

Statement

For immediate release

A MODEST ADVANCE ON MEDICAL INADMISSIBILITY

Federal government makes minor tweaks instead of full repeal to deeply flawed and discriminatory "excessive demand" regime

The following statement is issued jointly by the Canadian HIV & AIDS Legal Network ("Legal Network") and the HIV & AIDS Legal Clinic Ontario ("HALCO").

April 16, 2018 — Today, after years of advocacy by HIV, disability and migrant rights organizations, the Minister of Immigration, Refugees, and Citizenship announced changes to the rules that exclude would-be residents of Canada based on projected "excessive demand" on health and social services. These changes, however, fall far short of the full repeal of the current flawed, discriminatory regime, which is what advocates called for and a Parliamentary sub-committee recently recommended.

Under the *Immigration and Refugee Protection Act* ("IRPA"), foreign nationals are inadmissible as permanent immigrants to Canada if their health condition might reasonably be expected to cause an "excessive demand" on health or social services, or if their application to immigrate includes a family member in this situation. Due to the high cost of antiretroviral medications, people living with HIV are generally deemed medically inadmissible if they apply to immigrate to Canada.

Today's proposed changes include increasing the cost threshold for defining what constitutes "excessive demand," to three times the current level of \$6,655 per year. This increase to the cost threshold may mean that many people living with HIV will no longer be found medically inadmissible and excluded from immigration to Canada. We welcome this change.

However, HALCO, the Legal Network, and many other disability and migrants rights organizations have long been calling for a full repeal of the medical inadmissibility regime. In November 2017, representatives from HALCO and the Legal Network appeared before the House of Commons Standing Committee on Citizenship and Immigration. We argued that the "excessive demand" barrier is (i) discriminatory, in violation of the *Canadian Charter of Rights and Freedoms* and Canada's international human rights obligations; (ii) not in line with IRPA's objectives; and (iii) costly, cumbersome and inefficient to administer. The Standing Committee agreed with our recommendation and called for the government to repeal the provision.

Today's changes are important first steps. But what is truly needed is a full repeal of the deeply flawed and discriminatory excessive demand regime. As the Minister himself said, this regime does not reflect Canadian values. It must end.

For further information on why the excessive demand regime is problematic, please read our joint submission to the Standing Committee on Citizenship and Immigration (November 15, 2017):

http://www.aidslaw.ca/site/submission-to-the-house-of-commons-standing-committee-on-citizenship-and-immigration-in-relation-to-its-study-of-federal-government-policies-and-guidelines-regarding-medical-inadmissibility-o/?lang=en

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