

Ontario premier's unprecedented partisan attack on public health worries health experts

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Ontario Premier Doug Ford may be dialing back some of his cuts to Toronto Public Health, but not before he attempted to justify his decision by calling the Toronto Board of Health a “bastion of lefties” in Ontario’s legislature. That kind of partisan attack on public health is unprecedented in recent history, according to health experts and academics.

“I have no recollection of an attack by a politician of this magnitude on public health officials,” said Ian Culbert, the executive director of the Canadian Public Health Association.

Ford’s comments were made about the council members and public representatives who set public health policy in Toronto but could colour opinion of public health in general, Culbert argued. “For those who take the premier’s messages to heart, they could become dismissive of messages that come out of Toronto Public Health that are really intended to protect and promote their health and well-being, the most obvious example being immunization of their children.”

Heather MacDougall, an associate professor at the University of Waterloo who specializes in the history of medicine, public health and health policy, said the rhetoric is unprecedented. The tensions between local health boards and the Ontario government were high when then-Premier Mike Harris “forcibly amalgamated” health boards in the greater Toronto area but neither side “personalized” the conflict.

“It seems like a sort of dog whistle to his supporters: ‘Look at me; I’m going after those bad people on the left who have gotten us into the financial mess



Partisan attacks on public health have no place in Ontario’s legislature, argue public health experts.

that we’re in,” said MacDougall. She added that important public health policy changes have been supported by both left- and right-leaning councillors in the city’s history. “Labelling people is fundamentally unproductive.”

The Ford government recently announced it was cutting \$200 million from public health departments across the province, reducing Toronto’s public health budget most dramatically. The government later said it would no longer apply those cuts retroactively, however.

The media spokesperson for the premier didn’t respond to a request for an interview. MacDougall speculates that Ford’s distaste for the Toronto Board of

Health could be related to the board’s composition. Members of the public, who are paid honoraria to attend meetings, make up half of the board. “You get people who believe in social justice and community activism engaged in the board ... and I suspect that this would not be something that Doug Ford would particularly agree with.”

According to Dr. Eileen de Villa, the medical officer of health for Toronto Public Health, public health initiatives in Toronto aren’t addressed in a partisan fashion but “our work inevitably has a political angle to it as we recognize that these factors are often the subject of political discussion,” referring to factors

that contribute to health inequities, including housing, income and education.

Dennis Raphael, a professor of health policy and management at York University, expressed surprise that the premier singled out Toronto. “If being lefty means you don’t want people to fall subject to the adverse effects of austerity ... there are many other [public health] units that he could be pointing to,” he said. In 2013, for example, Sudbury’s public health unit put out a video making links between poor health and lack of affordable housing, workplace benefits and a social safety net, a video that was picked up and adapted by 17 other public health units (but not Toronto’s).

With 70% of Ontarians opposed to the cuts to local health units, including former health ministers of all political stripes, Raphael said that Ford’s political dismissal of Toronto’s board of health isn’t likely to sway popular opinion against the city’s public health service. “What’s interesting now is, compared to the 1990s, there is a greater sensitivity that these kinds of cuts to public health, as well as to broader social services like childcare and housing, have the potential to disrupt society,” he said.

Jenna Healey, an assistant professor in the history of medicine at Queen’s University, agreed that the work of local pub-

lic health boards has been widely supported by elected officials and the public. “I am hoping we are at the point now that most people would agree that public health services have saved lives and they’re something worth giving resources to, and we can take that position outside of partisan politics,” she said.

She’s concerned that Ford’s comments attacking the Toronto Board of Health is “part of a larger political problem of the undermining of medical expertise and interventions ... and seeing health as coming down to personal choice.”

Wendy Glauser, Toronto, Ont.