

MARCH 2020

DEAR STUDENTS,

I hope this course provides you with ways to think about the current pandemic. Let me suggest where it takes me.

While we began the course thinking about how political economy influences population health, we now see ways in which population health can have an impact on political economy. The tourist industry, which is among the top three industries in Toronto, has been particularly hard hit but it is far from alone. The impact may be especially hard for small businesses but very few businesses are immune. Undoubtedly the responses have been shaped by international economic powers and by economic concerns, but globally countries have now awakened to the fact that the market cannot stop the spread or go on as it is for the moment at least; only populations can. The pandemic clearly demonstrates the limits of the medical model and the importance of other health determinants even as we pour efforts into finding medical solutions. What counts as evidence, whose evidence counts and how evidence will be applied are clearly critical issues in these times.

The pandemic also demonstrates how economically and socially precarious so many people are, raising important questions not only about market strategies but also about government social supports, regulations and government responsibility in a wide range of areas that are critical to controlling this pandemic. The pandemic thus raises the questions about states and governance of the sort we considered in class. The application of for-profit



methods and assumptions to hospitals help explain why there is no surge capacity for hospitals or nursing homes. But at least we have universal hospital and doctor care, with access mainly based on need rather than on ability to pay. However, we need to pay attention to those who are excluded from medicare and who are often among the most vulnerable to illness. And we need to think about the services that are not included in our universal system and what that means to particular populations that are likely to be the same ones without paid sick leave or decent wages.

At the same time, it becomes increasingly clear that health care involves a wide range of paid and unpaid providers, most of whom are women and many of whom are racialized and/or immigrant. The importance of clean has never been so obvious, food central, and social support critical. Care aides travelling from nursing home to nursing home in order to get enough hours of work are carrying the virus with them, demonstrating the threat from managerial practices promoting precarious work. Bar-

Political economy also draws attention to the tensions involved. The most obvious are those between emphasizing the threat and avoiding panic, between preventing contact and promoting isolation and between supporting business and supporting individuals. And, of course, it raises the question of who benefits, while recognizing significant differences in the consequences in terms of gender, racialization, class and other social relations.

The March 18 class was to be on privatization of health and care, broadly defined as the move away from not only public delivery and public payment for health services but also from a commitment to shared responsibility, democratic decision-making, and the idea that the public sector operates according to a logic of service to all. Privatization is the process of moving away from any or all of these.

The pandemic is exposing the weaknesses of a neo-liberal agenda that promotes smaller government with lower taxes and less spending, private payment and provision, for-profit managerial strategies,

market mechanisms and individual responsibility as well as corporate decision-making. The main strategies now promoted to limit the impact of the virus require big government and collective responses on the part of the population. There are calls for more government regulation, intervention, spending and social supports at the same time as we are all asked to share the responsibility for preventing the spread by staying home and washing our hands.

A big question is whether the aftermath will be a move to more collective strategies, based on a recognition of shared responsibilities, or pressure for more authoritarian governments supporting even larger corporations emerging from the losses of smaller businesses.

TAKE CARE, PAT ARMSTRONG

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