

Elections matter, so make sure your vote does too

Canada's next Prime Minister will be elected this fall. That means, the government they lead will decide the future of public health care.

Make sure you know the solutions the four major federal parties are proposing when it comes to maintaining, protecting and expanding our most cherished social program.

Where do the federal parties stand on public health care?

CONSERVATIVE
GREEN
LIBERAL
NDP

	CONSERVATIVE	GREEN	LIBERAL	NDP
New Health Accord?	✗	✓	✓	✓
Restore \$36 billion in cut funding?	✗	?	?	✓
Support universal pharmacare?	✗	?	✗	✓
Support expanding public seniors' care?	✗	?	?	✓

based on federal party policies July 2015

TAKE ACTION

Make sure public health care is the winner in the upcoming federal election by pledging your vote today.

Visit votehealthcare.ca to take the pledge

Brought to you by the more than 46,000 health care workers across British Columbia who are part of the Hospital Employees' Union. We can be reached at 1-800-663-5813.



THIS FALL,
Canadians can
vote for public
health care



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The federal Conservatives are abandoning our public health care system by:

- Cutting \$36 billion from health transfers to the provinces and starving the system, making it impossible to provide the services Canadians need.
- Encouraging for-profit corporations to deliver health services.

The result: one health system for the rich and a broken system for the rest of us.

What will these cuts mean for your health care services in B.C.?

In British Columbia, we stand to lose a total of \$5 billion over ten years.

\$5 billion in cuts to health care over ten years is like losing:

- 8,300 care aide positions per year;
- 2,000 full-time family doctors per year;
- 1,223 hospital beds per year; or
- 33,000 joint replacement surgeries per year.



What's at stake?

Our hospitals are overcrowded, health services and programs have been severely reduced or cut altogether, and the needs of our rural population largely ignored.

• *Diminished seniors' care*

Our population is aging, and B.C. has the highest proportion of residents 85 and older. By 2034, Canada will need 2.5 times the number of long-term care beds we have now. As a retirement destination, we will require more beds than the Canadian average, yet our waitlists continue to grow.

• *More privatization*

B.C.'s public health care continues to be dismantled and privatized. For example, in publicly funded residential long-term, the number of for-profit beds increased 20 per cent since 2000, while in the same period, non-profit beds decreased by 11 per cent.

• *Escalating drug costs*

Costs for pharmaceuticals continue to rise, making prescription drug costs as much as 41 per cent higher for Canadians. In B.C., rising costs are putting some drug therapies beyond the reach of those who can't afford to pay for their prescriptions.

• *Loss of equity and fairness*

On March 31, 2014, the federal Conservatives stopped equalizing payments between B.C. and the rest of the provinces to ensure equity in health care regardless of where in Canada you happen to live. The government also abolished the Health Council of Canada which tracked wait times across the country.

What is the Health Accord?

The *Health Accord* was an agreement between the federal government, provinces and territories which provided stable funding and national standards for health care services.

Canada's *Health Accord* expired on March 31, 2014 and the federal Conservatives refused to sign a new one.

Why is a new Health Accord important?

It's the best way we can:

- Stop gouging through extra-billing and illegal fees;
- Expand health coverage to prescription drugs, and long-term care and home care;
- Ensure quality seniors' care and mental health services;
- Guarantee stable and fair health care funding; and
- Enforce national standards so everyone gets high quality care.

What will happen if we don't get a new Health Accord?

Federal funding will fall to 18 per cent, from its original 50 per cent share.

Patients will suffer from longer wait times, hospital closures and the privatization of hospitals and seniors' care.

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