

Health Care Access and Quality: Publicly Funded Birth Control

Kayla Rymarz, Jieanna Wesolowski, Ethan Book, Lexi Fortenberry and Nikole Manolios



INTRO & BACKGROUND

- The female engagement in the workforce and economic self-sufficiency for women (The American College of Obstetricians and Gynecologists, 2015).
- 99% of U.S women that have been sexually active report using some form of contraception, and 87.5% report use of a highly effective reversible method (The American College of Obstetricians and Gynecologists, 2015).
- Universal coverage of contraceptives is cost effective and reduces untended pregnancy and abortion rates (The American College of Obstetricians and Gynecologists, 2015).
- 49% of pregnancies are unintended (The American College of Obstetricians and Gynecologists, 2015).
- Lack of knowledge, misperceptions, and exaggerated concerns about the safety of contraceptive methods are major barriers to contraceptive use (The American College of Obstetricians and Gynecologists, 2015).
- There has been a focus on abstinence-only sexuality education for young people in the United States despite research demonstrating its ineffectiveness in increasing age of sexual debut and decreasing number of partners and other risky behavior (The American College of Obstetricians and Gynecologists, 2015).
- Women must either carry an unplanned pregnancy to term and keep the baby, decide for adoption, or choose to undergo abortion. Women and their families may struggle with this challenge for medical, ethical, social, legal, and financial reasons (The American College of Obstetricians and Gynecologists, 2015).

PICO QUESTION

How does the lack of access to sexual healthcare influence young adult females?

SIGNIFICANCE OF

- There is a substantial shortage in family care planning due to limited access of services, this issue needs to be resolved to ensure that young women are receiving reproductive healthcare services when needed (Millogo et al., 2019).
- Contraceptives must be more readily accessible and publicly funded for young women (Robins, 2017).
- Increasing access to women’s health care is highly effective in reducing pregnancies in young females (Robins, 2017).
- Access to contraceptives influences young females to become more aware of their sex life
- As young women become more aware of their sex lives, they start to feel more in control of their everyday lives
- It is a women's basic right to have access to reproductive health care services and all women should be able to seize their independence by taking advantage of these services so that they are able to choose their path to life’s opportunities

DESIGN & IMPLEMENTATION

“Planned Parenthood health centers provide affordable access to comprehensible sexual and reproductive health care services as sexual education from highly skilled and trained clinicians and counselors” (Silver & Kapadia, 2017, p. 1040).

- "Implementations to restrict Planned Parenthood is done in an effort to restrict access to abortion services, but the Hyde Amendment has prohibited use of federal dollars for abortion services unless a woman's life is in critical danger” (Silver & Kapadia, 2017, p.1040).
- In a study done in a 2013 state policy, the effects of eliminating Planned Parenthood health centers was investigated. There were significant reductions in claims for longer-acting reversible contraceptives, delays in scheduling appointments, and increases in the use of less-effective contraceptives. It was also found that there was a 27% increase in childbirth events during this time period (Silver & Kapadia, 2017).

“Young women could benefit from clinical interventions and health policies to increase recommended care and reduce disparities” (Horwitz et al., 2018, p. 5336).

- Young adult women in the United States are utilizing more sexual and reproductive health preventative services, but overall rates of recommended sexually transmitted health infection care and contraception use remain low. Racial disparities in this same data were shown.
- Young adult women have been shown to have lower levels of health care utilization and worse sexual and reproductive health outcomes than any other age groups. (Horwitz et al., 2018).

The Health Access Initiative (HAI), a cultural humility-based manualized training and technical assistance program is implemented to improve the general and sexual health care services for young women, in particular, those in sexual and gender minorities (Jadwin-Cakmak et al., 2020).

- “The HAI is a highly feasible and acceptable intervention for providers and staff at a variety of health care sites serving adolescents and emerging adults” (Jadwin-Cakmak et al., 2020, p. 115).
- An intervention like the one discussed here can be relevant for different variables such as age, race, gender, and other important relevant factors.

OUTCOMES

Solutions to Accessing Birth Control

ACOG - The American College of Obstetricians and Gynecologists

- Covers all Food and Drug Administration-approved contraceptives without cost sharing
- Easily accessible alternative contraceptive coverage
- Ability of low-income women to obtain improved access to contraceptives
- Age-appropriate, medically accurate, comprehensive sexuality education

The Power to Decide

- Believe that all people deserve the opportunity to decide if, when, & under what circumstances to get pregnant & have a child. Which means knowing all there is to know about birth control
- The Health Center Finder
- Location tool that provides nearest location of a Pre-Term Delivery clinic
- Access to other birth control data and limitations

Office of Women’s Health

- Have provided birth control & other family planning services to low-income women
- Help avert an estimated 1 million unintended pregnancies each year
- Under the Affordable Care Act, insurance plans in the Health Insurance Marketplace and many other plans must cover **FDA-approved birth control** prescribed by a woman’s doctor without cost-sharing
- Providing quality family planning services by recommendations from CDC and US Office of Population Affairs (Centers for Disease Control and Prevention, 2014).

QUICK FACTS

States With the Best and Worst Birth Control Access Across America

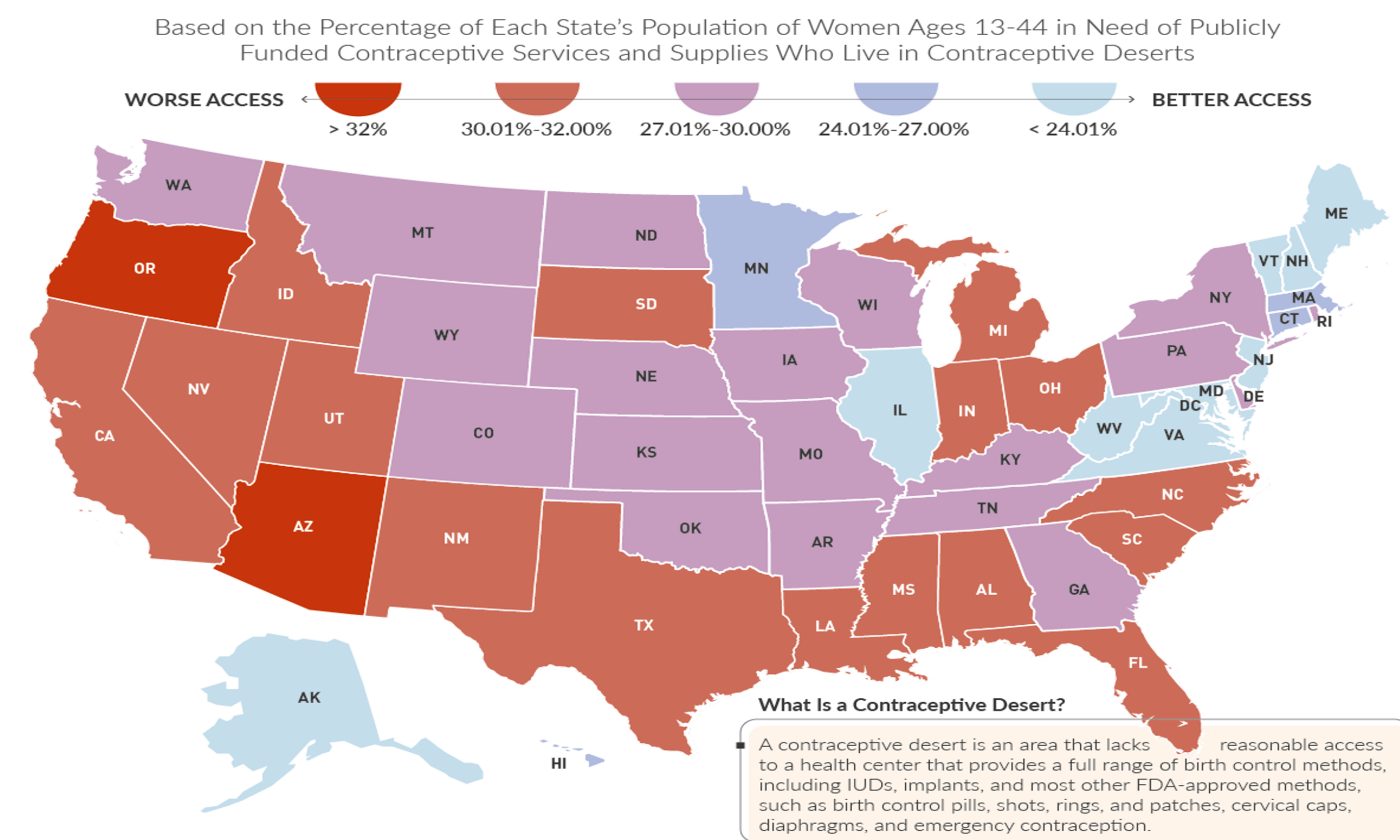


Figure 1: Birth Control Access Across the Country

1 People experience a wide range of sexual and reproductive health needs throughout their lifetime

CONTRACEPTION	ABORTION	CHILDBIRTH	INFERTILITY
99% of women who have ever had sex have used at least 1 contraceptive method	1 in 4 women will have an abortion	86% of women give birth at least once	1 in 10 people are affected by infertility or impaired fertility
REPRODUCTIVE CANCERS	PARTNER VIOLENCE	STIs	
More than 240,000 new cases of reproductive cancers occur per year	1 in 3 people experience sexual or intimate partner violence	Half of sexually active people will contract an STI by age 25	

Notes: All data for U.S. residents; lifetime data unless otherwise noted. See source files for data years.
Sources: Guttmacher Institute, Pew Research Center, University of North Carolina and Centers for Disease Control and Prevention.

Figure 2: Quick Facts on Sexual and Reproductive Health

REFERENCES

- Birth Control Options. (2021). <https://www.acog.org/search#q=birth%20control%20options&sort=relevance>
- Centers for Disease Control and Prevention. (2014, April 25). *Providing Quality Family Planning Services: Recommendations of CDC and the U.S. Office of Population Affairs*. https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6304a1.htm?s_cid=rr6304a1_w
- Jadwin-Cakmak, Laura, José A. Bauermeister, Jacob M. Cutler, Jimena Loveluck, Triana Kazaleh Sirdenis, Kathryn B. Fessler, Elliot E. Popoff, et al. 2020. “The Health Access Initiative: A Training and Technical Assistance Program to Improve Health Care for Sexual and Gender Minority Youth.” *The Journal of Adolescent Health: Official Publication of the Society for Adolescent Medicine* 67 (1): 115–22.
- Millogo T, Kouanda S, Tran NT, Kaboré B, Keita N, Ouedraogo L, Tall F, Kiarie J, Thatte N, Festin M, Cuzin-Kihl A. Task sharing for family planning services, Burkina Faso. *Bull World Health Organ.* 2019 Nov 1;97(11):783-788. doi: 10.2471/BLT.19.230276
- Murray Horwitz, Mara E., Lydia E. Pace, and Dennis Ross-Degnan. 2018. “Trends and Disparities in Sexual and Reproductive Health Behaviors and Service Use Among Young Adult Women (Aged 18–25 Years) in the United States, 2002–2015.” *American Journal of Public Health* 108 (S4): S336–43.
- Power to Decide, the campaign to prevent unplanned pregnancy | Power to Decide. (2021). <https://powertodecide.org/>
- Robbins, C. L., & Ott, M. A. (2017). Contraception options and provision to adolescents. *Minerva pediatrica*, 69(5), 403–414. <https://doi.org/10.23736/S0026-4946.17.05026->
- Silver, Diana & Kapadia, Farzana (2017). Planned Parenthood is Health Care, and Health Care Must Defend It: A Call to Action. *AJPH Perspectives*. 107(7), p. 1040-1041.
- The American College of Obstetricians and Gynecologists. (2015, January 15). *Access to contraception*. <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2015/01/access-to-contraception>