Over-the-Counter Contraceptives & Women of Color: Advantages & Disadvantages

By Cherisse Scott, Health Educator/Campaigns Coordinator, Black Women for Reproductive Justice

Damn, I’m pregnant. This phrase haunts a lot of women when contraception has not been used or it failed and planning a family was not the intent. That same woman, equipped with knowing how to chart her menstrual cycle may have quite a different phrase to use. In her defense, she may very well not have the full grasp of knowing that her reproductive health is her responsibility. She does not know how to chart her menstrual cycle, or when she is ovulating. In most communities of color, sex education is a non-issue. For that matter, nationwide, sex education is a non-issue. In the meantime, decisions about over-the-counter oral contraceptives brews amongst family planning advocates, researchers and scientists all while anti-choice advocates figure out new ways to stifle reproductive justice efforts.

Decisions are being made for women without a clear understanding that some women, especially low-income women and women of color, don’t have solid information about their reproductive health. With the current state of health reform, who is to say that if oral contraceptives are made available, that it will be a feasible investment to a woman on welfare, or a woman on disability, a woman on Section 8, a single mother, or even a college student?

We have to commit ourselves to education as advocates, researchers and scientists for reproductive health, and as women where it concerns our reproductive health. For the advocate, committing to more than the theory of what women need, and more specifically to the different needs of various types of women based on social and economic backgrounds, is far more important than access to yet another mode of contraception.

The practice of douching is an example of the lack of education that unfortunately has been passed down from one woman to another, especially Black women. Or even the fact that it is believed among young girls that douching after sex will wash semen from the vaginal canal. We are in a state of emergency, but for what?

I would say that access to over-the-counter contraceptives is not the issue as much as education around reproductive health is the solution. I do sex education weekly at a local family planning clinic where I have the awesome opportunity to educate women on everything from being able to chart their menstrual cycles and control their own fertility to education about STI prevention and transmission. Some of these women have never seen a female condom and most are unfamiliar with dental dams. These women come to the clinic for things like HIV/STI testing or pregnancy tests and ultrasounds. Most of the women appreciate the educational training and there is never a time when a woman does not pull me to the side to ask more confidential questions. The clinic is located on the South side of Chicago, a heavily populated area for African American women and girls.

I can only do education as time permits in my weekly schedule, but imagine if there were a multi-million dollar campaign around basic reproductive health and empowering women and girls to have a clear understanding about how their bodies function? The same money and energy poured into educating women to have their young daughters vaccinated for HPV could be the same dollars and energy that need to go into educating women and girls about their reproductive health. In other words the desire for knowledge is there. It is our responsibility as advocates, researchers and scientists to focus our attention and our money toward meeting this unmet need.

Theoretically, advantages of over-the-counter contraception could mean that women have better access to oral contraceptives, but allow me to interject that where there is no education around choosing the mode of contraception that is right for you based upon a clear understanding of your own body, this could mean that you could be doing more harm than good.

Let’s take Plan B for example. Though access to Plan B has proven to save time in the doctor’s office, and time off of jobs for working women, the overuse of Plan B is now on the rise due to women not knowing their own bodies or understanding their own fertility. It doesn’t have to be that way! Plan B is a wonderful option when the condom breaks or other emergencies, but using the contraceptive method in place of a condom means there has not been enough educational marketing done around usage of Plan B or the rates of STI transmission as a result of not using barrier methods of contraception. As for the woman, whether she is on governmental assistance or even a college student, the affordability of Plan B can pose a problem when the pill can range in price from $43 to $50. If a woman can’t come up with that money within the 72-hour timeframe that Plan B is effective after unprotected sex, then that woman is faced with either carrying a baby to term that she cannot afford, or terminating a pregnancy that she also cannot afford. Unfortunately, the disadvantages of Plan B may outweigh the benefits for some women.

There is also the fact that over-the-counter contraception could skyrocket in price once fully offered and after manufacturers outbid one another, not taking into consideration the various types of women who will use the product. Who will decide which pills are placed on shelves or behind pharmacy counters? What if the pill offered is the pill that does NOT work for you?

Are we putting the cart before the horse? Access without education does something that is counterproductive to the reproductive justice movement. A woman is still not empowered to learn more about her body and become an active agent in what happens with her reproductive health. Women of color don’t have this luxury when Black women lead the pack with the highest rates of HIV contraction or when low-income women are the last considered but the first to be martyrs whether it be the latest fad of pill, injection or reproductive immunization. You don’t have to agree, but the facts are the facts. Is over-the-counter contraception without education an advantage or disadvantage to you? You decide.

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