

## Statement on the Passage of Bill C-12

*HIV Legal Network and the HIV & AIDS Legal Clinic Ontario (HALCO)*

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On March 26, 2026, [Bill C-12, the Strengthening Canada's Immigration System and Borders Act](#), received Royal Assent and became law, despite significant and sustained concerns by civil society organizations, legal experts, and international human rights bodies.

**The HIV Legal Network and the HIV & AIDS Legal Clinic Ontario (HALCO) are deeply concerned about the passage of Bill C-12, including the significant harms the law will have on individual and public health.**

Bill C-12 has been presented by the government as a means of bolstering national security and enhancing the integrity of Canada's immigration and asylum systems. However, the available evidence indicates that it will have the opposite effect. By restricting access to refugee protection, expanding government discretion to cancel applications, and increasing the number of people living without secure immigration status, the law will increase administrative inefficiencies, contribute to more backlogs, and place additional pressure on already strained health and social systems. These outcomes do not enhance the integrity of the immigration and asylum systems, nor do they advance national security.

The health implications of these changes will be immediate and significant.

Take, for instance, one of the most consequential changes introduced by Bill C-12: the one-year ineligibility provision. Individuals who seek protection more than one year after their first arrival in Canada will be rendered ineligible for a refugee hearing before the Immigration and Refugee Board. They will instead be rerouted to the Pre-Removal Risk Assessment (PRRA) process. Evidence from similar (and less restrictive) provisions in the United States suggests that [this provision will disproportionately impact survivors of gender-based violence, LGBTQIA+ individuals, unaccompanied minors, and individuals with health needs](#).

As noted by the Canadian Council for Refugees (CCR), [the PRRA process is "wholly inadequate"](#), lacking key procedural safeguards such as guaranteed oral hearings, independence, and meaningful rights of appeal. The PRRA acceptance rate is approximately [33%](#), compared to [63%](#) at the Immigration and Refugee Board, raising serious concerns about access to protection. A [2025 study](#) analyzing over 180,000 Federal Court cases further found that diverting claims to the PRRA process is likely to increase errors and generate more litigation, ultimately placing greater strain on the Federal Court and the broader immigration system.

Critically, some of those affected will be from countries to which Canada has [suspended removals](#) due to their dangerous conditions, including Ukraine, Haiti, Venezuela, Yemen, among others. People from these countries who are redirected to the PRRA process will be unable to access PRRAs in practice, as PRRAs are only initiated by the Canadian government when they are ready to remove someone. As a result, many will remain in Canada for prolonged or indefinite periods without any means to regularize their status, effectively trapped in conditions of legal limbo, the harms of which are well documented.

People in this situation will have limited access to healthcare and will be forced to rely on [the Interim Federal Health Program \(IFHP\)](#), which provides restricted health coverage. Recent changes introducing [co-payments under the IFHP will further increase barriers to care](#). That is, as of May 2026, individuals are required to pay \$4 per prescription and 30% of the cost of supplemental health services, including dental care, vision care, mental health services, and access to assistive devices. For individuals living in legal limbo, these costs are significant and may make essential care inaccessible.

Bill C-12 will also expand provisions resulting in more refugee claims being declared abandoned. Under the legislation, claims will be considered abandoned where people are unable to provide required documents in a timely manner or miss an interview — often due to systemic barriers such as lack of legal representation, language and technological challenges, illness, or unstable housing. [As noted by CCR](#), this will disproportionately impact already marginalized individuals, including those with health conditions.

Individuals whose claims are deemed abandoned are barred from accessing PRRAs for 12 months and are not entitled to a stay of removal, creating a real risk of deportation without adequate assessment of the risks they face upon removal. Others will remain in Canada without status while also losing access to healthcare coverage, as IFHP is not available to those whose claims are deemed abandoned. These individuals will be forced to delay or forgo care altogether.

These are only a few examples of the wide-ranging impacts of Bill C-12.

Research has consistently demonstrated that [immigration status is a key determinant of health](#). Individuals without stable status face heightened barriers to care, including cost, fear of enforcement, and systemic exclusion. This results in delayed treatment, worse health outcomes, and increased reliance on emergency services—outcomes that are both more harmful for individuals and more costly for public systems.

On March 23, 2026, just three days before Bill C-12 received royal assent, the [United Nations Human Rights Committee published its findings on Canada](#). The Committee underscored our concerns, warning that Bill C-12 may “weaken refugee protection” and emphasizing that Canada must ensure asylum seekers have “unfettered access” to protection and fair procedures. Canada ignored that call.

Bill C-12 is built on a flawed premise: that restricting access to protection will strengthen Canada. In reality, the law will deepen precarity, undermine health, and harm those who are already marginalized. Policies that support people — by ensuring access to stable immigration status and healthcare — are what strengthen public systems, improve health outcomes, and contribute to a just and equitable society.

**Bill C-12 moves Canada in the wrong direction and risks becoming a profound public policy failure with serious and lasting consequences.**