

How Contraception Built the **ABORTION** **CULTURE**



Introduction

Wherever contraception leads, abortion always follows, whether for a church denomination or for an entire country.¹

Isn't contraception supposed to reduce abortions?

Abortion advocates often state that if pro-life people really want to prevent abortion, we should focus more on promoting contraception.

At first blush, that kind of makes sense:

Contraception is designed to reduce the likelihood of pregnancy. Fewer pregnancies should mean fewer abortions...right?

But no matter how often it's repeated, this logic doesn't hold up in the real world. Instead, everywhere contraception goes, you can see abortion popping up behind it.



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Historical Connection between Contraception and Abortion

Contraception and abortion have existed in some form or another for thousands of years. But in the 1960s, the birth control pill changed the game dramatically. Suddenly, contraception was more effective and available than it had ever been before.²

If contraception were an effective way to prevent abortions, abortion should have basically disappeared at that point. Instead, the opposite happened:

- 1956 - The U.S. legalized the pill.³
- 1973 - The U.S. legalized abortion.⁴

- 1961 - The UK legalized the pill.⁵
- 1967 - The UK legalized abortion.⁶

- 1961 - Australia legalized the pill.⁷
- 1969 - Australia legalized abortion.⁸

- 1967 - France legalized the pill.⁹
- 1975 - France legalized abortion.¹⁰

- 1969 - Canada legalized the pill.¹¹
- 1988 - Canada legalized abortion.¹²

- 1978 - Spain legalized contraception.¹³
- 1985 - Spain legalized abortion.¹⁴

So, what is going on here? How did a more effective method of preventing pregnancy lead to a rise in abortion?

note :

The process of normalizing abortion and contraception was complex in all of these countries. The dates shown are not the whole story. They are landmark moments that put those cultural changes in sequence.



In developing countries, the process works a bit differently.

Western NGOs that promote population control spend billions of dollars a year saturating developing nations with contraception.

They know very well that contraception fails frequently, creating a market for abortion. The population controllers hugely exaggerate the demand and then push to legalize abortion.¹⁵

Our mission at HLI is to build a pro-life culture around the globe and particularly in the developing world. Helping communities say “no” to contraception is an essential part of that work.

How Contraception Creates a Pro-abortion Mentality

Before the 1960s, sexually active people understood that intercourse often leads to pregnancy. The pill changed that mindset.¹⁶

Because contraception was suddenly perceived as “reliable,” the link between sex and pregnancy was broken in the public mind. People made more promiscuous choices, expecting no consequences.

Our very own Fr. Marx explained,

The large-scale use of contraceptives and abortifacients leads to a tremendously increased rate of sexual activity, which, combined with method and user failures, leads to a huge increase in the number of “unplanned pregnancies.”¹⁷



Up until the early 1980s, the most famous pro-abortion leaders admitted that an increase in contraceptive availability inevitably leads to an increase in promiscuity and therefore abortions.

Both of the co-inventors of the birth control pill have confessed that a greater use of contraceptives has led to greater promiscuity and carelessness, which inevitably leads to more abortions.

Famous “sexologist,” Alfred Kinsey, admitted, “At the risk of being repetitious, I would remind the group that we have found the highest frequency of induced abortion in the group which, in general, most frequently uses contraceptives.”¹⁸

Malcolm Potts, former Medical Director of the International Planned Parenthood Federation (IPPF), acknowledged the contraception-abortion link in 1981 when he said,

“As people turn to contraception, there will be a rise, not a fall, in the abortion rate.”¹⁹

Contraceptive Failure and Unplanned Pregnancy

There are more than two million contraceptive failures in the United States annually, half of which end in abortion.²⁰

Contraception is failure-prone, but people place too much confidence in it because it is advertised as being reliable. **More than half of all women currently obtaining abortions were using contraception when they got pregnant.**²¹

Once a couple starts using contraception, they make lifestyle changes and commitments that do not allow room for children. When contraception fails and they become pregnant, their “life plan” wins out over their child.

Since their contraceptive method has failed them, they feel cheated and therefore “entitled” to an abortion — using one method of medical technology to cover up for the failure of another.



Rates of (In)Effectiveness

The best user (“real world”) effectiveness rates of birth control pills, the IUDs, injectables, and insertables average about 96-98%, and the best user effectiveness rates for male and female condoms, cervical caps, diaphragm, and sponge average only about 80%.²²

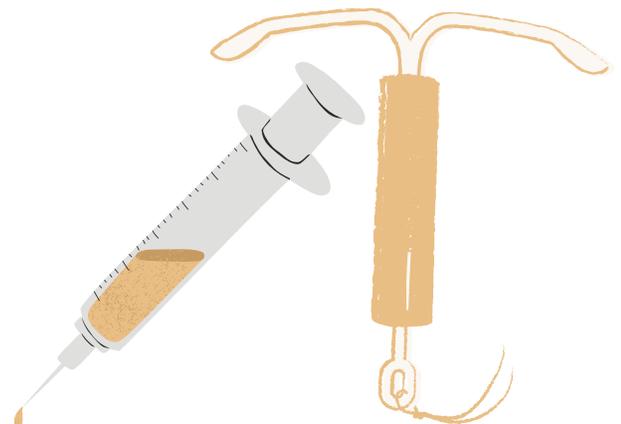
The method effectiveness of the Pill is 99.7% per year.²³ This percentage is extremely high, but it refers to the efficiency of the Pill when a woman is in excellent health and uses the Pill without error. When user error and illness are factored in, the result is the actual, or “real world” user effectiveness rate.

In the case of the Pill, this is only 91% per year.²⁴ This means that 9% of women on the Pill will become pregnant in any given year of use. The Pill itself is responsible for only about 3% of all failures, and the users are responsible for the remainder.²⁵

The 91% “real world” effectiveness rate for the Pill still sounds high until we calculate the probability of a woman becoming pregnant over an extended period of time when using it.

If a sexually active girl of 15 starts using the Pill continuously, there is a nearly 50% chance that she will become pregnant by the time she is 22!

This statistic is verified by pro-abortionists, including Dr. Christopher Tietze, who said, “Within 10 years, 20 to 50 percent of Pill users and a substantial majority of users of other methods may be expected to experience at least one repeat abortion.”²⁶ Note that Tietze is speaking about repeat (second or more) abortions here.



PROBABILITY OF BECOMING PREGNANT ON THE PILL

9%

IN THE
FIRST YEAR

25%

IN
THREE YEARS

38%

IN
FIVE YEARS

61%

IN
TEN YEARS

Sex-Ed is Part of the Problem

Many people assume that better sexual education will reduce abortion rates. After all, those who are better informed should be better able to avoid unwanted pregnancies. In practice, however, this isn't really the case.²⁷

“Sex educators”, tell young people that they can avoid pregnancy by using contraception. School-based clinics then facilitate promiscuous sex by distributing contraceptives and abortifacients to teenagers without parental consent or knowledge.²⁸

This perpetuates the “contraceptive mentality” that creates demand for abortion.



It sometimes does appear that sex-ed within schools is linked with lower birth rates, but that's not the whole picture. Pregnancies increase and the problem is masked by a higher abortion rate.²⁹

Studies have shown that increased access to contraceptives may decrease teen pregnancies in the short run. But it leads to large increases later on when contraception leads to changes in sexual behavior.³⁰

Some Contraceptives are Actually Abortifacients

In the above section, we showed why contraception causes widespread demand for and acceptance of abortion.

But many people are still unaware that hormonal contraceptives also cause abortions directly.

Hormonal contraceptive users may be committing one or more “silent” abortions every year.

What is Contraception?

A true contraceptive method prevents conception in one or more of these ways:

- It places an actual mechanical barrier (such as a condom or cervical cap) between the sperm and ovum to prevent them from uniting.
- It thickens the cervical mucus, preventing the easy travel of sperm.
- It inhibits ovulation, preventing the release of a mature ovum.
- It blocks the Fallopian tube or *vas deferens* through sexual sterilization.³¹

When effective, each of these methods prevents a new human being from being created.



What are Abortifacients?

An abortifacient is defined as “an agent (such as a drug) that induces abortion.”³² However, manufacturers often market these drugs under the name “contraception” to make them more appealing to consumers.

There are two distinct kinds of abortifacients: those that prevent a child from implanting in the uterus, and those that kill the child after implantation.

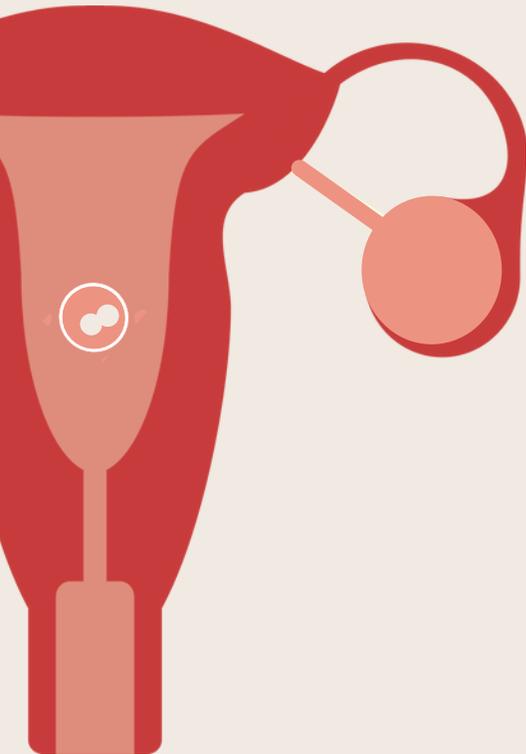


Abortifacients that Prevent Implantation

This includes drugs and devices that continually maintain a certain level of hormones in the woman’s body, mimicking pregnancy. While these can also have a genuine contraceptive effect, each also has the potential to alter the lining of the uterus (endometrium) to prevent the implantation of a tiny human being.³³

Some examples are:

- Oral contraceptives such as the birth control pill³⁴
- Intrauterine devices³⁵
- Injectables such as Depo-Provera³⁶
- Implants such as Norplant, Jadelle, Implanon, and Nexplanon³⁷



Abortifacients that Attack an Implanted Child

The second type of abortifacient directly kills an existing preborn child. Also referred to as “medical abortion,” these include:

- RU-486 (the “abortion pill”)³⁸
- The methotrexate/misoprostol combination³⁹
- “Emergency contraception”: These abortifacients have many forms and are sometimes called “morning-after pills.” They consist of high doses of the artificial steroids used in oral contraceptives. The most popular brand is Plan B.⁴⁰

Abortion is the New “Contraception”

It is safe to say that many pro-lifers use “contraceptive” methods that are actually abortifacients. These men and women may not want to hear that they may be committing one or more “silent” abortions themselves every year, but it would not be intellectually or ethically honest to deny the truth in this matter.

The overlap between contraceptives and abortifacients tricks many people into thinking abortion is “ok,” at least in the early stages of pregnancy.

Once we accept early abortion as backup contraception, why not later abortion? And for that matter, why bother with contraception at all?

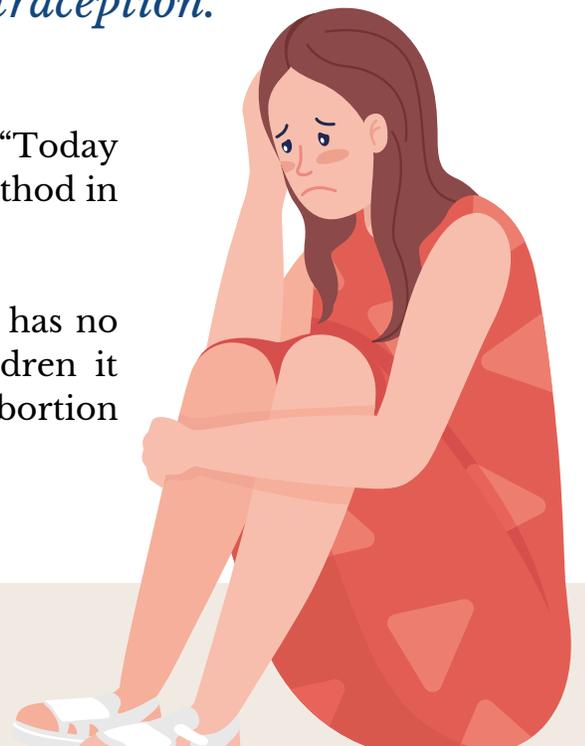
Psychologists Eugene Sandburg and Ralph Jacobs note, “As legal abortion has become increasingly available, it has become evident that some women are now intentionally using abortion as a substitute for contraception.”⁴¹

Dr. Alan Guttmacher, former Medical Director of the International Planned Parenthood Federation, also drew a clear picture of the link between abortion and contraception within the context of increased promiscuity nearly fifty years ago:

“When abortion is easily obtainable, contraception is neither actively nor diligently used. If we had abortion on demand, there would be no reward for the woman who practiced effective contraception.”⁴²

Canadian sex educator David Robinson stated, “Today abortion is the most widely used birth control method in the world.”⁴³

No matter how “effective” it is, contraception has no place in a pro-life culture. Some pre-born children it kills directly. Others are endangered by the pro-abortion mentality it creates.



Case Study: How Contraception Unleashed Abortion in the U.S.

1960

FDA approves “The Pill”.⁴⁴

For the first time ever, “effective” contraception was available in the United States. Marketers claimed that sex could now be commitment-free and child-free. The sexual revolution started to take off.

Many groups still saw contraception as immoral, and some states had laws restricting or banning it.

1965

Griswold v Connecticut makes contraception a constitutional “right” for married couples.⁴⁵

Connecticut’s law against contraception was overturned on the grounds that it violated a constitutional “right to marital privacy” which was found in the “penumbras” and “emanations” of other constitutional protections.

1965

“Conception” redefined. Now a child isn’t protected until implantation.

Contraceptive users wanted an easier method than the pill. Research for the modern IUD was already underway. But its operation fell under the definition of abortion.

To get around this, the American College of Obstetricians and Gynecologists simply changed the definition of “conception” from fertilization to implantation.⁴⁶ Now the IUD could destroy a newly formed human being on its journey to the uterus and still be called a “contraceptive.” *There was no new scientific information to motivate this change.*

1972

“Right” to contraception expands to the unmarried.⁴⁷

In *Eisenstadt v. Baird*, the Supreme Court decided that the “right to privacy” which forced states to legalize contraception for married couples applied to the unmarried also.⁴⁸ Now contraceptives and abortifacients were legally available to everyone.

In just 12 years, contraception toppled the cultural conviction that sex was meant for marriage. But reality kept interfering in the form of contraceptive “failures.” The new permissive sexual culture was unsustainable without legal abortion.

1973

Roe v Wade legalizes abortion nationwide.⁴⁹

The Supreme Court discovered a “right” to abortion in the US constitution. Suddenly, states were no longer allowed to protect children before the point of viability.

The case for abortion was built on the “right to privacy” that legalized contraception in *Griswold and Eisenstadt*.

Abortion rates ballooned after *Roe* despite the fact that contraception was legally available to anyone.

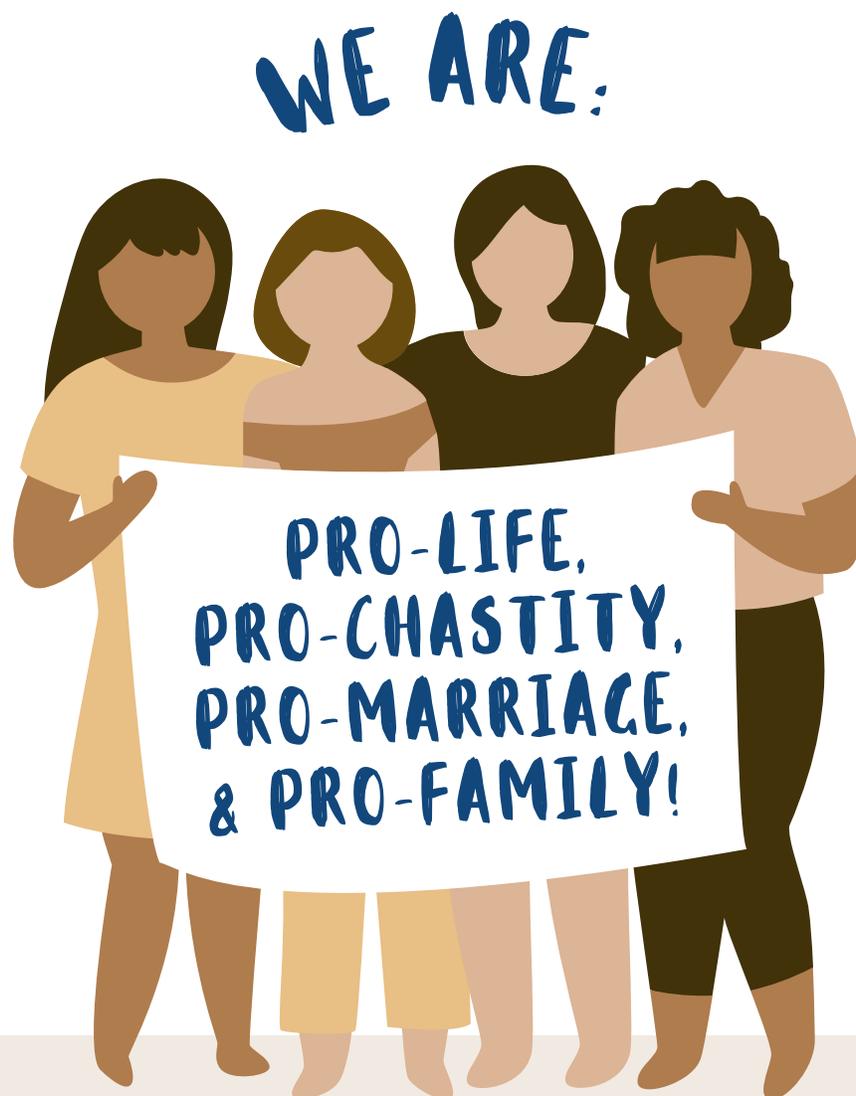


Conclusion

In the United States, contraception paved the way for abortion culturally and legally. The same pattern can be observed in countries all over the world.

Far from being an easy solution to abortion, contraception is one of its main causes, and pro-lifers should never support it. As long as contraception is widely available and the underlying anti-life mentality reigns, the practice of abortion will never end.

A truly pro-life culture is pro-chastity, pro-marriage, and pro-family. That's the kind of culture we need to build if we want every life to be respected, protected, loved, and served.



Resources

- [1] Clowes Ph.D., Brian. “Does Contraception Lead to Abortion?” Human Life International. 6 Apr 2017. <https://www.hli.org/resources/contraception-lead-abortion/>
- [2] Landau, Meryl Davids. “Birth Control in America: A Brief History of Contraception.” Everyday Health. 16 Nov 2021. <https://www.everydayhealth.com/birth-control/contraception-birth-control-women-america/>
- [3] Griswold v. Connecticut. 381 U.S. 479 (1965) <https://caselaw.findlaw.com/us-supreme-court/381/479.html>
- [4] Roe v. Wade, 410 U.S. 113 (1973). <https://caselaw.findlaw.com/us-supreme-court/410/113.html>
- [5] House of Commons. Birth Control Pills. HC Deb 04 December 1961 vol 650 cc922-3. Hansard; 1961. https://api.parliament.uk/historic-hansard/commons/1961/dec/04/birth-control-pills#S5CV0650P0_19611204_HOC_156
- [6] HM Government, The Abortion Act 1967. (Great Britain). <https://www.legislation.gov.uk/ukpga/1967/87/contents/enacted>
- [7] “Defining Moments: The Pill,” National Museum of Australia. <https://www.nma.gov.au/defining-moments/resources/the-pill>
- [8] R v Davidson. Victorian Supreme Court. 1969. VicRp 85 VR 667. <https://docslib.org/doc/850232/r-v-davidson-victorian-supreme-court-1969-vicrp-85-menhennt-j>
- [9] Puppink, Gregor. “The Neuwirth Law judged by History.” European Center for Law and Justice. 16 Feb 2017. <https://eclj.org/family/french-institutions/-la-loi-neuwirth-au-tribunal-de-lhistoire>
- [10] France. Loi No. 75-17 du 17 Janvier 1975 relative a l'interruption volontaire de grossesse [Law No. 75-17 of 17 January 1975, concerning the voluntary termination of pregnancy]. J Off Repub Fr Ed Lois Decrets. 1975 Jan 18:739-41. French. PMID: 12222403. <https://pubmed.ncbi.nlm.nih.gov/12222403/>
- [11] Bishop, Mary F. “History of Birth Control in Canada.” The Canadian Encyclopedia. 1 Feb 2021. <https://www.thecanadianencyclopedia.ca/en/article/history-of-birth-control-in-canada>
- [12] R. v. Morgentaler, 1988 CanLII 90 (SCC), [1988] 1 SCR 30. <https://www.canlii.org/en/ca/scc/doc/1988/1988canlii90/1988canlii90.html>
- [13] Perez, Roberto. “Cuando los Anticonceptivos Dejaron de Ser un Delito en España” ABC Espana. [“When Contraceptives Stopped Being a Crime in Spain.” ABC Spain.] 25 Aug 2018. https://www.abc.es/espana/la-transicion-espanola/abci-cuando-anticonceptivos-dejaron-delito-espana-201808251257_noticia.html
- [14] “Legal Abortion Backed by Spanish Parliament.” New York Times. 28 Jun 1985. <https://www.nytimes.com/1985/06/28/world/legal-abortion-backed-by-spanish-parliament.html>
- [15] Clowes Ph.D., Brian. “Does Contraception Lead to Abortion?” Human Life International. 6 Apr 2017. <https://www.hli.org/resources/contraception-lead-abortion/>
- [16] Landau, Meryl Davids. “Birth Control in America: A Brief History of Contraception.” Everyday Health. 16 Nov 2021. <https://www.everydayhealth.com/birth-control/contraception-birth-control-women-america/>

- [17] Clowes Ph.D., Brian. “Does Contraception Lead to Abortion?” Human Life International. 6 Apr 2017. <https://www.hli.org/resources/contraception-lead-abortion/>
- [18] Alfred Kinsey, America’s most famous “sexologist,” quoted in Mary Calderone, M.D. [Editor]. *Abortion in the United States* [New York: Paul B. Hoeber, Inc., 1956], page 157.
- [19] Malcolm Potts. “Fertility Rights.” *The Guardian*. 25 Apr 1979.
- [20] Clowes Ph.D., Brian. “Does Contraception Lead to Abortion?” Human Life International. 6 Apr 2017. <https://www.hli.org/resources/contraception-lead-abortion/>
- [21] Rachel K. Jones, Jacqueline E. Darroch and Stanley K. Henshaw. “Contraceptive Use Among U.S. Women Having Abortions in 2000-2001.” *Perspectives on Sexual and Reproductive Health* [formerly *Family Planning Perspectives*] [Guttmacher Institute], November/December 2002 [Volume 34, Number 6], pages 294 to 303. Table 1, “Percentage Distribution of Women Obtaining Abortions in 2002, by Contraceptive Method Used in the Month of Conception, and of Women at Risk of Unintended Pregnancy in 1995, by Contraceptive Method Used.”
- [22] Robert A. Hatcher, et. al. *Contraceptive Technology* (18th Revised Edition) [New York: Ardent Media, Inc.], 2004. Table 31-1, “Percentage of Women Experiencing an Unintended Pregnancy During the First Year of Typical Use and the First Year of Perfect Use of Contraception and the Percentage Continuing Use at the End of the First Year. United States,” page 792.
- [23] Cornforth, Tracee. “Find out How Effective the Birth Control Pill Is.” *VeryWell Health*. 20 Oct 2021. <https://www.verywellhealth.com/how-effective-is-the-birth-control-pill-3522638>
- [24] Robert A. Hatcher, et. al. *Contraceptive Technology* (20th Revised Edition) [New York: Ardent Media, Inc.], 2011. Table 26-1, “Percentage of Women Experiencing an Unintended Pregnancy During the First Year of Typical Use and the First Year of Perfect Use of Contraception and the Percentage Continuing Use at the End of the First Year. United States,” page 791.
- [25] Clowes Ph.D., Brian. “The Birth Control Pill: Unintended Consequences.” Human Life International. 11 May 2017. <https://www.hli.org/resources/birth-control-pill-unintended-consequences/>
- [26] Christopher Tietze, quoted in the National Abortion Rights Action League’s *A Speaker’s and Debater’s Guidebook*. June 1978, page 24.
- [27] Lawyer, William. “The Effects of Abortion Laws: Myths and Facts.” Human Life International. 3 Jun 2022. <https://www.hli.org/resources/effects-of-abortion-laws/>
- [28] Clowes Ph.D., Brian. “The Birth Control Pill: Unintended Consequences.” Human Life International. 11 May 2017. <https://www.hli.org/resources/birth-control-pill-unintended-consequences/>
- [29] Cavazos-Regh Ph.D., Patricia A.; Krauss MPH, Melissa J.; Spitznagel Ph.D., Edward L.; et al. “Associations Between Sexuality Education in Schools and Adolescent Birthrates. A State-Level Longitudinal Model.” *Jama Network*. Feb 2012. <https://jamanetwork.com/journals/jamapediatrics/fullarticle/1107690>
- [30] Arcidiacono, Peter; Khwaja, Ahmed; Ouyang, Lijing. “Habit Persistence and Teen Sex: Could Increased Access to Contraception have Unintended Consequences for Teen Pregnancies?” Duke University. 22 Jan 2011. <http://public.econ.duke.edu/~psarcidi/teensex.pdf>
- [31] HLI Staff. “What are Abortifacients?” Human Life International. 17 Nov 2021. <https://www.hli.org/resources/what-are-abortifacients/>
- [32] Merriam-Webster Online Dictionary definition of “abortifacient.” <https://www.merriam-webster.com/dictionary/abortifacient>

- [33] HLI Staff. “What are Abortifacients?” Human Life International. 17 Nov 2021. <https://www.hli.org/resources/what-are-abortifacients/>
- [34] “Thin Endometrium.” Medicover Fertility. <https://www.medicoverfertility.in/blog/thin-endometrium,197,n,5475>
- [35] Robert A. Hatcher, M.D., M.P.H. Contraceptive Technology [New York City, Ardent Media] (20th Edition, 2011). Chapter 7, “Intrauterine Contraceptives (IUCs), pages 147 to 192.
- [36] University of California at Berkeley University Health Services, Tang Center. “Depo-Provera for Contraception,” 28 Mar 2011. See also October 2010 patient information pamphlet by Physicians Total Care.
- [37] Ciancio, Susan. “Abortifacient Brief: Implants.” Human Life International. 5 Nov 2020. <https://www.hli.org/resources/abortifacient-brief-implants/>
- [38] Clowes Ph.D., Brian. “Abortifacient Brief: The RU-486 Abortion Pill.” Human Life International. 12 Apr 2017. <https://www.hli.org/resources/abortifacient-brief-ru-486-abortion-pill/>
- [39] “Abortion Methods.” United States Conference of Catholic Bishops. <https://www.usccb.org/issues-and-action/human-life-and-dignity/abortion/abortion-methods>
- [40] “Statement on the So-Called ‘Morning-After Pill’” Pontifical Academy for Life. https://www.vatican.va/roman_curia/pontifical_academies/acdlife/documents/rc_pa_acdlife_doc_20001031_pillola-giorno-dopo_en.html
- [41] Eugene C. Sandburg, M.D. and Ralph I. Jacobs, M.D. “Psychology of the Misuse and Rejection of Contraception.” American Journal of Obstetrics and Gynecology, 15 May 1971, pages 227 to 237.
- [42] Dr. Alan Guttmacher in a discussion at the Law, Morality and Abortion Symposium, held at Rutgers University Law School, 27 Mar 1968. Rutgers Law Review, 1968(22):415-443.
- [43] David Robertson, et al. “Sex Education: A Teacher’s Guide.” The Canadian Ministry of National Health and Welfare, Volume 4, pages 24 and 25.
- [44] History.com Editors. “FDA Approves ‘The Pill.’” HISTORY. 9 Feb 2012. Updated 3 May 2022. <https://www.history.com/this-day-in-history/fda-approves-the-pill>
- [45] Griswold v. Connecticut. 381 U.S. 479 (1965) <https://caselaw.findlaw.com/us-supreme-court/381/479.html>
- [46] Clowes Ph.D., Brian. “Abortifacient Brief: The Intrauterine Device.” Human Life International. 5 Jan 2022. <https://www.hli.org/resources/abortifacient-brief-intrauterine-device/>
- [47] Clowes Ph.D., Brian. “Isn’t Abortion a Legal, Constitutional and Human Right?” Human Life International. 2 June 2021. <https://www.hli.org/resources/abortion-no-constitutional-human-right/>
- [48] Eisenstadt v. Baird. 405 U.S. 438 (1972) <https://caselaw.findlaw.com/us-supreme-court/405/438.html>
- [49] Roe v. Wade, 410 U.S. 113 (1973). <https://caselaw.findlaw.com/us-supreme-court/410/113.html>

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