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“Defending health care: Public solutions for a public system”

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Toronto, Ontario

(Check against delivery)

Thank you.

It is great to be here with so many of you who work every day to ensure that our health care system continues to evolve based on evidence.

You ensure that the system itself evolves to more quickly apply the evidence that we have.

Your commitment is key to the sustainability of public health care, and to our ability to fund what works and stop funding what doesn’t.

I’m here today to speak about the future of Canada’s public health care system. My colleagues Ujjal Dosanjh and Dr. Hedy Fry are doing the same, in Ottawa and Vancouver, respectively.

All of us are joining Michael Ignatieff in making a clear commitment: the Liberal Party of Canada will defend the future of public health care.

We are committed to providing the most appropriate care in the most appropriate place by the most appropriate person – whether that person is paid or unpaid, in the hospital or the home.

It has never been more important to deliver on our commitments.

FIGHT FOR THE FUTURE

Today, our health care system is under attack.

In the United States, right-wing Republicans have used Canada as a punching bag, a rhetorical piñata in their attacks on President Obama. They have distorted the truth and told outright lies.

Our federal government should have stood up and made a strong defence of Medicare, dispelled the right-wing myths and lies, and shown the pride that so many of us feel in our health care system. Unfortunately, they did not.

Last year, I testified at the Senate hearings in Washington. I was astounded that the arguments I heard were not focused on whether a family should go bankrupt if their child gets leukemia, they were focused on rhetoric about keeping the government out of your life.

“Life, liberty, and the pursuit of happiness,” versus our “peace, order, and good government” – in Canada, we do believe that government has a role to play in the health and health care of our citizens.

But for the last five years, the silence from Ottawa has been deafening.

We need federal leadership to defend the future of Medicare, or else Medicare will have no future.

You can see the symptoms now. Without federal leadership, privatization advocates have been free to distort the truth, create fear, and advance their agenda.

They say that we spend too much on health care. They talk as if a grey tsunami of senior citizens is about to drown all of our social services and our health budgets, and they say that the only cure is privatization, and the creation of a two-tier system.

In other words, they think we should just give up now. They are wrong.

For the past several decades, the share of national income devoted to total health care expenditure has actually remained relatively stable.

Today, health care does make up a larger share of provincial budgets, but this is due in large part to choices that the provinces have made to cut tax revenues and reduce expenditures in other areas.

Yes, our population is aging, and demographics will change the way we manage our health care system. But our aging population is not the biggest driver of health care costs – pharmaceuticals are.

Drug costs are the fastest-growing area of health care expenditure, rising from just under ten percent of the total in 1985, to more than 16 percent of all health care costs last year. And most of these costs end up paid for by Canadian families or private insurers, not the public system.

Here is an alarming figure: one in ten Canadians report not filling a prescription because they cannot afford to pay. If Canadian families are going broke to pay for medicine, we are surely losing the spirit of Medicare.

But attacking our health care system is not the answer. Neither is privatization.

As we face new challenges, our defence of public health care and the *Canada Health Act* must be stronger, not weaker – so that access to care is always based on medical need, not the ability to pay.

We must get back to the ambition we shared with the provinces in 2004, when the former Liberal government negotiated a ten-year, \$41-billion dollar federal-provincial health care agreement. At the time, I was Minister of State for Public Health.

Part of the 2004 health accord was the National Pharmaceuticals Strategy. This was a definitive step towards a national pharmacare program.

But all our progress stopped in 2006. The provinces have been trying to move forward, but there has been a total absence of leadership at the federal level.

The federal government has even refused to appoint a federal co-chair of the working group on the National Pharmaceuticals Strategy. That is unacceptable.

We should be ambitious about the future of our health care system. In the long term, we need to bring pharmaceuticals and the entire continuum of care – including home care and chronic care – formally into our understanding of Medicare.

It will not happen overnight, but we must begin now.

We must defend our health care and strengthen our system.

Instead, the federal government has wrapped itself in a constitutional cocoon, and totally abdicated its responsibility for the health and health care of Canadians.

The federal government is the fifth-biggest provider of health care in the country, with responsibility for our Aboriginal people, military families, veterans, corrections, and the RCMP. These Canadians see some of the worst health outcomes.

It is time that the federal government stepped up and led by example in their areas of jurisdiction, and worked with the provinces and territories to rise to the challenges our families face, together.

The health and health care of Canadians is a shared responsibility, and our health outcomes and health inequalities are the ultimate report card on how we are doing as a country. As Prof. Richard Wilkinson, author of *The Spirit Level*, has said, Canada has the most rapidly-growing divide between the rich and the poor. We can and must do better.

Medicare is a competitive advantage in a competitive world – a key driver of innovation and economic activity. It is wrong to see it only as a cost centre.

Medicare also levels the playing field for our businesses, enabling them to attract skilled workers and offer them a standard of living comparable to their larger competitors.

It allows our workers the freedom to move between jobs and regions, unlike other nations where millions of people are reluctant to move for fear of losing their coverage.

Where health care is concerned, Liberals look to the past with pride, and the future with confidence. Our system, while not perfect, is among the best in the world. We should celebrate what we have achieved together.

Yes, we have to fight for the future. But our fight is neither with impersonal forces of demographic change, nor with the public health care system itself.

Our fight is with those who seek to create fear so that they can destroy public health care – the ideologues and incrementalists who want to tear up the *Canada Health Act*, the charter of our health care system, and replace it with something less universal, less equal, more private, and less Canadian.

The Liberal Party of Canada will fight them every step of the way.

Medicare is more than a series of transactions between doctors, patients, and governments. It is in the bedrock of our common citizenship. Whoever we are, wherever we are, we access health care as one people, as Canadians.

And when you take your child to the emergency room at one o'clock in the morning, you are not asked which province you come from, or what you earn, or what you can afford. Health care workers only care about healing the patient. In our health care system, that is the only bottom line that matters.

THE LIBERAL FAMILY CARE PLAN

That must not change as our population grows older, and as demographic shifts create different demands on our health care system.

As I have shown, we are well prepared to meet these challenges, as long as we defend and enhance our public health care system.

Part of our efforts will be a national brain strategy, to help more Canadian families face Alzheimer's and other dementias.

We must also help families care for sick or aging loved ones at home. That is why we need the Liberal Family Care Plan, which Michael Ignatieff announced earlier this year.

Our plan has two parts. First, a new six-month Family Care Employment Insurance Benefit, similar to the EI parental leave benefit. This will help our economy by keeping Canadians in the workforce, even if they need to take time to care for their relatives.

Second, a new Family Care Tax Benefit, modeled on the Child Tax Benefit, which will help low- and middle-income family caregivers who provide essential care to a family member at home.

The Liberal Family Care Plan will support families, and it will also reduce the strain on our hospital emergency rooms.

Last week's report from the Auditor General of Ontario makes it clear: emergency rooms are more crowded and waiting lists are longer because we are not doing enough to support home care and family caregivers.

Our Liberal Family Care Plan is a first step. In the long term, we need a national commitment to home care, as envisioned in the 2004 health accord. We must restore that ambition – to support families and sustain our health care system.

HEALTH BEFORE HEALTH CARE

But defending our health care system requires more than just caring for those who are already ill. We must also do more to keep people from getting sick in the first place.

Tommy Douglas used to talk about “the second stage of Medicare,” which would be designed to “keep people well.” After four decades, it is past time we got started.

Our health care is world-class, but our health is deteriorating. This will be the first generation of children that will not live as long as their parents. Childhood obesity rates have tripled in the last three decades. Type-II diabetes is on the rise. These conditions cost our health care system billions of dollars every year.

If we keep people healthy, we can keep costs down, protect our productivity, and prevent avoidable suffering for millions of Canadian families.

We need comprehensive and specific approaches to women's health, men's health, children's health, minority health, and Aboriginal health. We need to promote active living and healthy eating.

We have a moral obligation to prevent the preventable.

In April of this year, Michael Ignatieff announced Canada's first-ever National Food Policy, which will help Canadians make better-informed eating decisions, and ensure that all children have access to healthy foods. We will also introduce progressive health labelling and tough new measures to curb trans-fats and salt.

THE FEDERAL ROLE

Together, we can make Canada the healthiest society on the planet by 2017, when we celebrate the 150th birthday of our country – but only if the federal government leads the way.

We must not sit on the sidelines. We must not pass the buck. Together, we must lead again, and defend the future of health care.

Canada's federal government must be an active partner for the provinces. We must encourage innovation and share best practices. And we must ensure that every Canadian gets world-class care when they get sick, no matter what their pre-existing conditions are, or whether they have the ability to pay, or where in the country they live.

There is a need now for the federal government and the provinces and territories to redouble their efforts on a true quality agenda.

That's a central commitment of the *Canada Health Act*, one that has not been realized in the rural regions of our country. As Allan Rock said, "geography cannot become an excuse for inequity."

Millions of our fellow citizens have to drive hours to see a family doctor, if they can find one at all. Mental health, specialty care, and seniors' care are often all out of reach.

Liberals believe that we must improve rural health care.

We have committed to forgive up to \$20,000 in federal student loans for doctors, nurses and nurse practitioners who choose to practice in a designated underserved rural community.

We will apply an equitable share of funds towards regional health needs in Quebec, which is not part of the Canada Student Loans program.

And we will achieve full high-speed internet access and expanded cell-phone coverage, to bring 21st-century health innovation to rural and remote areas.

We are also committed to make sure that all Canadians benefit from electronic health records, through the Canada Health Infoway. We will review the effectiveness of the current program, and give front-line health care providers a greater role in implementation.

E-prescribing will allow us to know when Canadians are unable to fill their prescriptions because they cannot afford to do so.

Finally, we will restore the mandatory long-form census, which tells us which health care services we need to deliver, and where.

I was proud to introduce a Liberal Private Member's Bill – Bill C-568 – which would save the census. It passed second reading in the House of Commons last week, despite opposition from the government. We will do everything in our power to make sure it becomes law.

Canadians expect federal leadership on health and health care. We expect partnership between governments. We want our governments to fight *for* Medicare, not *over* Medicare. We expect the social contract that Medicare represents to be honoured, not abandoned.

The federal government has the jurisdiction, the role, and the responsibility to defend the national interest and our shared objectives: to ensure that Medicare survives and thrives, to ensure the principles of Medicare are respected by enforcing the *Canada Health Act*, and to share in the cost of the system by providing funding to the provinces and territories.

But the federal government is not an ATM, and the federal role in health care is more than just being a banker to the provinces.

We must ensure that our provincial partners live up to their side of the agreements that govern our health care system.

We must expect the provinces to comply fully with the *Canada Health Act*, and we must enforce the Act ourselves.

And we must see to it that there is transparency and accountability, so that Canadians can have full confidence that our health care system is working.

Today Canadians have no idea what progress has been made on the 2004 health accord – not the National Pharmaceuticals Strategy, not catastrophic drug coverage, not the expansion of home care, nothing. Billions of dollars, but no federal leadership on the actual commitments in the 2004 Accord.

We must do better, because Canadians deserve better. Canadians deserve federal leadership to defend our health care system.

A CLEAR CHOICE

The decisions made by the federal government in the next four years will determine the future of our health care system.

The 2004 health accord expires in 2014. The next federal government will be responsible for shaping what comes after. The work must begin right now. We cannot afford to delay.

In the months ahead, Canadians will have to make a choice about the future of their health care system.

Will we continue to ignore the pressures on our health care system, or will we invest in helping middle-class families care for sick or aging loved ones?

Will we give in to those who would abandon Medicare, or will we enforce the principles of the *Canada Health Act*?

I believe that, when the moment of decision arrives, Canadians will choose to stand with our values, with our common citizenship, and with our best traditions. Together, we will choose a public future for our health care system.

Thank you.

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