Legislation Details (With Text)

File #:	Res 0089-2024	**Version:**	*	**Name:**	Require each institution within the State University of New York and the City University of New York to have at least one vending machine making emergency contraception available for purchase. (S.4400/A.4091)
Type:	Resolution			**Status:**	Filed (End of Session)
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Title: Resolution calling on the New York State Legislature to pass, and the Governor to sign, S.4400/A.4091, to require each institution within the State University of New York and the City University of New York to have at least one vending machine making emergency contraception available for purchase.

Sponsors:

Indexes:

Attachments: 1. Res. No. 89, 2. February 28, 2024 - Stated Meeting Agenda, 3. Hearing Transcript - Stated Meeting 2-28-24, 4. Minutes of the Stated Meeting - February 28, 2024

Date	Ver.	Action By	Action	Result
2/28/2024	*	City Council	Introduced by Council	
2/28/2024	*	City Council	Referred to Comm by Council	
12/31/2025	*	City Council	Filed (End of Session)	

Res. No. 89

Resolution calling on the New York State Legislature to pass, and the Governor to sign, S.4400/A.4091, to require each institution within the State University of New York and the City University of New York to have at least one vending machine making emergency contraception available for purchase.

By Council Members Gutiérrez, Rivera, Dinowitz, Brewer and Hanif (in conjunction with the Brooklyn Borough President)

Whereas, The most recent available data by the Centers for Disease Control and Prevention (CDC) reveal that as of 2019, an estimated nearly 14 million or 71.5 percent of women between the ages of 18 and 24 years were at risk for unintended pregnancy in the United States (U.S.); and

Whereas, Per CDC, nationally, an estimated almost 10 million or 69.3 percent of women between the ages of 18 and 24 years needed contraceptive services in 2019; and

Whereas, Also, per CDC, as of 2019, an estimated 490,700 or 72.3 percent of women between the ages

of 18 and 24 years were at risk for unintended pregnancy in New York State; and

Whereas, CDC data show that in 2019, an estimated 345,900 or 70.5 percent of women between the ages of 18 and 24 years needed contraceptive services in New York State; and

Whereas, 2019 CDC data also demonstrate that more Hispanic and Black, non-Hispanic New Yorkers were at risk for unintended pregnancy, at 89.2 percent and 85.5 percent, respectively, than among White, non-Hispanic New Yorkers, at 77.5 percent; and

Whereas, Similarly, per 2019 CDC data, more Black, non-Hispanic and Hispanic New Yorkers needed contraceptive services, at 82.4 percent and 81.3 percent, respectively, than among White, non-Hispanic New Yorkers, at 67.1 percent; and

Whereas, Importantly, according to 2019 CDC data, New Yorkers without health insurance coverage had a higher need for contraceptive services than among those with insurance coverage, at 76.4 percent and 73.4 percent, respectively; and

Whereas, These demographics mirror those of students at the City University of New York (CUNY) and the State University of New York (SUNY); and

Whereas, For example, as of Fall 2019, over 74 percent of students across CUNY colleges were under 25 years of age, and as of Fall 2021, the percentage of students aged 24 years and under ranged across all but two SUNY colleges between 69 percent and 98 percent; and

Whereas, According to the Fall 2022 National College Health Assessment by the American College Health Association, 83.5 percent of U.S. college students used at least one method of contraception to prevent pregnancy; and

Whereas, One available method of contraception is emergency contraception, which can prevent up to 95 percent of pregnancies when taken within 5 days after intercourse, and which is indicated for such situations as unprotected intercourse, concerns about possible contraceptive failure, incorrect use of contraceptives, and sexual assault; and

Whereas, The most recent available CDC data indicate that an estimated 33.5 million or 26.8 percent of U.S. women experienced completed or attempted rape at some point in their lifetime; and

Whereas, A study published in 2019 in the Journal of Interpersonal Violence found that 8.4 percent of U.S. women experienced reproductive coercion, including partner condom refusal, during their lifetime; and

Whereas, An analysis by the Guttmacher Institute of the most recent available data revealed that in 2015, among U.S. women who used emergency contraception, 41 percent did so out of concern that their regular method would not work, and 50 percent did so after unprotected sex; and

Whereas, According to the World Health Organization (WHO) and the Office on Women's Health in the U.S. Department of Health and Human Services (HHS), emergency contraception methods do not harm future fertility, do not terminate or harm already occurred pregnancy, and work primarily by preventing or delaying ovulation; and

Whereas, According to the WHO and HHS, the side effects of emergency contraception are uncommon and mild, similar to those of oral contraceptive pills, such as nausea and vomiting, slight irregular vaginal bleeding, and fatigue, which resolve without further treatment; and

Whereas, In the U.S., emergency contraception pills first became available by prescription in 1999, and in 2006, the two-dose regimen of levonorgestrel pills was approved by the U.S. Food and Drug Administration (FDA) for over-the-counter (OTC) sales at pharmacies for individuals aged 18 years or older, with the age limit lowered to 17 years in 2009; and

Whereas, In 2010, FDA approved ulipristal acetate, a new and more effective form of emergency contraception, under the brand name ella, for prescription-only status; and

Whereas, A one-pill regimen of levonorgestrel emergency contraception, under the brand name Plan B One-Step, was approved by FDA for OTC sales for all ages in 2013, with generic versions of this regimen approved for OTC sales in 2014; and

Whereas, According to the most recent available CDC data, as of 2019, 24.3 percent of U.S. women of

childbearing age used emergency contraception at least once, an increase from 11 percent in 2008 and 23 percent in 2015; and

Whereas, The National College Health Assessment by the American College Health Association revealed that as of Fall 2022, 17.3 percent of U.S. college students used emergency contraception at least once within the last 12 months; and

Whereas, The American Society for Emergency Contraception reports that as of 2023, among surveyed stores and pharmacies nationwide, 18 percent did not stock emergency contraception at all, and 27 percent imposed outdated age restrictions; and

Whereas, Per the American Society for Emergency Contraception, many student health centers on college campuses do not stock emergency contraception, enforce outdated age restrictions, or refuse to provide it, and among those that do make emergency contraception available to students, many have limited hours of operation, especially at night and on weekends when the need might be especially high; and

Whereas, A vending machine on a college campus, when placed in an accessible private space in a building with extended hours, can provide a confidential, lower-cost, convenient way for students to access emergency contraception and other sexual health products; and

Whereas, The American Society for Emergency Contraception notes that to lower barriers to access, at least 37 college campuses in 16 U.S. states introduced vending machines, which offer emergency contraception, condoms, and other sexual health products, including New York institutions such as Adelphi University, Barnard College, and Columbia University; and

Whereas, With the intent of ensuring that every student has access to affordable emergency contraception on the campuses of the State University of New York and the City University of New York to prevent unintended pregnancies and thereby give students a fair chance to achieve academically, State Senator Lea Webb introduced S.4400 in the New York State Senate, and Assembly Member Jessica González-Rojas introduced companion bill A.4091 in the New York State Assembly, which would require each institution

within the State University of New York and the City University of New York to have at least one vending machine making emergency contraception available for purchase; now, therefore, be it

Resolved, That the Council of the City of New York calls on the New York State Legislature to pass, and the Governor to sign, S.4400/A.4091, to require each institution within the State University of New York and the City University of New York to have at least one vending machine making emergency contraception available for purchase.

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