Canadian workers speak out against lack of protective equipment in health facilities

By our reporters
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Canada’s federal and provincial governments, with the full backing of big business, are recklessly pushing to “reopen” the economy amid a raging pandemic. The aggressive drive to lift restrictions that were only reluctantly imposed in the first place will gather pace with the reopening of shops across most of Quebec today, and schools and day cares May 11.

Even Quebec’s top public health official has admitted the provincial Coalition Avenir Quebec (CAQ) government’s plan to force hundreds of thousands of workers in non-essential industries back on the job over the next three weeks is a “risky bet.” Yet other provinces are using it as political cover to accelerate their own “reopening” plans.

On Friday, just days after saying Ontario would not ease lockdown restrictions until the daily number of new COVID-19 cases had been declining for two weeks, Premier Doug Ford announced that large numbers of businesses, including most building sites, will be allowed to reopen today.

The lives of workers and their families are being placed in jeopardy so as to enable big business and investors to resume amassing huge profits off their labour. None of the conditions the World Health Organization (WHO) and other medical experts have said are necessary to ensure the easing of social-distancing measures doesn’t lead to a second, even more lethal wave of COVID-19 infections are in place. These include: provisions for systematic mass-testing and contact–tracing, protective equipment for workers, and “surge capacity” in the health care system.

The politicians and corporate media are claiming the pandemic has peaked, yet the number of confirmed cases and deaths continue to surge. Total coronavirus cases in Canada have already surpassed 59,000, with the death toll reaching more than 3,675. Close to 200 people are dying, on average, every day.

Workers who spoke to the World Socialist Web Site in recent weeks have emphasized that even when the lockdown measures were in place, the authorities were totally incapable of dealing with the catastrophic impact of the pandemic. The terrible working conditions that they described in the health and social care sectors will worsen still further if these critical social services, which have been starved of funding for decades, buckle under the crush of patients that will be unleashed by a second wave of the coronavirus triggered by a premature return to work.

Julianne is a respiratory therapist in a hospital on the south shore of Montreal. As a cardio-respiratory specialist, she works directly with people with COVID-19. Her youngest patient is in his early 40s.

“Because elective surgeries have been on hold, management has transferred workers from the operating room to other departments such as intensive care,” she said. “The procedures are very different, but we’ve had only one day of reorientation to learn the procedures and where the equipment is.”

The refusal of governments at all levels to take adequate preparatory measures is forcing health care workers to risk their lives by deviating from World Health Organization recommendations for treating highly-infectious COVID-19 patients. “We are told to limit the use of N95 masks,” she added. “Instead of taking one N95 for each patient as we should do, we take an N95 mask and put it with all the other equipment, then add a procedure mask on top of the N95 that we throw away between each patient. The procedure mask and the visor we have to wear protect the N95 from droplets. At least that’s what they tell us, but we don’t know. The mask company doesn't
recommend this procedure anyway.”

Julianne has seen workers use acetates (plastic sheets) in which they have made two small holes and put a string through them as a fastener. “One of my colleagues was wearing such a visor. She had to maneuver on a ventilated patient and unfortunately the circuit was disconnected. The air from the ventilator made the acetate fly and my colleague was extremely exposed to the patient’s secretions,” she told the WSWS.

Julianne also described how her facility is struggling with staff shortages, which are the product of decades of savage austerity measures. “In an ideal world, as long as you’re exposed, you should be taken off work, but that’s not the reality,” she continued. “As long as you don’t have symptoms or a positive test, you have to keep working, even though you know the incubation period is two weeks. During this time, an infected person goes to work and potentially infects colleagues or other patients.”

Julianne also drew the connection between the current situation and years of health care budget cuts, commenting, “There have been so many cuts in recent years. The budget is becoming a matter of priority over patients’ health. You don’t replace those who are absent because ‘it costs too much’. So we are forced to work mandatory overtime.”

Chris has worked for 15 years as an intervener for the deaf and blind. He now works for a non-profit group home for adults with disabilities, most of whom are seniors.

“The masks and PPE have been a disaster, that’s for sure,” Chris said. “We’ve been provided with gloves, which we always have and nothing else.”

He also took aim at the failure of the Canadian Union of Public Employees trade union to ensure the provision of proper equipment. “There’s no real protection available. I have sent the message to the union (CUPE) and of course they’re working on it,” remarked Chris sarcastically. “I just got a message this week saying they’re having meetings about it now.”

Chris also told us about the unsafe and inadequate living conditions the people he cares for are exposed to. “In the house the patients are in, they’re all crammed into the living room,” he said. “Management sent a memo telling us to put them all in separate places. But we can’t put them in their rooms for 24 hours a day, because they have no idea of the importance of this and they’re already getting really angry. So it’s becoming more dangerous for the staff.

“The other thing is that if we became sick we would have to use our sick days and a lot of people don’t have sick days left. Then we would be forced to use our vacation pay to cover coronavirus illness.”

Marianne works as a program assistant with 20 other staff at a non-profit community health center in the Ottawa area for people with dementia and other mental health issues.

She described the impact the virus has had on her work. “Things are massively changed since the COVID outbreak and now we are totally shut down,” she said. “It’s all gone on to the Zoom [platform] and phone-calls, since the middle of March. We had no PPE before we closed. The week before we were really ramping up the hand sanitizing, but there was never any mask usage.”

She also commented on the low wages paid in the non-profit sector. “Our wages are shitty. I clear about $2,000 a month. Don’t ask what our CEO makes, it’s really bad,” she added. “He had the nerve to send out a video at Easter with his family romping around their backyard with Easter bunny ears and his house is palatial—and I’m thinking, ‘you know this is going out to workers who are working two jobs that you pay shit wages to and who are barely making ends meet.’”

Marianne also addressed the utter failure of politicians to prepare for the pandemic, in spite of repeated warnings and Canada’s own experience with the SARS epidemic in 2003. “I feel that everywhere clearly there was some kind of denial in place that something like this could happen,” she told the WSWS. “There should’ve been strategies and supplies in place in case of something like this. It should never have been treated as a far out possibility that something like this could happen. Since the beginning of time there’ve been pandemics.”

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