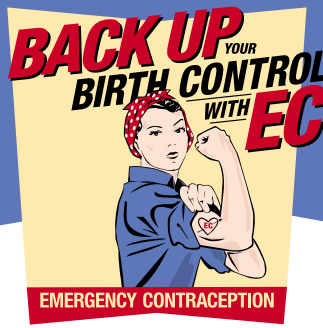


For more information, contact the campaign at
1300 19th Street, N.W., Second Floor, Washington D.C. 20036

backupyourbirthcontrol.org



1-888-NOT-2-LATE

Public Support for Government Involvement in Emergency Contraception Education Initiatives

Introduction

A survey¹ conducted in July 2002 found a majority of likely voters supports an active role for government in educating the public about emergency contraception (EC). All voters—male and female—believe this information should be broadly available to the general public and to all women of childbearing age, including teenagers.

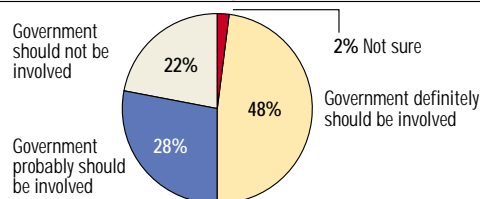
EC is a safe, effective back-up birth control method that can significantly reduce the risk of pregnancy when used within days after contraceptive failure, unprotected intercourse, or sexual assault. Each year, about 3 million pregnancies (or one-half of all pregnancies) in the United States are unintended, and almost half of these unintended pregnancies end in abortion. Fifty-three percent of women with unintended pregnancies were using contraception.

Sen. Patty Murray (D-WA) and Rep. Louise Slaughter (D-NY) introduced the Emergency Contraception Education Act on March 6, 2002. This bi-partisan legislation, with 6 Senators co-sponsors and 85 House co-sponsors, authorizes \$10 million a year for five years to the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA) to develop and distribute information on EC to the public and to health care providers.

Summary of Findings

Voters strongly believe that government has an appropriate and important role in informing women about issues concerning their health. In fact, more than three in four voters say government should be involved in providing more complete information about health options so women can make decisions about their own medical needs.

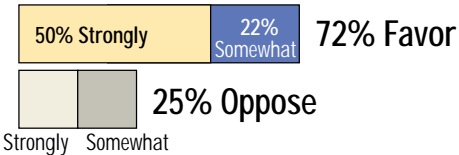
Figure 1. Government Role in Informing Women About Health



Few voters have adequate and consistent knowledge about EC and its availability. More than 60% of voters say they do not know of a product or drug that has been proven effective in preventing pregnancy if used within days after unprotected sex or contraceptive failure. When asked to specify an EC product, almost one-third of voters who said they knew of such a product responded “RU-486,” indicating EC is often mistakenly confused with other drugs.²

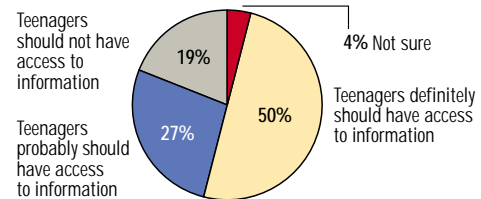
Once voters are informed about EC, they overwhelmingly (72%) favor legislation aimed at expanding public health information about EC and its availability. A majority of voters from all partisan backgrounds respond favorably to such legislation, including 81% of Democrats, 76% of independents, and 60% of Republicans. Pro-choice voters are strongly united in their support for the measure (87% favor, 11% oppose), while anti-choice voters are less cohesive in their opposition (45% support; 51% oppose).

Figure 2. Public Support of EC Legislation



Voters believe that knowledge about emergency contraception should be shared broadly and not restricted to certain groups. In fact, about as many voters say the “general public” would benefit most from the information as those who say “all women of childbearing age” and as those who say “teenagers and young women in high school.” More than three-quarters of all voters say teens should have access to information about EC, with half saying that teens definitely should have access to this information.

Figure 3. Public Support of Teen Access to Information About EC



The advantage that voters see in making information about EC widely available outweighs their concerns about any possible mixed messages that could be sent on this issue.

Similarly, when presented with two different views about government’s role in providing information about EC, by two to one voters say government involvement is a good idea because it is an important way to reduce the number of unintended pregnancies in our country.

Over 70% of voters consider the 72-hour window of effectiveness a compelling reason for a public education initiative. Given EC’s narrow window of effectiveness, voters believe it is important for women to know about a back-up birth control in advance of an emergency situation. Voters also believe improving EC awareness will significantly reduce the number of unintended pregnancies and the need for abortion.

Voters overwhelmingly support legislation requiring hospitals to inform sexual assault victims about the availability of EC. Introduced on March 21, 2002, the Emergency Contraception for Female Sexual Assault Survivors Act would require hospitals to offer EC to survivors of sexual assault. A majority of voters in all demographic and attitudinal sub-groups, including more than three quarters of Catholic voters, say they favor such a proposal.

The mission of the Reproductive Health Technologies Project to advance the ability of every woman to achieve full reproductive freedom with access to the safest, most effective, appropriate and acceptable technologies for ensuring her own health and controlling her fertility.

“Back Up Your Birth Control” is a public education and activist campaign led by the Project that involves a broad coalition of medical, public health and advocacy organizations to increase awareness of and expand access to EC—a second chance to prevent unintended pregnancies. For more information and how to get involved, visit www.backupyourbirthcontrol.org.

¹ On behalf of the Reproductive Health Technologies Project, Peter D. Hart Research Associates interviewed 503 likely voters. The interviews were conducted from July 11 to 14, 2002. The margin of error for the overall results is +/-4.5%.

² RU-486, also known as Mifeprex® or the abortion pill, is a different drug than EC. Mifeprex® is used to terminate an established pregnancy, whereas EC works to prevent pregnancy.