

Impact of legislation on adolescent reproductive health, contraception, and sex education in South Carolina

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Objectives

- Discuss the impact of reproductive legislation on South Carolina adolescents
 - Sex education
 - Contraceptive Access
 - Abortion access
- Updates on availability of comprehensive sex education for South Carolina adolescents
- Considerations for non-Ob/Gyn providers to provide adolescent sexual healthcare

Disclosures

- None



Isn't this an Ob/Gyn problem?

ADOLESCENT PREGNANCY → LONG-TERM MORBIDITY

- Gestational diabetes
- Hypertensive disorders of pregnancy
- Premature delivery
- Postpartum Hemorrhage
- Cesarean Delivery
- Low birthweight infant
- Postpartum depression
- Obesity
- Diabetes
- Asthma
- Substance abuse disorders
- Asthma

The New York Times

Teen Pregnancy Linked to Premature Death, Study Finds

A large analysis in Canada finds that teenagers who had babies were twice as likely to die before age 31.

[Share full article](#)



The new study is not the first to find an association between teen pregnancy and premature death but appears to be one of the largest and most robust. Tina Stallard/Exclusive by Getty Images



By [Roni Caryn Rabin](#)

March 14, 2024

Teen pregnancy increases the chances that a young woman will drop out of school and struggle with poverty, research has shown. Teenagers are also more likely to develop serious medical complications during pregnancy.

A brief recap...

- January 2021- SC passes a 6 –week fetal ‘heartbeat’ bill. Immediately tied up in courts.
- June 2022- Supreme court overturns Roe v Wade
- January 2023- SC supreme court strikes down decision keeping abortion in SC legal up to 20 weeks gestational age
- February 2023- SC supreme court Justice Kaye Hearn retires and is replaced
- August 2023- SC Supreme Court votes 6- week abortion ban is constitutional

Have SC’s abortion numbers changed after heartbeat bill? Here’s what the data says

BY JOSEPH BUSTOS

UPDATED MARCH 20, 2024 12:51 PM



People in support and against banning abortion wait to enter the Solomon Blatt Building at the South Carolina State House before a hearing on Thursday, July 7, 2022. JOSHUA BOUCHER
jboucher@thestate.com

Immediate impacts on reproductive health in SC

Justice John Few, who voted to strike down the previous six-week law, switched his vote in this decision.

He cited changes made by the General Assembly to ensure access to contraception, including emergency contraception called “Plan B.”

“The most impactful change from the 2021 Act to the 2023 Act is actually a category of changes that are designed to approach the idea of choice in terms of promoting active family planning,” Few wrote in a concurring opinion. “First, the 2023 Act encourages couples to avoid unwanted pregnancies by providing insured access to contraceptives.”

Provisional South Carolina abortion statistics

South Carolina's latest fetal heartbeat law was upheld by the state Supreme Court in August 2023 leading to a drop in abortions performed in the state, according to provisional data.

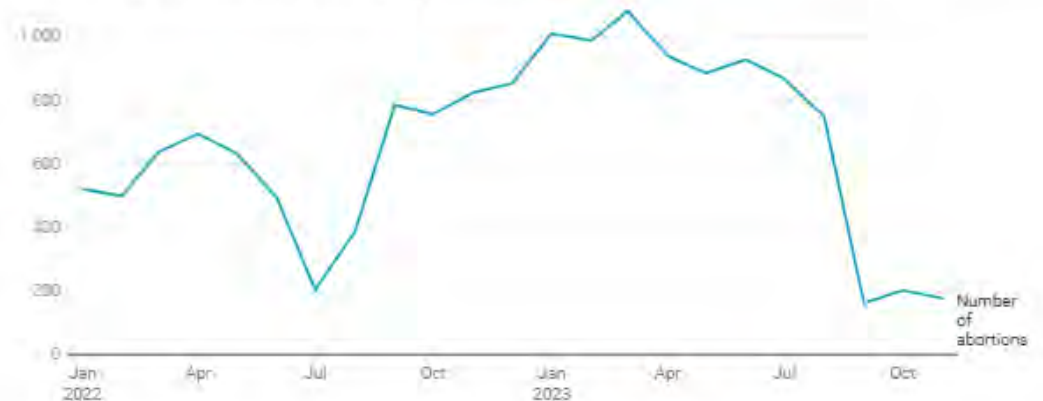


Chart: The State newspaper • Source: Department of Health and Environmental Control • [Get the data](#)

How does this influence SC adolescents?



SEXUAL EDUCATION



CONTRACEPTIVE ACCESS



ABORTION ACCESS

Sexual education



Comprehensive Sex Education (CSE)


RESEARCH ARTICLE | VOLUME 37, ISSUE 1, P7-8, FEBRUARY 2024

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NASPAG Position Statement: Comprehensive Sexuality Education for Adolescents

Swetha Naroji, MD   • Kristl Tomlin, MD

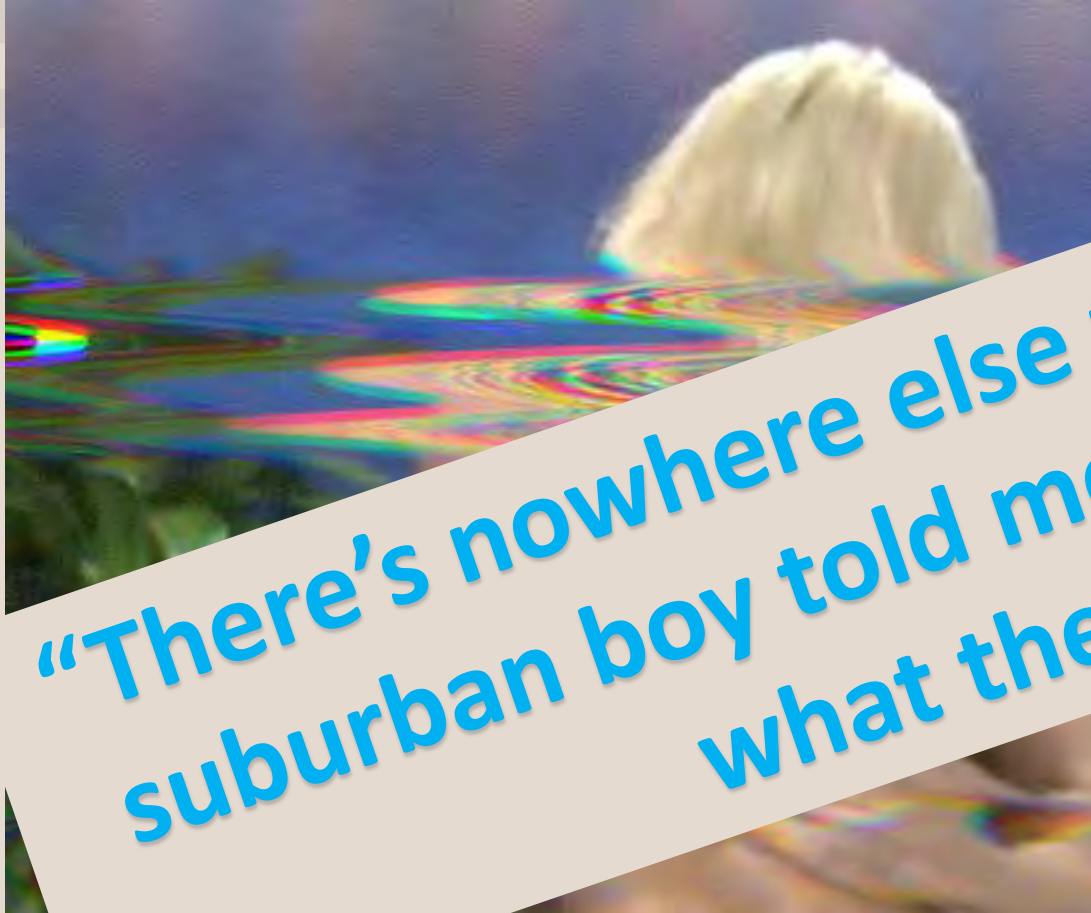
Published: October 09, 2023 • DOI: <https://doi.org/10.1016/j.jpag.2023.09.010> •

 Check for updates

This NASPAG Position Statement was created by Swetha Naroji, MD, MBA and Kristl Tomlin, MD, in collaboration with NASPAG Advocacy Committee members: Shelby Davies, MD, Rachel Goldstein, MD, Megan Harrison MD, FRCPC, Olga Kcuik, MD, Andrew Lupo, MD, Megan McCracken, MD, Mary Romano, MD, Ellen Rome, MD, MPH, Lauryn Roth, MD, Kathryn Stambough, MD, Megan Sumida, MD. It was approved by the NASPAG Board of Directors July 2023.

NASPAG asserts that comprehensive sexuality education (CSE) is vital to improving the physical and reproductive health of adolescents worldwide while also promoting the development of self-esteem and healthy interpersonal relationships.

CSE is an approach to sex education that provides accurate, age- and developmentally appropriate, unbiased, comprehensive information about sexuality and reproductive health. It aims to equip individuals with the knowledge, skills, attitudes, and culturally appropriate values necessary to make informed decisions about sexual and reproductive health.¹



“There’s nowhere else to learn about sex,” the suburban boy told me. “And porn stars know what they are doing.”

Boys Are Learning from Online Porn

American adolescents watch much more pornography than their parents know — and it’s shaping their ideas about pleasure, power and intimacy. Can they be taught to see it more critically?

Sticky areas

- Parental communication and involvement
 - Recognition of importance of parental involvement
 - Respectful and open communication between educators and caregivers
- Religious and cultural value systems
 - Recognition of the intersectionality of sexuality with society, religion, and cultural values including faith-based education

[House Bill 3728](#)

Mandates that parents are expected to be the primary source of their student's education regarding learning morals, ethics, and civic responsibility.

Passed (2023)

[House Bill 3764](#)

Affirms parents have fundamental right to direct education of their children and play a central role in what children are learning

Passed (2023)

[House Bill 3826](#)

Includes "profane language" in the prohibited materials deemed "harmful to minors." Exceptions are limited to age-appropriate teaching of a sex education program or human biology curriculum for which express written consent from the minor's parent or legal guardian has been obtained in advance.

Introduced (2023)

South Carolina Code of Laws
Unannotated

Title 59 - Education

CHAPTER 32

Comprehensive Health Education Program

(4) "Pregnancy prevention education" means instruction intended to:

(a) **stress the importance of abstaining from sexual activity until marriage**; Instruction in sexual education prior to 9th grade, is at the 'discretion of the school board'. (c) explain methods of contraception and the risks and benefits of each method. Abortion must not be included as a method of birth control. Instruction explaining the methods of contraception must not be included in any education program for grades kindergarten through fifth. **Contraceptive information must be given in the context of future family planning.**

South Carolina Code of Laws
Unannotated

Title 59 - Education

CHAPTER 32

Comprehensive Health Education Program

In order to develop its curriculum, each local school board must “appoint a [13]-member local advisory committee consisting of two parents, three clergy, two health professionals, two teachers, two students (one being the president of the student body of a high school), and two other persons not employed by the local school district.” South Carolina also states that the State Department of Education and local school boards must provide “staff development activities” for educators participating in the comprehensive health program.

PERSONAL HEALTH AND WELLNESS

Growth and Development / Sexual Health and Responsibility	
Performance Indicator	District Supported Curriculum
G-HS.1.1 Describe physical, social, and emotional changes that occur during adolescence.	"Health and Wellness" Teacher Edition
G-HS.1.2 Examine health behaviors that are specifically related to the male and female reproductive systems (e.g., self-examination).	
G-HS.1.3 Describe the benefits of abstinence.	"Pearson Health" Teacher Edition
G-HS.1.4 Identify the benefits, effectiveness, and risks of pregnancy prevention.	
G-HS.1.5 Explain signs, symptoms, methods of treatment, and prevention of sexually transmitted infections and diseases (STIs/STDs), human immunodeficiency virus (HIV), and acquired immunodeficiency disease (AIDS).	"Safer Choices" – Level 1 and 2
G-HS.1.6 Describe the scientific processes of fertilization, pregnancy, fetal development, and childbirth.	
G-HS.1.7 Discuss responsible prenatal, perinatal, and postnatal care.	<p>Note: The lessons used for Erin's Law Instruction during the Injury Prevention and Safety unit could be used for many of the Growth and Development unit performance indicators as well.</p> <p>It is recommended to teach Erin's Law during the Injury Prevention and Safety unit because parents may not opt their student out of Erin's Law instruction.</p> <p>Parents can opt their student out of certain parts of the Growth and Development unit.</p> <p>This will ensure that all students will receive Erin's Law instruction.</p>
G-HS.1.8 Identify the benefits of adoption.	
G-HS.2.1 Analyze the effects of family, peers, the media, and other factors on attitudes and behaviors regarding relationships and sexuality.	
G-HS.2.2 Compare and contrast the potentially positive and negative roles of technology and social media in relationships.	
G-HS.2.3 Discuss the influence of friends, family, media, society, and culture on the expression of gender, self-concept, and body image.	
G-HS.2.4 Describe the impact of STIs/STDs, HIV, and AIDS on individuals, families, and society.	
G-HS.2.5 Describe the impact of adolescent pregnancy on individuals, families, and communities.	
G-HS.2.6 Examine laws related to sexting.	
G-HS.2.7 Examine the laws related to bullying, cyberbullying, sexual harassment, sexual abuse, sexual assault, rape, and dating violence.	
G-HS.3.1 Access local resources for promoting reproductive health (e.g., obstetrician, gynecologist, urologist, state and county health departments).	
G-HS.3.2 Research local resources to help a survivor recover from sexual violence or abuse.	
G-HS.3.3 Identify valid resources for help if they or someone they know is experiencing bullying, cyberbullying, sexual harassment, sexual abuse, sexual assault, rape, domestic violence, and dating violence.	

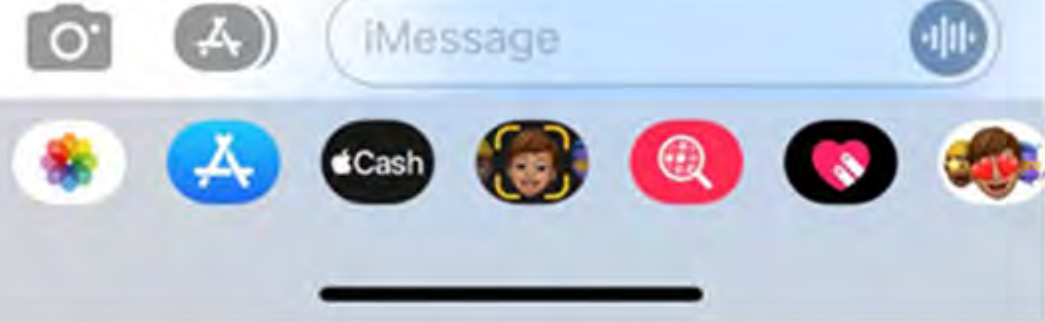
Yesterday 9:30 PM

Could [redacted] somehow email me/
get me a copy of some of the
sex ed material that the kids get
at [redacted]?

He is tasked

Cheers!

He says there is no official
curriculum, just gym teachers



Our Curriculum At-A-Glance

Each on-demand class comes equipped with a facilitator guide + in-class and at-home activities to make learning effective and easy



GIRLOLOGY®

A comprehensive 10-part girl's
puberty program ideal for 4th and
5th grade



GUYOLOGY®

Our "Just the Facts" 9-part boy's
puberty program ideal for 4th and
5th grade



SCIENCE OF REPRODUCTION®

Age-appropriate health education
ideal for 5th or 6th-grade mixed-
gender groups



MORE ESSENTIAL CLASSES

Our programs cover every key topic
from media literacy, body image,
anxiety, to consent!



A Sample Learning Path.

We'll help you create a custom learning path that is best for your school:

4th Grade

- Girlology & Guyology Puberty Classes

5th Grade

- The Science of Reproduction

6th Grade

- Be YOU (Body + Emotional Wellness)

[EMAIL US FOR MORE INFO](#)

SC sex education may be changed

Providing marriage

SECTION 5.A. Section 59-32-10(2) of the S.C. Code is amended to read:

(2) "Reproductive health education" means age appropriate, unbiased, comprehensive, and medically accurate instruction in human physiology, conception, prenatal care and development, childbirth, and postnatal care, but does not include instruction concerning sexual practices outside marriage or practices unrelated to reproduction except within the context of the risk of disease. Abstinence and the risks associated with sexual activity outside of marriage must be strongly emphasized may be encouraged and discussed, however, it may not be the only or primary method of prevention of pregnancy and sexually transmitted diseases.

B. Section 59-32-10(4) of S.C. Code is amended to read:

(4) "Pregnancy prevention education" means instruction intended to:

(a) ~~stress the importance of~~ encourage abstaining from sexual activity until marriage;

(b) help students develop skills to enable them to resist peer pressure and abstain from sexual activity;

(c) explain methods of contraception and the risks and benefits of each method. Abortion must not be included as a method of birth control. Instruction explaining the methods of contraception must not be included in any education program for grades kindergarten through fifth. Contraceptive information must be given in the context of future family planning.

Contraceptive Access



SC adolescent access to contraception

MINORS' ACCESS TO CONTRACEPTIVE SERVICES							
STATE	EXPLICITLY ALLOWS ALL MINORS TO CONSENT TO SERVICES*	EXPLICITLY AFFIRMS CERTAIN MINORS MAY CONSENT TO SERVICES-					NO EXPLICIT POLICY ^ξ
		Health	Married	Parent	Pregnant or Ever Pregnant	Other	
South Carolina			X [†]			16 years or Mature minor	
South Dakota			X [†]				
Tennessee	X						
Texas			X [†]			Φ	
Utah			X [†]			Φ	
Vermont			X [†]				
Virginia	X						
Washington	X						
West Virginia			X [†]			Mature Minor	
Wisconsin							X
Wyoming	X ^Ω						
TOTAL	23 + DC	2	19	5	5	10	4

ξ US Supreme Court rulings have extended privacy rights to include a minor's decision to obtain contraceptives.

* State policy does not specifically address contraceptive services but applies to medical care in general.

† State law confers the rights and responsibilities of adulthood to minors who are married.

‡ Physician may, but is not required to, inform the minor's parents.

Ω The state funds a statewide program that gives minors access to confidential contraceptive care.

Φ State funds may not be used to provide minors with confidential contraceptive services.

Contraceptive access is changing rapidly

Birth control pills now available without a prescription in SC, but access still unclear

BY SEANNA ADCOX SADCOX@POSTANDCOURIER.COM
DEC 2, 2022



A pack of birth control pills. File

FDA NEWS RELEASE

FDA Approves First Nonprescription Daily Oral Contraceptive

[f Share](#) [X Post](#) [in LinkedIn](#) [✉ Email](#) [🖨 Print](#)

For Immediate Release: July 13, 2023

[Español](#)

Today, the U.S. Food and Drug Administration approved Opill (norgestrel) tablet for nonprescription use to prevent pregnancy—the first daily oral contraceptive approved for use in the U.S. without a prescription. Approval of this progestin-only oral contraceptive pill provides an option for consumers to purchase oral contraceptive medicine without a prescription at drug stores, convenience stores and grocery stores, as well as online.

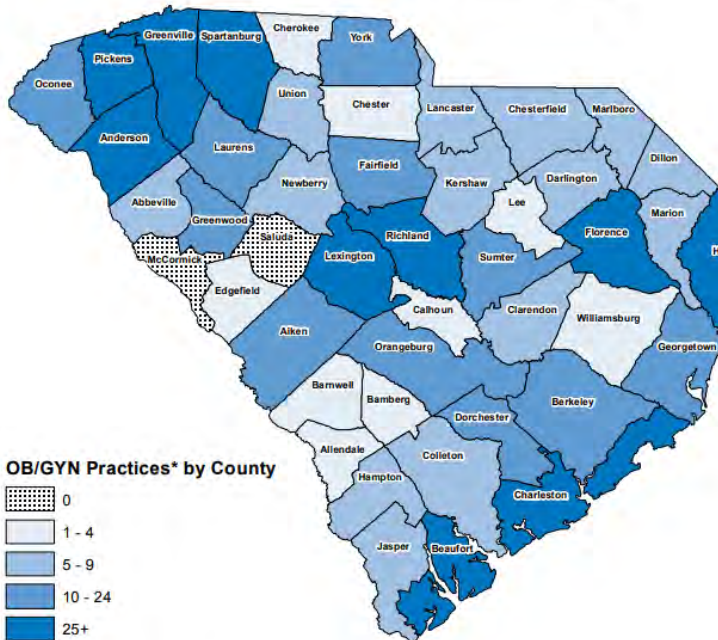
The timeline for availability and price of this nonprescription product is determined by the manufacturer. Other approved formulations and dosages of other oral contraceptives will remain available by prescription only.

“Today’s approval marks the first time a nonprescription daily oral contraceptive will be an available option for millions of people in the United States,” said Patrizia Cavazzoni, M.D., director of the FDA’s Center for Drug Evaluation and Research. **“When used as directed, daily oral contraception is safe and is expected to be more effective than currently available nonprescription contraceptive methods in preventing unintended pregnancy.”**

Access to contraceptive care in SC

South Carolina OB/GYN Practices
Also Showing Primary and Secondary Practices

Combined Primary and Secondary Practices by County



Division of Policy and Research on Medicaid and Medicare
Institute for Families in Society, University of South Carolina
Map created July 2013.

Sources: SC MMIS, December 2012; MAXIMUS, March 2013.



SOUTH CAROLINA
COUNTIES WITH NO
OB/GYN PROVIDERS



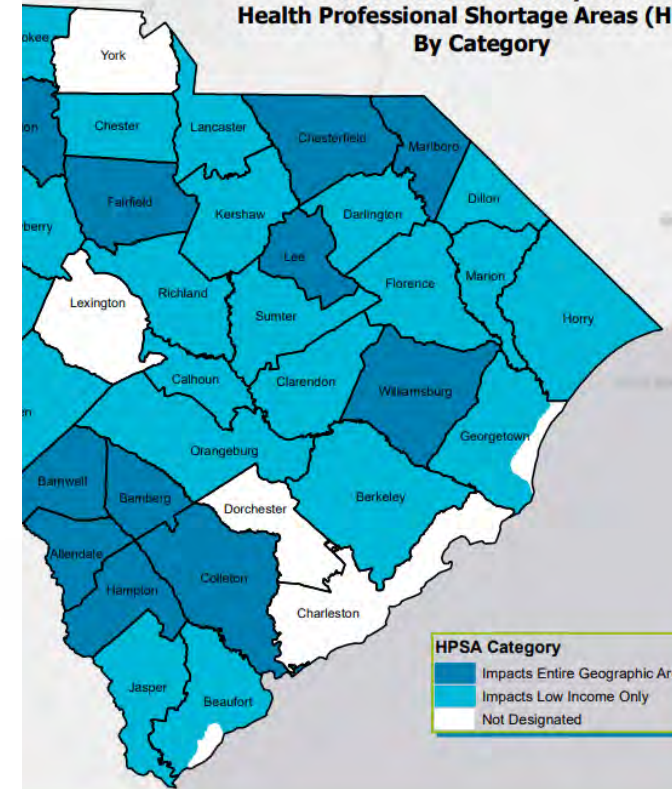
AVERAGE DISTANCE TO
A FAMILY MEDICINE
PRACTITIONER



300,000
WOMEN

IN NEED OF PUBLICLY
FUNDED
CONTRACEPTIVE
SERVICES

South Carolina Primary Care
Health Professional Shortage Areas (HPSA)
By Category



Chen et al (2022)

TABLE 1
Proportion of physicians prescribing pill, patch, or ring by provider type

Provider type	Pill, patch, or ring		Pill		Patch		Ring		Total providers
	n	%	n	%	n	%	n	%	
Obstetrician-gynecologist	36,887	73.1	36,839	73.0	15,166	30.0	24,721	49.0	50,489
Family medicine physician	72,725	51.4	72,529	51.3	6641	4.7	13,176	9.3	141,455
Internal medicine physician	28,527	19.8	28,314	19.6	1110	0.8	3514	2.4	144,155
Pediatrician	23,080	32.4	23,027	32.4	1242	1.7	474	0.7	71,167
Other physicians	24,478	3.0	24,152	2.9	747	0.1	1404	0.2	633,415
Total physicians	185,697	17.8	184,861	17.8	24,906	2.4	43,289	4.2	1,040,681
Advanced practice nurse	70,115	25.2	69,874	25.1	10,635	3.8	15,901	5.7	278,695
Nurse-midwife	6552	72.6	6545	72.5	2230	24.7	3627	40.2	9029
Physician assistant	25,464	19.4	25,388	19.4	2860	2.2	5190	4.0	130,926
Other health professions	2098	0.6	2061	0.6	37	0.0	165	0.0	337,755
Total advanced practice clinicians	104,229	13.8	103,868	13.7	15,762	2.1	24,883	3.3	756,405
Total	289,926	16.1	288,729	16.1	40,668	2.3	68,172	3.8	1,797,086

Differences among all provider specialties were statistically significant ($P < .05$) with Bonferroni corrections for multiple comparisons, with 1 exception: the difference between other physicians and other health professions prescribing the ring ($P > .999$). The "other physicians" category includes >200 specialties and provider types that are not typically considered general primary care or women's health providers (eg, anesthesiologist, general surgery physician, and dermatologist). We combined these categories into a single category for analysis. The "other health professions" category includes >50 provider types that are not typically considered advanced practice clinicians in primary care or women's specialty care (eg, certified nurse anesthetist, physical therapist, and dentist). We combined these categories into a single category for analysis.

Chen et al. An observational study of the contraception workforce. *Am J Obstet Gynecol* 2022.

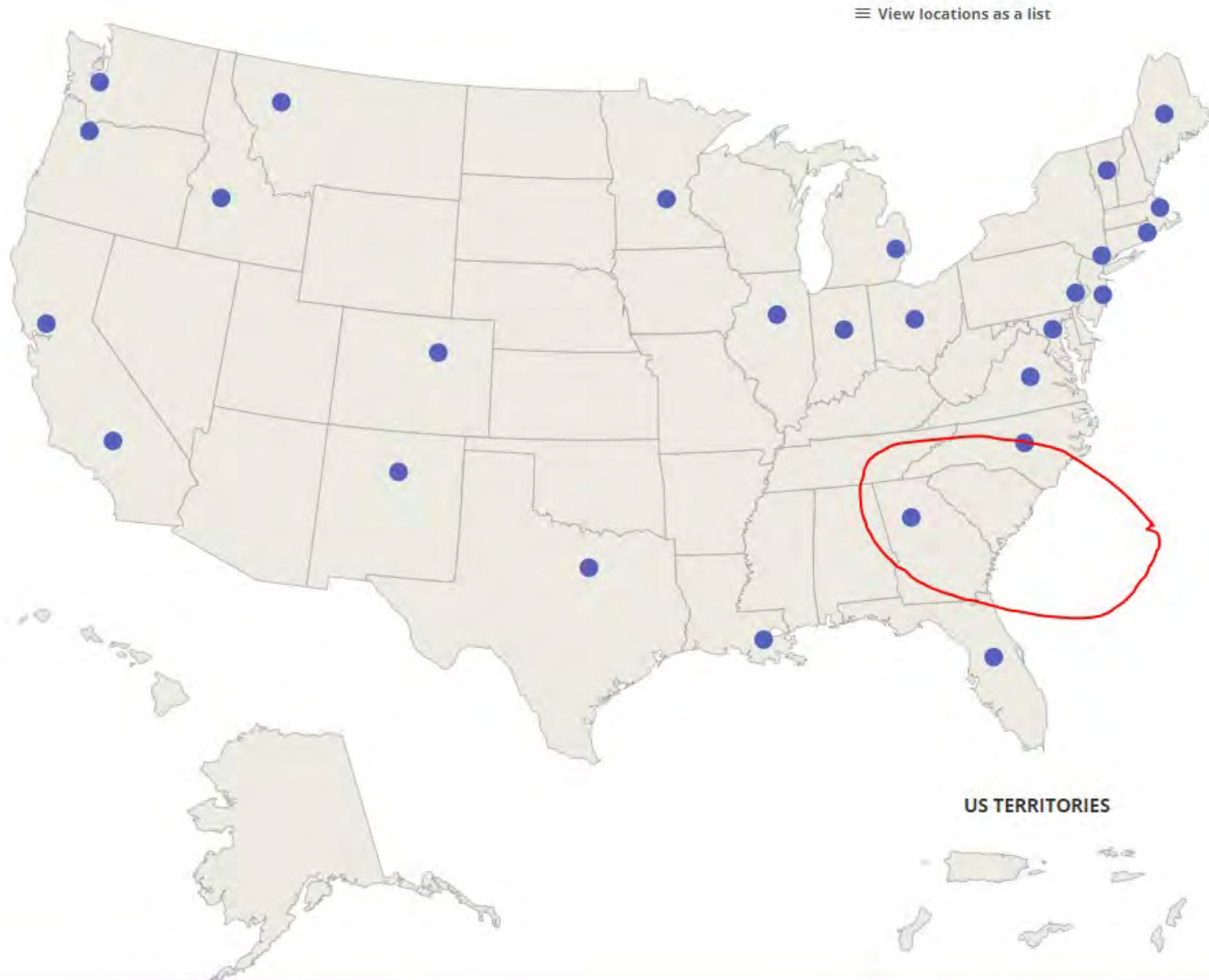
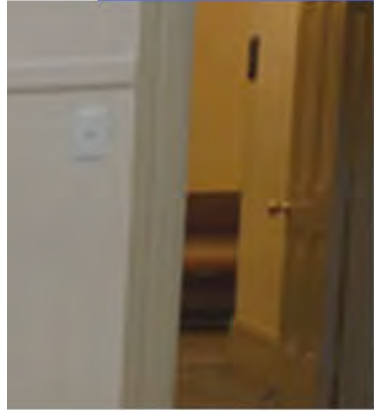
TABLE 2
Number and proportion of contraception providers providing shot, IUD, or implant by provider type

Provider type	Shot providers		IUD providers		Implant providers		Total providers
	n	%	n	%	n	%	
Obstetrician-gynecologist	5456	50.2	10,075	92.8	6103	56.2	10,860
Family medicine physician	10,817	52.2	3402	16.4	2831	13.7	20,734
Internal medicine physician	1891	34.7	140	2.6	96	1.8	5456
Pediatrician	2065	34.1	37	0.6	245	4.0	6055
Other physicians	887	4.9	244	1.4	124	0.7	18,019
Total	21,116	34.5	13,898	22.7	9399	15.4	61,124

Differences among all provider specialties were statistically significant ($P < .01$) with Bonferroni corrections for multiple comparisons, with 1 exception: the difference between pediatricians and internal medicine physicians providing the shot ($P > .999$). There was no advanced practice nurse, nurse-midwife, or physician assistant in this subset of contraception providers.

IUD, intrauterine device.

Chen et al. An observational study of the contraception workforce. *Am J Obstet Gynecol* 2022.



- 8,000 primary care providers in Puerto Rico and
- Open to all PCP specialties
 - Family Practice
 - Internal Medicine
 - Nurse Practitioner
 - Certified Nurse Midwife
 - Pediatrician

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actices
ations to advocate



Her life, her right.

By providing free and low-cost birth control, we enable women to pursue education and employment opportunities and plan for children — if they want — on their own timelines.



UP TO

104,000

unwanted or mistimed pregnancies
averted¹

UP TO

49,000

unplanned births prevented¹

We serve women in every corner of South Carolina, giving them the chance to live life on their own terms. This is especially critical for low-income and uninsured women in rural areas.



Insurance Benefits Guide

2023

Contraceptives

Routine contraceptive services, including birth control pills, patches, and injections, are covered for members and their dependents. Contraceptive implants and injectables are covered at the doctor's office. Contraceptive implants will be processed at an in-network pharmacy, benefit. The office visit for the implant will be processed with applicable copayments, coinsurance and deductibles. Contraceptives are covered for covered children only to treat a medical condition and must be preauthorized by Express Scripts or Medi-Cal. The member still pays the cost share in these cases.

2023 Act No. 70, Sections 11 and 12, provide as follows:

"SECTION 11. The Public Employee Benefit Authority and the State Health Plan shall cover prescribed contraceptives for dependents under the same terms and conditions that the Plan provides contraceptive coverage for employees and spouses. The State Health Plan shall not apply patient cost sharing provisions to covered contraceptives.

Emergency Contraception access

Ads · See Plan B

The screenshot displays a list of six advertisements for emergency contraception. Each ad includes a product image, a 'Pick up today' button, the product name, price, and the retailer. The products shown are Plan B One-Step, Aftera, and a white tablet. The retailers are CVS Pharmacy, Walgreens.com, and Target. A right-side navigation arrow is visible.

Product	Price	Retailer	Rating
Plan B One-Step Emergency Contraceptive...	\$49.99	CVS Pharmacy	★★★★☆ (187)
Aftera Levonorgestrel Emergency...	\$29.99	CVS Pharmacy	★★★★☆ (93)
Plan B One-Step Emergency Contraceptive - 1....	\$49.99	Walgreens.com	★★★★☆ (187)
Plan B One-Step (Levonorgestrel 1.5 mg) - 1 Tablet -....	\$17.00	wisp	Free shipping
Plan B One-Step Emergency Contraceptive - 1....	\$49.99	Gopuff	
Plan B One-Step Emergency Contraceptive	\$46.99	Target	★★★★☆ (187)

Abortion access



SC adolescent rights in abortion care

Parental Involvement in Minors' Abortions

State	Parental involvement			Other relatives allowed to consent	Parent must provide:		Minor must provide identification
	Consent only	Notification and consent	Notification only		Identification	Proof of parenthood	
South Carolina [‡]	X [†]			X			
South Dakota			X				
Tennessee	X					X	
Texas		X			X*		X
Utah		X					
Virginia		X		X	X*		
West Virginia			X				
Wisconsin	X [†]			X			
Wyoming		X					
TOTAL	21	6	9	6	11	4	2

Note: Except where indicated, policies require the involvement of one parent.

▼ Permanently enjoined by court order; policy not in effect.

▽ Temporarily enjoined by court order; policy not in effect.

* Parental consent documentation must be notarized, which requires the parent to provide government-issued identification. In Louisiana and Oklahoma, the parent must also provide identification to the abortion provider.

† Allows specified health professionals to waive parental involvement in limited circumstances.

‡ In Delaware, Massachusetts and Montana, applies to patients younger than 16; in South Carolina, applies to those younger than 17.

⊖ Missouri law requires the consenting parent or guardian to notify any other custodial parent or guardian that the minor is having an abortion.

How much does an abortion cost?

An in-clinic abortion can cost up to around \$800 in the first trimester, but it's often less. The average cost of a first trimester in-clinic abortion at Planned Parenthood is about \$600. The cost of a second trimester abortion at Planned Parenthood varies depending on how many weeks pregnant you are. The average ranges from about \$715 earlier in the second trimester to \$1,500-2,000 later in the second trimester.



Bible quotes didn't help Columbia anti-abortion protester. Federal judge found him guilty

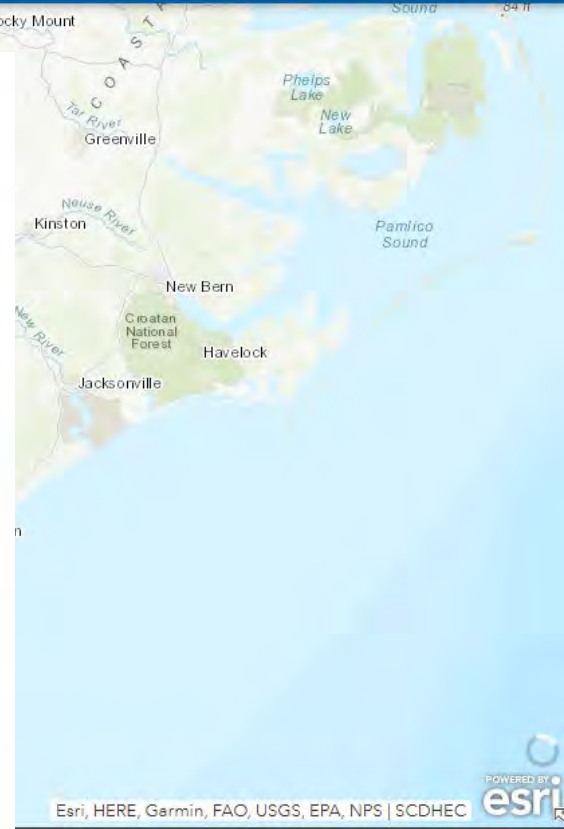
BY JOHN MONK
UPDATED MARCH 14, 2024 10:52 AM



Steven Lefemine, an anti-abortion activist, was convicted Monday, March 11, 2024, of obstructing the entrance to a Planned Parenthood clinic in Columbia. JOHN MONK jmonk@thestate.com

Name of Facility	Location Street	Location City	Location State	ZIP
GREENVILLE WOMEN'S CLINIC	1142 GROVE RD	GREENVILLE	SC	296
PLANNED PARENTHOOD OF SOUTH ATLANTIC	2712 MIDDLEBURG DR STE 107	COLUMBIA	SC	299
PLANNED PARENTHOOD SOUTH ATLANTIC CHARLESTON	1312 ASHLEY RIVER RD	CHARLESTON	SC	294

LISA PH#: 919-833-7526	11/30/2023	Non-Profit Corporation	AVE
------------------------	------------	------------------------	-----



Licensee	X	Y	Permit Type
GREENVILLE WOMEN'S CLINIC PA	-82.42	34.81	HLABORTIONC
PLANNED PARENTHOOD SOUTH ATLANTIC	-81.00	34.02	HLABORTIONC
PLANNED PARENTHOOD SOUTH ATLANTIC	-80.00	32.80	HLABORTIONC

South Carolina Code of Laws

- Consent for an abortion in a minor
 - Informed written consent signed and witnessed by minor AND parent/legal guardian/grandparent/loco parentis **or**
 - Informed written consent of minor AND court order **or**
 - Patient may petition the court for an order granting her the right to an abortion as Jane Doe
- Requirements
 - Distribution of a brochure from DSS
 - DHEC Right to Know (24 hours maturation)
 - Gestational age verified by ultrasound
 - Presence of fetal heartbeat if present and viewable
 - Explanation of heartbeat if seen including statistical chances of carrying pregnancy to term
 - Legal phrases to be embedded in notes
- Timing
 - No abortion can be performed if fetal cardiac activity is visible (5-6 weeks gestational age)
 - Rape /Incest abortions allowed up to 12 weeks gestational age
- Penalties
 - Felony conviction for abortion provider
 - Between 2-5 years imprisonment
 - Fine no more than \$5,000

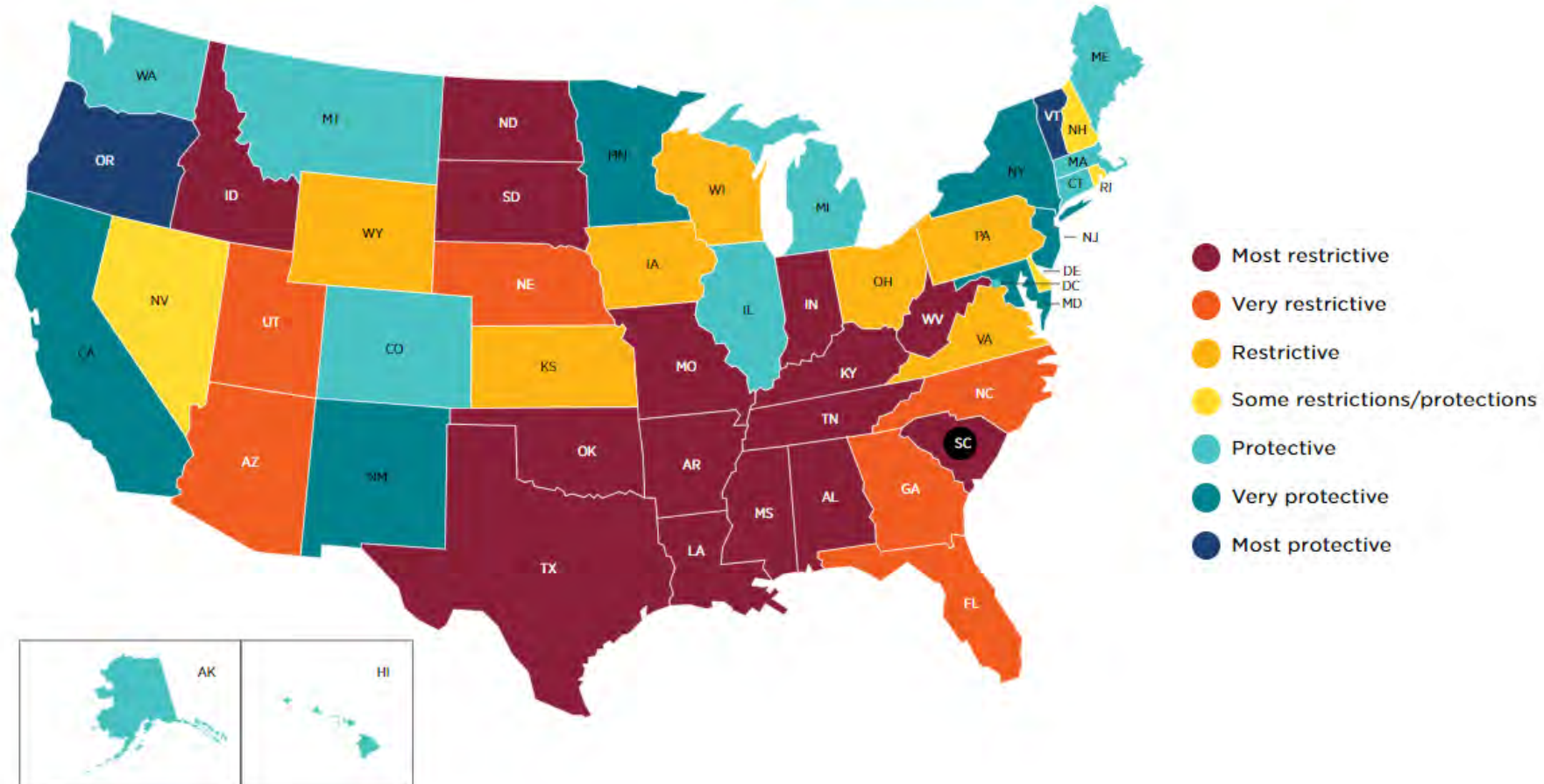
Interactive Map: US Abortion Policies and Access After Roe

The abortion landscape is fragmented and increasingly polarized. Many states have abortion restrictions or bans in place that make it difficult, if not impossible, for people to get care. Other states have taken steps to protect abortion rights and access. Our interactive map groups states into one of seven categories based on abortion policies they currently have in effect. Users can select any state to see details about abortion policies, characteristics of state residents and key abortion statistics.

Note: You may need to clear your browser's cache or open this page in an incognito window to ensure you are viewing the most recent version.

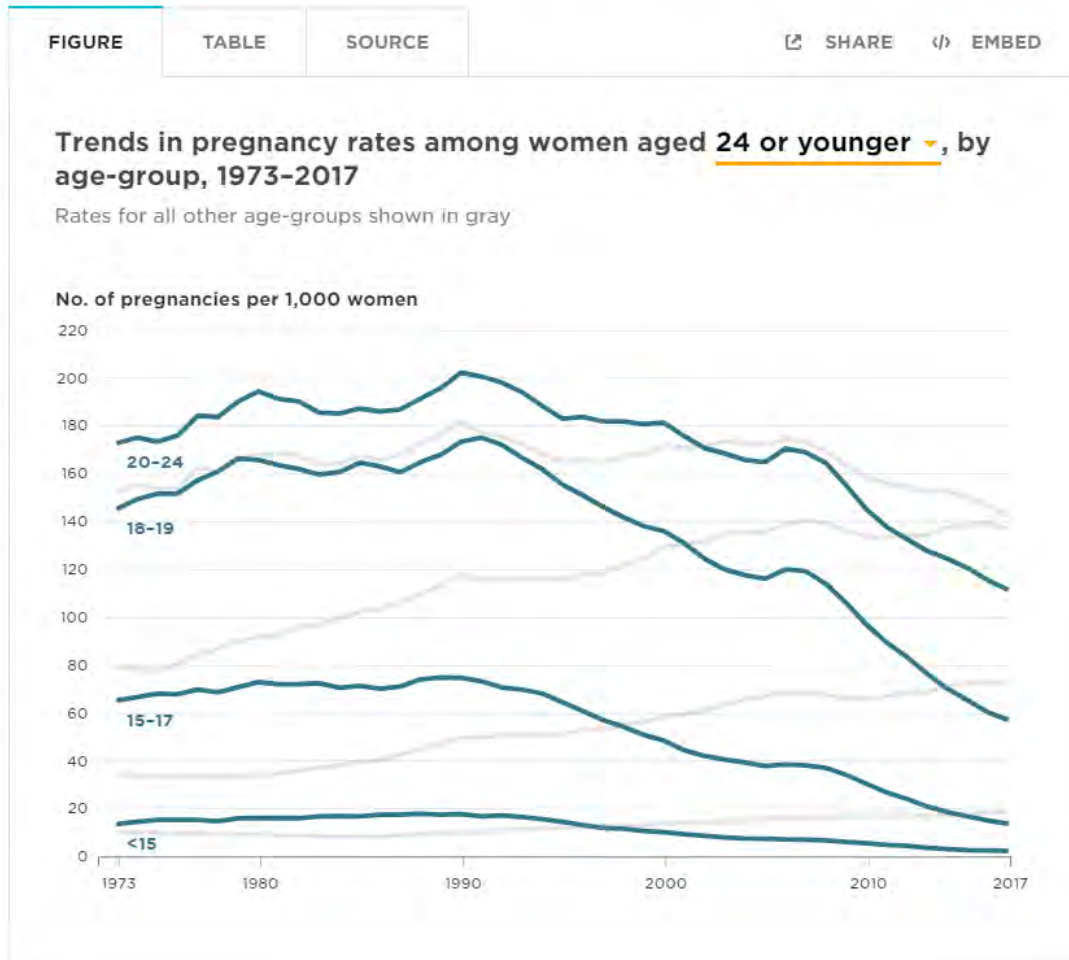
March 13, 2024 (policies are current as of this date)

[FAQ](#) | [Methodology](#) | [Contact Us](#)

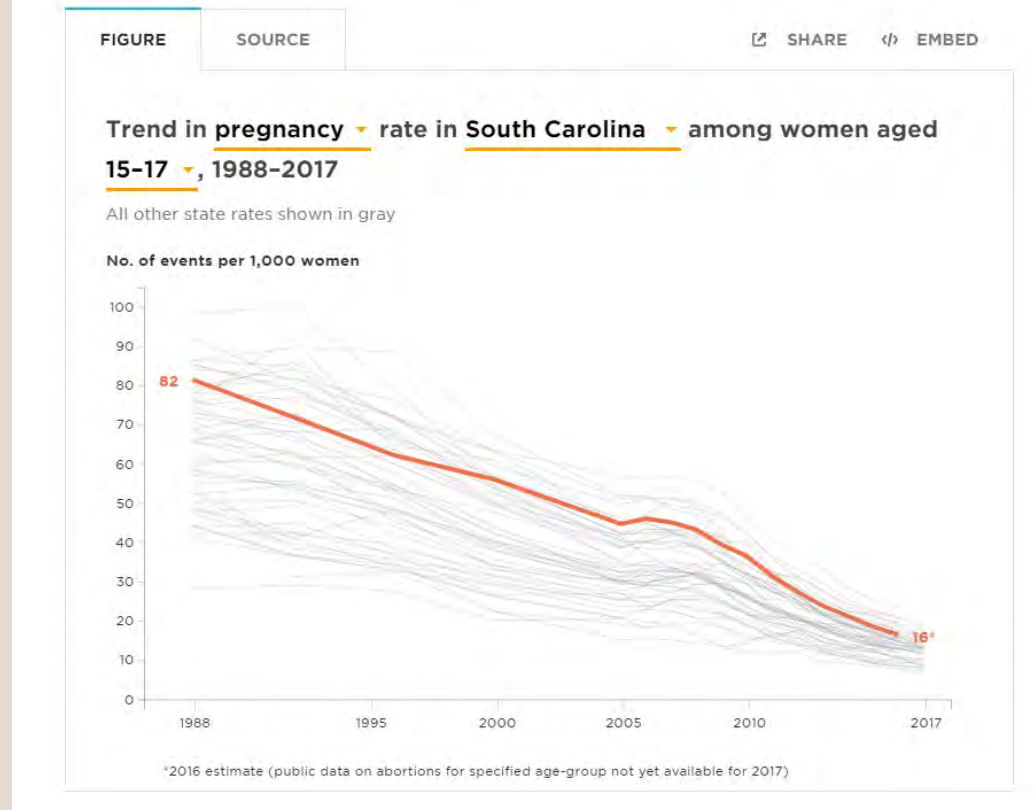


Adolescent pregnancy trends

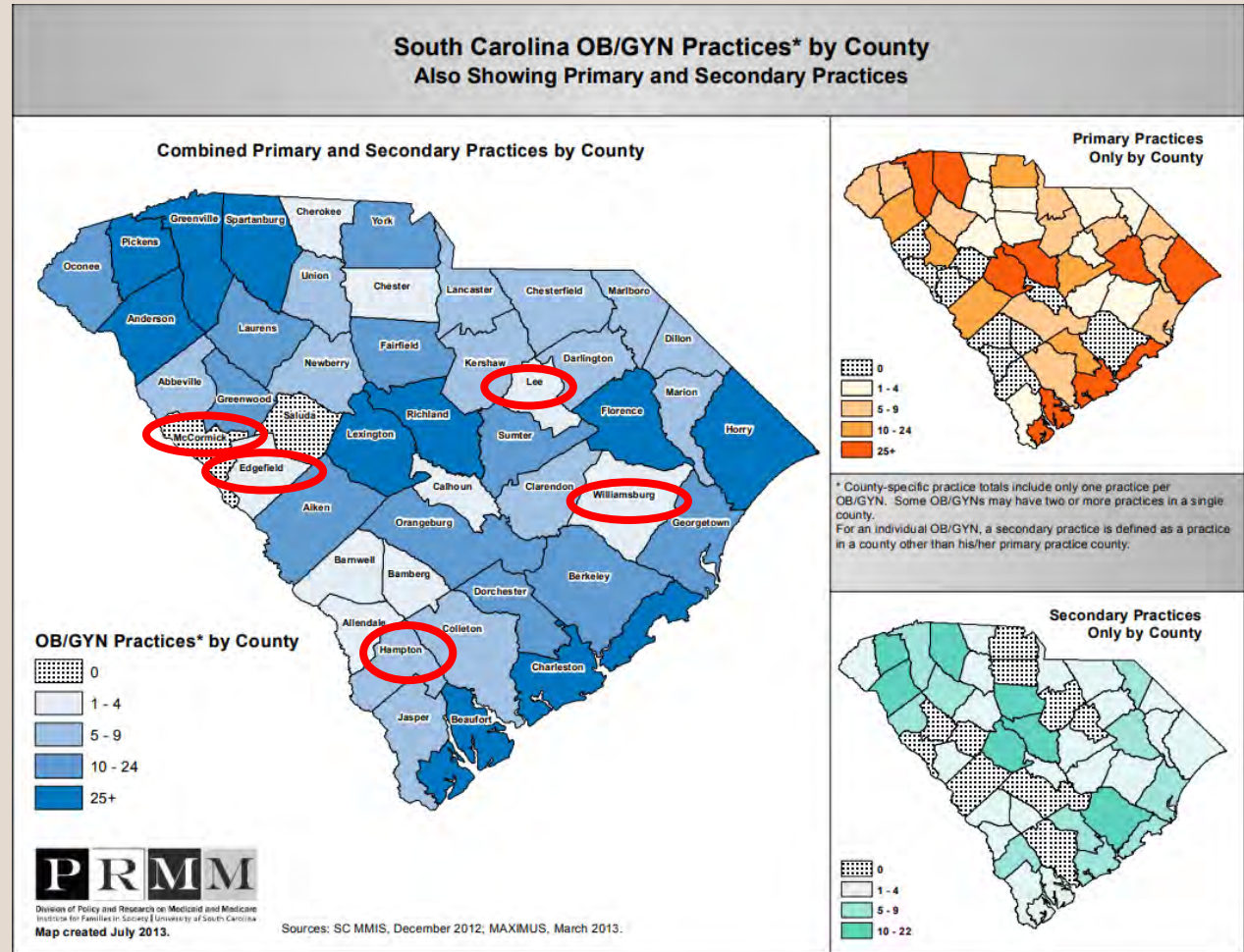
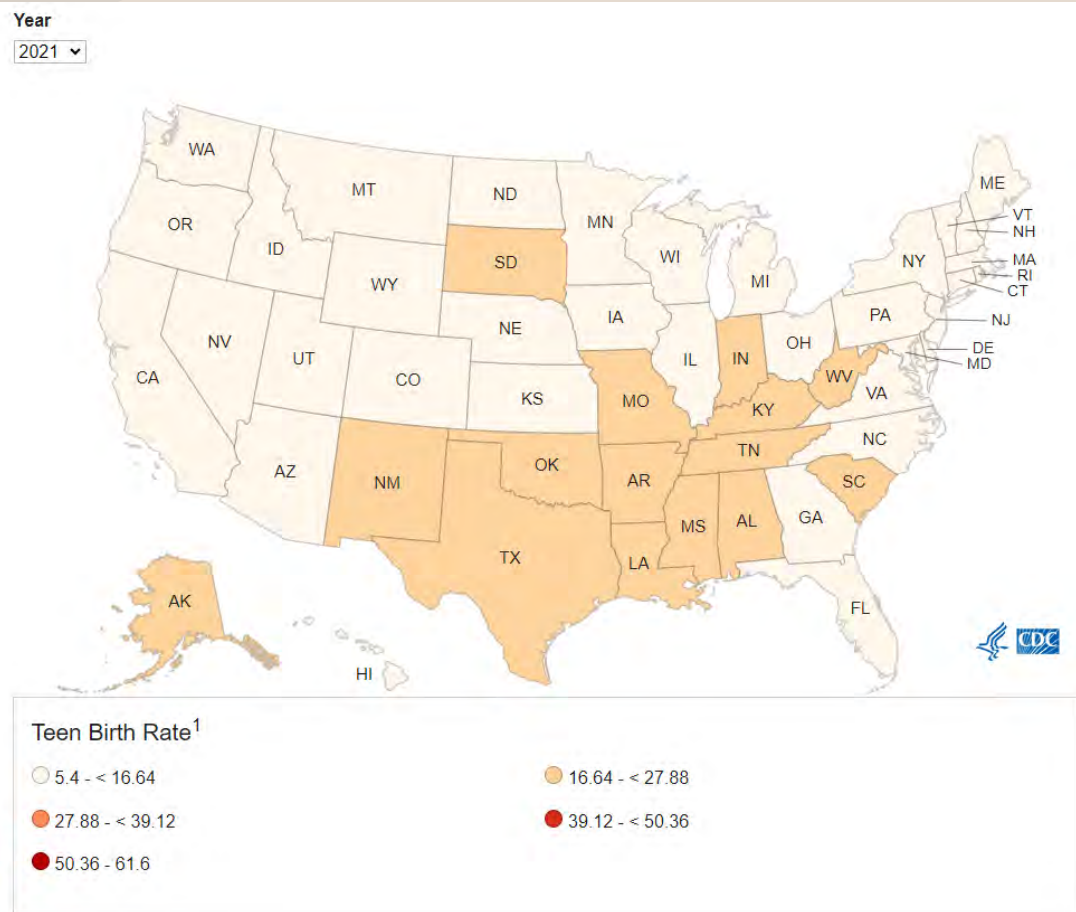
National levels and trends in pregnancy (Appendix Tables 1 and 2)



State levels and trends in pregnancy, birth and abortion (Appendix Tables 8-40)



Teenage Pregnancy Rates - SC



What can you do?

- This impacts all healthcare providers: educate your community!
 - Engage with your local politicians about contraception and emergency contraception access
 - Be involved in school board sex education planning
 - Consider commercial sex education programs like Girl-ology to your community
 - Talk to your local pharmacy about access to over-the-counter birth control
- Engage with local resources:
 - Choose Well
 - Women's Rights Empowerment Network
 - Reproductive Health Access Network



References

- Kawakita T, Wilson, K, Grantz KL, et al. Adverse Maternal and Neonatal Outcomes in Adolescent Pregnancy. *J Pediatr Adolesc Gynecol* 29 (2016): 130-136
- Teen Pregnancy Linked to Premature Death, Study Finds. RC Rabin, *The New York Times*. 3/14/2024. Accessed 3/28/2024.
- SC Senate passes 'fetal heartbeat' abortion ban bill after female members decry it. E Bohatch, *The State*. 1/28/2021. Accessed 3/22/2024.
- SC Supreme Court, on heels of abortion ruling, now all male for the 1st time in 35 years. J Harris and J Bustos, *The State*. 2/9/23. Accessed 3/22/2024.
- SC's 6-week abortion ban now law after McMaster signs bill. Up next? A lawsuit. M Schechter, *The State*. 5/23/2023. Accessed 3/22/2024.
- SC Supreme Court rules state's contested 6-week abortion ban is constitutional, can go into effect. J Bustos, *The State*. 8/23/23. Accessed 3/22/2024.
- Have SC's abortion numbers changed after heartbeat bill? Here's what the data says. J Bustos, *The State*. 3/20/24. Accessed 3/22/2024.
- NASPAG Position Statement: Comprehensive Sexuality Education for Adolescents. S Naroji and K Tomlin. *JPAG* 2023 (37):1, 7-8.
- SIECUS: Sex Ed for Social Change. South Carolina State Profile. https://siecus.org/state_profile/south-carolina-state-profile-23/#:~:text=Current%20Requirements%20At%20Glance%20%E2%80%93%20South,sexual%20orientation%20or%20gender%20identity. Accessed 3/22/2024.
- SC DHEC maps. Accessed 2/10/23: <https://scdhec.maps.arcgis.com/apps/webappviewer/index.html?id=e8b4eea83cab491bb3e3663093e14656>
- CDC Teen birth rate by state. <https://www.cdc.gov/nchs/pressroom/sosmap/teen-births/teenbirths.htm>. Accessed 3/22/2024.
- South Carolina Code of Laws Unannotated. Title 59 (Education), Chapter 32: Comprehensive Health Education Program. Accessed 2/25/23: <https://www.scstatehouse.gov/code/t59c032.php>
- What Teenagers are Learning from Online Porn. Maggie Jones. Feb 7, 2018. *New York Times Magazine*.
- Girl-ology.. <https://girlology.com/school-partners/> Accessed 3/22/2024
- ChooseWell. Accessed 2/25/23: <https://choosewellus.org/>
- Chen C, Strasser J, Banawa R, et al. Who is providing contraception care in the United States? An observational study of the contraception workforce. *Am J Obst Gynecol*. 2022. 226 (2): 232e.1-232.e11.
- Reproductive Health Access Project. <https://www.reproductiveaccess.org/> Accessed 3/22/2024.
- Planned Parenthood: ask the experts. How much does an abortion Cost? Accessed 2/25/23: <https://www.plannedparenthood.org/learn/ask-experts/how-much-does-an-abortion-cost>
- Guttmacher Institute. <https://states.guttmacher.org/policies/south-carolina/abortion-policies>. Accessed 3/22/2024.
- South Carolina Code of Laws Unannotated. Title 44 (Health). <https://www.scstatehouse.gov/code/t44c041.php> . Accessed 3/22/2024.
- Kelly, K., Hurley, D., Maldonado, D., Tomlin, K. Teenage pregnancy rate trends in South Carolina. Poster. American College of Ob/Gyn (ACOG) District IV Annual District Meeting. Washington, DC. October 2023.