



Universal Access to No-Cost Prescription Contraception in BC

Information Sheet - Updated February 2023

The Need

Access to contraception is recognized as a basic human right,¹ but unfortunately many people in BC can't access this right. A 2016 study published in the Canadian Medical Association Journal found that one in five Canadian women have had an unplanned pregnancy.² Across Canada, 59,000 young people under the age of 24 had unintended pregnancies in 2014.³

More than 25% of youth who do not wish to be pregnant report that they do not use contraception at every act of intercourse and some never use it at all.⁴ Consistent contraception use substantially reduces risk for unintended pregnancy.

Unintended pregnancies:

- Can derail life plans and come with high personal costs.
- Are at higher risks to negative health impacts for both the mother and child.
- Have significant costs to our health and social services systems.

The Barriers

Cost remains a significant barrier to people accessing contraception.⁵ A recent UBC study concluded that "young, low-income women in Canada are less likely to use more effective methods of birth control like the pill, and more likely to use no contraception or condoms only."⁶

An intra-uterine device (IUD) can cost between \$75 and \$550, oral contraceptive pills can cost \$20 per month or more, a hormone injections can cost as much as \$180 per year, and an implant can cost \$350.⁷ These costs fall disproportionately on women and people who can get pregnant, and represent a significant barrier for people accessing contraception, particularly to women with low incomes, youth, and people from marginalized communities.⁸ The COVID-19 pandemic has only exacerbated the impact of cost to these populations and has introduced additional barriers to contraception.⁹

Canadian contraceptive care providers identify cost as the single most important barrier to access, and youth as the population most disproportionately affected by this barrier.¹⁰ A recent and pilot study from Paediatrics & Child Health found that 10% of young people (14-21) could not access the contraception they wanted or chose to stop using it due to cost.¹¹

The most reliable methods of contraception, long-acting reversible contraceptives (LARCs) like IUDs or the implant, also have the highest upfront costs. Because of this, many people turn to less reliable methods, like condoms.¹² Studies have found that when cost is removed as a factor, people increasingly chose LARCs,¹³ and that "improving access to affordable contraception may decrease the number of young women at risk of unintended pregnancy due to financial barriers."¹⁴

The Current System

While there is currently a hodgepodge of programs and sporadic coverage for people in BC (such as Fair PharmaCare in BC), these programs are largely income dependent. People should not have to

pass a means test or face financial burdens in order to freely exercise their right make choices about their reproductive health.

Cumbersome application processes and paperwork further discourage the use of these programs and represent additional barriers.¹⁵ Programs where individuals pay upfront and then get reimbursed are both a cost and confidentiality barrier.

High costs of contraception significantly impact young people. While young adults may be covered through their parent's plans, because a parent is almost always the primary subscriber for health insurance, a young person is therefore often forced to give up their privacy in order to make choices about their bodies.¹⁶ Depending on their situation, doing so could also put their safety, housing, or well-being in jeopardy.

The Proposed Policy

We propose that BC adopt a policy where no-cost prescription contraception is universally available to all residents. This policy could be delivered using a similar method to Mifegymiso, the abortion pill that was made universally available at no cost in January 2018.¹⁷

Many other countries already subsidize universal access to contraception, in full or in part; these include UK, France, Spain, Sweden, Denmark, the Netherlands, Luxemburg, Italy, Germany, and Ireland.¹⁸ These countries have done so because the personal, public health, and social benefits far outstrip the costs. In fact, programs that offer free prescription contraception have been found to be revenue positive! This is because the cost of providing free prescription contraception is considerably lower than the costs associated with unintended pregnancy.

Options for Sexual Health (2010) estimated that every \$1 spent on contraceptive support for a woman can save as much as \$90 in public expenditure on social supports.¹⁹ This study estimated that the BC government could save as much as \$95 million annually with this policy.²⁰ A 2015 study in the *Canadian Association Medical Journal* estimated cost of delivering universal contraception in Canada at \$157 million, but the savings, in the form of direct medical costs of unintended pregnancy, have been estimated at \$320 million.²¹

When Colorado implemented a program offering free IUDs to young people (43,713 at a cost of \$28 million), this program reduced teen pregnancies by 54% and teen abortion rates by 64% over the course of eight years, and saved the government an estimated \$70 million.²²

The Benefits

- Empowers people:
 - Money should never be a barrier to someone exercising their right to say what happens to their body, and to decide when, and whether or not, they have children.
- Promotes equality:
 - Condoms are freely available in clinics, campuses, and other locations.
 - The costs of prescription contraception fall disproportionately on women and people with uteruses.
- Promotes health outcomes:
 - Unintended pregnancies can be risky for mothers and babies.
- Good education policy:
 - This policy helps normalize conversations about sex, sexual and reproductive health.
- Saves money:
 - This policy is revenue positive, saving the BC Government millions, because those who can't afford contraception, likely can't afford to raise a child.

We are urging the BC Government to implement universal no-cost prescription contraception immediately, and to ensure that the policy that it adopts is as expansive as possible. The most straightforward and maximally effective policy would be to make all forms of prescription contraception available to everyone at no cost.

Endorsements

Programs that offer no-cost universal access to contraception have been called for by the:

- The Canadian Medical Association.²³
- The Society of Obstetricians and Gynaecologists of Canada.²⁴
- The Canadian Pediatric Society.²⁵

Our campaign has been directly endorsed by 36 municipalities across BC,²⁶ including Victoria (January 2020), Burnaby (February 2020), Vancouver (March 2020), and Saanich (April 2022), and two resolutions were passed at the September 2020 Union of British Columbia Municipalities (UBCM) Convention.²⁷ A growing number of groups across BC have also added their support, including:

- The Vancouver District Labour Council and the Victoria Labour Council.
- The Canadian Federation of Medical Students.
- Options for Sexual Health.
- The Canadian Federation of University Women.
- The Abortion Rights Coalition of Canada.
- The BC Government and Service Employees' Union (BCGEU).
- The BC Federation of Labour.
- Action Canada for Sexual Health and Rights.²⁸

The Select Standing Committee on Finance and Government Services has endorsed this policy in its past three reports. Its' most recent "Report on the Budget 2022 Consultation," it recommended that the BC Government to "fund universal access to no-cost prescription contraception."²⁹

Free prescription contraception was included in the BC NDPs' 2020 election platform,³⁰ and in Health Minister Dix's 2020 and 2022 Mandate Letters.³¹ Unfortunately, free contraception was not included in the recent 2022 budget. This policy is long overdue.

It's time for the BC Government to follow through on its commitment to make all prescription contraception free!

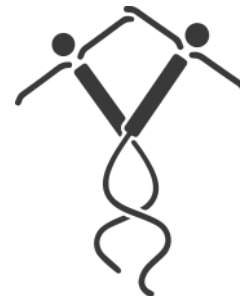
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Sources:

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