

Your Health -- Can You Afford To Grow Older ?

Honouring the Tommy Douglas Centenary
October 20, 2004

Toronto City Hall Council Chambers

I want to begin by thanking the Alliance of Seniors for putting so much work into this important forum. It is an honour to take part in the celebration of the 100th anniversary of Tommy Douglas' birth

Many of you will know that Tommy Douglas had a wonderful rapid fire wit. When someone, who clearly did not share his views once called him a "pip-squeak" and remarked that "he could swallow him in one bite", Tommy was heard to say: "Well in that case sir, you would have more brains in your stomach than you do in your head!".

Today, unfortunately, we appear to have a health care system that also has more brains in its stomach than it has in its head. I am referring, of course, to the enormous appetite for cash in our health care system, without the kinds of results that you and I would like to see add to the care and comfort of Canada's citizens.

The enemies of Medicare are all at the gate -- and their names are power, self-interest, greed, and apathy. They are clamoring for attention at the expense of care, compassion, and commitment to what has set this country apart from others in the world for the past 50 or more years.

Where health care is concerned, Canada appears to have misplaced its moral compass.

The power of particular professional and corporate interest groups to hold governments to ransom, has caused enormous negative repercussions throughout this system, in the manner in which health care is delivered, and by whom.

The result ?

Instead of having health care that helps to maintain older adults and people with disabilities in their own homes and communities, we have large institutions, the majority owned by for-profit corporations, that governments cannot hold accountable for a reasonable quality of care.

Why ? Because if government tries to, they litigate, and the private lawyers that these corporations hire as a cost of doing business, regularly outmaneuver the government lawyers sent to court to uphold the regulations.

Having watched this time and again over a period of 25 years, how the nursing home industry in this province has outmaneuvered one government after another, as it tried to enforce standards, we should have no confidence that the current government, this time, is somehow different. Politicians can delude themselves that they have the power to reign in a huge, well financed, and influential industry, but they are dreaming in Technicolor if they think they won't bankrupt themselves trying.

Dr. Arnold Relman, a Professor Emeritus from Harvard University, coined the term "the medical-industrial complex" to describe the big business that health care has now become, and that business can influence health care decisions. When health ministers make announcements, there is one simple way of telling who influenced those announcements. Ask the simple questions -- who benefits ?? and, who loses ??

In Ontario, we have tens of thousands of older adults and people with disabilities forced to live their lives in institutions in the absence of other alternatives to keep them at home. Is that their choice ? No, it is not !

Walk into any nursing home in this province and you will hear people plaintively calling out, "I want to go home !" Ask family members if they wanted to put grandma into an institution and almost to a person they will tell you no, but they had no other choice. Institutionalization is a human tragedy of enormous proportions. Who benefits from it ? Not you and I !!

Do we have an adequately funded non-profit home care system ? No !

Do we have any small, non-profit residences for older people, or apartment programs, or rent geared to income housing units that are staffed 24 / 7 according to the level of peoples' needs ?
No !

Do we have a system of tailored funding to allow people and their families to purchase the specific services they need -- no more, no less ? No !

What we have are large, unwieldy bureaucratic structures that decide for people, in the most paternalistic of ways, what they need, and then ration what they will get.

Would we be able to keep people out of institutions if we did have some of these other more humane alternatives ? Yes we would. So why don't we do it ?

Could there be the politics of power and influence playing out behind the scenes, far from the public eye ? Could there be self-interest maintaining the status quo ?

Why, when a Toronto Star reporter asks the Ministry of Health for a copy of its utilization report for nursing homes -- a report that would show how much of public money is going down the drain funding nursing home beds that are not needed -- why can't he get it ?

How did tax exemptions get extended to for-profit nursing homes ? Was that a Cabinet decision, or a deal worked out behind closed doors ?

Why are there too many nursing home beds and too few in-home services ?

Why are community support services always told there is no money, but there is plenty of money to put people in institutions that already have too many beds ? What is the human cost of these policies ?

Imagine being removed from your traditional support systems in your families and communities and being forced to live with strangers in institutions, having to deal with unfamiliar faces, unfamiliar food, unfamiliar routines, and often tragically, abuse and neglect. Then imagine this happening to you in your twilight years when, more than any other time in your life, you deserve care and compassion because you are so vulnerable.

Why does Ontario have one of the highest rates of institutionalization in the world ? Why do we violate the human rights of vulnerable people by forcing them to live in institutions against their will ?

I'll tell you why.

Because until very recently older adults and people with disabilities have not been considered to be a powerful interest group, but private nursing home corporations and their supporters have been.

Older adults and people with disabilities tend not to spend a lot of time banging on the doors of powerful politicians, donating to their campaigns, and threatening them with litigation if they do not do what they want them to do.

That's because they are having enough trouble trying to manage day-to-day as victims of bad health policies. And many don't think they have a chance against powerful vested health interests.

Maybe it is time to change that.

Power, and how it is wielded by the medical-industrial complex is one of the greatest threats to Medicare in this country today. Tommy Douglas knew it and we know it.

The demons of self-interest are also a major threat to our health care system -- the turf wars that go on in health care at the expense of us all.

Instead of providing attendant care to older adults to help them with cooking, laundry, bathing, dressing and other activities of daily living, we insist that older adults must have biomedical services. In fact, almost all of our responses to aging have a biomedical flavor. Policy makers are not getting it. Age is not a disease !

What does all this mean for each of us in the event that we become disabled as we age ? Well, it means our condition is likely to be seen as medical and requiring medical interventions rather than as a natural process that requires things like everyday assistance.

Which costs more ? Which makes more sense for us as we age ?

Turf wars, fueled by self-interest, are another of the biggest threats to Medicare today.

Instead of working cooperatively to ensure the best possible care, many health and human services professionals are at war with each other over turf. Their patients and clients are the casualties of that war.

Finally, greed is a major threat to Medicare. Can we honestly say that every person who has a six figure salary in our health care system today deserves to have a six figure salary ?

Many people complete 6 to 10 years of post-secondary education, but not every professional demands a six figure salary to provide a service to society.

The question is why are those working in health care so prone to demanding huge salaries rather than demanding reasonable salaries and feeling some degree of satisfaction in easing the suffering of others ?

Why is money so often the first concern and patient care the last concern ? Why will some doctors get a 35% pay hike over the next few years as an incentive to simply do the right thing ?

Why is it that those who administer our hospitals are allowed to earn so much more than the nurses who work the front lines every day ?

How are these things calculated, and by whom ? How much profit is enough ? Should there even be profit made in health care ?

If all of us do not soon begin to ask some incisive questions of our politicians and health care providers about these things, then we will continue to have the health care system we deserve. In a democracy, the responsibility falls upon each one of us to ensure that our democracy works, and that government is providing appropriately for the people who have paid taxes into it for a lifetime.

Make no mistake, greed at the expense of the public, is also one of the greatest threats to Medicare in this country today.

The last biggest enemy of Medicare is the apathy of the citizens who simply feel that others will take care of things for them. They outsource responsibility for their own health to their politicians, their health care providers, and the advocates who are trying to make things better. It takes all of us to make a change, not just a few.

It is the apathy of all of us that allows politicians to ignore pleas for help from the families of older adults abused and neglected in institutions, those abandoned without appropriate support in their communities, or people deprived of their regular caregivers because of unfair request for proposal processes and lost home care contracts.

It is our silence that leads health bureaucrats in this province to believe that they have the right to dictate to citizens what they will and will not get, as opposed to understanding that true public service demands that they listen to the public and respond accordingly with policies that protect the public rather than the interests of the powerful few.

The arrogance of politicians and bureaucrats in decision-making positions, and their belief that the will of the people does not matter, is another threat to Medicare in this province and in this country. Tommy Douglas also called that in the 1950's, and it is equally true today.

So -- what will you do should you become ill or infirm ?

Don't wait until you become ill or infirm. Sit down now with your family members and friends and write out a power of attorney for personal care. Go and visit your MPP and find out now how to make the health care system work for you. And if it is not working to your benefit -- then speak up, and encourage others to do as well. Join an organization like the Alliance of Seniors. Don't wait until you are too vulnerable to do so.

Where will you live and who will look after you ? Unless you specify otherwise, you could end up living in an institution because there isn't much else to help you at home.

If you don't like that thought -- get to your elected officials, and challenge them to represent you in calling for a fully funded, non-profit home care system where every penny the government pays out goes into providing care for you.

Tell the Government you want a moratorium on creating any more institutions until home care and non-profit community services -- in-home and residential -- are at a par in funding with the institutional sector.

Tell them you want rent geared to income housing with attendant care support. And tell them that you won't go away until you get it.

Right now, you can't properly plan for your future health and assisted living needs without facing the grim possibility of nursing home placement. We simply do not have much between home care and a nursing home.

We need small residences in the community with 24 hour staffing, and hospices to help people who need palliative care.

We need to tell our government officials that it is not their call about whether or not they want for-profit provision of health care. It is our call. There is not a single longitudinal study that shows that for-profit is better, or even cheaper. There is no excuse for our politicians to choose an option that allows providers to remove 10% to 20% of precious health care dollars in profit.

This is a public policy issue, not an ideological issue. We are paying for it, and we have a right to demand better for our tax money.

Tommy Douglas urged us to remain steadfast and to keep pressuring for the health care system we want. He also said that he did not want to become a monument on Parliament Hill because he saw what the pigeons did to those.

Perhaps though, he can remain for us, a symbol of all that is good about this country, and a beacon that lights our way and helps us raise our voices in unison to build a better society as a new generation embraces his remarkable vision.

Thank you.

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