SOCIALIZATION NOT THE ANSWER TO LONG-TERM CARE CRISIS

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As Canada continues to grapple with the second wave of COVID-19 infections and deaths, new questions are being asked about the role played by long-term care facilities (LTCs) in spreading the virus.

On Jan. 4, for example, the Ontario NDP called for the province's Progressive Conservative government to recall the legislature in order to address the LTC crisis. Earlier, on Nov. 19, 2020, federal NDP Leader Jagmeet Singh tweeted that, "Profit-driven care is dangerous & it costs lives."

That there is a crisis in long-term care in Canada is not in dispute. In Ontario, for example, a third of LTCs are currently experiencing COVID-19 outbreaks. According to the National Institute on Ageing at Ryerson University, in Ontario, 73 per cent of all COVID-related deaths are LTC residents; in Quebec, it is a staggering 80 per cent; nationwide, it is 73 per cent.

Is Singh correct that "profit-driven care" is to blame and, therefore, that moving to a fully socialized system would be the solution?

To answer this question, we need to compare how Canada is doing with other advanced countries where the percentage of people living in long-term care homes is similar, acknowledging that cross-country comparisons can be fraught.

In the United States, which has a private system, LTC residents account for 38 per cent of total COVID-19 deaths. In Germany, which has an insurance-based system, it is approximately 28 per cent. Meanwhile, in England, France and Australia, which

have hybrid systems similar to Canada's, the ratio is about 28 per cent, 30 per cent and 75 per cent, respectively.

Looking only at the first wave of the pandemic (that is, until about the end of May 2020), according to the Canadian Institute for Health Information, the percentage of total COVID-19 deaths accounted for by LTC residents was: 81 per cent for Canada; 31 per cent for the U.S.; 28 per cent for the United Kingdom; 34 per cent in Germany; 48 per cent in France; and 28 per cent in Australia. The OECD average was 38 per cent.

What is striking is how poorly Canada is doing as compared to other developed countries, especially in the first wave, but even now. These countries offer a range of models for regulating LTCs, which, if anything, points to the opposite of what Singh inferred.

America's private system is doing much better than Canada's hybrid system. Even more striking is Germany, which is doing better than both Canada and the U.S., but in which publicly provided care is a tiny fraction of the total.

Only one per cent of in-home care in Germany is publicly funded and only five per cent of care provided by LTC homes is public, according to research from the U.K.-based Nuffield Trust. In Germany, where insurance is used to purchase care either at home or in public or private institutions, Germans have clearly opted for a largely private model, and the mortality outcomes are much lower than in Canada's hybrid model.

When one compares Canada to other countries, only an ideologue could conclude that nationalizing long-term care would be a magic bullet that will cure all ills. There is no doubt that the long-term care sector in Canada is in shambles and has proven itself woefully ill-prepared for the pandemic.

But going forward, as Canadians search for solutions, the right answer would point toward increasing the choices available for those in need of long-term care, rather than shoehorning them into a decrepit and poorly functioning system that offers very few choices and long wait lists. Full socialization would eliminate choice altogether.

The tragic failure of Canada's long-term care system affects far more than those who are trapped in it. Renewed lockdowns in major provinces such as Ontario and Quebec are driven by increasing infections, mortality and dwindling ICU capacity. When more than seven out of every 10 COVID-19 deaths occurs in an LTC home, it is clear that health policy is being driven by our failure to contain the spread of the virus in LTCs.

As of Saturday, Quebec enters Canada's harshest-ever lockdown, with curfews and the closing of all but the most essential businesses. This, in a province in which 80 per cent of COVID-19 deaths occur in LTCs.

Considering that only a little more than one per cent of Canada's population lives in LTCs, this situation seems bizarre. In effect, all Canadians are paying the price for this country's failure to provide humane care for its elderly population. In Ontario, Premier Doug Ford stated on January 8, that "we are putting an iron ring" around LTC homes. It is high time.

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