Mosquitos and Mothers: The Zika Virus and Real Talk on Birth Control

By ELIZABETH REIS • January 28, 2016
Mosquitos carrying the Zika virus in Latin America are wreaking havoc in people’s lives into the next generation. It’s only a matter of time before Zika is found in more places in the United States, as the first case of infant brain damage linked to the virus has already occurred in Hawaii. The baby’s mother had previously lived in Brazil, where the virus has affected thousands of newborns. Zika’s effects are being felt in other Latin American countries as well, and the governments of El Salvador, Ecuador, Jamaica, and Colombia have recommended that women avoid pregnancy for at least two years because the virus, which is broadly present in these countries, likely causes microcephaly, an incomplete development of the brain.
The Rochina favela near Rio de Janeiro, Brazil. The Zika virus has affected thousands in Latin America, particularly people in poorer areas. (Edmund (https://www.flickr.com/photos/fulminating/534766582/)/Flickr | CC BY-NC-ND (https://creativecommons.org/licenses/by-nc-nd/2.0/))

Two years?! According to a recent NPR report (http://www.npr.org/2016/01/26/464469766/nations-across-latin-america-grapple-with-rapid-spread-of-zika-virus), this is the first time in history that a government has told women not to get pregnant. But this might be easier said than done. Right now the mosquito that transmits the Zika virus is most prevalent in countries that are predominantly Catholic, nations that offer no real support for any birth control other than the rhythm method — in other words precluding all of the methods that are 99% effective. Unless those Latin American governments and the Catholic Church come together to encourage birth control, such admonitions to avoid pregnancy essentially tell women not to have sex. That doesn’t strike me as a very realistic or effective public health strategy.

This conversation reminds me of an earlier era in the United States, when discussion of birth control was much more limited, and women were largely in the dark about how to avoid pregnancy. Dissemination of birth control did not become legal until the 1930s, and then only married women could get it; it wasn’t until 1972 that single women could legally gain access. (https://supreme.justia.com/cases/federal/us/405/438/case.html) Because of these restrictions, many women simply did not know how to limit their family size. Naturally, this led to an enormous amount of anxiety about heterosexual intercourse.
Margaret Sanger, at the time a nurse on New York City’s Lower East Side who later founded Planned Parenthood, saw thousands of women patients seeking such information. Sanger was a complicated and even flawed character. She believed in women’s autonomy over their own bodies so ardently that she linked her cause with eugenicists who had their own nefarious reasons for limiting women’s reproduction — that is, they were women of color, poor, or immigrants. But Sanger knew scores of women who wanted and needed birth control for themselves and were determined to avoid pregnancy, even at the expense of their lives.

Sanger credited her early involvement with the birth control movement to one such desperate woman, though historians debate the apocryphal nature of the story that Sanger told.
When the woman’s doctor told her that her health would suffer if she had any more children, Sanger related, the woman begged him to tell her how she could avoid that. Sanger recalled his words: “‘Oh, ho,’ laughed the doctor in good humor, ‘You can’t have your cake and eat it too! Tell Jake to sleep on the roof.’” She later wrote, “I shall never forget the look on that woman’s face. Tremendous emotions were surging within her. Conquering her feelings, she turned to me beseechingly, ‘Tell me the secret,’ she begged. ‘Tell me — and I’ll never breathe it to [a] soul!’” Not only was birth control (condoms and diaphragms) illegal, but it wasn’t until the 1930s that scientists adequately understood ovulation in women’s reproductive cycles and hence the best and worst times to achieve or avoid conception.

Department of Health workers in Brazil, one of the countries particularly affected by the Zika virus, work to combat spread of the aegus aegypti mosquito and provide guidance to the public. (Tony Winston (https://www.flickr.com/photos/agenciabrasilia/23200815303/) | Agência Brasília | CC BY (https://creativecommons.org/licenses/by/2.0/))

Of course, women in Latin American countries today know the secret to birth control, but unless religious authorities decree that avoiding pregnancy falls within Catholic ethical standards it is likely that many women will share the desperation women in earlier eras endured. Some might argue that the stakes right now are even higher; exposure to the Zika virus can create personal tragedy as well.
as a public health catastrophe if thousands of infants are born with severe cognitive disabilities that require the kind of support many will be unable to provide.

Given the fact that some women from Latin America and the Caribbean (especially Puerto Rico) have previously endured state-sponsored sterilization, we know that their reproductive lives have been subjected to the needs of the state, usually without informed consent. It is time now to learn from past mistakes and for the Church and the government together to provide information about and access to reliable birth control to ensure reproductive justice in women’s lives.

The distraught woman who implored Sanger in vain to help her avoid getting pregnant ultimately died, Sanger reported, from a self-induced abortion, leaving three young children motherless. Abortion isn’t the answer here either, for obvious religious reasons, but also because there is no test for the Zika virus, and its effects can be seen on an ultrasound only very late in the pregnancy (http://www.ncbi.nlm.nih.gov/pubmed/10895445). Surely in today’s world where access to safe and reliable birth control is limited by religious edict rather than scientific knowledge, we can do better.

*Editor’s note: This article was corrected from an earlier version. Eisendtadt v. Baird in 1972 established the right of single individuals to possess contraception (not Griswold v. Connecticut in 1965, which only affected married women).*

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Headline image: Aegus aegypti mosquito. ([John Tann](https://www.flickr.com/photos/31031835@N08/5731174564//Flickr) | CC BY [https://creativecommons.org/licenses/by/2.0/](https://creativecommons.org/licenses/by/2.0/))


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**About the Author**
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Elizabeth Reis recently joined the Macaulay Honors College at the City University of New York. Before that she was Professor of Women’s and Gender Studies at the University of Oregon. She is the author of Bodies in Doubt: An American History of Intersex and Damned Women: Sinners and Witches in Puritan New England. She is... Elizabeth's full bio —
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Heather Munro Prescott (HTTPS://HMPRESCOTT.WORDPRESS.COM)
January 28th, 2016
Nice article, but one inaccuracy. The Griswold decision in 1965 only affected married women. Prior to that use of contraceptives in the state of Connecticut was a crime. It wasn't until the Baird v Eisenstadt decision in 1972 that the right of privacy established in Griswold was extended to unmarried women.


Elizabeth Reis
January 28th, 2016
Thank you, Heather! I've made the correction.
PS the One Package decision you allude to in the 1930s only affected the federal Comstock law prohibiting the shipment of contraceptives and birth control advice through the mail. The state laws such as the one in Connecticut remained in place.

Heather Munro Prescott

January 28th, 2016

The Personal is Historical

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