

HAPPY NEW YEAR, GOVERNOR NIKKI!

*Wishing you all the peace
and wonder of the season*

Kone Catherine



TRIALS of THE BILLINGS OVULATION METHOD

Introduction

Trials of the Billings Ovulation Method carried out in both developed and developing countries reveal high reliability, effectiveness and satisfaction with the method.

In China, the Nanjing Family Planning Instruction Institute and the Jiangsu Family Planning Research Institute in collaboration with Drs Evelyn and John Billings are conducting a significant controlled trial on the reliability of the method. The results of the first stage of this trial are in the process of publication.

It is extremely difficult to evaluate and compare fertility control methods in clinical trials because of the terms used and the variety of methods available. To understand the terminology a list of terms is included below.

Terminology used in trials

METHOD-RELATED PREGNANCY RATE

This indicates the number of pregnancies, expressed as a percentage, occurring when couples carry out correct instructions for a particular method. The correctly assessed pregnancy rate under these circumstances is an indication that the method has not covered a percentage of biological circumstances. All fertility control methods have such failures, including the Pill, the IUD, and even sterilisation.

TEACHING-RELATED PREGNANCY RATE

This figure applies to pregnancies resulting from incorrect teaching of a method, or to misunderstanding by the user of the method.

CONTINUATION RATE

This is a guide to the acceptability of a method and is judged by the readiness of users to continue with a method over an extended period and to return to a particular method after a pregnancy.

TOTAL PREGNANCY RATE

This total figure includes pregnancies resulting from a failure of a particular method to cover all biological circumstances, misunderstanding of the method, risk-taking by couples, ambivalence towards pregnancy, and the decision by a couple to exercise the second option of achieving a pregnancy. Within the total pregnancy rate there may also be a number of pregnancies resulting from an act of intercourse when agreement fails between partners.

Consult the 1997 edition of *The Billings Method, Controlling fertility without drugs or devices*, by Dr Evelyn Billings & Ann Westmore for further reading on terminology and the trials reported in the following tables.

Summary of Trials

Location/Investigator	Years	Couples	Cycles or years	Method related pregnancies		Teaching related pregnancies	
China (Nanjing)/ Zuo et al.	1996-97	1235	1 year (continuing)	to be published			
Africa, Burkina Faso/Minister of Health and Social Action of Burkina Faso	reported in 1990	166	2,272	1	0.6%		1.7%
India, 5 States/Indian Council of Medical Research	1986-88	2,082	2 years		<1%		
Indonesia/Family Health International USA	1986-88	>425		0*	0%		
5 Nations-India, The Philippines, El Salvador, New Zealand, Ireland/World Health Organisation	1976-78	869	10,215		2.8%		3.9%
Australia (Victoria)/Ball	1976	122	1,626	4**	2.9%	8	5.9%
USA/Klaus	1975-77	1,090	12,282		1%		
Australia (Melbourne)/Billings	1972	98	3-4 years	0	0%	0	0%
Tonga/Weissman	1970-72	282	2,503	1***	0.5%	2	1%

Remarks *

Indonesia/Family Health International USA

Multicentre study of three methods of NFP - 850 women entered the trial, more than half entered for the Billings Ovulation Method (BOM) - results for BOM only.

At the end of this survey the study investigators recommended that the Billings Ovulation Method be included within the choices of family planning methods provided by the national programme in Indonesia. **

Australia (Victoria)/Ball

Indications were that sperm survival in one case was 5-6 days, 6-7 in two cases and 7-8 on one other. A sperm survival time of up to five days is credible in the presence of adequate amounts of fertile mucus, but present scientific knowledge does not allow a clear statement about sperm viability for longer than this. ***

Tonga/Weissman

Some time later it was revealed by the couple who had reported a method-related pregnancy that they had in fact been aware of fertile signs at the time. Therefore in this trial the method-related pregnancy rate was zero.

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Location/Investigator	Reference
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Africa, Burkina Faso/Minister of Health and Social Action of Burkina Faso	Minister of Health and Social Action of Burkina Faso, Bulletin d'Epidemiol. Et d'Inform. Socio.-Sanitaire, No. 17, 1990.
India, 5 States/Indian Council of Medical Research	Indian Council of Medical Research, "Optimism With Natural Family Planning for Fertility Regulation in India", Preliminary Report of a Five-State Study of the B.O.M. in India 1986 to 1988, presented at the Conference on "The Welfare of Women", St John's College Hospital, Bangalore, India, January 1990.
Indonesia/Family Health International USA	S. Thapa, M.V. Wonga, P.G. Lampe, H. Pitojo, A. Soejoenoes, "Efficacy of Three Variations of Periodic Abstinence for Family Planning in Indonesia", <i>Studies in Family Planning</i> , 21:327-34, 1990.
5 Nations-India, The Philippines, El Salvador, New Zealand, Ireland/World Health Organisation	World Health Organisation, Task Force on Methods for the Determination of the Fertile Period, Special Programme of Research, Development and Research Training in Human Reproduction, "A Prospective Multicentre Trial of the Ovulation Method of Natural Family Planning, I, The Teaching Phase", <i>Fertility and Sterility</i> , 36:152, 1981. WHO, op. cit. Phase II. WHO, op. cit., Phase III. WHO, op. cit., Phase IV.
Australia (Victoria)/Ball	M. Ball, "A prospective field trial of the Ovulation Method", <i>European Journal of Obstetrical and Gynaecological Reproductive Biology</i> , 6/2, 63-6, 1976.
USA/Klaus	H. Klaus et al., "Use effectiveness and client satisfaction in six centres teaching the Billings Ovulation Method", <i>Contraception</i> , 19:6, 613, 1979.
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<http://www.woomb.org/bom/trials/trials.html>

China successfully launching Billings Ovulation Method

Shao-Zhen QIAN

**Shanghai Institute of Materia Medica, Chinese Academy of Sciences, Shanghai
200031, China**

This paper was presented at the International Jubilee Conference, 50th Anniversary of Billings Method, UNiversity of Melbourne, Australia, conducted by Ovulation Method Research & Reference Centre of Australia, March 28-30, 2003.

In the 30 years fertile life of women, only a few days in each cycle are fertile and the rest of time infertile. People of insight have long considered making use of this natural phenomenon to regulate fertility. Early methods of natural family planning (rhythm, basal body temperature, symptothermal, etc.) are unsatisfactory for fertility regulation and the Chinese people did not accept them. In the early 60's, Drs. J.J. and E.L. Billings and their colleagues discovered the interrelationship between the cervical mucus and the cyclic changes in the ovarian hormones and fertility and alleged the use of mucus symptom as the main index of ovulation and fertility applicable to all phases of female reproductive life. This is a milestone in the study of natural family planning.

**37,000 BOM
teachers
trained**

Since the official introduction of the Billings Ovulation Method (BOM) into China by the Chinese Ministry of Health in 1995, the method has been distributed to almost every corner of China, including the industrial and agricultural areas and the minority regions. Chinese women of different strata and ethnic groups readily understand the meaning of the mucus patterns described in the Billings books and all of them accept the method. After teaching, most subjects are able to recognize the peak symptom from the first cycle and the rest from the second cycle, except in a few (around 1%) having anovulatory cycles as confirmed by plasma hormonal assay.

**2.7 Million
fertile couples
in regular use**

Chinese Family Planning workers not only advocate fertility control but also fertility promotion for those without children. The BOM is a bidirectional approach that can be used for both purposes and is becoming one of the most favoured methods in China. Since it is simple to learn, cost free, non-invasive, has no side effects and, in particular, it is the most effective way of fertility regulation in all conditions, as breastfeeding, irregular cycle, pre-menopause, coming off contraceptive medication or during emotional and physical stress.

**success rate
99%**

Fourteen BOM Centres have been established in China at the most strategic areas for fertility regulation and 36,845 BOM teachers have been trained. A certain percentage of the teachers were trained by the Australian Teaching Group led by Drs JJ and EL Billings. Up to date the method has been regularly used in more than 2,686,400 fertile couples for avoiding pregnancy, the overall success rate being around 99%; In addition, there were 14,524 among 45,280 infertile couples (success rate 32.1%) who were overjoyed to obtain their children by the use of BOM. The common people affectionately called these kids the Billings babies. BOM or mucus observation is now the primary treatment for couples presenting at the 14 Centres and neighboring clinics experiencing difficulties in conceiving. Through field trials we also confirmed the fact that mucus observation not only enables the women to understand their fertile status, but is also helpful to their reproductive health. Many women consulted gynecologists for an early diagnosis and treatment, when they observed abnormal mucus symptoms.

**abortion rate
dramatically
reduced**

**32% of
infertile
couples give
birth**

Table 1. Artificial abortion rates in Community A and B in 2002

Community	A (BOM widely used)	B (BOM seldom used)	P
Total fertile women	36,240	49,042	
Artificial abortion in 2002	221	1992	
Abortion rate	0.61%	4.06%	<0.01

In certain localities where the BOM has been widely used, not only the birth rate but also the artificial abortion rate is significantly decreased. In Community A of one municipality, the BOM was widely spread, the yearly artificial abortion rate in 2002 being 0.61% (per 100 fertile women), while in the neighboring Community B, where BOM was seldom used, the rate was 4.06%. which was almost 7 times that of A, the difference being highly significant ($P < 0.01$, Table 1). The basic conditions of the two communities were similar and their artificial abortion rates in the past had been also similar.

The intrauterine device (IUD) is the most popular contraceptive method used in China. We have done a randomized one-year parallel comparison of the efficacy of BOM and TCu220c in avoiding pregnancy. TCu220c is a widely used IUD in China. One thousand five hundred and fifty-six fertile women of different educational levels were enrolled and randomly classified into 2v groups, one using BOM and the other, IUD. From Table 2, it can be seen that both the pregnancy and the discontinuation rates are much lower ($P < 0.01$ - $P < 0.001$) in the BOM than in the IUD group. Besides, in the IUD group, there were 15 expulsions and 38 removals due to side effects (pain/bleeding); thus the total use-related discontinuations amounted to 65 cases (12 pregnancies and 53 expulsions and medical removals). In the BOM group only 5 pregnant cases (all use-related) were discontinued and there were no

side effects.

Table 2. Gross cumulative 12-month life-table (Tietze) event rates (mean \pm SE %)

	BOM	IUD	P
Pregnancy	0.5 \pm 0.2	2.0 \pm 0.6	<0.01
Expulsion		2.6 \pm 0.7	
Medical removal		6.3 \pm 1.0	
Use-related discontinuations	0.5 \pm 0.2	10.6 \pm 1.2	<0.01
Non-medical discontinuations	3.1 \pm 0.9	0.5 \pm 0.3	
Loss to follow-up	1.0 \pm 0.3	1.1 \pm 0.3	
Continuation rate	96.4 \pm 0.6	89.3 \pm 1.2	<0.01
Continuation cases	966	587	
Women-months of use	9,870	6,299	
Total number of cases	992	662	

The BOM results in China exerted a big impact on both the Chinese community and the medical circle and there were 48 papers, broadcasting stations, TV stations and 5 journals reported the news of Drs JJ & EL Billings and their wonderful method. In most provinces, the BOM has already been incorporated into the Government Family Planning Programme as one of the methods of choice by the fertile couples.

The method is highly efficient only when a series of precautions and regulations are strictly followed. Inappropriate use would result in higher failure rates, as in preliminary trials in China (1989) and some other places. Drawing a lesson from the early work, we always stick to the authenticated Billings teaching materials. In China only the authenticated BOM materials (Chinese translation, with the approval of WOOMB) are used and nobody is permitted to rewrite, revise or modify them. In China, the BOM book, booklet, wall charts, slide rule, etc. are among the most popular reference materials for family planning. We also provide these materials to Chinese-speaking peoples outside China.

We pay much attention to the Teacher-training course and the women-teaching course, as well as an adequate guidance system and regular follow-up visits to the couples. Such a programme not only imparts scientific knowledge but also provokes and maintains the initiative of the women and their husbands, who are invited to participate in every other follow-up interview. Qualified teachers, the acquisition of BOM knowledge by the participants, the women's motivation and the husbands' cooperation are the key points for the successful implementation of BOM.

Conclusions

1. The BOM is well accepted by different strata Chinese people;
2. The use-effectiveness of BOM is much higher than that of TCu220c, with significantly lower pregnancy rate and discontinuation rate ($P < 0.01$);
3. The extensive use of BOM will significantly decrease the artificial abortion rate;
4. In infertile couples of unknown cause, the BOM is the method of choice in achieving pregnancy.

Contribution of the Caucus for the Advancement of the Billings Ovulation Method CABOM

(W.O.O.M.B. International Inc., The Endeavour Forum & 13 Eco soc. NGOs)

to the Fiftieth Commission on The Status of Women (CSW 50)

February 27 to March 10, 2006

As our contribution to the CSW 50, 2006, we submit the following paper prepared for the new Human Rights Council NGO input on natural family planning that is being discussed this week in the UN. It demonstrates the relevance of the Billings Ovulation Method to the two themes of CSW 50, 2006 - those of the education and health of women.

The Billings Ovulation Method (BOM) and Human Rights

Having passed the test of time and the scrutiny of the scientific world following its initial development in the 1950s, and having found acceptance wherever it is introduced, we call upon the United Nations to recognise knowledge of the Billings Ovulation Method of natural fertility regulation (BOM) as a basic human right for all women of reproductive age.

In her paper titled, "Natural Family Planning Is it Scientific? Is it Effective?" Dr. Hanna Klaus MD, Life Fellow of the American College of Obstetricians and Gynecologists, writes:

"With the significant decline in infant mortality since the beginning of the 20th century, the need for child spacing became evident to many persons. In the second half of the 20th century non-coital contraceptives were discovered and assumed a high profile because they were aggressively promoted. Nevertheless, cost-free natural methods are still preferred by many couples for reasons of economy, ecology, religion, as well as a desire to maintain control of one's own fertility." (i)

"Periodic abstinence" is the name given by the World Health Organization (W.H.O) to all natural family planning methods. It is defined as voluntary avoidance of intercourse by a couple during the fertile phase of the menstrual cycle in order to avoid pregnancy. No method has undergone so many trials, or is as natural in the true sense of the word, as the Billings Method. The W.H.O. itself gave the name "Billings" to it in order to distinguish it from other methods and we believe that the authentic Billings Ovulation Method deserves to be vigorously promoted by the UN in its own right.

The BOM was developed over several decades by an international team of medical researchers and clinicians, led by Drs. John and Evelyn Billings of Australia, (ii) in collaboration with Prof. Erik Odeblad (iii) and Prof. James Brown.(iv) It is based on a woman's vulval observations of what she feels and sees on a daily basis. All she is asked to do is keep a simple record of observations of external signs of fertility and infertility in her cycle and obtain the guidance of an accredited teacher in order to understand the commonsense guidelines of the Method. A fascinating pattern of fertility and infertility unfolds for her which is uniquely her own and described in her own words. The rules are effective in all eventualities, even when cycles are irregular, as in the case of breastfeeding, approaching menopause, stress where ovulation is delayed. They learn that it is perfectly normal to notice infertile cycles interspersed with fertile ones. Because of its accuracy the Method is fast becoming the primary treatment of infertility and the chart a useful tool for diagnosing certain medical conditions early. Professor James Brown, internationally renowned endocrinologist, has shown that many of his patients with infertility of undetermined cause, achieved pregnancy without prior investigation or the expensive intervention of fertility experts by using the Billings Method. Most recently 78% of 449 such participants achieved pregnancy in a retrospective study conducted throughout Australian BOM clinics this year,

In its own multi-national study of 1978 (v) the W.H.O. proved that the Billings Method works when used to space pregnancy 98.5% of the time. It was found that 93% of women, after just one conversation with an accredited teacher, can return with a chart identifying the few fertile days within their cycle when conception is possible and the many infertile days when it is not, regardless of their socio-economic status. With further instruction in the four commonsense guidelines of the Billings Method they take charge of their reproductive years, working confidently with nature, not suppressing it. They do not have to rely on any device or contraceptive medication with their harmful side effects.

Further proof of its effectiveness is found in trials of the Method in Indonesia, conducted in 1978 through to 1982 involving 1331 couples. A method effectiveness rate of 99% was found. Equal success was reported in India, where there were 2059 couples following the Billings Ovulation Method for 21 months.(vi) The method effectiveness was 99.15%. In China, the Billings Method is a government approved method. In a study of 992 couples following the Billings Ovulation Method guidelines for avoiding pregnancy for one year there were five pregnancies which were classified as people who did not listen to the information and therefore did not follow the guidelines. The five couples continued to follow the Method once they realized that the rules really mean what they say. These were classified as Teaching Related Pregnancies. The effectiveness figure quoted is 99%. Method Related Pregnancies is 0%. In 2005 Prof. Qian quoted a figure of 3,645,600 women who are using the BOM in China. This demonstrates a dramatic increase since 2003, the jubilee year celebrating the Billings Method, when Dr. Evelyn Billings announced that,

"The 1,871 core-teachers have been responsible for training 48,449 Chinese teachers. (These are statistics measured up to 31 December, 2003)... and the BOM has been used in more than 156,400 fertile couples for avoiding pregnancy and 3,268 infertile couples for achieving pregnancy." (www.woomb.org)

Prof. Qian of the Jiangsu Family Health Institute, in China, stated that, "The Billings Ovulation Method is the safest and most effective method so far available for fertility regulation" (vi). There has been burgeoning interest in the Method around the world ever since, not only for spacing birth but also for reducing high rates of abortion. The most recent example of this is on January 7th of this year when 8,000 people attended the official launching of the Billings Method in Manila. Increasing numbers of doctors from all parts of the world, are accessing the official Billings website: www.woomb.org, for information on conferences and e-education through tutorials organised by the Ovulation Method Research and Reference Centre

of Australia (OMRRC) in Melbourne. More translations of authentic materials are appearing monthly on the home page of woomb.org, notably that of Romania in the last month.

Article 25 of the Universal Declaration of Human Rights states that "Motherhood and childhood are entitled to special care and assistance." Such special care and assistance must include providing information that enables women to make informed choices. No family planning treatment, medication or device should be given to women without their being informed of this safe and effective Method. No longer is it excusable for doctors to be skeptical about whether women are able to chart their vulval sensations. They can and do.

There are those with commercial interests or population control agendas who promote artificial "birth control" methods. The only interest of those who promote the Billings Method, who do not view birth as a disease to be controlled, is to provide women with knowledge of a natural, safe, effective and cost free method of birth regulation. We ask that the UN distinguishes this Method from other methods and make it public that the United Nations promotes its spread as a basic right of women to know how their cycles work throughout their reproductive lives.

J. and S. Fryer

e-mail: jandsfryer@shaw.ca

website: <http://www.billingsmethod.com>

Official Billings website <http://www.woomb.org>

Footnote: This paper has been approved by Dr. Lyn Billings. The authentic copyrighted materials are available by contacting thebillingsmethod@woomb.org and accessing the website <http://www.woomb.org>

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Anne-Catherine Barrett
350 Thomas Sayer Rd
Gatineau, QC, J9T 3E6
CANADA
(annecbelanger@gmail.com)

The Honorable NIKKI R. Haley
Office of the Governor
1205 Pendleton Street
Columbia, South Carolina
29201
USA

January 4, 2017.

Dear Governor Haley,

Congratulations on your recent nomination by President-Elect Donald Trump to the Office of US Ambassador to the United Nations!

My name is Anne-Catherine Barrett-Belanger. I'm a natural born US citizen living near Ottawa, Canada with my Canadian husband and children. I'm a Fertility Educator in the Billings Ovulation Method, a fertility-awareness based method (FABM) of Natural Family Planning. For 25 years, I've been teaching women to understand their fertility with the science and knowledge of the Billings Ovulation



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Method in order to help them prevent and/or achieve pregnancy naturally by giving them the information they need to monitor their sexual and reproductive health.

The not-for-profit organization I volunteer with is WOOMB International, World Organization Ovulation Method Billings. WOOMB International has been an NGO in Special Consultative Status with the Economic and Social Council of the United Nations since 2012. We stand with many pro-life, pro-family NGOs, CSOs and UN Member States to assist in the promotion of pro-life, pro-family language and values by influencing the inclusion of them through interventions and encouraging member states to support these values in their votes on policies developed and implemented by the UN.

The Billings Ovulation Method was founded in 1953 by Drs John and Evelyn Billings of Australia. It is supported by the scientific work of Dr Erik Odeblad of Sweden who devoted his life's work to the understanding of women's reproductive health through the design of the cervix and its fertile characteristics. Another great collaborator and supporter of the work of the Drs Billings is the renowned endocrinologist, Prof. James Brown,

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who, though initially involved in the development of the oral contraceptive pill, provided the fullest understanding of the woman's reproductive hormones through study and research. These pioneer doctors championed the path to the growing number of Fertility Awareness Based Methods of Natural Family Planning. Dr Evelyn Billings always advocated that women have the right to understand their own fertility. It is on this basis that the Billings Ovulation Method does not sell this information; we provide it to women freely.

WOOMB International has over 40 affiliates across the globe. The American affiliate is BOMA-USA, Billings Ovulation Method Association-USA. (www.boma-usa.org). The Billings Ovulation Method is taught and used throughout the world in more than 100 countries to provide a reliable natural method for avoiding unwanted pregnancies. This is most notable in China and India where Government Family Policies insist on adherence to restrictive limitations on families through mandatory contraceptive and sterilization programs. In these countries, families who use the Billings Ovulation Method to avoid pregnancy are exempt from these programs.

In 1978, the World Health Organization studied the effectiveness

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of the Billings Ovulation Method and rated it to be 98.5% effective in preventing pregnancy. Further studies and trials have attributed even higher ratings to it, including an important study from the Shanghai Institute of China in 2003. Dr. Odeblad rated it himself as being 99.5% effective in preventing pregnancy. It is morally acceptable to all cultures, easy to learn and simple to use. It relies on a basic approach to the understanding of its 4 Rules for avoiding or achieving pregnancy. It is also used to help women monitor their reproductive health by recognizing the presence of abnormalities which may arise, making the Billings Ovulation Method a valuable tool in the early detection of reproductive health concerns.

Other organizations such as FEMM, Fertility Education and Medical Management, founded by Anna Halperin in NYC, and FACTS, Fertility Awareness Collaborative to Teach the Science, founded by Dr. Marguerite Duane in Washington, D.C. teach FABMs to women to inform them of the many natural benefits of understanding their own fertility, and to help train the medical community in the knowledge and promotion of them to their patients. These organizations are helping women throughout the country understand their own fertility and giving them the necessary tools

to apply that knowledge according to their own situations and lifestyles.

It is my hope that the new U.S. Administration will regard Fertility Awareness as a valuable asset for women across the country, and throughout the world, so it can be recognized as a reliable source of information concerning FABMs for women who may prefer to use natural methods to plan their families. I believe the Department of Health and Human Services under the direction of the newly nominated Senator Tom Price can be a major influence in the development of Programs and Services promoting FABMs throughout the country for all American women of the United States.

Along with participating in the March For Life in Washington, DC on January 27, 2017, I will be attending the 61st Commission on the Status of Women at the UN HQ, NYC, March 13th-24th, 2017. Our organization has requested to be granted a Parallel Event by the UN to host a Billings Ovulation Method Workshop during the Commission, as helping women have a correct understanding of their fertility is true empowerment. I would be very pleased to make your acquaintance, and discuss the promotion of the Billings Ovulation Method, both at home and abroad.

Yours Kindly,
Anne C. Barrett-Belonger
Anne C. Barrett-Belonger
Fertility Educator, BOM
Administrative Representative
WOCMB International, NGO