



Canadian Health Coalition Coalition canadienne de la santé

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REACTION TO THE CHAOULLI DECISION

OTTAWA, June 9, 2005 — The people of Canada will be shocked to learn that four of seven justices of the Supreme Court of Canada have found that the Quebec Charter protects health care rights only for those who can “afford to pay” for private care. Three of seven justices made the same finding under the Canadian Charter. This important decision, that may affect the future of public health care in Canada, ignored the weight of evidence accepted by the trial judge and the Quebec Court of Appeal.

- “ This decision ignores the evidence that opening the door to private health insurance will have a negative effect on the public system.
- “ While the decision applies only to Quebec, it flies in the face of values shared by all Canadians.
- “ The government of Quebec, together with the government of Canada and other provinces, must act quickly to demonstrate that single-payer health insurance is essential to protect all Canadians` access to quality care.
- “ If the court has found that governments failure to deal problems of waiting lists threatens Canadians life and security rights, the solution must be to fix the system for ALL Canadians not simply those with the ability to purchase private care.
- “ The Supreme Court recognized that failure to ensure timely access to care endangers Canadians well-being, however the remedy must be to insure access for all – not just for those with the ability to pay.
- “ The three justices, who found that the prohibition of private insurance did not violate the Charter, emphasized that those who seek private health insurance are those who can afford it, and who can qualify for it. The justices noted that they are differentiated from the general population – not by their health problems, but by their income status.
- “ The justices warned that the Charter should not be used to roll-back benefits enjoyed by all Canadians, especially the poor.
- “ Canadians as a whole have consistently shown that they share this view: access to health should be based on need and not ability to pay.

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