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**American Pharmacists Association
House of Delegates – March 24-27, 2023**

**NEW BUSINESS
(To be submitted and introduced by Delegates only)**

Introduced by: Veronica Vernon
(Name)

1/23/20 American Pharmacists Association Task Force on Reproductive Health Care Access
(Date) (Organization)

Subject: Access to comprehensive reproductive health care

Motion:

1. APhA supports equitable patient access to evidence-based comprehensive reproductive health care, including, but not limited to, the management of pregnancy loss, ectopic pregnancy, infertility, pregnancy termination, sterilization, and contraception.
2. APhA recognizes patient autonomy in choosing reproductive health care services and the essential role of all health care professionals in facilitating access and advancing informed decision making.
3. APhA supports evidence-based legislation that ensures patient access to comprehensive reproductive health care services.

Background:

Reproductive health care plays a vital role in the overall health and well-being of all patients, whether it be disease prevention, or management of acute, chronic, or emergency conditions. As a result, patient access to these services is an important component of health care. When discussing comprehensive reproductive health care services, this may encompass a variety of evidence-based practices, such as the management of pregnancy loss (miscarriage), ectopic pregnancy, infertility, pregnancy termination, sterilization, and contraception. Patients may opt to engage in varying extents of these health care services, based on factors such as cultural, social and religious considerations. However, health care professionals such as pharmacists have a duty to facilitate access to such services as clinically indicated and appropriate through patient education, as well as ordering, dispensing, and counseling patients on pertinent medication therapy. Ultimately, such services should be rendered in support of shared decision making between pharmacists and their patients, guided by principles of bodily autonomy.

The 2022 U.S. Supreme Court's ruling on *Dobbs v Jackson Women's Health Organization* overturned *Roe v Wade*, posing implications on the complete span of reproductive health services, as abortion regulation turned to individual states. Multiple states have consequently implemented new laws limiting patient access to selected reproductive services, which may consequently cause negative impacts on the health, safety, and autonomy of patients seeking these reproductive services.

APhA, along with other professional organizations, has recognized the unique and important role pharmacists have in public health, and reproductive health care is no exception. The pharmacy profession prides itself on

its unique accessibility to patients, and has a role to play in ensuring equitable patient access to reproductive health care services through services such as pharmacist-prescribed hormonal contraception offered in many states to help address patient gaps. This is reaffirmed by the currently adopted APhA policy, which notes pharmacists' role in public health awareness to "provide services, education, and information on public health issues." Studies identify that accessing reproductive health services already poses difficulties given the threats of stigma, violence, exclusion, and other discrimination toward patients and health care professionals alike. Therefore, it is important that patients are supported in autonomous health care decisions as a core tenant of patient care, as delineated in the Pharmacist Code of Ethics.

Current APhA Policy & Bylaws:

1990, 2004 Freedom to Choose

1. APhA supports the patient's freedom to choose a provider of health care services and a provider's right to be offered participation in governmental or other third-party programs under equal terms and conditions.
2. APhA opposes government or other third-party programs that impose financial disincentives or penalties that inhibit the patient's freedom to choose a provider or health care services
3. APhA supports that patients who must rely upon governmentally financed or administered programs are entitled to the same high quality of pharmaceutical services as are provided to the population as a whole.

(Am Pharm. NS30(6):45; June 1990) (JAPhA. NS44(5):551; September/October 2004) (Reviewed 2010) (Reviewed 2015) (Reviewed 2018)

2009 Disparities in Health Care

1. APhA supports elimination of disparities in health care delivery

(JAPhA. NS49(4):493; July/August 2009) (Reviewed 2013) (Reviewed 2018) (Reviewed 2020)

2012, 2005, 1992 The Role of Pharmacists in Public Health Awareness

1. APhA recognizes the unique role and accessibility of pharmacist in public health.
2. APhA encourages pharmacists to provide services, education, and information on public health issues
3. APhA encourages the development of public health programs for use by pharmacists and student pharmacists.
4. APhA should provide necessary information and materials for student pharmacists and pharmacists to carry out their role in disseminating public health information.
5. APhA encourages organizations to include pharmacists and student pharmacists in the development of public health programs.

(Am Pharm. NS32(6):515; June 1992) (JAPhA. 45(5):556; September/October 2005) (Reviewed 2009) (Reviewed 2010) (JAPhA. NS52(4):460; July/August 2012) (Reviewed 2017) (Reviewed 2020)

References:

1. American College of Obstetricians and Gynecologists. Restrictions to Comprehensive Reproductive Health Care. 2018. <https://www.acog.org/clinical-information/policy-and-position-statements/position-statements/2018/restrictions-to-comprehensive-reproductive-health-care>
2. Centers for Disease Control and Prevention. Women's Reproductive Health. May 2022. <https://www.cdc.gov/reproductivehealth/womensrh/index.htm>
3. American Public Health Association. The Role of the Pharmacist in Public Health. American Public Health Association. November 2006. <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2014/07/07/13/05/the-role-of-the-pharmacist-in-public-health%20/>

4. Agency for Health Care Research and Quality. Shared Decisionmaking. <https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/communication/strategy6i-shared-decisionmaking.html> June 2013
5. Barr-Walker J, Jayaweera R et al. Experiences of women who travel for abortion: A mixed methods systematic review. PLoS One. Link: <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0209991>
6. Odum T, Hemann O, et al. Assessing psychosocial costs: Ohio patients' experiences seeking abortion care. Contraception. 2022. Link: <https://www.sciencedirect.com/science/article/pii/S001078242200244X>
7. Pharmacist Prescribing: Hormonal Contraceptives. National Association of State Pharmacy Associations. <https://naspa.us/resource/contraceptives/>

****Phone numbers will only be used by the New Business Review Committee in case there are questions for the delegate who submitted the New Business Item Content.**

New Business Items are due to the Speaker of the House by **January 23, 2023** (60 days prior to the start of the first House session). Consideration of urgent items can be presented with a suspension of the House Rules at the session where New Business will be acted upon. Please submit New Business Items to the Speaker of the House via email at hod@aphanet.org.