2025/2026 ANNUAL REPORT

With Love,

HIV LEGAL NETWORK

RÉSEAU JURIDIQUE VIH

With Love,

With Love is dedicated to the memories of two incredible humans, Walter Cavalieri and Stephen Lewis.

Walter, a social worker by trade and a harm reductionist at heart, was a longtime friend of the Legal Network and an inspiration to us. He was a trailblazer who fought hard for the rights of people who use drugs and demonstrated constant community care. Walter knew that the way we work is as important as the work itself, and he truly believed — and often vocalized, as many remember — that harm reduction is love. In many ways, this annual report is a love letter to him.

Stephen is known to many for his political career, his appointment as the United Nations Special Envoy for HIV/AIDS in Africa, and the eponymous Stephen Lewis Foundation that carries his legacy and continues his critical work on behalf of people living with HIV and AIDS. He was a true force of nature, and a friend and mentor to many, including us. Stephen was an orator for the ages and championed the work of the Legal Network. He knew and always voiced that human rights and gender equality must be at the centre of any response to this pandemic.

Rest in power, Walter and Stephen.

We continue this work in your honour, with love.

Land Acknowledgment

The HIV Legal Network is located across this land now called Canada on treaty lands, stolen lands, and unceded territories of many different Indigenous groups and communities who have respected and cared for this land since time immemorial.

We work to address the ongoing injustices and resulting health inequities faced by Indigenous Peoples which contribute to the disproportionate impact of the HIV epidemic on Indigenous communities. We are committed to learning to work in solidarity and to dismantling and decolonizing practices and institutions to respect Indigenous Peoples and Indigenous ways of knowing and being.

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We thank all the students and interns who have contributed to our work this year.

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Table of Contents

Dear Friends 4
Strength in numbers 5
With Indigenous Peoples 6
To people living with HIV 7
For people who use drugs 8
To the media 9
To our governments 10
With sex workers 11
From inclusive shelters 11
For people in prisons 12
For immigrants to Canada 13
From around the world 14
Financial overview 16
Sending our love to our donors and funders 17

Dear Friends,

Let's just take a pause and state the obvious: for so many people the world over, these are exceedingly difficult times on many fronts.

We are witnessing the systemic dismantling of human rights and the structures meant to uphold them in real time at a chaotic and breakneck pace. In Canada and beyond, there are looming and continuing threats to the health and safety of people living with HIV, 2SLGBTQ+ people, people who use drugs, sex workers, people in prison, and people who wish or need to make Canada their home. For racialized communities, including Indigenous and Black people, these threats are compounded by colonization and racism. Truly, it can be difficult to find hope in today's world; if you could really use a moment to catch your breath, you're not alone.

But, despite the dire situation in which we collectively find ourselves, we persist. While promises, meagre as they have often been, continue to be broken by governments in Canada and around the world, we push forward in our advocacy work. While the "wins" seem few and far between, we can and do still count them. And while hope feels like a luxury, we choose to come together in an ethic of love and care for those whose human rights are being trampled.

We don't often talk about the love that is at the centre of our work and that of our wonderful partners and co-conspirators. We have long known that those who came before us in the HIV and AIDS movement demonstrated unparalleled community care at a time when their lives were being treated as disposable. We also know and very often say that harm reduction is love, watching in awe as frontline workers take daily actions that exemplify compassion and care. Perhaps most importantly, we instinctively know that this critical work must always be done with love at its core — the incredible humans and communities we move alongside deserve nothing less.

Through this annual report, *With Love,* we remind ourselves that it isn't the victories alone that should be tallied. This year, we're focusing on the "how" at the heart of the HIV Legal Network. We're not writing to you as mere stakeholders in these efforts, but rather as fellow community members, peers, friends, and loved ones.

We hope you'll see yourselves reflected in the pages of this report and in the advocacy we continue to do each and every day. No matter how difficult times may be, we will continue to do this work, **with love.**

Rai Reece
BOARD CHAIR

Janet Butler-McPhee
CO-EXECUTIVE DIRECTOR

Sandra Ka Hon Chu
CO-EXECUTIVE DIRECTOR

Strength in numbers

33

workshops, webinars, and presentations across Canada.

194,240

views of our posts on Facebook and Instagram.

8,014

subscribers to the *Legal Network News*.

8

evidence-based digital resources and online outreach tools created to improve access to legal info, health education, and rights-based supports in Eastern Europe and Central Asia.

2,500

Downloads of our *Criminalization of HIV and Sex Work in Western and Central Africa* report which builds on work initiated by And Soppeku, an organization of sex workers in Senegal.

850+

Organizations who signed our open letters denouncing Ontario's decisions to defund remaining supervised consumption sites and to prevent the distribution of harm reduction supplies at HART Hubs.

12

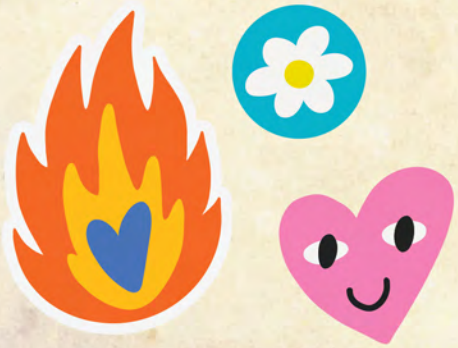
key recommendations made for the Canadian government to show strong federal leadership in the response to HIV in our inaugural *State of HIV in Canada* report.

30

people who use drugs and harm reduction workers who shared their experiences of drug criminalization in our *It's Not So Simple* report.

9

languages into which HIV Legal Network resources were translated: Anishinaabe, Arabic, Chinese, English, French, Inuktitut, Mi'kmawi'simk, Plains Cree, and Swahili.



5

workshops hosted in Dominica to support young people in creating rights-based social media campaigns.

8

new resources developed to support the health and rights of Indigenous people living in Canada.

With Indigenous Peoples,

As part of our commitment to reconciliation and centring Indigenous perspectives, we continued to strengthen our partnerships with Indigenous communities and organizations across this land.

To kick off the year, we collaborated with CAAN Communities, Alliances & Networks to develop an *Action Plan* on the *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP). It outlines specific measures to ensure that Canada's laws are consistent with UNDRIP as it relates to Indigenous people living with HIV, hepatitis C (HCV), other sexually transmitted and blood-borne infections (STBBI), and tuberculosis. Our key areas of focus are the provision of healthcare services; drug policy; sex work; discrimination; criminalization of HIV non-disclosure; criminal legal and prison policy; Indigenous participation in decision-making along with oversight and accountability; and data collection.

We also worked with CAAN to host community dialogues virtually and in Winnipeg, Prince George, Tiohtià:ke/Montreal, Kjipuktuk/Halifax, and N'Swakamok/Sudbury alongside local Indigenous organizations in each city. We aimed to gather critical feedback on our 2023 policy brief which outlines legal and policy reforms to improve HIV, HCV, and STBBI outcomes for Indigenous Peoples. Participants were invited to reflect on the brief's recommendations and to share their own experiences, priorities, and concerns – truly bringing the document to life by informing the proposed reforms with lived expertise. Their feedback and recommendations can be found in our summary reports on sex work, drug policy, prisons, and other major findings.

For our *Not A Crime* podcast, we interviewed CAAN's okimâw (Chief Executive Officer) Margaret Kisikaw Piyesis who shared her perspective on the impact of HIV criminalization. As part of that same series, we heard from Anton McCloskey from PASAN, a community-based organization that provides support, education, and advocacy to, for, and with individuals who are or were formerly incarcerated.



Nipâ, mahkêsîs

(Sleep Little Fox)

ARTWORK SUPPLIED BY

JASMINE CAFFYN



To people living with HIV.



Sandra Ka Hon Chu at Wanuskewin Heritage Park in Saskatchewan for a workshop.

Since we launched in 1992, the rights and needs of people living with HIV have been at the heart of our work at the HIV Legal Network. This year, we continued this legacy by publishing a diverse range of "Know Your Rights" documents to help folks navigate the oft-complicated reality of living with HIV.

This includes a guide to help employees living with HIV in the workplace, from job applications to benefits to remedies in cases of rights violations. It outlines the human rights laws protecting against discrimination at work based on HIV status as well as laws protecting privacy. To support children living with HIV and their parents, we created another guide that explains their shared rights and responsibilities. It not only includes legal information but also best practices for parents to follow, heeding their child's best interests and evolving capacities.

Women living with HIV experience disproportionately high rates of intimate partner violence (IPV), while African, Caribbean, and Black (ACB) and Indigenous women are more likely to experience IPV due to ongoing impacts of colonialism, systemic racism, and state violence. These intersecting forms of oppression also result in unique challenges as affected women navigate options for support, redress, and protections. As such, we created "Know Your Rights" guides providing legal information to Indigenous and ACB women (including trans women, Two-Spirit, and non-binary people) living with HIV and affected by or at risk of IPV. To increase accessibility, we translated the introductory text to Anishinaabe, Inuktitut, Mi'kmawi'simk, and Plains Cree for Indigenous audiences along with Swahili and Arabic for ACB audiences.

I Had to Step in and Take Care

ARTIST: NATIA LEMAY



For people who use drugs,



There has been a marked rise in regressive drug policies from coast-to-coast and in attacks against harm reduction. In response, we have spent this year pushing for progressive, evidence- and human rights-based policies.

In March 2025, the Superior Court of Justice of Ontario ordered a pause on the section of the so-called *Community Care and Recovery Act* (CCRA) that prohibits supervised consumption sites (SCS) from operating near a school or childcare centre. Despite that, the Government of Ontario has continued to systematically dismantle and defund SCS. We challenged this by co-creating and sending open letters to the provincial government, pointing them towards best practices based on decades of research on SCS. Tens of organizations joined us in urging against the prohibition of sterile needle and syringe distribution within the Homeless and Addiction Recovery Treatment (HART) Hubs meant to replace SCS; demanding the reversal of its decision to force the closure of the Parkdale SCS, a critical pillar of support in the west end of Toronto; and advocating for the continued operation of the then-eight remaining provincially-funded SCS.

While our concerns (and that of their own internal experts) were largely ignored by the Ontario government, our work with SCS providers and grassroots harm reduction movements persists. In February, we brought together frontline workers, community organizers, advocates, researchers, and elected officials on a panel to discuss growing legal and political barriers facing SCS across the country, ongoing advocacy efforts, and ways to get involved. Dr. Gillian Kolla presented data on the dangerous impacts of defunding SCS while our Co-Executive Director Sandra Ka Hon Chu outlined ongoing responses to emerging legal and policy restrictions to SCS across the country. Sandra specifically pointed to The Neighbourhood Group Community Services' constitutional challenge to the CCRA (of which we are an intervenor) as well as a case challenging the constitutionality of the closure of Red Deer's Overdose Prevention Site – brought forward by a client – which is currently being decided at the Alberta Court of Appeal. A clear message underscored the entire webinar: SCS are in crisis, but there are significant efforts underway to protect harm reduction in this country.

Alongside the Canadian Drug Policy Coalition and Pivot Legal Society, we created a primer on the legal frameworks governing overdose prevention work in Ontario as of June 2025. It explained how it was "not a crime to save a life," and provided legal information for communities who want to provide supports outside the formal healthcare system and in the absence of government support.

Other critical research for people who use drugs was our *It's Not So Simple* report. We worked with researchers at York University and Toronto Metropolitan University, including our own Board member Dr. Emily van der Meulen, to interview people who use drugs, harm reduction workers, and defence lawyers in Ottawa, Toronto, Peterborough, and Sudbury as well as with drug policy experts across the country. These firsthand accounts reveal that – despite some policy changes in recent years, including law reform and prosecutorial guidelines that were meant to limit arrests for simple drug possession – people who use drugs continue to be criminalized, especially through drug trafficking charges.

> "Harm reduction is rooted in marginalized communities' teachings... it's a movement built in love and joy and finding survival. It's a movement that is actually deeply about 'how do we survive and take care of each other when the state itself, the government has actually neglected us.' Because that's the way that these communities have been continuing to exist and survive this whole time.
>
> **Marina Classen,**
> **Harm Reduction Advocacy Collective**



To the media,

In the summer, the HIV Legal Network spoke with Colin Hastings about his book *Digital News and HIV Criminalization*. Our discussion encompassed how media coverage lives on long after legal proceedings are over — even when charges against individuals living with HIV are dropped — and how sensational media narratives and outdated notions of "objectivity" perpetuate social harms.

Indeed, news media has always been essential in informing the parameters of opinion, discourse, public debate, and eventually policy, impacting people living with HIV in Canada and beyond. Understanding this responsibility, we always strive to provide a powerful and progressive perspective when speaking about HIV and related issues.

In the fall, this manifested in our months-long campaign for Canada to show leadership in the Global Fund to Fight AIDS, Tuberculosis and Malaria's eighth replenishment, including a Hill Day and media conference in Ottawa in October 2025. This event brought together many Canadian civil society organizations along with Ukraine's Andriy Klepikov (Executive Director of the Alliance for Public Health), Côte d'Ivoire's Carlos Idibouo (LGBT2QI+ advocate), and the HIV Legal Network's own Mikhail Golichenko. In preparation for this event and subsequent advocacy, we created a primer outlining facts and figures, priorities for action, and case studies to show why investing in global health is imperative now more than ever. We also co-produced a "messages to Canada" document with the Stephen Lewis Foundation that explained why the Global Fund matters in the words of those who most need it.

Finally, we published an op-ed in *The Hill Times* outlining the intrinsic links between a values-driven foreign policy agenda with the Government of Canada's stated priorities of defence, security, and economic resilience; these goals cannot be achieved without a strong public health and human rights focus. Our efforts proved critical: while Canada's pledge to the Global Fund was not as robust as we would have hoped, we were able to hold the line in the face of dwindling funding the world over.

> Core values need to be more than just a pillar of our foreign policy; they must be the bedrock. Having this strong foundation will only bolster our defence, security, and economic resilience.
>
> **Drew-Anne Glennie, Communications Specialist, in *The Hill Times***

We published another important op-ed earlier in the year, this one in *The Ottawa Citizen*; it called on the Government of Ontario to reverse course on its dangerous policies related to SCS. On March 31, 2026 — the anniversary of the first wave of closures resulting from the CCRA — we held a media conference to highlight new data showing a sharp increase in emergency calls and emergency department use since the closures and to share powerful firsthand testimony of the need for SCS. In tandem, we announced the release of our open letter, signed by more than 250 organizations worldwide, urging the reversal of the decision to defund SCS.

The conference spotlighted harm reduction workers, researchers, a paramedic, and an Ottawa city councillor; each gave uniquely powerful statements based on their own experiences and then answered questions from the many attendees, including journalists from major Canadian news outlets such as *The Toronto Star*, *The Globe and Mail*, PostMedia, CBC, and more.

> [SCS] are filled with love and empathy and care and understanding. And often it's people with lived experience who are meeting you without judgment or stigma. And in moments of despair, this can be huge and lifechanging for people because I know it was for me.
>
> **Akosua Gyan-Mante, Street Haven**



To our governments,



Ahead of the 2025 federal election, we pushed for HIV and human rights to be a part of the electoral conversation. We sent letters to the leaders of all five major parties with key questions on their positions related to HIV funding; access to HIV treatment, care, and prevention; HIV criminalization; drug policy; sex work; prison health; and immigration.

Despite our best efforts, we only received replies from the Bloc Québécois and the Green Party of Canada; for the non-respondents, we combed through their platforms to ascertain then publicize their policies in relation to these issues. We also provided guidance for how individual voters could communicate the importance of evidence-based drug policy by asking questions at in-person debates, on social media, or to canvassers in their communities.

After the Liberal Party of Canada was re-elected, we continued pushing strong communication with the newly formed government. As part of our Global Fund replenishment campaign, we sent both Prime Minister Mark Carney and his Minister of Foreign Affairs Anita Anand an open letter on behalf of 21 national and 70 international organizations. In a year when Canada held the G7 presidency, this letter called for strong investment in health and community systems that truly reflect our important commitments to the 2030 Sustainable Development Goals. We also held in-person meetings with Health Canada leadership in late November to discuss urgent concerns around SCS closures as well as barriers caused by Health Canada's increasingly difficult process for SCS exemptions. With rollbacks in harm reduction services across the country, we continue to call for greater federal leadership and funding to preserve this essential care.

On World AIDS Day in December 2025, we launched our seminal report, *The State of HIV in Canada: Rights, Progress, and Unfinished Work*. It revealed that Canada has failed to meet global 95-95-95 targets, and that the progress we *have* made is now being threatened by regressive legal and policy barriers. The report includes a province-by-province study of key metrics contributing to these shortcomings, as well as important recommendations to the federal and provincial governments rooted in the health and human rights of people living with and affected by HIV. Having all this information compiled in one place has and will continue to serve as an invaluable advocacy tool to push our leaders in Canada to do more and do better.

The report was pre-launched in a media conference on Parliament Hill on November 27 following a successful roundtable event at the Senate co-hosted by Senator René Cormier and attended by both Minister of Health Marjorie Michel and Member of Parliament Patricia Lattanzio, the Parliamentary Secretary to the Minister of Justice.

At this event, MP Lattanzio made an important statement indicating the government's intention to work with "parliamentary champions like Senator Cormier, Senator [Kristopher] Wells, and key stakeholders like the HIV Legal Network" to decriminalize HIV non-disclosure. After years of stalled progress and de-prioritization under former Ministers of Justice, we are now very hopeful for the end to the harms of HIV criminalization in Canada. We have re-established monthly communication with the office of the Minister of Justice and are meeting with our Senate colleagues to navigate the best way to introduce a bill for *Criminal Code* reform in the House of Commons or Senate in the coming months.

> We owe it to Canadians living with HIV to make law reflect reality, to end fear, to build a system that truly protects and empowers them. So I say to all of you this morning, let's do it. Not tomorrow, not someday, but now.
>
> **MP Patricia Lattanzio**
> **Parliamentary Secretary to the Minister of Justice**



With sex workers,



This year, we continued our longstanding partnerships with sex worker-led organizations, including Butterfly (Asian and Migrant Sex Workers Support Network).

Together, we created a guide outlining Markham, Ontario's licensing requirements and other regulations for personal service establishments and body rub parlours. It provides information, tips, and guidance for migrant sex workers who face enormous stigma, criminalization, and the risk of deportation — all of which threatens their health and safety.

We are also a member of the Canadian Alliance for Sex Work Law Reform (CASWLR, or "the Alliance"), made up of 23 sex worker-led and -allied organizations from across Canada. After a disappointing decision in the Ontario Superior Court, CASWLR is appealing its challenge of sex work-specific laws — including those introduced via the *Protection of Communities and Exploited Persons Act* — at the Ontario Court of Appeal. We are strategizing with the legal team to ensure our arguments account for sex workers' diversity and the realities of their working conditions while also considering how the case could affect future advocacy to uphold sex workers' rights. We are also working with Alliance co-counsel to ensure that CASWLR members have a sound understanding of the case and the legal arguments put forward, and to ensure that their input is meaningfully reflected each and every step of the way.





From inclusive shelters,

As outlined in our joint op-ed with the Canadian Centre for Housing Rights and the Advocacy Centre for Tenants Ontario, the housing and the toxic drug crises are closely linked. This piece was a response to Ontario's Bill 60, yet another law that punishes drug use and worsens homelessness instead of addressing the root causes, including discrimination and criminalization.

Nevertheless, most shelters remain inaccessible for people who use drugs despite their overrepresentation within the unhoused population. In response, we worked with low-barrier shelters across Canada to understand how these organizations promote the rights and health of people who use drugs. Alongside a jurisdictional scan of shelter policies, we used this information to create a critical blueprint for low-barrier, inclusive shelters that meet the needs and uphold the rights of people who use drugs. We synthesized these findings into an accessible video, which also spotlights firsthand accounts from inclusive shelter representatives.





For people in prison,

Nearly two decades after we published *Hard Time*, we checked back in on the state of health and harm reduction policies and practices in Canada's provincial, territorial, and federal prisons. *Hard Time Persists* found that — while some healthcare practices in prison have improved — significant gaps remain and need to be addressed in order to stop the spread of STBBIs behind bars.

We also created reports specifically tailored for women, gender-diverse, Indigenous, and racialized people, as well as for those in immigration detention.

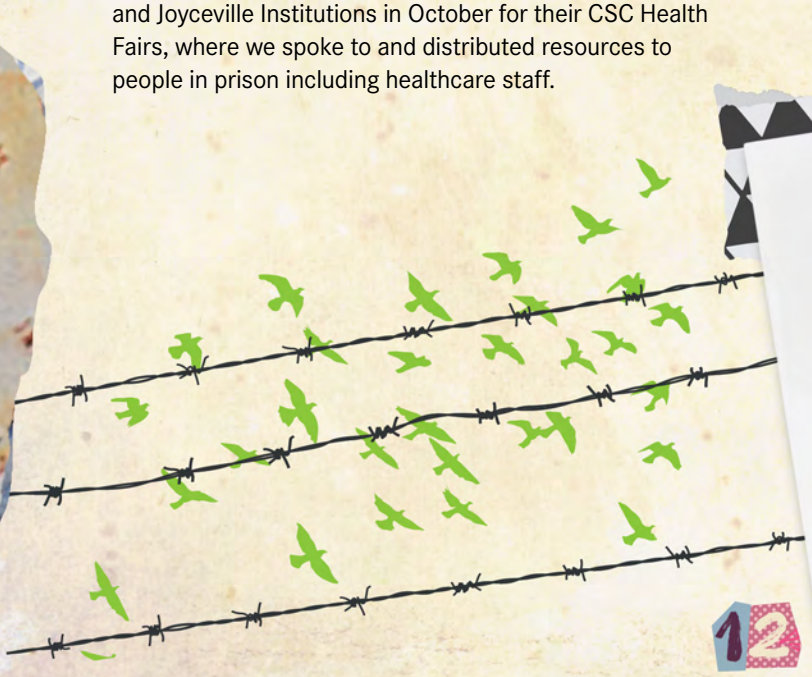
The text was translated into digestible videos which outline the issues pervading Canada's prison systems and recommendations on the best way forward, as well as one about the unique issues in the immigration detention system. We made sure to include the voices of people with frontline and lived experience to provide a complete picture. Its findings were also featured in our blog post for Prisoners' Justice Day 2025, which called for systemic change in Canada's prison healthcare system.

Since the publication of *Hard Time Persists*, however, harm reduction in prisons has taken a critical blow, namely the changes that were made to the Correctional Service Canada's (CSC) Opioid Agonist Treatment (OAT) policy in October 2025. We heard from patients across institutions and regions in the following months; many indicated that the forced switch from Suboxone to Sublocade has been harmful, is inconsistent with patient-centred care, and has had a significant negative impact on their well-being. We first learned about these issues while visiting Collins Bay and Joyceville Institutions in October for their CSC Health Fairs, where we spoke to and distributed resources to people in prison including healthcare staff.

We joined other organizations that work directly with or advocate for the rights-respecting treatment of people in custody in co-signing a letter sharing these concerns with federal prison authorities and urging them to pause this OAT policy shift for further consultation. In the meantime, we co-created an informational booklet to help federally incarcerated individuals understand and navigate these changes.

That winter, we again engaged with Collins Bay when we — alongside PASAN — obtained standing in the Ontario Coroner's inquest into the deaths of five men at the institution. Although the scope of the allowed recommendations was limited, we were still able to push for some harm reduction-related ones to be included. Though non-binding, the recommendations are helpful tools for our advocacy.

Finally, we hosted a webinar in February that brought together healthcare professionals, researchers, frontline workers, and individuals with lived experience. This diversity of expertise provided an encompassing and urgently needed look at the state of harm reduction and healthcare in Canadian prisons.



JURY RECOMMENDATIONS TO CSC:

11.e. increase the availability of safe prescribed medications to treat opioid use disorder consistent with options that may be available in a health care setting outside of a federal penitentiary

12.b. Increase access to naloxone in CSC institutions beyond current availability, in alignment with community harm reduction standards, make nasal spray naloxone kits directly available to persons in custody within their cells and common areas throughout the institution

For immigrants to Canada,

> There is no public health rationale for restricting liberty of movement or choice of residence on the grounds of HIV status.
>
> INTERNATIONAL GUIDELINES ON HIV/AIDS AND HUMAN RIGHTS #127, 2006

Over the past year, the government has made immigrating to Canada even harder for marginalized communities, including people living with HIV. We have been a critical voice in pushing back from the moment the *Strong Borders Act* (Bill C-2) was introduced in June 2025.

We led nearly 60 civil society organizations in sending an open letter urging Minister of Public Safety Gary Anandasangaree and Minister of Immigration, Refugees and Citizenship Lena Metlege Diab to withdraw the Bill.

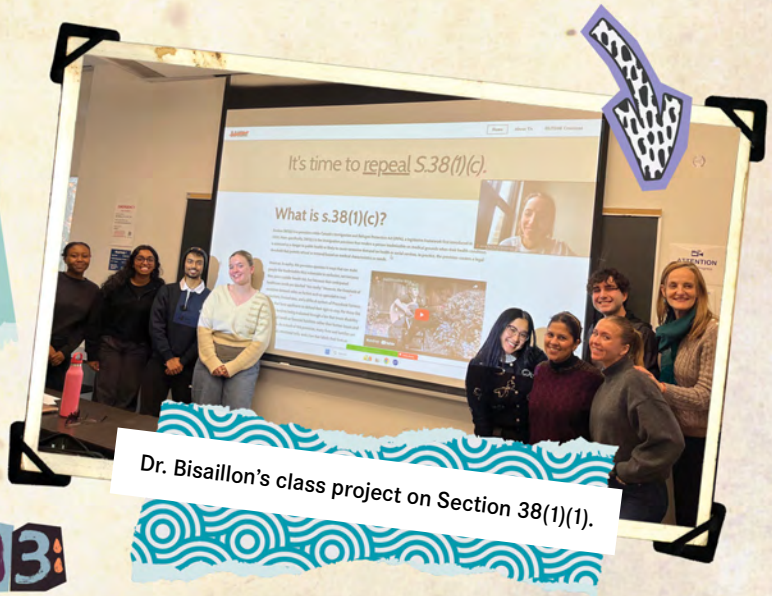
In response to the backlash, Bill C-2 was eventually repackaged — still including the harmful immigration provisions— as Bill C-12, the *Strengthening Canada's Immigration System and Borders Act*. We worked with our partners at the HIV & AIDS Legal Clinic Ontario (HALCO) to create an infosheet outlining how these bills threaten individual rights and public health while undermining Canada's domestic and international human rights obligations. We also took our objections directly to the government through a public letter-writing campaign and a submission to the Standing Committee on Citizenship and Immigration.

Ignoring both the widespread concern and our expertise, Bill C-12 came into effect in March 2026. In response, we co-created another infosheet with HALCO that outlines critical legal updates for asylum seekers.

We also continue to advocate against Canada's "excessive demand" regime and its underlying notion that any body is "too costly" to belong. This includes Policy Analyst Anne-Rachelle Boulanger serving as a panelist on the Centre for Refugee Studies' *"Bad' Bodies, Borders and Un-Belonging"* and the University of Ottawa Centre for Health Law, Policy and Ethics' *"Bordering Health"* webinars. She also gave presentations to Dr. Laura Bisaillon's — co-vice chair of the HIV Legal Network board — classes at the University of Toronto on this regime, one of which created an advocacy campaign titled "Repeal Section 38 (1)(c)" as their final project. At Prisme 2025, Anne-Rachelle also outlined the constitutional challenge to excessive demand along with the risks posed by the *Safe Third Country Agreement,* especially for LGBTQ+ asylum seekers.

Even when refugees *can* enter Canada, the government has created more barriers to accessing healthcare by introducing co-payments under the Interim Federal Health Program. We swiftly released a joint statement with HALCO condemning this decision and calling on them to reverse course before decades of progress in HIV treatment and prevention are undone.

> I don't think I could have been happy in Canada after going through that whole process because it shattered my dream of Canada. It led me to realize that the picture Canada posts to the rest of the world is not the reality of Canada today.
>
> **Clifford Perreira speaking about being processed under s. 38(1)(c)**



Dr. Bisaillon's class project on Section 38(1)(1).



From around the world,

We have been advocating for LGBTQ+ rights in the Caribbean for almost two decades, working with local partners to not only contribute to legal challenges but also change hearts and minds within communities.

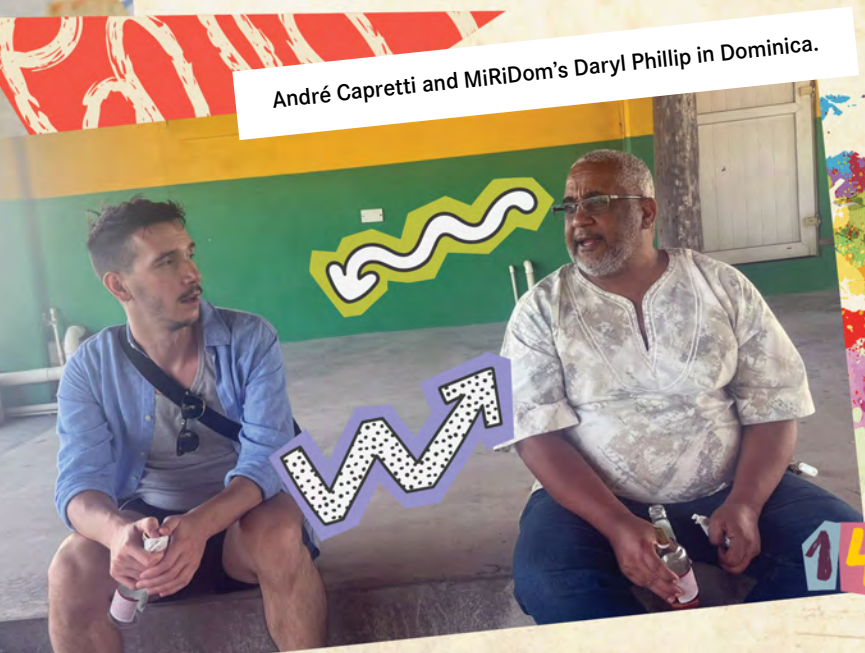
In June, our Co-Executive Director Janet Butler-McPhee and Policy Analyst André Capretti travelled to Roseau to co-host a workshop for young people with Minority Rights Dominica (MiRiDom). The session took place just over a year after prohibitions on same-sex activity were deemed unconstitutional following a successful legal challenge, and was critical to moving beyond legal theory to what the uptake and upholding of the new law means in practice.

The young advocates were not only sensitized to the new law as well as to gender and human rights issues in Dominica but also taught hard skills that they can apply across advocacy areas. This includes building social media and communication skills, synthesizing ideas into powerful content, and connecting with fellow changemakers. The workshop ended with a group project where the participants produced an advocacy video on a topic related to gender and human rights in Dominica. The youth were interested, engaged, and had great conversations about gender-related issues as well as the changes that need to occur for human rights to be honoured and respected.

We also have a significant presence on the other sides of both the Atlantic and Pacific Oceans. For instance, Anne-Rachelle coordinated TrustLaw's report surveying the legal barriers that young people face in accessing HIV prevention and testing services; sexual and reproductive healthcare; and harm reduction services.

The first report focuses on the laws that affect access to these healthcare services in Cameroon, Ghana, Indonesia, Kyrgyzstan, Nigeria, the Philippines, South Africa, and Thailand. Moreover, our team has provided technical support to implement human rights programs in relation to HIV in Tunisia as part of our engagement with the Global Fund.

We have continued our work with HIV Justice Worldwide (HJWW) — of which we are a founding member — and our engagement in West Africa has allowed us to extend our HJWW Francophone Network. Most recently, Senegal has seen massive arrests of the LGBTQ+ community along with new anti-LGBTQ+ legislation adopted in March 2026. Scores of people living with HIV have also been charged with "deliberate HIV transmission," which is unprecedented across the entire region and indeed the world. We continue to work with local and international partners to denounce these arrests, attempt to mitigate impacts, and provide legal assistance to those affected. Senior Policy Analyst Cécile Kazatchkine was interviewed for articles in *The Guardian* and *The New Humanitarian* bringing awareness to the issue. This year, we also monitored and analyzed new anti-LGBTQ+ and HIV-related legislation in Mali and in Burkina Faso, using our findings and our Francophone Network to engage regional partners in discussions around evolving situations in the region for key populations and risk mitigation for communities on the ground.



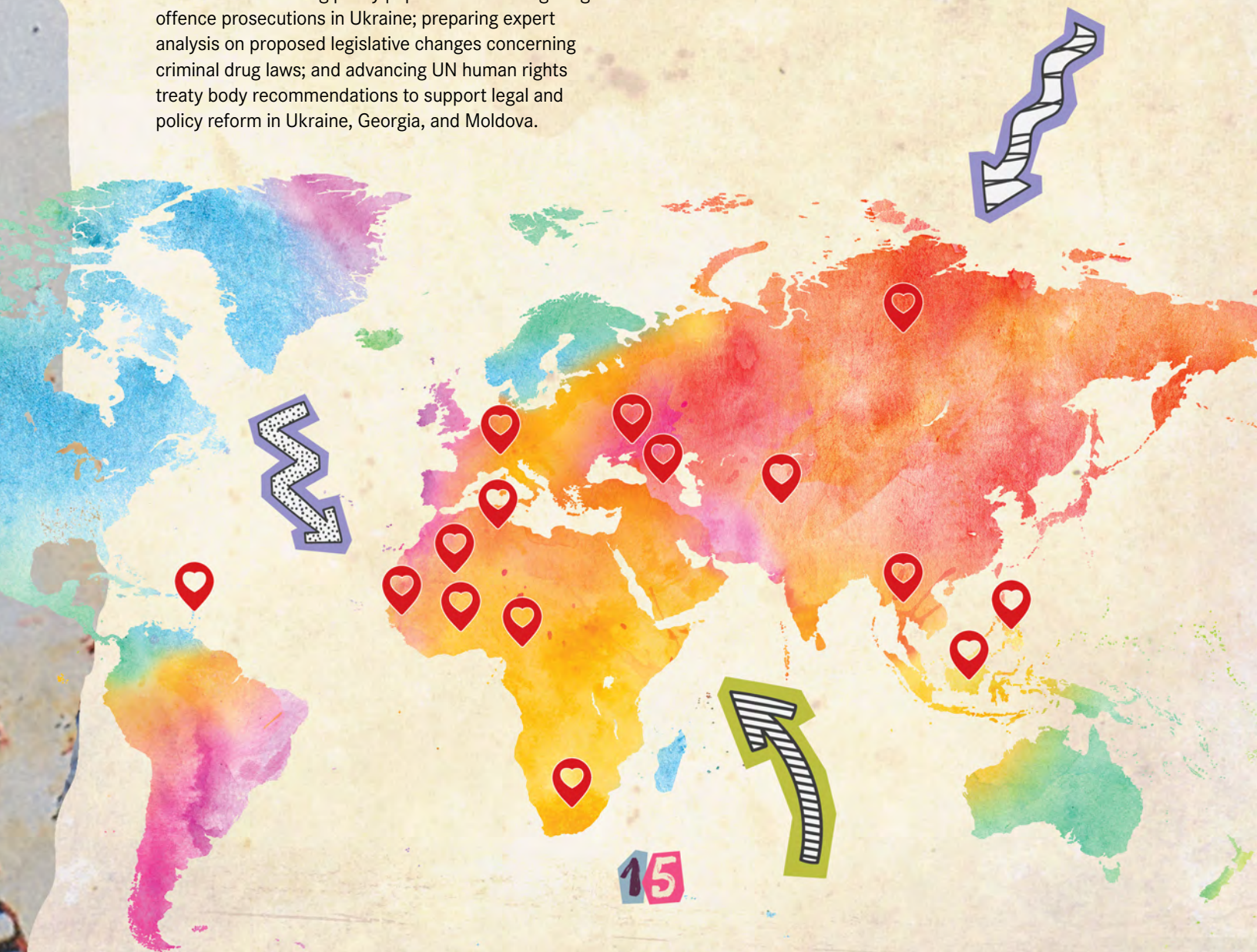
André Capretti and MiRiDom's Daryl Phillip in Dominica.



Across Eastern Europe and Central Asia, we worked with community-based partners to launch a regional project aimed at strengthening legal empowerment and harm reduction for LGBTQ+ communities engaged in chemsex. Together, we produced a series of evidence-based digital resources and online outreach tools to improve access to legal information, health education, and rights-based support in increasingly restrictive environments. In Russia, we continued supporting key populations in mitigating the adverse consequences of an increasingly restrictive legal environment while pursuing strategic cases before the United Nations (UN) Human Rights Committee to challenge rights violations and seek broader systemic change. We also supported community-led efforts in Uzbekistan to challenge the criminalization of same-sex relations, including by supporting an individual complainant before the Committee.

We continued advancing drug policy reform for countries that are seeking to join the European Union. This included drafting policy papers on reforming drug offence prosecutions in Ukraine; preparing expert analysis on proposed legislative changes concerning criminal drug laws; and advancing UN human rights treaty body recommendations to support legal and policy reform in Ukraine, Georgia, and Moldova.

We also made our voice heard elsewhere at the UN. We responded to questions raised by the UN Special Rapporteur on contemporary forms of racism in preparation for her upcoming visit to Canada in late 2026, with a particular focus on people who use drugs, sex workers, people without permanent residence or citizenship, and people living with HIV. We made a submission to the Office of the High Commissioner for Human Rights to assist in the preparation of a report on drug policy and its impact on the rights of women and girls in Canada. We also made an oral statement in Geneva during the UN Human Rights Committee's review of Canada's implementation of the *International Covenant on Civil and Political Rights* with respect to people living with HIV, people who use drugs, people without permanent residence or citizenship, and sex workers. Our intervention related specifically to questions by the Committee to the Canadian government about barriers to harm reduction and the rise of forced detention and treatment of people who use drugs.



Financial overview

SUMMARY FROM AUDITED FINANCIAL STATEMENTS

FISCAL YEAR ENDING MARCH 31

	2026	2025
REVENUE	**$**	**$**
Grants	1,057,598	1,178,775
Consulting Fees	199,457	128,933
Donations	84,294	108,925
Interest & Other	27,508	37,126
Membership	4,685	5,500
TOTAL REVENUE	**1,373,542**	**1,459,259**

EXPENSES	**$**	**$**
Personnel & Professional Fees	1,104,214	1,202,005
Rent & Maintenance	66,524	87,298
Outreach Activities	53,858	33,357
Office Equipment & Expenses	25,072	30,955
Travel	48,602	27,458
Communication & Information	18,013	14,409
Facilities & Equipment	9,621	8,728
Strategic Litigation	–	5,256
Other	40,706	35,419
TOTAL EXPENSES	**1,366,610**	**1,444,885**

NET ASSETS	**$**	**$**
Designated	762,795	755,863
Unrestricted	152,416	152,416
TOTAL NET ASSETS	**915,211**	**908,279**

WHERE OUR MONEY GOES

2026

PROGRAMS	ADMINISTRATION	FUNDRAISING
84%	14%	2%



Sending our love to our donors and funders

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Broadway Cares / Equity Fights AIDS, Inc.

Department of Justice Canada / Justice Partnerships Innovation Program

Elizabeth Taylor AIDS Foundation

Gilead Sciences Canada Inc.

Global Affairs Canada through the Act Together for Inclusion Fund, managed by Equitas and Dignity Network Canada

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New Venture Fund

Open Society Foundations

Public Health Agency of Canada

Release UK

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Stollery Foundation

The Global Fund to Fights AIDS, Tuberculosis and Malaria

The Law Foundation of Ontario

ViiV Healthcare Canada

with love,



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