

# RURAL HEALTH

ASTHO, with support from CDC, the Centers for Medicare and Medicaid Services, and the HHS Office of Population Affairs, formed the Increasing Access to Contraception (IAC) Learning Community. This project comprises 27 states and territories and aims to disseminate strategies and best practices for implementing policies and programs leading to increased access to a full range of contraceptive options.

Many individuals have difficulty **accessing** healthcare services, particularly those living in rural or frontier areas.

Rural populations face several challenges to receiving preventative contraceptive care, including:



Difficulty with upfront costs and stocking due to low demand.



Lack of consumer awareness.

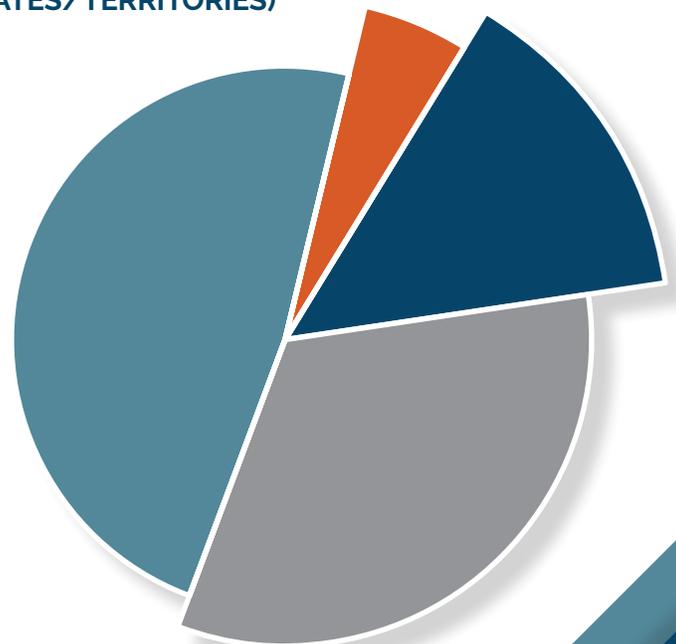
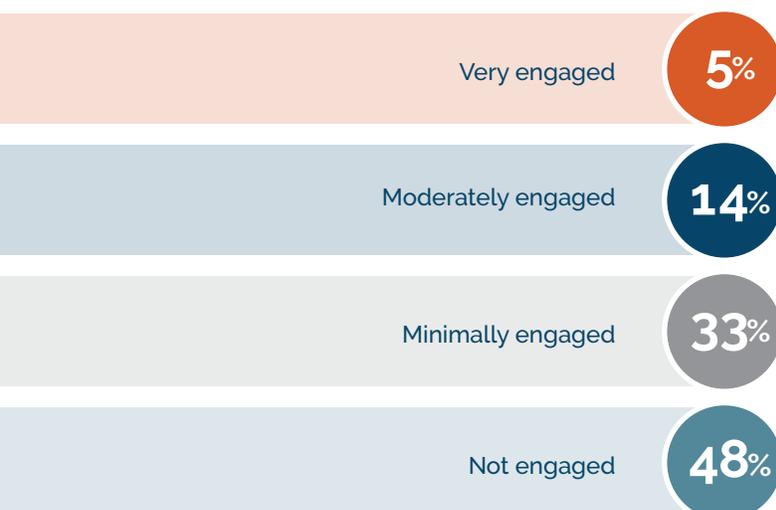


Shortage of physicians.



Patient and provider transportation issues.

## LEVEL OF REPORTED ENGAGEMENT BETWEEN RURAL HEALTH ASSOCIATION AND IAC LEARNING COMMUNITY PARTICIPANTS (N = 21 STATES/TERRITORIES)





My experience is mostly that people who live in rural communities don't get the [preventative] information until they're presenting for care. We're trying to increase that. A lot of people are getting their awareness about contraception once they're pregnant."

—IAC participant on educating people about contraception

## INCREASING ACCESS TO CONTRACEPTION IN RURAL AREAS: BARRIERS AND PROMISING STRATEGIES

### BARRIER



**Provider and facility shortages in rural areas and uncertainty about mid-level providers' capacity from supervising physicians.**

### STRATEGY

**Train community health aides** on insertion of a contraceptive implant.



**Difficulty monitoring family planning efforts and barriers in rural or frontier areas compared to more urban settings.**

Include urban, rural, and other geographic subgroup analyses in data monitoring to **identify potential disparities** in contraceptive access and uptake.



**Access to immediate postpartum long-acting reversible contraception.**

**Engage with family physicians** who deliver babies and can potentially leverage resources or modify protocol to stock and insert devices.



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