

I submit this brief on behalf of a project I started this year called “Faces of Pharmacare.” Quite simply, it offers a growing number of stories from actual Canadians about how not having public pharmacare has compromised their lives. This project is not funded by industry or government so it is an honest view of what is really going on with chronically ill Canadians. It is not subverted by corporate agendas or by groups who roll-over and acquiesce to sanitized consensus processes.

I am one of the estimated 3,000,000 Canadians living with asthma every single day. I am also one of the estimated 3,000,000 Canadians who either cannot get drug insurance or who have precarious or insufficient coverage.

On their own, these are seemingly innocuous societal issues. To many healthy Canadians, asthma is just an unfortunate part of the human condition. And poor access to medication is just the way it’s been for 51 years, so why rock the boat.

But when these matters intersect, it courts disaster.

Those unfortunately finding themselves in this situation have only two real choices: (1) pay some or even all their treatment directly out-of-pocket, or (2) go without proper treatment.

Both are intensely inequitable, unambiguously un-Canadian and both have a huge negative impact on the economy.

The chronically ill who elect to pay for medications no matter the cost are less able to fully take part in our economy. They have less disposable income to spend in Canada as they – in effect – pay a regressive sick tax for the pleasure of having a chronic illness. If someone who needs sustained drug treatment is lucky enough to have group benefits, they have decreased mobility as they face the possibility of losing coverage if they switch jobs or career.

It goes without saying that those who cannot sustain maintenance drug therapy are unlikely to contribute as much to the economy and are likely use more expensive (but covered) health resources to manage their illness.

We have created a system that is structured to keep the chronically ill sick and drug costs up.

This is simply unacceptable **AND** mindboggling inefficient.

Federal and Provincial governments have made clear that, on one hand, they wholly embrace innovation and entrepreneurship, yet we are told by the Federal Minister of Finance that we should get used to the coming “new” economy.

It seems to me that part of the ministry is not talking to the other.

If this new economy means fewer traditional jobs, it also means fewer traditional jobs with benefits. If there are fewer jobs that offer benefits, then more chronically ill will be unable to join group plans that cover pre-existing conditions. More people will have to choose between food and medications.

This is not an improvement. But there is a bright light.

One that has broad support from business, the majority of Canadians, patients, academics and health care workers. It will create an even playing field across the country irrespective of job, health or cultural background. Its only detractors seem to be the insurance (who do have the most to lose) and pharmaceutical industries and organizations supported by them.

They rely on opaque industry-funded analysis designed to make their case for maintenance of the status quo or worse. This, despite peer-reviewed evidence supporting public pharmacare in Canada and offering conservative estimates of 8 billion dollars in saving PER YEAR.

I can tell you that as one of the millions of Canadians who struggles daily with the health care system, that neither the status quo nor more incrementalism will suffice. Private insurance will never be the solution. One only need look south to the US to understand this quite clearly. They will not cover those with pre-existing conditions outside of group plans, nor will they keep the interests of Canadians upmost in their minds.

The only solution to the current Rube Goldberg machine we call our drug system is first-dollar full coverage of effective drugs for ALL Canadians.

Thank you for taking the time to consider the thoughts of Canadians who live a very different reality for what is commonly believed.

I would be pleased to offer more information or put you in contact with others who are in the same position.

facesofpharmacare.ca