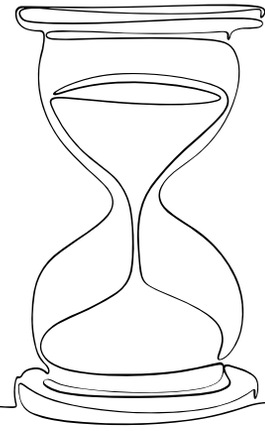
Investing in Global Health Is A Human Rights Imperative, Now More Than Ever



INTRODUCTION

We are facing the erosion of human rights, escalating conflicts, rising anti-democratic trends, growing disinformation campaigns, shrinking civic space, and deepening inequalities globally. Now more than ever, Canada must step up and support human rights through our investments in global health and international development.

Canada has long been a staunch leader of health and human rights and a leading investor in the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund), the world's largest multilateral financier of global health grants for low- and middle-income countries (LMICs) specifically aimed to end HIV, tuberculosis (TB), and malaria as public health threats. The fight against HIV, TB, and malaria is more than just a public health issue. It is a fight for equality, human dignity, and a world where access to good health and well-being is not determined by identity or origin. It critically intersects with other international efforts to secure peace, security, education, nutrition, climate resilience, and prosperity for all.

The time is now: we must continue to ambitiously invest in the Global Fund and other global health financing mechanisms that share this vision (e.g. Gavi – the Vaccine Alliance, UNAIDS – the Joint United Nations Programme on HIV/AIDS, and the World Health Organization), particularly as other countries are withdrawing or decreasing their support.

Investments in global health align with Canada's commitments to advance the 2030 Sustainable Development Goals (SDGs) by tackling gender inequality, health disparities, and promoting human rights. These investments are also what Canadians want and closely align with core Canadian values. Cooperation Canada's 2023 national poll found that **77% of Canadians believe that it is important to maintain Canada's history of supporting other countries in need, and 81% support Canada providing Official Development Assistance (ODA)**. The world's financial architecture for health and development is in grave danger, placing hard-won progress in peril.

HIV LEGAL NETWORK RÉSEAU JURIDIQUE VIH

When global health financing mechanisms like the Global Fund do not receive sufficient support, the most marginalized communities suffer. Those most at risk of HIV and criminalization — including LGBTQ+ people, people who use drugs, sex workers, migrants, people in prison, and Black and Indigenous people — are put in jeopardy when states do not commit to supporting them. **Canada must embrace global health investments as a powerful tool to secure human rights, equality, and systemic change that will drive stronger, safer, healthier, more resilient, equitable, and prosperous societies for all.**

Investing in global health is also a key part of protecting the human right to health, which all states have a duty to uphold. As a signatory to the International Covenant on Economic, Social and Cultural Rights (ICESCR), Canada is required to fulfill global health obligations via international assistance and cooperation, including investments and economic support to LMICs. **Investing in global health is investing in health justice. It is a rights-based imperative that transcends borders** and requires collective action within and across nation states to achieve internationally endorsed global frameworks, conventions, declarations, and United Nations outcome documents.

As the Global Fund's Eighth Replenishment approaches and the 2030 Sustainable Development Goal target to end AIDS, TB, and malaria nears, **now is a critical moment for Canada to show strong global health and human rights leadership on the international stage. We can do this by renewing our commitments to global health and invest in global health financing mechanisms internationally, bilaterally, and domestically.**

Priorities for Action

To effectively uphold global health and human rights, Canada must commit to dedicated funding, bold leadership, and clear and consistent action. We must:

- ***Increase*** Canada's investments in the Global Fund to help reach its Eighth Replenishment funding goal of USD18 billion and ***demonstrate*** our commitment to global health justice and solidarity;
- ***Commit*** to investments in and active solidarity with Canadian health and human rights organizations who provide essential technical assistance and frontline support to communities, civil society partners, and governments globally;
- ***Adopt*** an unwavering human rights approach in Canada's global health responses to HIV, TB, and malaria that is boldly responsive to the inextricable link between global health and human rights;
- ***Meaningfully engage*** with global key vulnerable populations affected by HIV, TB, and malaria and ***prioritize*** these communities' voices when investing in global health initiatives and financing mechanisms;
- ***Reaffirm*** Canada's commitment to and build upon its Feminist International Assistance Policy, thereby ***reinforcing*** the emphasis on human dignity, human rights, and gender equality at the core of all Canadian foreign policy.

FACTS AND FIGURES

Investments in global health are key to protecting the human rights of those most at risk of infectious diseases such as HIV. Because there is a clear link between criminalization, HIV risk, and increasing HIV cases, Canada must commit to protecting and advancing the human rights of the following populations, all of whom are at heightened risk of criminalization and therefore poor health outcomes:

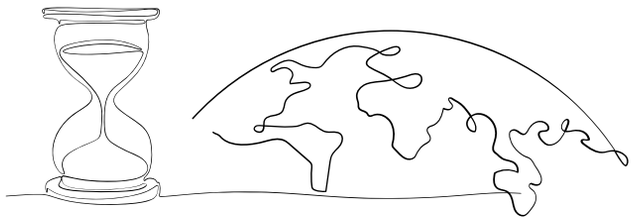
- ***LGBTQ+ people:*** As of 2025, 65 countries still criminalize same-sex intimacy, 12 of which impose the death penalty in certain circumstances. LGBTQ+ people who live in states with anti-gay laws face greater risk of HIV transmission because these punitive laws drive them away from effective HIV services, including HIV prevention, treatment, and care. This stigma and criminalization further jeopardizes the health and well-being of LGBTQ+ communities, and fuels the HIV epidemic in general by creating barriers to testing, treatment, and care.

- ***People who use drugs:*** People who use drugs (PWUD) are among the groups at highest risk of acquiring HIV. In 2023, the median HIV prevalence among people who inject drugs globally was 5%, which is significantly higher than the estimated 0.7% HIV prevalence among the total global population aged 15-49. However, punitive drug control laws and law enforcement practices can discourage PWUD from accessing or seeking HIV treatment and services, as they invoke fear of criminalization and/or punishment. Indeed, 17% of people who inject drugs avoided accessing healthcare services in 2023 due to stigma and discrimination. Despite facing increased risks of HIV transmission, PWUD confront major barriers in accessing care.

- ***People living with HIV:*** In many jurisdictions globally, people are criminalized for not disclosing their HIV status before sex, for potentially exposing others to HIV, or for allegedly transmitting HIV to a sexual partner. These laws often lack accurate understanding of HIV risk and harm and misuse science to punish people living with HIV. HIV criminalization negatively impacts the health and well-being of people living with HIV by driving them away from critical treatment and services, and the fear criminalization can even discourage people from getting tested for HIV in the first place. As such, criminalizing HIV non-disclosure, exposure, or transmission is entirely at odds with public health objectives and international best practices.

- ***Sex workers:*** Research consistently indicates that laws criminalizing sex work (including those that criminalize clients and third parties) negatively impact sex workers' health and safety, including their risk of acquiring or transmitting HIV. In 2019, female sex workers globally were at 30 times greater risk of acquiring HIV than the general female population, largely due to punitive laws, policies, and practices that criminalize sex work. Moreover, a 2015 study of HIV among female sex workers suggested that decriminalizing sex work across all settings would avert 33-46% of new HIV infections in the next decade.

- ***HIV service providers:*** When laws impede or prohibit the provision of services that prevent HIV or that facilitate effective HIV treatment, care, and other interventions, the risk of HIV transmission dramatically increases. In Ontario, for example, the 2024 *Community Care and Recovery Act* (CCRA) imposes more major barriers to implementing and operating supervised consumption sites (SCS) in the province, where key harm reduction and HIV prevention services are provided. When SCS and other harm reduction services are shut down, people are deprived of essential services that reduce the risk of HIV transmission. Similar examples of recent policy changes are mounting around the world, exacerbating the impact on communities that shoulder the greatest burden of poverty and disease as well as the organizations and service providers that serve and represent them.



CASE STUDIES: INVESTMENT OPPORTUNITIES

The discontinuation of USAID, withdrawals from multilateralism, and decreasing OECD (Organisation for Economic Co-operation and Development) donor commitments to global health has already begun to worsen health outcomes globally. This rapid and immediate dismantling of today's global health financial architecture is coinciding with the swift rise in anti-human rights movements, backlash on equity, diversity, and inclusion, anti-bodily autonomy, anti-democratic trends, and mounting disinformation campaigns around the world.

Canada must actively re-commit to supporting global health mechanisms and policies, along with health and human rights organizations that are leading the fight against HIV, health inequalities, stigma, discrimination, and harmful policy and legal environments. Canada should explore the following investment opportunities:

The Global Fund: The Global Fund provides 28% of all international financing for HIV programs, 76% of all international financing for TB programs, and 62% of all international financing for malaria programs. The Global Fund is currently aiming to raise USD18 billion to fund its next three-year grant cycle and, if achieved, would be able to save 23 million additional lives and prevent 400 million infections. Canada is currently the Global Fund's sixth largest contributor. While this is a promising position, the Global Fund's Eighth Replenishment target is the floor — not the ceiling. **Canada must renew its commitment to the Global Fund and increase its pledge for the Eighth Replenishment so that the Global Fund can continue supporting life-saving global health programs worldwide.**

Feminist International Assistance Policy: Created in 2017, Canada's Feminist International Assistance Policy (FIAP) aims to centre women's rights, sexual and reproductive rights, and human dignity at the core of all of Canada's foreign policy. In the context of global health, the FIAP is crucial in ensuring that responses to global health and development — such as HIV, TB, and malaria, pandemic prevention, preparedness, and response — are informed by a gender analysis and a human rights-based approach. **The federal government must continue to invest in the FIAP and its funding mechanisms to maintain Canada's commitment to gender equality and human rights, particularly in the context of international global health assistance.**

Canada's ODA Envelope: As a high-income country, Canada has a role, responsibility, privilege, and shared interest to ensure that good health and well-being, safety and security, peace and prosperity, and human rights *are experienced by all members of our global community*. ODA is one of the fundamental mechanisms to achieve this — not as a standalone solution, but in partnership with other financing instruments, including domestic resource mobilization by governments in LMICs. Today's skyrocketing global inflation rates, combined with the foreign debt burden of LMICs, means that ODA plays a critical role now more than ever. **Aligned with calls from the international cooperation sector, Canada must increase its ODA envelope, beginning in 2025.** Even a small increase promises an outsized impact: it would provide critical support to some of the world's most vulnerable communities who are pushing back against anti-democratic attacks. It would also signal to likeminded countries that there are partners who are serious about addressing these intersecting poly crises globally and who are making good on their commitments to the 2030 Sustainable Development Agenda.

CONCLUSION

In a time of intersecting global crises and conflict, economic instability, and eroding human rights, investments in global health are vital to ensure that years of progress are not rapidly undone. **As other countries roll back their support, Canada must step up.** Investing in global health — and multilateral organizations such as the Global Fund in particular — reinforces our commitments to health, equality, dignity, and human rights as a country, yields strong economic returns, and maintains Canada's position as a strong and effective leader on the world stage. **We urge Canada to increase investments in global health and to acknowledge that doing so is a human rights imperative. Health, human rights, peace, and prosperity are inextricably linked. In making concrete commitments to global health, Canada can work to ameliorate them all on a global scale.**

The HIV Legal Network promotes the human rights of people living with HIV or AIDS and other populations disproportionately affected by HIV, punitive laws and policies, and criminalization, in Canada and internationally. We do this through research and analysis, litigation and other advocacy, public education, and community mobilization. We envision a world in which the human rights and dignity of all people, including people living with HIV or AIDS and other populations disproportionately affected by HIV and criminalization, are respected, protected, and fulfilled; where all people understand and can exercise their human rights; and where laws and policies facilitate access to prevention, care, treatment, and support.