

# Canada's health care system buckling as governments reject measures to contain COVID-19

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As COVID-19 infections continue to rise across Canada, dire warnings about the health care system's inability to cope are growing. The number of intensive care patients in Ontario's hospitals surpassed the peak of the first wave of the pandemic Monday and is fast approaching the level at which Doug Ford's provincial government has acknowledged that it will be impossible to maintain adequate health care for those suffering from other illnesses or injuries.

There were 285 COVID-19 patients in Ontario intensive care units as of December 21, more than the 283 recorded at the high point during the spring. When COVID-19 intensive care patients surpass 300, which is set to occur within the next 10 days, health authorities say that they will no longer be able to guarantee regular levels of care for other patients.

The crisis is particularly stark in Peel Region, where approximately half of all intensive care patients at two hospitals in Brampton and Mississauga have COVID-19.

Although the province claims 400 intensive care beds remain available for patients, health care professionals point out that not all of these can be used due to staff shortages. "Only 15 per cent of the work that we do is elective. 85 per cent of the stuff that comes to our door we can't alter. That is traumas, cardiac surgery, cancer surgery, transplants and we can't cancel those," explained Dr. Michael Warner, the medical director of critical care at Michael Garron Hospital. "So our ability to flex up is limited primarily by the number of highly trained nurses we have and those nurses are in critically short supply right now. We have to get this thing under control."

The situation is equally serious in Alberta, where the United Conservative Party government announced earlier this month plans to establish field hospitals capable of treating up to 750 patients. In Edmonton, the intensive care unit at the Stollery Children's Hospital has been transformed into a unit caring for adult patients with COVID-19, with the children moved to a cardiac intensive care unit. Alberta Health Services also reported that four COVID-19 outbreaks are ongoing at hospitals in the Calgary zone, and that Fort Saskatchewan Community Hospital will close its labour and delivery unit to free up bed space. Pregnant patients will have to travel over 30

kilometres to the nearest health care facility.

In Quebec, Health Minister Christian Dubé announced that beds are being added in "non-traditional" settings, including hotels, to cope with an increase in demand that has seen coronavirus patients rise by 50 percent over the past three weeks. With the number of COVID-19 patients receiving hospital care now exceeding 1,000, ten of the province's hospitals are on the verge of overflowing, Dubé said.

In British Columbia, the government is sending three "alternative care units" to the Vancouver Island, Northern Health, and Fraser Health regions to cope with the crushing demand for hospital beds. The units are shipping containers comprised of 40 beds that can be used to establish basic emergency care centres in gymnasiums, community centres, and other buildings. Last week, the province registered a new high of 361 patients in hospital, 93 of whom were in intensive care, another tragic record.

As horrendous as the health care crisis is, estimates suggest that the situation will deteriorate drastically in coming weeks. New modelling from Ontario shows that by January 24, Ontario will have 5,000 daily COVID-19 infections per day, more than double the current 7-day average of 2,100, if infections continue to increase by on average 1 percent per day. A 5 percent increase, which epidemiologists are warning is highly possible absent urgent action, would result in a staggering 14,000 new daily infections by late January.

Given that a delay of several weeks is usually observed between infection and hospitalization, the demands on already overstretched hospitals are all but certain to increase.

These developments are not inevitable. Rather, they are the direct product of the criminal policies that the entire political establishment are pursuing. From Justin Trudeau's federal Liberal government on down, the main concern of Canada's ruling elite has been to protect the profits of big business and the wealth of the super-rich, while forcing workers to remain on the job amid a raging pandemic.

After the Liberals engineered vast bailouts for the banks and financial oligarchy in the spring totalling more than \$650 billion, Trudeau worked closely with big business lobby groups

and his allies in the trade unions to enforce the reckless reopening of the economy. He was supported in this homicidal endeavour by the hard-right provincial governments of François Legault in Quebec, Ford in Ontario, and Jason Kenney in Alberta, as well as the New Democratic Party-led government of John Horgan in BC. A critical part of reopening the economy was ensuring that schools were opened for in-person classes so they could function as child minding services for parents, who were forced back into dangerous workplaces.

Provincial governments are continuing this policy of placing profits before human lives even as the terrible consequences, expressed above all in the mounting death toll and threatened collapse of the health care system, become ever clearer. On Monday, the Ford government announced what it termed a “lockdown” for the whole of Ontario, as of December 26. Yet the lockdown order contained so many loopholes and exceptions that *Globe and Mail* health correspondent André Picard aptly characterized it as a “mockdown.” The exemptions will above all impact large worksites, which have been one of the main vectors for transmission of the virus. (see: Canadian authorities covering up workplace COVID-19 outbreaks to justify keeping economy and schools open )

Many workplaces that have experienced major outbreaks, including food processing plants and warehouses, will remain open. Businesses allowed to continue operating include “all construction activities and services,” “supply chains, including businesses that work in processing, packaging, warehousing, distribution, delivery, and maintenance,” “manufacturing,” “courier, postal, shipping, moving and delivery services,” “staffing services including providing temporary help,” and “hotels, cottages, resorts and motels.” Large retail stores like Costco and Walmart will also be allowed to remain open because they stock groceries or pharmacy products.

The “lockdown” order fixes January 11 as the date when elementary schools will reopen. Secondary schools will follow two weeks later. An earlier version of the order which included the restricting of childcare services to essential workers was scrapped so as to ensure childcare remains accessible to all. Given that virtually all businesses outside of the retail sector remain open, the vast majority of parents will continue to send their children to daycare in order to continue going to work.

Health experts have attacked the Ford government’s decision to delay the imposition of the lockdown until December 26. This means that family gatherings over Christmas can take place before the restriction on social gatherings to members of the same household comes into force. Anthony Dale, president of the Ontario Health Association, said that hospital directors and health care leaders were “shocked” that the restrictions have been delayed until after Christmas.

A similar process is under way in neighbouring Quebec. In mid-November, Legault announced with great fanfare that family gatherings of up to three households and 10 people would be permitted for a four-day period around Christmas. As

the devastating consequences of the province’s back-to-work and back-to-school policies became clear, however, the government was forced to perform an about-face and abandon the planned relaxation of social distancing measures.

At a joint press conference with opposition leaders Tuesday, the same day as the province announced a record daily high of 2,183 new infections, Legault sought to blame the population at large for the catastrophe produced by his government’s policies. “It’s time to be responsible,” he lectured Quebec residents, insisting that they should limit gatherings to members of their own household. Manon Massé, co-leader of the pseudo-left Quebec Solidaire, declared at the joint press conference that she was putting aside her “political differences” with Legault to ensure that Quebecers “work together.”

While the restrictions on social gatherings are necessary, the Legault government’s determination to reopen schools on January 11 will contribute to a further escalation of infections. The entire manufacturing sector will also be allowed to operate normally between December 25 and January 10.

The disastrous conditions produced by the ruling elite’s criminal mishandling of the pandemic underscore the urgency of the working class intervening with its own solution to the crisis. If thousands of lives are to be saved and the collapse of the health care system averted, workers must mount a political struggle for the complete shutdown of all nonessential production with full pay for all workers affected, the closure of in-person learning at all schools until the pandemic is brought under control, and the provision of tens of billions of dollars for health care and social services. These measures are all the more necessary given that the successful development of a vaccine means that the vast majority of the population could be immunized in a matter of a few months.

To fund the measures needed to halt the spread of COVID-19 and save lives, the ruling elite’s vast wealth must be impounded and the hundreds of billions in bailout money the federal government and Bank of Canada funnelled into the banks and financial markets redirected into protecting workers’ incomes and providing quality health care to all. This can only be realized as part of the mass mobilization of the working class in the struggle for a workers’ government committed to the socialist reorganization of socio-economic life.



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