

COVID-19 pandemic highlights need for #HealthCare4All

TO: The Right Honourable Justin Trudeau, Prime Minister of Canada The Honourable Patty Hajdu, Minister of Health The Honourable Marco Mendicino, Minister of Immigration, Refugees, and Citizenship

CC: Premiers and Ministers of Health of all provinces & territories

The COVID-19 pandemic has highlighted long-standing gaps in the Canadian healthcare system that continue to disproportionately and negatively impact vulnerable communities. Despite Canada's proclaimed universal healthcare system, migrant workers, individuals without status, rejected refugee claimants, and others, are left uninsured, facing fear of deportation and insurmountable debt in accessing healthcare. Healthcare is a human right, yet it is not guaranteed for hundreds of thousands of individuals in Canada. The COVID-19 pandemic has highlighted that our community wellbeing is highly interconnected, and we place our entire society at risk by failing to guarantee health care to all people. As members of the health and migrant communities, we call on Canada's federal government to work closely with provincial and territorial governments, health institutions, and public health leaders to ensure and support access to healthcare for all people living in Canada, including those currently living in detention, regardless of immigration and citizenship status.

In response to the pandemic, some provinces have begun acknowledging the harms of limiting access to healthcare for uninsured communities by temporarily expanding some types of coverage, largely through making an artificial distinction between COVID-19 related services and others (see https://bit.ly/2WoRj5C). This is not enough. There is significant variability in how COVID-19 presents, making it difficult for healthcare providers to know what constitutes a COVID-19 related service - this false distinction is harmful as it may lead to missed testing and treatment and increased community transmission. Full and comprehensive coverage of all services will also ease the administrative burden on frontline healthcare providers working to control this pandemic, rather than having them waste time with bureaucratic gatekeeping. **To effectively "flatten the curve", policy must ensure universal access to all essential health services.**

The national response on this issue has also been fragmented, with only some provinces beginning to provide care for some uninsured individuals, and policy implementation being incomplete in healthcare institutions. Patients are still being forced to navigate complicated pathways to access care, and many continue to be denied access to essential healthcare services, both COVID-19 related and otherwise. Uninsured individuals across Canada require universal access to healthcare that is effectively implemented from the level of policy to the patient experience - inconsistency only serves to create further inequity and confusion within an existing patchwork-system.

The threat of detention and deportation faced by undocumented individuals who seek essential healthcare services at all times, but particularly during this pandemic, must be addressed. Though deportation has been temporarily halted at the policy level, with some exceptions, there is an ongoing fear that access to health care services could result in detention and deportation by the Canada Border Services Agency (CBSA) in the future. This fear results in many uninsured individuals regularly avoiding or delaying seeking care. It is important that health care institutions affirm in their patient privacy policies that they will not share information with the CBSA, and that the CBSA affirm that attempting to access healthcare will not result in detention or deportation.

Finally, these changes have been announced as temporary measures for the COVID-19 crisis. This is in direct opposition to what healthcare professionals, international human rights bodies, and community organizations have repeatedly said: denying healthcare on the basis of immigration status is a human rights violation and threat to public health. Ensuring access to health care for migrants improves the health and safety for all communities in Canada; it leads to reduced health care costs and improved health outcomes. The United Nations Human Rights Committee has condemned Canada in the past for denying access to essential healthcare on the basis of immigration status, based on the case of Nell Toussaint. We must not be short-sighted - equitable access to healthcare is always essential, not only during crises such as COVID-19.

We demand that the Canadian federal government work closely with provincial and territorial governments, health institutions, and public health leaders to immediately ensure comprehensive healthcare coverage to all. This can only be achieved when:

- 1. Healthcare coverage is comprehensive, covering all medically-necessary services, and does not make the artificial and harmful distinction between COVID-19 related services and others;
- 2. All healthcare institutions are informed of the policy details and how they will be implemented, including coverage changes, the application of billing codes, and confidentiality policies that prevent sharing personal health information or collaborating with the Canadian Border Services Agency (CBSA). This messaging must reach all workers interacting with patients in addition to healthcare providers;
- 3. An explicit public messaging campaign informing all uninsured communities and the broader public that all healthcare services are available at no charge regardless of immigration status;
- 4. The CBSA guarantees that accessing healthcare will not result in detention or deportation;
- 5. Healthcare coverage is permanent, carrying on beyond the COVID-19 pandemic, as a human rights and public health measure.

Sincerely,

College of Family Physicians of Canada (CFPC) Medical Student Society of McGill University Migrant Workers Alliance - Niagara FIQ Syndicat des professionnelles en soins de Montérégie Ouest MCC Toronto's LGBTQ+ Refugee Programs Ometz: Community Services, Employment, and Immigration Canadian Union of Public Employees Local 2424 Service d'accueil des nouveaux arrivants de La Matanie (SANAM) Concertation itinérance Beauharnois-Salaberry Suroit PEI Working Group for a Livable Income Centre ressources pour femmes de Beauport International Retinoblastoma Consortium Micah House Refugee Reception Rainbow New Beginnings Action santé Outaouais en partenariat avec la Table de développement social de la Vallée de la Gatineau WazanaLaw La Maisonnée Casa C.A.F.I. (Centre d'aide aux familles Immigrantes) Northumberland Community Legal Centre East End Community Health Centre Judy Waldman Counselling and Consulting Table de concertation du mouvement des femmes de la Mauricie Institute of the Blessed Virgin Mary (Loretto Sisters, Canada) RÉCIFS (Regroupement de personnes qui exercent la profession d'intervenantes sociales au Québec) Kenora Seniors Coalition Quaker Refugee Committee of Toronto Monthly Meeting of the Society of Friends Regency Nannies Inc.















Pour l'ouverture à l'autre

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