



Canadian Health Coalition Coalition canadienne de la santé

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OTTAWA MISSING IN ACTION

The Absence of Federal Leadership on SARS

By Michèle Brill-Edwards MD, FRCPC

The disastrous leadership vacuum over Severe Acute Respiratory Syndrome (SARS) is stunning. No one spoke reliably for Canada to the World Health Organization (WHO) during an international health crisis. As a result Canada has been dealt a multi-billion dollar blow and Toronto gets an international black eye. Few realize the disaster flows from federal dereliction of duty for health. Local politicians would not be floundering, buffoons would not be commandeering the microphones, citizens would not be cringing with embarrassment or crying foul in anger, if Ottawa was not missing in action on the SARS front.

Canada's Federal Minister of Health is the national authority delegated by federal law to protect the health and well-being of all Canadians everyday, but especially during a public health crisis like SARS.

The *National Department of Health Act* sets out the "powers, duties and functions" of the Minister for "the protection of the people of Canada against risks to health and the spreading of diseases." This includes both international communication and infectious control at airports, the two key factors behind the WHO travel advisory.

But Canadians would never guess this from the behavior of Health Minister Anne McLellan and her officials.

For a full four weeks, following March 26 when SARS was first identified in Toronto, the federal Minister of Health maintained absolute denial of the facts: that SARS is a national and global health emergency, that Canada has two epicenters, and that a national Canadian response from her office is imperative.

What should the national leadership role have been all along?

To promptly declare a national emergency, establish national communications, to screen for SARS at airports and generally quarterback emergency measures across the country, providing emergency funding, and speaking with one reliable voice for Canada internationally, especially with WHO.

This specifically includes keeping WHO fully and promptly informed of Canadian SARS events, active screening for SARS control at Canadian airports, and informing Ontario and Toronto officials of WHO concerns. In sum, taking charge nationally.

But little of that has happened, aside from the admirable research efforts of the federal lab in Winnipeg. The federal approach followed a decade old policy to download health responsibilities onto the provinces. The crash came, predictably, when the capable local crisis management by Ontario health authorities was undone by the bungling of Health Canada doing poorly what provinces have no mandate to do: speak and act for all Canadians on the international scene.

In the botched discussions with the WHO, Health Canada says it didn't even inquire what action WHO had in mind regarding travel. Nor did Health Canada promptly inform their own Minister and provincial and municipal counterparts about crucial discussions with WHO on April 22, a full day before WHO's high impact travel announcement discouraging nonessential travel to Toronto.

Ottawa's unbelievable "don't ask; don't tell" approach to international discussions on emergency measures left Health Minister McLellan protesting querulously the next day that she was blindsided by WHO. That admission signals complete and catastrophic communications breakdown in her own department. After four weeks of global crisis, neither the Minister nor her staff seemed aware of their NATIONAL DUTY to act for Canada.

The huge opportunity to avert the disastrous travel ban was lost when no federal staff rapidly briefed Minister McLellan and other Ontario and Toronto officials. Imagine how quickly decisions could have been made to meet two key expectations of WHO: accurate information on SARS and improved airport control measures.

Airport control of SARS is a crucial concern for WHO. Their duty is to protect poor nations whose low-tech health systems would be disastrously inadequate to control SARS from even one "imported" case, leading to incalculable illness and death. It's difficult to appreciate that one case could devastate an entire nation. But Canada's advanced health care system could barely contain its SARS crisis, stemming from one imported case.

In Canada, only the federal Minister has the authority to screen international travelers for SARS symptoms on entering/exiting Canada's airports. WHO and Ontario recommended active screening more than a month before the ban. But Health Canada said no, it's "too expensive." Too expensive to have a few dozen federal officials stationed at key airports screening travelers to and from international destinations for a few weeks or months, at a cost of one or two million.

Instead the federal government used cherry colored voluntary disclosure slips ignored by busy passengers. Laughable, were the consequences not so serious. This continued even after WHO identified the known spread of SARS cases exported from Canada to the Philippines and Australia and possibly elsewhere. Still Health Canada refused to act, inviting the ban.

Was WHO's travel advisory rash or wrong? Did WHO "back-track" this week? No. WHO's actions were justified and steady handed in the face of inexcusable federal inaction. When Health Canada unilaterally refused to take active control measures against the export of SARS, and export occurred and was possibly still occurring, WHO was obligated to act to protect the poor countries of the world. As soon as Health Canada agreed to begin active screening, WHO justifiably relinquished the ban.

Canadians ask: "Why would federal authorities deny the need for national leadership in a national/global health emergency?" The answer: money and federal/provincial politics. The federal decision to duck leadership during a health crisis was misguided political maneuvering to avoid paying for the emergency measures undertaken by the provinces. To declare a national health crisis gives the provinces compelling grounds to demand federal money to deal with SARS. But if Ontario officials speak out to demand federal action publicly, they fear ... you guessed it ... withholding of crisis funding.

So the shortsighted ploy to deny the problem ["There is no national emergency"] and avoid paying the tab has backfired badly. Now the whole country will pay billions in lost tourism and business, because the feds wanted to avoid spending a few million dollars.

Canada will pay a huge price for this silent federal dereliction of duty that led directly to the calamitous and avoidable WHO travel ban. Instead of castigating WHO, all Canadians should demand from Ottawa lawfully mandated leadership on health crisis management. Ottawa's penny-pinching dereliction of duty on health governance in Canada is disastrously expensive, for us all.

Dr. Michèle Brill-Edwards sits on the Board of the Canadian Health Coalition and is a former senior physician at Health Canada and the World Health Organization. The above text was recently read by Dr. Brill-Edwards on CBC Radio's "The Current" (May 9, 2003).