

July 15, 2016

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Dear Working Group Member,

Thank you to those of you who joined us for our webinar on June 30 to share updates on the working group and our work to make a birth control pill available over the counter in the US. We are excited to move forward with the development of an updated working group structure to help us tackle the tasks ahead. Below you will find information on new subcommittees that we are forming, including a link to an online survey for you to indicate your interest in joining these efforts, as well as to RSVP to the September 20 annual working group meeting in Washington, DC.

In this update, we also share new resources related to pharmacy access, including an information fact sheet we created explaining the differences between pharmacy and over-the-counter access to hormonal birth control. We hope you will find this a useful tool, and also encourage distribution to your networks. In addition, we provide abstracts for several recent articles related to pharmacy access. Finally, we have updated the working group's statement of purpose--if you or your organization has not yet signed on, we encourage you to do so! Please let [Carmela](#) know if you are interested.

Feel free to contact us if you have any questions or comments about any of the information presented here. And we look forward to hearing from you in our survey!

Thanks,

A handwritten signature in black ink that reads "Kate". The letters are cursive and fluid, with a long tail on the "e".

Kate Grindlay
Project Director/Associate
Ibis Reproductive Health

Survey for greater engagement in the working group moving forward and our annual working group meeting

We would like to hear from you about your interest in taking part in our new working group subcommittees. Please complete [this survey](#) to let us know which subcommittee, if any, you are interested in learning more about and potentially joining. The survey also includes an option to RSVP for our September 20 annual working group meeting in Washington, DC. **Please fill out the survey by July 27.**

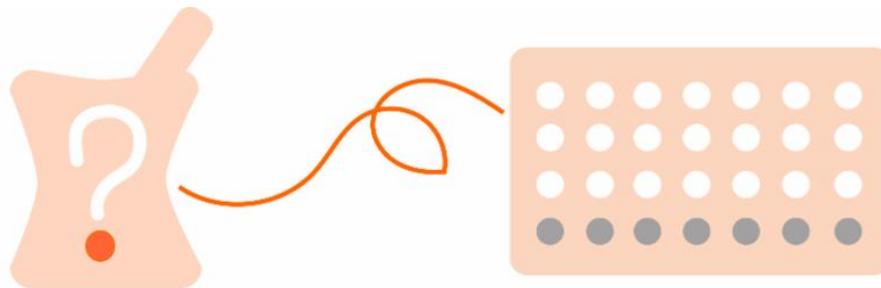
The OCs OTC Working Group has been working steadily over the past decade to build the evidence base and momentum needed to have an OC approved for OTC use. With the accelerated pace of work, we are excited to launch a new working group structure to tackle the work ahead. As part of this, we are developing four new ongoing subcommittees for working group members to take part in: Communications, Policy/Insurance, Research, and Young People.

Subcommittees will be led by a chair (or co-chair) and will assume primary responsibility for these areas of work, keeping the steering committee and broader working group informed. Within a subcommittee, as specific tasks are identified, task teams will form to tackle these projects. We recognize that some working group members may not be able to make multi-year commitments as members of a subcommittee, but would be interested in contributing their expertise to shorter-term efforts.

Please complete [this survey](#) to show your interest in subcommittee participation. The responses will also inform how we organize our upcoming annual working group meeting on September 20, 2016 in Washington, DC.

If you have any questions or would like to contact us, please feel free to email [Mary](#).

Pharmacy access vs. over-the-counter access



Rx vs. OTC: What's what?

As new pharmacy access bills are being passed, such as those in [California](#) and [Oregon](#), we have seen misunderstandings and confusion in the ways these bills are described, including a widespread perception that these permit or are the same as OTC access. To address this, we have created a new information sheet focusing on the key distinctions between pharmacy and over-the-counter access to hormonal birth control. You can find our new resource here: <http://freethepill.org/pharmacy-vs-otc/>. We hope you find this useful, and would appreciate your help in sharing it!

Abstracts from new publications highlighting pharmacy access to oral contraceptives

Rodriguez MI, Anderson L, Edelman AB. Prescription of hormonal contraception by pharmacists in Oregon: Implementation of House Bill 2879. *Obstet Gynecol.* 2016; 128(1): 168-170.

Prescription of hormonal contraception by pharmacists, without a doctor's visit or authorization, has been proposed as a strategy to improve access to contraception and reduce unintended pregnancy. Oregon is the first state to implement legislation expanding the scope of pharmacists to directly prescribe and dispense short-acting hormonal contraception (pill and patch). Several other states are considering similar legislation. Implementation of the policy is being researched to identify both barriers and facilitators to the successful dissemination of the practice and to determine the safety, efficacy, and acceptability of pharmacist-prescribed contraception.

Access it [here](#).

Yang YT, Kozhimannil KB, Snowden JM. Pharmacist-prescribed birth control in Oregon and other states. *JAMA.* 2016; 315(15): 1567-8.

In Oregon, a new law took effect on January 1, 2016, allowing women 18 years or older to obtain hormonal contraception directly from pharmacies, without having to visit a physician or other prescribing clinician (eg, nurse practitioner, physician assistant, midwife). California will follow Oregon later in 2016, having already passed similar legislation. Colorado, Washington, and New Mexico are considering similar bills as well. These new laws decrease some access barriers to contraception, thereby potentially reducing the number of unplanned pregnancies and abortions. Yet the American College of Obstetricians and Gynecologists (ACOG) and others contend that the new law does not go far enough, leaving an unnecessary barrier between women and contraceptive access. In this Viewpoint, we evaluate the new legislation, the views of supporters and opponents, and the potential implications for contraceptive access in the United States, which still has a substantially high rate of unintended pregnancies (49% vs 41% worldwide).

Access it [here](#).

Wahowiak L. Pharmacists widening access to birth control medications: Oregon leads way under new state law. *The Nation's Health.* 2016; 46(4): 1-12.

For Oregon women who would like to use birth control pills, this year marks a big change in the steps they need to take to get contraceptives. No longer do they need to make an appointment with a doctor or go through a physical exam. Now, getting birth control pills can be as easy as a quick trip to their local pharmacy.

Access it [here](#).

Kaiser Family Foundation's OCs fact sheet

[This fact sheet](#) from the Kaiser Family Foundation outlines OC history, use, insurance coverage, and access in the US. It also includes a brief summary of research supporting OTC access. Figure 3, citing research from the working group, depicts a map of some of the state-based efforts that increase access to OCs via pharmacy provisions and availability of a 12-month supply per prescription.

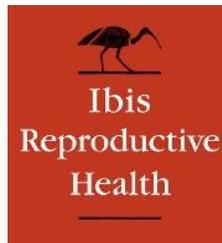
Updated OCs OTC Working Group statement of purpose

We are happy to share that we have updated the working group's statement of purpose so as to incorporate the latest evidence related to making a birth control pill available over the counter in the United States. You can find the updated statement of purpose [here](#). If you or your organization has not yet signed on, we encourage you to do so! Please let [Carmela](#) know if you are interested.

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

Contact us

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