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## Dear Working Group member,

In this update, we are happy to share an update from Advocates for Youth and the #FreeThePill Youth Council which recently gathered in Washington, DC for a weekend organizing retreat. The youth activists engaged in an interactive discussion looking at the Free the Pill campaign through a reproductive health, rights, and justice framework, and learned about different ways they can organize in their own communities for improved contraceptive access.

Last year we hosted a webinar, "Native American Community Board: Indigenous women's health, reproductive justice, and freeing the pill," with Charon Asetoyer and Pamela Kingfisher from the [Native American Community Board](#) (NACB), a working group member. We are delighted to now share with you the [NACB's report](#), "Free The Pill: Native American women and the need for 'Over The Counter' access to birth control pills!" You can also view a recording of the webinar, [here](#).

In January [Rhia Ventures](#) and the [National Institute for Reproductive Health](#) released reports outlining proactive ways businesses and state legislatures, respectively, can advance contraceptive access and support reproductive well-being. Rhia Ventures makes the case for businesses to offer comprehensive abortion and contraceptive coverage, while NIRH summarizes proactive policies states are advancing to help people access the reproductive health care they deserve.

Finally, we share the response from the [National Women's Health Network](#), a working group member, to an op-ed from the Cato Institute calling for Congress to revoke the FDA's authority to remove the prescription requirement for hormonal contraception. We also highlight positive news

out of Arizona where a group of bipartisan legislators have introduced legislation to allow pharmacists to provide contraception through a standing order in the state.

With gratitude,



Britt Wahlin  
Vice President for Development and Public Affairs  
Ibis Reproductive Health

P.S. Be sure to read our call to action below to spread the word to adolescents about The Pill Study!

### Advocates for Youth #FreeThePill Youth Council update

This month, nine members of Advocates for Youth's [#FreeThePill Youth Council](#) convened for a weekend organizing retreat in Washington, DC. The cohort of youth activists participated in organizing, policy, media, and social media trainings, working together to identify strategies and tactics they will use to organize for contraceptive access in their communities. Each activist left the retreat with an individual work plan and a sense of their own role within the #FreeThePill campaign. Throughout the weekend, the youth activists got to know each other, and shared why an over-the-counter birth control pill would be important to them, as well as the communities that they identify with and serve.

We are excited to begin seeing the youth activists in the field, and look forward to hearing about their engagements with their communities. To follow their work and even participate in some of their campaigns, sign up for updates [here](#).

### Native American Community Board report on equal access to future OTC pill

Written by Pamela Kingfisher, Native American Community Board and Working Group Steering Committee member

["Free The Pill: Native American women and the need for 'Over The Counter' access to birth control pills"](#) summarizes perspectives from Native women and girls on moving OCs OTC from talking circles convened by the [Native American Community Board](#). The report also talks about the importance of ensuring that a future OTC OC be available for Native women who access care at Indian Health Service (IHS) facilities as soon as it is available for everyone else in the country.

We convened women's circles to create our Free the Pill report, because it is important for Native women to be involved in the Free the Pill campaign early on. We must advocate for our communities to ensure that we are included in the provision of the birth control pill when it is released as an over-the-counter product. We want it accessible as an OTC when the general public has it available, so we do not have to wait five years for access, as we did with Plan B.

For Native American women this would mean less government control in our lives. Our primary health care provider for those living on reservations is the IHS, a division of the Department of Health and Human Services. Over the years there have been violations of human rights committed by IHS through various methods. There have been drug trials, Depo Provera was used on Native women before it was approved as a contraceptive, there were forced sterilizations and refusals to remove Norplant upon request.

Native women deserve the same level of reproductive health care as all other women in this country, and we continue to advocate for access, and reproductive rights policies at the federal level.

### **New Rhia Ventures report on the business case for reproductive health**

Rhia Ventures recently released a new report, "[Hidden Value: The Business Case for Reproductive Health](#)," which makes the case for why businesses should prioritize access to reproductive health care coverage, with a focus on abortion and contraception. They provide five major reasons why reproductive health care should be a priority for American businesses including widening the pipeline and attracting talent; supporting and retaining existing talent; providing high-impact benefits with low-cost investments; delivering on diversity and inclusion; and preparing for greater scrutiny, for example, in political spending. The report was informed by research and interviews with experts in human resources, reproductive health, and insurance fields. It includes a call to action for businesses to "ensure benefits support the spectrum of employees' reproductive health needs" and "understand and engage on reproductive health policy." The report also includes a comprehensive reproductive health care benefits checklist for companies that includes "ensure all contraceptive options are covered without cost-sharing" and "cover over-the-counter emergency contraception without requiring a prescription."

### **New NIRH report on proactive reproductive health and rights legislation in the states**

The [National Institute for Reproductive Health](#) (NIRH), a working group member, recently released their 2019 end-of-year report, "[Gaining Ground: Proactive Reproductive Health and Rights Legislation in the States](#)." The report analyzes advances in reproductive health, rights, and justice at the state level throughout the year. It tracks proactive legislation in 2019 across six categories: expanding access to abortion care, improving access to contraception, increasing access to pregnancy care, promoting comprehensive sexuality education for all young people, supporting parents and families, and prohibiting interference with reproductive health care. In 2019, a total of 140 bills were introduced in 34 states to improve access to contraception and 13 bills were fully enacted. The bills included efforts to expand access to contraceptive care; ensure contraceptive coverage, including over-the-counter access to contraception; ease access to contraception at the pharmacy; and protect access to family planning clinics. The report also provides policy ideas for 2020 including, "expand access to the full range of contraceptive options by mandating that insurance companies must cover all forms of contraception without additional barriers and by allowing patients to obtain a year's worth of birth control with one prescription."

### **Media highlights**

Sarah Christopherson, working group member and policy advocacy director at the [National Women's Health Network](#), wrote an op-ed for [ReWire.News](#) in response to an [op-ed from the Cato Institute](#) which proposes that "Congress revoke the Food and Drug Administration's power to require women to obtain prescriptions to purchase hormonal contraceptives." In her response, Sarah argues against this change in responsibility, noting that the FDA's job is to protect consumers by ensuring that drugs sold in the US are safe and effective.

*"Once Congress starts meddling in a drug approval process that should be based on medical science, there's no limit to what comes next in attacks on reproductive health. If Congress can prevent the FDA from blocking bad drugs, it can just easily prevent the FDA from approving good ones."*

Earlier this month, an op-ed in the [Arizona Capitol Times](#) argued for moving oral contraceptives over the counter and highlighted a bill introduced by bipartisan legislators in Arizona that would allow people to obtain birth control directly from pharmacists without seeing a doctor first.

*"Any over-the-counter medication needs approval from the US Food and Drug Administration, and that takes time. Full over-the-counter access is probably years away. However, a bipartisan group of Arizona legislators hopes to fix this problem - to remove the barrier - with an intermediate step while we wait for the FDA to catch up to the science."*

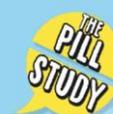
## Quick call to action

Click to Tweet:

[Birth control shouldn't be this hard to get!!](#)

[Join the groundbreaking effort to make the pill available over the counter! Learn more here: \[bit.ly/thepillstudy\]\(http://bit.ly/thepillstudy\) #FreeThePill #BirthControl](#)

Want birth control pills without a prescription?  
Join our study and get paid \$75!



**WHO:** teens 11-17  
**WHERE:** these cities near you!  
**HOW:** [bit.ly/thepillstudy](http://bit.ly/thepillstudy)

### STUDY LOCATIONS:

BIRMINGHAM, AL	ALBUQUERQUE, NM
HOMWOOD, AL	NEW YORK, NY
LONG BEACH, CA	SOUTH CHARLESTON, OH
DALTON, GA	LAFAYETTE HILL, PA
GRIFFIN, GA	PHILADELPHIA, PA
FRAMINGHAM, MA	CLARKSVILLE, TN
ROSDALE, MD	HOUSTON, TX
ANDOVER, MN	MAPLETON, UT
ELK RIVER, MN	ENUMCLAW, WA
ST. FRANCIS, MN	SEATTLE, WA
ST. LOUIS PARK, MN	SNOHOMISH, WA
BURLINGTON, NC	

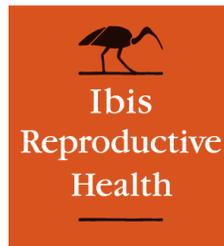
## Statement of purpose

Has your organization signed onto our [statement of purpose](#)? Does your organization send a newsletter where you could share information about our work and Free the Pill? Please help us demonstrate the wide support that exists for making OCs available OTC in the United States. Email [Jess](#) to let her know!

## About us

The Oral Contraceptives (OCs) Over-the-Counter (OTC) Working Group is a coalition of reproductive health, rights, and justice organizations, nonprofit research and advocacy groups, university-based researchers, and prominent clinicians who share a commitment to providing all women of reproductive age easier access to safe, effective, acceptable, and affordable contraceptives. The working group was established in 2004 to explore the potential of over-the-counter access to oral contraceptives to reduce disparities in reproductive health care access and outcomes, and to increase opportunities for women to access a safe, effective method of contraception, free of unnecessary control, as part of a healthy sexual and reproductive life.

The working group is coordinated by Ibis Reproductive Health.



[www.ibisreproductivehealth.org](http://www.ibisreproductivehealth.org)

## Contact us

**For questions or inquiries, please contact us at:**

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