



News Release

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GOVERNMENT WALKS AWAY FROM TALKS ON CRITICAL HARM REDUCTION MEASURE IN CANADIAN PRISONS

Last-minute about face means prisoners remain at risk of HIV and hepatitis C

TORONTO, January 17, 2017 — In a profoundly disappointing move by a government that claims to support harm reduction and “evidence-based policies,” the Government of Canada has withdrawn from a planned mediation, preferring to waste more money on lawyers to fight evidence-based harm reduction services in prisons. Meanwhile, prisoners will continue to needlessly contract preventable infections, at serious cost to both Canadian public health efforts and the public purse.

This development is in response to an ongoing lawsuit filed against the Government of Canada in September 2012. At that time, Steven Simons, a former federal prisoner, and the [Canadian HIV/AIDS Legal Network](#), [Prisoners with HIV/AIDS Support Action Network \(PASAN\)](#), [CATIE](#) and the [Canadian Aboriginal AIDS Network \(CAAN\)](#) launched a constitutional challenge over the federal government’s failure to protect the health of people in prison by refusing to implement needle and syringe programs to prevent the spread of HIV and hepatitis C virus (HCV) in federal institutions. While incarcerated in a federal prison, Mr. Simons was infected with HCV, contracted from used injection equipment despite his best efforts to avoid this risk.

Months ago, the Government of Canada’s agreed to mediation; talks were scheduled to begin next week, on January 23rd. Last week, the government abruptly withdrew, a stunning decision for a government ostensibly committed to “evidence-based policies” – especially given the welcome support for harm reduction from both Prime Minister Trudeau and Health Minister Dr. Jane Philpott. During the last election, the Liberal Party of Canada recognized explicitly in writing that “[there is compelling evidence to support needle and syringe programs \(NSP\) in prisons as being an effective way to decrease syringe sharing among inmates who inject drugs, thereby decreasing the risk of HIV and HCV transmission between inmates.](#)” Prison-based NSPs are widely viewed as a logical and life-saving extension of community-based harm reduction measures, such as Vancouver’s Insite, which are supported – by words and [political action](#) – by the federal government itself.

“Bizarrely, the government is repeating the misconception that providing sterile injecting equipment will result in safety concerns for prison staff, when the evidence indicates the opposite is actually true,” said Richard Elliott, Executive Director of the Canadian HIV/AIDS Legal Network. “Needle and syringe programs have been successfully implemented in dozens of prisons in multiple countries around the world, for more than two decades. No instances of needles from such programs being used as weapons against guards or other prisoners have been reported. Instead, such programs make for a

safer environment for both prisoners and staff, by curbing the spread of HIV and hepatitis C and by reducing the current risk of accidental needle sticks with concealed equipment that is more likely to have been used by multiple people and hence more likely to pose a risk of infection.”

Much research has been done on PNSPs, and the public health and human rights arguments for their implementation are sound. The Canadian and Ontario Medical Associations and the Correctional Investigator of Canada, among others, have recommended such programs. Both the Public Health Agency and the Correctional Service of Canada’s own expert committee concluded the evidence supports such programs. In 2016, some 250 Canadian organizations, representing the views of a broad cross-section of civil society, signed a [statement](#) urging federal and provincial governments to immediately implement needle and syringe programs in prisons across the country.

Most importantly, the Government of Canada’s decision to withdraw from mediation will continue to cost prisoners, a disproportionate number of whom are Indigenous or Black, their health and human rights.

“The government professes concern for the health of Indigenous people, yet denies evidence-based harm reduction services in prisons when its own figures show this does further harm to a population at higher risk of HIV and hepatitis C infection that is disproportionately Indigenous people,” said Elliott. “Their professed concern rings hollow in the face of intransigence such as this.”

For further information on this lawsuit, please visit <http://www.prisonhealthnow.ca/learn-more/about-the-lawsuit.php>.

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