



ASSOCIATION CATHOLIQUES
CANADIENNE DE LA SANTÉ

CATHOLIC HEALTH
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NEWS RELEASE

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CHAC Calls on Federal Government to Act on Key Health Issues

Reproductive Technologies Legislation, Health Protection Branch, Private Financing and Canada's Health Care System

Ottawa - At the annual convention of the Catholic Health Association of Canada (CHAC), held in Saskatoon, SK, May 15-17, participants of the Annual Assembly approved several resolutions calling on the federal government to act on three key health issues - human reproductive and genetic technologies legislation, the future of the Health Protection Branch, and the debate about increasing private financing within Canada's health care system.

"These resolutions represent an affirmation of the fundamental principles that gave rise to our health system, and a desire to protect such core values as human dignity, respect for life and protection for the vulnerable," said Mary Pat Skene, CHAC chairperson. The three issues identified are ones that the CHAC has been monitoring for some time.

Issue 1 - Human Reproductive and Genetic Technologies Legislation

More than five years have passed since the Royal Commission on New Reproductive Technologies issued its report to government. The Commission strongly recommended putting up legal limits on the use of certain reproductive and genetic technologies, and the setting up of a licensing and regulatory body to manage the use of these technologies. The CHAC strongly supported Bill C-47, which the federal government introduced in 1996. However, this legislation, which would have prohibited 13 procedures and prepared for the establishment of a regulatory body, died on the order paper with the call of the federal election in May 1997. The CHAC has written to the Minister of Health on several occasions urging government to reintroduce similar legislation. On May 11, 1999 several Canadian newspapers reported that the federal government is preparing to introduce such legislation in the Fall of 1999.

Resolutions:

- 1.1 That the CHAC urge the Prime Minister of Canada and the Minister of Health to act on their recent commitment to introduce legislation in the Fall of 1999 to regulate genetic research and reproductive technologies;
- 1.2 That the CHAC recommend to government that such legislation prohibit reproductive and genetic technologies that threaten such core values as human dignity, respect for life, the non-commercialization of reproduction and protection of the

vulnerable (including the 13 procedures outlined in Bill C-47);

1.3 That the CHAC recommend that consideration of values and ethics be an essential component of the work of the regulatory agency that is to be established to manage the use of these technologies;

1.4 That the CHAC encourage its members to approach their local MPs with the same concerns.

Issue 2 - Health Protection Branch

The Health Protection Branch (HPB) of Health Canada is responsible for guarding public health against risks to health and the spreading of diseases. Since 1997 the federal government has made important changes to HPB, including closing labs, cutting the entire Bureau of Drug Research, and cutting food safety research from \$63.1 million in 1992-94 to \$32.8 million in 1997-98. Scientists have left the Branch in protest against what they see as increased corporate influence over the testing process.

As a result of strong public reaction against the cuts, the government initiated the HPB Transition Project in August 1997. In the Fall of 1998, as part of the Transition Project, Health Canada initiated a consultation process to hear the views of Canadians about HPB. The results of the consultation show Canadians are concerned:

- that HPB has lost the trust of the public;
- that the Branch is being dismantled through closures and budget cuts when its role in standard setting and enforcement should be supported and strengthened;
- that cost recovery efforts have created confusion about whose interests HPB is intended to serve.

Resolutions:

2.1 That the CHAC express its concern to the Prime Minister and the Minister of Health about changes made to the HPB; and that the CHAC advocate for sufficient funding to ensure public safety, independence for the HPB, and more transparency and accountability in the working of the Branch;

2.2 That the CHAC encourage its members to approach their MPs with the same concerns.

Issue 3 - Private Financing and Canada's Publicly Funded Health System

In 1997, in a position paper titled *Prescription for a Healthier Canada*, the CHAC emphasized the need to maintain a publicly funded model of health care. The paper states that health care is a social good belonging to all citizens, and that universal access to medically necessary services, regardless of the ability to pay, must remain a defining feature of Canada's health system. While acknowledging that private financing and the for-profit sector have always had a place within the overall health system, the Association is concerned about the efforts of various organizations that are calling for more private financing and a greater role for the for-profit sector in the provision of medically necessary services.

The increase in the private share of total health spending is also troubling. Between 1975 and 1994 the private share of total health spending increased from 23.6 per cent to 28.2 per cent. The CHAC is also concerned that the push to privatize health care funding will inevitably make the sick and poor worse off while improving the lot of the wealthy, and those who wish to sell

health services.

Resolutions:

3.1 That the CHAC reaffirm its commitment to the principle of public administration of the health care system as stated in the *Canada Health Act*;

3.2 That the CHAC express its concern to the Minister of Health about the increased threats of privatization of Canada's publicly funded health care system;

3.3 That the CHAC encourage its members to approach their local MPs with the same concerns.

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