

Adolescents' experiences accessing emergency contraception in Australian community pharmacy: a qualitative study

Saldanha S^{*1}, Naveed H^{*1}, Mazza D¹, Assifi AR¹

^{*}co-first authors

¹ SPHERE NHMRC Centre of Research Excellence, Department of General Practice, Monash University

Background:

Adolescents (10-19 years) face disproportionate risks of unintended pregnancy due to limited sexual and reproductive health resources and stigma surrounding their sexual activity. Emergency contraceptive pills (ECPs) can prevent pregnancy when accessed promptly, and community pharmacies offer a convenient access point to ECPs in Australia. Yet little is known about adolescents' perspectives on pharmacy-based ECP access. This study aimed to explore their experiences to inform pharmacy practice that is responsive to adolescent needs.

Methods:

We conducted a qualitative phenomenological study with ten adolescents aged 14–19 years who have obtained ECP from Australian community pharmacies. Participants were recruited through convenience and snowball sampling and completed semi-structured Zoom interviews. Interviews were audio-recorded, transcribed verbatim, and analysed using reflexive thematic analysis.

Results:

Adolescents described community pharmacies as convenient and accessible, offering timely and familiar care. Positive encounters were characterised by discreet, unrushed interactions and matter-of-fact communication that reduced stigma and normalised ECP use. Adolescents valued brief counselling focused on ECP effectiveness, timing, and side effects, while preferring discussions about long-term contraception as optional follow-up. Privacy was central: written forms or private conversations were acceptable, whereas public questioning created embarrassment and sometimes deterred access. Cost and inconsistent counselling across pharmacies shaped perceptions of fairness and support, with some adolescents reporting financial strain and others noting gaps in information across encounters. Although most pharmacists were viewed as respectful, individual pharmacist approaches varied and strongly influenced whether adolescents felt reassured or judged. The most positive encounters left adolescents feeling informed, respected, and able to make contraceptive decisions with confidence.

Conclusion:

This study shows that while pharmacies provide adolescents with access to ECPs, gaps remain in consistency, privacy, and counselling. Standardised protocols, private counselling rooms, and pharmacist training in adolescent-centred care are

needed to support informed sexual and reproductive health decision-making for adolescents.

Disclosure of Interest Statement:

No disclosures to make