

Australian Labor Party's fraudulent cancer care pledge

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As part of his bogus “fair go” pitch to angry and disaffected voters in this week’s federal election, Labor Party leader Bill Shorten announced last month a \$2.3 billion funding boost over four years to cancer treatment.

In his reply to the Liberal-National Coalition government’s budget, Shorten feigned sympathy for cancer patients and their families and initially peddled the illusion that all treatments would become free.

In reality, Labor’s plan would still leave patients having to raise thousands of dollars for life-saving treatment. And it would do nothing to address the wider issues of fees, waiting lists and lack of services throughout the chronically-underfunded public hospital and health system.

The Labor Party has claimed that it would provide three million more annual medical specialist visits, subsidise additional medical treatments and MRI machines to diagnose cancer, and boost research grants. Even if implemented in full, however, the plan would not significantly reduce the exorbitant costs of cancer therapy and care.

Australia’s public health insurance program, Medicare, is comprised of a complex labyrinth of services funded by state and federal governments to varying degrees. While treatment at public hospitals and related facilities is covered, and medications are subsidised by the Pharmaceutical Benefits Scheme, many procedures and treatments are available only privately.

Funding cuts result in treatments being regularly removed from the subsidised list of Medicare benefits. Additionally, many medical specialists and general practitioners, responding to frozen or declining payments for their services, have abandoned Medicare’s program for free clinic visits, known as

“bulk-billing,” and instead charge patients directly, with limited part of the cost redeemable from Medicare.

Currently, only 31 percent of oncologists offer bulk-billed services. Although Labor has proposed to increase the figure to 80 percent by additional government payments, many cancer specialists are likely to increase their fees above the subsidised level.

Australian Medical Association (AMA) president Tony Bartone noted: “What we’ve seen in that announcement is a recognition that Medicare rebates are woefully inadequate and bear no resemblance to the cost of care.”

Currently, much of the medical imaging required for cancer diagnosis and treatment is controlled by the expensive private sector. Labor’s planned subsidy of \$600 million would not increase the number of imaging machines publicly controlled, but would act as a handout to private companies. The expected bonanza has seen an increase in the stock prices of major imaging companies such as Integral, Capitol Health and Healius.

Modern medicine, particularly for complex diseases like cancer, requires the collaboration of multiple medical specialties and other healthcare workers for diagnosis, treatment, and rehabilitation.

Additional services, such as dentistry, physiotherapy, rehabilitation and mental health, are either not covered publicly or to such a limited extent that only a small proportion of patients can benefit from them.

Cancer patients, even those going through the public system, are often forced to pay for non-subsidised treatments or “elective services” and other health programs that are essential to their survival or quality of life and dignity. Shorten’s proposals will not add an iota of public funding to any of these areas.

A study published in the *Medical Journal of Australia*

last year indicated that the typical patient with breast cancer would spend \$4,200 within two years of diagnosis, with similar figures for prostate, lung, colorectal, and melanoma cancers, collectively the most common in the country.

Costs over five years are greater still. A breast cancer patient can expect to spend nearly \$17,200 over this time. These figures do not account for lost income due to inability to work, or the effects on family members who must care for their loved ones.

Patients going through the private system, hoping to bypass the often long public wait-times for treatment, spend on average double the amounts above, with rarely any improvement in service. Furthermore, in a bid to boost their declining funding, many public hospitals have taken to charging the private health insurance funds of patients, often without their knowledge or consent.

This situation is not limited to cancer patients. A study published in the *Australian Journal of Public Health* in 2016 indicated that 40 percent of patients with chronic diseases, including mental health disorders, and 30 percent of those with chronic lung diseases, could not afford the medications they had been prescribed.

No one should believe that Labor will carry through with its promise of additional cancer care funding. The fact that this proposal was made before an election in which hostility to both Labor and the Coalition has seen their opinion polling sink to near-record lows indicates that this is a sop meant to palliate popular discontent.

Henry Cutler, a health economist at Macquarie University, pointed to the fraud. He told the *Sydney Morning Herald* that spending would have to be limited. "Once you reduce the price of a test to zero, that will increase the demand for testing," he said. Labor would be confronted with a need to provide additional funding, a situation that the corporate elite considers intolerable.

Shorten said the cancer care plan would be funded by "making multinationals pay their fair share and closing tax loopholes used by the top end of town." He did not explain how big business would be made to cough up. Since the Hawke government took office in 1983, successive governments have repeatedly slashed the taxes paid by corporations and the wealthiest layers of society.

Labor poses as the defender of Medicare, as it was the Whitlam Labor government that initially introduced the scheme, then called Medibank, in 1975, as a concession to demands by the working class for access to free, high quality healthcare. At the tail end of the post-World War II economic boom, the ruling class was still able to make limited social reforms to contain the opposition of workers.

Today, with Australian capitalism facing the collapse of the mining boom, an imploding property bubble and an intensifying US-China trade war, no concessions are possible. Even if the cancer plan were enacted, a Labor government would abandon its promises at the first sign of opposition from the corporations or a deterioration in the international economic situation.

Labor's defence of corporate profit interests makes impossible the provision of high quality and free healthcare to all patients, regardless of the disease or circumstances they confront. Only if a workers' government, acting on a socialist program, wrests control of the healthcare system from the pharmaceutical and insurance companies, private hospital corporations, and financial institutions, can the basic provision of healthcare truly be based on human need, and not private profit.

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