The Birth of Development:
The Social, Economic and Environmental
Advantages of Contraception Use on a Global Scale

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Thesis Defense
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MOTIVATION

- Major: Global and International Studies ---- Minors: French, Nonprofit Leadership
- Internships
  - Sindecuse Sexual Health Peer Education Program
  - Planned Parenthood
INTRODUCTION

- Combined traditional scholarly research approach with professional experience within the field of reproductive health
- "My hypothesis is that access to contraceptives, abortion and family planning education can drastically improve the quality of life on a global scale for people of all genders and sexualities."
- Sexual health is taboo in cultures all across the world, but I hope that my research will help open a conversation about reproductive health and the positive outcomes that can come from making contraception more widely available.
1850 B.C. - First recorded use of contraception
Diabolical Handbill and Francis Place
1882 – First family planning clinic opened in Amsterdam
An accurate theory determining the time of ovulation occurring during a typical menstrual cycle was not discovered until the 1920s
## METHODS OF CONTRACEPTION

- Most commonly used forms
  - The pill
  - The implant
  - The injection
  - The intra-uterine device
  - The vaginal ring
  - The penile condom
  - Sterilization

### Comparing effectiveness of birth control methods

<table>
<thead>
<tr>
<th>More effective</th>
<th>Less than 1 pregnancy per 100 women each year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vasectomy</td>
<td>Female Sterilization</td>
</tr>
<tr>
<td>LAM (Breastfeeding)</td>
<td>Shot</td>
</tr>
<tr>
<td>2-8 per 100</td>
<td>Pill</td>
</tr>
<tr>
<td>15-25 per 100</td>
<td>Ring</td>
</tr>
<tr>
<td>About 20 per 100</td>
<td>Patch</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Less effective</th>
<th>About 20 pregnancies per 100 women each year</th>
</tr>
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<tbody>
<tr>
<td>Withdrawal</td>
<td>Spermicide</td>
</tr>
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</table>

**How to make your birth control method most effective**

- Vasectomy: Use another method for first 3 months.
- Female sterilization, IUD implant: Little or nothing to do.
- LAM (for 6 months): Breasted often, day and night.
- Shot: Get repeat shots on time. 
- Pill: Take a pill each day.
- Ring, Patch: Keep in place, change on time.
- Condom, diaphragm, cervical cap, sponge: Use correctly every time you have sex. Cervical cap and sponge are less effective for women who have given birth.
- Fertility Awareness-Based Methods: Abstinence or use condoms on fertile days. Standard Days Method and Five Day Method may be easiest to use.
- Withdrawal, spermicide: Use correctly every time you have sex.

*Source: Adapted from WHO, 2007*
BARRIERS TO ACCESS

- **Culture**
  - Sex and sexuality are heavily stigmatized and taboo
  - Distrust of Western medicine
  - Children are a sense of pride

- **Religion**
  - Roles for women as stated in religious texts
  - Contraception goes against the will of God

- **Gender Inequality**
  - Women do not have the same access to education as men
  - Women are typically less financially secure than men and thus do not have the same independence

- **Lack of Education**
  - Contraception access is nothing without education
  - In the U.S. alone, only 19 states require medically accurate reproductive health education
BENEFITS: SOCIAL

- Gender equality
  - When women can have control over their fertility, they have control of their lives which creates a society where gender equity can occur with all genders benefiting from the same resources.

- Education
  - Female education at primary and secondary levels corresponds with an increased likelihood to use contraceptives, and the use of contraceptives also allows women to pursue higher education without the fear of an unintended pregnancy. This relationship exists because both motherhood and education are time intensive.

- Family structure
  - Contraceptive use also benefits the family structure as it prevents children from being conceived when the family cannot support another individual.
The world population is growing at an unsustainable rate

“The arithmetic of global population growth has become numbingly familiar [...] In the past four decades more people have been added to the globe than in all of history before the middle of this century [...] The United Nations and the World Bank project an additional 6 billion inhabitants by the end of the next century. Virtually all of this growth is expected to occur in Africa, Asia, and Latin America.”

Malthusian catastrophe

Famine and disease act in response to rapid growth as a means to self-regulate.

Climate change

It is estimated that the population will rise from the present number of 6.8 billion people to 9.2 billion in 2050 and with that substantial increase in the numbers of people, comes an increase in the emission of greenhouse gases.
BENEFITS: ECONOMIC

- Economic stability of women
  - By giving women control over their fertility, they are thus able to complete their education without hindrance and then be able to go on to pursue higher paying employment.
  - With women having the freedom to work without hindrance, their income is then distributed back into the economy.

- Money saved in government aid
  - Contraception also allows governments to save money on public aid. In the United States alone, for every $1 spent on family planning, nearly $4 is saved in governmental programs for low income individuals. This might not seem like much, but these numbers add up to a net savings of $800 million.
CASE STUDY: KENYA

- Kenya began prioritizing family planning in the 1970s
- Contraception use spiked among educated women
- Statistics show that since the 1970s, the rates of education attainment for women have gone up and childhood mortality rates have gone down
CASE STUDY: Pakistan

- Roughly half of all pregnancies are unplanned
- Each year 623,000 women are treated for post abortion complications
- Abortion is only legal if deemed medically necessary and can only occur if no internal organs within the fetus have been formed
- Sex outside of marriage is punishable by stoning
- “The problem is that there is no legal cover for these procedures,” said Fauzia Viqar, Head of Advocacy at the Shirkat Gah women’s resource centre, “Women are told upfront: this is your risk, so if you don’t make it, that’s your problem. If a woman is in poor health after having an unsafe abortion, she can no longer effectively contribute to a household, and her family has to bear that extra financial burden.”
A vast majority of the world from the United States to Latin America, to Asia, to Africa, to Europe is experiencing an unmet need for contraception, sex education, and safe abortion.

There is a direct correlation between access to family planning and quality of life.

Traditional, patriarchal structures in society have contributed greatly to the current state of contraception access and family planning education around the world.

If the population continues to grow unabated, resources will be limited and famine and disease will regulate the population.
PHOTO SOURCES

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