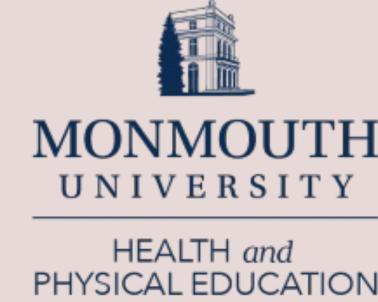


# Observing the Implementation of Pharmacist-prescribed Hormonal TONITE CONTRACEPTION in Rural and Underserved Populations in the United States



https://powertodecide.org/

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27 states out of the 50

#### Significance

These laws allow pharmacists to prescribe birth control to patients without a prescription from a primary care provider. The goal is to make hormonal contraception more accessible.

- Avoid missing work
- •Reducing wait time to see a provider (often months)
- •Less costs for the uninsured

Common birth control methods such as: pills, rings, and patches.

The purpose of this study is to observe whether there are positive changes, such as an increase in accessibility, for women in lowincome or rural areas in the U.S. according to the published literature.



## Methods

Search keywords for reviewing literature: "Pharmacist" AND "Hormonal Contraception"

Observe trends in rural areas and underserved populations such as low-income communities.

## Findings

- •Even though laws were passed in many states to allow pharmacists to provide birth control, not all states follow through implementing the legislation.
- •Rural areas have very little to no access to pharmacies which reduces access for women in these areas.
- •Pharmacists in rural areas are just as likely to prescribe birth control as their urban counterparts.
- •We found literature based on seven states: Hawai'i, North Carolina, Oregon, Utah, California, Indiana, and New Mexico.

### Background on these Laws

Legislation was initially passed in California in 2013.

States have different requirements, but most require:

- •Age if you're < or > 18 years of age
- Pharmacist training
- •Health screening questionnaire for patients

#### Opportunities for Growth

- •Increasing access to pharmacies for women in rural areas.
- •Increasing opportunities for research regarding the effects of these laws.
- •Improve marketing/knowledge of these laws.



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