

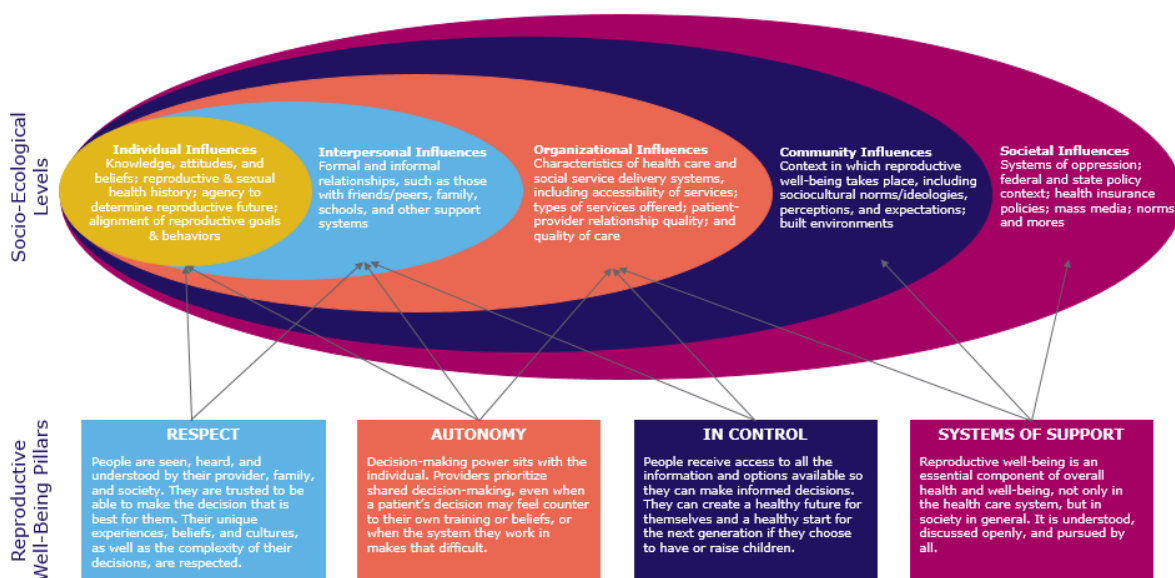
Reproductive Well-Being Blueprint for Action

Overview

We envision a culture in which there is a system of support that makes it possible for every person—no matter who they are or where they live—to achieve reproductive well-being. A culture of reproductive well-being is one in which all people have equitable access to the information, services, systems, and support they need to have control over their bodies, and to make their own decisions related to sexuality and reproduction throughout their lives. To enable this to happen, we are building a nationwide movement that transforms the culture to one that works collectively towards building, aligning, and enhancing systems that enable a culture of reproductive well-being.

We recognize that reproductive well-being is inextricably connected to a person's overall well-being, and that this work, in isolation, will not address the broader inequities and social determinants of health that stand between many people and their overall well-being. In fact, we acknowledge the interconnectedness and complexity of various factors that might affect a person achieving reproductive well-being. We acknowledge that there are intersectional measures of influence that impact a person's ability to achieve reproductive well-being including but not limited to, systems of oppression and inequality (sexism, racism, classism, ableism), sociocultural norms and ideologies, and interaction with built environment (housing, safety, and transportation) among others.

Reproductive Well-Being as a Socio-Ecological Approach



We also know that there is tremendous work to be done to make reproductive well-being a reality for all people. Working collectively in this space, we need to come together to catalyze institutional, policy, and practice change to build and scale a system of support that makes reproductive well-being possible for every person. Simultaneously, we need to ensure that actions we take are truly meeting the needs of the people we are working to support.

The vision and guiding principles of the Reproductive Well-Being Movement are informed by and will continue to be informed by the principles of other movements like the reproductive justice and rights movements. We view Reproductive Well-Being as being at the intersection of these movements.



If successful, our work will *contribute* to the overall goals of the reproductive justice, health, and rights movements, understanding that our work is narrower in focus, and is in no way intended to replace, duplicate, or co-opt the work of that broader movement. We are committed to working in a culturally responsive, linguistically appropriate, and justice-informed way that authentically involves, listens to, and lifts up the voices of those with lived experience and the community as a whole. We recognize that reproductive well-being is just one aspect of people’s lives. We acknowledge that this work will require us to fundamentally change the narrative and practices for sexual and reproductive health, maternal and child health, and health more generally.

This national Blueprint for Action is intended to be the foundation for collective action among national leaders and influencers to shift the narrative and culture to one that values reproductive well-being and provides everyone the support they

need to have a healthy child only if and when they want to. To stimulate this change, we first need to acknowledge and understand the underlying assumptions and considerations that exist which may facilitate or impede transformative work. The assumptions, considerations, and guiding principles listed below provide a common foundation on which to build this movement.

Guiding Principles

- We value first and foremost the overall health, well-being, and self-determination of all people.
- We recognize that equity does not currently exist when it comes to deciding if, when, and under what circumstances to have a child, and thus these issues must be considered from an intersectional and broader social determinants of health lens.
- We recognize and respect that not everyone will, or will be able to, make a decision about if, when, and under what circumstances to have a child. We will work to build a culture in which all individuals will be treated with respect and be cared for without judgment.
- We value the voices and lived experience of the people whom we aim to serve. In developing solutions, we will center our work on their lived experience, which will help us ensure that these solutions are culturally and linguistically appropriate.
- We recognize the complexity of decision-making and intentions about family formation, and support individuals, couples, families, and communities in seeking reproductive autonomy, health, and well-being.
- We will work tirelessly to ensure that everyone has the information, access to services, and other supports necessary to have a child if and when they want to and to support a healthy start for the next generation.
- We will use best available science, evidence, and guidance from the community to develop our solutions.

Approach

We recognize that no singular organization or sector can achieve this vision on its own. It will take a multi-pronged and multi-sectoral effort to make this all possible. Thus, we will build an aligned network of thought leaders, community voices, and influential institutions that supports necessary culture and systems change, including:

- Enculturating a collective **narrative** that promotes the vision and principles of the reproductive well-being movement.
- Working towards and monitoring shared **measurements** on short-, medium-, and long-term progress.

- Establishing a **network** among those at the national, state, and local levels committed to reproductive well-being that builds the evidence-base, shares best practices, and aligns our assets to optimize our efforts to transform the culture.
- Advocating for and advancing **policies**, regulations, consensus statements, and national recommendations that support various systems and practices that ensure that all people can determine if, when, and under what circumstances to have a child and to support a healthy start for the next generation.
- Building and supporting the capacity of **places** to establish a broad-based system of support to ensure that people have what they need to determine if, when, and under what circumstances to have a child and to support a healthy start for the next generation.
- Leading and building the **capacity** of our constituents and stakeholders towards adopting this integrated and supportive approach in their practice.
- Ensuring that all of our efforts are developed, implemented, and measured in a **culturally responsive** and **linguistically appropriate** way.

Assumptions and Considerations

We recognize that this work is transformational and nascent; thus, we must acknowledge the following realities we seek to address:

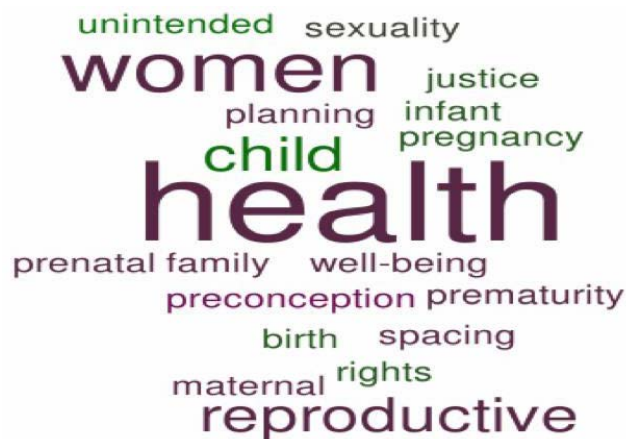
- Not everyone believes they have autonomy or choice.
- Not everyone possesses the same level of decision-making power.
- We acknowledge and respect ambivalence or deliberate decisions to not plan pregnancy.
- It's important to meet people where they are.
- This culture change will require us to address socioecological and historical factors, *not* just individual behavior. A policy systems approach will be essential, and we cannot assume that current policies will fit neatly into this movement.
- Science and lived experience must be anchors in this work. The work should be evidenced-based and evidence-informed, while also, grounded in community context and lived experience.
- It will be essential to ensure that our work is informed by movements like reproductive rights and justice.
- We will eliminate the cultural assumption that every woman is “pre-pregnant” and build a new norm that values the well-being of everyone.

Ultimate Measure of Success

Our movement will be successful if everyone, no matter who they are or where they live, is achieving their reproductive well-being—whether they are to have children or not have children. Those who have children must be able to parent the children they do have in safe and supportive communities. Over time, we will measure this through progress on existing markers, such as reducing maternal and child morbidity and mortality, as well as defining new and more inclusive measures for reproductive well-being more broadly. We know that new measures of reproductive well-being are essential to changing the way we approach the challenge and truly measuring our success.

Blueprint for Action

A diverse group of professionals with a shared vision of reproductive well-being, but different areas of expertise, interests, and entry points, comprise key contributors to this reproductive well-being movement. This movement will provide the opportunity to align our efforts towards one Blueprint for Action in a way that leverages our respective work and better connects it to a common agenda. By working collectively, we will be able to accelerate change and as a result, true access to reproductive well-being for more people.



This Blueprint for Action is an agenda for change and outlines the macro-level actions that we believe need to happen to establish reproductive well-being as a national priority and ultimately, reality. Key components of this macro-level Blueprint include:

- Enculturating a collective **narrative** that promotes the vision and principles of the movement.
- Working towards shared **measures** of reproductive well-being.
- Ensuring that all of our efforts are developed, implemented, and measured in a **culturally responsive** and **linguistically appropriate** manner.
- Establishing a shared **learning network** among those at the national, state, and local levels committed to reproductive well-being that builds the evidence-base, shares best practices, and aligns our assets to optimize our efforts to transform systems and culture.
- Advocating for and advancing **policies**, regulations, consensus statements, and national recommendations that support various systems and practices that support all people's reproductive well-being.
- Building the **capacity** of places to establish a broad-based system of support for reproductive well-being by ensuring that all people have equitable access to the information, services, systems, and supports necessary to determine if, when, and under what circumstances to have a child and make their own decisions related to sexuality and reproduction throughout their lives.

We recognize that real change that impacts real people happens in communities. Consequently, we have also worked with implementers and community members to develop The Reproductive Well-Being Toolkit: A Starting Place for Community Action. This toolkit is based on best available evidence, coalesces systems that support reproductive well-being outcomes, and operationalizes narrative and culture change. The toolkit is not prescriptive; rather it is meant to be a springboard for local dialogue about what is already in place and what needs to be done in the specific community context to achieve a system of support for reproductive well-being. The toolkit includes a discussion framework designed to garner community input, draw conclusions from locally available data, and develop a plan of action that is specifically tailored to community context and needs. As stated above, the work of the national movement will be to support the implementation of this work in communities.

Building a Shared Narrative that Supports the Vision & Principles of the Movement

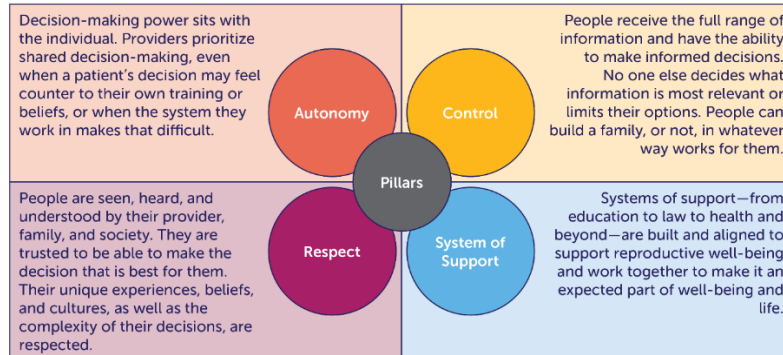
It is important that we change the narrative from one that focuses on reproductive health and life planning to one that focuses on reproductive well-being and the transformational and aspirational values that underpin this movement, including power, autonomy, inclusivity, and equity. This narrative change strategy was used to develop a shared narrative framework that values reproductive well-being. The goal is to 1) reframe the current dialogue to one that supports the principles of reproductive well-being for influencers and practitioners at all levels, 2) reshape the issue and narrative for the public, and 3) build a space for dialogue and sharing among those with a variety of lived experiences. The resulting framework is centered on equity, autonomy, and agency and goes beyond reproductive health care, body parts, and services delivered at specific points in time. It embraces a much broader scope of physical, mental, and emotional reproductive well-being across the life course, and of power to determine one's own actions. The narrative positions healthy sexuality and reproductive freedom as integral parts of overall health and well-being that can be discussed freely and accessible to all by:

1. Building strategies for enculturating a narrative change that is multi-faceted in approach, reaches diverse audiences, including influencers and practitioners, and addresses the three aforementioned goals.
2. Enculturating and institutionalize the changes in narrative in our organizations, as appropriate, and work with our stakeholders, constituents, and intersectional allies to do the same.
3. Creating an ongoing forum for people to share their stories and to advance the narrative change.
4. Building tools and resources that support narrative change among movement partners, such as practitioners, policy makers, advocates, and others.

To advance the narrative, all messages, stories, and experiences should align with and convey the reproductive well-being pillars* below-the conditions that need to be in place to create reproductive well-being.

*We encourage others to use their own organizational colors for the reproductive well-being graphics depicted throughout this National Blueprint for Action.

Pillars Of Reproductive Well-Being



Shared Measures & Markers

It will be essential to develop, monitor, and report upon shared measurements that track key markers towards reproductive well-being, which will include, but not be limited to everyone—no matter who they are or where they live—having the systems of support necessary to have control over their bodies and to make their own decisions related to sexuality and reproduction throughout their lives. Over time, we will measure progress in achieving national and local collective well-being through progress on existing markers, such as reducing maternal and child mortality. We will also create the new measures necessary to truly monitor our success in ensuring that all have achieved reproductive well-being. We recognize that we will need to not only measure and track individual outcomes, but also socio-cultural and systems markers that indicate whether there is progress towards our ultimate goal. Further, we are committed to disaggregating all data markers in order to monitor progress towards equity.

Some of these markers can be tracked through existing national data. New measures are also needed to track personal autonomy, service delivery, and systems of support indicators. Overall, the key steps to developing a shared measurement approach for the movement will require:

1. Developing a reproductive well-being measurement framework with short-, medium-, and long-term measures of success.
2. Identifying, developing, and testing needed measures and analytics that

are not currently nationally available to contribute to an overall reproductive well-being index, as well as using these data to build theories and knowledge that advances the work.

3. Working with national agencies, organizations, policy makers, philanthropy, and communities to institutionalize and implement the newly developed reproductive well-being measurement framework into existing systems and to sustain national data collection on these measures.

Cultural Humility & Responsiveness

It is essential to ensure that this movement engages and authentically meets those we are working to serve where they are. To achieve this, we must learn from the communities we intend to serve and then work in partnership with these communities to design systems, narratives, and practices based on these learnings. We will also need to build the capacity of influencers, decision-makers, and practitioners to do the same. Key actions to ensure that this movement is culturally- and linguistically responsive will include:

1. Convening an advisory council comprised of stakeholders with lived experience and diverse backgrounds that will provide ongoing feedback to the movement leaders.
2. Ensuring that matters of equity, well-being, empowerment, inclusivity, and unconscious bias are at the forefront of all policy, program, communications, and measurement decisions within the movement.
3. Building an infrastructure to support field- and capacity-building on matters of cultural humility, including but not limited to how to conduct audience research, meaningful community engagement, and addressing unconscious bias.

Shared Learning Network & Alignment of Mutually Reinforcing Activities

To truly transform the culture and to build a system of support that ensures that people can achieve their reproductive goals, this movement will require collective action among national leaders and influencers to shift the narrative and culture to one that provides everyone the support they need to achieve reproductive well-being. Successful change will require multi-faceted and orchestrated efforts across sectors and at the national, state, and local levels. Thus, we must establish a network that is constantly learning—a network that builds the evidence-base; shares best practices at the national, regional, and local levels; and fosters innovation. This will facilitate faster spread and scale of transformational change.

This learning network needs to be multi-faceted and multi-level. First and foremost, we must establish ongoing ways to learn from and engage with the very people we are working to serve, support, and represent. Further, those of us who are in institutional or thought leadership positions must also learn from one another and use our positions to facilitate learning networks for others in our spheres. It will require us to align our existing and respective assets toward reproductive well-being in order to: 1) determine what is in place to support this change at the national, state, and local levels; 2) better leverage these efforts to support the goals of this movement; and 3) identify new work and opportunities that need to be initiated to support the goals of the movement.

1. Build a national, state, and local reproductive well-being network that connects regularly (via a variety of means) to share field-based learnings, best practices, and new evidence, as well as to collaborate on a variety of efforts to advance reproductive well-being.
2. Conduct an ongoing assessment of systems change, policy, programs, narrative change, and measurement efforts taking place at the national, state, and local levels.
3. Amplify all systems change, policy, programs, narrative change, and measurement efforts through a digital resource center to connect the broader community to each other and to resources to support them in achieving their reproductive goals.
4. Collectively seed and develop new efforts that address policy, systems, program, narrative change, and measurement gaps in the movement.
5. Maintain and collaborate with new and existing coalitions, working collaboratives, and other groups to leverage, align, and connect mutually reinforcing activities at the local, state, and national levels.

Build, Maintain, & Transform Supportive Policy and Consensus Positions

Strong public and private sector policies are essential to building and ensuring support systems that enable all people to achieve reproductive well-being. There is a myriad of existing federal, state, and local policies (including laws, regulations, and other guidance) that contribute to reproductive well-being and its necessary systems of support. Some of these policies offer direct guidance and support for health services on matters such as reproductive, preconception, and maternal/infant health. Some are intersectional because they ensure that people have access to other key services and support that undergird reproductive well-being.

Work to defend, sustain, improve, and expand supportive policies is ongoing,

dynamic, and multi-faceted. To be successful, we will need to work in coalition with one another, our intersectional and grassroots partners, and policy makers to advocate, advance, and implement supportive policies, consensus statements, and local, state, and national recommendations.

This will require us, in coalition, to: 1) defend and protect supportive federal, state, and local policies that are in place; 2) expand and advocate for new federal, state, and local policies that are needed to optimize the systems of support necessary for all people to be able to achieve reproductive well-being; 3) align and expand organizational recommendations, policies, and position statements to the goals of the movement; and 4) work with the public and private sectors and employers to operationalize policies and practices that align with and support the goals of the movement. We acknowledge that different organizations can play different roles in these efforts. Some can advocate, while others can contribute experience, relationships, and research. Everyone can do something. Key steps and policy actions for each are as follows:

Defend, Protect, and Transform Federal, State, and Local Public Policies that Support Reproductive Well-Being

1. Title X Family Planning Program—the federal grant program dedicated to providing individuals with comprehensive family planning and related preventive health services.
2. Community Health Centers (CHCs)—health centers that are required to serve the medically underserved, provide services to everyone who seeks their care, and charge patients based on a sliding fee scale related to their income. Federal investments in CHCs help support clinic sustainability.
3. ACA—a 2010 law that provides numerous rights and protections that make health coverage fairer and easier to understand, along with subsidies (through “premium tax credits” and “cost-sharing reductions”) to make it more affordable. The law also allows and provides matching funds for states to expand Medicaid coverage for more people with low incomes.
4. ACA Birth Control Benefit—as part of the women’s preventive services provision of the Affordable Care Act (ACA), most health plans are required to cover all birth control methods and related care with no out-of-pocket costs for the consumer.
5. Medicaid—a program to provide health coverage to millions of Americans (78.9 million in November 2021), including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities. The

program is administered by states, according to federal requirements. It is funded jointly by states and the federal government.

6. **Healthy Start**—Healthy Start strengthens the foundations of the community, state, and national levels to help women, infants, and families reach their fullest potential. The overall goals are to (1) reduce differences in access to, and use of health services; (2) improve the quality of the local health care system; (3) empower women and their families; and (4) increase consumer and community participation in health care decisions.
7. **Centers for Disease Control and Prevention (CDC) support for maternal and child health and reproductive health**—CDC provides scientific leadership across different branches in the promotion of women’s health and infant health before, during, and after pregnancy.
8. **Supplemental Nutrition Assistance Program (SNAP)**—SNAP offers nutrition assistance to millions of eligible, low-income individuals and families and provides economic benefits to communities.
9. **Title V Maternal and Child Health (MCH) Services Block Grant**—the MCH block grant is a key source of support for promoting and improving the health and well-being of the nation’s mothers, children, including children with special needs, and their families.
10. **Teen Pregnancy Prevention Program and Personal Responsibility Education Program**—two federal, programs dedicated to evidence-based policymaking that fund diverse organizations working to provide high-quality sexual health education across the United States.

Develop & Advocate for New Federal, State, and Local Public Policies that Support Reproductive Well-Being and a Healthy Start

1. **Increase Medicaid expansion in more states**—changing eligibility requirements in states to maximize coverage to those who are uninsured.
2. **Provide health coverage for all**—ensuring that all individuals, regardless of gender or economic status, have access to health coverage that includes family planning services, maternity care, and infertility evaluation and treatment.
3. **Remove restrictions on abortion access**—repealing the Hyde Amendment, which blocks federal Medicaid funding for abortion services, and numerous other restrictions on abortion care that hinder or ban access in many states.
4. **Expand no co-pay contraceptive coverage to additional populations** including Veterans and non active-duty servicemembers and dependents covered by TRICARE (the military health insurance program).
5. **Enact minimum wage/living wage**—a standard for wages that are

- sufficient for living in that particular state.
6. Provide over-the-counter birth control (for appropriate methods)—ability to access birth control methods without a prescription.
 7. Scale insurance coverage for 12 months of birth control—require insurance companies to cover a 12-month supply of birth control at one time.
 8. Scale pharmacist and nurse dispensing/access to birth control (for appropriate methods)—ability of pharmacists and nurses to directly prescribe and dispense birth control.
 9. Expand funding and supporting policies for school-based health centers—particular health centers that are co-located within schools and offer a variety of health care services.
 10. Improve payment policies for immediate post-partum IUDs and implant (public and private)—other strategies to ensure access to these methods that are traditionally harder to access.
 11. Medicaid reimbursement for a range of other services—(NOTE: different groups suggested different targets, with none getting more than one vote: same day birth control, continuous coverage past 60 days post-partum, community health workers.)
 12. Improve Medicaid policies that ensure access, including program inclusion of any qualified provider; freedom of choice of provider; reimbursement for full range of methods; no prior authorization or utilization limits; and appropriate and timely reimbursement to providers.

Supportive Private Sector, Organizational, & Institutional Policies for Reproductive Well-Being

In addition to public policy, organizations and institutions have a role to play in leading and modeling the systems transformation necessary to support reproductive well-being. Key actions to support this will include:

1. Developing a reproductive well-being workplace certification program and working to implement it among all movement partner organizations. Making a commitment to our own employees and constituents by assessing and addressing any inequities and gaps in our own policies, procedures, and benefits as they relate to pay equity, comprehensive benefits, and diversity and inclusion.
2. Encouraging and incentivizing employers of all types to adopt and implement the reproductive well-being workplace framework that assesses and addresses inequities and gaps in our policies, procedures, and benefits as they relate to pay equity, comprehensive benefits, and

- diversity and inclusion.
3. Supporting partners and stakeholders in implementing the Reproductive Well-being Statement of Principles in ways that align with their organization's mission, goals, and guiding principles. (You can find the Statement of Principles on Power to Decide's website.)
 4. Engaging the private sector to co-develop, amplify, and support changes in narrative, policies, and programs that support reproductive well-being.
 5. Disseminating and celebrating formally adopted organizational policy statements that reflect our broad-based values and principles of the movement.
 6. Encourage and incentivize insurance plans and Pharmacy Benefits Managers (PBMs) to fully comply with the ACA birth control benefit and establish transparent, timely, and non-burdensome processes for people to get the specific contraceptive method they need with no out-of-pocket costs.
 7. Encouraging and incentivizing payers, underwriters, brokers, purchasers, and providers to adopt, advocate for, and implement policies and procedures that embrace the full spectrum of reproductive health services, including reproductive life planning, contraceptive coverage, and infertility services, as a part of basic health care.

Place-Based Implementation of Reproductive Well-Being

Building the capacity of places to establish a system of support to ensure that people have what they need to achieve reproductive well-being will be paramount to the success of this movement. While there is no question that the community itself is best positioned to determine the specific approach to and aspects of this system of support in the place they live, there is also the opportunity to share best practices and evidence-informed approaches based on other places working on similar goals. In that spirit, an Expert Panel, comprised of practitioners, advocates, and researchers working locally, convened to develop a place-based reproductive well-being toolkit comprised of evidence-informed and craft-based strategies that can be customized at the local level by community networks that represent the diversity and context of that community. The place-based toolkit includes four Action Areas that emerged from this work: policy, education and communication, health care/service delivery system (including systems, clinics, and providers), and health equity. Below, we have identified key strategic considerations in each category.

Health Equity

There are three recommendations to ensure a focus on health equity throughout this initiative.

1. The initiative is rooted in community needs and priorities related to reproductive well-being.
2. Community engagement and collaboration are key components of the overall work.
3. All activities and tactics related to the initiative seek to reduce implicit and explicit bias and improve equity related to the ability of people to determine when, if, and under what circumstances to have a child.

Policy

There are four recommended policy strategies to support community members.

1. Expand access to high-quality, evidence-informed, culturally responsive, and respectful care.
2. Ensure coverage for health care and social services (e.g., WIC, SNAP, etc.), specifically those related to family formation, contraception, and reproductive health.
3. There are policies in place to ensure that individuals and couples have access to medically accurate, relevant, and understandable information to support decision-making related to family formation.
4. Support the health and well-being of families in general, through services and supports that focus on preventing versus treating problems, building family capacity, and removing environmental barriers to achieving life goals.

Education and Communication

There are three recommendations to ensure community members have information to achieve reproductive well-being.

1. There is a community-specific strategy for communication and education about reproductive well-being across the life course.
2. All people in the community have access to medically accurate and age-, culturally-, and linguistically-appropriate sexual health education, including information on family formation and the full range of contraceptive methods.
3. There are community-specific efforts to support all reproductive-age people in achieving health literacy.

Health Care/Service Delivery System

There are four recommendations to ensure community members have the health care and social services needed to support reproductive well-being.

1. Within the health care/service delivery system in the community, there is a rights-based frame for providing care to people who need access to reproductive services. This includes (but is not limited to) care that is non-discriminatory, trauma-informed, inclusive, confidential, and allows for informed choice while supporting personal agency and autonomy.
2. There are community-specific strategies to decrease barriers to and increase access to health care and social services throughout the community, including reproductive health services, contraception, family formation, and parenting/family support services.
3. There are community-specific efforts to empower people to know their rights and the reproductive health care they are entitled to receive and ensure that their reproductive health needs are met during their health care encounters, and there is engagement with providers in the community to ensure they are aware of and responsive to their patients' needs.
4. There are community-specific efforts to reduce barriers to contraceptive use.

Spread and scale of place-based reproductive well-being will require national network members and local leaders to work together. Nationally, key steps will include:

1. Establishing a training and technical assistance center to support the implementation of local networks via online and in-person means on matters such as coalition-building, assessment, planning, best practice dissemination, and other efforts.
2. Building a learning community amongst places that take on reproductive well-being.
3. Aggregating locally developed resources, implementation tools, and best practices to optimize effective spread and scale.

To learn more about Reproductive Well-Being (RWB) and be a part of the movement visit: www.reproductivewellbeing.org.