

Nuestra Salud, Nuestra Prevención Just the Facts: Latinas & Contraception

The National Latina Institute for Reproductive Health (NLIRH) strongly supports access to a full range of safe, effective, and affordable contraceptive methods, including emergency contraception (EC). NLIRH applauds full coverage of contraception as preventive care under the Affordable Care Act (ACA) and as part of a robust set of women's health services. Ensuring access to birth control for all Latinas will improve our health and strengthen our communities by supporting a woman's individual decision-making, rather than allowing her ability to pay, or her employer, dictate whether she can have the care she needs. An overwhelming majority of American families, including Latinas, use contraception to plan the timing and number of their children. Birth control access is critical to ensuring that Latinas are able to pursue their educational and career goals, and provide for the children they may already have. Birth control coverage is also a matter of economic justice: millions of women today simply cannot afford the contraception they need, and others are struggling to do so.

Fact: The overwhelming majority of Latinas, including Catholic Latinas, use contraception at some point in their lives.

- 97% of Latinas who have ever had sex have used contraception.
- 96% of sexually active Catholic Latinas have used a contraceptive banned by the Vatican.
- 90% of married Catholic Latinas use modern contraception.

Fact: Latinas continue to face barriers in consistently accessing contraception that is affordable and available, and as a consequence experience unintended pregnancy at twice the rate of their white peers.

- 1 in 3 Latinos are currently uninsured. Furthermore, many Latinas do not have access to a provider that they can get to, that can speak their first language, and can provide culturally competent reproductive health care.
- Datinas are disproportionately poor and birth control copays are expensive. According to the Guttmacher Institute, 50% of women aged 18 to 34, including Latinas, said there had been a time when the cost of a prescription contraceptive prevented consistent use.
- Poor women in the U.S. are four times more likely to have an unplanned pregnancy than women who have more resources, due in large part to lack of access to contraception and other reproductive health care.

Fact: Most Latinas, including Catholic Latinas, support the coverage of contraceptives in public and private insurance.

- 89% of Latina voters 18-34 support contraceptive coverage without copays for all women.
- © Coverage of contraceptives without copays as preventive care is one of the most popular provisions of the health reform law (Affordable Care Act).
- Polling data indicates that even if church leaders take a different position, when it comes to the law, most religious Latinos are comfortable with and support birth control and other reproductive health care.
- No woman should have to decide between paying for her birth control and putting food on her family's table, paying the rent, or paying for childcare or school. Covering birth control would save women \$600 or more each year. In this economy, that savings could mean the world to struggling families.

Fact: Access to safe, effective, and affordable contraception, including emergency contraception, is good for the health of Latinas, good for the wellbeing of their families, and good for our communities.

- Using contraceptives to plan and space pregnancies improves the health of a woman and her children— those she already has and those she will have in the future. Ensuring that women have the tools to plan the number and spacing of children reduces the risk of maternal death, low birth weight, and infant mortality.
- One of the most basic human rights is the ability to make decisions about one's own life, including reproductive health decisions. Being able to make her own decisions is essential to a woman's health and dignity and to attaining justice for our communities.