be useful in a medical or legal screening setting, more open-ended questions are appropriate in a courtroom setting. A courtroom is a significantly different environment for a Domestic Violence litigant than is the intimate setting of a doctor's examination room or a supportive counsel's office. A bench officer may wish to consider less directive questions and seek information in a more round about manner. This is especially true, because as *Ross vs. Figueroa* instructs: "the judge [is] necessarily expected to play a far more active role in developing the facts, before then making the decision whether or not to issue the requested permanent protective order". $\frac{41}{2}$

It is critical that all individuals seeking information from a victim or survivor do so in a cautious, trauma informed way. Take a through look at the court file or other materials. Is the information already there? Is the information available in a way that will not cause the victim or survivor to repeat it over and over? Have you considered other alternatives to securing the information? Have you explained both to yourself and the survivor or victim why you need the information? Most of all be sure that your approach is kind and humble. Remember that describing highly personal and intrusive details of one's life is never easy and the circumstances that surround these details are especially difficult. Your approach should be designed to make it better, not worse, for the person coming to you for help.

CONCLUSION

Because these statutes are so new, there are significant unanswered questions that both trial and appellate courts will grapple with. A finding of reproductive coercion will trigger Family Code section 3044 and its custody restrictions. Further, under the new provisions of section

3011, upon an allegation of domestic violence, a court must state its reasons if it awards unsupervised visitation⁴² The U.S. Supreme Court's recent *Dobbs vs. Jackson Women's Health Organization* decision may also have an

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impact in this area of the law. How the courts will address these issues as well as how the legislature will make further changes in domestic violence law remain to be seen.

In addressing coercive control in all its forms, the very real limitations of the judicial system must be recognized and considered. Dockets are jammed and Family Law is notoriously under resourced. Family Law Judicial Officers frequently rotate out of the judicial assignment either because of personal preference or needs of the court. While the law itself is broad and broadening, the reach of restraining orders in both type and duration is not infinite.

Almost every year, there is some legislative change in domestic violence law. Practitioners must keep up not only on the law, but the latest social science and the availability of local non-legal resources such as domestic violence shelters and free or low-cost medical or mental health providers. If the practitioner can do all of this, not only will they be able to better assist the client but will be better able to guide the trial judge in the order formation process. The appropriate litigation of reproductive coercion is an opportunity for a practitioner to assist in assuring the safety and security of a family as they go through the often-daunting family law process. These new statutes offer additional protection for the entire family.

* Judge Mark A. Juhas is a judge of the Los Angeles Superior Court with a general family law assignment in which capacity he has served since November 2002. He has served on numerous Commissions and Judicial Council Committees, and is an Adjunct Professor of Law at Southwestern Law School.

Notes:

¹. The California Family Code became a stand-alone code effective 1994. Before that its provisions were scattered throughout various other Codes. Most of what we now refer to as the Domestic Violence Prevention Act (DVPA) started off located in the Code of Civil Procedure and was effective in 1980.

². S.B. 1141, 2019-2020 Reg. Sess. (Cal. 2020).

<u>3.</u> S.B. 374, 2021-2002 Reg. Sess. (Cal. 2021).

4. Unless otherwise noted, all references are to the CAL FAM CODE.

<u>5.</u> Cal Fam Code § 6320(c).

<u>6.</u> The DV-100 at box 10 reads:

Disturbing the peace includes but is not limited to: Isolating you from friends, relatives, or other support; keeping you from food or basic needs; controlling or keeping track of you, including your movements, contacts, actions, money, or access to services; and making you do something by force, threat, or intimidation, including threats related to actual or suspected immigration status.

Request for Domestic Violence Restraining Order (DV-100) at 7, Jud. Council of Cal. (Rev. Jan. 1, 2022).

¹ The following language was added: "and reproductive coercion, meaning controlling someone's reproductive choices, such as using force, threat, or intimidation to pressure someone to be or not be pregnant, and to control or interfere with someone's contraception, birth control,

pregnancy, or access to related health information." Request for Domestic Violence Restraining Order (DV-100) pg. 3, Jud. Council of Cal. (Rev. Jan. 1, 2023).

⁸. A well-known actor until recently on the long running TV show Saturday Night Live.

⁹. Zoe Weiner, *Pete Davidson Joked About Messing with Ariana Grande's Birth Control on SNL*, GLAMOUR (Sept. 30, 2018), https://www.glamour.com/story/ariana-grande-pete-davidson-birth-control.

10. Liz Jones, *The Craving for a Baby that Drives Women to the Ultimate Deception*, DAILY MAIL (Nov. 3, 2011), https://www.dailymail.co.uk/femail/article-2056875/Liz-Jones-baby-craving-drove-steal-husbands-sperm-ultimate-deception.html.

11. According to at least some of the literature, the term "reproductive coercion" has been in use since the 1960s. MARIE STORES, HIDDEN FORCES: A WHITE PAPER ON REPRODUCTIVE COERCION IN CONTEXTS OF FAMILY AND DOMESTIC VIOLENCE (2d ed. 2020) https://www.mariestopes.org.au/wp-content/uploads/Hidden-Forces-Second-Edition-.pdf; Sam Rowlands & Susan Walker, *Reproductive control by others: means, perpetrators and effects,* BMJ SEX REPROD. HEALTH, Jan, 2019, at 61, https://pubmed.ncbi.nlm.nih.gov/30622127/.

12. American College of Obstetricians and Gynecologists, Washington, D.C., *Intimate Partner Violence*, COMMITTEE OPINION 518 (Febr. 2012), https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2012/02/intimate-partner-violence; and American College of Obstetricians and Gynecologists, Washington, D.C., *Reproductive and Sexual Coercion*, COMMITTEE OPINION 554 (Feb. 2013), https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2013/02/reproductive-and-sexual-coercion? utm_source=redirect&utm_medium=web&utm_campaign=otn.

13. PLANNED PARENTHOOD, FACT SHEET, INTIMATE PARTNER VIOLENCE AND REPRODUCTIVE COERCION (2012).

^{14.} There is a significant and robust collection of literature available on this topic. This article attempts to synthesize and condense some of it. It is hoped that this article will entice family law professionals to do further reading, gaining a more nuanced understanding of this important topic. If the practitioner is going to read just one of the various articles, the most comprehensive seems to be Jessica Moulton et. al., *Women's perceptions and experiences of reproductive coercion and abuse: a qualitative evidence synthesis*, PLOS ONE 16(12): E0261551, https://pubmed.ncbi.nlm.nih.gov/34932570/.

15. Jessica Moulton et. al. Women's Perceptions and Experiences of Reproductive Coercion and Abuse: a Qualitative Evidence Synthesis, PLOS ONE 16(12): e0261551 (Dec. 21, 2021), https://pubmed.ncbi.nlm.nih.gov/34932570/.

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16. Elizabeth Miller, et al. *Pregnancy Coercion, Intimate Partner Violence and Unintended Pregnancy,* CONTRACEPTION, Apr. 2010, at 316.; Moulton, *supra* note 15; Rebecca E. Gee, et al., *Power over parity: intimate partner violence and issues of fertility control.* AM J OBS. & GYN., Aug. 2009, at 148.

17. Kathleen C. Basile et. al., *Prevalence of Intimate Partner Reproductive Coercion in the United States: Racial and Ethnic Differences.* J. INTERPERS. VIOLENCE., Nov. 2021, at NP12324, https://doi.org/10.1177/0886260519888205.

18. Request for Domestic Violence Restraining Order (DV-100) pg. 3, Judicial Jud. Council of CaliforniaCal., (Rev. January Jan. 1, 2023).

<u>19.</u> Basile, *supra* note 17.

^{20.} Jeanne L. Alhusen et. al., *Intimate Partner Violence, Reproductive Coercion, and Unintended Pregnancy in Women With Disabilities,* DISABILITY & HEALTH J. (Apr. 2020), https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7096251/. While the sample size was small, this population had further reproductive coercion effects beyond those non-disabled victims suffered.

21. Dianne Lalonde & Linda Baker, *Women with Disabilities and D/deaf Women, Housing and Violence*, LEARNING NETWORK, Issue 27 (Jan. 2019), https://www.vawlearningnetwork.ca/our-work/issuebased_newsletters/issue-27/NewsletterJssue_27-Final-Online_1.pdf.

22. Sahba Taslim Saravi, Addressing Abusers Attack on Women's Right to Reproductive Autonomy: Birth Control Sabotage, 23 RICH. PUB. INT. L. REV. 91 (2020).

23. Jessica Moulton et. al., Women's Perceptions and Experiences of Reproductive Coercion and Abuse: a Qualitative Evidence Synthesis, PLOS ONE 16(12): e0261551 (Dec. 21, 2021), https://pubmed.ncbi.nlm.nih.gov/34932570/. This article goes into great detail as to these areas.

<u>^{24.}</u> Saravi, *supra* note 22.

25. Sam Rowlands and & Susan Walker, Reproductive Control by Others: Means, Perpetrators and Effects, BMJ SEX REPROD. HEALTH, Jan. 2019, at 61, https://pubmed.ncbi.nlm.nih.gov/30622127/.

^{26.} A.B. 453, 2021-2022 Reg. Sess. (Cal. 2021)

27. S.B. 1171, 2021-2022 Reg. Sess. (Cal. 2021) amended the spousal rape law in California. Several statutes across various codes were modified, including repealing Cal. Pen. Code § 262. The legislative counsel's digest for SB-1171 provides in part :

This bill would repeal the provisions relating to spousal rape... thereby making an act of sexual intercourse accomplished with a spouse punishable as rape if the act otherwise meets the definition of rape, except that sexual intercourse with a person who is incapable of giving legal consent because of mental disorder or developmental or physical disability would not be rape if the 2 people are married.

^{28.} The reality is that prosecuting stealthing either civilly or criminally is not without substantial challenges. Regardless of any civil remedies or potential criminal consequences, stealthing undoubtedly falls squarely into the category of reproductive coercion. Alexandra Brodsky, *'Rape-Adjacent': Imagining Legal Responses to Nonconsensual Condom Removal, 32* Colum. J of Gender and Law (2017), https://papers.srn.com/sol3/papers.cfm?abstract_id=2954726.

<u>29.</u> See id.

30. Left untreated, such infections can lead to pelvic inflammatory disease, infertility, cancer, poor neonatal health outcomes and potential pregnancy complications. MARIE STOPES, HIDDEN FORCES: A WHITE PAPER ON REPRODUCTIVE COERCION IN CONTEXTS OF FAMILY AND DOMESTIC VIOLENCE (2d ed. 2020) https://www.mariestopes.org.au/wp-content/uploads/Hidden-Forces-Second-Edition-.pdf

<u>31.</u> These risks include low birthweight, higher infant mortality, poor child health and development outcomes, and maternal depression. *See id.*

<u>32.</u> The American College of Obstetricians and Gynecologists Washington, D.C., *Reproductive and Sexual Coercion*, COMMITTEE OPINION (No. 554 Feb. 2013), https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2013/02/reproductive-and-sexual-coercion?utm_source=redirect&utm_medium=web&utm_campaign=otn.

33. Maid: Ponies (Netflix streaming broadcast 2021) see, e.g., part of the dialogue is as follows:

Court: On what grounds should an ex-party of Maddy Boyd (the child) be considered? Attorney: Your Honor, Ms. Russell [Mother] filed to legal, legal, legal, and she's legally legal, and we ask the court to legal, legal, legal. Inte Court: I see, and that's legal? Attorney: Very, legal, legal, legal.

<u>34.</u> Anna E. Carpenter et. al., *Judges in Lawyerless Courts,* 110 GEO. L. J. 509 (2022), https://scholarship.law.columbia.edu/cgi/viewcontent.cgi?article=3746&context=faculty_scholarship.

35. Both Justice O'Leary and Justice Zelon have recently authored opinions concerning bias. *See, e.g, In Re* I. B., 53 Cal. App. 5th 133 (2020); *In Re* Ma. V., 64 Cal. App. 5th 11 (2021), and K. L. v. R. H. 70 Cal. App. 5th 965 (2021).

<u>36.</u> In Re Ma V., 64 Cal. App. 5th at 25 (2021).

<u>37.</u> Id.

38. There are numerous websites that may be valuable to establish a checklist. *See, e.g.,* Rhalou Allerhand, *Coercive control checklist: 14 signs your partner is trying to control you,* NETDOCTOR (Dec. 9, 2020), HTTPS://WWW.NETDOCTOR.CO.UK/HEALTHY-LIVING/A26582123/COERCIVE-CONTROL/ provides a 14-item checklist with explanations.

^{39.} See American College of Obstetricians and Gynecologists, Washington, D.C., Intimate Partner Violence, COMMITTEE OPINION 518 (American College of Obstetricians and Gynecologists, Washington, D.C), (Febr.uary 2012), https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2012/02/intimate-partner-violence; and American College of Obstetricians and Gynecologists, Washington, D.C., Reproductive and Sexual Coercion, COMMITTEE OPINION 554 (American College of Obstetricians and Gynecologists, Washington, D.C), (February 2013)., https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2013/02/reproductive-and-sexual-coercion?utm_source=redirect&utm_medium=web&utm_campaign=otn.

40. See AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS, WASHINGTON, D.C., INTIMATE PARTNER VIOLENCE, COMMITTEE OPINION 518 (AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS, WASHINGTON, D.C), (FEBRUARY 2012), https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2012/02/intimate-partner-violence; AND AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS, WASHINGTON, D.C., REPRODUCTIVE AND SEXUAL COERCION, COMMITTEE OPINION 554 (AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS, WASHINGTON, D.C), (FEBRUARY. 2013)., https://www.acog.org/clinical/clinical-guidance/committeeopinion/articles/2013/02/reproductive-and-sexual-coercion?utm source=redirect&utm medium=web&utm campaign=otn.

41. Ross vs. Figueroa, 139 Cal. App. 4th 856, at 860 (2006).

42. CAL FAM. CODE § 3011 (5)(A), as amended effective January 1, 2022, reads in pertinent part: "When allegations about a parent pursuant to paragraphs (2) or (4) have been brought to the attention of the court in the current proceeding, and the court makes an order for sole or joint custody or *unsupervised visitation* to that parent, the court shall state its reasons in writing or on the record" (emphasis supplied).

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