

Beyond the Morning After: The Truth about **Emergency Contraception**

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Emergency contraception (EC), also known as the morning after pill, prevents pregnancy for up to 120 hours after unprotected sex, sexual violence or contraceptive failure such as a missed birth control pill or broken condom. EC is a safe and effective way to prevent pregnancy and should be available to all women. Yet misinformation and arbitrary decisions unsupported by science continue to inhibit access.

In December 2011, after extensive study, the Food and Drug Administration (FDA) determined that certain types of emergency contraceptive pills are safe for women of all ages without a prescription. However, the Secretary of Health and Human Services (HHS) overruled the FDA and kept in place restrictions that require girls under 17 to first obtain a prescription.¹ **The Secretary should revisit the science, rely on the scientific experts at the FDA, and take the necessary steps to reverse this decision.**

What Is EC?

EC can significantly reduce the risk of pregnancy after unprotected sex or contraceptive failure.² Effectiveness depends on the type of EC and how quickly it is taken or used after unprotected sex. Generally, EC is not as effective as other hormonal or long-acting forms of birth control, which is why it is important that it only be used when other methods have failed or are unavailable.

There are two types of EC: **emergency contraceptive pills** and **copper intrauterine devices (IUDs)**.

- ▶ **Emergency contraceptive pills** use higher doses of the same hormones found in birth control pills taken prior to sexual intercourse. They prevent pregnancy by either preventing the egg from being released by the ovary or preventing sperm from fertilizing a released egg.³ There are two types of emergency contraceptive pills available on the market: progestin-only pills (Plan B One-Step, Next Choice and Levonorgestrel Tablets) and pills with the drug ulipristal acetate (ella). EC pills are most effective when taken as soon as possible after unprotected sex, but can be effective for up to five days. EC pills can prevent about 60-95 percent of pregnancies that would otherwise have occurred; ella is more effective than progestin-only pills.⁴

- ▶ **A copper IUD** is a small, T-shaped device that includes a copper wire and can be inserted in the uterus by a doctor within five days of unprotected sex. It prevents sperm from fertilizing a released egg and could potentially prevent an already fertilized egg from attaching to the uterus.⁵ The copper-T IUD is the most effective EC method.⁶ It can be removed by a doctor after the woman's next period, or used as a regular method of birth control for up to 10 years.⁷

Barriers to Access for EC

- ▶ **Lack of Information or Inaccurate Information** – Women may not be aware that EC is available, may have erroneous information about its success rates or may have been given inaccurate information that emergency contraceptive pills can diminish future fertility.
- ▶ **Myths about EC and Abortion** – Like other forms of contraception, EC *prevents* a woman from becoming pregnant. EC works by preventing the fertilization of a released egg or by preventing ovulation; it **does not work if a woman is already pregnant**.
- ▶ **Lack of Availability and Access** – A pharmacy may not have EC in stock, may not be open or may not have pharmacists available at times when women need access to EC.
- ▶ **Discriminatory Refusal Provisions** – Some pharmacists refuse to dispense EC based on their moral or religious beliefs. The law explicitly permits these refusals in six states⁸ but the problem is much more widespread.⁹ Whether sanctioned by state law or not, refusals mean pharmacists impose their religious beliefs to limit women's health care options.
- ▶ **Financial Barriers** – EC costs between \$30 and \$70 for the pill form at most pharmacies and up to \$500 for insertion of an IUD.¹⁰ Women without insurance and women whose plans do not cover emergency contraception may not be able to afford these costs. Provisions of the Affordable Care Act require coverage of contraception and may make it less expensive to get EC through insurance.
- ▶ **Barriers for Victims of Sexual Violence** – While some states have laws and protocols regarding access to emergency contraception after sexual assault,¹¹ many hospitals do not inform sexual assault victims about the availability of EC options unless the victim requests it.

How Do I Get EC?

- ▶ Progestin-only versions of EC are available without prescription for women 17 and over at pharmacies and family planning centers, like Planned Parenthood. As noted above, young women under 17 must obtain a prescription to get EC.¹²
- ▶ Family planning centers may offer discounts or a sliding scale for costs, depending on income level. Coverage may be available through insurance, particularly for methods that require a prescription.
- ▶ For ella or an IUD, a woman must visit a clinic or other health care professional.

EC is a safe, effective and essential birth control method. Because of its time-sensitive nature, it is important that access be as timely and as uncomplicated as possible. HHS should rely on the evidence and make EC available over-the-counter for all women.

1 Harris, G. (Dec. 7, 2011). Plan to Widen Availability of Morning-After Pill is Rejected. *The New York Times*.

2 Gemzell-Danielsson, K. and Berger, C. (2012) Emergency Contraception – Mechanisms of Action. , *Contraception*.

3 *Id.*

4 *Id.*

5 *Id.*

6 *Id.*

7 U.S. Department of Health and Human Services, Department on Women's Health (n.d.). *Emergency Contraception Fact Sheet*, Retrieved December 6, 2012. Retrieved from <http://www.womenshealth.gov/publications/our-publications/fact-sheet/emergency-contraception.cfm>.

8 Guttmacher Institute (Nov. 2012). *Emergency Contraception, State Policies in Brief*. Retrieved from http://www.guttmacher.org/statecenter/spibs/spib_EC.pdf.

9 Borchelt, G. (Oct. 15, 2012). Pharmacists Can't be Allowed to Deny Women Emergency Contraception. *US News & World Report*. Retrieved from <http://www.usnews.com/opinion/articles/2012/10/15/pharmacists-cant-be-allowed-to-deny-women-emergency-contraception>.

10 The Office of Population Research, Princeton University and the Association of Reproductive Health Professionals (Nov. 19, 2012). *Emergency Contraception Website*. Retrieved from <http://ec.princeton.edu/questions/eccost.html>.

11 17 states and the District of Columbia (AK, CA, CO, CT, IL, MA, MN, NJ, NM, NY, OR, PA, TX, UT, WA, WI) enacted laws that require hospitals and emergency rooms to provide emergency contraception-related services to sexual assault victims. Guttmacher Institute. *Emergency Contraception, State Policies in Brief*.

12 U.S. Department of Health and Human Services, Department on Women's Health. *Emergency Contraception Fact Sheet*.

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, access to quality health care and policies that help women and men meet the dual demands of work and family. More information is available at www.NationalPartnership.org.

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