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¿Y Los Condones? The Rhetoric Of Birth Control In The Latinx Community Of The United States

Carey Vanessa Cuevas
University of Texas at El Paso

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¿Y LOS CONDONES? THE RHETORIC OF BIRTH CONTROL IN THE LATINX
COMMUNITY OF THE UNITED STATES

CARÉY VANESSA CUEVAS

Master's Program in Communication Studies

APPROVED:

Richard Daniel Pineda, Ph.D., Chair

Sarah De Los Santos-Upton, Ph.D.

Carina Michelle Heckert, Ph.D.

Stephen L. Crites, Jr., Ph.D.,
Dean of the Graduate School

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2021

Dedication

For my younger self.

¿Y LOS CONDOMES? THE RHETORIC OF BIRTH CONTROL IN THE LATINX
COMMUNITY OF THE UNITED STATES

by

CARÉY VANESSA CUEVAS

THESIS

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Abstract

This project aims to explore the current rhetorical strategies used in framing reproductive technologies and how these frameworks influence the sexual health outcomes of Latinx communities. Despite the wealth of information made available to individuals in order to make more informed choices regarding their sexual health, literature supports that Latinx communities are at a perpetually higher risk for poor sexual health outcomes. Additionally, other influences such as mass media, culture, and legislation play roles in how this community engages around birth control and safe sex practices. This project seeks to investigate how entities utilize language in discourse over birth control in public and private spheres, and specifically through the use of the social media platform, Twitter. Furthermore, this thesis seeks to make a contribution to the literature on health communication and sexual communication and hopes to provide useful findings for health communication practitioners seeking to create interventions for the affected population. At the very least, this project aims to spur more conversations on the importance of open discourse about reproductive technologies in Latinx communities.

Keywords: rhetoric, discourse, reproductive technologies, birth control, sex, sexual health, sexual communication, health communication, media, culture, sexual health outcomes, Latinx

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Chapter 1: Introduction—An Emergence of Amplified Discourse on Sexual Health

In the 1960s, birth control and surrounding discourses about birth control forever changed. Women's sexual expression and reproductive potential was significantly impacted by Enovid, the first oral contraceptive approved by the Federal Drug Administration (FDA). Since then, more forms of birth control have made their way into our pharmacies, our homes and our bodies. A study conducted in 2014 indicated that “the Pill” was one of the most popular forms of birth control, followed by sterilization and the male (external) condom (Guttmacher Institute, 2019). As the United States continues to make more progress in science and healthcare—with the introduction of emergency birth control (Plan B pill) and transdermal birth control implants (Nexplanon)—the nation is engaging in more, far ranging, discourse about and placing a greater emphasis on what it means to engage in safe sex and effective family planning.

Movements regarding women's reproductive rights, such as greater access to birth control and the right to a safe and legal abortion, have influenced even further how the nation discusses sex and sexuality. Studies regarding sexual communication are beginning to take a more prominent space in journals of health communication, nursing, medicine, and marital therapy. Additionally, primary care physicians and other medical professionals are beginning to incorporate more lengthy discussions regarding their patients' sexual health concerns (Ryan et al., 2018). With the introduction of a variety of birth control options to the present political and social climate of our country, our understanding of the term ‘sexual health’ is being influenced and shaped. In this chapter, I will highlight and expand on the factors which significantly contributed to the amplification of discourses around sexual health.

This chapter will present and expand on the major theme of sexual health and explore the evolution of this term. Over time, the definition of sexual health has expanded as our

understanding and perception of health is beginning to incorporate more aspects which play an integral part in one's well-being. Furthermore, some attention will be drawn to how our communities learn about sexual health and how these resources help facilitate the dissemination of knowledge for purposes of making more informed decisions. Finally, there will be a specific focus on the patterned sexual health outcomes of the Latinx communities and a short discussion on the implications of these outcomes. Following this is the introduction of sexual communication and its usefulness in creating the conditions for improving sexual health outcomes.

As a nation, we are beginning to consider the concept of sexual health as an important factor in well-being of the whole human body (American Sexual Health Organization, 2019). To clarify research purposes of this study, I will explore a several definitions of sexual health. Due to the complex nature of sex and sexuality, there is not one universal definition of sexual health. The American Association of Sexuality Educators, Counselors and Therapists (AASECT) addresses the revolution of the definition of sexual health (2019). Organizations may have found it difficult to generate a definition which encompasses sexual diversity and inclusivity. Notwithstanding this challenge, we now have multiple holistic definitions of sexual health. The following paragraphs address a few popular definitions.

In 1975, in an effort to move away from focusing solely on disease prevention and undesired sexual outcomes, such as unplanned pregnancies and sexually transmitted diseases, the World Health Organization defined sexual health as, "the integration of the somatic, emotional, intellectual and social aspects of sexual being, in ways that are positively enriching and that enhance personality, communication and love" (AASECT, 2019). Presently, the World Health Organization defines sexual health as,

“a state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence” (2019).

The National Coalition of Sexual Health defines accomplishing sexual health as, “being able to enjoy a healthier body, a satisfying sexual life, positive relationships, and peace of mind” (2019). Additionally, the National Coalition of Sexual Health suggests that in order for one to achieve sexual health, they can engage in the following steps: 1) value who you are and decide what is right for you; 2) treat your partners well and expect them to treat you well; 3) build positive relationships; 4) get smart about your body and protect it; and 5) make sexual health part of your health care routine (2019).

While these definitions do an exceptional job of allowing us to grasp a better understanding of the concept of sexual health, they do not specify *who* has sexual health. I would like to briefly clarify who has sexual health. So, who has sexual health? Everyone has sexual health. Sexual health does not belong solely to those who have a working knowledge of anatomy and physiology, and it does not belong solely to those who have access to birth control. Sexual health belongs to anyone and everyone. Unfortunately, not everybody has been able to have better sexual health. Disparities in health care and white privilege have perpetuated that some populations have access to resources which contribute to better sexual health than other populations.

According to studies done by the Centers for Disease Control (CDC, 2019), reports have supported that minorities are at a higher risk for contracting sexually transmitted

diseases and infections, but the Latinx community finds itself particularly vulnerable. The Latinx community is also at a higher risk for experiencing unplanned pregnancies and early childbirth. Contraction of sexually transmitted diseases and early childbirth can lead to other subsequent consequences. Some of these consequences include postponing educational and professional aspirations or abandoning them altogether. This can be especially challenging for the Latinx community whose social mobility may stem from attaining higher education or advancing their professional careers. Despite the outcome, discourse on birth control and safe sex may be sparse and ineffective in this community. Engaging in responsible and safe sex requires a few things—access to birth control and communication.

Extant literature on sexual health has had a place in our clinics, bookstores and libraries for some time, and it is continuing to grow. One can find appropriate information for adults and for children (McClosky, 1993; Green, 2018; Harris, 1996; Silverberg & Smyth, 2015). Scholars from all backgrounds are researching and generating knowledge for those curious to learn about sex, sexuality, consent and improving their sexual health. Primary care givers can even find publications which are gender nonconforming and inclusive for their dependents (Silverberg & Smyth, 2015). While this information is available for readers of all ages, not every individual is taking advantage of these educational and potentially helpful published materials. Additionally, this information may not be disseminated accurately, or effectively. Furthermore, due to its stigma in many cultures, discourses about sex and sexual health may be considered taboo.

While research demonstrates that families of Latinx cultures are having conversations about sex, Martinez & Orpinas (2016) found that these conversations are not comprehensive or specific enough for their adolescents to make more effective decisions regarding their sexual

behaviors and sexual health. Conversely, Guzman et al. (2011) found that a Latinx youth's network, friends and family alike, does provide them with some helpful information about sex; these researchers also found that the more comfortable these youth were engaging in conversations about sex, the less likely they were to engage in sexual actions, or delayed their debut of sexual activity. This can be helpful in preventing youth from engaging in sexual behaviors at an age when they may not be aware of the many risks associated with unprotected sex, or do not yet know how to negotiate birth control with their partner/s.

Notwithstanding this hopeful literature, Latinx youth are less likely to use birth control than their non-Latinx counterparts, are more likely to engage in risky sexual behaviors, and are at a higher risk for contracting sexually transmitted diseases and infections (CDC, 2019). The CDC has documented that systemic barriers, such as lack of access to health care and distrust of the healthcare community, helps contribute to these outcomes (CDC, 2019; Planned Parenthood, 2021). Furthermore, Benavides, Bonazzo & Torres (2006) found that Latino males reported a dislike for using condoms. Their study also supported the conclusion that the responsibility of birth control frequently falls on young Latinas. Of even greater concern, Latina youth are less likely to be successful in negotiating condom use by their male partners (Gilliam, 2007). Additionally, Latinx youth are also less likely to have knowledge about safe sex or birth control use due to the lack of sexual education in the home (Romo et al., 2001). Finally, legislative efforts regarding the funding for and availability of a wide range of birth control options, such as access to safe and affordable abortions, also impacts the Latinx community and their family planning goals (Planned Parenthood, 2020). A prime example of this is recent legislative efforts during the COVID-19 pandemic which further sought to restrict access to abortion care. The Reproductive Health Access Project writes,

“When the COVID-19 pandemic began, ten states defined abortion as a non-essential or an elective health procedure, effectively banning abortion care until the end of the pandemic. Although these bans have been lifted, pregnant people experienced drastic consequences. In Texas, this ban lasted 31 days, leaving hundreds of pregnant people—who were in the middle of receiving options such as counseling, scheduling their appointment, abiding by the mandatory waiting period, driving long distances to their abortion—were thrown into limbo as to whether they could have an abortion in time, or be forced to carry an unwanted pregnancy to term” (Reproductive Health Access Project, 2020).

Despite the above findings, extant literature has supported that sexual communication between partners can influence each individual’s sexual health in a positive manner. Coupled with the consistent use of different combinations of birth control, sexual communication may be key in preventing unplanned pregnancy and sexually transmitted diseases and infections. Despite the value of this information, a working knowledge of birth control may not necessarily provide specific guidelines on how to effectively discuss what it means to engage in safe sex, how to advocate for one’s sexual health, or the importance of communicating consistent, effective, birth control use. Successful strategies for broaching this subject can be useful for allowing individuals to navigate cultural and societal norms which may pose challenges in advocating for their personal sexual health. Having more knowledge on a subject is important for individuals to be able to make more informed decisions, as is how one engages in discourse about that subject.

Consistent with the literature cited above, the relationships between how Latinx youth are discussing sex, their frequency in engaging in risky behaviors, how they use available information regarding their family planning needs, and legislation are all likely contributing to poor sexual health outcomes. Considering these issues, this study partially seeks to explore how the Latinx community grapples with the aforementioned concerns through rhetoric. Furthermore, this project specifically investigates how entities utilize language to frame reproductive technologies specifically using the social media platform Twitter. The thesis is divided into six chapters. The first chapter introduces this thesis and provides an overview of major themes. Chapter two will ground this thesis with a review of literature and is portioned into three sections: the intersection of sexual communication and current social environments, the role of rhetoric and social movements, and the intersection of the internet and reproductive agendas. Chapter three will provide a description of the methodology utilized. Chapter four will highlight the findings of this thesis as well as an analysis. Chapter five will begin to close this thesis with a conclusion and discussion. Finally, chapter six will expand on the limitations of this thesis, a few implications, and future suggestions for research.

Chapter 2: Literature Review

Chapter two presents the review of literature, highlighting the role of sexual communication as it is situated in current social environments and the lasting influence of rhetoric on social movements of birth control. Furthermore, this review will also highlight the role which the internet is beginning to take in facilitating agendas related to reproductive health. The agendas which are being acted on are rooted in entities whose goals include improving the landscape of reproductive healthcare. Themes that will be touched on also include Latinx gendered expectations, feminist movement legacies, religiosity, and internet policies. This chapter will conclude by problematizing a combination of specific factors which contribute to the patterned sexual health outcomes of Latinx populations, and present the research questions investigated for this thesis. The literature review, while not exhaustive, will help situate the project in the core research and inform the research questions and resultant analysis.

The Importance of Sexual Communication and the Intersection of Current Social Environment

Widman et al. conducted one of the first studies on sexual communication phenomena between adolescents (2006). They argue that, “open discussions of topics such as sexual preferences, sexual fantasies, and sexual behavior between sexual partners are associated with greater sexual satisfaction” (p. 893, 2006). Their findings also indicated that while sexual communication may be potentially uncomfortable and challenging, the variety of topics engaged in may be important to the sexual health outcomes of individuals. Coleman & Ingham (1999) and Metts & Spitzberg (1996) indicated that adolescents who are able to engage in conversations

about specific birth control (such as condoms) and address sexually transmitted diseases and infections, were more likely to use said birth control. Additionally, there is nonconflicting information that the proper and consistent use of condoms substantially decrease one's risk of contracting sexually transmitted diseases and infections and effectively prevent unplanned pregnancies (CDC, 2019). The Centers for Disease Control also claim that condoms may, "provide protection against other diseases that may be transmitted through sex, like Zika and Ebola" (2019). Despite this wealth of information, there is still a lack of birth control use in the Latinx community, which may also indicate a lack of effective sexual communication.

As mentioned before, a working knowledge of contraception and its benefits does not necessarily serve to provide successful communication skills for reproductive technology use. Perhaps this is due to the cultural and societal norms imposed on Latinx youth combined with the lack of substantial research on the Latinx community. Oftentimes, sexual communication is a skill which can be obtained through sexual experiences. During an age where consent is gaining more importance, Latinx youth must rely on open and effective sexual communication skills in order to have their sexual needs and desires met (Ferroni & Taffe, 1997). Scholars Ferroni & Taffe (1997) and Coates (1984) also indicate that,

"Formal education in sexual communication is limited. Most learning is by trial and error, with considerable attendant anxiety. A lack of consistent and comprehensive education hinders the development of open and responsible ways of communicating sexual needs, even with a significant partner" (p. 128).

Obtaining a formal education on sexual communication may be key in learning successful strategies on how to discourse regarding birth control use and how to comfortably discourse about sex in general. Quite often, in lieu of a formal education, current social environments and lasting anthropological conventions become one's educator on acceptable and popular social norms and discourses.

In their study, *Culture's Consequences: International Differences in Work Related Values*, Dutch social psychologist Geert Hofstede proposes that culture is, "the collective programming of the mind which distinguishes the members of one human group from another" (p. 13, 1980). Today, one can find in the Merriam-Webster dictionary that culture is defined as, "the customary beliefs, social forms, and material traits of a racial, religious, or social group" (2020). Culture is dynamic and so it would be appropriate that these definitions are not all-encompassing or conclusive. Despite this, and as understood by both definitions, culture shapes our everyday lives, attitudes, and beliefs of different populations.

A value which plays a large role in many Latinx cultures, which is distinct from White, U.S.-American culture which prioritizes individualism, is collectivism. Intergroup communication scholar Gudykunst writes that, "Hispanics come from a collectivistic culture where group activities are dominant, responsibility is shared, and accountability is collective. Because of the emphasis on collectivity, harmony and cooperation in the group tend to be emphasized more than individual function and responsibility" (1998). Along those lines, there is high degree of interdependence for guidance on learning the behaviors and practices which are acceptable. Often this can be played out in looking to one another for behavior modeling, which can be rooted in repeated actions over time.

Frequently engaging in the same actions over a particular period of time generates habits. These habits may then generate a dynamic culture which influences current social environments. Furthermore, examining the particular patterns of behavior and particular patterns of thought can help to explain why individuals think and act in certain manners. Over time social, political, spiritual, economic and historical experiences either reinforce or rupture these patterns (Perilla, 1999). Certain historical experiences of Latinx communities with reproductive technologies have also shaped present cultural and social responses to these technologies. To clarify, the definition which I am drawing from the term ‘reproductive technology’ is, “technology applied to the modification of reproduction in human beings” (*Oxford Dictionary Lexico*, 2021). A few important examples of this are the history of forced sterilization and the testing of oral contraceptives with this population. For example, in their documentary *No Más Bebés*, film directors Espino and Tajima-Peña share the history of forced sterilization of immigrant women at the Los Angeles County-USC Medical Center (Espino, V. & Tajima-Peña, R., 2015). Additionally, the Puerto Rican population was a large testing ground for oral contraception, as well as forced sterilization (Ramirez de Arellano & Seipp, 1983). We can argue that it is no surprise that there presents a level of distrust by the Latinx population of the healthcare community in such a way that may create a barrier to improved sexual health care.

Bandura (1991) writes that individuals’ beliefs regarding appropriate behaviors for particular situations—those which render rewards and those which render punishment—are shaped through social interactions (social models and learning). Perhaps we can claim with confidence that an individual’s social interactions initially occur within their communities; a community may also include educational settings, religious settings and public settings—including virtual ones such as the internet. These interactions can set the conditions for norms to

emerge and to be perpetuated. If these conditions were to change, then perhaps these social interactions may also change. In a similar fashion, culture may experience a comparable process. Working in tandem with current social environments are the historical legacies of social movements.

First and second wave feminist movements have also largely shaped current approaches to the different elements of sexual health and have introduced us with the social concerns of reproductive freedom and reproductive justice. To clarify, reproductive freedom can be defined as, “the freedom to have as well as not to have children” (Nelson, p. 56, 2003). Reproductive freedom highlights the importance of individuals to make decisions which best fit their life trajectory; to meet their wants and needs in an autonomous and supported way. Furthermore, Nelson writes, “policies that restrict women’s right to have and raise children—through forced sterilization or the denial of adequate welfare benefits—are directly related to policies that compel women to have children, on the view that this is their primary human function” (Nelson, p. 56, 2003). Policies need to extend beyond an individual’s reproductive capacity. Continuing, reproductive justice can be defined as,

“a coalition [which] connects reproductive rights to other social justice issues such as economic justice, education, immigrant rights, environmental justice, sexual rights, and globalization, and believes that this new framework will encourage more women of color and other marginalized groups to become more involved in the political movement for reproductive freedom” (Price, p. 42, 2010).

These definitions provide some color to the picture which social, political, economic and historical experiences paint regarding birth control movements. These movements highlighted the different sexual health agendas of different populations and have helped us to better understand the reproductive needs of the Latinx population as well as other minorities.

In their title, Women of Color and the Reproductive Rights' Movement, Nelson argues that women's voices were initially absent in the public and political spheres which managed reproductive rights policies, and that it was not until after the eventual legalization of abortion that explicit agendas truly began to collide. Women of color feared that reproductive rights equated with population control and would end in only one thing, genocide. Movements against sterilization abuse, and that started to put forth the needs of poor women of color, began to create a much needed discursive space in the public sphere for peoples of the margin. Nelson highlights how the needs for reproductive justice not only included control over one's body but also expanded resources for supporting a family which a woman did want to create (Nelson, 2003). It is no surprise that Latinx populations may have convoluted attitudes and beliefs toward reproductive and sexual health outcomes.

Not unlike other cultures, Latinx cultural attitudes may perpetuate certain behaviors and beliefs solely out of experience and tradition. If discoursing about sex and birth control is challenging and awkward for parents, it may be because they have learned it as such, and thus adopt and perpetuate this pattern. Consequently, care-givers often pass that notion onto their children. This is true for gender norms and expectations. For example, Latinx cultures often prescribe that certain genders adopt certain social roles. Much like any social role in society, there are particular outcomes which are expected. Gender development expectations may include

outcomes regarding certain sexual behaviors, pursuing higher education, endeavoring to find a fulfilling career, or starting a family.

In a study done by Updegraff et al. (2014), the authors found that Latinx families' attitudes about young Latinas may perpetuate behaviors which lead to lower educational expectations, lower career expectations, and expected child rearing responsibilities. For young Latinos, these same attitudes may perpetuate behaviors which also lead to lower educational and career aspirations, but higher adult income. Updegraff et al. also write that, "traditional gender role attitudes refer to beliefs that social roles should be differentiated by gender, including that responsibilities for childrearing and household tasks be designated to women, and educational achievement and economic provision be assigned to men" (pg. 2, 2014; Hoffman & Kloska, 1995). In the following study, Brown (2015) also investigates gender expectations and sexual behaviors.

In their study, Brown (2015) explores the intersection of gender and responsibility in the context of birth control use. Brown addresses changes in national public health policy and sexual education with respect to teenage pregnancy—dramatic increases in teenage pregnancy precipitated a reevaluation in how our country navigated this phenomenon. Previous research on attitudes towards contraception focused mostly on young women due to the stigma that responsibility for pregnancy prevention often falls on women. Conversely, Brown also addresses how norms associated with possession of condoms, for example, make it challenging for women to carry them without being seen as promiscuous—this provides a prime example of gendered expectations of sexual behavior. Notwithstanding, Brown tempers this idea with the argument that gender expectations can also be very complex (2015). Furthermore, while social internet movements regarding consent and themes such as

#mybodymychoice are influencing a greater accountability placed on men, women are often saddled with the ultimate responsibility for procuring and using birth control. The following study also addresses this norm.

In a study by James-Hawkins, Dalessandro & Sennott (2018) the authors explore how men negotiate decisions of birth control use in the context of heterosexual relationships within a cultural landscape which is replete with conflicting norms. The authors touch on the emergence of the Pill and how its introduction added a level of reproductive planning which inadvertently placed even more responsibility on women. Due to this, men have also bought into this unequal distribution of responsibility in the prevention of pregnancy, even to the point that condom use fell out of popularity because they trusted that women are on the Pill (James-Hawkins et al., 2018). Notwithstanding this history, social norms have evolved, and men are once again being informed that they too are responsible for facilitating safe sexual experiences as well as pregnancy prevention. However, the authors argue that this movement of autonomy and consent may influence men to not use condoms since it is understood that women can take care of themselves (James-Hawkins et al., 2018). With their investigation, these authors found that men felt that while couples should reach a mutual arrangement concerning methods of pregnancy prevention—with respect for women being paramount in that decision—ultimately women had greater social power and responsibility in regard to acting on their reproductive potential and voicing their concerns and preferences. Additionally, ideologies of Latinx cultures may convolute these expectations and others. Furthermore, as touched on previously, history has played a role in proscribing cultural ideologies regarding reproduction and birth control. A large influencer of these ideologies has been religion.

Major religious schools of thought, such as Roman Catholicism and Protestantism, have had a unique and lasting influence in many Latinx cultures. While there are various religions which shape Latinx quotidian life (other religious belief systems include Curanderismo, Santería, Macumba, Candomblé, Umbanda, Judaism, Mormonism, Jehovah's Witnesses, Buddhism, Islam, and Hinduism), the interplay of Roman Catholicism and gender roles has and may continue to play an influencing role in informing attitudes and beliefs towards sexual and reproductive decision-making practices for Latinx communities in the United States (Nabhan-Warren, 2016; Michalka & Konieczny, 2019; Cooperman et al., 2014). Curiously, Evangelicalism seems to have been influenced by birth control movements and holds what appears to be a flexible stance on use of contraception. Senior Pastor Joel Hunter with the National Association of Evangelicals (NAE) states that,

“Unmarried sex with contraception is not God’s plan, but unmarried sex without contraception is not a plan at all. If holy living is not the choice of some in the near term, contraception can at least reduce some potentially devastating results...for all in the long term,” (*Is Contraception Acceptable for Evangelicals to Use?*, 2021).

Religiosity has had a variable influence on Latinx cultures concerning reproductive technologies.

According to a study by the Pew Research Center, four-in-ten Hispanics favor that abortion should be illegal (Cooperman et al., 2014). Furthermore, this study highlights that the majority of religious Latinx individuals’ political views’ support that abortion should be illegal in all or most cases. Whether or not these individuals claim Roman Catholicism as part

of their narrative, it appears that a large number of Latinx individuals have a conservative approach towards particular reproductive technologies. Sanctity of life plays a large role in Roman Catholicism and many other Christian denominations and consequently may inform Latinx views regarding their reproductive decision-making practices. Additionally, the use of contraception is often associated with adultery or promiscuity; this goes against the sexually ‘pure’ lifestyle which the Catholic church prescribes. As a Latina who was raised in a conservative and religious home, allow me to take the liberty of sharing some social knowledge from my own experiences with the interplays of religion and sexual education.

One argument which has been made regarding the role of birth control is that using contraception in its different forms would imply using what some may term as an artificial means of birth control and would hinder life’s natural course. For a period of time, this was strongly discouraged by the Catholic church (PBS, 2021). Furthermore, the Catholic church has historically argued that,

“according to church doctrine, tampering with the male seed was tantamount to murder. A common admonition on the subject at the time was, so many conceptions prevented, so many homicides. To interfere with God's will was a mortal sin and grounds for excommunication” (PBS, 2021).

Another Catholic institution describes birth reproductive technologies in the following way,

“Contraception and sterilization are not neutral medicine. They work against the natural gift of fertility, treating pregnancy as if it were a disease and fertility as if it

were a pathological condition. Some methods can also act to prevent implantation, causing the early death of a newly-conceived human being” (Sacred Heart of Jesus Catholic Church, 2021).

Additionally, other views such as sexual purity or saving sex for marriage often influence Latinx families to teach their children to abstain from sexual relations until young adulthood when marriage is appropriate—the only context in which starting a family is not shameful as supported by conservative religious views.

While abstaining from sexual relations is a valid option in any case, focusing on providing an abstinence-only or abstinence-until-marriage sexual education in the home, and outside of the home, is a missed opportunity to share useful and valuable information in the form of a more comprehensive sexual education. These conditions may also perpetuate difficulty in facilitating effective sexual communication. This also conflates the issues of a lack of effective sexual communication and a comprehensive sexual education between caregiver and child within Latinx populations. The conservative approach taken by many Latinx families towards sexual communication may also be informed by feelings of shame around sex. Again, we revisit the taboo factor which accompanies discourses related to sex and birth control. This is often not very different from current social environments of different populations around the nation. Data demonstrates that religiosity plays somewhat of an influential role for a number of Latinx individuals regarding lifestyle choices around topics of sex and contraception. Recent social and political events, however, are also beginning to influence a change in Latinx attitudes and beliefs regarding sex. Perhaps the recent lifting of Latinx voices is a contributor to creating more awareness around the aforementioned topics.

Historical events regarding the social sexual liberation of the 1960s and the introduction of the Pill have left lasting changes in our country's sexual expression and experimentation. Women supposedly began to have access to and engage in a new type of sexual freedom. Additionally, women began to experience sexual empowerment with the introduction of a greater control over their reproductive potential. Single life was redefined, and sexual exploration surged (Iowa State University, 2019). Furthermore, according to Edwards & Coleman (2004), in the last few decades the impact of sexually transmitted diseases and infections, concerns regarding women's reproductive rights (such as access to abortion), movements regarding reproductive justice for minority groups and movements regarding queer peoples' rights, among other public health concerns have also shaped our cognition of the term 'sexual health'.

As a result of these past events in combination with current events, I want to visit this last definition of sexual health. In 2001, the United States Surgeon General, Dr. David Satcher defined sexual health as,

“inextricably bound to both physical and mental health. Just as physical and mental health problems can contribute to sexual dysfunction and diseases, those dysfunctions and diseases can contribute to physical and mental health problems. Sexual health is not limited to the absence of disease or dysfunction, nor is its importance confined to just the reproductive years. It includes the ability to understand and weigh the risks, responsibilities, outcomes and impacts of sexual actions and the practice of abstinence when appropriate. It includes freedom from sexual abuse and discrimination and the ability [of individuals] to integrate their sexuality into their lives, derive pleasure from it, and to reproduce if they so choose” (p. 356).

Per this definition, sexual health is a multi-faceted concept which requires collaboration from others as well (Satcher, 2001). These definitions do not explicitly address reproductive technologies. However, they do address integrating responsibility and safety while engaging in sexual acts. Furthermore, one can also argue that these definitions may imply privileges that not all populations possess. As addressed above, sexual communication and current social environments, online and offline, can play a large part in helping facilitate positive sexual health outcomes. Another form of communication which influences these outcomes is the public rhetoric surrounding birth control use. The language used to discourse about sex, such as rhetoric on the importance of sexual health and birth control, may impact sexual health outcomes. By extension, these discourses may have lasting impacts on other areas of an individual's life.

The Role of Rhetoric & Social Movements on Reproductive Agendas

In their work, Hauser addresses the definition and role of rhetoric in communication (2002). They prime the reader by providing a very general definition of communication—that it occurs face-to-face between individuals. Hauser then goes on to expand their definition to include interactions such as public campaigns, marketing advertisements and public speeches. Hauser argues that research on human communication concerns itself with all the manners in which individuals experience communication, the methods which explain how people engage each other through the use of symbols, and the relationships needed to maintain shared interpretations and meaning (2002). Furthermore, they write that, “communication has been conceptualized and investigated in the terms of the interaction among the elements when persons engage with one another with symbols” (p. 3, 2002).

Signs and symbols are used in quotidian life in order to discourse about daily activities. In short, signs have a more direct relationship with the thing in which they represent; symbols may encompass a greater sense of meaning or can communicate more complex messages. As humans, we manipulate signs and symbols to create messages with meaning which are directed at particular audiences. Hauser writes that rhetoric is a practical art. Methodologically, rhetoric follows a set of principles, however, as a practice rhetoric accomplishes its artful form in the performance of a communication transaction. Rhetoric takes on an additional level of consciousness in communication because of its deliberative nature. In their work, Foss also addresses the use of symbols.

Rhetoric scholar Foss argues that humans use symbols to create their realities. In other words, humans create their world through symbolic choices. “Speech is a powerful lord [that] can stop fear, banish grief, and create joy and nurture pity” (Foss, p. 6, 2014). Toulmin writes about the usefulness of rhetoric in daily affairs and the importance of consensus. He distinguishes between theoretical (analytic) and practical (substantial) arguments. There is a place for arguing truths which are unequivocal. However, in this day and age, truth seems to be more so contestable, and we are creating new rhetoric in which to argue for topics which were once considered taboo (i.e., abortion). Toulmin writes that theoretical arguments seem to hold less relevance in practical affairs because they are quite often governed by overriding, absolute principles (Foss, p. 124, 2002). He addresses how absolute principles may not be applicable to daily tasks and so one must use another type of argument for resolving or mitigating quotidian affairs; Toulmin terms this approach the ‘good reasons approach.’ Something else to consider is the space in which rhetoric occurs.

Rhetorical transactions can occur anywhere, however, the messages being encoded often dictate the space in which they occur. Historically, rhetoric on contraception and sex often occurred in private spheres (i.e., doctor's office). American birth control activist, writer, nurse and sex educator, Margaret Sanger, sought to change that. While Margaret Sanger has a complicated narrative regarding the reproductive rights movement, some of her work did contribute to helping facilitate progress toward expanding reproductive rights for women (Johnson & Ismailaj, 2015; Sanger, 2007). Authors Johnson & Ismailaj address the complex nature of Sanger's role during the social and political movement to make birth control legal and accessible, but especially for privileged, White women (2015). They argue that while Sanger was an influential figure during the era of the reproductive rights' movement, her work also influenced eugenics practices in the United States—especially for communities of people of color and left a controversial legacy in terms of reproductive justice.

Reproductive freedom, reproductive justice and motherhood are often tied subjects. It is difficult to consider or discourse about these topics meaningfully and not address the others. Imagine that individuals who can get pregnant have a spectrum of beliefs, feelings and attitudes toward becoming a mother. Furthermore, their respective cultures may prescribe or encourage motherhood for certain genders during certain periods in their life. I will candidly share that my own Mexican mother has been asking for grandchildren since I graduated high school. Her requests have since changed after a few conversations on that matter. For some individuals, motherhood is a period in their life which they look forward to; it excites them. Additionally, it may also scare them and induce feelings of anxiety. Personal conversations with expectant friends and family supports this. For others, perhaps motherhood is something which they are putting off in their life trajectory or are actively avoiding altogether for the foreseeable future.

Motherhood presents a different sort of anxiety; raising a family is expensive or perhaps these individuals want to focus on their education or career. Whatever the case may be, motherhood is something which many individuals discourse about in different ways.

Rhetorics of motherhood in public discourse can often convey strong feelings. These feelings might be protection, nurturance, and life. Other feelings might be shame, fear, and disapproval. George Kennedy writes that, “motherhood serves as a space in an art where a speaker can look for available means of persuasion—similar to a rhetorical topos where a range of appeals might be made performatively, visually, and verbally” (Kennedy, 1991, p. 45; Buchanan, 2013). General feelings towards motherhood can often be positive ones. However, this might be dependent on who is pursuing motherhood.

In their essay, Bone addresses the history of women seeking access to public spaces in order to address their reproductive needs; this group was more than likely women of privileged means in the United States. Historically, the public sphere was not deemed an appropriate space for birth control discourse, however Sanger thought otherwise and worked to challenge this. In their essay, Bone argues that, “storytelling and personal experiences became the primary rhetorical tactics used to transform the private discussion of birth control into dominant public forums” (pp. 17 & 18, 2010). Bone provides a summary of public rhetorical spheres, essentially anywhere outside bedroom walls, and highlights three specific public spheres which precluded public discourse on sex, reproduction and birth control: the government, the medical community, and religious institutions. Arguably, Sanger’s role as a mother shrouded the supposedly feminist nature of her agenda. Her narrative provided a layer of persuasive but ironic means.

In their title, Rhetorics of Motherhood, Buchanan provided a critical lens on the work of Margaret Sanger during the reproductive rights movement and highlights the controversy of her work. (2013). They write that,

“Sanger compromised her politics and sacrificed the reproductive interests of far too many women for far too long... Her accomplishments were substantial and contributed to the creation of a legal and social environment that recognized women’s right to control their bodies. Sadly, such environments are fragile, susceptible to backlash and deterioration” (p. 62, 2013).

The irony of her work is that Sanger fought for the freedom to publicly discourse and advocate for the reproductive needs’ agenda for only some U.S. populations, not all U.S. populations. While there is now more freedom to discourse about previously taboo topics, often these discourses are charged with moral sentiments. Furthermore, entities which inhabit these public spaces occasionally use rhetorical strategies, such as vilification, in order to denounce or further strategies which provide more reproductive freedom.

In their essay, Vanderford addresses the rhetorical strategy of vilification and the role it plays in the arguments used by pro-choice and pro-life advocates. The author argues that vilification had not been studied in recent literature and thus chooses to do so in this study. Vilification is defined as, “a rhetorical strategy that discredits adversaries by characterizing them as ungentle and malevolent advocates” (Vanderford, p. 166, 1989). Vilification operates by taking on adversaries and discrediting them. Additionally, it allows individuals to unite through the identification of a common enemy. Furthermore, vilification seeks to cast opponents in a

negative light, attributes diabolical motives to said enemy, and magnifies the enemy's use of power. Vanderford provides a concrete example of the use of vilification in order for the layperson to understand how groups use language to further their movement for or against abortion and birth control use. Taking into account the current political climate, there does not seem to be a short of vilification in the media to address these topics. One specific public space in which this discourse happens is social media.

The Intersection of the Internet and Reproductive Agendas

Since the inception of the concept which we now know as the internet, human beings are spending a considerably larger part of their time online (*Internet society.org*, 1997). The creation of this new space, a cyberspace, generated a vast number of opportunities for communication in such a way that human beings have never communicated before. Today, the internet acts almost as another entity altogether. We use the internet for a variety of reasons and have even created tailored spaces on the internet which cater to different wants and needs. Recently, events which have accompanied the COVID-19 pandemic have forced the nation to make drastic changes which resulted in a greater dependence on the internet for other purposes such as education and work. The Pew Research Center has found that the majority of internet users perceive it as a useful place for everyday information (2004). This group of internet-users also considers the internet a favorable place for interacting with others, engaging in transactions and for entertainment purposes (2004). Furthermore, one manner in which all these activities can be accomplished is through social media.

The Cambridge Dictionary defines social media as, “websites and computer programs that allow people to communicate and share information on the internet using a computer or

mobile phone” (2021). When we think of social media, online platforms that often come to mind are Facebook, Instagram, Twitter, LinkedIn, Reddit and Pinterest. It appears that over time, these platforms have gained much influence and power in quotidian for many individuals. With the increased use of mobile phones, people are able to engage in certain activities at a much faster rate or more convenient manner. We send emails while still in bed and can check the news while we wait for our take-out meals. One of the bigger caveats of depending heavily on the internet is the issue of the accuracy of the information one consumes and how public policies influence this dissemination.

Misinformation and disinformation are beginning to find much prevalence in our public spheres. While checking the credibility of sources of information is not anything new, it appears that instances of misinformation and disinformation—both examples of fake news—are starting to grow and occur with more frequency. One definition of fake news is, “entirely fabricated and often partisan content that is presented as factual” (Pennycook et al., p. 1866, 2018). As our means and modes of communication are expanding, it is becoming more challenging for individuals to fact-check information effectively or discern if entities are trying to intentionally mislead us. Information can be generated and made public in such a rapid manner that monitoring these events can be challenging. Current events are spurring conversations regarding the importance of fact-checking information and being weary of all sources of information. A recent example of this is during his presidency, Donald J. Trump suggested during a press briefing that ingesting bleach might help with treating the COVID-19 virus,

“I see the disinfectant where it knocks [the virus] out [from a surface] in a minute, one minute, and is there a way we can do something like that [by] injection inside or almost a

cleaning, because you see it gets on the lungs and it does a tremendous number” (*Rolling Stone Magazine*, 2020).

Medical authorities have refuted this claim. However, arguably not everyone was quick to question this suggestion. Furthermore, bleach is a toxic substance, and it is suggested that humans use it with caution (EPA, 2020). Returning to the usefulness of social media— notwithstanding its risks, the internet is starting to become a useful tool for learning and education.

As briefly mentioned previously, recent events reworked how our society facilitated education. It is not anything new that educators across the nation rely heavily on the internet to teach their classes and provide their students with tools needed to progress their education. This goes for all grade levels and all types of institutions. Online courses are not a novel thing. Online learning, distance learning and remote instruction have been available for some time now, helping individuals pursue a higher education while creating a life elsewhere (*Florida National University*, 2021). Unorthodox means of online education may include social media. Many specialists are taking advantage of the ubiquitous nature of the internet to reach wider audiences on a variety of topics. Some of these topics are sexual health and sexual education. Research supports that the internet is definitely serving as a means for young people to educate themselves about sex (Simon & Daneback, 2013). While the quality of internet-based interventions on sexual education for young people is sparse, youth are seeking these tools out (2013).

Social media is very useful for diffusion of information. If one couples this with young people having even greater access to the internet, one can begin to imagine the possibilities of creating the conditions to effectively educate individuals on sexual health and sexual education.

Unfortunately, much content on the internet regarding sex may not be accurate, comprehensive, or inclusive. Taking to the internet for information about sex is not a novel strategy. For example, a number of parents and care-givers may have a conservative approach toward the topic of sex which may not be helpful in facilitating open sexual communication with their dependents. This may leave young people curious and with the desire to look to other resources for information. While it is important for young people to learn to be resourceful, it is also important for them to learn how to be critical of the information they consume. Regarding the topic of sex, one apparent concern of taking to the internet to educate oneself is the nature of some sexual content which can be found online.

Mature content has arguably been accessible to individuals of all ages for some time now. If not on the internet, then in physical form through publications. Not to stray far from the focus of this thesis, but I wish to briefly address the topic of young people having access to mature content on the internet. It is very natural to be curious about topics of sex and important that young people equip themselves with helpful tools in order to make effective life decisions. Perhaps one of the issues of this accessible mature content is that it does not often portray or communicate realistic expectations around sex. Arguably, sex work is valid work. However, sites which facilitate this line of work are not necessarily effective avenues for youth to learn about the importance of sexual health, or provide comprehensive sexual education (*Live Science*, 2021).

Researchers on sexual behavior argue that, “while an interest in depictions of sex is not necessarily a problem in and of itself...these scenes rarely show the participants negotiating consent or taking other safety precautions, and thus shouldn't be used as an instruction manual” (*Live Science*, 2021; Rothman et al., 2021). The argument is not to police what individuals

consume online, but rather to stress the importance of facilitating accessibility to accurate and science-based sexual education. With that in mind, it is critical that young people have access to these resources online. Organizations are using social media to accomplish this.

While current movements, organizations and social media platforms are using language such as #mychoicemybody to bring more attention to the importance of reproductive freedom, communication scholars are also beginning to take issue with this language by contesting contemporary birth control rhetoric. In their essay, de Onís addresses language contestations in the field of reproductive justice by speakers of languages other than English, particularly with the word <choice>. The author asserts that <choice> veils reproductive injustices as experienced by women of color. With this essay, de Onís seeks to investigate Latin@ realities by, “observing the interplay of cultural and linguistic difference, ideology, and language in the discourse of the National Latina Institute for Reproductive Health and the stakes of the group’s appeals” (p. 2, 2015).

de Onís argues that the framing of <choice> disadvantages women who face barriers (racism, sexism, poverty, access to care, lack of health insurance, monolingualism, etc.) to having the very desirable options which privileged groups have. In essence, this word carries with it privileged assumptions. Also, de Onís argues that this term merges cultural differences (homogenizing cultures) and is challenging to translate. de Onís argues that <justicia reproductiva/reproductive justice> better encompasses the precarious positions of marginalized populations. de Onís shines a light on the conflicting rhetorical strategies movements use to further reproductive rights, especially for those who identify with historically marginalized groups.

Historically, the narratives of minorities and their experiences with birth control movements and reproductive technologies starkly contrasts those of White, privileged women. During the second-wave feminist movement, major discourses which addressed reproductive rights centered around the needs of White, privileged women—whose own reproductive agendas prioritized access to safe, legal, and affordable abortions (Nelson, 2003). However, during this second-wave feminist movement, it was challenging for women of color and other minorities to generate a discursive space in order to voice their own distinct reproductive needs. Their needs expanded beyond abortion and included access to resources which filled basic human rights. Nelson's title, Women of Color and the Reproductive Rights Movement, addresses the need for not only reproductive rights but also reproductive justice (2003). In their work, Nelson relates the reproductive health struggles that women of color experienced during the 1960s, 1970s, and 1980s, and how their own significant contributions to these movements were borne of these. Nelson's key theme? That Black women and Latinas were essential for expanding the definition of reproductive freedom.

In the first few chapters, Nelson primes the reader by situating certain reproductive technologies, abortion and sterilization, in the feminist movement and draws specific attention to the organizations central to her arguments: the radical feminist organization Redstockings, and socialist feminist group Committee for Abortion Rights and Against Sterilization Abuse (CARASA) (p. 5, 2003). They also introduce a short history of abortion rights as contrasted with reproductive freedom. They shake the reader by writing transparently about the history sterilizations and abortions in the United States, and later in other parts of the world. Moving forward, Nelson argues that women's voices were initially absent in the public and political spheres which managed reproductive rights policies and that it was not until after the eventual

legalization of abortion that explicit agendas truly began to collide. Women of color feared that reproductive rights equated with population control and would end in only one thing, genocide. Movements against sterilization abuse and that began to put forth the needs of poor women of color began to create a much needed discursive space in the public sphere. Pronatalist, sexist, and machista rhetoric of Black nationalists overshadowed the voices of Black women—the key to understanding a more complicated view of reproductive control.

As her writing progresses the author's arguments begin to fill out further. Nelson highlights how the needs for reproductive control not only included control over one's body, but also expanded resources for supporting a family which a woman did want to create; Nelson writes that black women, "argued further that white feminists needed to forge an inclusive reproductive rights agenda that synthesized anti-poverty politics, welfare rights, and access to reproductive and basic health care" (p. 57, 2003). Nelson also writes about the shift of previous attitudes of Black nationalists, "by the mid-1970s, black criticism of population control focused almost exclusively on the federally supported sterilization of Black, Latina, and Native American women. Most of the conspiratorial rhetoric about black genocide had disappeared" (p. 89, 2003) and how this shift helped to amplify black women efforts in contributing to the agendas of that time. Nelson continues her work by drawing attention to events which occurred, specifically on the east coast.

During the second portion of the title, Nelson focuses on events which occurred in New York and argues how the work of the women Young Lords cultured an inclusive politics of reproductive justice for communities of color which included, "the freedom to grow and to thrive free from the poverty that affected a woman's choice to bear children or caused illness in children after they were born" (p. 119, 2003). Nelson also highlights the struggles of

cohesiveness that groups experienced, such as CARASA, which also contributed to these reproductive rights movements (i.e., paid maternity leave and custody of children for lesbian mothers) and organizational political blind spots, such as the work of Redstockings, that homogenized the political status of poor women and women of color. All these experiences were critical to shaping the reproductive freedoms which communities can pursue today. The greatest contribution which Nelson makes with their book is by commencing the work of filling gaps in scholarly literature on feminist movements and reproductive justice. Other prominent contributions include explicitly highlighting Black women's understanding of reproductive rights and how the discourses of Black feminists, Black Muslims and Black nationalists on population control informed public policy. However, there is still much work to be done.

In all the messaging that is encoded and decoded regarding contraception, it is not often normative to consider that other hegemonic structures also influence this activity. As a nation, there is no question that a large portion of our population consumes information disseminated by the news and by our government. This has been especially evident during the COVID-19 pandemic as we look to our leaders for guidance and directions during these trying times. Historically, public messaging regarding birth control was not a socially acceptable norm, and many individuals instead engaged in discourses on this topic in private spheres (Bone, 2010). Fast forward over a hundred years since the hallmark period of birth control being made available to the masses—how and why we discourse about birth control within different spheres has changed. This is evident in the manner in which mass media addresses this topic, especially in outlets such as advertising.

Messaging regarding birth control is often encoded with feelings of autonomy, and that utilizing birth control can help individuals to create a sense of freedom for themselves.

Furthermore, while attitudes toward women who use birth control vary, they are often binary. If a woman uses contraception, she may be considered promiscuous, and if she does not, she is assumed to be sexually inactive. Another example might be that if a woman uses birth control, she is considered modern and educated, but if she does not, she is considered to have an unmet need. If you take this pill, wear this patch, get this shot, or insert this ring, you can have more control over your life trajectory. These sentiments are not often problematized, but rather celebrated. However, consider the advertisement for the birth control Nexplanon. The messaging around birth control frames it as a liberating tool for women who desire to have normal workdays and enjoyable social lives. Initially, these sentiments seem agreeable. However, permit me to take a more critical approach.

In their work, *“Empowerment, Resistance, and the Birth Control Pill: A Feminist Analysis of Contraception in the Developing World”*, author Abigail S. Trombley writes that, “bodies have become victims to the mission of neoliberalization and women’s empowerment serves as a disguise for labor participation” (pp. 21 & 22, 2018). While not apparent, entrenched structures such as capitalism and the patriarchy also influence how we present information to the public and private sphere regarding contraception. In their article, Trombley addresses frameworks and beliefs which influence an individual’s decisions to pursue contraception. To support her arguments, the author uses the example of critiquing the language of multiple non-government organizations which attempt to push and provide contraceptive use to third-world women. Trombley argues that these efforts are often very market-based, and that it is hegemonic and selfish for these White-centric, U.S.-American entities to provide supposed solutions for supposed problems while homogenizing cultures without employing some sort of cultural sensitivity. A few points that Trombley makes which resonate are that in addition to these NGOs

homogenizing cultures, they also create a binary between what they term as first-world women and third-world women and use language to create this illusion of a savior/saved complex with developing countries. These arguments fit quite nicely within the United States social environment as well.

Pursuing birth control is often an effective option for anyone who wishes to postpone starting a family; this is not news. However, a common sentiment which influences this decision is that starting a family can be expensive. With this in mind, the supposed issue is not that a woman needs to prevent early childbirth, but that reproductive labor can be much more challenging when one cannot afford certain basic human rights such as child-care or proper nutrition, safe housing and health care. Furthermore, instead of problematizing starting a family at such a young age, perhaps we should spend more time problematizing conditions which do not permit people to have the families they desire.

Trombley argues that women should have the agency to create a space for themselves in order to engage their own power to seek out the reproductive technologies they desire on their own terms. Many Latinx cultures, and many communities regardless of ethnicity or sexuality, value things such as being able to start a family and have bodily autonomy. It can be oppressive to communicate to them—by pushing contraception onto them—that such a desire is an issue, when the more concerning issue is that our current state of living does not support everyone who wishes to pursue this life trajectory. While the rhetoric that is used either by mass media or reproductive freedom organizations have come a ways, they may still be missing the mark of being culturally sensitive to what each communities needs and desires are. This may be especially true of messages being encoded to those who identify with historically marginalized populations. The efforts of reproductive justice groups are beginning to address these issues as

more attention is being brought to the realities of reproductive labor and how freedom and justice do not end when individuals have access to birth control, but also have the agency and resources to raise families in safe and supportive environments. Let us briefly explore how communication scholars define the term agency.

In their work, A Grammar of Motives, rhetoric scholar Burke introduces us to a framework termed as the Pentad (1945). Burke uses this framework to capture the assumption of future action and to help provide understanding of narratives; it can allow us to perceive the significance of a process and of the relationship between different elements of a context, as well as perceive the influence of different structures (socioeconomic status, gender, race, etc.). As the term describes, the framework operates on five distinct points: act, agent, scene, agency, purpose. Broadly, this framework can be used to help us explore mental models of narratives in the context of sexual health and allow us to grasp the critical role which agency can play. A large concern here is the way in which agency is defined: how the act is accomplished. If an agent decides to pursue a certain type of healthcare (act) for the sake of their health (purpose), but their resources are limited, then by definition their agency is diminished. Arguably, agency can also imply intention by the agent, initiation by the agent and empowerment as experienced by the agent.

Shearer writes that not one of these aspects (act, agent, scene, agency, purpose) can provide a complete sense of their meaning (2004). In other words, the purpose of this language is not to avoid ambiguities, but to “clearly reveal the strategic spots at which ambiguities necessarily arise” and assist with interpretation of actions (Burke, 1945). Furthermore, consider that the perceived agency of individuals can also be described as acting out freedoms which are based on self-interest without infringing on other’s rights (Locke, 1689) or acting on man’s will

to power (Nietzsche, 1883); others include themes of morality. These attempts to define agency simply touch on the plethora of philosophies devoted to interpreting what it means to possess the empowerment to carry out one's freedom of decision. In the context of sexual health, Burke's definition of agency, to use whatever available tools or means, fits well with the aims improving the landscape of reproductive health care. These tools include the rhetoric used to improve this landscape as well. While there may be competing definitions of the term agency, the framing of agency is critical to how we understand an individual electing to act on the intentions to carry out autonomous decisions regarding their sexual and reproductive health.

Literature like Nelson's and Trombley's work to highlight the contributions of people of color for such an important movement of reproductive justice. With these themes in mind, this paper seeks to investigate how the current rhetoric of birth control and responses towards that rhetoric influence the sexual health outcomes of the Latinx communities as facilitated through social media. For purposes of this project, I have chosen to focus on the platform Twitter. The relationship between the media and culture, and the history of birth control has an influence on how the Latinx community discourses about sex and birth control use. This study seeks to investigate this very topic. Positive sexual health outcomes influence much more than simply the state of one's overall health but also potentially the trajectory of one's advancement in their academic and professional life, as these operate in one's narrative. These outcomes may also potentially impact the evolution of acceptable social and cultural norms and ideologies. Specifically, this paper seeks to explore the following research questions:

RQ1: What rhetorical strategies are used by Twitter accounts [*@Latinos4PP*, *@LatinaInstitute*, *@ReproRights* & *@PPTXVotes*] in framing reproductive technologies towards Latinx communities?

RQ2: How do these rhetorical strategies appeal to the values and beliefs of the intended audiences?

Chapter 3: Methodology

Investigating how online language is used to discuss contraception was one of the main goals of this thesis. This chapter focuses on the specific methods used to reach this goal. To carry out this investigation, there was a deliberate focus placed on exploring the messaging being curated and disseminated by a particular social media platform. This study specifically explored the messaging being put forth on the platform Twitter during the month of November 2020. This investigation further narrowed its focus to a handful of Twitter accounts, all salient to the themes which thread this thesis. A short description of the criteria used to select these accounts is provided. Furthermore, this chapter also presents and expands on the rhetorical framework used to analyze the Twitter messaging, Burke's Cluster Analysis. Finally, I highlight the specific methods of how the messaging of these Twitter accounts was captured, how it was analyzed, well as an argument for the selected timeframe.

For this study, the artifacts for analysis were four Twitter accounts. According to its webpage, Twitter is a place where one can, "follow everything from breaking news and entertainment, to sports, politics, and everyday interests. Then, you too can join the conversation" (Twitter, 2020). Twitter is a useful platform for individuals to effectively take part in larger conversations and track the progress of those and other conversations. Users can access the social networking service by interfacing through its webpage and by downloading the application on their mobile device or their computer tablet. Twitter is a social media platform which permits individuals to microblog with messages labeled as tweets.

Tweets were initially restricted to 140 characters, but have been expanded to 280 characters for non-Asian languages in 2017. Additionally, one may include up to 4 photos, a GIF (file format for sharing images), or a video. Twitter may be one of the most prime examples of

how far our means of communication have come. The brevity of Twitter's messages force users to make their points straight away (or not), suggesting that many users may use a different outlet to encode more lengthy or vague messages. I decided that this platform would be useful space to pull artifacts from for a meaningful analysis.

While there is a plethora of Twitter accounts dedicated to reproductive health, with new ones cropping up every so often, I attempted to highlight a few accounts with a considerable number of followers whose organizational agenda also includes those who identify as a minority and which made a good fit for this project. Other criteria for the accounts selected included recognizability, region in which the account is focused, awareness of current events, and easy to follow and consume content. In order to make this a feasible project within my allotted time frame, I have limited my focus to only a few accounts. Mining social media for data can often produce a very large yield. For purposes of this study, I have chosen the following Twitter accounts: @Latinos4PP, @LatinaInstitute, @ReproRights, and @PPTXVotes.

The @Latinos4PP feed is one of the few Twitter accounts managed by Planned Parenthood. This Twitter account acts as an extension of the Planned Parenthood web page tailored to the Latinx community. This web page provides overviews on current legislative events and issues affecting the Latinx community, different ways for people to take action, and a blog. The Twitter page can be described similarly with the exception of frequent live tweets. This particular account has over 6,000 followers and is readily recognizable, partly due to its affiliation with the Planned Parenthood organization. While this account does not have as many followers as Planned Parenthood's main twitter account (@PPFA), the content put out is often along a similar vein but highlights the agenda of Latinx communities. The second account is @LatinaInstitute.

The @LatinaInstitute Twitter page describes their feed as an effort, “for reproductive justice building Latina/x power for salud, dignidad, y justicia w/ activists in FL, NY, TX & VA! #SoyPoderosa” (@LatinaInstitute, 2021). This Twitter account is an extension of the webpage, National Latina Institute for Reproductive Justice. On their webpage, this organization describes their mission as,

“We center Latina/x voices, mobilize our communities, transform the cultural narrative, and drive policy change. We amplify the grassroots power and thought leadership of Latinas/xs across the country to fuel a larger reproductive justice movement” (Who We Are, *LatinaInstitute.org*, 2021).

This account has 18.5K followers. Evidently, their reach is far greater. The third account I selected for this project is the @ReproRights.

The @ReproRights feed is an extension of the web page, *ReproductiveRights.org*. This account has 111K+ followers and has the most followers of all three accounts. They are recognizable and their region of focus is the most encompassing. Their mission is to use the power of law to advance reproductive rights as fundamental human rights around the world (*ReproductiveRights.org*, 2021). It has a much greater reach and has been dedicated to the reproductive rights’ movement for over 25 years. This account documents the work of the Center for Reproductive Rights, a larger organization which advocates for the advancement of reproductive rights as dictated by legal policy and highlights not only the events of the United States but also events which occur around the world. Their web page describes their work as an effort to fundamentally transform the landscape of reproductive health and rights worldwide

(*ReproductiveRights.org*, 2021). The fourth and final Twitter account which I decided to include is @PPTexasVotes.

@PPTexasVotes is an account which is also affiliated with the Planned Parenthood organization and has roughly 6,000+ followers. This account also possesses some recognizability, due to its affiliation, and its region of focus is the state of Texas. This group describes itself as a nonpartisan policy, advocacy and political organization working to protect and promote the mission of the Planned Parenthood affiliates in Texas (*PlannedParenthoodAction.org*, 2021). In addition to following current events and advocating for expanded reproductive rights, this organization also facilitates leadership development, local community empowerment and encourages followers to elect individuals whose goals align with improving the landscape of reproductive health care at all levels of government.

Claiming to be a nonpartisan organization may arguably be a strategic move on their part as it can help foster creating bridges between far right and far left entities. This group is also of interest because it focuses on one of the largest states in the U.S. which, additionally, is home to one of the largest concentrations of Latinx populations (U.S. Dept. of Health and Human Services, 2019). Furthermore, all these groups focus their work on regions with large populations of Latinx communities. The following section will address the type of rhetorical criticism used for analysis.

Burke's Cluster Analysis

In light of the research goals of this study, these Twitter accounts may prove to be a useful artifact to investigate Latinx responses to birth control rhetoric in the public sphere. Twitter feeds are automatically archived and can be easily and quickly collected via Twitter

support. Burke's cluster analysis can be used to evaluate the word and language choices users tweet either on their own or other accounts. In this case, I analyzed the content put out by each respective Twitter account. Cluster analysis is a method of rhetorical criticism which studies "the meanings that key symbols have for a rhetor by charting the symbols that cluster around those key symbols in an artifact" (Foss, p. 65, 2009).

While there are multiple ways of critically analyzing rhetorical artifacts, this particular method facilitates the investigation of the manner in which symbolic terms are framed and communicated by individuals to the public—in this case, whomever is responsible for publishing content for each respective Twitter account. By utilizing this method, one may gain insight into the way the rhetor defines their worldview and interpretation of particular subjects (Berthold, 1976; Foss, 2009; Rueckert, 1963). Cluster analysis looks at the relationships of symbols, termed by Burke as associated clusters, to understand the overall message the rhetor is attempting to encode on a particular subject (Berthold, 1976; Foss, 2009; Rueckert, 1963).

As previously mentioned, mining for data on Twitter can result in a large yield depending on the research goals of one's project. This project was no exception. Furthermore, because of the lack of substantial research which focuses on the usefulness of social media for data collection and analysis, there is not one standard for researching platforms such as Twitter, Instagram and Facebook. Researchers Kelley, Sleeper and Cranshaw argue that,

"Twitter is a wonderful platform for research and as such has been broadly adopted. We can improve the caliber of Twitter research if we can create community agreed upon standards and metrics for explaining...methodologies, including how we sample, filter,

and acquire data. As ethical researchers we must also consider the broader impact of collecting and using this data [from social media]” (2019).

Finding, collecting and organizing data from the aforementioned Twitter accounts proved to be a challenging and time-consuming task, however still achievable. Specific methods for collecting data from each Twitter account included taking cropped screen shots of select tweets, being careful to include messages which included a retweet. It is common for accounts to retweet content from other accounts which they believe aligns with their goals. Some of the data I selected is representative of this. Furthermore, because of the public nature of these accounts, preserving confidentiality and anonymity was not a concern. Any future studies which aim to collect data from an individual’s personal Twitter account will need to either use a method which does preserve confidential information and/or ensure anonymity, or make a strong argument for being able to collect data which may be deemed public. Consent to use said data may also help uphold ethical data collection guidelines. Using Burke’s cluster analysis, repetitive messaging across all accounts was tracked.

For this project, I chose to focus on the content being published during November 2020. My reasons for selecting this particular time frame are threefold. The first reason is that I wanted to create the opportunity to collect a substantial amount of data which would lend itself to a meaningful analysis without being overwhelmed. I reasoned that roughly a month’s worth of data would create that condition. The second reason I settled on this time period was because multiple global important events were occurring. One of these was the global #ThxBirthControl Day. #ThxBirthControl Day commemorates the progress of contraception and its accessibility worldwide. The origin of this particular event is not clear, however some credit Planned

Parenthood with its birth (*PandiaHealth.com*, 2019). Also, the particular date on which the event occurs varies, however many organizations highlight this event during the second and third week of November (*PlannedParenthood.org*, *PowertoDecide.org*, *TexasWCH.org*, 2021).

This event was especially significant, not only because of the reason for its creation, but also because it highlighted the need for having access to such a basic health care need such as birth control, during a time where so many individuals could not have this need met.

Additionally, these Twitter accounts drew attention to the specific ways in which one can continue to make sure that these basic health care services are available by encouraging the public to continue electing individuals who prioritize providing expansive and inclusive reproductive health care. Other specific ways included encouraging the public to get involved with the election, get in touch with local congress people, follow accounts which advocate for inclusive reproductive health care, and make donations to organizations which advocate for said health care. The third reason I settled on this time frame is because it was during the 2020 Presidential Election, a critical time for our nation.

These last few years, the Trump-Pence administration proved to be heavily influenced, if not dominated, by Republican clout. The goals of this particular administration did not prioritize the goals of many reproductive justice and reproductive freedom groups. In fact, a portion of the legislation passed during Trump's presidency explicitly worked against expanding the landscape of reproductive health care. One example of this was the implementation of the 'Global Gag Rule', which attempted to create additional barriers for individuals seeking an abortion as well as other reproductive health care services (*PlannedParenthoodAction.org*, 2021). Due to legislation of this nature, and other decision-making over the years of the Trump-Pence administration, an overwhelming amount of political unrest resulted. An unprecedented number of individuals

formed collectives and demonstrated like never before. Many also took to social media to create messages and be seen and heard. Provided below are screenshots of a few sample tweets from the studied accounts. After the figures, the following section will address the findings and analysis of the data collected from the Twitter accounts I chose to focus this thesis on.



Figure 1: @ReproRights tweet



Figure 2: @Latino4PP tweet



Figure 3: @LatinaInstitute tweet



Figure 4: @PPTXVotes tweet

Chapter 4: Findings & Analysis

Chapter four is the analysis chapter and will address the findings and analysis of the data from the aforementioned Twitter accounts which was collected over the month of November 2020. As a reminder, each research question will be revisited and will be followed by its respective analysis. Coupled with each analysis are a few example tweets to provide support for the findings and arguments presented. To provide some forecast, the first research question will be addressed followed by the second research question. Let us revisit the first research question:

RQ1: *What rhetorical strategies are used by Twitter accounts [@Latinos4PP, @LatinaInstitute, @ReproRights & @PPTXVotes] in framing reproductive technologies towards Latinx communities?*

While exploring each of these online spaces, a few prominent rhetorical strategies bridged these Twitter accounts and created overlap. To provide a brief response to the first research question, the rhetorical strategies which stood out among and trussed all these accounts was language which conveyed tones of autonomy, agency, and culture. This section will address those themes and provide some depth about their importance and relevance.

My own understanding and interpretation of autonomy operates along the lines of having the authority to govern oneself. In other words, mine is the first and last voice to make decisions regarding my person, myself and my body. The Lexico Oxford Dictionary defines autonomy as, “the right or condition of self-government” and “freedom from external control or influence; independence” (*Lexico.com*, 2020). Arguably, it is not often that individuals challenge or question their own autonomy. In general, our U.S. constitution, and most legislation at all levels,

seek to provide and protect the ability for individuals to act autonomously providing that you are a legal adult. Obviously, there are exceptions; minors, those above a certain age point and other populations are treated differently. Adults generally do not need to ask permission to go about their daily lives, however, there are conditions which dictate what is permissible regarding how we go about making those decisions. As argued above, one can act with much independence, however there will be consequences. Newton effectively reminds us that for every action there is a reaction. Consider other interpretations of autonomy. In their work, The Invention of Autonomy, scholar Schneewind writes,

“The new outlook that emerged by the end of the eighteenth century centered on the belief that all normal individuals are equally able to live together in a morality of self-governance...The conception of morality as self-governance provides a conceptual framework for a social space in which we may each rightly claim to direct our own actions without interference from the state, the church, the neighbors, or those claiming to be better or wiser than we” (Schneewind, p. 4, 1998).

Furthermore, scholar Feinberg argues that there are four aspects to autonomy as situated in political and moral philosophies. These aspects are the actual condition of self-government, the capacity to govern oneself, one’s own personal ideal, and a set of rights expressive of one’s sovereignty over oneself (Feinberg, 1989). Furthermore, these conditions imply that the actor has the ability to determine the factors which define and influence these terms.

With these definitions in mind, let us take to our current social environment and address what this might look like in daily life.

Exercising autonomy might look like deciding where one can pursue their education, what they would like their major program of study to be and what sort of classes they wish to take. Autonomy is also exercised when deciding who to pursue relationships with, and what the conditions and dynamics of those relationships are. Furthermore, autonomy might look like deciding what foods to eat, how to prepare them and when. Conversely, what might a lack of autonomy appear like? This question can be challenging to answer depending on who you ask. A lack of autonomy might look like not being able to move out of one's childhood home until they gain more financial independence. Another example of a lack of autonomy might be that one cannot apply for a certain position because they do not have the required credentials for that role. Something to consider is that the more specific a decision, the more factors there are to take into account.

The more elements a question contains, the more variables there are to consider. For example, one might ask themselves if they should eat that day—it would not be hard to answer this question. However, let us pose a similar question. Can I afford to buy takeout today? Now we have more specific variables to consider. Answering this question requires that one consider things such as what is available, what is open and what is within their budget. Practicing bodily autonomy is comparable. As elementary as these examples may be, they provide an exemplary scope of the types of questions one needs to pose regarding bodily autonomy. As a nation which prides itself on claiming to be a country of freedom, it is important for us to be critical of what that actually implies.

The experiences and narratives of health care in our nation echoes the challenges of stratified reproductive health care, and the privileges of one population are not often extended to other populations. Consider that one way to experience the impact of a greater freedom of choices is to remove them. Many historically marginalized populations can arguably attest to the oppression of having certain choices out of reach. To transition, the key question may not so much be, can I exercise bodily autonomy? The key question however, may be more along the lines of what is the latitude which I can practice bodily autonomy? And what is the amount of latitude one should have? These are the matters which the studied Twitter accounts made a concerted effort to draw attention to with the content they tweeted.

Scholar Hauser writes that rhetoric, “is communication that attempts to coordinate social action...its goal is to influence human choices on specific matters that require immediate attention” (*AmericanRhetoric.com*, 2021). A number of these tweets conveys a tone of individuals having the capacity to make decisions about their bodies and their reproductive trajectory without requiring or depending on external influences or entities to permit them to do so—autonomy. Tweets which encode messaging of autonomy include:

“...pregnant and birthing people have the right to a safe and respectful maternal health care, free from discrimination, coercion, and violence. But, the U.S. has failed to meet its obligations to protect, respect, and fulfill those rights.” (@ReproRights, 2020).

@ReproRights addresses specific ways in which our nation perpetuates stratified health care by highlighting how structures deny individuals basic human rights while pursuing reproductive

health care. The following tweet highlights how close this nation is in generating legislation which supports the need for populations to create the life they desire on their terms.

“El futuro en el que todos podamos vivir la vida que queremos, está a nuestro alcance. Estamos listos para escribir un nuevo capítulo en el que tomaremos control total de nuestros cuerpos y nuestros derechos. No vamos a rendirnos hasta que nuestras voces sean escuchadas.” (@Latinos4PP, 2020).

This language draws attention to the struggle for Latinx populations to experience reproductive freedom and calls on collectives to sustain the concerted effort to improve the landscape of reproductive health care for all. The second rhetorical strategy which stood out among and trussed all these accounts was language which promoted agency.

While some individuals may use agency and autonomy interchangeably, they are arguably distinct. As defined above, autonomy communicates the ability to be able to govern oneself. Let us argue that having autonomy helps to create the foundation of one’s decision-making abilities. Furthermore, agency builds on autonomy. Having agency requires autonomy, however there is an added dimension. My own understanding of agency is along the lines of not simply having the freedom to make choices for myself, but also having the resources available to do so. Having agency goes beyond answering the question of if. Possessing agency may also help to answer the questions of who, what, where, when, and how. Take for example the following question: can I get birth control? This query often has a fairly straightforward response: yes or no, and may be more reflective of autonomy. Conversely, let us consider the following questions: To what extent can I afford birth control? Where can I access this birth

control? How easily can I access this birth control? How often will this birth control be available to me? These types of questions may be more reflective of having agency, and the rhetoric of these accounts promotes agency by inviting the audience to be critical of these sorts of questions. Let us introduce a few formal definitions of the term agency.

The Cambridge Dictionary defines agency as, “the ability to take action or to choose what action to take” (*Dictionary.Cambridge.org*, 2021). The Lexico Oxford Dictionary defines agency as an, “action or intervention, especially such as to produce a particular effect” and “a thing or person that acts to produce a particular result” (*Lexico.com*, 2021). Consider other philosophies which have informed current interpretations of agency. Psychology scholar Daniel Wegner describes the sense of agency as an experience of the conscious will (2002). Furthermore, American philosopher Donald Davidson situates agency in a ‘standard theory of action’ and grounds this framework with two claims: first, the notion of intentional action is more fundamental than the notion of action; second, there is a close connection between intentional action and acting for a reason (1980; *Stanford Encyclopedia of Philosophy*, 2021). Per these definitions, having agency communicates having expanded choices and holding the capacity to decide on a particular outcome. In addition, there is a close relationship between the conscious decision of such actions and the will and resources to carry them through. Again, agency requires autonomy; this also implies having greater latitude to act. What might having agency look like in the landscape of reproductive healthcare? Consider the following tweets which encode messaging of agency:

“Birth control = Empowerment. Birth control = Bodily autonomy. Birth Control = Comprehensive health care.” (@ReproRights 2020).

@ReproRights argues that comprehensive reproductive health care hinges on not only bodily autonomy, but also empowerment. They highlight the need for resources and legislation which can facilitate a wide spectrum of decisions related to one's reproductive health. The following tweet also addresses the need for critical birth control legislation:

“Abortion legality is the floor. Roe v Wade is the bare minimum. Abortion care that works #4EachofUs requires us to #BelieveInMore - and that starts with passing the EACH Woman Act.” (@LatinaInstitute, 2020).

@LatinaInstitute draws attention to the reality that reproductive health care is lacking in the spectrum of services available and supports specific legislation which can change that reality. They argue that health care policies need to go beyond offering the bare minimum in order support the reproductive health care needs of our entire nation. For many, having agency means not only being able to make choices regarding their bodies and own reproductive health, but also having the support of their environment whatever those choices may be. The support of one's environment can materialize itself in different ways.

One way in which an individual's immediate environment can influence agency might be through the attitudes, beliefs and practices a family has fostered regarding sexual health. Are they willing to discourse about these topics in a shameless and open way? Do caregivers foster worldviews which promote people having the empowerment to choose what they do with their bodies? An additional manner in which an individual's immediate environment can influence agency might be through the curriculum educational institutions teach regarding relationships and sexual health. Is this curriculum science-based, comprehensive and inclusive? Fortunately,

officials on education in the state of Texas are beginning to consider expanding sexual education to include other forms of family planning options in addition to abstinence, however new policies not explicitly include LGBTQIA individuals and fail to address consent.

(*TexasTribune.org*, 2020). Furthermore, another particular way in which these tweets address having agency through the support of one's environment is through advocating for certain public policy.

Public policy plays a heavily influencing role in the outcomes of many different aspects of our daily lives. The reason UTEP has tactile paving at crosswalks? Public policy. These special features on sidewalks help individuals who have limited vision to know that they are approaching a road. Unsurprisingly, the current state of our reproductive healthcare is dictated to a certain extent by public policy. Recently, the Biden-Harris administration rescinded the Global Gag Rule, effectively creating the conditions to improve access to affordable health care not just in the U.S. but also around the world (*ReproductiveRights.org*, 2021). Along a similar vein, a motif of the content published by these accounts advocates that we place individuals in power whose goals include comprehensive reproductive healthcare, thus preserving and facilitating the ability for individuals to have agency.

These twitter accounts recognize the hegemonic nature of factors such as policy, our government administration and even things such as culture and the large role they play in how we can even discourse about topics such as sex and birth control. Furthermore, by putting out content in a different language other than English, namely Spanish, these organizations address the reality that their audience is deserving of being met in ways which are useful for them, by decentralizing the English language and by acknowledging that their narratives are unique from privileged populations. To clarify, only the Twitter accounts @ReproRights and @PPTXVotes

still relied heavily on the English language for their messaging. Another distinction was that the messaging of @ReproRights and @PPTXVotes was also framed in legislative tones more than @Latinos4PP and @LatinaInstitute. This is not a surprise considering that @ReproRights and @PPTXVotes operate in conjunction with current legislative events. The following tweets provide a few examples of this:

“Access to maternal health care, well-woman visits, cancer screenings, screening for intimate partner violence, breastfeeding services and supplies, STI screening, and HIV testing well ALL made available without copay thanks to the #ACA” (@ReproRights, 2020).

@ReproRights praises the availability of specific health care services which were made available through the Affordable Care Act. This language intends to draw attention to the important role which public policy plays in providing essential reproductive health care for all populations throughout the nation. The following tweet is also framed in a legislative tone with #ElectionDay:

“No matter the results, our work will continue on and we need you to help us continue to build power in the weeks, months and years to come. Join the movement #ElectionDay.” (@PPTXVotes, 2020).

@PPTXVotes acknowledges the concerted efforts made thus far by social movements with the goal to empower our nation. This language implores us to continue the work of reproductive

justice movements. The third rhetorical strategy which stood out among and trussed all of these accounts was language which addressed current social environment, or culture.

While not all scholars may define culture in a synchronous manner, I propose that perhaps one feature of which is consistent with culture is that it is dynamic, and it also broadly attempts to define our current social environment, among other things. Other aspects of life which culture takes into account are religious practices, rituals such as birthdays, weddings and funerals, and social markers such as race, ethnicity and language. Furthermore, culture addresses factors which include the legacies of sexism, racism and disproportionate distributions of wealth. In addition, a critical point to keep in mind is that cultures vary significantly across regions and between populations. The experiences and narrative of a spiritual, queer Latina will be starkly different than that of Protestant, heteronormative Asian. Culture enters our equation in a different way. On the one hand, while autonomy and agency are uniquely linked in that one arguably requires autonomy to practice agency, culture on the other hand can operate as a looking glass in order to gauge how populations construct and utilize these two values. Culture can also provide insight into how the roles of autonomy and agency play in an individual's life, or a collective.

Historically, certain cultures afforded that some collectives had more autonomy or agency than others. Potentially, we can combine these and define it as privilege. For example, in the case of the history of contraception, at one point using birth control may have been more permissible within the confines of marriage (*Law.Cornell.edu*, 2021; *OurBodiesOurSelves.org*, 2021). Everyone else needed to get more creative. Within many Latinx cultures, autonomy and agency are often viewed in binary ways. As a whole, people who do not fit normative standards or who are simply different are often other'd. Quite often in Latinx populations, our daughters are not permitted to stay out late, but our sons are. Sex is permissible within marriage, but

promiscuous outside of marriage. While quite hackneyed, these are scenarios we are familiar with and know how to approach. To be fair, life is lived in more shades of gray. However, the argument which I am attempting to make is that binary frameworks which exist in U.S.-American culture can be oppressive, as well as those experienced in Latinx cultures. These twitter accounts convey tones of the current social environment in various ways. They use popular vernacular, images, and utilize pop culture references to make memorable content (see Figures 1-4). In addition, they employ inclusivity and accountability by amplifying the needs of the transgender and transsexual communities, as well as utilizing multiple languages. Consider these tweets:

“The vote which was largely along party lines, aligned with actions from Texas Republican Leaders to target LGBTQ rights and protections over the last several years.”
(@PPTXVotes, 2020).

@PPTXVotes draws attention to the need for reproductive health care legislation to be inclusive of LGBTQ rights, as well as being comprehensive. The following tweet acknowledges the potential for change as new leaders are being elected to position:

“Nunca te rendiste. ¡Marchaste, resististe, y votaste para que esta victoria sea una realidad! Ahora con nuevos lideres nos tocará reimaginarnos lo que significa tomar control total de nuestros cuerpos y nuestras vidas, y lograr que esta sea una realidad para todas las personas.” (@Latinos4PP, 2020).

@Latinos4PP uses language which encourages constituents to require that new leaders keep working toward improving the landscape of reproductive health care for our nation. All of these tweets utilize legislative tones to implore that our nation's public policy continue expanding on the work of reproductive justice and help improve sexual health outcomes for Latinx populations. Moving forward, the following section will address the analysis for the second research question:

RQ2: *How do these rhetorical strategies appeal to the values and beliefs of the intended audiences?*

As touched on in the literature review chapter, Latinx cultures often approach topics related to sex and birth control with a great degree of implicit prohibition. The internet can also serve to be a space to either reaffirm the values and beliefs or begin to deconstruct them. Literature supports that discourses on themes which involve sexual activity in any context, contraception, sexual health and other related subjects can be challenging, uncomfortable, and awkward. Curiously, religiosity may not be the draconian influence as it was initially thought to be. While Roman Catholicism and other religions have a rooted history in many Latinx cultures, contemporary believers appear to be more lenient in their attitudes toward certain reproductive technologies. For example, use of birth control is becoming more acceptable, much more than methods of abortion. Notwithstanding, gendered behaviors, especially in sexual contexts, also conflate this matter.

Latinx cultural approaches which utilize frameworks such as maintaining sexual purity, saving sexual relations for marriage, future expectations of starting a family, and any other

gendered expectations have implications which can make these discourses even more difficult to broach. Literature also supports that the conditions which these approaches create are not necessarily advantageous in helping facilitate informed decision-making regarding one sexual health. Notwithstanding, social movements and the dark history which shrouds medical developments in family planning also influence the stances Latinx cultures have toward these topics. Additionally, access to the internet and its breadth adds a unique dimension to how current social environments within Latinx cultures respond to ideas about sex and sexual health. As with many other spaces where structural systems are reified, challenged, and created—such as film, television, publications, sports, music and food—social media platforms are an additional and accessible space to do the same. We tap into this space to not only generate new culture but to inform our own values and beliefs. We also tap into these spaces with much risk.

Not all efforts made to address issues as they are situated within cultures will be met with open arms. It is critical to understand what is working and what is not working in terms of promoting certain messaging, especially within the context of sexual health. With the case of Latinx cultures, it would be remiss to claim that making the transition from treating the subject of sex with taboo to openly discoursing about the topic, and its related themes, will be a straightforward one. It will not. Investigating even more so what resonates with Latinx cultures and how to utilize this to affect change will require much effort. Inevitably, some routes will fail, but not all. Notwithstanding, there are methods which can facilitate effectively reaching out to Latinx cultures in such a way that is sensitive to their needs. Perhaps tapping into interweb spaces can help accomplish that. With these thoughts in mind, values such as autonomy, agency and culture as utilized by the studied Twitter accounts may appeal favorably to Latinx communities.

Consider any Mexican family and the mental image of a larger collective might come to mind. Often, the stereotype of multiple generations living under one roof is quite normative and often pursued. I myself have lived with both sets of my grandparents. It can be incredibly strategic to have grandparents living with one's family. For example, they can often provide much needed child-care. However, perhaps more generally, there is a greater sense of togetherness and community in large families. Unlike U.S.-American culture, Latinx communities tend to be group oriented. We frequently enjoy spending time with others and gathering for whatever reason, for whichever occasion. Bonds between comadres and compadres become lifelong. An advantage of a created collective is that there are ubiquitous opportunities for support. Frequent exchanges between family members can create conditions for reinforcing, and challenging world-scripts, ideas, beliefs and values. The internet is beginning to play a large part in influencing these exchanges.

Similar to the tone of communication which these Twitter accounts utilize, appealing to current social environments can facilitate some sort of influence. In these last five years, the use of memes has exploded. Memes are used to convey humor, send political messages, educate, express discontent, and often skirt around difficult topics. These newish sites of rhetorical transactions can pack a punch in transmitting messages. They are incredibly high context and can communicate quite a bit with such little effort. If Latinx communities could be influenced to appeal to their collectives in ways which are relatable, perhaps there might be an impact to pursue safer sex, or potentially even begin to deteriorate the elements of taboo which surrounds topics related to sexual health. Using cultural references via visuals such as memes as a medium for transmitting information to ameliorate low education attainment on safe sex practices may appeal favorably to Latinx communities. Tweets which utilize memes can be incredibly

advantageous. Memes can effectively provide indirect ways of broaching topics across cultures (See Figures 1-4). Continuing, appeals which utilize communication that prioritizes values such as autonomy and agency may require a different approach.

As previously established, one driver of Latinx cultures is collectivism. The degree of interdependence between members is considerably higher as opposed to a large driver of U.S.-American culture, which is individualism. We are skilled at creating large networks where members take care of each other in exchange for loyalty. With this in mind, we are left with the question of: where do values such as autonomy and agency fit in communities where people operate from a ‘we-orientation’ and not so much a ‘me-orientation’? Henceforth, I wish to group autonomy and agency and refer to them collectively with the term self-determination. To begin, it is helpful to elucidate one distinction between individualism and self-determination. Arguably, a major difference between these two is the degree which they rely on ‘self’. To be a unique individual may not require much help from others. However, the degree to determine certain outcomes regarding one’s self may require immense help from others. This orientation can easily insert itself in Latinx cultures.

In many Latinx communities, there is a very much present desire to support others for ‘x’ reasons. Is it not uncommon for individuals who were raised in these communities to adopt life-scripts which orient them in the direction of caring for others when possible. Why could that reason not be to help individuals pursue certain life trajectories by use of reproductive technologies? One large advantage of collectivism is that individuals often turn to one another for their opinions and guidance on decisions. This may serve as a large advantage for promoting health practices. Perhaps the reader can recall an example of health remedios being shared from generation to generation. Appealing to that desire to support others when they need that support

is strategic of the studied Twitter accounts. If openly discoursing with dependents about their desire to obtain birth control can help facilitate more informed decisions regarding sexual activity, then why not have those conversations?

The tone of the messages being put out by these Twitter accounts is similar to that of an invitation for their communities to go beyond obvious ways of supporting others. Consider the following tweets:

“Blayr was met with compassion and support when she went to Planned Parenthood to get abortion care. When you cast your vote today, think of all the Texans that rely on Planned Parenthood for affordable, nonjudgmental reproductive health care #ElectionDay.” (@PPTXVotes, 2020),

@PPTXVotes calls on constituents to help create resources which allow individuals to pursue health care that is often stigmatized. @PPTXVotes uses language which addresses the reality that many individuals find it challenging to pursue birth control, such as abortion, without experiencing barriers. By generating support for a wider spectrum of health care choices, we validate and legitimize the need for all reproductive health care services, especially those which are not as accessible. The following tweet by @LatinaInstitute puts forth a similar argument:

“Everyone deserves access to high-quality and affordable birth control - it empowers us to make the best decisions for ourselves and our families with dignidad, salud y justicia. #ThxBirthControl” (Retweeted by @LatinaInstitute, 2020).

@LatinaInstitute argues that birth control should be made available to all individuals, not just certain individuals, in order for them to make the most appropriate choices for themselves and their loved ones. What if helping meet a person's needs also extended to voting for those who will prioritize their reproductive health? Or helping meet their need to confidently discourse about where they can procure resources to postpone pregnancy, or discoursing on how different forms of birth control function? Furthermore, encouraging Latinx audiences to favor individuals with political authority and public policies whose goals include empowering the historically marginalized also arguably appeals to that desire of supporting members of one's collective. Understanding the desire of an individual to employ self-determination, in the context of sexual health, through a prism instead of a binary lens can lend itself to be favorable to the values and beliefs of Latinx populations. Therein lies opportunities for entertaining the idea that individuals can support one another in ways which help create positive sexual health outcomes, even if these exchanges are awkward. The following section will expand on a conclusion for this study.

Chapter 5: Discussion & Conclusion

This thesis has presented an investigation of the online rhetorical strategies used in framing reproductive technologies towards Latinx populations. Literature which highlights the importance of addressing the sexual health needs of Latinx populations generated a critical point of departure for this study. Furthermore, literature which addresses the importance of sexual communication as it intersects with culture, rhetoric and its role within social movements, and how the internet works in tandem with reproductive agendas situated this thesis. Through the collection and analysis of online data, emergent rhetorical strategies were analyzed in response to the research questions which centralized this thesis. Committing to investigating the rhetoric of

social media is not a novel idea. However, there is a dearth of research on sexual health narratives of Latinx individuals and how social media influences those experiences. Furthermore, while there are innumerable topics worthy of exploration, I believe there is value in using the academic sphere to generate validity for a topic which is often overlooked in academia. This project is an act on that belief and an attempt to generate recognition for a topic that struggles to make a presence for itself alongside areas of research that are normative and easy to discourse about.

Considering what others can take away from this project, it is my hope that at the very least it spurs questions such as: How can we talk about sex, online and offline, in such a way that is meaningful and that spurs exigence? Why do some groups experience certain patterned health outcomes? How can we bridge health disparities? How do online spaces influence all of this? And perhaps most importantly, how do our everyday discourses play a part in that? Yes, there is still much taboo around topics of sex and birth control. This approach is not anticipated to evolve overnight. Whether we are conscious of it or not, information which is disseminated online will affirm or disrupt our collective values and beliefs. Often, information does both. When consuming certain content, there can be a pull to reconsider what we believe to be compelling and persuasive. Challenging content, as it is disseminated through various mediums of communication, can invite us to reassess why we affirm and disrupt certain culture. It is my hope that as a budding communication scholar, I can contribute to a transition of these views around sex and reproductive technologies in a meaningful way by choosing to focus on writing about sexual health outcomes as they intersect with communication.

This thesis sought to specifically investigate the rhetorical strategies Twitter accounts utilize in attempting to reach Latinx communities, and how these rhetorical strategies appeal to

the values and beliefs of the intended audiences. It was found that these strategies included communication that prioritized encoding messages of agency, and autonomy, and utilization of culture. In the case of agency, it is to our advantage to more actively define or frame how this is interpreted in the context of sexual health. Present ambiguities can push us to further explore and discuss what increased agency may look like and what it may not look like. Arguably, these strategies may appeal favorably to the intended audiences as they can fit within the worldviews of collectives which prioritize creating strong networks, online and offline, and supporting each other whenever possible and in whatever fashion. These networks absolutely extend to online spaces.

How we consume and create not just collective knowledge, but also our collective beliefs and values, no longer ends with traditional formats of dissemination. The internet is beginning to play a much larger role in how one generates their worldviews. Knowledge is being shared in such a way that populations are being raised more aware and more informed. Individuals are being empowered in ways like never before. The sharing of information, whatever its nature, is now expedited in ways unimagined through the use of the internet. How we use that information can be helpful, or not. As agents, generated and consumes information can provide much power depending on the goals which we act on. Referencing cultural spaces, such as the current social environment, in ways which are relatable, entertaining, humorous, and even uncomfortable, and which are salient to Latinx youth can help to create influence when directing critical messaging to this population regarding their sexual health. Finally, while discourses about the sexual health needs of Latinx populations are not necessarily part of quotidian conversations, they arguably fall within the same priority of many other needs. It would be to the advantage of these

collectives to treat them as such; the Twitterstream studied in this project illuminates this need. The following section addresses a few important limitations of this project.

Limitations

Perhaps one of the larger limitations of this study is the lack of substantial research which focuses on the usefulness of social media for data collection and analysis. There is not yet an explicit and coded standard for researching platforms such as Twitter, Instagram and Facebook. Concerns regarding ethical collection of data, how this is defined and preserving confidentiality among others are currently being deliberated. With this in mind, having explicitly defined guidelines for this type of research can lend itself to a more fluid investigation process and potentially improved research. Well outlined research methods can arguably help investigations better adhere to research aims. Hopefully, a standard for such research which utilizes and depends on social media platforms will have been clearly developed in the near future. Another limitation is the scope of this project.

A second limitation is that this project focuses solely on the messaging which is encoded through online spaces. Additionally, counter-rhetoric was not studied. The discourses of online spaces are not necessarily reflective of the discourses which occur in-person and face-to-face. Written language and spoken language often differ in terms of what is persuasive, compelling and digestible. Written rhetoric may meet certain needs or desires which spoken rhetoric perhaps cannot, and vice versa. Consider any famous oratory address, or perhaps recent ones; these would not have the same effect as if they were simply read in one's mind. Hearing about ideas in real time is a distinct experience from simply reading about them. With this in mind, the findings of this study may not apply to face-to-face discourses. Addressing this wrinkle in future research

might involve focusing on the overlap between written and spoken language in order to strengthen any arguments which attempt to bridge the two. As mentioned above, the counter rhetoric for the arguments being made of these Twitter accounts was not taken into consideration. As a communication scholar, it is important to consider the rhetoric for and against claims in order to have a comprehensive and holistic understanding of arguments being made. This is also critical for spurring inquiry and for allowing individuals to perceive the modes of persuasion which underlie rhetoric which supports and rhetoric which counters. An additional limitation is the specific platform being studied as well as the time frame.

A third limitation of this study is that the focus was specific to only Twitter, and during only the month of November 2020. While creating perimeters for research to a certain window of time is necessary for controlling the amount of data collected, it can also be a limitation. To be able to collect data over a larger period of time may have been more helpful for better understanding the general tone of messaging these organizations rely on to communicate to the public about topics such as the importance of sexual health. Let us pivot to a related thought; while there is meaningful research which uses Twitter to measure certain critical variables, such as Marcy and Golder's work on using tweets to measure people's moods, we still need to reckon with the fact that these spaces are often used to communicate messages which adhere to social bias (Golder & Macy, 2011). In other words, how can we measure the transparency, honesty and earnestness of the content being encoded? Industrial strength analytical algorithms are incredibly useful at interpreting data collected from social media. However, these instruments can measure only so much. While this project did not utilize such a tool, the argument being made is that while messages being shared in cyber spaces facilitate efficiency, they lose out on depth and connection. This leads us to an important implication of this study.

An implication of this study might be that while using social media to increase awareness of certain social issues can be efficient and which requires less work per se, does this work imply that we are engaging less and less in normative and potentially more impactful modes of activism? Social media has undoubtedly shaped our world and has created the potential for a sort of visibility which was unprecedented. Additionally, social media has also influenced how we do politics, how we educate, the dynamics of culture, business, our careers and relationships. The internet has provided amazing avenues for connecting with individuals and groups around the world—a global village essentially. However, is this ease of connection creating activism behaviors and patterns which, in the long-term, are not sustainable and effective?

One largely influencing motivation for sharing information on the internet is that the content being shared is entertaining and/or valuable. It is no wonder humorous memes spread like wildfire or that misinformation often has a far greater reach than factual information. However, what if the information that sexual health specialists or advocates wish to disseminate, information which is arguably valuable, is best shared in person and face to face? Are there strategies which we employ to help readers process and organize written information also useful for spoken information, and vice versa? Furthermore, does choosing to focus on the influence of how organizations decide to disseminate certain online messaging about sexual health imply that other forms of formal sexual education are missing the mark? The final section of this chapter will offer a few concrete directives for future research.

Future Suggestions for Research

This final section will end on a call for future researchers to take this work and further explore Latinx populations in the context of their unique sexual health narratives. In order to take

on this endeavor, we will need end approaching health care in the same manner for all individuals. Adopting a general approach to health care for all disregards the singular factors and structures which heavily influence the sexual health outcomes of Latinx populations. We need to allow that these circumstances tip scales and force us to require tailored research questions which take into account structures that inform how we view, understand and treat our bodies. With these thoughts in mind, consider a few important queries that formulated while working on this project.

The following research questions may be useful for facilitating critical venues of inquiry which can utilize the work I have started. The first one being: how effectively do the social media platforms reach non-heteronormative groups (LGBTQIA)? While these Twitter accounts, and other accounts on different social media platforms, are working toward and helping facilitate contributions to the efforts of reproductive freedom and reproductive justice, are the patterns of first and second-wave feminism being repeated? Are the online organizational agendas being acted on inclusive of the narratives of individuals who do not identify with binary or heteronormative practices? Or, are these agendas prioritizing those whose narratives are easier to discourse about, describe and relate to? These questions attempt to highlight the need consider that social structures play different roles for all individuals. An additional question which also developed while working on this project was: how do current internet policies influence and affect the content which is being put out by online parties, and do these policies amplify or restrict opportunities?

Much effort is being placed on censoring online content, and this is often for supposedly valid reasons. However, a important query to make is who gets to decide what sort of online content is appropriate and why?, and are there missed opportunities to generate a larger reach

when publishing online content on topics such as sexual health? As this thesis has highlighted, the internet indubitably plays an immense role in our daily lives. We are consuming online content in greater amounts and much faster than ever before. There are opportunities for sharing information which can help individuals make more informed decisions regarding their sexual health. However, there are and will continue to be barriers to this. Exploring these barriers, where they generate and why can inform how we navigate producing and publishing online content which is often flagged. Furthermore, a third and final question which developed was: how effective is the online content being disseminated to begin with?

It would be remiss to not consider the opportunity to generate feedback on provided online information about sexual health which targets certain populations. One way to generate this feedback would be to investigate with specific populations and inquire if they care about and find helpful the online content being directed at them. The effectiveness of an intervention may be better measured with the way groups receive this intervention. If we are not actively exploring the ways in which interventions are received and consumed, we are missing out on valuable opportunities which help us to refine our health care approaches to specific populations. Intent does not always equal impact. We need to be pursuing feedback on our health care communication efforts. To conclude, future researchers are encouraged to utilize this study as a springboard and take advantage of queries such as these to generate meaningful and compelling investigations which can contribute richly to health communication literature and knowledge.

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Vita

Caréy Vanessa Cuevas' research interests lie at the intersection of health communication and sexual communication. She is specifically interested in studying the social factors, including lesser understood granularities, which contribute to inequitable healthcare disparities in sexual health outcomes for historically marginalized communities, but especially for Latinx populations. Previously, Vanessa received her B.A. in Health Communication at Pacific Union College.

Contact information: <cvcuevas10@gmail.com>