

Politics and Science: The Tortuous Road for Emergency Contraception in the US

By Carole Joffe

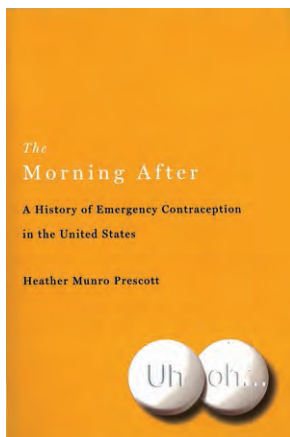
The Morning After: A History of Emergency Contraception in the United States

Heather Munro Prescott

(Rutgers University Press, 2011, 184 pp)

978-0-8135-5162-3, \$22.95

THE MORNING AFTER: A History of Emergency Contraception in the United States begins by detailing the long, tortuous road that Emergency Contraception (EC) followed to normalization in the US, with a particular focus on the dismaying behavior of the Food and Drug Administration (FDA) during the George W. Bush presidency. Toward the end of the book the author offers a note of cautious optimism, pointing to the “more progressive leadership of the FDA” appointed by President Obama. Indeed, fairly early in the Obama presidency, as Prescott reports, the FDA did approve, in an efficient and professional manner, ellaOne, a newer version of an EC product. But of course, as readers of *Conscience* are undoubtedly aware, the



Obama administration too has let “politics trump science” when it comes to EC, as the painfully familiar phrase connected with that saga goes. In December 2011, after this book had gone to press, Kathleen Sebelius, Obama’s Secretary of Health and Human Services, made the unprecedented decision to overturn the FDA’s approval of allowing Plan B, a dedicated EC product, to be available without a prescription to women under the age of 17.

Prescott’s well-researched, well-written history starts in the 1960s, with the emerging recognition among some reproductive scientists and clinicians that a larger than normal dose of oral contraception used after unprotected intercourse was effective in preventing pregnancy. Significantly, though this knowledge apparently soon became known in many college health centers and some rape units in police departments and hospitals, it did not cross over into the knowledge base, or practice, of mainstream medicine. Prescott gives no clear answer to this question of why “postcoital contraception,” as it was once called, remained so unknown, but her

account suggests that this can be best understood as a case of willful ignorance, given the controversy that has always accompanied anything to do with contraception in the United States. (The author offers a quite powerful indication of this controversy when she points out that in 1980 there were nine US pharmaceutical companies involved in contraceptive research and development, but by 1990 the number had fallen to only one, Ortho Pharmaceutical).

Given the avoidance of the topic in mainstream reproductive health circles, it is very moving to read of the tireless efforts of the early crusaders to disseminate knowledge about EC, some of whom remain active to this day. James Trussell, today a professor of economics at Princeton University and a member of the interdisciplinary group that has produced numerous versions of *Contraceptive Technology*, the “bible” for family planning clinics, started his advocacy work on behalf of contraceptive education while an undergraduate in the 1960s. He later wrote some of the first influential papers on the potential of emergency contraception to prevent unintended pregnancies, including some in collaboration with the late Dr. Felicia Stewart, a renowned specialist in women’s health. Trussell was also a pioneer in providing information about EC on the web, once that technology became available.

Prescott also mentions Dr. Stewart’s practice of providing “do it yourself” EC kits for her patients, which consisted of cut up packets of regular oral contraception, along with typed instructions as to how and when to use these pills for back-up contraception. (A surprising omission in this otherwise thorough book is any mention of Stewart’s tenure as Deputy Assistant Secretary for Population Affairs in the Clinton administration, a position in which she strongly advocated for approval of a dedicated EC product.) Thanks to the efforts of these pioneers, and others, particularly the Reproductive Health Technologies Project, by

CAROLE JOFFE is a professor emerita of sociology at the University of California, Davis, and a professor in the Bixby Center for Global Reproductive Health at University of California, San Francisco. She is the author of *Dispatches from the Abortion Wars: The Costs of Fanaticism to Doctors, Patients and the Rest of Us*, and *Doctors of Conscience: The Struggle to Provide Abortion before and after Roe v. Wade*.

Bookshelf

Women and Redemption: A Theological History

Rosemary Radford Ruether (Fortress Press, 2012, 328 pp)

The book helps unearth the lives of historical women and men and their many paths towards redemption. This is a much-needed affirmation of a tradition many Catholics sense lies just out of reach within the more frequently told stories about Catholicism. St. Thomas Aquinas, whose many contributions have been discussed in other publications, is revealed to have been a key architect in the imposition of systems that impose an inferior status on women in the church, which continues to stymie reform-minded Catholics today.

The second edition of this work builds upon the first version, published in 1998. The additions to the original material include: timelines for each chapter, suggestions for further reading and research, as well as a focus on what the author calls the “Fourth World.” This Fourth World is a postcolonial view that encompasses stateless peoples, indigenous groups and marginalized social and sexual minorities. The author examines the feminist critique developed by each of the four “worlds,” in which “redemption” is often understood to include critiques of existing structures related to race, class and colonialism. The book focuses on the 2000 years of the Christian tradition and a broad selection of its many antecedents and offshoots. Jewish, African, Protestant and Catholic views are incorporated into this work.

The section on 12th-century mystic Hildegard of Bingen depicts the tension between this prophetic woman and her self-image as a “poor little female figure.” She broke new ground for women in her day, but she didn’t see her role as transforming social norms. Instead, the outspoken visionary saw existing male and female social roles as supporting the rightful domination of men over women. Hildegard believed the worldly differences between men and women were not without remedy, but she saw social classes as being much more rigid: only noblewomen were allowed to join her monastery.

As the book moves through time it reveals a tradition of female spiritual seekers that was never truly obscured by the many voices that had a better platform within established religion. Solid scholarship and the true historian’s gift at getting inside long-vanished heads make *Women and Redemption* a worthy read.

Church Militant:

Bishop Kung and Catholic Resistance in Communist Shanghai

Paul P. Mariani, SJ (Harvard University Press, 2011, 282 pp)

Like history itself, this book can be read on a number of levels. As a Jesuit writing about a nation whose Catholicism has been heavily influenced by that order, it’s understandable that the author is telling the story from a step or two closer than one would expect from a history book. The result is anything but dry: rather, it is a well-researched and well-told narrative that has the tone of a book about war. It has all the tragedies, tactical maneuvers and heroism one would expect about a conflict between two great enemies, one of them with a clear moral ascendancy, with the part of heroes played by Catholic clergy and laypeople resisting government repression.

That Chinese communism was a political regime with an expressed enmity for religion, especially Catholicism, and that many faithful people paid a high price in that system, is clear from the author’s painstaking research. Even those readers who are less likely to take sides with the way the Catholic church has interacted with secular powers in the last century will find *Bishop Kung* a compelling read. The battles Chinese Catholics were forced to fight against the government also drew in Catholic missionaries and the secular and religious powers from their home countries, meaning this segment of history was not two sides, good versus evil, but the complex interactions between a variety of secular and religious entities. This book illuminates a new section of the sprawling and complex tapestry woven by Catholics as they engage with the world—as missionaries, faith communities and sometimes as dissidents.

1998 the drug Preven became the first FDA-approved EC product.

Subsequently, a different EC product, Plan B, became the center of a political firestorm during the George W. Bush presidency. The makers of Plan B asked that the FDA approve “over the counter” (OTC) status for the drug, arguing that ample scientific evidence demonstrated the safety of such a move. This application was subject to numerous delays and, predictably, the vociferous opposition of antiabortion forces, but finally was approved by the joint advisory committee of the FDA in 2003. Nevertheless, in an unprecedented action, Steve Galson, the acting head of the FDA’s Center for Drug Evaluation and Research, rejected the recommendation of the advisory committee. He argued that Barr Laboratory, the makers of Plan B, had not shown that “young adolescent women” could safely use the drug “without the supervision of a practitioner.” As Prescott points out, this was the first time that the FDA had ruled that a drug be assigned a prescription status based on age. Barr Laboratory resubmitted its application, including data that demonstrated the drug could be safely used by adolescents, but the FDA repeatedly postponed its decision over the next two years. This postponement, widely believed to be driven by the Bush administration’s desire to please its social conservative base, led to the well-publicized resignation of Dr. Susan Wood, head of the FDA’s Office of Women’s Health. Not until Senators Patty Murray and Hillary Clinton made good on their threat to hold up the confirmation of a new head of the FDA did the agency finally release its decision in 2006: approval for over-the-counter status was granted, but only for women 18 and older. Later a judge ruled that this order had to also encompass women who were 17. Advocates again pushed to extend this ruling to those under 17, leading to the Obama administration’s overturning of the 2011 FDA decision mentioned above.

Most readers of this book will probably already be aware of the two main opponents in the enduring conflict over

EC—on the one hand, antiabortion forces, who have relentlessly argued that EC itself is an “abortifacient,” and on the other, reproductive health advocates wishing to extend women’s contraceptive options. A particularly valuable contribution of this book is Prescott’s tracing of the internal dynamics and shifting alliances within the reproductive health community. In this regard, it is fascinating to note the counterintuitive nature of the positions held by some of the main actors: the physicians who pushed for the demedicalization of EC by advocating for OTC status and freely handed out prescriptions of the drug to participants at the gigantic 2004 March for Women’s Lives in Washington, versus some of the best-known feminist health organizations, such as the National Network for Women’s Health, which were initially wary about making EC available over the counter due to concerns about safety factors and the fact that insurance programs typically do not cover non-prescription drugs. Eventually, as Prescott concludes, “Emergency contraception has served as a bridge issue that has brought together former adversaries, including feminist health organizations, population and family planning people and groups representing women of color.”

Even without knowing about the latest setback to EC that occurred during the Obama presidency, Prescott ends her book on a sober note. She points to the fact that EC has not lived up to the most positive scenarios depicted by some of its earliest promoters because the availability of the drug has not appreciably affected the unintended pregnancy rate in the United States. (Nor, one should point out, has the drug’s availability led to the outbreak of “promiscuity” warned of by its detractors.) Most compellingly, Prescott acknowledges the economic inequalities in the US that decades of feminist health activism have been unable to address, and which “pose an insurmountable barrier to those unable to afford the products of this self-care revolution.” ■

Body Building: Intervention in Evolution

By Gail Grossman Freyne

Embryo Politics: Ethics and Policy in Atlantic Democracies

Thomas Banchoff

(Cornell University Press, 2011, 272 pp)

978-0-8014-4957-4, \$35.00

A FEW SHORT YEARS BEFORE the turn of the century Dolly the cloned sheep was born. “It’s unbelievable,” said Princeton geneticist Lee Silver in a 1997 *New York Times* article titled “Science Reports First Cloning Ever of Adult Mammal.” “It basically means there are no limits. It means all of science fiction is true,” Silver continued. That may seem like an oxymoron, but the same article features another medical expert musing about an idea he’d once had for a fictional tale about a scientist who obtains a spot of blood from the cross on which Jesus was crucified, and then uses it to clone a man. The lines between fiction and reality have already begun to blur. Just what may soon be possible is made clearer by Thomas Banchoff’s *Embryo Politics: Ethics and Policy in Atlantic Democracies*.

GAIL GROSSMAN FREYNE, LLB, PHD, is currently a family therapist and mediator in private practice in Dublin, Ireland (www.gailfreyne.org). She has previously worked as a lawyer in Melbourne and Queensland in Australia and in New Orleans, La. She is the author of Care, Justice & Gender: A New Harmony for Family Values (Veritas, Dublin).

Banchoff does not fall prey to the allures of science fiction and he avoids sensationalism, but his book is sensational. It is an exciting read and should generate a great deal of public interest because it sets out with clarity the many strands, both ethical and political, that make up in vitro fertilization (IVF), stem cell research and cloning. The author takes us on a journey through space and time: across four countries during four decades. The countries are the United Kingdom, France, Germany and the United States. In 1968 the first human egg was successfully fertilized outside the womb in Cambridge, England. In 1978, the first IVF baby, Louise Brown, was born. The derivation of human embryonic stem cells in 1998 led to the first verified cloning of a human embryo in 2008. Also in 2008 the British government disclosed that it had permitted scientists to solve the problem of the shortage of human eggs for research by the creation of animal-human hybrid embryos as a source of stem cells. This high-tech innovation paradoxically feels like being plunged back in time to ancient Greece and Rome and myths about centaurs, satyrs and other half-human creatures.

