

COMMENT

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A national pharmacare program would be affordable because Canada would save \$4 billion a year through common drug purchasing, writes a member of Parliament. TERESA CRAWFORD, THE ASSOCIATED PRESS

National pharmacare is affordable

Re: “Canada inches toward national pharmacare,” editorial, March 15.

I am concerned that your readers might have been left with the impression that universal pharmacare is unaffordable. This is incorrect and — with thousands of Canadians becoming sicker and dying without timely access to medicine — dangerously so.

At the House of Commons health committee’s request, the Parliamentary Budget Officer conducted an independent review of the cost of folding pharmaceuticals into our medicare system. He used cautious assumptions and used Quebec’s formulary (the widest in Canada) as a basis.

Using 2016 as a base year, he calculated that comprehensive coverage in a public system would save Canadians at least \$4.2 billion that year and every year thereafter. More importantly, these savings would be spread over every stakeholder group, including patients, the private sector and all levels of government.

The PBO calculated that as a nation in 2016 we spent \$24.6 billion on pharmaceuticals that would be eligible for pharmacare coverage. This was paid for by the provinces (\$11.4 billion), the private sector (\$9 billion), patients (\$3.6 billion) and the federal government (\$650 million).

With pharmacare, we would have needed to spend only \$20.4 billion. That would be funded by keeping the governments at their current contributions (\$12 billion), and leaving the private sector to spend \$8.4 billion. So, universal, comprehensive and public pharmacare wouldn’t cost the federal or provincial governments a nickel in extra spending, the private sector would pay less and patients’ out-of-pocket costs would be eliminated entirely.

*Don Davies, MP
NDP critic for health*

Column is one-sided and meaningless

Re: “How foreign groups influence our vote,” column, March 24.

As usual, Gwyn Morgan writes a compelling opinion piece that is so one-sided that it becomes meaningless. It would have taken only two pieces of information to provide some balance.

First, who is financing Vivian Krause? A quick scan of online information suggests that she started out “self-financed” but has since made a substantial part of her income from speaking fees from the oil industry and various industry and right-wing groups (build it and they will come).

Second, and more important, presuming that all her research is accurate, how do the funds provided by environmental groups compare with the millions provided by the oil industry for political contributions and lobbying efforts?

A little balance would go a long way. As a bonus, just for fun, Morgan should try to get through a column without trashing the Trudeau government.

*Doug Row
North Saanich*

U.S. environmentalists are helping Canada

Re: “How foreign groups influence our vote,” column, March 24.

Thanks to Gwyn Morgan for bringing to our attention that environmentalists in the United States contribute money to help us fight our environmental problems. For some reason he seems to think that is not a good idea.

There are precedents for such a thing: U.S. corporations such as Exxon and Kinder Morgan invest money in Canada to exploit our resources in order to make a profit for their shareholders, most of whom, I suspect, are Americans. These American corporations and others have paid lobbyists who try to influence our governments to favour their activities.

Morgan will say that these companies are creating good jobs for Canadian workers and, of course, he is right, they do. However, that is not their goal. Their goal is to make a profit. They will create jobs as long as they do not have a machine or robot or software to eliminate them.

At least the U.S. environmentalists are helping us to achieve the goals that our federal government has promised the world we will reach.

Before we criticize Prime Minister Justin Trudeau’s cabinet selections as being too pro-environment, let’s review the cabinet choices of the Mulroney and Harper governments to see if there might have been a pro-corporation bias. If Vivian Krause is a “real Canadian patriot,” she should now turn her excellent research skills to finding out how much American money is promoting resource

exploitation in Canada and how much pollution it is creating.

*Errol Miller
Victoria*

Only Canadians should decide

Re: “How foreign groups influence our vote,” column, March 24.

This is a well-written, informative commentary. It should be required reading for every Canadian. I am not sure why the accompanying picture of a tailings pond was placed above Gwyn Morgan’s piece, though. Was it meant to counter his message?

Many school teachers would especially benefit from reading the article, as well. Canadians need to know that foreigners are purposely influencing who Canadians elect as leaders. And the foreign influence often is not for the benefit of Canada or Canadians.

The foreign influence, by way of funding certain groups in Canada, should be completely curtailed. It should be up to Canadians, and only Canadians, to decide who we elect to run our governments.

*Bill Wilson
Saanichton*

Concerns of 99% not helped by budget

Re: “Middle incomes get little help from budget,” editorial, March 22.

As outlined in the editorial, the recent federal budget offers little support for most Canadians who see the economy heading in the wrong direction and fear the consequences. For the past 35 years, Canada has been become vastly wealthier, for the top one per cent. Meanwhile, the rest of us have concerns over housing costs, wage levels and the lack of good full-time jobs for new graduates.

A forward-looking budget would have recognized that this trend is not good for our economy, our democracy or our social fabric. An appropriate fix would have included a revenue-neutral carbon tax, a guaranteed annual income and, for the one per cent, an inheritance tax and an income tax that approaches the 70 per cent rate they were paying between 1948 and 1980.

*Ken Roueche
Victoria*

EDITORIAL Home support is a growing challenge

Beacon Community Services is transferring all of its home-support program to Island Health. The move will affect 850 staff, each of whom has been guaranteed that jobs and salary scales will be preserved.

Home support is intended to help elderly or infirm clients retain their independence, by providing various forms of personal assistance such as help with dressing, bathing and other daily activities.

However, there have been difficulties recruiting and retaining staff due to the relatively low wages these workers earn, coupled with the high cost of housing in Greater Victoria.

As well, 70 per cent of Beacon’s home-support staff are employed on a casual basis, meaning many take a second job to make ends meet. While this is understandable, it creates scheduling difficulties, as many clients need support both early in the morning and late in the day.

Part of the intent behind the changeover is to offer more secure employment. However, the principal benefit is that home-support staff in the region will now work in close conjunction with other care providers, such as physiotherapists, pharmacists and social workers.

This team-based approach has been shown to be far superior to older models, where health professions tended to work in isolation. There is also the reality that modern care for the elderly has grown far more complex.

To help co-ordinate delivery, Island Health has set up 14 neighbourhood teams in the capital region. Family physicians are being given contact numbers through which they can guide team members to patients they know need help.

That’s important, because in the past, identification of people requiring assistance was often a major obstacle. GPs might see that one of their patients needed home support, but had no easy way of making the necessary contacts.

And that led to a further problem. Some patients were being admitted to hospital who could have remained in their homes had more co-ordinated assistance been available.

It’s believed 10 per cent or more of hospital beds are occupied by patients who do not require acute care, but who do need some form of help.

That problem is not confined to Victoria. It is a serious concern elsewhere in B.C. and across Canada, particularly in high-demand periods such as flu season.

However, matters are made worse because hospitals in the capital region regularly operate at more than full capacity. Moreover, there are insufficient long-term care facilities to offer an alternative. By far the best solution is to transfer patients back home with the support services they need.

Elin Bjarnason, Island Health’s vice-president for clinical service delivery, made clear these difficulties were no fault of Beacon’s: “Island Health has been partners with Beacon Community Services for 15 years, and they have served the community well.”

But as the population ages, “there is a growing need for better integration between community health workers and the rest of the community care team. That requires us to take a different approach to care delivery than we have in the past.”

Let us hope this transfer will result in more co-ordinated and reliable care that will benefit both clients and the already thinly stretched hospital system.

It’s a regrettable fact that many of us will need some form of support as old age approaches. In times gone by, our health-care system was primarily geared toward a younger population.

But those days are rapidly coming to an end. In 1970, only seven per cent of Canadians were 65 or older. That figure has already doubled, and by 2030, nearly one in five of us will be seniors.

Providing home support in a humane and organized manner is perhaps the biggest challenge we will face in the years ahead.

When I walk to work at Our Place, I feel empathy, not fear

DON EVANS

A stranger asked me recently if I ever felt afraid when I walked down Pandora Avenue to my workplace, which just happens to be Our Place, an inner-city refuge for people experiencing homelessness, poverty, addiction and mental-health issues.

Naturally, my answer was “no,” but that got me to thinking of why. Why don’t I feel afraid? Certainly, there can be scary situations that happen outside Our Place. The nature of the people we serve means that we are challenged on a daily basis.

There is no sugar-coating the fact that when people are smoking or injecting illicit drugs, their behaviour can be erratic. There is also no easy fix for some of the people dealing with severe mental-health issues who are practically abandoned on our doorstep. So why don’t I feel afraid?



Don Evans, right, with Poncho at Our Place. OUR PLACE SOCIETY

The answer is complex, but in working with this challenging population, I don’t feel aggression flowing from them, instead I feel their fear. For so many vulnerable people, their lives are filled with fear, anxiety and hopelessness. I can honestly say that I haven’t met anyone who lives on the street who hasn’t suffered severe abuse in their lives.

That abuse can take many forms: mental, physical, emotional

and sexual. It can also strike at any time from pre-natal to adulthood. Few escape it, and the damage it causes is immeasurable.

At Our Place, we build trust with the family members (our name and culture for those who access our services), and in building that trust we hear far too many stories that leave claw marks on our hearts.

If we could end addiction today, we would.

If we could prevent all forms of abuse, we would do that, too.

But we can’t. We can try. Definitely. But the reality is that addiction, abuse and the mental-health issues they cause are here to stay until miracles become more commonplace. And, yes, we pray for miracles, too.

So when I walk to work, it’s not fear that I feel, but empathy. The man smoking drugs on the boulevard is there because it’s one of the only places he feels safe and accepted. If he gets in trouble and the fentanyl-laced opioids stop his lungs from working, there is a chance someone will be there to save his life. If he’s cold, hungry or thirsty, he knows Our Place will welcome him inside.

And this is one of the upsides. By being here, by opening our doors and welcoming people inside, we can then help them address their addiction. When people hide in the shadows, they face addiction alone. But when

they come into the light, we can help them find a healing path.

It’s not perfect, we know that. But we also know that most of the people we see have been chased away, shut out, ignored, abandoned and treated with contempt by so many others.

If we do the same, where can people go? There isn’t enough affordable housing for everyone, yet we know that stable housing, even temporary housing, is the first step — especially when it includes supports. Almost no one can escape their addiction if they don’t have a safe place to lay their head at night.

So rather than fear, I feel so thankful that a sanctuary such as Our Place exists in our community.

Nobody, regardless of their current state, should be walking this path alone.

Don Evans is the CEO of the Our Place Society.