

BULLETIN

Privatization: who pays the price?

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October 22, I participated in the Premier's Dialogue on Health. The one-day forum brought together a number of representatives in the health care field for a dialogue with the provincial government.

The vast majority of the Liberal caucus and cabinet were in attendance, including the Premier and the two Ministers of Health.

The majority of participants focussed on privatization. With "experts" from the Fraser Institute and private, for-profit health facilities presenting, the Liberal caucus heard from speaker after speaker that the involvement of private interests in public health care should be a priority for sustaining British Columbia's public health care system.

The Dialogue was a dialogue on privatization, and the few contrary voices in the forum were not made to feel welcome.

As a presenter on the topic of "Barriers to Change," I took the opportunity to focus on the breakdown of trust by those who work in the system as a serious obstacle to improving the system.

This was the first time since the health science professional contract was imposed on the Paramedical Professional Bargaining Association in the summer that HSA had an opportunity to speak up to the majority of the caucus in a public forum about what that means for the health care system.

I told the forum that Health Minister Colin Hansen had been right when early on in our dispute he said he was worried about the decline in morale amongst health care workers.

Over the past decade our health system has been royal commissioned, regionalized, downsized, shifted to the community and program-managed. Health providers have experienced lay-offs, early retirement, re-training and transfers and a complete and thorough disruption of their bargaining structures.

We watched initiatives like the closure of the medical lab tech program at BCIT in anticipation of a glut of technologists, only to be facing shortages and having to discuss recruitment and retention issues less than four years later.

Health regions have spent millions of dollars on consultants. That resulted in major restructuring and lay-offs that in the end cost the system more than the promised savings.

We've watched diagnostic labs go through the upheaval of restructuring to core labs, only to see that work begin to be undone. And to oversee all of these initiatives, we've witnessed an explosion in administrative positions — often from inside the existing staff, and when they leave their direct patient care jobs, there's not a guarantee a new direct care provider will be available to take their place.

I wasn't invited to the forum to bring solutions because the government has already set the course. This forum was held after the introduction of a massive tax cut. It was held after the announcement of a three-year freeze on health care spending. It was after the announcement that eye exams and a number of drugs would be de-listed from MSP and Pharmacare coverage.

This forum was designed to give the Liberal government the appearance of engaging in debate while drawing some comfort that they are supported in an ideological overhaul of the public health care system that will see private, for-profit providers play a role in our health care system.

The challenge for us is to find a way to have our voices heard, and ensure that the people who pay the price of privatization are not the patients and the workers who don't have a voice at the table.

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