

REPRODUCTIVE RIGHTS AND HEALTH: Contraception and abortion access in Sonoma County

An initial report from the Sonoma County Commission on the Status of Women 2022-2023, adhoc committee on Reproductive Rights and Health (Dr. Nancy Padian and Joanne M. Brown)

Introduction: Access to contraception and abortion products is defined by the availability of related products and services for those who want them. A critical component of access is awareness of existing services and an understanding of an individual's rights to access. The objective of the adhoc committee was to examine these issues among a subset of young women in Sonoma County (Sonoma Valley, District One).

Pilot: District-one specific activities

Sonoma Valley Health Clinic (SVHC): Adhoc committee team members began in District One with interviewing the CEO of the Sonoma Valley Health Clinic (Cheryl Johnson). Ms. Johnson confirmed that there were no adolescent-specific public health clinics in District 1, either offered through her own clinic or the public schools. The absence of such clinics is notable given the enactment of the California Healthy Youth Act (CHYA) in 2016, which requires comprehensive sex education for middle school and high school students, including a working knowledge of FDA-approved contraceptive methods.

Sonoma Valley Unified School District (SVHC): To further explore how the school district could integrate the requirements of CHYA and options for young people in District 1, we met with the President of Sonoma Valley Unified School District (Ann Ching) to discuss the project and obtain her support and endorsement for us reaching out to the Sonoma Valley High School. She connected us with the Sonoma Valley Superintendent of Schools (Dr. Kaufmann). Both were very supportive of the CHYA and endorsed our plan to interview SVHS students about contraceptive access. Dr. Kaufman referred us to Wellness counselors at the High School.

Sonoma Valley High School focus groups:

After lengthy discussions with the two counselors from the Wellness program, it was agreed that a focus group would be the most comfortable format for gathering information from students. An existing group of students who regularly met at the Wellness Center was invited to participate in a focus group. We collaboratively worked on questions and agreed that the Wellness counselors would lead the group. They conducted two focus groups among girls: nine from SVHS and seven Creekside High School students, an alternative High School adjacent to SVHS. None of the participants reported using contraceptives. They reported only scattered, superficial knowledge about contraception, were unaware of how to access contraceptives other than through a doctor or clinic and were confused about their rights as minors to access contraception. In addition, they were concerned about stigma and confidentiality. Many parents of students had immigrated from other countries, and there was little family discussion about sex in the context of rigid gender roles. The girls got their information from Google, social media generally, or a trusted friend, possibly a teenager, as opposed to someone from school or from their parents. We discovered that students need to know and understand their legal rights (confidentiality, age access etc.) and where to obtain reliable information, including how to procure contraceptives and their cost.

In the subsequent debrief, the Wellness counselors reported that feedback from these groups was likely representative. They agreed that teachers need to be better informed about access to contraceptives

and should be invited to a focus group to assess their knowledge and identify what information they need when they counsel students. They also recommended convening at least two more focus groups (another for girls and one for boys) after the 2023-2024 school year begins.

Related Sonoma County Activities:

Junior Commissioners: At the same time as the pilot began, five junior commissioners affiliated with our project began related surveying access in other parts of the county. (See webpage Commission on the Status of Women, Junior Commission)

California Healthy Youth Act (CHYA): Team members did some preliminary work on implementation of CHYA and agreed that none of their schools were in compliance with the mandate. We arranged for them to talk with a representative of the local ACLU, who was studying the implementation of CHYA and had previously conducted a survey about the CHYA in Southern California. However, because there was no feasible way to examine the implementation of CHYA in local schools within the resources of the Junior Commission, the team abandoned this idea.

Surveying Access to Reproductive Health Care: As their main activity, the team contacted clinics in Sonoma County conducting reproductive health services for young people. All of the clinics agreed to be listed on a referral document. Six clinics in Santa Rosa, two in Petaluma, one in West County, and one in Forestville were listed. These Junior Commissioners developed an extensive social media campaign in their schools and throughout the community, which included flyers and a dynamic Instagram account. They made presentations for school clubs, clinics, schools where in addition to referral information, they also included information about sexually transmitted diseases and treatment, forms of contraception, abortion, reproductive rights, including for LGBTQ students. Based on their work, they ascertained that Planned Parenthood in Santa Rosa and the Forestville Teen Clinic were the only public clinics in the county where young women could directly access abortion.

As a final referral activity, we worked with the Phoenix Teen clinic (Petaluma) and developed Stickers with a QR code for all of the referral materials that they developed. Distributing the stickers incorporating the information obtained about pharmacy resources will be among the initial activities of year 02.

Pharmacy access study (summer 2023): In recent years, the role of pharmacies in expanding access to women's reproductive health services has significantly expanded. In 2013, California Senate Bill 493 was passed and signed by the Governor, allowing pharmacists to furnish hormonal contraceptives to minors without a physician's prescription and without parental consent. In late 2022, the FDA permitted Mifepristone to be made available directly from pharmacies and legislation was passed supporting access to Mifepristone in California. Consequently, examining access to hormonal contraceptives through pharmacies became the second focus of the study. We planned to complete a county wide survey during the 2023 summer and were supported by a grant from District One Supervisor Susan Gorin through TOT funds. Two high school seniors, a Junior Commissioner and a Phoenix Clinic intern, were employed to administer the survey. Dr. Nancy Padian and Joanne Brown from the CSW supervised the project. The interns were trained, and the interview format and data collection form were created and vetted by Dr. Sally Rafie, at the University of California San Diego (UCSD) Health and an assistant clinical professor at the UCSD Skaggs School of Pharmacy and Pharmaceutical Sciences who developed the website; <https://birthcontrolpharmacist.com/>. Included were developed standardized questions for

each pharmacy regarding access to hormonal contraceptives and medical abortion. based on those developed by Dr. Rafie, such as “Does your pharmacy prescribe hormonal contraception?” and “Does your pharmacy prescribe/have they prescribed mifepristone specifically?”.

The interns began the interviewing using the baseline list of pharmacies for Sonoma County published at <https://www.countyoffice.org/> a national database that tracks county government and community services. Based on this list, they mapped all pharmacies in Sonoma County. Unfortunately, the baseline list of pharmacies was not up to date. Through referrals and follow-up with identified pharmacies, it was discovered that several pharmacies were not on the original baseline list.

During the summer, pharmacists at forty two (42) pharmacies were interviewed, including twenty seven (27) pharmacies under corporate umbrellas (CVS, Target, Walmart, Rite Aid, Safeway, Walgreens, Raley’s, and Costco) and fifteen (15) independent pharmacies. The interns interviewed most pharmacists as a team. Only nineteen (19) pharmacies reported that they prescribed hormonal contraception without a prescription or parental consent. Only two pharmacies (CVS in Windsor and Deer Park Pharmacy in Saint Helena) stated that they were able to prescribe Mifepristone even though pharmacy distribution was approved in the fall of 2022 .

Of the nineteen (19) who were able to prescribe hormonal contraception, fourteen (14) indicated they would like help advertising these services and accepted our flyer outlining different methods of advertising. The remaining five were unsure of their ability to advertise without corporate permission. Fifteen (15) of the nineteen (19) indicated that they would like to be included on the Birth-control pharmacist web-based registry <https://www.birthcontrolpharmacies.com>, and the interns assisted them with registering.

Of the remaining twenty three (23) pharmacies which did not prescribe hormonal contraception without a prescription, four indicated that they would like training in order to do so. One pharmacist was already in the process of training and the three others indicated their intention to obtain the training. Information was provided to each regarding how to access training.

YR 02

The first activities of year 02 are to interview the remaining 15 pharmacies and work with pharmacies (including their corporate headquarters) which prescribe hormonal contraception to advertise their services using a social and print media campaign. We will follow up with independent pharmacies to track the dispersal of Mifepristone as it becomes more accessible and the OPill (the over-the-counter birth control pill), which should be available in the winter of 2024. The Ad Hoc work plan for 02 will involve Commissioners from all Supervisorial Districts and include a guide for surveying schools based on the work done in Yr 01 in the Sonoma Valley.