



NATIONAL ASSEMBLY OF QUÉBEC

FIRST SESSION

FORTY-THIRD LEGISLATURE

Bill 994

**An Act to foster sexual and
reproductive health through improved
access to contraception**

Introduction

**Introduced by
Madam Ruba Ghazal
Member for Mercier**

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EXPLANATORY NOTES

The purpose of this bill is to eliminate the difficulties of access to contraception at the source, with a view to enhancing personal autonomy, reducing unwanted pregnancies, improving public health and alleviating social and gender inequalities.

To this end, the bill enshrines certain human rights relating to sexual and reproductive health. The bill states that everyone has the right to be informed about the different methods of contraception, to be able to use them freely, to have access to them free of charge, and that any minor may consent alone to the prescription, dispensing and administration of a contraceptive.

To implement these rights and provide the necessary conditions for their exercise, the bill provides for the adoption of various means, in particular,

(1) establishing a Free Access to Contraception Program for all insured persons and others whose situation so requires;

(2) empowering the Minister of Health and Social Services to implement pilot projects allowing the delegation of activities reserved for physicians to a professional, including prescribing, dispensing and administering contraception;

(3) mandating public health directors in each health region to implement preventive measures with respect to sexual and reproductive health by establishing a regional program for the distribution of internal and external condoms to students in high schools, colleges and universities;

(4) requiring the Minister of Education to take into account education on emotional, relational and sexual life when developing or approving curricula; and

(5) authorizing midwives to prescribe, dispense and administer contraception.

Lastly, the bill includes transitional, miscellaneous and final provisions.

LEGISLATION AMENDED BY THIS BILL:

- Midwives Act (chapter S-0.1).

REGULATIONS AMENDED BY THIS BILL:

- Regulation respecting the initiation and modification of medication therapy, the administration of a medication and the prescription of tests by a pharmacist (chapter P-10, r. 3.2);
- Regulation respecting the drugs that may be prescribed or administered by a midwife (chapter S-0.1, r. 12.1);
- Règlement sur les normes relatives à la forme et au contenu des ordonnances verbales ou écrites faites par une sage-femme (chapter S-0.1, r. 15, French only).

Bill 994

AN ACT TO FOSTER SEXUAL AND REPRODUCTIVE HEALTH THROUGH IMPROVED ACCESS TO CONTRACEPTION

THE PARLIAMENT OF QUÉBEC ENACTS AS FOLLOWS:

CHAPTER I

OBJECT

1. The purpose of this Act is to eliminate the difficulties of access to contraception at the source, with a view to enhancing personal autonomy, reducing unwanted pregnancies, improving public health and alleviating social and gender inequalities.

The Act thus enshrines certain rights that persons have relating to sexual and reproductive health and establishes certain means for their implementation and the conditions necessary for their exercise.

CHAPTER II

RIGHTS RESPECTING ACCESS TO CONTRACEPTION

2. In accordance with sections 11 to 13 of the Act respecting the governance of the health and social services system (chapter G-1.021), every person is entitled to be informed of the various contraceptive methods available to them and to be able to use those methods freely.

3. Access to contraceptive methods is a right that is exercised free of charge to the extent provided by law and in the manner determined by regulation.

4. Despite the provisions of articles 14 and 18 of the Civil Code and section 15 of the Act respecting the governance of the health and social services system (chapter G-1.021), any minor may consent alone and without formality to the prescription, dispensing or administration of a contraceptive.

CHAPTER III
IMPLEMENTATION

DIVISION I
FREE ACCESS TO CONTRACEPTION PROGRAM

5. A Free Access to Contraception Program is hereby established.

6. The Régie de l'assurance maladie du Québec is entrusted with the administration of the program and enters into an agreement with the Minister for that purpose.

The indefinite-term agreement sets out the terms and conditions of the program, including the following elements as a minimum:

(1) the persons covered by the program, including insured persons within the meaning of subparagraph g.1 of the first paragraph of section 1 of the Health Insurance Act (chapter A-29), who present to the prescribing professional, as applicable, their health insurance card, claim booklet or valid eligibility card or, in the absence of such documents, persons who, as applicable,

(a) require emergency oral contraception;

(b) are minors who receive insured services to which they give their consent alone in accordance with this Act or the Civil Code; or

(c) are homeless;

(2) the types of medication or other supplies which include the following contraceptive methods as a minimum:

(a) birth control pills;

(b) progestogen-only oral contraceptives;

(c) contraceptive rings;

(d) contraceptive patches;

(e) contraceptive injections;

(f) hormonal and non-hormonal intrauterine devices;

(g) contraceptive implants;

(h) cervical caps;

(i) diaphragms;

- (j) spermicides;
- (k) emergency oral contraceptives; and
- (l) any other hormonal contraceptive, including male contraceptives, approved by Health Canada.

DIVISION II

PILOT PROJECTS

7. After consultation with the Collège des médecins du Québec and the Office des professions du Québec, the Minister may, by order, authorize the implementation of pilot projects designed to promote sexual and reproductive health by delegating to a professional the exercise of activities reserved for physicians, including the prescription, dispensing and administration of certain contraceptive methods.

8. A pilot project is established for a period of up to five years, which the Minister may, if the Minister considers it necessary, extend by up to two years. The Minister may modify or terminate a pilot project at any time.

9. The Minister may determine the provisions of a pilot project the violation of which constitutes an offence and for which an offender is liable to the penalties provided for in section 188 of the Professional Code (chapter C-26).

10. The Minister reports to the Government annually on the implementation of a pilot project and, at the Government's request, at any other time.

In the six months following the end of a pilot project, the Minister evaluates the pilot project and sends a report and any recommendations to the Government.

DIVISION III

DISTRIBUTION OF CONDOMS

11. The public health director for each health region implements preventive sexual and reproductive health measures, in particular those aimed at reducing unwanted pregnancies and sexually transmitted and blood-borne infections, by establishing a regional program for the distribution of internal and external condoms.

In developing the program, the director takes into account the social determinants of health specific to their region.

12. The program provides for the distribution of condoms to high schools, colleges and universities.

13. The institutions referred to in section 12 must install distribution devices to provide pupils or students with simple, free access to condoms, while maintaining a minimum level of confidentiality.

14. For the administration of the program, the director of public health of the health region concerned and the institution, school service centre or school board, as the case may be, enter into an agreement, the terms and conditions of which substantially conform to those determined by order of the Minister.

15. For the administration of the program intended for First Nations members and the Inuit, the public health director for each health region collaborates with any health and social services institution the director deems appropriate, including health and social services providers in an Indigenous community, to implement preventive sexual and reproductive health measures that are culturally safe, in particular by installing distribution devices to provide First Nations members and the Inuit with simple, free access to condoms.

DIVISION IV

EDUCATION

16. When establishing the programs of compulsory subjects for elementary and high schools, in accordance with section 461 of the Education Act (chapter I-13.3), or when approving the program of studies of an institution, in accordance with section 32 of the Act respecting private education (chapter E-9.1), the Minister of Education must take into account education in matters relating to emotional, relational and sexual life.

CHAPTER III

AMENDING PROVISIONS

MIDWIVES ACT

17. The Midwives Act (chapter S-0.1) is amended by inserting the following section after section 7:

“**7.1.** Despite section 6, a midwife may prescribe and dispense contraception to any person whose situation so requires, as well as administer it.”

18. Section 8 of the Act is amended by replacing “in section 6” in the first paragraph by “in sections 6 and 7.1”.

19. Section 12 of the Act is amended

(1) by replacing “in section 6” in the first paragraph by “in sections 6 and 7.1”;

(2) by inserting “nor from prescribing emergency oral contraception” at the end of the second paragraph;

(3) by replacing “in section 6” in subparagraph 2 of the third paragraph by “in sections 6 and 7.1”.

REGULATION RESPECTING THE INITIATION AND MODIFICATION OF MEDICATION THERAPY, THE ADMINISTRATION OF A MEDICATION AND THE PRESCRIPTION OF TESTS BY A PHARMACIST

20. Section 1 of the Regulation respecting the initiation and modification of medication therapy, the administration of a medication and the prescription of tests by a pharmacist (chapter P-10, r. 3.2) is amended by striking out “for an initial period of not more than 6 months” in paragraph 2.

REGULATION RESPECTING THE DRUGS THAT MAY BE PRESCRIBED OR ADMINISTERED BY A MIDWIFE

21. The Schedule to the Regulation respecting the drugs that may be prescribed or administered by a midwife (chapter S-0.1, r. 12.1) is amended by striking out the “S” restriction in the “Oral contraceptives” therapeutic subclass of the “Hormones and substitutes” therapeutic class.

RÈGLEMENT SUR LES NORMES RELATIVES À LA FORME ET AU CONTENU DES ORDONNANCES VERBALES OU ÉCRITES FAITES PAR UNE SAGE-FEMME

22. Section 1 of the Règlement sur les normes relatives à la forme et au contenu des ordonnances verbales ou écrites faites par une sage-femme (chapter S-0.1, r. 15, French only) is amended by inserting “, sauf en matière de contraception,” after “l’accouchement” in subparagraph g of subparagraph 4 of the first paragraph.

CHAPTER IV

TRANSITIONAL, MISCELLANEOUS AND FINAL PROVISIONS

23. The Régie de l’assurance maladie du Québec and the Minister must enter into the first agreement provided for in section 6 no later than (*insert the date that is six months after the date of assent to this Act*).

Failing that, the Government must, without delay, determine the terms and conditions of the agreement referred to in that section, which agreement is then deemed to have been entered into between the Régie and the Minister.

24. The Government may, by regulation, make any other transitional or consequential provisions necessary for the carrying out of this Act.

Such regulation is not subject to the publication requirement, or the requirement as regards its date of coming into force set out in sections 8 and 17 of the Regulations Act (chapter R-18.1) and may, if it so provides, apply from any date prior to its publication.

25. The Minister of Health and Social Services is responsible for the administration of this Act.

26. This Act comes into force on (*insert the date of assent to this Act*).

