



Transcript from *Contraception 101: More than Just Pills and Condoms*
Capitol Hill Briefing | December 10, 2008

Part 10: Question and Answer

Female in audience: Hi. I'm Allie Bowman, with the ACLU. A lot of the methods you've talked about seem really promising for continued use in preventing pregnancy, which obviously is the goal of National Campaign, but I wonder in terms of preventing of STDs and STIs, are kids who are getting these or adults who are getting these saying, "Oh, well, I have protection. I don't need to use a condom." And is that a concern that you all are facing? And how do you sort of deal with that?

Eve Espey, MD [*Faculty, OBGYN, University of New Mexico*]: I think that is a concern. I mean we...we know that, so what...what we would recommend for many women is dual use. So use of a condom uh, to prevent STIs and...and let's say use of an IUD. Uh, IUDs do not prevent against STDs. There's not a lot of dual use, although it does appear to be increasing and...and that's partly an education function. But I do think that it sort of comes down to, you know, we've been very patriarchal in the way we...we uh, talk about birth control methods in general. For example, we said, "Well, you know, you can't have your birth control pills unless you get a pap smear." And so it's been...it's been, typically been a bundled service. And in some ways uh, it's very important that they're related. I mean STI prevention and pregnancy prevention are related, but I think

that we have to counsel about them separately and...and...and allow women to...to make those choices.

Ward Cates, MD, MPH [*President, Research, Family Health International*]: We as uh, clinicians or public health practitioners get into what I call sort of “double speak.” Do you try to encourage condoms for their dual purpose which is to prevent both unintended pregnancy and STIs? Or do you try to uh, promote two methods, dual methods; one to prevent pregnancy and one to prevent STIs? So what do you do? Will you have to target your counseling very carefully? You have to emphasize that STI protection is, if you, is highly—let’s call it “partner specific.” Do you know your partner? How long have you known? Have you been tested together? I mean a whole bunch of different factors uh, casual versus uh, long-term. Uh, but it gets, it...it gets into very difficult counseling, but none of these main contraceptive methods are as good as the condom in terms of preventing STIs.

Male in audience: In Ireland we’ve had a really good system. It’s actually...actually really amazing because of the fact that we’re rallying people from all areas of the country; uh, rural, suburban uh, city girls and...and it’s been really exciting. It’s that they’re all different ages and how it’s come to pass, how we’ve been able to have IUDs successful—very, very successful in Ireland, especially down in Tipperary where I’m from—is because of the fact that it’s not a partisan issue. Here...here in the United States I’ve noticed that, you know, it’s become very much so a dividing issue. When you look at it, we’ve been able to rally the Catholic Church in Ireland and all kinds of churches, all religions. This is a bipartisan issue. And I really do believe that if young men and young women were able to understand how important this really is, the Irish

wouldn't feel free. They finally feel free. And I'll tell you what makes me proud as an Irishman to be able to see this change. We're in the twenty-first century. We're not back in the sixteenth century anymore. And I just want to say how proud I am and encourage you and...and really want to thank you for what you're doing because it really is making a difference. And those costs will go down when more people are open to it. It just makes common sense.

Dr. Cates: How did you get the Catholic Church to support the IUD?

Dr. Espey: Yeah, really! [Everyone talking and laughing.]

Same male in audience: Well, you know, what happened was uh, my cousin (unclear) ran for president, Irish president. And she was one of the first uh, female candidates for Irish president. And what we were able to do is, we were able to say, "Let's come together as a country. Let's get the Fine Gael party and the Fianna Fáil party together. Let's make this an issue that helps young women and older women, women of all ages." So, you know, to tell you the truth if more people, more people just understood; if they weren't so ignorant as to how safe this really is, I really do think it could be successful.

Sarah Brown [CEO, *The National Campaign to Prevent Teen and Unplanned Pregnancy*]: Well, I...I think...I think the part of what you're saying is that in Ireland and in many parts of the world sort of family planning is considered just basic health care. It's a basic public health service, basic preventive care and it doesn't um, sort of get caught up in a lot of other arguments. It's just simple, and the CDC referred to family planning recently as one of the ten greatest public health advances of the entire century. I mean that...that's how profound it is and how it's changed the lives of men and women.

Female in audience: I don't know if there's any research being done about this but uh, this whole room is full of women uh, and there's no real communication or public information about possible research into pharm uh, like in pharmaceuticals or whatever for birth control for men um, and I'm wondering what you guys know about that. Um, it's obviously a very socially sensitive issue um, and I think also politically. [*At the same time, Sarah Brown says, "I think it's a great issue."*] That's, it, this is a, you know, it takes-two-to-tango kind of thing, so.

Dr. Cates: And there are two methods that men can use; one permanent uh, vasectomy; one temporary, condoms, and we know the issues with that. And the, a third that's been studied for quite a while and still is being studied are difference steroidal approaches to suppressing uh, sperm production in men. They have not been as successful yet in terms of any of the effectiveness uh, proxy measures. Uh, once those are found to adequately suppress to a point of um, of...of going into controlled files uh, we may see some in the next decade. But twenty years ago I used to say, "We may see some in the next decade." [*Laughter.*] Uh, it's uh, it's...it's...it's diffi, it's more difficult to regulate interestingly the endocrinology of male reproduction than it is to regulate the endocrinology of female reproduction. That's just to date a biologic challenge.

Female in audience: I'm Nina Shwartz, the National Counsel of Jewish Women. I was wondering what your thoughts are on female condoms and if you think that with the FDA Advisory Commission, Committee meeting this week if that approval of the FC2 in the U.S. occurs will there...there be increased use of the female condom?

Dr. Cates: Not probably as...as...you know, as a primary method compared to some of the others that we've discussed, but as a niche method for couples or women that uh, want to use it under either regular or selective cases and I do know couples who uh, like to use barrier methods and for whom the male and the female prefer the female condom uh, in part 'cause he hates the male condom and uh, in part because they've worked it into their sexual repertoire that this is uh, is what works for them. Uh, where we've seen it uh, mobilized with really good community support; lots of uh, sort of social reinforcement and in very particular uh, circumstances such as sex workers uh, it...it provides dual uh, purpose protection uh, that is under the woman's control. And in several of the countries where we work uh, female con-, cost is not a factor because it is uh, purchased by the U.S. government and provided in uh, these vulnerable populations. So there is a definite niche for it. Is it going to be uh, wide...widely purchased or used in this country? Unlikely.