



EC101: WHAT CAMPUS STAKEHOLDERS NEED TO KNOW ABOUT EMERGENCY CONTRACEPTION

Students on your campus may approach you about setting up direct peer-to-peer distribution of emergency contraception and other sexual health products. Here's what you need to know.



What is EC?

Emergency Contraception (EC)* prevents pregnancy before it happens.

- EC is sometimes called the morning-after pill or Plan B.
- EC is different from the abortion pill, which ends a pregnancy. EC is similar to regular birth control.
- It can prevent pregnancy up to 5 days^[1] after sex if contraception isn't used or doesn't work, or in cases of sexual assault. It's best to use it as soon as possible after sex.

There are two kinds of EC pills^[1]:

- Levonorgestrel EC (such as Plan B One-Step[®], AfterPill[®], and others) is available without prescription on store shelves.
- Ulipristal acetate EC (ella[®]) is available only by prescription.



Is EC safe?

Yes, EC is extremely safe.

- EC pills are safer than many other non-prescription drugs, such as Tylenol[®].^[2]
- Side effects (such as nausea, headache, and changes to the next period) are generally mild and go away on their own. Many people don't experience any side effects at all.^[3]
- EC won't harm or end a pregnancy if someone takes it when they are already pregnant.^[4]
- Taking EC – even multiple times within the same month or year – does not affect future fertility.^[4]



How does EC work?

EC prevents or delays ovulation (release of an egg from the ovary).^[5]

- If there's no egg, there's nothing for sperm to fertilize and pregnancy can't occur.
- If someone is already pregnant, taking EC will not harm or end the pregnancy.^[4]
- The different types of EC pills should not be used together - they could cancel each other out.^[6]

* This fact sheet focuses on EC pills. However, a copper IUD inserted within 5 days after unprotected sex can also be used as EC and can prevent pregnancy for at least 12 years if kept in place.^[7]



How effective is EC at preventing pregnancy?

The exact effectiveness of EC is hard to calculate, but here are some things to know:

- ella® is more effective than Plan B One-Step® and other non-prescription brands.^[8]
- EC pills may not work as well for people with higher body weight.
 - Plan B One-Step® and other OTC brands may be ineffective for people over 165 pounds.^[9]
 - ella® is a more effective option, but may not work for people over 195 pounds.^[9]
- EC is an important option that should be available to everyone, but it isn't meant to be a long-term substitute for regular contraception because it's not as effective.^[10]



Does EC encourage young people to have more sex or riskier sex?

No - several studies^[11] have shown that making EC more available does not increase sexual risk-taking.

- Using EC reduces sexual risk by reducing the likelihood of pregnancy, but it does not prevent sexually transmitted infections.
- Providing sexual health information and services to young people equips them to take charge of their health and safety.



Where is EC available?

EC is available at pharmacies, stores, and online.

- Levonorgestrel EC (Plan B One-Step®, AfterPill® and others) is available without prescription on store shelves.^[12]
 - There are no age or gender restrictions. Anyone of any age can buy it and no one should be asked for ID.^[12]
 - Young people should know that some stores still keep EC behind the counter or ask for ID, even though that's no longer required by government regulations.
- ella® is available by prescription from family planning clinics and family doctors.^[13] They can also write a prescription for Plan B One-Step® (and value brands) if needed for insurance purposes.^[14]
- Both types of EC pills can be prescribed and ordered online through services such as [Nurx](#) or [Planned Parenthood Direct](#).
- Not all online EC providers offer next-day delivery; since EC is more effective the sooner it is taken, it's a great idea to have EC on hand before it's needed.



How much does EC cost?

EC can be expensive, and the price may be a barrier.

- The non-prescription type of EC (Plan B One-Step®, AfterPill® and others) costs^[14]:
 - \$35-\$50 in stores
 - \$11-\$25 online, often without next-day shipping.
- ella® costs \$45-\$50 without insurance.^[13]
- Both types of EC pills should be covered by insurance, but in most states, you need a prescription for insurance coverage (even for the non-prescription type of EC like Plan B).^[13,14]



Why is access to EC important for young people?

The sooner EC is taken after sex, the more likely it is to work.^[1]

- EC provides a last chance to prevent pregnancy after unprotected sex, coerced sex, or sexual assault.
- EC helps young people maintain bodily autonomy and prevent unwanted pregnancy.
- All young people should have access to EC, regardless of gender.
 - Purchasing EC when it's needed is an important way for young men to share responsibility for pregnancy prevention.
 - Transgender youth may be at risk for pregnancy, and should be able to get EC any time they need it.



What are some common barriers to accessing EC?

Young people often face barriers to getting EC when they need it.^[15]

- **Information:** Lack of accurate and comprehensive sex education in general, and lack of knowledge about EC.
- **Cost:** Levonorgestrel EC costs \$40-50 at pharmacies, putting it out of reach for many students.
- **Convenience:** Limited hours at pharmacies and student health centers, especially at night and on weekends when need for EC might be greatest.
- **Travel:** Long distances to pharmacies and clinics, and lack of transportation.
- **Institutional:** Pharmacies, clinics, and student health centers not stocking EC on the shelf, enforcing outdated age restrictions, or refusing to sell EC.
- **Interpersonal:** Gatekeepers at pharmacies, clinics, and student health centers making students feel judged, embarrassed, or intimidated when seeking EC.
- **Trauma:** Students who experience sexual assault may not feel able to speak out or seek medical help, particularly if reporting and an investigation would be required.



Is it legal for students to distribute EC to other students?

Levonorgestrel EC (such as Plan B One-Step[®] and AfterPill[®]) is an FDA-approved over-the-counter medication, like Tylenol[®] or Advil[®].

- There are generally no licensing or registration requirements to distribute OTC drugs that would prohibit peer-to-peer distribution of EC in the US.^[16]
- Handing this type of EC to another person is the same as handing ibuprofen or any other OTC medication to a friend.
- On several campuses (including Georgetown, Hampton, Towson State, and Tulane), students operate peer-to-peer distribution networks that are unaffiliated with the university.
- There is little risk of legal liability for harms associated with providing OTC EC. OTC drugs seldom carry liability for anyone other than the manufacturer (because they must by law include a label that is sufficient on its own to inform the user about how to use the product safely).^[16]
- Students should pay careful attention to labeling, storage requirements, and product expiration.^[16]



Why is peer-to-peer distribution of EC a good idea?

EC can be difficult for students to get when they need it. Peer-to-peer distribution can make it easier.

Timely Access

- Time is of the essence when it comes to EC – the sooner EC is used, the more likely it is to work.
- Peer-to-peer distribution allows students to get EC and other sexual health products when student health services and pharmacies may be closed, especially during nights and weekends.

Privacy

- Students may prefer to get EC from other compassionate students to avoid the potential stigma and judgment they may encounter at a pharmacy or campus health service.
- Students can use anonymous texting and email services to protect their fellow students' privacy.

Cost

- The price of EC can be prohibitive. Most student EC distribution networks offer EC at no cost or for a voluntary donation.



How can campus stakeholders improve access to EC?

Campus decision-makers can improve EC access on campus through student health services, vending machines, and supporting student peer-to-peer distribution of EC.

- Support – or at least allow – interested students to set up a peer-to-peer EC distribution network.
- Support installation of at least one vending machine on campus that includes EC, condoms, and other sexual health products.
 - Do all you can to make it affordable, including stocking a value brand EC product in the machine and subsidizing costs if possible.
 - Consider convenience, accessibility (including for students with disabilities), and privacy.
- Learn your student health center's EC policies and practices. Encourage student health centers to stock both types of EC pills and offer them at no (or low) cost to any students who need them.
- Be sure that health center staff provide nonjudgmental, respectful care.
- Encourage on-campus stores and pharmacies to sell EC on the shelf.
- Help make EC affordable for all students – if possible, create policies to provide EC at no (or subsidized) cost and include it in student health coverage.
- Have a physician or advanced practice clinician provide standing orders for EC at the campus pharmacy so it can be covered by insurance.

The bottom line:

Improving access to EC on campus is an important way that you can support students in taking care of their reproductive health needs and achieving their personal, educational, and professional goals. Contact the American Society for Emergency Contraception (kelly@americansocietyforec.org) for more information on how to improve access to EC on your campus.

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