**Sample Op-Ed or Blog and General Tips**

**ARIZONA**

**[Identify personal connection to the primary message: Domestic Gag Rule reduces birth control access in Arizona]**

* An estimated [286,020 Arizona women](https://powertodecide.org/what-we-do/information/resource-library/contraceptive-access-arizona) of reproductive age (13-44) in need of publicly funded contraception live in a county impacted by the implementation of the Title X Family Planning Program “domestic gag rule.”
* Two out of Arizona’s 15 counties have lost some Title X resources.

**[Explain the domestic gag rule]**

* The domestic gag rule requires health providers receiving Title X funds to withhold some information from patients about abortion services and care.
* Health centers are required to stop providing abortion care with non-Title X funds at sites that offer Title X supported services, such as contraceptive care, breast and cervical cancer screening and STI testing.
* The rule requires that abortion services, no matter how they are funded, be performed at a separate physical site, which is a financial burden most centers cannot meet.

**[Explain Title X]**

* For 50 years, the Title X Family Planning Program has provided federal funding to health centers that provide free or low-cost birth control and related services.
* **Add** information about Title X in your state/community.
* In the face of these challenges, family planning providers are doing their best to provide high-quality services to their patients and fill gaps left in the wake of the disruption caused by the rule.

**[Describe impact of domestic gag rule]**

* Data released by [Power to Decide](https://powertodecide.org/), show an estimated [286,020 Arizona women](https://powertodecide.org/what-we-do/information/resource-library/contraceptive-access-arizona) of reproductive age (13-44) in need of publicly funded contraception live in a county impacted by the implementation of the Title X Family Planning Program “domestic gag rule.”
* According to the same data, two out of Arizona’s 15 counties have lost some Title X resources.

**[Describe contraceptive deserts in Arizona]**

* Data from Power to Decide show that 453,430 women living at or below 250% of the poverty level in Arizona live in contraceptive deserts, counties in which there is not reasonable access to a health center offering the full range of contraceptive methods.
* This means women struggling to make ends meet must incur additional costs such as transportation, child care and taking unpaid time from work just to get the type of contraception they need. [**Add** local story or example if possible].
* Nationally, more than 19 million U.S. women of low income live in [contraceptive deserts](https://powertodecide.org/what-we-do/access/birth-control-access).

**[Proactive steps taken by Arizona to expand access to contraception that help partially alleviate the impact of damaging federal policies]**

* Arizona has expanded Medicaid to adults with low incomes, which helps decrease the percentage of uninsured women, and by extension, gives them the contraceptive coverage they need to live healthy lives.
* Even so, women in Arizona are less likely to have health coverage than women in other parts of the country, which limits their ability to get the birth control method that is right for them.
* In Arizona, [12.8% of women of reproductive age (13-44) are uninsured](https://www.urban.org/sites/default/files/2019/07/24/factsheet-uninsured-women-az.pdf) (as of 2017, which is the most recent available data), compared to the national average of [11.7%](https://www.urban.org/sites/default/files/factsheet-uninsured-women-tx.pdf).

**[Arizona could take the following additional steps]**

* Allow pharmacists to prescribe contraception.
* Require insurance to cover an extended supply of prescription contraceptives.
* Enact policies that protect insurance coverage of the full range of contraceptive methods.

**[Conclusion – Some ideas below]**

* To further expand access, Arizona could allow pharmacists to prescribe contraception, require insurance to cover an extended supply of prescription contraceptives and enact policies that protect insurance coverage of the full range of contraceptive methods.
* The implementation of the domestic gag rule could impact nearly 286,000 women in need in Arizona.
* Women in need in Arizona already faced a challenging contraceptive landscape.
* Even before the domestic gag rule was implemented, over 453,000 women with low incomes in Arizona lived in contraceptive deserts.
* These women must incur additional costs such as transportation, child care and taking unpaid time from work just to get the contraception they need.
* In the long term, we must all work together to reverse the administration’s harmful domestic gag rule.
* Birth control has widespread support. Nearly all women (99%) who have ever had sex with men [have used contraceptives at some point in their lives](https://powertodecide.org/what-we-do/information/resource-library/everyone-loves-birth-control).
* The majority of adults (76%), believe that birth control is a basic part of women’s health care. Further, 86% of adults, support access to all birth control methods, with broad support [regardless of race, region, and political affiliation](https://powertodecide.org/what-we-do/information/resource-library/survey-says-thxbirthcontrol-november-2019).

**COVID-19 Impact:**

* Access to contraception is more important than ever.
* COVID-19 is putting front and center the need for women to be able to access birth control in a variety of ways.
* COVID-19 is having a significant impact on the health and economic security of people nationwide.
* The pandemic has also changed our approach to health care and highlights the opportunity to deliver access to care in innovative ways.
* We hope innovative methods to deliver medical care will become established practice across the country and thus make it easier for women to access the birth control they need and deserve.