



Access to Emergency Contraception at Missouri Pharmacies

NARAL Pro-Choice Missouri Foundation has updated our 2005 *Pharmacy Access Survey*. This update was necessary due to two major changes in the way emergency contraception (EC) is distributed. In spring 2006 Wal-Mart changed its longstanding corporate policy prohibiting the sale of EC; this was followed by the August 2006 Food & Drug Administration (FDA) decision to allow over-the-counter (OTC) sales of EC to anyone 18 years old and older.

Since our original survey in 2005, EC stocking rates have increased significantly. A large part of the increase is due to Wal-Mart's decision to reverse its corporate policy prohibiting stocking EC. In addition, the rate of refusal-to-stock at non-stocking pharmacies has declined. Although overall rates have improved, Missouri women living in rural and micropolitan areas are still at a significant disadvantage in accessing EC.

Key findings from our 2007 survey:

- Stocking rates have increased from 28% in 2005 to 62% in 2007¹
- Stocking rates at Wal-Mart have risen from an abysmal 0% to 89%
- Percent of non-stocking/non-ordering pharmacies has fallen from 38% in 2005 to 16% in 2007
- Non-stocking pharmacy refusal-to-order rate has fallen from 61% in 2005 to 44% currently
- Moral objection continues to be the largest reason for not stocking or ordering EC²
- 21% of rural counties do not have a pharmacy that is willing to stock or to order EC upon request

¹ In 2007, the United States Court of Appeals for the Eighth Circuit, which includes Missouri, ruled that insurers that cover various reproductive conditions do not have to cover contraception. This evoked a question of gender equity for us. Accordingly, in Spring 2007 NARAL Pro-Choice Missouri Foundation conducted an independent survey to determine Viagra stocking rates in Missouri. Contacting the same pharmacies as in the *Pharmacy Access Survey*, our study determined that 97% of Missouri pharmacies stock Viagra. This figure manifestly does not compare favorably with EC stocking rates.

² In sharp contrast to the 78% who cited "moral objection" as the primary reason for not stocking or ordering EC, not a single non-stocking pharmacy in our Viagra survey cited "moral objection" as a reason for not stocking.



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- Non-stocking/non-ordering rates remain highest in micropolitan (25%) and rural (20%) areas of Missouri
- Stocking pharmacies are most highly concentrated in urban areas (73%) compared to rural (15%) and micropolitan (12%) areas

Pharmacist knowledge about EC has increased markedly since 2005. During the 2006-2007 grant cycle, NARAL Pro-Choice Missouri conducted a pharmacist-education campaign. In connection with the campaign, our Foundation developed informational packets for 800 Missouri pharmacists explaining the mode(s) of operation of EC, the efficacy of EC, the safety of EC, the difference between RU-486 and EC, and anti-scientific myths surrounding EC. These packets were sent to the lowest-scoring pharmacists/ies in the 2005 survey. They had a quantifiable, demonstrable impact on the level of pharmacist knowledge, as we had hoped. Our latest survey, conducted after NARAL Pro-Choice Missouri's pharmacist-education program, has yielded the following results:

- Pharmacist knowledge concerning optimal timing about when to take EC has come into line with the generally preferred 72-hour time limit; 26% in 2005 compared to 73% in 2007 understood the window of efficacy
- Only 3% of pharmacies gave an inaccurate description of EC's method of action compared to 29% in 2005
- Some confusion still exists concerning the difference between EC and RU-486; an unacceptably high 26% of surveyed pharmacies erroneously believe the two are the same, although this still represents substantial improvement over 2005 rates

The results of the updated survey show significant improvements in access to EC. **However, Missouri pharmacies still fall short in addressing the needs of women in non-urban regions of the state. Success cannot be considered complete until every woman in Missouri is guaranteed universal access to EC.**