



**The fight for funding
of home care services
in Point St.Charles:**

**Where do we stand
one year later?**

David Levine* meets with the Point St-Charles Community Clinic

*President and Executive Director of the Montreal Regional Health and Social Services Board

On March 24, 2003, the Point St-Charles Community Clinic had an important visitor: Mr. David Levine, President and Executive Director of the Montreal Regional Health and Social Services Board.

The goals of the meeting were as follows:

to demonstrate the consequences of under-funding of home care services in Point St. Charles;

to obtain a commitment whereby the greater needs of less prosperous neighbourhoods would be taken into account in the budgets allocated to Montreal's CLSCs;

to have the importance of our Clinic's autonomy acknowledged, it being run by the citizens.

Close to 20 people were present: members of the General Coordinator's office, the Board of Directors and the Clinic's Comité de lutte.

After presenting the Clinic's project, we outlined the characteristics of the neighbourhood population: low incomes, single-parent families, many people who need home care services, life expectancy lower than elsewhere, high rate of diabetes, etc.

Then we laid out the Clinic's financial situation. Since the shift towards ambulatory care began in 1995, the demand for home care services has tripled, but budgets have not matched this increase—and this has led to deficits. We explained what we did to overcome the deficits: we cut back home care services and limited spending in all other services the Clinic provides.

Neighbourhood resident Danièle Rohrbach explained the situation well by speaking about her own experience. Like many other people, she has been taking care of her mother at home for many years, and does not receive all the help she needs.

We asked Mr. Levine to allocate budgets according to real need in less prosperous areas of the city and to demand from the Government of Québec a larger budget for Montreal, which is home to more people with low incomes.

The first thing Mr. Levine had to say was that he was very pleased to visit a clinic that was well run!

He went on to assert that to improve the population's general state of health, the emphasis had to be put on prevention and on investing where need was greatest, and therefore larger sums should go to Point St. Charles than to Pointe-Claire. He undertook to consider the factor of poverty in the regional distribution of budgets. He said he agreed with Mrs. Rohrbach that the government was saving money on the backs of family caregivers and that ways had to be found to help them. He added that he expected the government to come up with the amounts needed for home care services soon.

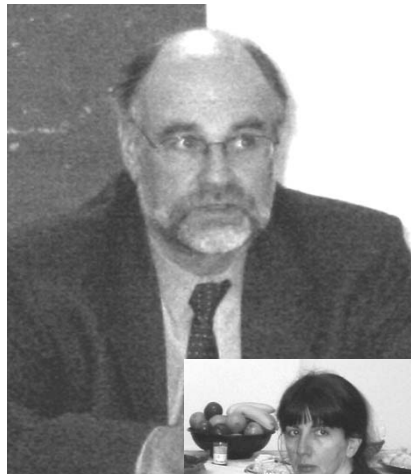
Mr. Levine's opinion was that Montreal had not received its fair share of the provincial budgets. "The government doesn't take into account as much as it should factors such as underprivileged environments, present in big cities such as Montreal," he commented.

In closing, he recognized the importance of the Clinic's independence, going so far as to say, "The Clinic's action should remain in its citizens' hands. You know your

neighbourhood better than anybody."

On assessing this first meeting, the participants felt its objectives had been met. Everyone agreed, however, that now action has to match the words.

In the meantime, we can proudly say: Mission accomplished!



Top: David Levine. Above: Suzanne Bellot, Jenny Calaghan et Anna Kruzynski toutes all members of the Clinic's comité de lutte.

Months of mobilization begin to bear fruit!

Since the news we reported to you in November 2002, many actions have been staged in our fight for the public funding of home health care services.

- December 4, 2002: **Press conference together with the Coalition Solidarité Santé.** Some 50 people paid a visit to the Protectrice des usager-ère-s en matière de santé: they presented a collective complaint about the lack of home care services and delivered 800 letters of support from all over the province.

- December 2002 and January 2003: **Over 200 letters were sent to the Minister of Health** asking him to invest immediately in home care services and to cover the Clinic's loss of revenue of \$340,000 in home care services.

- February 18: **Press conference** with the trade unions of Montreal CLSCs and community umbrella groups of seniors and family caregivers to highlight the needs not being covered in Montreal home care services.

- February 20: Following the new budgets obtained from Ottawa, the Minister of Health announced he would invest \$130 million in home care services.

- End of February: Start of a **visibility campaign** in the neighbourhood (small posters saying "Beware of drop in home care services" put up) and **signature of protest postcards** sent to Minister Legault. The campaign was carried out everywhere in the province.

- March 5: The Protectrice des usager-ère-s en matière de santé made public a first notice sent to the Minister: she also observed a major lack of home care services and recommended to the Minister that he invest at least \$300 million.

- March 10: **Press conference together with the Coalition Solidarité Santé** to denounce the all-too-small amounts announced by Minister Legault along with his new home care policy, which throws open the door to privatization.



On September 19, 2002, we welcomed the new President and Executive Director of the Regional Board, David Levine, with a boisterous demonstration outside the windows of his Board of Directors meeting. Seven months later, it was Mr. Levine's turn to come and meet with the Clinic's Board of Directors.

- March 24: On our invitation, **David Levine**, President and Executive Director of the Montreal Regional Health and Social Services Board, **came to meet with us at the Clinic** (see the article in this issue).

- March-April 2003: During the election campaign, **the Clinic and neighbourhood groups organized four lunchtime meetings with the riding's candidates** to ask them to:

- oppose all health privatization schemes;
- reinvest \$300 million in public home care services;
- defend the neighbourhood's need for home care services.

February 2003: Following the new budgets obtained from Ottawa, the Minister of Health announced he would invest \$130 million in home care services

The citizens of Point St. Charles have been very involved in these actions since last year. This popular mobilization at the local, regional and national levels has started to bear fruit. The reinvestment in health care is a direct result of a trend in public opinion that is increasingly responsive to our demands. The amounts are certainly not enough yet, and we will continue our fight for full funding of home care services—the new government can be sure of that!

In the meantime, however, we can congratulate ourselves for the road we have travelled so far, since we're headed in the right direction!

Announcements of investissements in health: How to make sense of it all?



“The health care system in Québec urgently needs \$1.8 billion!” (François Legault, Québec Minister of Health, November 2002)

“Ottawa will pay only \$12 billion of the \$15.3 billion it should have paid to the provinces according to the Romanow Commission’s report.”

“This means Québec will receive \$850 million instead of the \$1.8 billion it should have received.” (Bernard Landry, February 2003)



We don’t know yet what the impact on the Clinic’s budget will be, but it is obvious that we won’t get anywhere near the \$340,000 we asked for to cover our deficit in home care services.

Still we have to realize that these announcements represent clear progress over last year, when the Québec government was actually denying there was a problem in financing home care services.

We can be proud of these gains, but the fight isn’t over yet!

For the past few months, any talk of health produces a whirlwind of figures: tens and hundreds of millions of dollars, at the federal and provincial levels, in Montreal.... Did we get what we wanted? Let’s try to sift through the information for the answer.

First of all, we should bear in mind that Quebec is the Canadian province that spends the least on home care services. To catch up to the rest of the provinces, the government would have to invest \$300 million immediately.

At the federal-provincial meeting held on February 4 and 5, Ottawa accepted to increase health spending for the provinces. It did not put out all the money needed, however. For Québec it means \$820 million more a year, that is, around half the sum needed according to the Ministry of Health.

In the days that followed, the Minister announced new budgets for different areas of health care, including \$130 million for home care:

- \$10 million will be used to assist people caring for family members at home;
- \$120 million for CLSCs, but these must provide more palliative care at home (that is, assist people wishing to end their days at home).

**The Point St-Charles
Community Clinic**
*is improving its walk-in
medical services!*

**Do you live in
Point-St-Charles?**

**Do you want to see a doctor
quickly but you don't
have an appointment?**

**Call
(514)937-9251**

*and we will inform you when
you can come to the Clinic
to consult with a doctor!*