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All pain, no gain Federal politicians are carefully avoiding a discussion of health care

By CHRISTINA SPENCER

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June 2004. Prime Minister Paul Martin vows to "fix health care for a generation." After negotiating with the premiers, he agrees to pump \$41 billion into the public health system over a decade.

Winter 2008. Prime Minister Stephen Harper invites the premiers to dinner.

Jobs, trade barriers, fast trains to Windsor from Quebec City -- all warrant lively debate. Health care? Not on the menu.

It's been the pattern for months. Health care wasn't among the five priorities in the last throne speech. The federal Liberals, now under Stephane Dion, held a recent three-day strategy meeting in which they breathed barely a word about health care. Candidates in Ontario's autumn election mostly skirted the topic.

Health care has become the public policy albatross that dares not squawk its name.

Does the silence indicate policymakers think it has been "fixed," as Martin hoped? Hardly.

SEVERE SHORTAGE

A study for the Canadian Medical Association concludes patients are waiting so long for treatment, it cost the economy almost \$15 billion last year. In parts of the country, the doctor shortage is so severe, municipalities are bidding against each other to attract medical graduates. Shortages of beds, nurses, diagnostic equipment -- all still plague most provinces.

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And although ordinary Canadians are concerned about the economy, the environment and Afghanistan, health consistently ranks as a top-tier issue in public opinion surveys.

"If you were playing hockey and picking the three stars, health care would always be one," says pollster Nik Nanos of Nanos Research.

Politicians don't normally ignore polls. So why are they dodging health care? Bluntly, says Arthur Sweetman, director of the school of policy studies at Queen's University in Kingston, it's because the file has become too complex. "Nobody knows what to do with it.

"My sense is that politicians have realized this is a hydra -- you chop off one head and there's another five heads that pop up."

"It's not as though they are ignoring this totally; there are initiatives," adds Dr. Calvin Gutkin, executive director of the College of Family Physicians of Canada. "But I think they have reached a point of frustration in terms of being confident they can actually fix the problem."

Gerard Kennedy, Liberal health critic for three years at Queen's Park in Toronto, thinks politicians have become battle-weary over debating health.

"People got tired over a period of years of different levels of government pointing fingers at each other."

Instead, policymakers are now waiting to see an impact from the billions promised in 2004.

There has been some positive trickle-down. Certain waiting lists have shortened, though others have bulged. More people are training as doctors. A new medical school opened in Thunder Bay, an "under-served" area of Ontario. Deploying emergency room physicians differently mitigated a serious ER crisis in Toronto hospitals.

"At lower levels, there is an awful lot of very good work being done," says Sweetman.

But other crises lie ahead, such as the desperate need to drag electronic record-keeping and health communications technology into the 21st century.

Kaaren Neufeld, president-elect of the Canadian Nurses Association, says information technology, while not exactly sexy, is an area where the federal government can help.

It might not want to, however. Constitutionally, health care is the responsibility of the provinces, and Harper prefers to stay out of provincial jurisdiction.

Further, there might not be much political payoff in Harper's party -- or any other -- being publicly engaged on health care, particularly in the run-up to a possible election.

That's because the political parties don't hold significantly different views from each other. Where once the Tories were thought to be more open to private care, they are now somewhat aligned with their opponents.

NO GAP

"When (political strategists) try to analyze politically what the differences are between and among the parties, they're not seeing enough of a gap" to make political gains, explains Gutkin.

If there's no contrast in approach, no party will attract or lose votes over health care. So why talk about it? It's hard to get quick sound bites out of something as complex as health care has become.

Dr. Carolyn Bennett, public health critic for the federal Liberals, says inside her party "the thing we are talking about is going back to the original goal of medicare: Keep

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people well, not just patch them up when they get sick. I hope over the next while, as Liberals, that we will be able to articulate the differences between health, that we want more of, and health care, that we'd rather not need if we had our druthers."

secrets

While politicians aren't necessarily discussing the connections, many health experts note that concern for the environment, which the public also feels strongly, is fundamentally about public health.

Says Bennett: "I think over this last little while, people understand they'd rather have clean air than more respirators."

Does it mean politicians will put health care back atop their agendas? They might have to.

"It's a bit of a public-policy time bomb," Nanos warns.

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