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POLICY BRIEF

ENSURE EVERYONE CAN ACCESS BIRTH CONTROL WHEN THEY WANT OR NEED IT



THE PROBLEM

True reproductive freedom means having access to the full spectrum of reproductive health care, including abortion and birth control, and the freedom to make your own decisions about when you use these health services. But too many people do not have access to the birth control they want or need, and are facing increasing attacks on their access to birth control. Some people still struggle to get and afford birth control, including because of arbitrary limitations put in place by their insurance plans. Others are forced to use a method they do not want or that does not meet their needs. Still others are denied the method they want or are subject to ideologically-motivated misinformation and restrictions. For many people who use birth control—especially those who are already more likely to experience barriers to access, including Black women, Indigenous women, and other women of color and LGBTQ people—these kinds of barriers can keep them from using birth control correctly or consistently.

At the same time, no one should be coerced, pressured, or forced to use birth control. This is especially true for sterilization, which is not reversible after it is performed on people who could have become pregnant. But forced sterilization is legal across most of the country. Currently, 31 states and Washington, D.C. explicitly allow the forced sterilization of many disabled people. Under these laws, a judge can order someone's sterilization without their consent, purportedly for their own good.

When people are not able to get the birth control they want and need, they face an increased risk of unintended pregnancy, and related threats to their health, the health of their families, and their economic security. Especially amidst the threats to reproductive freedom since the Supreme Court overturned *Roe v. Wade*, states have a critical role to play in helping to ensure everyone can access the birth control they need, when they need it, as well as ensuring that no one is forced to use birth control.

THE SOLUTION

States should take action to remove barriers to birth control access, enshrine protections in state law, ensure sexual assault survivors can access emergency birth control, and guarantee that disabled people are free to make their own decisions about sterilization.

BASIC ELEMENTS OF THE SOLUTION

- Enshrine the right to reproductive freedom, including the right to birth control and abortion, in state law.
- Codify the Affordable Care Act's contraceptive coverage requirement in state law, requiring
 insurance plans regulated by the state to cover all FDA-approved birth control without out-ofpocket costs.
- Require coverage and dispensing of no less than one full year of birth control by both private and public insurance, removing an unnecessary barrier to birth control.

- Require coverage of over-the-counter methods of birth control without requiring a prescription by both private and public insurance.
- Fund a public awareness campaign about the right to birth control, state and federal laws requiring insurance coverage of birth control, and how to access birth control.
- Require hospitals to provide medically accurate and culturally competent information about Emergency Contraception (EC) to all sexual assault survivors, as well as EC to survivors who want it. These laws should be without exceptions and include all emergency health care facilities.
- Repeal laws allowing the forced sterilization of disabled people.
 Replace them with laws that empower disabled people to make their own decisions about whether to be sterilized and ensure that they have the support and accommodations they may need to do so.

TALKING POINTS ON THE SOLUTION

- Everyone should have the freedom to use birth control.
- · Contraception is basic health care.
- Protecting and expanding access to birth control is essential for many people's autonomy and well-being, especially since the Supreme Court overturned Roe.
- Eighty-four percent of voters support access to birth control, at any time, with no restrictions. (2021 NWLC polling on file) And nearly eight in 10 voters (78%) see contraception as basic health care for women.
- Birth control is such a core part of women's lives that 99% of sexually active women have used birth control at some point.
- Removing barriers to birth control so that people can plan, space, and prevent pregnancies is critically important for their economic security. Access to birth control is linked to women's greater educational and professional opportunities and increased lifetime earnings.
- A person's chances of unintended pregnancy increase considerably when barriers prevent them from using birth control consistently and correctly.
- Arbitrary barriers, such as limits on how many packs of birth control you can pick up at one time or unnecessary prescriptions, shouldn't keep people from accessing birth control.
- Access to a full year's supply of birth control can help people avoid gaps in using it and improve its effectiveness. It can be difficult for people to pick up their birth control or see their health care provider when they need it. They may not be able to get time off from work, have a ride to a pharmacy or clinic, or be able to get to a pharmacy or clinic when it is open, let alone be safe going to any of these places. When women were able to obtain a full year of birth control at one time, their odds of pregnancy decreased by 30% and odds of abortion decreased by 46%.
- People need coverage of all birth control methods without out-ofpocket costs so that they can use the specific birth control that is

- right for them without cost being an obstacle. Seven in 10 voters (71%) support the ACA provision that requires insurance plans to cover birth control without a co-pay. Putting the ACA birth control benefit in state law will protect our residents and could reduce income-based disparities in unintended pregnancy rates.
- One in three Latinas (33%) and over four in ten (42%) Black women of reproductive age report that they cannot afford to pay more than \$10 for contraception.
- Everyone should have the freedom to control their own body.
 Failure to provide emergency contraception to a survivor of sexual assault denies them this freedom and could force them to confront an unwanted pregnancy.
- Expanding access to birth control will put our state alongside states across the country that are pursuing common sense solutions to barriers their residents face:
 - o At least 17 states and the District of Columbia have passed laws requiring coverage of all FDA-approved birth control methods without out-of-pocket costs (CA, CT, DC, DE, IL, ME, MD, MA, NV, NH, NJ, NM, NY, OR, SC, VT, VA, WA).
 - o At least 28 states and the District of Columbia have adopted laws or policies requiring coverage of or supply of 6 or more months of birth control dispensed at one time in private insurance coverage, Medicaid coverage, or both (CA, CO, CT, DC, DE, HI, IL, LA, IN, ME, MA, MD, MO, MI, MT, NV, NH, NJ, NM, NY, OH, OR, RI, SC, TX, VA, VT, WA, WV).
 - o At least 12 states and the District of Columbia have passed laws requiring coverage of some or all over-the-counter methods of birth control without requiring a prescription (CA, CT, DE, DC, IL, MD, MA, NV, NJ, NM, NY, OR, WA).
 - o Twenty-one states and the District of Columbia have passed laws and regulations that require hospital emergency rooms to provide information about or access to EC to sexual assault survivors (AR, CA, CO, CT, DC, HI, LA, MA, MN, NV, NJ, NM, NY, OH, OR, PA, SC, TX, UT, VA, WA, WI).
- Everyone should have the freedom to control their own body.
 Laws that allow the forced sterilization of disabled people violate their bodies and their rights to determine their own future.
- When disabled people are supported and empowered, they have the capacity to make their own decisions about sterilization, but for many people forced sterilization laws make that impossible.