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Dear Working Group member,

We are thrilled to announce the award recipients from our recent request for proposals. We received 42 submissions and were ultimately able to fund six awards. The review committee, with steering committee input, carefully reviewed each proposal, taking into consideration the contributions of each project alongside an overall balance of project and organization types, as well as the funding levels of each proposal. Choosing a small number of funding recipients from this large group of outstanding submissions was challenging, and we regret that we could not fund more of this important work.

Because of the high quality of so many of the proposals we received, we increased our total funding to \$332,000 in grants. See below for the full list of awardees. Even with this increase, however, we still wish we had been able to support more of the innovative projects proposed by so many of you in support of the movement for an OTC OC that is affordable, accessible, and available to people of all ages. We hope to explore ways to move more of these ideas forward and welcome your ideas and input.

We also want to remind you about our annual meeting on **September 27, 2017** in Washington, DC. If you are interested in attending, you will need to **complete [this registration request](#) by Wednesday, August 16.**

Also in this newsletter, we are happy to share that Hawaii is the latest state to allow pharmacists to prescribe self-administered hormonal contraception. Next, we include an opportunity to contribute to the American Society for Emergency Contraception survey on experiences purchasing EC over the counter. Finally, we include a list of media highlights and spotlight our newest SOP sign-ons.

Please do not hesitate to reach out to us with any questions or comments.

Thank you,



Kate Grindlay
Project Director/Associate
Ibis Reproductive Health

OCs OTC Working Group RFP grantees

Below is the full list of awardees from our request for proposals. We are excited to see these projects grow and look forward to the impact they will have on the community, state, and national level.

- Native American Community Board (Project lead: Charon Asetoyer) - Indigenous women's health and reproductive justice (RJ) Program - Dream Big Grant
- Johns Hopkins University (Project lead: Anne Burke) - Prevalence of medical contraindications to progestin-only and combined oral contraceptives in a large insurance claims database - Large Grant
- National Women's Law Center (Project lead: Mara Gandal-Powers) - Creating a legal and policy framework to ensure coverage and accessibility of an OTC birth control pill - Medium Grant
- Gynuity Health Projects (Project lead: Tara Shochet) - Over-the counter oral contraceptives: Assessing the impact on low-income women living in rural Iowa - Medium Grant
- Emory University and Indiana University (Project leads: Missy Kottke and Tracey Wilkinson) - Dual protection with OTC contraception: A human centered design approach - Medium Grant
- NARAL Pro-Choice Maryland Fund (Project lead: Diana Phillip) - OTC EC access project: Implementation of MCEA 2018 - Medium Grant

Annual meeting registration request

The 2017 OCs OTC Working Group meeting will be held on Wednesday, September 27 in Washington, DC from 9:00am-5:00pm. We hope to accommodate as many people as possible, but due to limited capacity, we cannot guarantee a space for everyone or for more than two individuals per organization. If you are interested in attending, **please complete [this registration request](#) by Wednesday, August 16**. We will let you know if we can accommodate you by Monday, August 21. If space remains after August 21, we will continue to accept registration requests on a first come, first served basis.

Hawaii pharmacist-prescriber bill passes

Earlier this month, Hawaii Governor David Ige signed the state's new pharmacist-prescriber bill into law. [The law](#) references research we often cite that supports the case for moving OCs OTC, including the statement that "women can accurately identify conditions that make it appropriate to use certain contraceptives by using a simple checklist." Pharmacists must undergo a training in order to prescribe "self-administered hormonal contraceptive supplies"

and can only prescribe to people aged 18 and over. This law also requires insurance to reimburse pharmacists for their time prescribing contraceptive supplies.

Rewire: [These states are moving to protect birth control access as congress debates ACA repeal](#)

Washington Times: [Bill would let Hawaii pharmacists prescribe birth control](#)

US News: [Hawaii birth control bill would simplify access for women](#)

ASEC survey

The American Society for Emergency Contraception (ASEC) is updating their EC access and price survey. They are requesting that colleagues in the US purchase EC in-person and document their experience through a survey. They are collecting data with [this Google Form](#). Please complete a new survey for each visit. There are also "bonus questions" to fill out if you are able to ask a couple questions to the pharmacist or checkout clerk.

For your reference, the [EC Pharmacy Information Guide](#) summarizes the current pharmacy and retail regulations on how EC can be sold. They are collecting data through August 18. Please refer any questions to [Kelly](#) or [Jamie](#) at ASEC.

Media highlights

We wanted to share this piece in Mother Jones, [Trump be damned: States are fighting to make birth control over-the-counter \(finally\)](#), which highlights the working group's efforts to make birth control available over the counter and state-level work on expanding access to contraception:

Since 2004, a coalition of reproductive rights groups has quietly been working to get the Food and Drug Administration to make it possible for a woman to pick up her birth control pills just like she would her Advil, without having seen a doctor for a prescription. The [working group](#)--which is headed by research firm Ibis Reproductive Health and includes the ACLU, as well as organizations representing women of color, and physicians and nurses associations--has spent the past decade publishing research to show that over-the-counter pills are both safe and necessary and, at times, has partnered with women's health groups at the state level to make legislative gains. Their ultimate goal has always remained the same: to get at least one contraceptive pill approved by the FDA for over-the-counter sale, and to get insurance companies to cover its cost.

Glamour ([One year after Whole Women's Health v. Hellerstedt, abortion rights are still in danger](#)) also highlighted this progress on access to contraception at the state level (and gave a shout-out to [Free the Pill](#)), while CNBC ([How Trump can lower prescription drug prices fast](#)) noted that OTC OCs are available around the world and should be in the United States as well.

Statement of purpose sign-ons

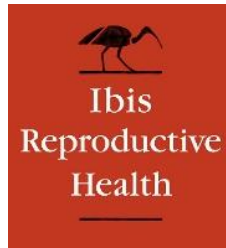
We are pleased to highlight the organizations that have signed onto our [statement of purpose](#) within the last month. Please help us demonstrate the wide support that exists for making OCs available OTC in the United States. [Email Mary](#) if you would like your organization to sign onto the statement of purpose.

[Association of Physician Assistants in Obstetrics & Gynecology](#)
[National Family Planning and Reproductive Health Association](#)

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

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