

# **HIV: Funding the Fight**

"A major struggle for us, and many AIDS service organizations across Canada, is that right now, we're always reacting and feeling as though we're doing the bare minimum. Oftentimes we can't reach and help those who need it most. Increased funding would allow us to address larger issues at hand, and greatly increase services with fewer gaps." – GILLES CHARETTE, EXECUTIVE DIRECTOR OF HIV/AIDS REGIONAL SERVICES (KINGSTON, ONTARIO)

In 2003, the House of Commons Standing Committee on Health unanimously recommended that Canada double its HIV funding to \$85 million annually. A year later, the government launched the *Federal Initiative to Address HIV/AIDS in Canada,* with a commitment to reach this level of funding by 2008 and sustain it thereafter.

The promised increase in HIV funding, however, was soon derailed. In 2007, a new federal government abandoned the commitment of increased HIV funding — instead freezing HIV funding at approximately \$72.6 million annually. In addition, it launched a new five-year initiative on HIV vaccine research, but rather than committing new funding for this, diverted millions from the already-lowered allocation intended for existing services and programs. (That research initiative was then extended for a further five years; it ended in 2017 but the funds that were being diverted to it each year have still not been restored to the Federal Initiative.)

As a result, from the launch of the Federal Initiative in 2004–05 through the end of the 2017–18 fiscal year, more than \$123 million in total has been diverted or withheld from committed HIV funding. Services and organizations have either closed or have discontinued some programs, despite the clear need.

In 2019, the federal government released a new federal *Five-Year Action Plan on Sexually Transmitted and Blood-Borne Infections* (STBBIs), including HIV. However, the plan does not include firm targets (hence weakening accountability) and the funding is simply inadequate: the \$87 million per year the government has now committed is intended to address not only HIV but also hepatitis C (HCV) and other STBBIs, putting even greater strain on what were already recognized as insufficient resources for addressing HIV alone.

Community organizations across the country have called for an adequately funded federal HIV strategy for decades. In June 2019, federal MPs reiterated this call, when the House of Commons Standing Committee on Health once again unanimously recommended an increase in federal funding for just the HIV response, this time to \$100 million annually.

## **PRIORITIES FOR ACTION**

In order to have any chance of meeting global targets endorsed by Canada and all countries, including UNAIDS' targets for HIV prevention and treatment and the Sustainable Development Goal of ending AIDS by 2030, we must:

- **Commit to restoring the millions of dollars** in funding that have been frozen, diverted, or simply allowed to lapse unspent in Canada's response to HIV over more than a decade.
- Fund the response to HIV alone at \$100 million annually, the level recommended by the House of Commons Standing Committee on Health in 2019 including secured, long-term funding for the community-based organizations that are essential to this response.
- **Provide** *additional* funding for the necessary and complementary efforts to address HCV and other STBBIs.



## **FACTS AND FIGURES**

- Since the launch in 2004 of the *Federal Initiative to Address HIV/AIDS in Canada,* through the end of 2017–18, more than \$123 million of funding committed to the HIV response has simply never been delivered.
- UNAIDS estimated that resources for community mobilization needed to increase three-fold from 2016 to 2020, with further increases required from 2021 to 2030, in order to achieve the Sustainable Development Goal to which Canada and all other countries have committed. With Canada's funding insufficient and mostly flatlined, it will be difficult to reach our targets and sustain an effective response to what is an ongoing public health challenge.
- There are more than 2500 new HIV infections per year in Canada. The number of people living with HIV in Canada is increasing and the epidemic affects various populations differently, with diverse needs to be addressed. The resources they need to maintain their health, and enjoy their human rights free from discrimination because of their medical condition, remain unfunded.

### FEDERAL FUNDING LEVELS YEAR BY YEAR

#### FEDERAL INITIATIVE TO ADDRESS HIV/AIDS IN CANADA

Fiscal Year	Planned Spending per original FI commitment		Actual Spending	Gain (+) or loss (-) of federal funds for HIV response
2004–05	\$47.2 M		\$47,273,020	\$73,020
2005-06	\$55.2 M		\$54,829,030	\$370,970
2006-07	\$63.2 M	After (i) reductions and (ii) reallocations to CHVI	\$63,132,900	\$67,100
2007–08	\$71.2 M	\$60.93 M	\$61.0 M	\$10,200,000
2008-09	\$84.4 M	\$73,903,572	\$69,244,263	\$15,155,737
2009–10	\$84.4 M	\$71,171,229	\$68,864,704	\$15,535,296
2010-11	\$84.4 M	\$72,774,385	\$70,340,098	\$14,059,902
2011-12	\$84.4 M	\$73,658,271	\$72,936,468	\$11,463,532
2012-13	\$84.4 M	\$76,098,412	\$72,438,512	\$11,961,488
2013-14	\$84.4 M	\$72.3 M	\$73.0 M	\$11,400,000
2014-15	\$84.4 M	\$70,455,059	\$70,551,936	\$13,848,064
2015-16	\$84.4 M	\$70,505,687	\$70,200,939	\$14,199,061
2016-17	\$84.4 M	\$72,600,000	\$71,712,725	\$12,687,275
2017-18	\$84.4 M	\$72,600,000	\$78,248,313	\$6,151,687*
Cumulative net loss of federal funding for the response to HIV from FY 2004-05 to FY 2017-18				\$123,132,779 (at least \$123 million)

\* Note that in FY 2017/18, HIV and HCV grants and contributions programs were amalgamated into the single HIV and Hepatitis C Community Action Fund (CAF) "to support an evidence-based strategic and integrated approach to prevent new STBBI infections among priority populations." Given this change, and based on publicly available data from PHAC, it is impossible to determine the exact portion of the actual spending that was directed to HIV programs as distinct from programs to address other STBBIs. Even if the entirety of actual spending (\$78,248,313) in FY 2017/18 had been dedicated to HIV programs — which is known not to be the case, since some of this spending was dedicated to HCV and/or other STBBI programs — this funding falls well short of the pledged \$84.4 million in funding for the HIV response alone. Therefore, the cumulative loss of \$123 million from the HIV response since FY 2004/05 understates the actual loss.

For further analysis, please see our updated brief "Funding the Fight: Federal Support Needed to End HIV as a Public Health Threat in Canada," available at hivlegalnetwork.ca/fundingthefight.

#### **KEY RESOURCES**

Standing Committee on Health, Strengthening the Canadian Strategy on HIV/AIDS (June 2003).

Government of Canada, *Federal Initiative to Address HIV/AIDS in Canada* (2004). [The online version of this publication on the PHAC website appears to have had the funding commitments removed. However, the original publication is available in full (in PDF format) online at www.hivlegalnetwork.ca/federal-initiative.]

Standing Committee on Health, The Health of LGBTQIA2 Communities in Canada (Recommendation 20) (2019).

Sources of figures on planned and actual spending:

- Federal Initiative to Address HIV/AIDS in Canada Implementation Evaluation Report (2004-2007), Annex I-4 Federal Initiative Allocations by Areas of Action (2009).
- Health Canada and Public Health Agency of Canada, Evaluation of the Federal Initiative to Address HIV/AIDS in Canada 2008-09 to 2012-13, Appendix 2: Federal Initiative Allocation and Expenditures, 2008-09 to 2012-13 (January 2014).
- Public Health Agency of Canada, Departmental Performance Report: Supplementary Information Tables (for each fiscal year from 2006 to 2019).

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