

For immediate release

## **PARTY LEADERS MUST DEFINE THEIR APPROACH TO HIV/AIDS**

*Deafening silence during election campaign is unacceptable*

**TORONTO, January 12, 2006** — The Canadian HIV/AIDS Legal Network and the Interagency Coalition on AIDS and Development (ICAD) today called on federal party leaders to state their positions on how Canada should be fighting the HIV/AIDS epidemic, both at home and abroad.

“Canada is hosting the next International AIDS Conference this August. Over 15 000 delegates from around the world, including presidents and prime ministers, will gather in Toronto to advance the global response to AIDS. We want to know what they’ll hear from Canada’s prime minister,” said Joanne Csete, Executive Director of the Legal Network.

“Canadians deserve to know where the parties stand with respect to HIV prevention, treatment and care,” added ICAD Executive Director Michael O’Connor.

The Legal Network and ICAD are asking the leaders to answer five key questions:

1. Will you establish a permanent legal framework to allow Canada’s only safe injection site to continue its life-saving work?
2. Will you implement needle exchange programs in Canadian prisons to stop the spread of deadly viruses and to protect public health?
3. Will you increase funding for Canadian and international research on microbicides? And will you fund HIV/AIDS programs in Canada and in developing countries that address the root causes (like poverty, violence and inequality) of women’s risks of HIV infection?
4. How will you ensure that the *Jean Chrétien Pledge to Africa Act* is used to give developing countries better access to affordable medicines?
5. Will you set a binding timetable to deliver on Canada’s commitment to increase foreign aid to the United Nations target of 0.7 percent of gross national income by 2015?

“The answers to these questions will define each party’s approach to tackling HIV/AIDS,” said Csete. “Will Canada follow the ineffective and harmful lead of abstinence-based strategies of countries like the United States? Or will the next government have the courage to make Canada a world leader by developing and implementing truly effective, pragmatic and human rights-based solutions that will reduce the spread of HIV, and improve the access to, and quality of, treatment and care for people living with HIV/AIDS?”

A backgrounder including the full text of the questionnaire is available at [www.aidslaw.ca](http://www.aidslaw.ca).

### **About the Canadian HIV/AIDS Legal Network**

The Canadian HIV/AIDS Legal Network ([www.aidslaw.ca](http://www.aidslaw.ca)) promotes the human rights of people living with and vulnerable to HIV/AIDS, in Canada and internationally, through research, legal and policy analysis, education, and community mobilization. The Legal Network is Canada’s leading advocacy organization working on the legal and human rights issues raised by HIV/AIDS.

### **About the Interagency Coalition on AIDS and Development (ICAD)**

ICAD is a network of 162 Canadian international development non-governmental organizations (NGOs), AIDS service organizations and individuals who are concerned about global HIV/AIDS issues.

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For more information, please contact:

*Disponible en français*

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January 12, 2006

## FIVE QUESTIONS TO THE LEADERS OF CANADA'S POLITICAL PARTIES

### 1. Responding pragmatically to HIV among people who inject drugs

Over the last two years, Insite, the safe injection site in Vancouver's Downtown Eastside, has been saving lives by providing some of Canada's most vulnerable and marginalized citizens with a hygienic setting in which to inject drugs, along with vital medical assistance and referrals to support services. Insite's Health Canada authorization will expire later this year. **Will you establish a permanent legal framework to allow Insite to continue its life-saving work?**

### 2. Protecting prisoners' health to protect public health

Across Canada, federally funded needle exchange programs successfully reduce the spread of infectious diseases. These programs do not, however, exist inside Canadian prisons. Prisoners do not have access to clean syringes. As a result, viruses like HIV and hepatitis are rapidly spreading through injection drug use inside the prison system. Because most prisoners eventually return to the community, the health of prisoners is a public health concern. **Will you implement needle exchange programs in Canadian prisons to stop the spread of deadly viruses and to protect public health?**

### 3. Reducing women's risks of HIV infection

Around the world, the face of HIV/AIDS is increasingly female. In Canada, women now account for one quarter of all new cases of HIV. Poverty, violence and inequality put women at increased risk of HIV. That's why women need ways to protect themselves against HIV, like microbicides, which are vaginal gels that can kill the virus. **Will you increase funding for Canadian and international research on microbicides? And will you fund HIV/AIDS programs in Canada and in developing countries that address the root causes of women's risks of HIV infection?**

#### 4. Providing affordable medicine to developing countries

A year and a half ago, members of Parliament voted unanimously to pass the *Jean Chrétien Pledge to Africa Act*. This law allows generic drug companies to get licenses to export affordable medicines — both AIDS drugs and other medicines — to developing countries. Since passing this legislation, however, the government has done little to promote its use. **How will you ensure that this law is used to give developing countries better access to affordable medicines?**

#### 5. Meeting our foreign aid commitments

Canada can't stop the HIV epidemic at home without helping to stop it worldwide. Yet Canada is not contributing its fair share of resources to global efforts to stop disease and suffering. In June 2005, MPs in the House of Commons unanimously passed a resolution calling on the government to increase Canada's foreign aid to the United Nations target of 0.7 percent of gross national income by 2015. **Will you set a binding timetable to deliver on this commitment?**

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Canadian  
HIV/AIDS  
Legal  
Network | Réseau  
juridique  
canadien  
VIH/sida



January 12, 2006

The Right Honourable Paul Martin, PC, MP  
Prime Minister of Canada

The Honourable Stephen Harper, PC, MP  
Leader of Her Majesty's Loyal Opposition

Mr. Gilles Duceppe, MP  
Leader of the Bloc québécois

Mr. Jack Layton, MP  
Leader of the New Democratic Party of Canada

Mr. Jim Harris  
Leader of the Green Party of Canada

**Re: Five questions on HIV/AIDS**

Dear Sirs:

The Canadian HIV/AIDS Legal Network and the Interagency Coalition on AIDS and Development (ICAD) are non-partisan, community-based organizations, headquartered in Toronto and Ottawa, respectively. Together, we represent 350 member organizations across Canada, including frontline AIDS service organizations and people living with HIV/AIDS.

We are writing on behalf of our combined memberships to request your responses to five key questions on how Canada should be fighting the HIV/AIDS epidemic, both at home and abroad.

Your answers to the following questions will be of particular interest to our members in the context of Canada's role as host country of the upcoming XVI International AIDS Conference in Toronto this August.

## 1. Responding pragmatically to HIV among people who inject drugs

Over the last two years, Insite, the safe injection site in Vancouver's Downtown Eastside, has been saving lives by providing some of Canada's most vulnerable and marginalized citizens with a hygienic setting in which to inject drugs, along with vital medical assistance and referrals to support services. Insite's Health Canada authorization will expire later this year. **Will you establish a permanent legal framework to allow Insite to continue its life-saving work?**

## 2. Protecting prisoners' health to protect public health

Across Canada, federally funded needle exchange programs successfully reduce the spread of infectious diseases. These programs do not, however, exist inside Canadian prisons. Prisoners do not have access to clean syringes. As a result, viruses like HIV and hepatitis are rapidly spreading through injection drug use inside the prison system. Because most prisoners eventually return to the community, the health of prisoners is a public health concern. **Will you implement needle exchange programs in Canadian prisons to stop the spread of deadly viruses and to protect public health?**

## 3. Reducing women's risks of HIV infection

Around the world, the face of HIV/AIDS is increasingly female. In Canada, women now account for one quarter of all new cases of HIV. Poverty, violence and inequality put women at increased risk of HIV. That's why women need ways to protect themselves against HIV, like microbicides, which are vaginal gels that can kill the virus. **Will you increase funding for Canadian and international research on microbicides? And will you fund HIV/AIDS programs in Canada and in developing countries that address the root causes of women's risks of HIV infection?**

## 4. Providing affordable medicine to developing countries

A year and a half ago, members of Parliament voted unanimously to pass the *Jean Chrétien Pledge to Africa Act*. This law allows generic drug companies to get licenses to export affordable medicines — both AIDS drugs and other medicines — to developing countries. Since passing this legislation, however, the government has done little to promote its use. **How will you ensure that this law is used to give developing countries better access to affordable medicines?**

## 5. Meeting our foreign aid commitments

Canada can't stop the HIV epidemic at home without helping to stop it worldwide. Yet Canada is not contributing its fair share of resources to global efforts to stop disease and suffering. In June 2005, MPs in the House of Commons unanimously passed a resolution calling on the government to increase Canada's foreign aid to the United Nations target of 0.7 percent of gross national income by 2015. **Will you set a binding timetable to deliver on this commitment?**

We look forward to sharing your answers with our members from coast to coast to coast. Your responses will undoubtedly inform their choices as they cast their ballots on January 23<sup>rd</sup>.

Thank you in advance for your consideration of these important issues.

Sincerely,



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Envoi par courriel

Le mercredi 18 janvier 2006

Monsieur Leon Mar  
Directeur des communications  
Réseau juridique canadien VIH/sida

Monsieur Mar,

Vous trouverez, ci-joint, les réponses au questionnaire que vous nous avez fait parvenir dans le cadre du déclenchement des élections fédérales 2005-2006.

Nous espérons que les réponses fournies vous permettront de mieux comprendre notre action politique.

Nous vous prions d'agréer, Monsieur Mar, l'expression de nos sentiments distingués.

Dominic Labrie  
Cabinet du chef du Bloc Québécois  
3750, Crémazie Est, bureau 307  
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### **1. Répondre avec pragmatisme au VIH parmi les personnes qui s'injectent des drogues.**

#### **Mettez-vous en place un cadre légal permanent pour permettre à l'*Insite* de continuer son travail salvateur?**

Le Bloc Québécois analysera avec grand intérêt le rapport de l'étude scientifique menée par le *B.C. Centre for Excellence in HIV/AIDS* sur les effets du site d'injection de Vancouver's Downtown Eastside.

Comme vous, nous croyons que la répression n'est pas la meilleure solution pour lutter contre la toxicomanie. Nous croyons aussi que le règlement du déséquilibre fiscal permettait aux provinces de mieux supporter les toxicomanes.

### **2. Protéger la santé des détenus pour protéger la santé publique.**

Le Bloc Québécois croit que des études de faisabilité devraient être menées.

### **3. Réduire le risque d'infection par le VIH chez les femmes.**

#### **Augmenterez-vous l'octroi de fonds à la recherche canadienne et internationale en matière de microbicides? Financerez-vous des programmes sur le VIH/sida qui viseront à régler les facteurs élémentaires responsables du risque accru d'infection par le VIH chez les femmes?**

D'une part, le Bloc Québécois, qui œuvre sur la scène fédérale, propose qu'Ottawa augmente de façon substantielle les budgets alloués à la recherche fondamentale. L'identification des causes de certaines maladies et la découverte de nouveaux traitements palliatifs et curatifs permet d'améliorer considérablement la qualité de vie de milliers de Québécois et de Canadiens. Pour le Bloc Québécois, la recherche constitue une des voies les plus prometteuses et doit être stimulée.

D'autre part, concernant les programmes de prévention et de support, le Bloc Québécois constate que le Québec engage déjà, à l'intérieur de son propre système de santé, des ressources pour lutter contre le VIH. Puisque c'est le gouvernement du Québec qui possède la compétence constitutionnelle exclusive en matière de santé, et qu'il est le seul qui peut intervenir auprès de tous les établissements du réseau québécois de santé, le Bloc Québécois estime que c'est à ce gouvernement que revient la décision d'établir les priorités et de développer des plans d'action sur son territoire. Le Bloc Québécois préconise une approche simple pour éviter les dédoublements coûteux : tout financement supplémentaire octroyé par Ottawa devrait être versé directement au Québec et aux provinces afin qu'ils puissent consolider leurs propres réseaux de santé.

#### **4. Fournir des médicaments abordables aux pays en développement.**

##### **Que ferez-vous pour que cette loi soit utilisée pour améliorer l'accès des pays en développement des médicaments abordables?**

Le Bloc Québécois s'est engagé, comme tous les autres partis, à concourir à l'adoption rapide du projet de loi C-9 (37<sup>e</sup> législature) qui a fait l'unanimité à la Chambre des communes.

Ce projet de loi permet aux pays en développement d'avoir accès à des médicaments à un prix abordable et est en ligne directe avec les engagements du Canada et de la communauté internationale à contribuer à l'atteinte des objectifs de développement du millénaire.

À l'instar des autres pays développés, le Canada s'est engagé à respecter ces objectifs notamment en ciblant mieux vers un certain nombre de priorités en matière de développement social (santé, nutrition, sida, protection de l'enfance). Le Bloc Québécois a applaudi ces initiatives.

Cependant, dans son récent exposé de politique internationale pour les années à venir, le gouvernement canadien a honteusement refusé de fixer un délai pour atteindre ces *objectifs de développement du millénaire*.

Le Bloc Québécois va poursuivre ses efforts afin que le gouvernement fédéral respecte ses engagements en matière d'aide aux pays en développement.

#### **5. Respecter nos engagements à l'aide internationale.**

##### **Fixerez-vous un échéancier exécutoire pour respecter cet engagement?**

Le Bloc Québécois propose que le gouvernement fédéral mette en place un plan plus réaliste visant l'atteinte de la cible fixée de 0,7% du PNB. Pour y arriver, il doit augmenter les budgets d'aide au développement à un rythme plus rapide que les 8 % par année qu'il a annoncé en 2003.

Le Bloc Québécois propose aussi que le gouvernement fédéral conditionne toute aide bilatérale au respect de règles minimales en matière de droits de la personne. Le gouvernement fédéral doit aussi s'assurer que les fonds ne soient pas détournés de leurs objectifs initiaux.

**Liberal Response to the  
Canadian HIV/AIDS Legal Network  
Election 2006 Questionnaire**

**1. Will you establish a permanent legal framework to allow Insite to continue its life-saving work?**

As you are aware, the Government of Canada is providing \$1.5 million to support the evaluation component of the three-year pilot project to determine whether supervised injection sites will improve the health of injection drug users and reduce the harm associated with injection drug use.

The results, published after one year, are promising. However, this evaluation represents only an initial step in assessing whether the supervised injection site is reducing the harm associated with injection drug use.

A Liberal government will continue efforts to document the health outcomes of injection drug users associated with the site throughout the three year evaluation period and beyond, and from there will determine an appropriate course of action.

**2. Will you implement needle exchange programs in Canadian prisons to stop the spread of deadly viruses and to protect public health?**

Infectious diseases in prisons are a serious issue and Correctional Service Canada (CSC) recognizes the need for a range of interventions to effectively manage them. This is why CSC has sought the expertise of the Public Health Agency to conduct a study on needle exchange programs. The study is currently underway and we look forward to receiving their report.

**3. Will you increase funding for Canadian and international research on microbicides? And will you fund HIV/AIDS programs in Canada and in developing countries that address the root causes of women's risks of HIV infection?**

The Liberal government, through the Canadian International Development Agency (CIDA), takes a comprehensive approach to addressing HIV/AIDS that focuses on prevention, care, treatment and support, as well as building capacity in developing countries to fight HIV/AIDS. This includes strengthening health systems and capacity building in developing countries, as part of the global response to the epidemic, and research and development related to the development of an HIV/AIDS vaccine.

Addressing the gender dimensions of HIV/AIDS is critical to controlling and eradicating the epidemic. Women, men, boys and girls must have equal opportunity to realize their full human rights, including sexual and reproductive

rights, inheritance and property rights. CIDA will support governments and civil society partners to ensure that individuals, including vulnerable populations and people living with HIV/AIDS, are able to engage and participate in HIV/AIDS prevention, care, treatment and support.

In January 2005, the Liberal government launched the *Federal Initiative to Address HIV/AIDS in Canada*. This is a major federal initiative, evolving from the *Canadian Strategy on HIV/AIDS*. Through the *Federal Initiative*, we doubled the investment in HIV/AIDS programs from \$42 million to \$84 million annually by 2008-2009. In 2005-2006, funding is expected to increase by \$13 million to \$55 million.

The funding will help strengthen surveillance, research, and community response. It will also help to raise public awareness of the seriousness of this disease. In addition, the funds will help ensure that those living with or affected by HIV and AIDS receive the support that they require.

In June 2005, the first meeting of the Government of Canada Assistant Deputy Minister Committee on HIV/AIDS took place. As an initial step toward developing an integrated approach to addressing the epidemic, the committee will develop a Government of Canada Position Statement on HIV/AIDS.

While our commitment to a National AIDS strategy will be a key component of our strategy to reduce and prevent the spread of HIV/AIDS, we believe that public health efforts on health promotion and disease prevention will help achieve better health outcomes for Canadians and reduce pressure on our public health care system.

#### **4. How will you ensure that this law (The Jean Chretien Pledge to Africa Act) is used to give developing countries better access to affordable medicines?**

Canada is recognized worldwide for its leadership in the fight against HIV/AIDS. Canada's commitments in fighting this pandemic includes:

- \$100M to the World Health Organization Initiative to treat three million people with AIDS by 2005;
- \$140M to the Global Fund to Fight AIDS, Tuberculosis and Malaria;
- \$160M to the Global Alliance for Vaccines and Immunization;
- \$67.4M to the United Nations Population Fund; and,
- \$15M to the International Partnership for Microbicides.

Also, this Government put in place Bill C-9, making Canada the first country to adopt legislation to enable developing and least developed countries access to affordable life saving drugs.

Clearly, HIV/AIDS is a top priority of our government. Over the last five years, CIDA's coordinated comprehensive approach in the global fight against AIDS reached a total of \$600 million.

In May 2005, Bill C-9, *The Jean Chrétien Pledge to Africa Act*, came into force, making Canada the first country to enact legislation allowing for the export of generic versions of patented medicines. This legislation is intended to help enable developing and least developed countries access to affordable life saving drugs.

Canada has undertaken (through bilateral meetings and our missions abroad) to provide a number of countries (e.g. South Africa, Ghana) with information on Canada's legislation and will continue to do so over the coming months. Canada is also encouraging other World Trade Organization (WTO) members to follow suit and is willing to offer assistance to those interested in developing similar legislation. To date, Norway is the only other country to have implemented the WTO decision, having passed legislation immediately following Canada.

#### **5. Will you set a binding timetable to deliver on the .7 ODA/GNI commitment?**

Canada is committed to making progress towards the target of 0.7% and we continue to make strong investments in development assistance.

Canada is known for keeping its promises and it would be irresponsible for our government to commit to reaching the 0.7% GNI/ODA ratio by a specified date until we know that this commitment is fiscally possible.

Budget 2005 provided an increase of \$3.4 billion over the next five years for international assistance and commits to doubling our ODA budget to over \$5 billion by 2010. Canada's International Assistance Envelope has increased by eight percent annually since 2002-2003 and will continue to increase by eight percent each year. Our goal is to maintain increases beyond 2010 and accelerate the projected rate of growth in international assistance as our fiscal position continues to improve.

However, development is not just about dollars or abstract ratios. It is also about increasing the effectiveness of our development dollars. As the International Policy Statement articulated, Canada's direct country-to-country assistance will be focused on 25 developing countries, more than half of which are in Africa. These are among the world's poorest countries but have the capacity to use aid effectively. Targeting our efforts in these countries to the sectors of governance, health, basic education, private-sector development, and environmental sustainability, with gender equality as an overall theme, will lead to an increased impact in poverty reduction. Through this integrated approach, we will ensure

that our development assistance will make a difference where the need and the prospects for results are greatest. And we are committed to finding ways to increase our aid even more.

A number of high profile celebrities have called for Canada to increase its Official Development Assistance envelope, but have failed to point out the many Canadian projects that contribute to development, but are not counted as foreign aid. For example, Canada's contribution to the Sudan, where we have committed nearly \$366 million for food and humanitarian assistance as well as support for the peace process and peace-building since 2000.

In addition, Canada has been a global leader in the debate over debt relief for heavily-indebted poor countries around the world, particularly in Sub-Saharan Africa. Under the leadership of Prime Minister Paul Martin, Canada played an important role in the fight for debt relief. Recently, our government's efforts have prompted the G-8 to announce the cancellation of the crushing debt being faced by 18 of the world's poorest countries, an amount totalling over \$40 billion (U.S.).



January 20, 2006

**RE: Canadian HIV-AID Legal Network Questionnaire**

Attached please find the response of the New Democratic Party to your 2006 Election Survey. It is the policy of our party to respond to surveys on behalf of all New Democratic candidates.

For more information, we encourage you to consult our full 2006 election platform at: <http://www.ndp.ca/page/2963>

Thank you for your interest in the views of the New Democratic Party on the critical issues facing Canadians.

We appreciate your efforts to help voters make an informed decision on voting day.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jack', is positioned above the typed name.

Jack Layton  
Leader of Canada's NDP

**1. Will you establish a permanent legal framework to allow Insite to continue its life-saving work?**

Our NDP MP Libby Davis (Vancouver East) is a strong advocate of the safe injection site in Vancouver's Downtown Eastside. She wrote to the Mayor, the federal health Minister and the Vancouver Coastal Health Authority to call for key changes to improve the health of injection drug users and the safety of the community.

She suggested some key changes such as:

- 24 hour coverage for Insite instead of relying on enforcement.
- Additional safe injection facilities across Vancouver.

**2. Will you implement needle exchange programs in Canadian prisons to stop spread of deadly viruses and to protect public health?**

The NDP is ready to study such a proposal with groups and partners like yours.

**3. Will you increase funding for Canadian and International research on microbicides? And will you fund HIV/AIDS programs in Canada and in developing countries that address the root of causes of women's risk of HIV infection?**

The NDP is committed to working with groups like yours to increase funding for research on HIV/AIDS programs in Canada and in developing countries and addressing the root of causes of women's risk of HIV infection.

It's been more than two years since the government introduced the Pledge to Africa legislation to send drugs to developing countries to support the fight against HIV/AIDS, tuberculosis and malaria. Today, not a single drug approved for export is in production. Not a single pill has reached Africa. Each and every day through the delay, 6,000 people in Africa alone die from AIDS. In this Parliament, Jack Layton and the NDP ensured Canada took tangible steps towards keeping this crucial promise to the world and its people. We stopped the billions in tax reductions for large corporations, and instead diverted \$500 million to help the world's poorest and most needy people.

**4. How will you ensure that this law is used to give developing countries better access to affordable medicines?**

Every Canadian is moved by the human tragedy of AIDS decimating many developing countries, particularly in Africa. We want a concerted, cohesive and ambitious plan to address one of humanity's most wrenching and urgent crises. It's time for Canada to take a leadership role by putting our values into action, shown by the leadership of Stephen Lewis, former Ontario NDP Leader and now United Nations AIDS Envoy.

Jack Layton and Canada's NDP will fight AIDS by:

- Ensuring cheaper, generic drugs are available to Africa and the developing world for AIDS and all life-threatening illnesses, such as cancer, malaria and tuberculosis, and by reducing the length of patents for prescription drugs in Canada.
- Honouring Canada's commitment to the Global Fund for AIDS relief by tripling existing funding.

- Working through the United Nations to reform the International Monetary Fund and World Bank to eliminate the drastic lending conditions that cut health and education investment in developing nations, which often result in cuts to AIDS treatment and prevention programs.

5. Will you set a binding timetable to deliver on this commitment?

Yes and we will keep pressuring the government at every opportunity to put in place its commitments related to HIV/AIDS in Canada and abroad.