THE GLOBAL AIDS CRISIS: FOUR STEPS FOR CANADA
A Civil Society Platform for Action

Over 40 million people worldwide are living with HIV/AIDS. In this year alone, more than five million people will be infected. Ninety-five per cent of these people live in the developing world. Only 1.3 million people worldwide have access to anti-retroviral medicines, despite the World Health Organization (WHO) goal to have three million in developing countries on anti-retroviral treatment by the end of 2005, and despite WHO estimates that 6.5 million people need them right now. Support for HIV prevention also lags far behind the need, even though it is essential to overcoming the pandemic.

The AIDS pandemic is rolling back development gains in many countries and undermining their capacity to meet the needs of their people. The pandemic is fuelled by and perpetuates stigma, discrimination, and the denial of human rights, particularly for women and girls. Gender inequality puts women and girls at greater risk of contracting HIV, and also hinders their access to HIV prevention, treatment, care and support.

At the G8 Summit in July 2005, the leaders of the richest industrialized nations, including Canada, pledged to develop and implement a comprehensive response to AIDS with the goal of achieving universal access to HIV/AIDS treatment by 2010. Sustained action will be required to deliver on this promise.

As the host of the 2006 International AIDS Conference to be held in Toronto, August 13–18, 2006, Canada must show leadership. Here are four steps for Canada to do its part:

- Pay our fair share of prevention and treatment in developing countries.
- Invest in the public health care systems of developing countries.
- Cancel the debts of developing countries to free up resources to fight AIDS and poverty.
- Follow through on commitments to make medicines affordable to developing countries.
HIV/AIDS TREATMENT AND PREVENTION: four steps to universal access

1. PAY OUR FAIR SHARE

Canada must contribute its fair share to cover the cost of HIV prevention, care, treatment and support programs to address HIV/AIDS in Canada and around the world. UNAIDS estimates that US$18.1 billion is required in 2007, and $22.1 billion in 2008, to combat the pandemic. Canada’s response should be comprehensive, supporting HIV/AIDS through a range of civil society, bilateral and multilateral mechanisms, including support for the international work of Canadian non-governmental organizations.

We call on Canada to:

• Double financial support for domestic and international research and development of new HIV prevention technologies, such as microbicides and vaccines, which are of particular importance in addressing women’s heightened vulnerability to infection.

• Contribute 5% of the resource requirements of the Global Fund to Fight AIDS, TB and Malaria, the most important multilateral mechanism for scaling up HIV prevention, care, treatment and support, over each of the next five years.

• Announce a timetable for raising Canada’s development assistance to the long-promised target of 0.7% of gross national income, as other countries have.

2. INVEST IN PUBLIC HEALTH CARE SYSTEMS

An essential prerequisite for improving health and fighting disease is a functioning public, not-for-profit health care system. Crumbling infrastructure, chronic under-financing, workforce attrition, and migration of health care workers have eroded health systems in many developing countries, even as the burden of disease has increased.

The lack of trained health care workers, particularly in sub-Saharan African and the Caribbean, due in part to recruitment by rich countries including Canada, is undermining developing countries’ capacity to prevent infection and to treat and care for their people.

We call on Canada to:

• Provide development assistance for public health care systems in developing countries to sustain HIV treatment and prevention.

• Support greater retention of health care workers in developing countries by providing development assistance for training opportunities and improved wages, benefits and working conditions.

• Work with provincial governments, universities, health care institutions, associations of health professionals and health worker unions to invest in training and retention of personnel in Canada and to discourage active recruitment of health professionals from developing countries.

• Work with other countries and international organizations to implement migration and recruitment policies that mutually benefit source and destination countries.
3. CANCEL THE DEBT

On average, African governments spend on debt service three times per capita what they spend on health care. Of the ten countries with the highest levels of HIV infection, only two — Zambia and Mozambique — will benefit initially from the debt relief plan promised by the G8 in 2005. By mid-2006, the plan will remove only 13% of the debts of the 60 countries most burdened by AIDS, debt and poverty.

What’s more, the International Monetary Fund and World Bank impose strict conditions on governments seeking loans or debt relief, such as forced privatization, user fees for public services and limits on hiring of health care workers, raising severe obstacles to their efforts to control the AIDS pandemic.

We call on Canada to:
• Promote the immediate and unconditional cancellation of 100% of the multilateral and bilateral debt owed by countries burdened by AIDS, debt and poverty.
• Ensure that debt cancellation is not conditional on requirements that hinder the fight against the AIDS pandemic.

4. MAKE MEDICINES AFFORDABLE

The price of patented medicines is a major obstacle to achieving universal treatment, including urgently needed fixed-dose combinations and paediatric formulations of HIV/AIDS drugs.

In 2004, Parliament unanimously passed the Jean Chrétien Pledge to Africa Act to help developing countries obtain more affordable generic medicines from Canadian manufacturers. Though the law came into effect in May 2005, not a single generic drug has yet left Canada as a result.

Disincentives built into the legislation have discouraged Canadian generic companies and developing countries from using the law. In the absence of concerted efforts by generic manufacturers and the federal government, there will be little concrete benefit to report when Parliament reviews the legislation in 2007.

We call on Canada to:
• Promote in developing countries the opportunity to obtain more affordable medicines from Canadian generic manufacturers.
• Broker exploratory meetings between Canadian generic manufacturers and health ministries in developing countries.
• Remove unnecessary red tape that dissuades generic drug manufacturers and developing countries from using the legislation.

We call on the generic drug industry in Canada to:
• Seek opportunities to export generic medicines to developing countries.
• Collaborate with developing country health ministries and NGOs in identifying medicines Canadian generic manufacturers can produce.
• Make special efforts to develop fixed-dose combinations and paediatric formulations of HIV/AIDS drugs.
KEEPING THE PROMISE

The steps outlined in this Plan for Action would ensure Canada does its part to fulfill the G8’s pledge of a comprehensive response to HIV/AIDS with the goal of achieving universal access to treatment by 2010. Canada should actively encourage all G8 members to follow through on this commitment by making sure the global AIDS pandemic remains on the agenda of all G8 meetings.

This call for action is endorsed by:

AIDS Action Now!
AIDS Bow Valley
AIDS Calgary Awareness Association
AIDS Coalition of Cape Breton
AIDS Committee of London
AIDS Committee of Ottawa
AIDS Committee of Windsor
AIDS Thunder Bay
Alberta Community Council on HIV
Alliance for South Asian AIDS Prevention
Asian Community AIDS Services
BC Persons With AIDS Society
British Columbia Nurses’ Union
Bruce House — Ottawa
Canada Africa Community Health Alliance
Canada Africa Partnership on AIDS
Canadian AIDS Society
Canadian AIDS Treatment Information Exchange
Canadian Association of Nurses in AIDS Care
Canadian Catholic Organization for Development and Peace
Canadian Coalition on HIV/AIDS and Youth in Africa
Canadian Council for International Co-operation
Canadian Crossroads International
Canadian Federation for Sexual Health
Canadian Federation of Nurses Unions
Canadian Feed The Children
Canadian HIV/AIDS Legal Network
Canadian Labour Congress
Canadian Physicians for Aid and Relief
Canadian Public Health Association
Canadian Society for International Health
Canadian Support of Rural African Initiatives
Canadian Treatment Action Council
Canadian Union of Public Employees
Canadian Working Group on HIV and Rehabilitation
CARE Canada
Carleton University AIDS Awareness Society
Center for International Studies and Cooperation
CHF — Partners in Rural Development
Coalition des organismes communautaires québécois de lutte contre le sida
Conception Bay North AIDS Interest Group Inc.
CUSO
Defence for Children International — Canada
Foster Parents Plan
Help Lesotho
HIV North Society
Hummingbird Kids Society
Interagency Coalition on AIDS and Development
KAIROS — Canadian Ecumenical Justice Initiatives
Lawrence Heights Community Health Centre
Manitoba Nurses’ Union
Mennonite Central Committee
National Automobile, Aerospace, Transportation and General Workers Union of Canada (CAW-Canada)
National Union of Public and General Employees
New Brunswick Nurses Union
Newfoundland and Labrador Nurses’ Union
North-South Institute
Nova Scotia Nurses’ Union
Ontario Council for International Cooperation
Ontario Nurses’ Association
Oxfam Canada
Oxfam Québec
People to People Aid Organization (Canada) Inc.
People’s Health Movement Canada
Point de repères
Primate’s World Relief and Development Fund
Prince Edward Island Nurses’ Union
Public Service Alliance of Canada
RESULTS Canada
Rights & Democracy
Saskatchewan Union of Nurses
Save the Children Canada
STOP TB Canada
Students Against Global AIDS
The Marquis Project
Transition House Association
Transition House Association of Nova Scotia
UNICEF Canada
Union for Improved Services, Communication, and Education
United Church of Canada
United Nurses of Alberta
United Steelworkers
Western Aboriginal Harm Reduction Society
World University Service of Canada
World Vision Canada

This Platform for Action will be presented to Prime Minister Stephen Harper in conjunction with the 2006 International AIDS Conference in Toronto. To add your organization to the list of endorsers, contact:

htag@aidslaw.ca

This platform is available at www.aidslaw.ca/htag

UN POPULATION FUND
www.unfpa.org/aids_clock/index.html

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In the time taken to read this document, an estimated 100 people have become infected with HIV. Act now.