"Personhood" Measures: Impact on Contraception

So-called “personhood” measures would establish fertilized eggs as separate legal persons under the laws of a state. These measures have qualified for the ballot in only two states—Colorado in 2008 and 2010, and Mississippi in 2011. All three failed by wide margins.

These measures erode women’s right to privacy and bodily integrity, deny women access to the full spectrum of preventive health care including contraception, and undermine the doctor-patient relationship.

As acknowledged by proponents, these measures would not only outlaw abortion but also embryonic stem cell research, infertility treatments, cancer treatments, and popular methods of birth control.

Talking Points

Passage of these measures would limit or eliminate contraceptive options.

- Some of the most effective and reliable forms of contraception — oral contraceptives, intrauterine devices, and other forms of FDA-approved contraceptives — could be banned in states that adopt ‘personhood’ measures.

Almost all American women would be affected by outlawing birth control.

- 99% of women aged 15-44 who have ever had sexual intercourse have used at least one contraceptive method.

- 7 in 10 women are sexually active, do not want to become pregnant, and could become pregnant without birth control.

- Without birth control, unintended pregnancy and abortion rates would more than double.

An increase in unintended pregnancies threatens maternal and child health.

- Contraception gives women an opportunity to prepare for pregnancy. The consequences of unintended pregnancy can be detrimental to health.
Coexisting medical conditions — including heart disease, high blood pressure, diabetes and lupus — can worsen and threaten the health and life of pregnant women.

Short pregnancy intervals are associated with low birth weight, prematurity, and small for gestational age infants.

Unintended pregnancy is associated with a lack of prenatal care and more smoking, alcohol use, depression, and domestic violence during pregnancy.

Women who use birth control to protect their health would be denied treatment.

By far, the most common medical reason for contraceptive use is for its primary purpose, pregnancy prevention: 95% of birth control pill users cite birth control as their reason for use.\(^5\)

More than half of pill users also identify other health benefits as additional reasons for use.\(^5\)

1.5 million US women use the pill solely for non-contraceptive reasons.\(^5\)

Non-contraceptive benefits of hormonal contraception include: \(^6\)

- Menstrual cycle regularity
- Treatment of menorrhagia
- Treatment of dysmenorrhea
- Treatment of premenstrual syndrome
- Prevention of menstrual migraines
- Decrease in risk of endometrial, ovarian, and colorectal cancer
- Treatment of acne or hirsutism
- Improved bone mineral density
- Treatment of bleeding due to leiomyomas
- Treatment of pelvic pain due to endometriosis

Medical evidence is clear about how contraception works.

- Contraception prevents pregnancy by preventing fertilization or implantation of a fertilized egg.\(^7\)
- No birth control method disrupts a pregnancy.\(^8-11\)

References:

3. Gold RB et al., Next steps for America’s family planning program: Leveraging the potential of Medicaid and Title X in an evolving health care system. New York: Guttmacher Institute, 2009.
7. ACOG Statement on Contraceptive Methods (This 1998 statement is being updated.)