

Increasing availability of contraception for young people

The move towards contraception being more easily accessible through pharmacies can only be a good thing. The

evaluation of a pilot project in Southwark and Lambeth in London, UK demonstrated that pharmacies can provide a high-quality contraceptive service.¹

As a practising general practitioner it is quite unusual for me to see under-18s requesting contraception, yet evidence suggests that sexual activity is initiated at a younger age.² Although some specialist clinics offer youth friendly contraception services, this does suggest an unmet need for contraception among young people in the UK.

With some of the highest rates of teenage pregnancy in Europe, UK abortion rates are increasing, with the highest rates in women aged 19 and 20 years.³

Although there are some rare serious complications associated with oral contraception, in the vast majority of situations they are taken without complication. In no region of the world or situation are risks associated with contraceptive use higher than risks associated with pregnancy and childbirth.⁴

In many developing countries contraception is administered by village health volunteers; often farmers with no formal medical training. They are trained to administer the contraceptive pill and can seek, or refer clients for, specialist advice if necessary. There is much that the UK can learn from such initiatives in developing countries.

I commend NHS South East London in taking the initiative with this community contraception pharmacy pilot. I would suggest that once contraceptive provision in pharmacies becomes the norm, the next step would be to go one step further by training non-medical community volunteers to make contraception more widely accessible to young people in the community.

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