



Coalition to Expand Contraceptive Access

## Understanding the Landscape: Post-Roe Contraception Through a Sexual and Reproductive Health Equity Lens

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# What is the Coalition to Expand Contraceptive Access (CECA)?

CECA is a convener of committed partners working to ensure access to contraception as part of a broader vision to achieve sexual and reproductive health equity (SRHE) for the U.S.



# Why does contraceptive access matter?

- Over the course of a lifetime, most people make decisions related to preventing and/or achieving pregnancy, and most seek services in order to achieve their reproductive goals
- While there were already numerous threats to contraceptive access, they became even more apparent, and new threats have emerged since the *Dobbs* decision
- Attention to equity in this context is especially crucial given historical and ongoing reproductive injustices and coercion in the U.S.

# What is Sexual and Reproductive Health Equity (SRHE)?

“I think [SRH care] empowers individuals to make informed decisions about their bodies, relationships, and futures, enhancing their sense of autonomy and control over their lives.”

- Lived Experience Panel Participant

SRHE means that systems ensure that all people, across the range of age, gender, race, and other intersectional identities, have what they need to attain their highest level of sexual and reproductive health. **This includes self-determining and achieving their reproductive goals.**

**Government policy, healthcare systems, and other structures must value and support everyone fairly and justly.**

# What is our vision for contraceptive access?

*Reproductive healthcare IS healthcare – everything is connected”*

*- Lived Experience Panel Participant*

*We envision a world where all people who want contraception can **access the contraception that works best for them** – when, how, and where they want it, free of barriers and bias.*

*Contraception is part of **routine healthcare** and it should be accessible to all people for any reason, not only to prevent pregnancy.*

*Finally, any approach to contraceptive access must be **holistic**; contraception cannot be presented as a remedy to abortion restrictions or an alternative to comprehensive sexual and reproductive healthcare access, including abortion care.*

# What have we learned about priorities to protect and expand contraceptive access?

## Process



## Focus Areas



*\*Individuals most impacted by inequitable contraceptive access may include, for example, minors, people traveling for care, those living on low incomes, BIPOC communities, people with disabilities, and those living in restrictive regions.*

## Focus Area 1: Secure and Preserve the Right to Contraception

**Secure and preserve the right to contraception, as part of a broader right to reproductive freedom, at both the federal and state level**

- **Develop a coordinated and evidence-informed legal framework**, including both legislation and litigation
  - Integrate evidence on the benefits of contraception and the impact of restrictions on contraceptive access and privacy rights, particularly for young people
  - Establish and enact standards for evidence-based, comprehensive information about contraception in schools
- **Understand and document the impact of existing statutes and regulations**
  - Improve enforcement of existing law, including:
    - Affordable Care Act (ACA) contraceptive coverage mandate
    - Medicaid free choice of provider requirement

## Focus Area 2: Combat Misinformation and Disinformation

**Address misinformation and disinformation related to contraception among providers, users, and the broader public**

- **Provide clear and accurate information about contraception to various audiences**
  - Clarify why contraceptive access is important and the mechanisms of action, legality, availability, and parameters of safe disclosure of contraception
  - Leverage opportunities to share information through trusted scientific agencies and organizations
- **Support research on emerging priorities and use findings**
  - Better understand the sources of information on contraception and their impact
  - Develop counterstrategies to combat misinformation and disinformation

*CECA Resource: [Why Contraceptive Access Matters](#)*



## Focus Area 3: Improve and Enhance Infrastructure

### Build the capacity of the workforce and guard against erosions to quality contraceptive care

- **Develop, evaluate, and improve guidance and resources**
  - Identify and expand **grant opportunities** for the broad range of healthcare service sites and providers that offer SRH services
  - Update, disseminate, and implement evidence-based and patient-centered **clinical guidelines**, driven by diverse stakeholder input
  - Improve the **measurement ecosystem** to better capture whether people are having their SRH needs and preferences met and shape quality improvement strategies
- **Address drivers of burnout for contraceptive care workers**
- **Expand scope and capacity for advanced practice nurses, nurses, and allied health professionals**

## Focus Area 4: Promote Research and Innovation

### Advance novel approaches and research and innovation in all aspects of contraceptive care

#### Conduct, support, and lift up research efforts to address priority topics

1. How has *Dobbs* affected preferences for, provision, and use of contraception?
2. What is the extent, nature, and impact of misinformation and disinformation on the public, providers, and policymaking?
3. What is the current state of the contraceptive care workforce (e.g., distribution, gaps, needs) and how has this been affected by *Dobbs*?
4. What impact will new delivery approaches (e.g., over-the-counter oral contraception, pharmacy access) have on contraceptive access?
5. What new approaches are needed to meet people's contraceptive needs?

## Focus Area 5: Advance Sexual and Reproductive Health Equity (SRHE)

### Prevent deepening inequities in contraceptive care and provide specific protections to those disproportionately impacted by *Dobbs*?

- **Support and normalize equity-informed research**
  - Authentically and openly honor, embrace, and affirm community stakeholders as experts of their own lives, experiences, and communities
  - Foster ongoing, collaborative relationships
  - Compensate for time and divide resources equitably
  - Ensure sufficient funding for stakeholder engagement
- **Review and update policies and programs**
  - Work toward a Federal Benefits Floor (FBF) for Contraceptive Care – a uniform minimum standard available to all regardless of location, source of care, or coverage status
  - Update the federal sterilization consent form and policy

# How should we move forward?

*"I think [SRH care] empowers individuals to make informed decisions about their bodies, relationships, and futures, enhancing their sense of autonomy and control over their lives."*

*- Lived Experience Panel Participant*

- **Ground the work** in a holistic, sexual and reproductive health equity framework and uphold principles of reproductive autonomy and justice
- **Reject language or actions** that may over-promote contraception, or present contraception as a "solution" for limited abortion access
- **Take timely and strategic actions** to center those most impacted by the consequences of a post-*Dobbs* era
- **Create spaces for information sharing** about the work to increase awareness, support partner connections, and identify and address gaps

*Feel free to invite CECA for further discussion with your colleagues, coalitions, or others ([ceca@contraceptiveaccess.org](mailto:ceca@contraceptiveaccess.org))*

# Where can I find more information?

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



## Federal Process Recommendations

Support efforts to leverage federal administrative and scientific processes to help people—and the systems that serve them—mitigate barriers and achieve universal, equitable access to quality contraception.

[Learn  
More](#)



## Policy-Ready Research Roadmap

Help reshape the contraceptive access research and policy landscapes—by reconsidering the frameworks that guide us, the research questions we ask, and how we design, conduct, measure, interpret, and share research and related findings.

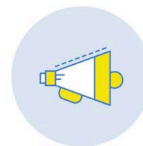
[Learn  
More](#)



## Contraceptive Care Workforce

Help advance our collective vision of a diverse and robust workforce that is empowered to provide person-centered care to all and supported by equitable policies, programs, and systems committed to both worker and patient wellbeing.

[Learn  
More](#)



## Post-Roe Contraceptive Access

Use our findings to anchor and inform discussions on how access to contraception may shift in a post-Roe environment, and which strategies may help preserve or advance contraceptive equity moving forward.

[Learn  
More](#)



Supplement 5 2022  
Reshaping Contraceptive Access Efforts By Centering  
Equity, Justice, and Autonomy

<https://ajph.aphapublications.org/toc/ajph/112/S5>



Coalition to Expand Contraceptive Access

**Thank you!**



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