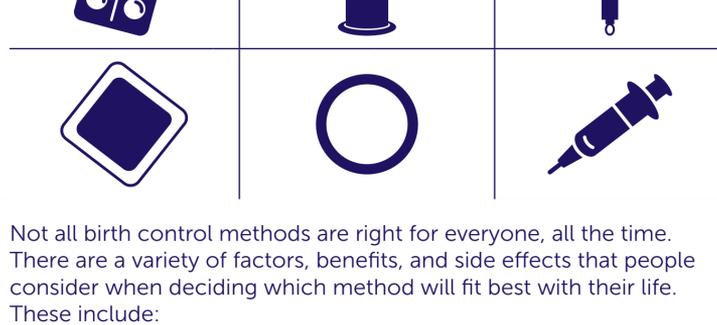


BIRTH CONTROL 101: THE IMPORTANCE OF HAVING ACCESS TO THE FULL RANGE OF METHODS

Did you know that the birth control pill turned 60 in 2020?

While the pill is still one of the most popular methods, today there are many more birth control options. There are 18 categories of FDA-approved birth control methods, in addition to behavior-based methods such as fertility awareness, withdrawal, and abstinence. It is essential that people have access to the method that they and their trusted medical provider determine is right for them, without cost or access barriers.



Not all birth control methods are right for everyone, all the time. There are a variety of factors, benefits, and side effects that people consider when deciding which method will fit best with their life. These include:

- ✓ Control over the method
- ✓ Reducing or stopping periods
- ✓ Potential to improve or interfere with medical conditions
- ✓ How easy it is to get and use
- ✓ **Non-contraceptive benefits**
- ✓ Cost
- ✓ Whether it also prevents STIs
- ✓ Whether it contains hormones
- ✓ Ability to use it discreetly
- ✓ Effectiveness

View more details about each method using Power to Decide's method finder <https://powertodecide.org/sexual-health/your-sexual-health/find-your-method>

Four women on their method of choice

"I never thought I'd find a birth control for me...What I like about Nuvaring is that I don't have to take it everyday like a pill."

—Nicole

"It's easy for me to include [the patch] in my Sunday routine... and since I've been on it... [the chronic pain during my period] doesn't happen any more."

—Angela

"What I like best about my method [the ParaGard IUD] is that I don't have to think about it...I'm set for the next 8 years."

—Tika

"I just decided to [use condoms] because it's easier, and cheaper than the pill. You can go and buy a pack of condoms off the street."

—Emily

Birth control is a journey. The best method for someone will likely change over the course of their life—it's not a one-time thing.

~3

The **median number** of methods ever used by women in the US.

5+

Nearly one-third of women have used **five or more methods**.

Two women on their birth control journey¹



Birth control costs

Through the ACA Contraceptive Coverage Benefit, an estimated **64.3 million** women currently have access to the full range of birth control methods, with no out-of-pocket costs, either through Medicaid or private insurance plans that are ACA-compliant. A 2020 [Supreme Court ruling](#) will impact some women in private plans.

Those who are uninsured or underinsured may be able to access free and low-cost contraceptive services available through [publicly-supported clinics](#), which include Title X-funded clinics, as well as other safety net clinics that don't receive Title X funding.²

Multiple studies have shown that [when cost is removed as a barrier](#), women are more likely to use their method of choice, and to use contraception more consistently. [Consistent use](#) is important for avoiding unplanned pregnancies.

Cost does in fact remain a barrier for some, including the **7.9 million** women of reproductive age who are uninsured nationally, as well as those with gaps in private insurance.³

Without insurance, costs can quickly add up. The cost of the method alone can be prohibitive for many.

The average out of pocket cost over the year can range from:



Some methods, often referred to as long-acting reversible contraceptives, or LARCs, last for several years, but have high up-front out-of-pocket costs. The [implant](#) and [IUD](#) can approach \$900.

The true cost of contraception also includes the cost of the office visit, as well as secondary expenses, such as transportation and lost wages.

The Average Cost of Contraception



COVID-19 pandemic has exacerbated barriers

The COVID-19 pandemic and the economic downturn in its wake have made it even more important to eliminate cost barriers [as more people struggle financially](#). Moreover, the COVID crisis has magnified large existing economic and health care inequities. A recent [survey from the Guttmacher Institute](#) finds:

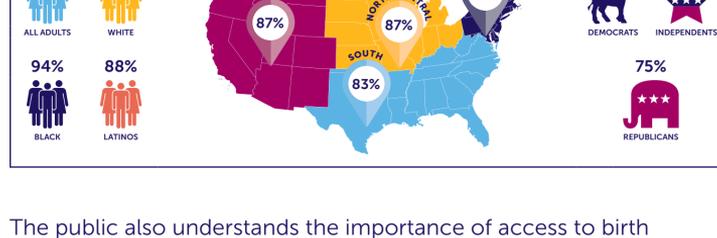
- **1/3** of women overall wanted to delay getting pregnant or wanted fewer children because of the pandemic. This figure rises to **44%** of Black women and **48%** of Hispanic women.
- Similarly, Black, Hispanic, and women with low-income are **more likely** to report pandemic-related delays in access to contraception or other sexual and reproductive health services, and are more worried about getting access to such care.

Cost barriers can result in women not being able to use their preferred method

- **22%** of women at risk of an unplanned pregnancy reported they would want to use a different contraceptive method if cost were not an issue.
- **Roughly 1/3** of women using condoms, withdrawal, or no method of contraception would prefer to use another method.
- Black and Hispanic women and those of other races/ethnicities had a **higher prevalence** of using a method that is not their preferred method of choice compared with white women.

Public Support

The majority of adults—regardless of race/ethnicity, region, and political affiliation—[support](#) access to all methods of contraception.



The public also understands the importance of access to birth control in the context of the pandemic:

7 in 10 (68%) adults [support](#) giving family planning providers additional resources during the pandemic.

1 "Smart Girls Guide to Birth Control" Marie Claire, June 2015.

2 While non-Title X-funded clinics have received more funding and been able to serve more contraceptive users in recent years, research shows that Title X-funded clinics are more likely to have health educators providing family planning counseling (43% v 16%) and offer the seven most effective methods onsite (48% v 15%).

3 This includes women in grandfathered plans, self-insured plans, health sharing ministries, plans that have a religious exemption, etc. that are not subject to the ACA's birth control benefit.