

ANNUAL
REPORT
2022



BCHealth Coalition



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Caption: Elder Roberta Price presenting on the topic “Empowering Indigenous women + families in health services and healing” at the 2017 BCHC Conference

LAND ACKNOWLEDGEMENT

The BCHC acknowledges our office is based on the unceded and stolen territories of the Coast Salish Nations of xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and səliłwətaʔ (Tsleil-Waututh). We also acknowledge the many territories and lands across so-called British Columbia that our members come from.

We are honoured to be here as guests on this land that Indigenous peoples have cared for and continue to care for.

We invite you to take a moment to think about where you presently live and honour the people of the land. Think about your relation to the place you live, work and interact. This is our inquiry to honour the past and present and to stay connected to decolonization practices.

ABOUT THE BC HEALTH COALITION



The BC Health Coalition champions a strong public health care system that is there for all of us when we need it.

We are a democratic, inclusive and consensus-based community of individuals and organizations that span the province of British Columbia. Together we advocate for evidence-based improvements to our public health care system, stimulate public education on health care issues, and drive positive change to our health care system through campaigns across the province.



A MESSAGE FROM OUR CO-CHAIR

Our strained public health care system has faced many crisis points over the past year. These crisis points have been opportunities for increased privatization of public health care services leading to public funds being pocketed as profit while publicly funded care is devalued and rationed. However, our members and allied organizations have come together in full force to push back against this privatization while fighting for the public solutions needed to improve our health care system.

The collective strength of our members, organizations and Steering Committee was clearly demonstrated in holding the government accountable to improving senior's care at our Better Care for Seniors Accountability Assembly. We also celebrated the BC Court of Appeal's ruling that unanimously dismissed the appeal launched by Cambie Surgeries Corporation of the landmark 2020 BC Supreme Court decision. This victory for public health care was only possible due to the efforts of our Coalition members and allies.

Education was a key focus for this year both externally and internally. We were busy speaking to the media to promote public health care solutions, speaking out against two-tiered care, calling for an end to for-profit long-term care, and pointing to the need for investment in community-based health care models. Within our Coalition, our members also took the time to engage in dialogue on the toxic drug crisis in BC in partnership with national organizations.

As much as we have accomplished this year, we know more needs to be done to improve our public health care system. We need all hands on deck to strengthen and improve it. We already have public solutions that are efficient, evidence-based, and proven. You are a part of a network of 800,000 people in this province determined to fight for these public health care solutions. Let's keep fighting together!

In Solidarity,

Tuesday Andrich
Labour Co-Chair

MISSION AND VALUES

The BCHC aims to be the voice of public health care in BC and champion the protection and expansion of a quality public health care system.

WE BELIEVE



Health care is a human right and access to health care must be equitable



The health care system must cover comprehensive care for all stages of life



Social determinants of health are foundational to a functioning health care system



Health care is delivered best when it is public and accountable to communities, not-for-profit and evidence based

BECOME A MEMBER

Organizational and individual members can influence the direction of the Coalition's campaigns, help build broad public support provincially, and amplify our power to defend and strengthen public health care.

Membership in the BC Health Coalition is open to all organizations and individuals who support the principles of the Canada Health Act, oppose privatization of health care, and support the principles of the Canadian Health Coalition's [Call to Care Statement](#).

To learn more about annual membership visit: www.bchealthcoalition.ca.

STEERING COMMITTEE MEMBERS 2021-2022

We thank the following Steering Committee members for their hard work and commitment to guiding the Coalition this year. The Steering Committee oversees the Coalition's work and directs the campaign and governance priorities of the Coalition while reporting to the wider membership of the BC Health Coalition.



Phoebe Lo Patigdas
BC Federation of Students



Adrienne Bale
DIVERSEcity



Sheila Moir
BC Federation of Labour



**Nicole Seguin
Tammam El-Khodor**
Health Sciences Association



**Scott De Long
Jolan Bailey**
BC General Employees' Union



**Sara Rozell
Barb Nederpel**
Hospital Employees Union



Shannon Daub
Canadian Centre for Policy Alternatives BC



**Ihsan Malik
Kathleen Jamieson**
Metro Vancouver Cross-Cultural Seniors Network



**Emily Wagner
Adrienne Yeung**
Community Action Initiative



**Linda Wilson
Eleanor Smith**
UFCW 1518



Diane Wood
COSCO



Christy Slusarenko
MoveUP



Tuesday Andrich *Labour Co-chair*
Andrew Ledger
CUPE BC

OUR STAFF



Mazdak Gharibnavaz (he/him)
Organizer



Audrey Guay (she/her)
Organizer (on leave)



Ayendri Riddell (she/her)
Campaigner



Anwaar Baobeid (she/her)
Research & Policy Analyst



Usman Mushtaq (he/him)
Coordinator

2) MOBILIZING THE PUBLIC

PEOPLE IN BC ACTIVELY
SUPPORT PUBLIC HEALTH
CARE AND UNDERSTAND THAT
FOR-PROFIT CARE UNDERMINES
THE PUBLIC SYSTEM.

INDICATORS

grow the coalition to have
~~need~~ have
validators &
allies

BCHC is the ✓
voice
(parked idea)

+credible
voice

Indicators:
are we moving
public opinion
use polling?

COOP PR/
A
STRATEGY

6
Create + implement
Campaigns
With Key
Constituencies ✓✓✓✓

Build a ladder
of
Engagement
(actively work to
move people up it)

1 (8)

with key
+ diverse
agencies
(cultural orgs)
can
influence decision
makers

7 ✓✓✓✓✓
Public
engagement
Strategy 5
(including education,
leadership...)

3 (5)

JOIN A WORKING GROUP

The BCHC currently has two active working groups and one that is currently inactive. Groups meet on a regular basis to identify priority issues in their area. Working with staff, they identify campaign goals and offer recommendations to the Steering Committee.

They serve as a hub for our Coalition's expertise and help connect our members with directly impacted communities and partner organizations working on similar issues. Membership to Working Groups are open to Coalition members and other stakeholders who may be invited to join as decided by the group members.

In addition to our three working groups, the BCHC also supports the independent work of the Community Alliance of Racialized Ethnocultural Services for Equitable Health.

WORKING GROUP **SENIORS CARE**

CHAIR
LISA FREEMAN
HEU

2022 PRIORITY AREAS

- Advocating for a well-funded full continuum of care for seniors in the public system: from primary access in community, to home care, to assisted living and long-term care
- Accountability mechanisms for reporting in long-term care facilities and expanding and improving Home Support
- Calling for an end to for-profit long-term care

WORKING GROUP **ANTI-PRIVATIZATION**

CHAIR
ANDREW LONGHURST
HSA/CCPA

COLLEEN FULLER
REACH Community Health Centre

2022 PRIORITY AREAS

- Protecting public health care in courts and leading the work on the Cambie trial
- Opposing the privatization of the health care system, including contracting-out of services of health providers, private payment or use of private insurance for medically necessary services, and delisting of services
- Promoting measures that strengthen and expand public health care



WORKING GROUP
**PRIMARY
 HEALTH CARE
 REFORM**

CHAIR
 CURRENTLY
 INACTIVE

2022 PRIORITY AREAS

- Advocating for funding and expansion of the Community Health Centre (CHC) Model in BC
- Ensuring funding for CHCs is flexible enough to respond to community needs and address the social determinants of health
- Organizing alongside communities who currently face multiple barriers to accessing services in ways that support them to grow their power

PARTNER TABLE
CARES

*Community Alliance of
 Racialized Ethnocultural
 Services for Equitable Health*

CHAIR
**ZARGHOONA
 WAKIL**
*Umbrella Multicultural
 Health Co-op*

**NANCY
 CLARK**
University of Victoria

2022 PRIORITY AREAS

- Advocating for implementation of equitable health care for racialized ethnocultural communities through systems change
- Supporting the government to reform primary care and to shift to a team-based model of care delivery
- Advocating for programs that will improve culturally appropriate care, including funding cultural brokers to work within care teams

CAMPAIGN HIGHLIGHTS

SENIOR'S CARE

General Meeting & Better Care for Seniors Postcards:

We launched our Better Care for Seniors campaign on June 22 where over 50 allied organizations and member organizations came together to our general meeting. We heard from experts on strategic policy changes that would make a real difference for the quality and availability of care for older adults in the province, and frontline stories from family caregivers and health care workers in long term care and home support. During the event we launched our action plan to hold our provincial government accountable to their senior's care commitments. Following this meeting, over a thousand members, seniors, families, and workers collectively took action to share their stories with Minister Adrian Dix through our #BetterCareforSeniors postcard campaign calling for an end to for-profit long-term care and increased investment in home support.

Accountability Assembly

On the evening of October 11, the BC Health Coalition and member organizations hosted Minister of Health Adrian Dix at the Accountability Assembly organized by our Seniors Care Working Group. The strength of the Coalition and our allies was well represented with over 150 non-Coalition organizational guests and 24 Coalition member organizations present at the Assembly representing tens of thousands of people. Over 400 people simultaneously gathered at the Assembly to hear stories from seniors, family members and workers who have been impacted by the crisis in seniors care and heard the Minister's responses to questions directly related to his mandate in home support and long-term care.

ANTI-PRIVATIZATION

Report: Concerning Rise of Corporate Medicine

The BC Health Coalition and Canadian Centre for Policy Alternatives - BC jointly published a report on the concerning rise of corporate medicine which revealed that nearly \$400 million in public funds flowed to for-profit surgical diagnostic clinics in BC over the last six years. The numbers showed a troubling continued reliance on outsourcing to for-profit clinics, especially for surgical procedures, instead of investment into the public health care system. We called on the government in the media to ramp down its reliance on for-profit clinics and to enforce regulation around unlawful extra billing.

Cambie Trial

On July 15 a panel of three judges at the BC Court of Appeal unanimously dismissed the appeal launched by Cambie Surgeries Corporation (CSC). The Cambie trial centered around Dr. Brian Day's attempt to strike down provincial health legislation that limits the for-profit delivery of medically necessary services. The appeal was the latest round in the more than a decade-long legal attack on public health care launched by CSC, one of the largest for-profit clinics in Canada. This latest decision upholds the landmark 2020 BC Supreme Court ruling against Cambie Surgeries and underscores the need to strengthen and improve our public health care system, not dismantle it. You can find more information on the Cambie case by visiting www.savemedicare.ca.

Request for Proposal Roundtable

We continued to fight the privatization of our health and social services by facilitating a roundtable on the threat of Request for Proposals (RFPs) processes that favour large corporations over public, non-profit services. The roundtable was the start of an ongoing solutions-oriented dialogue to identify the funding challenges facing both health and social services providers, and identify shared solutions that we might advocate for together.

INTERNATIONAL PANEL ON UNIVERSAL HEALTH CARE

The NC Medicare for All Coalition and the Faith Health Caucus hosted an international panel on January 18, 2022, “Hemispheric Universal Health Care Successes: Cuba and Canada”. Organized by supporters of Medicare in North Carolina, the panel brought together four speakers, including BCHC staff and Co-chair of the Anti-Privatization Working Group to explore the successes of universal health coverage in Cuba and Canada.

GETTING TO TOMORROW: BC’S TOXIC DRUG CRISIS

We held a full-day drug policy educational event on October 3 in collaboration with Canadian Drug Policy Coalition (CDPC). Nearly 60 participants, including members of our Steering Committee, came together to learn more about the realities of the toxic drug crisis and the role safe supply and decriminalization can play in addressing this crisis. At the event, participants affirmed the Coalition’s solidarity with People Who Use Drugs (PWUDs) and advocated for evidence-based progressive drug policy in discussion sessions.

MIGRANT HEALTH & INTERNATIONAL HEALTH STUDENT FEE

We supported grassroots demands for health coverage for all migrants, standing in solidarity with Migrant Students United in advocating for the elimination of the international student health fee. We also celebrated the hard-fought community victory in May of the announcement by the Ministry of Health that individuals with maintained status can access MSP until Immigration, Refugees and Citizenship Canada (IRCC) decides on their application. That victory was only possible due to community efforts by directly impacted individuals and grassroots organizations such as Sanctuary Health.

OUR IMPACT AT A GLANCE



14,589

Monthly “State of BC Health” newsletter subscribers



1,125

#BetterCareforSeniors postcards sent to Minister Adrian Dix calling for an end to for-profit long-term care and an expansion of home support



200+

Organizations participated in an Accountability Assembly holding BC govt accountable to their seniors care mandate



\$36,292.94

Legal Defense Fund expenses for 2021-2022 spent defending public health care in court winning the Cambie case



60

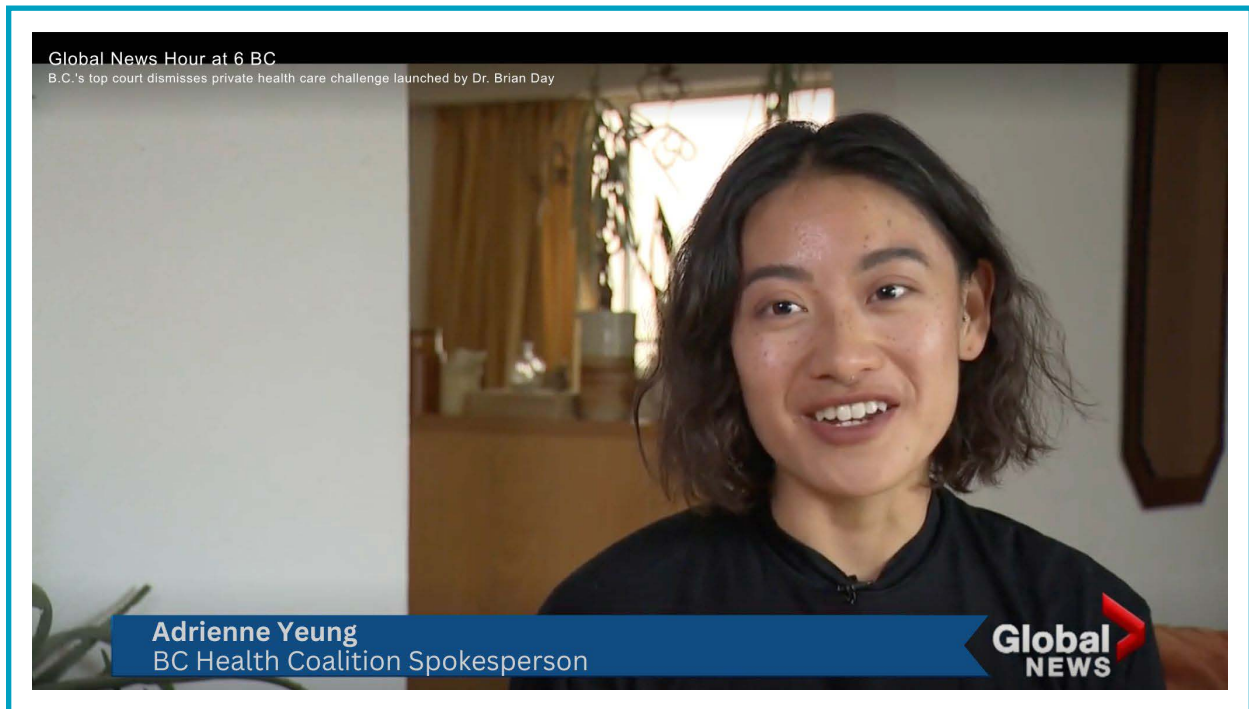
Participants from provincial and Local unions & community groups participated in a Drug Policy Dialogue

BCHC IN THE MEDIA

This past year BCHC spokespeople from staff, the Steering Committee, and Working Groups spoke on a wide range of issues such as surgical backlogs, solutions to improve public health care, clinics charging user fees, use of for-profit surgical clinics, pay for plasma deals, and, of course, the Cambie legal case. Our spokespeople appeared on radio, TV, and print in media outlets such as CBC, CKNW, CTV, Global BC, Vancouver Sun, and the Globe and Mail. A more complete list of BCHC appearances in the media (along with links) is available on our website.

We also mobilized our membership to promote public health solutions in the media. For example, we provided Coalition members with messaging points and background information so they could call-in to a *Situation Critical: CBC Virtual Town Hall* on BC's health care system to promote community-based health care models.

As part of our internal skill-building, the Steering Committee and staff went through a media training this year to help us better represent our issues in the media. A special thanks to Jean Kavanagh and CCPA-BC for partnering with us on the training.



2021 END OF YEAR FINANCIAL STATEMENT

For 2021, we deferred \$67,960 in revenue to 2022 leaving us with a small \$300 deficit for the end of the year. Note the deferred revenue is actually surplus that was generated in 2021. This surplus will be incorporated into the 2022 budget and the organization will have to decide how to handle any remaining surplus in 2022.

As well, we currently hold \$62,054.03 in Total Retained Earnings in Equity. That money is deferred revenue from past years that we've set aside as a "rainy day fund". It represents 25% of our 2020 total expenses. For the past few years, the Health Coalition has made efforts to build our total retained earnings to 25% of our operating expenses as additional financial padding in case we run into a major deficit (for example - due to a major Steering Committee member stepping away).

Finally, we deferred \$229,136.39 from our Legal Defense Project fund from 2021 to 2022. Our Legal Defense Project fund is separate from the operating budget and is used only for Cambie-related expenses. The deferred \$229,136.39 represents the funds from the Legal Defense Project funds we had left over at the end of 2021 to spend fighting the Cambie case in court. We expect Legal Defense Project costs to go up in the following years as we prepare to head to the Supreme Court of Canada.

See below for a breakdown and further explanation of our revenue and expenses for 2021.

BC HEALTH COALITION FINANCIAL REPORT 2021

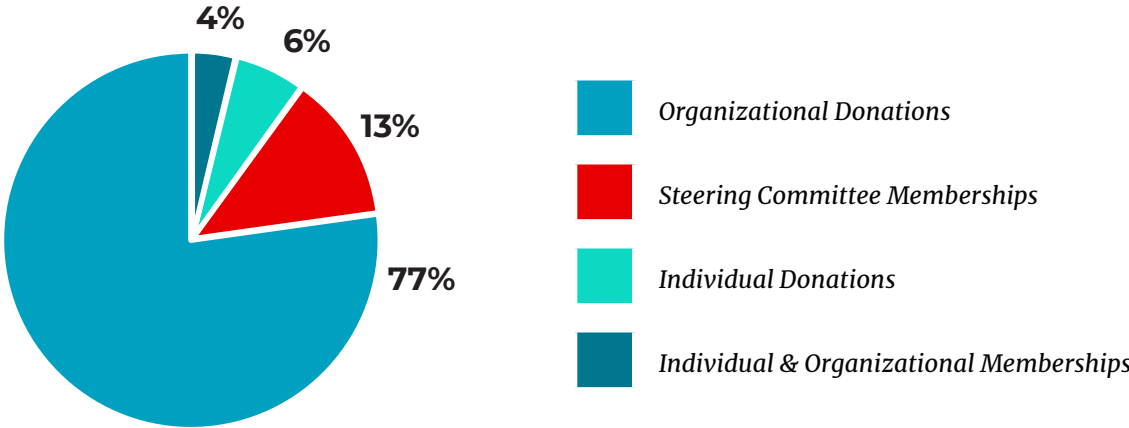
ASSETS	<i>Balance sheet as at</i>	Dec. 31st 2021	Dec. 31st 2020
Cash - Unrestricted		60,608.71	60,016.91
Cash - Restricted		297,957.13	147,579.93
	<i>TOTAL CASH</i>	358,565.84	207,596.84
Accounts Receivable		0.00	0.00
Prepaid Expenses (insurance/rental deposit)		500.00	500.00
Capital Assets, less accum. Amortization		646.86	1,537.12
	TOTAL ASSETS	359,712.70	209,633.96
LIABILITIES			
Accounts Payable		860.74	224.52
Deferred Revenues - GENERAL project		67,960.00	46,480.00
Deferred Revenues - LEGAL DEFENSE project		229,136.39	100,875.41
Deferred Revenues - ASSISTED LIVING project		0.00	0.00
	TOTAL LIABILITIES	297,957.13	147,579.93
EQUITY			
Total Retained Earnings		62,054.03	52,258.77
wCurrent Earnings		(298.46)	9,795.26
	TOTAL EQUITY	61,755.57	62,054.03
	LIABILITIES AND EQUITY	359,712.70	209,633.96

Income & Expenditure Statement

REVENUES	Jan-Dec 2021	Jan-Dec 2020
Steering Committee Memberships	36,575.00	25,500.00
Organizational Donations	218,920.00	212,790.00
Individual & Organizational Memberships	10,402.43	3,270.00
Individual Donations	18,679.32	17,704.26
Federal Gov't Grants	0.00	0.00
Legal Defense Fund Revenues	34,327.34	37,522.67
Interest / Event Revenue	1.82	6.87
Expenses Recovered / Rental Revenue	255.11	500.00
	TOTAL REVENUES \$	319,161.02
EXPENSES		
Staffing Expenses	222,154.83	211,720.61
Campaign Activities	27,682.63	12,257.37
Operating Expenses	35,294.68	25,997.89
Legal Defense Fund Expenses	34,327.34	37,522.67
	TOTAL EXPENSES \$	287,498.54
	SURPLUS / (DEFICIT) for the Year	9,795.26

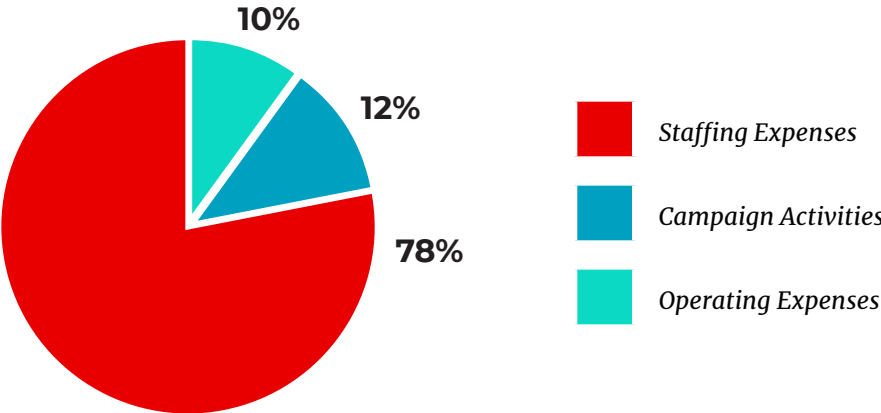
OPERATING REVENUE BREAKDOWN

For 2021 Steering Committee Memberships and Organizational Donations, including Steering Committee organizations who donate above their membership fee, make up the bulk of revenue. In 2021, we had a 31% increase in Individual & Organizational Memberships from 2020 due to a major membership drive involving outreach through direct mail. Still this only represents 13% of our total revenue in 2021.



OPERATING EXPENSES BREAKDOWN

Staffing expenses continue to be the major annual expenditure for the organization. Our Campaign Activities expenses in 2021 were more than double our expenses in 2020. The doubling in Campaign Activities expenses is a result of two non-recurring initiatives that took place in 2021. First, we completely redesigned the BC Health Coalition website. In addition, we held a two-day Reconciliation Workshop for SC members and Working Group co-chairs to meet the organization’s commitment to decolonization identified in the 2021-2022 Strategic Plan. We allocated an \$8,000 honorarium to compensate facilitators. We do not foresee these projects incurring ongoing costs moving forward.

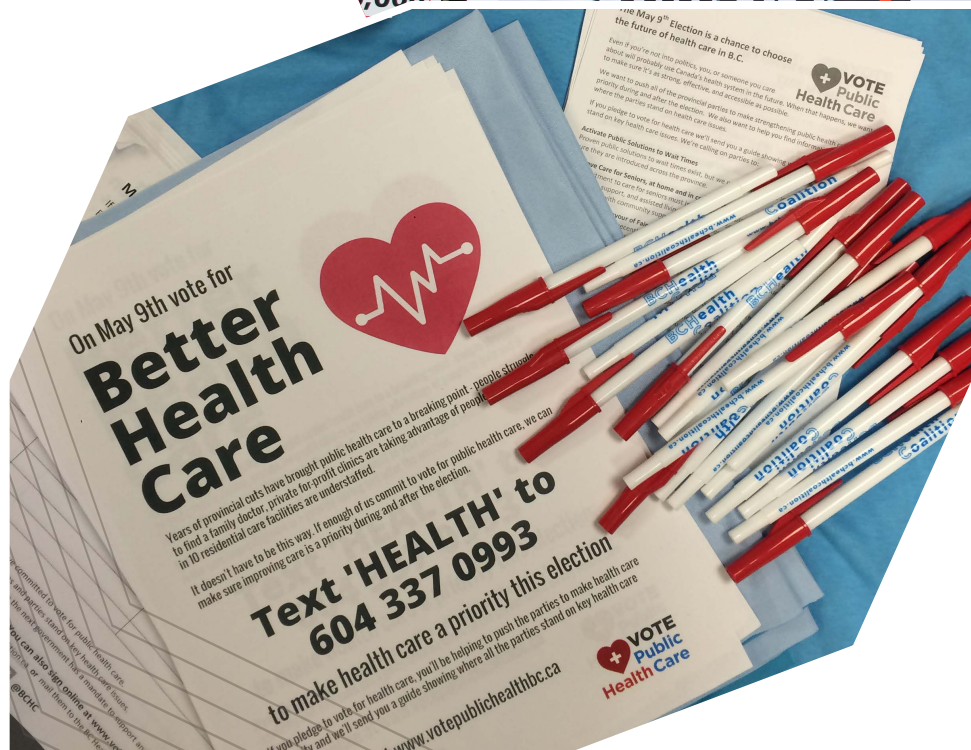


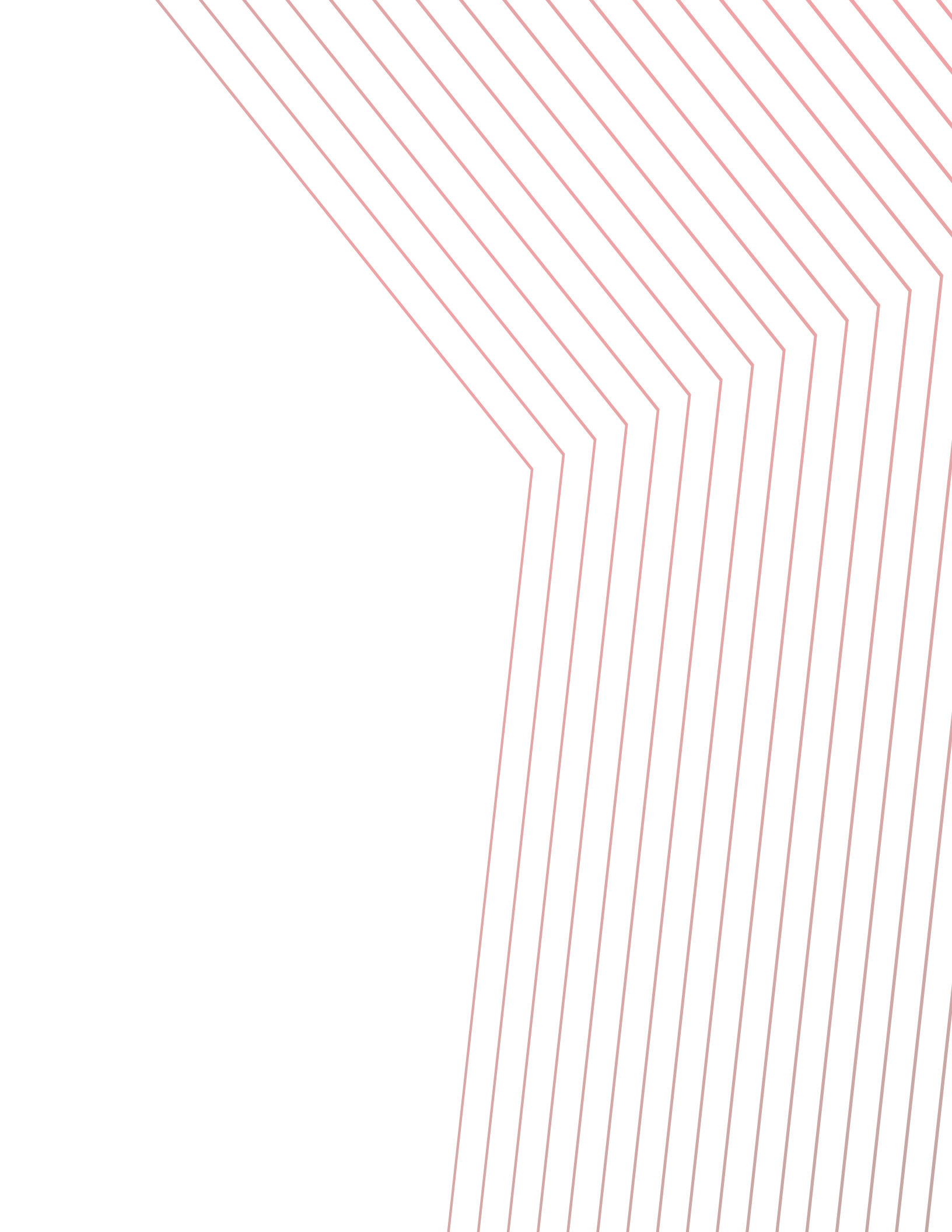
2022 ORGANIZATIONAL MEMBERS

The following organizations, in addition to our Steering Committee members, represent the collective voice of the Health Coalition. Together, these organizations and their members came together this year to demand a better public health care system.

- BC Chiropractic Association
- BC Retired Teachers' Association
- BC Rural Health Network
- BCGREA Branch 2100
- BCGREA Branch 800,
New Westminster & District
- Campbell River,
Courtenay & District Labour Council
- Crisis Centre BC
- Crying Out Loud
- Fraser Association of Family Councils
- HEU - BCG Local
- HEU - Port Alberni Local
- HEU Kamloops - Thompson Local
- HEU PHSA
- Independent Long-Term Care Councils
Association of BC
- IUOE Local 963
- Jewish Seniors Alliance of Greater Vancouver
- Municipal Pension Retirees' Association
- Northern Association of Family Councils
- New Westminster & District Labour Council
- Professional Employees Association
- PEA Health Sciences Association
- PSAC
- REACH Centre Association
- Save Our Northern Seniors
- South Okanagan Boundary Labour Council
- Umbrella Multicultural Health Cooperative
- Vancouver Municipal & Regional Retirees
Association
- Vancouver Island Association of Family Councils
- West Coast Leaf







BCHealth Coalition

302-3102 Main Street Vancouver, BC V5T 3G7

bchealthcoalition.ca

