

The Honourable Patty Hajdu, Minister of Health
Health Canada
Address Locator 0900C2
Ottawa, Ontario
K1A 0K9

Dear Minister,

We write on behalf of the members of the Alberta Community Council on HIV (ACCH), Coalition des organismes communautaires québécois de lutte contre le sida (COCQ-SIDA), the Ontario AIDS Network (OAN) and the Pacific AIDS Network (PAN)¹ to congratulate you on your recent appointment as Minister of Health.

Our organizations are coalitions of people with HIV/AIDS and HIV/AIDS related Organizations and Programs who work to represent the needs/issues of HIV/AIDS, hepatitis C and other sexually transmitted-and blood-borne infections (STBBI) focused organizations in each of our regions. Collectively we represent 135 front-line organizations in Quebec, Ontario, British Columbia and Alberta. We believe that regional organizations such as ours should play a central role in informing the Government of Canada's response to the HIV, hepatitis C and STBBI epidemics in Canada.

As you know, many Canadians remain highly vulnerable to HIV/AIDS through a lack of knowledge of how to prevent HIV transmission and the challenges of limited access to care or treatment. Currently more than 63,000 Canadians live with HIV and experience the discrimination and stigma that can surround a life with HIV. In addition, approximately 245,000 Canadians are living with chronic hepatitis C.

In Canada and globally, progress in the HIV and hepatitis C epidemics represent some of the major medical breakthroughs of our time. Anti-retroviral treatment (ART) for HIV, while not offering a cure, has meant that HIV positive people can live long and healthy lives, as well as not pass on HIV to their partners. Emerging prevention technologies such as PrEP and access to innovations in testing provide new opportunities prevent new transmissions. New highly effective direct-acting (DAA) treatments for hepatitis C are now available, well tolerated, and cure more than 95% of people who are treated.

This progress has given us the rare opportunity to eliminate HIV and hepatitis C as public health problems in Canada. However, effective treatments are not enough. We need effective strategies and sufficient resourcing for prevention, testing, initiation of care and treatment, and ongoing care and support.

We appreciate the recent approval of the Action Plan to accelerate prevention, diagnosis and treatment to reduce the health impacts of STBBI in Canada by 2030. The Action Plan's commitments to reduce stigma and transmission and to increase access to testing, treatment and supports will help to ensure our success in ending the epidemic. We also appreciate the Plan's commitment to Canada's Indigenous communities and to ensuring that initiatives are culturally safe and responsive. This Plan is ambitious and we look forward to supporting the implementation and evaluation of the Plan over the coming decade.

We would also like to congratulate you for the Liberal Government's recent increase in funding to the Global Fund and its \$930 million commitment over the next three years. It is imperative to consider

¹ See appendix I for agency descriptions.

stepping up our efforts and funding at home as well. We will not end this epidemic in isolation, and support for international efforts as well as national, regional and local efforts is very important.

With that said, there are a number of issues that are of concern to our sector, these include:

- Ensuring that people living with HIV, people with lived experience of hepatitis C and others with lived experiences are involved in significant roles in the Government of Canada’s response to HIV/AIDS and STBBIs in Canada and abroad.
- Reaffirming the commitment of Canada to the UNAIDS objectives for the elimination of HIV by 2030 (95-95-95) and to the elimination of hepatitis C by 2030, while affirming the importance of prevention and the quality of life of people living with HIV and hepatitis C.
- Ensuring the sustainability of the front-line community-based response to HIV, hepatitis C and STBBIs through the stability and growth of the Community Action Fund and other such funding initiatives.
- Democratizing access to testing for HIV, hepatitis C and other STBBIs by encouraging the development and market availability of testing technologies, including point-of-care tests, dried blood spot tests and self-tests, developed in Canada.
- Ensuring that the Government of Canada not create barriers to the provinces’ harm reduction and overdose prevention-based public health interventions, in recognition of harm reduction as one of the four pillars of the Canadian Drugs and Substances Strategy.
- Ensuring the removal of HIV non-disclosure from the reach of sexual assault law and limiting the criminalization of HIV non-disclosure to intentional transmission only, this includes a commitment to not extending such laws to the transmission of other sexually transmitted infections.
- Ensuring an effective response to address the drug poisoning crisis and creating a safe supply of drugs, to protect and prevent further overdoses.
- Pursuing the decriminalization of sex work as a first step to protecting and respecting the human rights of all sex workers - this begins with the removal of criminal and immigration laws that criminalize sex work.

We would like to meet with you as soon as possible to discuss some of the issues currently facing people living with HIV, hepatitis C and those most “at risk” in each of our regions. We would also appreciate the opportunity to meet with you as a group to discuss some of the issues included above.

We look forward to working with you in the fight against HIV/AIDS, hepatitis C and STBBIs.

Sincerely,



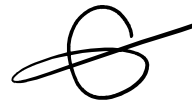
J. Evin Jones
Executive Director
PAN



Shannon Ryan
Executive Director
OAN



Ken Monteith
Executive Director
COCQ-SIDA



Celeste Hayward
Executive Director
ACCH

For British Columbia: Pacific AIDS Network (PAN)

Contact: J. Evin Jones, Executive Director • evin@pacificaidnetwork.org • 603-402 West Pender St., Vancouver, British Columbia V6B 1T6

For Ontario: Ontario AIDS Network (OAN)

Contact: Shannon Ryan, Executive Director • sryan@oan.red • 300- 252A Carlton St., Toronto, Ontario M5A 2L1

For Québec: COCQ-SIDA

Contact: Ken Monteith, Executive Director • ken.monteith@cocqsida.com • 1, rue Sherbrooke Est, Montréal, Québec H2X 3V8

For Alberta: Alberta Community Council on HIV (ACCH)

Contact: Celeste Hayward, Executive Director • chayward@acch.ca • P.O. Box 2458 Stony Plain, Alberta T7Z 1X9



Appendix I – Agency Descriptions

Ontario AIDS Network (OAN)

The Ontario AIDS Network (OAN) is a coalition of 43 AIDS Service Organizations and AIDS Service Programs who work collectively to provide a just, effective response to HIV and AIDS, improve life for people infected with and affected by HIV and AIDS, and prevent the spread of the virus.

The OAN is a member-driven organization. Since we were established (August 13, 1993), we have created a forum where members debate key prevention, treatment and advocacy issues. We create opportunities for people with HIV and AIDS and community-based organizations to share experiences and develop new skills. The OAN also works to give the community-based HIV and AIDS sector a collective voice.

Our members have used that voice effectively – to advocate successfully for funding for HIV and AIDS services, to actively promote the greater involvement of people with HIV and AIDS, and to speak loudly on issues that affect the rights and well-being of people with HIV and AIDS, such as income and housing supports for people with HIV.

Alberta Community Council on HIV (ACCH)

The Alberta Community Council on HIV is a non-profit, provincial member driven network of regionally based organizations. ACCH and its members have a collective responsibility to HIV and related issues and its outcomes at the provincial and local level. As an organization the ACCH membership is growing, and now includes 17 members, ten are mainstream and seven are Indigenous. Through a social justice lens ACCH supports community-based responses to HIV, Sexually Transmitted and Blood Borne Infections, Sexual Health via advocacy, harm reduction, education, skills building training and health promotion.

The ACCH believes that all people affected by HIV, other STBBIs and related issues live in equitable and inclusive environments of health. This is achieved through collective action to address stigma and disparities associated with HIV, other STBBIs and related issues. For the ACCH, harm reduction is a holistic approach that aims to increase safety, agency, and wellness. This includes the provision of stigma free policies, programs, practices and environments.

Coalition des organismes communautaires québécois de lutte contre le sida (COCQ-SIDA)

The Coalition des organismes communautaires québécois de lutte contre le sida (COCQ-SIDA) brings together Québec community organizations involved in the fight against HIV/AIDS and exercises its leadership to encourage, support, consolidate and promote community-based action in the fight against HIV/AIDS in Québec.

COCQ-SIDA works with its 35 member organizations to train front-line staff, develop information tools for prevention and support services, conduct community-based research and advocate for the rights of those affected by HIV/AIDS.

COCQ-SIDA is a founding member of Coalition PLUS, an international francophone coalition of community organizations fighting HIV/AIDS and viral Hepatitis.

Pacific AIDS Network (PAN)

The Pacific AIDS Network (PAN) works collaboratively with over 40 member organizations and people affected by HIV and hepatitis C to build capacity and skills for stronger communities in British Columbia. We provide workplace training, leadership development, and research and evaluation initiatives to



support all regions in the province. We are the voice for our members, advocating for change in public perception and policies. We help organizations build stronger communities and leaders.

HIV is the heart of our work historically, and people with HIV have an important role in our past and present directions. Our work has expanded as issues related to HIV emerged: hepatitis C and other health diagnoses, mental health, and problematic substance use. Other issues that impact how people access care include safe housing, food security, and poverty in general. These issues influence our work and we support the involvement of people with lived experience in our community-based response.

PAN, as a provincial organization, gratefully and respectfully works and partners with Indigenous Peoples in what is often referred to as British Columbia.

