by Anna Lawrence

At the dawn of 2016, global reports were rife with news of the quickly spreading Zika virus and its potentially fatal impact to the fetuses of pregnant women who had been infected. El Salvador's official recommendation to its women? Don't get pregnant for the next two years.

While the virus, which is spread by mosquitoes, rarely causes anything more severe than flu-like symptoms, it can have serious consequences for pregnant women. Increasingly, reports of babies born with microcephaly, a rare neurological condition in which an the infant's brain fails to develop to normal size, have been linked to Zika infections during pregnancy. Early reports of the virus seemed relatively distant from the Western world, as they were mainly contained within the region of Latin America and the Caribbean, a zone that is very hospitable for the spread of this disease because of the presence of pathogen-carrying insects such as the Aedes mosquito, as well as the healthy supply of standing water that allows them to breed. The ever-increasing threat of Zika infection along with the awareness of its potential birth defects has prompted many Latin American governments to take action to aid citizens. For example, Colombia, a country with strict abortion laws that only permit the termination of a pregnancy in a few specific cases, has expanded its list of exceptions to include Zika infection in mothers as reason to legally abort.

One of the Latin American countries in which the highest number of Zika cases is being reported is El Salvador. In a country of 6 million people, more than 6,000 cases were confirmed by the end of November 2015, with an additional 2,500 being reported by the end of January 2016.

Despite the fact that the governments of surrounding countries have sought to control the effects of Zika on infants with their own plans of intervention, Salvadorians are expected to take the issue into their own hands.

Unfortunately, El Salvador's citizens are not prepared to handle the implications of a Zika outbreak by themselves. El Salvador is one of the fastest-growing countries in Latin America, with each woman, on average, having 4.5 children. Not only is birth control in short supply, but once a woman becomes pregnant, she has no legal option to end it if she happens to be infected. El Salvador is one of three countries internationally that have further restricted their abortion laws since 1997 to include absolutely no cases for legal ending of a pregnancy. The leading method for family planning is female surgical sterilization, which occurs in 31.5% of women. However, women who are sterilized typically go through the process while they are still in this hospital in recovery from having a child so this method cannot be relied upon to prevent Zika-related birth defects. In addition, recent evidence suggests that the virus may also be sexually transmitted, so the only effective method of protection against both pregnancies and Zika infections would be the use of condoms, something that the men of El Salvador do not support.

However, it is not realistic to assume the population will remain abstinent, which would be the only measure that could prevent the effect of Zika on pregnancies. Morena Herrera, president of the Citizen's Group for the Decriminalization of Abortion in El Salvador, argues, "Women don't get pregnant alone. The access to information and to contraceptives, even though not illegal, is not totally open and many women don't have enough information. And there are many pregnancies that are a result of violent rape - pregnancies imposed on women where they aren't making their own decisions." The key to increasing safe family planning methods is

informing all members of the public, both men and women, about the resources available to them and how they can be used to prevent pregnancies that could otherwise be affected by Zika. Studies have shown that simple changes such as informative programs offered for entire families about birth control services can be enough to dramatically increase public awareness and, as a result, the use of temporary methods such as condoms by both men and women. These results indicate that it is necessary to attribute the responsibility of a pregnancy to all parties involved in it, regardless of gender. If men are involved the beginning of a pregnancy, they should also be responsible for and educated about its prevention equally with women.

Currently, the U.S. government does not provide funding for international family planning initiatives in El Salvador, but it can be seen clearly that the country is in need. From this situation, it is easy to see why we should write to members of Congress and request that they consider reforming the current funding state for El Salvador. You can also make a monetary donation to the International Planned Parenthood Foundation (ippf.org), which is able to provide contraception in El Salvador by funding the Salvadoran Demographic Association in the country.

At the very least, the most important thing is for not only those in El Salvador to be informed, but for those closer to home to be aware of why it is crucial for family planning resources to be used in curbing the Elika epidemic. Though the difficulties affecting women and their pregnancies may seem distant in our healthcare system, the threat of Zika's effects on our own families gravitate closer to us daily as the problem continues.

Anna Lawrence is a senior at East Carolina University majoring in Anthropology and Hispanic Studies and minoring in Linguistics. After graduation in May 2016, she plans to obtain her PhD

in Iberian and Latin American Linguistics at the University of Texas at Austin in order to pursue a career documenting the way that intercultural contact and society impact language.