

Pan-Canadian Pharmacare Pre-Election Campaign  
**COMMUNITY TOOLKIT**

*Rallying the HIV and hepatitis C communities for equitable and timely access to treatment*



**Pan-Canadian Pharmacare – Let's make it an issue!**

People living with and at risk of HIV and hepatitis C, their supporters, and organizations representing them can actively engage in the upcoming federal election by making pan-Canadian pharmacare a key election issue. Working together, we can encourage party leaders and candidates throughout Canada to publicly commit to pan-Canadian pharmacare.

This Community Toolkit explains how your organization can support the CTAC-YouthCO pre-election campaign and gives you the tools to make pan-Canadian pharmacare an issue!

The Toolkit contains...

- Actions you or your organization can take before the Federal Election on October 19<sup>th</sup>, 2015
- Key messages that can be adapted for your organization
- Social media content ready to share via Facebook, Twitter, LinkedIn and more
- Campaign logo that can be uploaded onto your website and shared via social media
- Letter to the federal party leaders stating the urgent need for a pan-Canadian pharmacare strategy
- List of other organizations supporting pan-Canadian pharmacare and additional resources

**BACKGROUND**

To CTAC, pan-Canadian pharmacare means that people regardless of where they live in Canada or their socioeconomic status can access the same high quality treatment options through one simplified mechanism. The term “pan-Canadian” recognizes that a universal national plan is needed, while taking account of the current reality of overlapping provincial, territorial and federal jurisdiction in relation to drug access, including reimbursement by public drug plans for costs incurred by individuals for medications or treatments.

We believe that a pan-Canadian drug strategy—covering not only so-called “catastrophic drugs,” (life saving drugs) but all essential medicines—is key to making access to treatment, care and support a reality for people living with HIV and HIV/hepatitis C co-infection. Pan-Canadian pharmacare will reduce illness and death among people living with and at risk of HIV and hepatitis C, and has the potential to stem the transmission of HIV and hepatitis C (HCV).

At YouthCO, we believe youth need a pan-Canadian drug strategy so that treatment, care and support are a reality for those of us living with HIV and hepatitis C, and who are managing other health conditions with medication, whatever province or territory we call home.



Approximately 25% of people newly diagnosed with HIV in Canada are under the age of 30. For youth who are street-involved, who inject drugs, and for young men who are sexually active with other men, rates of HIV are elevated. Similarly, injection drug use and street involvement are key factors that drive new hepatitis C diagnoses among youth. Inequities in our education, health, and social services are factors that contribute to the ways HIV and hepatitis C affect our communities. Pan-Canadian pharmacare will mean better health for youth and more options for preventing HIV and hepatitis C from being passed between people. HIV and HCV treatment, and pre-exposure prophylaxis (PrEP) for HIV prevention, are crucial tools for reducing the impact of these viruses in our communities.

There are more than 71,000 people in Canada living with HIV of whom 25% are unaware they are positive. And over 225,000 people have chronic hepatitis C of whom 44% are undiagnosed.<sup>1,2</sup> Many people living with and at risk of HIV, HIV/hepatitis co-infection, and chronic hepatitis C have been socioeconomically marginalized and face significant barriers accessing the traditional health care system. Pan-Canadian pharmacare should be designed and delivered with the meaningful involvement of people living with HIV, HIV/hepatitis co-infection, and chronic hepatitis C, so that it promotes health equity rather than reinforcing existing inequalities.

## TAKE ACTION

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1. Create your own organizational statement. Why are you are supporting a national call for a pan-Canadian pharmacare strategy? Share it on your website, and via social media. Brand it with your organizational logo **and** the Pan-Canadian Pharmacare logo we have created (see “Campaign Logo” section below).
2. Get social! (see “Social Media” section, below for a full set of tools)
  - a. Share social media messaging
  - b. Like or retweet CTAC and YouthCO and fellow supporting organizations’ content on social media
3. Forward the “Letter to Party Leaders and Health Critics” via email
4. Sign the Canadian Association of Community Health Centres and Campaign for National Drug Coverage petitions  
<http://www.cachc.ca/pharmacare/>  
<http://campaign4nationaldrugcoverage.ca/>
5. Support other similar campaigns by endorsing and sharing via your networks (see list provided)

## KEY MESSAGES FOR THE HIV/AIDS AND HEPATITIS C SECTORS

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CTAC and YouthCO have developed a number of key messages. Adapt them to suit the voice and vision of your organization.

A pan-Canadian drug plan—covering not only so-called “catastrophic drugs,” but all essential medicines—is key to making access to treatment, care and support a reality for people living with HIV and HIV/hepatitis C co-infection.

There are more than 71,000 people in Canada living with HIV of whom 25% are unaware they are positive. And over 225,000 people have chronic hepatitis C of whom 44% are undiagnosed.<sup>3,4</sup> Currently access to HIV and HCV treatment in Canada depends on which province or territory you live in, or whether you are of aboriginal heritage. The same is true for prisoners. This is neither fair nor just in a wealthy country such as Canada.

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<sup>1</sup> <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/14vol40/dr-rm40-19/surveillance-b-eng.php>

<sup>2</sup> <http://www.phac-aspc.gc.ca/aids-sida/publication/survreport/2013/dec/index-eng.php>

<sup>3</sup> <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/14vol40/dr-rm40-19/surveillance-b-eng.php>

<sup>4</sup> <http://www.phac-aspc.gc.ca/aids-sida/publication/survreport/2013/dec/index-eng.php>

Pan-Canadian pharmacare will reduce illness and death among people living with and/or at risk of HIV and hepatitis C, and has the potential to stem the transmission of HIV and hepatitis C. Early and uninterrupted access to treatment through pan-Canadian pharmacare will allow people to live longer, healthier lives, and save precious healthcare costs in the long run.

Many people living with or at risk of HIV, HIV/hepatitis co-infection, and chronic hepatitis C have been socioeconomically marginalized and face significant barriers to accessing health care in Canada. Pan-Canadian pharmacare should be designed and delivered with the meaningful involvement of people living with these viruses, so that it promotes health equity rather than reinforcing existing inequality.

Youth need a pan-Canadian drug plan so that treatment, care and support are a reality for those among them living with HIV and hepatitis C, whatever province they call home. The ability to access prescription medications should not be dictated by whether people live on-reserve or off-reserve, whether they are incarcerated or not, or whether they live with parents or guardians who have private drug plans.

Most youth in Canada do not live in a location where they can access medications they need in an affordable way. British Columbia is a leader in making HIV treatment available at no cost to people living in the province. Youth believe this level of access to HIV treatment is a necessity, not a luxury to be handed out based on the luck of where they live. Pan-Canadian pharmacare should mean all youth in Canada are able to access medications as part of their care when it comes to **HIV treatment or prevention, and supporting their overall wellness.**

Moving between provinces is a reality for many youth: they may move to another province to find communities where they are safe and supported, and/or to access meaningful employment and education opportunities. Pan-Canadian pharmacare will ensure youth have uninterrupted access to medication for treatment and prevention of HIV and other medical conditions, and treatment of hepatitis C, wherever they live and as they move between provinces and territories.

Approximately 25% of people newly diagnosed with HIV in Canada are under the age of 30. For youth who are street-involved, inject drugs, and for young gay and bisexual men, rates of HIV are elevated. Similarly, injection drug use and street involvement are key factors that drive new hepatitis C diagnoses among youth. Inequities in education, health, and social services are factors that contribute to the ways HIV and hepatitis C affect our communities. Pan-Canadian pharmacare will mean better health for youth and more options for preventing HIV and hepatitis C from being passed between people. HIV and hepatitis C treatment, and pre-exposure prophylaxis (PrEP) for HIV, are crucial tools for reducing the impact of these viruses in our communities.

Pan-Canadian pharmacare is consistently shown to be cost-effective and to improve health outcomes, and Canada has not yet made this a reality for all of us. **We are encouraging youth, people living with HIV and/or hepatitis C, and our supporters, to ‘get your vote on’ and make pharmacare part of this upcoming federal election.**

**Access to prescription medications matters for all Canadians. ‘Get your vote on’, and vote for pan-Canadian pharmacare.**

## SOCIAL MEDIA CONTENT

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### Tweets

We support pan-Canadian pharmacare! 3 million Canadians can't afford to fill their prescriptions #pharmacare #cdnpoli #elxn42

70% of CDNS need high-cost prescription drugs year after year #pharmacare #cdnpoli #elxn42

2 million CDNS spend over \$1,000/yr for prescription drugs #pharmacare #cdnpoli #elxn42

Learn more about how you can support pan-Canadian #pharmacare <http://bit.ly/1RQKv5J> #HIV #HCV #elxn42

Equitable access to prescription drugs saves lives <http://bit.ly/1RQKv5J> #pharmacare #HIV #HCV #cdnpoli #elxn42

People living w/ or at risk of HIV/HCV face barriers to treatment access <http://bit.ly/1RQKv5J> #pharmacare #cdnpoli #elxn42

Pan-Canadian pharmacare means uninterrupted access to needed medications for youth moving between provinces. #pharmacare #cdnpoli #elxn42

Approx.25% of people newly diagnosed w/ HIV in CAN are under 30. Pan-Canadian pharmacare means more options & preventing HIV & hepatitis. #elxn42

Access to prescription medications matters for all Canadians. Get your vote on, and vote for pan-Canadian pharmacare. #elxn42 #cdnpoli

You can also Tweet at the party leaders—just add their Twitter account in your Tweet: @pmharper @ThomasMulcair @JustinTrudeau @ElizabethMay

## Facebook

[Insert your organization's name] supports the call for a pan-Canadian pharmacare strategy.

<http://bit.ly/1RQKv5J>

[Insert campaign logo] #pharmacare #cdnpoli #elxn42

Take action during this federal election to make sure people living with or at risk of HIV and hepatitis C can access affordable treatments. Make it an #elxn42 issue! Learn more <http://bit.ly/1RQKv5J> #pharmacare #cdnpoli

Access to prescription medications matters for all Canadians. Get your vote on, and vote for pan-Canadian pharmacare. #elxn42 #cdnpoli

## Instagram

- A. Print off the campaign logo. Take a picture of the logo next to your organization's logo, staff or volunteers. Post it to Instagram with #pharmacare #elxn42 #GetYourVoteOn. Link the picture on your other social media profiles.
- B. GET YOUR VOTE ON! Take a picture of yourself holding a sign showing us that you, your team or volunteers are getting their vote on. Post it to Instagram with #pharmacare #elxn42 #GetYourVoteOn. Link the picture on your other social media profiles.

## Hashtags to follow

#pharmacare #cdnpoli #nationaldrugcoverage #elxn42 #elxn2015 #vote4care

## CAMPAIGN LOGO

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Share the logos on social media, your website, newsletters etc...

They can be viewed and saved for download from the CTAC website [here](#).



**GET YOUR  
VOTE ON!**

## LETTER TO PARTY LEADERS & HEALTH CRITICS

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Copy and paste this letter or use it as a template for your own letter. Send it to the federal party leaders, Minister of Health, and opposition party health critics:

**To:** thomas.mulcair@parl.gc.ca; stephen.harper@parl.gc.ca; justin.trudeau@parl.gc.ca; Elizabeth.May@parl.gc.ca; rona.ambrose@parl.gc.ca; hedy.fry@parl.gc.ca; Murray.Rankin@parl.gc.ca; duceppe.g@parl.gc.ca.

**Subject: Make pan-Canadian pharmacare an election priority**

Right Hon. Stephen Harper, MP - Prime Minister of Canada  
Hon. Thomas Mulcair, MP - Leader of the NDP of Canada  
Justin Trudeau, MP - Leader of the Liberal Party of Canada  
Elizabeth May, MP - Leader of the Green Party of Canada  
Gilles Duceppe, MP – Chef du Bloc Québécois

Dear Mr. Harper, Mr. Mulcair, Mr. Trudeau, and Ms May:

[Insert your organization's name] urges all federal political parties to commit to establishing a pan-Canadian Pharmacare strategy, if elected to form the next Government of Canada.

Pan-Canadian pharmacare means that people regardless of where they live in Canada or their socioeconomic status can access the same high quality treatment options through one simplified mechanism. The term “pan-Canadian” recognizes that a universal national plan is needed, while taking account of the current reality of overlapping provincial, territorial and federal jurisdiction in relation to drug access, including public reimbursement.

There are more than 71,000 people in Canada living with HIV of whom 25% are unaware they have HIV. And over 225,000 people have chronic hepatitis C of whom 44% are undiagnosed.<sup>5,6</sup> Many people living with and at risk of HIV, HIV/hepatitis C co-infection, and chronic hepatitis C have been socioeconomically marginalized and face significant barriers accessing the traditional health care system. A pan-Canadian drug plan—covering all essential medicines—is key to making access to treatment, care and support a reality for people living with HIV and HIV/hepatitis C co-infection. Pan-Canadian pharmacare will mean better health and will reduce illness and death among people living with HIV and HIV/hepatitis C co-infection. Pan-Canadian pharmacare means equitable access to HIV and hepatitis C treatment, and pre-exposure prophylaxis (PrEP) for HIV, which are crucial tools for reducing the impact of these viruses in our communities.

It is unacceptable that 3 million people in Canada cannot afford to take prescriptions as directed and that 2 million Canadians pay over \$1000 a year for prescription drugs.

**We urge you, as part of your party’s election platform, to publicly commit to a pan-Canadian pharmacare strategy. We will support your efforts to make Canadian health care truly equitable and supportive of a healthy, fair society for all.**

cc: Hon. Rona Ambrose, MP - Federal Minister of Health, Murray Rankin, MP - NDP Health Critic, Hon. Hedy Fry, MP - Liberal Party Health Critic

### OTHER CAMPAIGNS OR SUPPORTERS OF NATIONAL PHARMACARE

<a href="#">CACHC</a>
<a href="#">PHARMACARE2020</a>
<a href="#">Best Medicines Coalition</a>
<a href="#">Canadian Doctors for Medicare</a>
<a href="#">The Canadian Health Coalition</a>
<a href="#">Health Care Canada</a>
<a href="#">The CD Howe Institute</a>
<a href="#">YouthCO</a>
<a href="#">CTAC</a>
<a href="#">Unifor</a>
<a href="#">VoteForCare.ca</a>

### RESOURCES YOU MAY FIND INTERESTING

The Wellesley Institute – <a href="#">Low Earnings- Unfilled Prescriptions</a>
The Canadian Life and Health Insurance Association - VIDEO 2013 - <a href="#">Prescription for Change</a>
The Canadian College of Health Leaders – <a href="#">National Pharmaceuticals Strategy</a>
Canadian Federation of Nurses Unions Report : <a href="#">A Roadmap to a Rational Pharmacare Policy in Canada</a>
The Mowat Centre : <a href="#">Unfilled Prescriptions: The Drug Coverage Gap in Canada’s Health Care System</a>
PHARMACARE2020 - <a href="#">The Future of Drug Coverage in Canada</a>
CMAJ article: <a href="#">Estimated cost of universal public coverage of prescription drugs in Canada</a>

<sup>5</sup> <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/14vol40/dr-rm40-19/surveillance-b-eng.php>

<sup>6</sup> <http://www.phac-aspc.gc.ca/aids-sida/publication/survreport/2013/dec/index-eng.php>