

Economy and Politics Leave Young Latinas Struggling to Afford Birth Control

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In the United States, Latinas are the group that would most benefit from the push to provide no-cost birth control to all women — because they are among the ones least able to afford birth control. According to a recent survey commissioned by Planned Parenthood Federation of America, Latinas in their prime childbearing years, ages 18 — 34, are more likely than all other young women to use prescription birth control methods — like the Pill — inconsistently because they cannot afford the insurance co-payments. Inconsistent use of birth control lowers its effectiveness.

As a Latina leader on reproductive health care, I know that young Latinas are the women most likely to have struggled with the cost of prescription birth control at some point in their lives. These women — our sisters, cousins, co-workers, friends, and mothers — are balancing mortgage and tuition payments with putting food on the table for their families, not to mention paying for their own health care. Lacking sufficient resources to pay every bill, they will sometimes save money by not taking their birth control as prescribed.

As the economic downturn drags on without relief for low-income women, this precarious financial juggling act has become increasingly harmful to women's health. The doctors and nurses who staff Planned Parenthood health centers have seen a growing number of patients who must choose between basics like rent and health care costs such as monthly health insurance premiums and prescription co-payments. Despite their best efforts, many Latinas who struggle to afford birth control are facing unintended pregnancies as a result.

This month, a national panel of medical experts in Washington, DC, began exploring whether or not insurance plans should eliminate the high cost of co-payments for birth con-

trol. Although this panel is focused squarely on medical science, most of the public attention has focused on the politics of reproductive health care. In a dispute between those who morally approve of birth control and those who do not, the lost voices in the debate are those of young Latinas trying to plan their future.

Health care reform will extend insurance coverage to 32 million people who would have been uninsured, including millions of Latinos. This is extraordinarily welcome news in light of the U.S. Census Bureau report that Hispanics are twice as likely as whites to have no private or public health insurance of any kind. Hispanic families are the fastest growing segment of the population, yet they suffer disproportionately from economic distress and limited access to health care and education.

Eliminating co-payments for birth control is one simple reform that would significantly improve the health of Latinas and their families. A huge majority of young Latinas — 89 percent — believe birth control costs should be available with no co-pay. This overwhelming level of support stems from the real experiences of young women struggling to balance financial and family priorities. In fact, more than half the Latinas in this group have experienced difficulty using birth control consistently due to cost barriers.

Like all women in our great country, Latinas deserve the opportunity to determine if and when they will have children, and to make their own personal and responsible decisions about birth control methods. Consistent access to birth control will help many women reach their parenting or educational goals while managing difficult economic circumstances such as limited income and a high unemployment rate.

As the medical experts weigh their recommendations about birth control costs, the experiences of Latinas must be considered. A commonsense application of the new health care reform law that respects the reproductive health needs of Latinas will benefit Latina families and, ultimately, the nation as a whole.