



Indiana Facts – Family Planning and Poverty

- In November, the U.S. Health and Human Services agency gave Indiana a failing grade for its efforts to provide women's health care.
- The Guttmacher Institute ranks Indiana 49th nationally in terms of providing contraceptive services and 31st highest teenage pregnancy rate of any state.
- According to the Indiana State Department of Health (ISDH), 31 Hoosier teens ages 10-19 become pregnant every day; Nearly 10 of those are age 17 or younger.
- According to the Annie E. Casey Foundation reported that one in five Hoosier children lives in poverty, a 21 percent increase since 2000.
- 13% of all Indiana women ages 15-44 live in poverty.
- More than half of all Indiana births are paid for by Medicaid.
 - Teen childbearing cost Indiana taxpayers \$3.6 billion between 1991 and 2004.
 - Every public dollar spent on family planning services saves the federal and state governments three dollars in Medicaid costs for prenatal and newborn care.

At Planned Parenthood, we know that:

- Poor birth spacing, raising a child as a single parent, and giving birth at a young age are all factors that contribute to diminished standards of living for Hoosier women and their children.
- Young and/or single mothers are more likely to suspend their pursuit of education, have higher poverty rates, less chance for career advancement and poorer health outcomes.

Birth Control - Basic Health Care

- Ninety-eight percent of sexually active women in the U.S. use contraception at some point during their lifetimes.¹
- According to Catholics for a Free Choice, nearly nine in ten American women believe that access to health care should be a right in this country.²
- According to the ACLU, 85% of the public agreed that pharmacies have a professional obligation to provide patients with any medication that has been legally prescribed, including contraception.³

At Planned Parenthood, we know that:

- The purpose of birth control is to prevent pregnancy. Pregnancy, as defined by the medical community, begins when a fertilized egg is implanted in the uterus. If a pharmacist believes otherwise, women will be denied basic health care.

¹ Guttmacher Institute. (2005, accessed 2007, June 5). Facts in Brief: Contraceptive Use. [Online]

² Catholics for a Free Choice, Religion, Reproductive Health and Access to Services: A National Survey of Women

³ http://www.aclu.org/images/asset_upload_file576_29402.pdf