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Doctors Without Borders/Médecins Sans Frontières (MSF) 2025 Policy Recommendations for Canada's Next Government March 2025

Introduction

Doctors Without Borders/Médecins Sans Frontières (MSF) is one of the world's leading independent emergency humanitarian medical organizations, working in more than 70 countries around the world to address the urgent health needs caused by conflict and crises. Our teams deliver primary and secondary emergency medical care, sexual and reproductive healthcare (SRH), mental healthcare and malnutrition response in acute crisis settings, and strive to ensure people in affected areas have access to essential lifesaving medical services. As a result of this work, we bear witness to the front-line impact of the world's worst humanitarian emergencies and of global efforts to address them.

MSF is an almost entirely privately funded organization¹ that operates independently of the institutional international aid system. But we see first-hand that system's impact on the lives of those most affected by global emergencies – and the tragic human costs that occur when it fails. We also see the unacceptable health and disease burdens borne by people in lower-income countries who lack access to lifesaving treatments and medicines, even as we know that clear, achievable and practical solutions to those gaps exist.

For decades, we have also seen Canada play a significant role in helping meet the world's health and humanitarian needs. Through its diplomacy and its participation in relevant multilateral institutions, Canada has consistently helped shape the structure and the responsiveness of the global humanitarian system on which the world depends to prevent catastrophic suffering and loss of life in the face of disasters, disease outbreaks, conflicts and other crises. Canada is also home to a world-class health technology and medical innovation sector, which has the capacity to save lives and reduce the risks of global health crises here and abroad.

Canada is currently heading into a federal election, which is coming at a moment of significant global unrest. Hundreds of millions of people's lives, safety and dignity are at

¹ MSF currently receives \$12.5-million in funding each year as part of a four-year programmatic agreement with Global Affairs Canada. However, public institutional funding (PIF), or government funding, [provided only 1% of MSF's global funding in 2023](#), with Canadian government funding making up only 0.06% of the total. In fact, to maintain its neutrality, impartiality and independence, Canada is only one of three governments around the world from which MSF will accept any funding at all. The other two are Switzerland and Japan.

risk as a result not only of their exposure to conflict and disaster, but also of their deliberate exclusion from accessing healthcare. In this context, the decisions of Canadian policymakers will have an impact not just on the lives of Canadians but also those of people the world over.

That's why MSF is calling on each of Canada's major political parties to consider the urgent priorities outlined below as they draft their policy positions and platforms for the upcoming election, and to take the steps necessary to deepen Canada's foreign policy, its international assistance policy and its health innovation policies. By doing so, they will help ensure that Canada's next government can better address the most pressing global health and humanitarian needs facing Canadians and the world they live in today.

1: Canada's Humanitarian Response to Global Conflict and Crisis

The world is currently experiencing an alarming number of acute and globally destabilizing emergencies, including conflict, displacement, malnutrition and disease outbreaks. The United Nations (UN) estimates that more than 300 million people will need humanitarian assistance in 2025² – a figure that has been trending upwards almost every year, while the resources to respond to those needs have been drastically cut down.

Humanitarian organizations exist to save lives and alleviate the suffering of those impacted by global emergencies. But humanitarians cannot stop wars, and we alone cannot prevent the many factors driving alarming levels of displacement, malnutrition and mortality in the places where we work. We also cannot hold perpetrators accountable for violations of international humanitarian law (IHL) or manage by ourselves global outbreaks that kill millions and cost billions. These are political problems, and they require political solutions from governments, who wield control over the diplomatic, financial and other tools needed to meet these challenges directly.

In a world where IHL is routinely flouted and civilians are attacked, hospitals are bombed, and patients are killed in hospital beds while receiving care, Canada has both moral and legal imperatives to act. IHL and medical ethics are what keep MSF's teams and other emergency responders safe in conflict zones, and establish rules that constrain the behaviour of parties to armed conflicts. As a proponent of a rules-based international order, Canada should be a bigger champion of IHL and be engaged in more credible humanitarian diplomacy on these issues.

We acknowledge that Canada often speaks out in the face of attacks against humanitarians or civilians, in support of humanitarian access, and in opposition to the instrumentalization of humanitarian aid. However, Canada needs to move beyond words and find meaningful ways to translate its own demands into actions that actually achieve this. Canada also has legal obligations to not only ensure respect for IHL but to exert influence to stop violations from happening. Canada needs a foreign policy that mobilizes diplomatic, political and economic tools to prevent and stop grave violations of IHL, and to address the political

² From the UN OCHA [Global Humanitarian Overview February Update](#) February 28, 2025

crises that drive humanitarian emergencies.

Even the most robust humanitarian diplomacy, however, can only be a complement to robust humanitarian funding, without which even basic lifesaving activities would not be possible in the world's crisis zones. In 2025, massive cuts by major donor governments have upended the humanitarian system and have drastically curtailed its ability to respond to needs. Canada can and must challenge this trend and demonstrate to its partners and allies that humanitarian assistance is essential spending that is necessary to prevent immense suffering and loss of life in global emergencies.

Recommendation 1.1: Canada should use its humanitarian diplomacy, and all the diplomatic and political tools at its disposal, to address the health and humanitarian needs caused by global crises

- Canada's government can and should use its diplomatic and geopolitical tools, and its participation in global multilateral platforms, to ensure the world responds effectively to global humanitarian crises, and to defend and uphold the principles on which the international humanitarian system is based.
- Canada should ensure it has the necessary tools and resources in place to effectively achieve these aims and to implement strategies, for example by having a diplomatic presence on the ground in regions impacted by crises.
- Canada, as a key member state in the international community responsible for upholding the basic principles of IHL and the larger humanitarian system, must step up its efforts to engage with and influence countries, parties to conflicts, members of civil society and other actors who can meaningfully improve the situation of people affected by humanitarian crises. This includes having specific foreign policy objectives, resources and plans for how Canada will meet its legal obligations to exert influence to stop violations of IHL.³ Canada should also use its diplomacy to prevent the violation of international conventions and treaties (including IHL) from being normalized.
- Canada should use the multilateral platforms to which it belongs to play a more meaningful role in finding solutions to political, social and economic crises that are at the heart of current global humanitarian emergencies.
- Canada needs to clearly identify those crises where it has meaningful leverage and impact, and define clear paths forward to end violations of IHL, to prevent attacks on civilians, to stop and bring accountability for sexual violence in conflict, and find tangible solutions to crises. In particular:
 - Canada must step up its efforts to engage with partners, and use the multilateral platforms to which it belongs to help find a solution to the current crisis in Sudan. What is needed today is a new compact, one that replaces the ineffective Jeddah Declaration of Commitment to Protect the Civilians of Sudan, and is actually founded on a shared commitment to civilian protection. Such a compact must guarantee aid organizations the operational space they need, enforce a moratorium on all restrictions on

³ [Customary International Humanitarian Law Rule 144](#), International Committee of the Red Cross

humanitarian assistance, and ensure the humanitarian response in Sudan remains independent from political interference. It must replace the current system of gatekeeping with one that upholds the survival and dignity of the Sudanese people. Canada could mobilize its presidency of the G7 and presence on other platforms to be a leader in this.

- Canada should raise calls for principled protection of the humanitarian space in Haiti with the security forces it funds, who are responsible for ensuring that aid providers can operate safely and according to humanitarian principles.
- Canada's Rohingya Strategy has enabled it to have direct influence on protecting the safety and well-being of what the UN has called one of the world's most persecuted minorities; Canada's next government should issue a third phase of its Rohingya Strategy as soon as possible.
- Canada's role in various international health platforms, from GAVI to the Global Fund and beyond, includes being a funder for these initiatives, but must go beyond that: Canada needs to make sure these bodies find the most effective way to continue promoting affordable access to medicines, vaccines and diagnostics for the acute and chronic diseases that cause additional suffering in humanitarian contexts.

Recommendation 1.2: Canada should increase public funding for agencies and programs that respond to global humanitarian emergencies, to address shortfalls in global humanitarian funding.

- Canada's next government must live up to its commitments to save lives and alleviate the suffering of people around the world affected by conflict and crisis, by increasing its financial support for the global humanitarian system. Canada can demonstrate to the world that meeting humanitarian needs is a fundamental priority for all members of the international community, by committing to increase its levels of international humanitarian assistance funding, as measured by amounts in Canadian dollars, in each federal budget for every year between 2025 and 2029.

2: Bringing Canadian Leadership to Global Health, Outbreak Response, and Pandemic Preparedness

Every day, MSF teams respond to disease outbreaks like measles, cholera and mpox, and too often we lack the vaccines, treatments and diagnostic tests we need stop them from spreading. The world has faced multiple large outbreaks of infectious diseases since the COVID-19 global pandemic, including recent outbreaks of Marburg Virus Disease (MVD) in Rwanda, mpox in Democratic Republic of Congo, and Ebola-Sudan in Uganda. Vaccines and therapeutics exist for some of these diseases, but they are mostly not available in the places where outbreaks occur. Others, like Marburg, need vaccines and therapeutics that have yet to be approved, although viable candidates have already been developed in Canadian laboratories but have faced delays in reaching patients, because of a lack of a clear pathway for manufacturing, testing, and deploying them.

Canada can champion equitable access to drugs and vaccines while revisiting how it funds the research and development of lifesaving medicines and vaccines in its own world-class laboratories. Canada's next government should take decisive action to ensure that when Canadians pay to develop new medicines, improving public health, not pharmaceutical profits, should be the guiding principle. The government should attach conditions to public funding to ensure that medicines and vaccines developed by Canada are made affordable and accessible for Canadians and patients around the world. Canada can also put its own biomanufacturing facilities and resources to use to produce some of the medicines and other health technologies that are urgently needed in many countries, but which are not currently available via the for-profit pharmaceutical system.

Recommendation 2.1: Canada needs to revisit how it is funding the research and development of lifesaving medicines and vaccines.

- Canada should require that all federal funding a) of health research, particularly for R&D of pharmaceuticals and other health tools and b) related to production or manufacturing of pharmaceuticals and medical devices, includes binding obligations requiring funding recipients to take reasonable steps to ensure any ensuing commercial products (drugs, vaccines, diagnostic tests, medical devices, and other health technologies) are affordable and accessible for patients in Canada and elsewhere, particularly in low- and middle-income countries (LMICs), including via the inclusion of global licensing requirements for associated intellectual property.
- Canada should impose requirements on federal funding and take whatever other measures necessary to ensure medicines and vaccines developed with Canadian funding are registered and available in Canada and LMICs, including by creating a legislated requirement for developers of health tools including drugs, vaccines and diagnostic tests to demonstrate best efforts to ensure these products are registered for patient use in all countries where a need exists, including through licensing products and associated intellectual property.
- Canada's government should ensure that details of all federal funding of pharmaceutical development and production, including but not limited to R&D and construction/operation of manufacturing facilities, be made transparent and publicly available, including publication of contracts, funding agreements, licensing agreements, and other relevant information.
- Establish a publicly accessible platform tracking all pharmaceuticals and medical devices developed using public funding (including, but not limited to, Tri-Council agencies and ISED), in order to track their development status (including failure, such as unsuccessful clinical trials), regulatory status (domestic and international), the status of any associated intellectual property rights, and otherwise measure the impact of such funding on the development of successful health innovations.
- Canada should establish a publicly accessible platform listing all pharmaceuticals and other health products developed, or in development, by Government of Canada bodies or agencies (for instance, the National Microbiology Laboratory), which would include their development status, regulatory status (domestic and

international), and status of any licenses of the underlying technology and intellectual property to third parties (including identities of those third parties).

- The next government should establish a clear funding pathway to guide Canadian research, from discovery through development and clinical trials to final approval, particularly where the product is of high public health importance but low commercial value, to ensure rapid patient and health system access.
- As part of any funding allocations to the Canadian Institutes of Health Research Clinical Trials Strategy, there should be obligatory transparency requirements around clinical trials, including their costs, for any pharmaceuticals, medical devices, or other health technologies.

Recommendation 2.2: Canada should use its publicly owned biomanufacturing facilities to produce the medicines the world needs

- Canada's recently built Biologics Manufacturing Facility (BMC) and its Clinical Trial Material Facility (CTMF), both in Montreal, must be put to use for the public good. They can serve a useful role in responding to medicine market failures to the benefit of global public health and of Canadians themselves. As an international humanitarian medical organization, MSF is calling on Canada to use its publicly owned biomanufacturing facilities to produce medical products for which there is currently a high global need but unavailable supply due to gaps in the international marketplace. By doing so, Canada can put its investments to use, continue to develop itself as a global health leader, and help save lives around the world.
- Canada should fund and manufacture needed health technologies such as vaccines and therapeutics for high-consequence infectious diseases such as monoclonal antibodies for Ebola and diphtheria, vaccines and therapeutics for Marburg, and other tools needed to address outbreaks and other health crises, and in turn make them available to global stockpiles, to Ministries of Health, and humanitarian organizations free of charge (as aid) or on a cost-recovery basis, thus addressing a major gap in scaling-up access to existing and investigational medical countermeasures for infectious diseases for which there is a market failure. These products would all represent significant technological advances, and developing pre-positioned stockpiles of such candidate vaccines and therapeutics would align with the work of the recently announced Health Emergency Readiness Canada (HERC) agency as well as the public-good philosophy of the BMC and CTMF.
- Canada should be engaging with the WHO to identify global stockpile needs for insufficiently available medicines, vaccines and therapeutics, and aim to start producing the supply needed to satisfy the global demands. This would be a significant win for Canadian global health diplomacy and global public health.
- For a minimal investment of \$5-8 million, on top of existing annual operating costs at the BMC, Canada can and should start producing and making available one or more product of relevance to Canadians (e.g. for use in the National Emergency Strategic Stockpile) and for global public health, using federal funds and facilities. This could directly close some of the gaps in access to lifesaving medical tools.

3: Protecting Sexual and Reproductive Health in Humanitarian Crises

A disproportionate number of the patients MSF provides care for amid global health and humanitarian crises each year are women and children, who frequently bear the brunt of conflict, displacement, disease outbreaks and other emergencies. Women in particular face specific challenges related to maternal health, especially in humanitarian settings, and are also at significantly greater risk of sexual and gender-based violence (SGBV).

According to the WHO's most recent data⁴, more than 700 women die around the world each day from preventable causes related to pregnancy and childbirth, and almost all of those deaths occur in lower- and middle-income countries (LMICs). Close to one in every three women around the world has been subjected to intimate-partner violence or sexual violence from non-partners⁵. Exposure to SGBV increases significantly in conflict settings.

Although MSF is an impartial humanitarian medical organization that by mandate prioritizes care for whoever needs it most – regardless of age, gender or any other marker of identity – we also place a specific focus on the health needs of women and children because we know from experience that they are often the most vulnerable in crises. Last year⁶, for example, MSF assisted with 337,000 safe deliveries, and treated more than 62,000 survivors of sexual violence, a nearly 35% increase over the previous year.

Canada, too, as it has under successive previous governments of different political identities, must continue to prioritize the unique needs of women and children in crisis settings, in recognition of the excessive health burdens they frequently bear.

Recommendation 3.1: Canada should maintain its long-standing commitment to maternal, newborn and child health (MNCH) and sexual and reproductive health (SRH) as part of its international assistance policy.

- Regardless of the specific terms used, the next Canadian government should recommit itself to the same principles that drove its Feminist International Assistance Policy under the Liberal government of Justin Trudeau, and the Muskoka Initiative under the Conservative government of Stephen Harper. Both of these placed the health of women and children – specifically mother, newborn and child health (MNCH) and sexual and reproductive health (SRH) – at the centre of Canada's international assistance policy. Canada can do this through revised versions of its pre-existing tools and policies, or through the introduction of new policies aimed at meeting the needs of women and children in humanitarian and development settings. Doing so would reflect the disproportionate negative impact that conflict and crisis have on the health of women and children.

⁴ <https://www.who.int/news-room/fact-sheets/detail/maternal-mortality>

⁵ <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>

⁶ <https://www.msf.org/international-activity-report-2023/2023-figures>

Recommendation 3.2: Canada should include women's health and SRH needs among its priorities when determining its annual humanitarian assistance allocations.

- Canada must continue to prioritize programming in humanitarian crisis settings, via Global Affairs Canada's annual allocations for international humanitarian assistance, that is gender-responsive, and is focused in particular on SRH needs, by responding to sexual and gender-based violence (SGBV), maternal mortality, safe deliveries and other lifesaving care.

For additional information, and to access a more detailed version of these recommendations with more background and context, please contact:

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