Providing Emergency Contraception for Rape Survivors

By ACSH Staff — June 21, 2005

When a woman goes to a hospital right after being sexually assaulted, she shouldn't have to worry that she will receive subpar health care. Currently, however, depending on where she turns for help, she might not have access to or even find out about emergency contraception, which is the standard, effective, and safe way to help prevent pregnancy after unprotected intercourse.

A bipartisan bill introduced last week by Senators Hillary Rodham Clinton (D-NY), Jon Corzine (D-NJ), and Olympia Snowe (R-ME) would require hospitals receiving federal funds to provide rape survivors with information about and access to emergency contraception. The legislation, known as the Compassionate Assistance for Rape Emergencies (CARE) Act, comes at a time when other proposals to ensure availability of contraception are the subjects of intense political debate -- proposals such as making Plan B (a form of emergency contraception) available over the counter and a bill ensuring that all pharmacies fill prescriptions for contraception.

The CARE Act, however, should garner broader political support, even from some religious conservatives, than those measures. Since the legislation deals specifically with medical care after rape, it should not raise concerns about contraception leading to promiscuity, which may be the worry behind the FDA's ongoing delay in granting over-the-counter status to Plan B despite an FDA advisory panel's recommendation to do so. Even the ethical directives for Catholic health care permit contraception after cases of sexual assault (USCCB, 2001), and some Catholic bioethicists -- including the senior director of ethics at the Catholic Health Association -- have argued that providing on-request emergency contraception to rape survivors is in keeping with Catholic directives (Hamel and Panicola, 2002).

The CARE Act can be an important step in ensuring access to emergency contraception precisely when it is needed. Even if Plan B is eventually granted over-the-counter status and/or legislation passes requiring pharmacies to fill prescriptions for it, the rules set forth by the CARE Act would be useful, ensuring that survivors of rape receive information about and access to emergency contraception in a timely manner after being assaulted.

The CARE Act was previously introduced into Congress in 2003 but was rejected. To contact Senators regarding the Compassionate Assistance for Rape Emergencies (CARE) Act, see http://www.senate.gov/general/contact_information/senators_cfm.cfm.

References


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