## Statement Énoncé

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## DYING FOR LACK OF MEDICINES IN DEVELOPING COUNTRIES

43 organizations join in statement on the 5<sup>th</sup> Anniversary of Canada's Access to Medicines Regime (CAMR)

May 14, 2009 — Ottawa and Toronto

We represent thousands of Canadians from coast to coast to coast but more importantly, we write on behalf of the 10 people who will die from treatable disease in the two minutes it will take to read this statement. Sadly, a large proportion of them are children.

Exactly five years ago today, on May 14<sup>th</sup>, 2004, the legislation that created Canada's Access to Medicines Regime (CAMR) passed with unanimous support from all political parties in Parliament and received Royal Assent.

The goal was, and is, worthy: get more affordable, generic medicines to people in the developing world. Canada was the first country to respond to changes in international trade laws which allowed compulsory licensing of life-saving medicines.

Unfortunately, that laudable initiative was, and is, seriously flawed.

In five years, CAMR has been used only once, to supply a single order of three-in-one AIDS medicine to Rwanda. This one instance required years of effort by a generic pharmaceutical manufacturer and numerous civil society organizations, plus the involvement of an international foundation.

These medicines, delivered last September, represented a significant breakthrough for the roughly 21,000 patients in Rwanda with HIV who will now receive medicine that would otherwise have been unavailable. But they are only a fraction of the response needed to scale up AIDS treatment in the developing world.

Furthermore, CAMR is unlikely to be used again to achieve the stated humanitarian objective of increasing access to affordable treatment for people with HIV or other diseases in poor countries. It is not the user-friendly mechanism developing countries need to ensure a sustainable supply of medicines.

Fortunately, there is hope. New legislation currently before parliament (Bill S-232) proposes streamlining CAMR by moving to a 'one-licence solution,' instead of the current

country-by-country, order-by-order process of compulsory licensing. A 'one-licence solution' would address the key bottleneck impeding use of CAMR by both developing countries and suppliers of generic medicine.

We know from discussions with concerned citizens and civil society organizations across the country that Canadians are not willing to stand by and see Canada fail to deliver on the promise made by Parliament five years ago today.

Time is of the essence: lives are being lost each day. CAMR is now five years old. Many of the children that it could help save never made it to that age. At the moment, half of all children with HIV in sub-Saharan Africa die before the age of two because they don't have access to affordable, practicable medicines suited for children. Canada could help address this desperate public health and human rights tragedy by streamlining CAMR to make it workable.

On this anniversary date, we call upon all Parliamentarians to renew their commitment to strengthen Canada's role in responding to the AIDS crisis and other global health needs and to commit to fixing CAMR to deliver on the promise Parliament made on behalf of all Canadians.

We call on Canadian citizens to demand their representatives in Parliament remove the current hurdles and inefficiencies in CAMR.

For more information: www.aidslaw.ca/camr.

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## For further information:

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Action Canada for Population and Development
Africa Change International
African and Caribbean Council on HIV/AIDS in Ontario
AIDS Committee of Guelph & Wellington County
AIDS Committee of Toronto
AIDS Community Care Montreal
AIDS PEI
Around the Corner Kingston Grandmothers
Black Coalition for AIDS Prevention (Toronto)
Bracelet of Hope Campaign (formerly Masai for Africa)

British Columbia Persons With AIDS Society

Burlington Ubuntu Grandwomen

Canadian AIDS Treatment Information Exchange

Canadian Association of Nurses in AIDS Care

Canadian Crossroads International

Canadian Federation of Medical Students

Canadian Harm Reduction Network

Canadian Hemophilia Society

Canadian HIV/AIDS Legal Network

Canadian Physicians for Aid and Relief

Canadian Treatment Action Council

Canadian Working Group on HIV and Rehabilitation

CAP AIDS

Central Alberta AIDS Network Society

Coalition des organismes communautaires québécois de lutte contre le sida

G-Moms of Port Perry, Grandmothers to Grandmothers Campaign

Grandmothers to Grandmothers Campaign National Advocacy Committee

HIV & AIDS Legal Clinic (Ontario)

**HIV Edmonton** 

Interagency Coalition on AIDS and Development

Living Positive Resource Centre (Okanagan)

McGill Global AIDS Coalition

**OHAfrica** 

Ontario AIDS Network

Oxfam Canada

People's Health Movement Canada

Positive Living North

**RESULTS Canada** 

Streetworks (Edmonton)

Toronto People With AIDS Foundation

**UNICEF** Canada

Universities Allied for Essential Medicines

Women For African Grandmothers (Toronto)