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## **A toonie for the public's health**

By Elinor Wilson and Maureen Law

Many business writers over the years have urged governments to operate a bit more like businesses. Given that today is Canada Health Day, let's take a moment to apply this logic to Canada's health "business".

Health Inc. is a problem in Canada. So far, nobody has been able to tame the cost centres. Customers don't have timely access to the services they need. The Human Resources situation is on the verge of a crisis with low morale, lots of people leaving and too few replacements entering the field.

According to the Canadian Institute for Health Information, in 2004, Canada spent about \$130 billion on health, or more than \$10,000 per Canadian household. However, only about 2.1 per cent of our health spending goes to public health. In other words, for every hundred dollars we spend on health in Canada, some pocket change – a toonie and a dime to be specific – goes into public health; for every hundred or so people working on the problem, a couple of lonely souls are working on the public health side.

What does this mean? It means there are a lot of resources committed to putting out fires, and a relatively small amount of investment to prevent fires. If we were a business, we'd be spending a lot of money on after-sales damage control and warranty work, but relatively little on reducing defects at the source. That means a lot of money treating illness that could have been prevented, as well as heavy losses from absent employees.

That's where public health can help. Public health looks at the patient before he or she becomes a patient. It is focused on health promotion, disease prevention, health protection, surveillance and population health assessment. It deals with the social, environmental and economic factors influencing health as well as on the communities and settings where people live, work, play and learn. Public health doesn't quite fit with the "just in time" trend in health care – the same one that has been a mixed blessing for many businesses. Public health is not about being just in time, it's about being prepared and acting quickly and early. Public health is everybody's business!

Because the public health system works to prevent problems before they come up, it is often invisible and receives little attention from governments until something goes wrong. And tragically, it is when something goes wrong – something like the Walkerton tragedy or the SARS outbreak – that public health finally gets the attention of the decision-makers and the public.

Here's an example that any business person could appreciate. Six out of 10 deaths in Canada are attributed to chronic illness. Chronic diseases take about four of every ten health dollars. So why is chronic illness such a threat? Well, one answer is that the majority of Canadians (65 per cent) have more than one risk factor for chronic disease. Unfortunately, while we spend an enormous amount of money treating chronic illness, we spend relatively little on education and public health programs that could prevent illness in the first place.

There's a growing recognition among health organizations that this needs to change. Many recognize the need to find pan-Canadian solutions that are supported by appropriate investments. The federal government has taken some excellent first steps – notably, the establishment of the Public Health Agency of Canada, the appointment of the Chief Public Health Officer and other initial investments. But more needs to be done.

- Just as businesses are functioning in a global economy, public health exists in a global environment where diseases know no borders. We need strong national leadership in public health so that we can mount a public health effort that is nationally integrated and internationally competitive.
- We need sustainable funding for public health at all levels – national, provincial/territorial and local. Right now we're like a company that is running on paper and pencil based systems because it can't afford electronic technology. If we don't invest today, we face much bigger problems in the future. It's a "pay me now or pay me later" situation. A toonie simply won't buy us the public health system we've come to need and expect.
- We need to urgently address the human resources question. What's required is a national strategy and appropriate training programs, including graduate programs in public health. We need to nurture a new generation of public health practitioners and equip them to deal with emerging issues such as genomics and cultural competency.

As any good business person knows, it costs a lot more to fix defective products than it does to prevent them. That's one of the fundamental principles of quality management.

In the case of health care, the product is human beings, which means we're not just talking about a huge economic burden, we're talking about needless suffering and compromised quality of life. Operating public health in a sound fashion doesn't just make good business and economic sense, it is also fundamental to the health and well-being of Canadians.

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