

Thousands of Canadian medical workers infected with COVID-19 due to lack of PPE

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The neglect of health care in Canada by a ruling elite that is indifferent to the lives of working people can be seen most acutely during the present pandemic in the failure to provide even frontline medical staff with adequate personal protective equipment (PPE). This has resulted in mass infections among health care professionals, with more than 4,000 just in Ontario testing positive for COVID-19. Total numbers of deaths among medical workers are hard to come by, but at least five personal care workers have died in Ontario alone.

In British Columbia, a coronavirus outbreak has erupted among nurses in a hospital intensive care unit. According to BC Nurses' Union President Christine Sorensen, four nurses working at a hospital in the Fraser Valley city of Abbotsford that has been dedicated to treating coronavirus patients have tested positive for COVID-19. The union has said it previously complained about unsafe working conditions at the Abbotsford facility, including overcrowding. Nurses posted there have complained about a scarcity of PPE that has forced them to ration supplies. Nurses report having to go an entire shift without switching equipment.

Conditions are similar in other parts of the province and indeed across the country. The BC union says it has received more than 2,000 complaints from its members. Nurses have reported shortages in all the basic equipment they need to safely attend to their duties, including gloves, gowns, respiratory masks and face shields. Sorensen complained bitterly that hospitals lack the plexiglass barriers that are now widely available at the larger supermarket chains. Nurses are being instructed to leave masks somewhere safe when they leave for break so that they can reuse the same one upon their return.

The response of the New Democratic Party provincial government's ministry of health to the outbreak and dearth of PPE was to simply reiterate its claim of being committed to the safety of frontline health care workers.

In Ontario, the latest update from the Ontario Health Coalition reported that infections among medical staff and patients of health care institutions doubled from 3,783 to

7,894 between April 21 and May 5. As of May 5, 16.1 percent of all COVID-19 infections in Ontario were among health care workers.

Long-term care facilities have been hit especially hard by the virus, with more than 250 out of Ontario's 626 elder care homes suffering a COVID-19 outbreak. As documented in graphic detail by a report from the Canadian military, which has had to deploy staff at five for-profit Ontario care homes ravaged by the coronavirus, many outbreaks were the result of inadequate supplies of PPE and the inappropriate use of medical equipment. (See: Ontario government takes over five nursing homes after military exposes systematic negligence)

Similarly dangerous conditions exist for doctors. While polls of physicians indicate an improvement in their situation, there remains a concern particularly among community-based physicians about the supply of PPE. Health care workers have been forced to organize donation drives and rely on private stockpiles donated by companies. Canadian Medical Association President Dr. Sandy Buchman criticized the situation doctors and health care workers have been put in. "If we had planned properly and monitored these provincial and federal supplies of the equipment," said Dr. Buchman, "we wouldn't be scrambling."

The reason why authorities are "scrambling" is because the federal government failed miserably to prepare for the pandemic. Although it was known by mid-January that the virus was highly contagious and could spread rapidly around the world, the Trudeau Liberal government waited until March 10 to write to the provinces to determine their supplies of PPE and other critical medical equipment. The government, with the support of all opposition parties and the trade unions, spent much more time crafting a multi-billion dollar bailout for the big banks and corporations, which was designed above all to prop up the stock market and guarantee the wealth of the super-rich. Workers and the health system have been left with rations.

The lack of adequate PPE supplies has led the federal and

provincial governments to improvise by allowing the usage of expired and substandard materials. Ottawa revised their standards for masks in March allowing for more porous masks to be used during the pandemic, going against recommendations by the World Health Organization..

The blame for the lack of this critical equipment lies squarely with the Canadian ruling class, which has callously pruned and slashed health care spending for decades, leaving the country highly vulnerable to a pandemic that was both foreseeable and long predicted. After failing to replenish its stockpile, the federal government sent 2 million expired masks to a landfill last year. Sally Thornton, a vice president of the Public Health Agency of Canada (PHAC), the agency responsible for the National Emergency Strategic Stockpile (NESS), claimed that the stockpile is “doing well” even as she argued that provinces and territories are responsible for their own supplies and Ottawa serves only to assist in providing surge capacity.

Tacitly acknowledging the government’s failure to prepare adequately, Patty Hajdu, the federal health minister, admitted that the government does not have enough PPE for the duration of the crisis. Health Canada has ordered 1.8 billion units of PPE mostly from China, which supplies much of the world PPE stock. However, Chinese suppliers are taking orders from around the world as demand has skyrocketed. The consequence has been a mad dash to secure dwindling supplies and Canadian government-chartered aircraft returning from China empty after being outbid. Some companies have taken advantage of the situation to sell counterfeit, substandard N95 masks at exorbitant prices.

The response of the corporate media and the government has been to stoke anti-Chinese sentiment to deflect criticism away from those responsible. Global News ran an article accusing China of suppressing information on the virus in January in order to secure for itself the global supply of PPE without triggering a bidding war. It went further to claim that China used its connections in the diaspora to secure this equipment. The reliably reactionary head of the opposition federal Conservative Party, Andrew Scheer, has been criticizing the government for not being sufficiently hostile to Beijing.

One Toronto nurse speaking with the WSWs explained that PPE was crucial for health care workers especially as there is a shortage of nursing staff and keeping them virus free is essential to keeping them on the job. Personal protective equipment inside the hospital is used at all times even during meetings between coworkers. She pointed out that some nurses are already tempted to work while infected, eager not to leave potential overtime earnings on the table when their incomes have been depressed in recent years.

The anger among health care workers over the lack of PPE has led to the eruption of protests. In Quebec, the main nurses’ union, FIQ, felt compelled to call demonstrations in Montreal to protest the failure of the right-wing Coalition Avenir Quebec (CAQ) government to supply PPE. The protests were also motivated by a brutal regime of forced overtime, routine staff shortages, and the government’s cancellation of all vacations.

Quebec Premier François Legault responded arrogantly, declaring that “this is not the time” for protest. FIQ, like its union counterparts across the country, is itself deeply complicit in the catastrophic conditions that have been imposed on health care workers in recent decades through austerity budgets and round after round of contract concessions.

Nurses and other health care professionals can only secure access to adequate PPE and other basic necessities to ensure a safe working environment by forming rank-and-file safety committees in opposition to the political establishment and its trade union backers. Their fate is only one of the most extreme expressions of the contempt shown towards workers’ lives by the capitalist class. Sections of workers from every part of the economy, from meat packers to grocery store workers and autoworkers, are being forced to labour under unsafe conditions with inadequate protective gear. Medical professionals must unify their struggles with these workers and the entire working class in opposition to the subordination of working people’s health and lives to capitalist profit—that is, in the struggle for workers’ control of production and the socialist reorganization of society.

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