



Pharmacy Access

A Report on the Availability of Over-the-Counter
Emergency Contraception in Ohio Pharmacies

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EXECUTIVE SUMMARY

Introduction

Plan B® was approved for emergency contraceptive (EC) use in 1999. It is a high dose of the same hormones found in birth control pills and is a highly effective way to prevent pregnancy up to 72 hours following unprotected sex or sexual assault. This new frontier in contraceptive technology is a great advance for women, and provides women with another opportunity to prevent unintended pregnancy following sexual assault or contraceptive failure. In 2006 the FDA approved Plan B® for over-the-counter access for women age 18 and over, but many barriers to access still exist for women in Ohio, including pharmacist refusal, high cost, and lack of education about EC, when to take it and how it works.

This analysis is a continuation of the previous reports on access to EC in emergency rooms in Ohio, and looks at access to Plan B® for women 18 and over in pharmacies across the state.

Survey Method

Pharmacy investigators conducted phone and “secret shopper” surveys of randomly selected pharmacies throughout Ohio from November 1, 2007 to January 31, 2008. In all 10% (216) of pharmacies were selected for the phone survey and a separate five percent (107) random sample was selected for the “secret shopper” survey. The phone surveys were conducted by an individual caller, and the “secret shopper” surveys were conducted by teams of two female investigators.

Results

Phone survey

Results from our phone survey indicated that:

- Almost a third of all pharmacies (30%) did not stock Plan B® or were out of stock when we called.
- The average cost of Plan B® was \$42.72.
- With pharmacies that had Plan B® in stock at the time of our call, 69.2% said that a refusal was not likely because all members of the staff would distribute the medication, 25.6% indicated that a refusal was possible because the respondent did not know if all pharmacists would distribute Plan B® or not, and 4.5% indicated that refusal was probable because there was at least one pharmacist on staff at that time who would refuse to dispense Plan B®.

“Secret shopper” survey

Our “secret shopper” survey investigators found that:

- Thirty percent of their visits did not result in a successful Plan B® purchase. The investigators were never outright refused the medication, these unsuccessful visits were because the investigators were told that they did not stock the medication or were temporarily out of stock.
- The average cost of Plan B® was \$44.79.
- Eighty-six percent of respondents who stock Plan B® were able to correctly identify the 72 hour window of effectiveness for Plan B®.
- Only eight percent of respondents could correctly identify the three possible ways that Plan B® works to prevent pregnancy.
- Although all scientific evidence points to the fact that Plan B® has no effect on an established pregnancy and can only work if taken before a pregnancy begins, 25% of pharmacists or pharmacy employees stated that it is the same as the “abortion pill.”
- The vast majority of respondents had no attitude towards the purchase of Plan B® (78.6%). Of the respondents that did have an attitude, 12.4% had a positive attitude and nine percent had a negative attitude.



Implications for Ohioans

Although our investigators were not outright refused during the “secret shopper” surveys there is no way to know for sure that they did not really experience a refusal. It is possible that a pharmacist or pharmacy staff member avoided the issue all together by saying that they did not have any Plan B® in stock at the time of our visit. In fact, the entire issue of pharmacist refusal was brought to the attention of the media and the public when Karen Brauer lied to a customer, telling the woman that they did not have any of her contraceptive in stock, “hoping to avoid tension.”¹ Regardless of whether or not we were told the truth about the stocking of Plan B® the fact that almost a third of pharmacies did not stock Plan B® is bad news for women in Ohio, and could severely limit access, especially in rural areas of the state.

The high cost of Plan B® can also restrict access, and the average price we found of \$44, could mean that low-income women (who have the highest rates of unintended pregnancy²) would not be able to access the medication when it is needed. The inaccurate information given out by respondents is also concerning. Women need medically accurate information

about Plan B® so that they can use it effectively and make informed decisions about their reproductive health care.

This report suggests that there is still much work to be done in Ohio to address the barriers to access for Plan B®. Based on our findings the NARAL Pro-Choice Ohio Foundation recommends that

- More Ohio pharmacies stock the medication to ensure universal access to the medication.
- Pharmacists and pharmacy staff members need more education into the mechanism of action of Plan B® and clarification that it is not the same as the “abortion pill”.
- Ohio change its Medicaid policies so that women covered by Medicaid can get coverage for Plan B® without the added step of going to a doctor’s office for a prescription.
- NARAL Pro-Choice Ohio Foundation and other reproductive rights organizations need to increase public knowledge about Plan B® and where women can go to get the medication.

¹ Marie McCoullough. “Abortion Debate Spreads to Pharmacy Counter/Some Druggists Refuse to Fill Prescription for Morning-After Contraception. Patients are Angry.” *Philadelphia Inquirer*, March 28, 1999: A01.

² Finer, L.B. & Henshaw, S.K. (2006). “Disparities of Unintended Pregnancy in the United States 1994 and 2001.” *Perspectives on Sexual and Reproductive Health*, 38(2):90-96.



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