

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, especially since the Supreme Court unjustly overturned *Roe v. Wade*. 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 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 LGBTQI+ people—[these kinds of barriers](#) can keep them from accessing the care they need.

At the same time, no one should be coerced, pressured, or forced to use birth control. This is especially true of 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 threats to their health, the health of their families, and their economic security.

THE SOLUTION

States should take action to remove barriers to birth control access and ensure people are free to make their own decisions about what works best for them. Importantly, policies should be drafted to include all types of birth control. This ensures that no specific type of birth control is treated preferentially over other types and no type of birth control is excluded due to political pressure.

- **Enshrine a broad right to reproductive freedom**, including the right to birth control and abortion, in state law.
- **Enact Right to Contraception Act legislation.** Modeled after a [federal bill](#), which recognizes that although there is a federal constitutional right to contraception, attacks on the right to contraception are increasing, a state Right to Contraception Act can separately enshrine a right to contraception in state law.
- **Codify the Affordable Care Act (ACA) contraceptive coverage requirement in state law**, requiring insurance plans regulated by the state to cover all FDA-approved birth control without out-of-pocket costs.
- **Increase access points for birth control**, like permitting pharmacists to prescribe and dispense birth control and requiring 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 not contain exceptions and should 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

- **Contraception is basic health care and helps people plan their lives and futures.** [Everyone](#) should have the freedom to use birth control and access to the birth control method that works best for them.
- **Every person should have access to all the resources they need to make meaningful decisions about birth control use.** No one should be pressured, coerced, or forced to use birth control or to use any particular type of birth control.
- **People need coverage of all birth control methods without out-of-pocket costs** so that they can use the specific birth control that is right for them without cost being an obstacle. Putting the ACA birth control benefit in state law will protect our residents and could reduce [income-based disparities](#) in unintended pregnancy rates.
- **Legislation that increases access points for birth control, like extended supply and pharmacist dispensing, can help people avoid gaps in using birth control 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.

- **Birth control is such core preventive care 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.
- **One in three Latinas (33%) and over four in 10 (42%) Black women of reproductive age report that they cannot afford to pay more than \$10 for contraception.**
- **Introducing measures to protect or expand birth control access does not solve the crisis in abortion access.** Measures that limit birth control and abortion access threaten people's bodily integrity, liberty, dignity, equality, and economic security. We need both to help shape the future that we want.

PUBLIC POPULARITY

- In the wake of the Supreme Court overturning *Roe v. Wade* and allowing states to make abortion illegal, [over half](#) of voters think access to contraception is at risk in their state (2024 polling on file with NWLC).
- Over [90% of voters](#) think that birth control should be legal and four in five Americans support passing legislation to protect birth control access.
- Eight in 10 voters support the Right to Contraception Act across racial and generational lines (2024 polling on file with NWLC).
- 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.
- Eighty-eight percent of voters think it's important that people have the right to make their own decisions about how and when to use contraception (2024 polling on file with NWLC).
- [Seven in 10 voters](#) (71%) support the ACA provision that requires insurance plans to cover birth control without a co-pay.
- [Seventy-three percent](#) of women in the United States prefer having more than one point of access to contraception.

STATES THAT HAVE PASSED THESE POLICIES

States across the country are pursuing commonsense solutions to the barriers their residents face when trying to access contraception. For example:

- At least [15 states](#), including Maine, Illinois, and New York, have passed laws requiring coverage of all FDA-approved birth control methods without out-of-pocket costs.
- At least [half of states](#), including Louisiana, Maine, and New York, have adopted laws or policies requiring coverage of or supply of six or more months of birth control dispensed at one time in private insurance coverage, Medicaid coverage, or both.
- At least [nine states](#), including Maryland, Massachusetts, Nevada, and Washington, have passed laws requiring coverage of some or all over-the-counter methods of birth control without requiring a prescription.
- At least [34 states](#) including Virginia, Maryland, and South Carolina, have passed laws that allow pharmacists to prescribe oral birth control.
- At least [21 states](#), including Louisiana and Massachusetts, and the District of Columbia, have passed laws and regulations that require hospital emergency rooms to provide information about or access to emergency contraception to sexual assault survivors.