



Fast

FACTS

CANADIAN CENTRE FOR POLICY ALTERNATIVES - MANITOBA

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The Gaslighting of Manitobans in Health Care

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The health care overhaul has been well-documented in the media, and routinely questioned in the Legislative Assembly, yet transparency and accountability is lacking. In fact, our government has embarked on a communication strategy that can only be explained as gaslighting Manitobans.

Gaslighting is a term that has become common place in the public discourse, especially in relation to our neighbours to the south. The term originated from the 1944 movie, 'Gaslight', about a woman whose husband slowly manipulates her to believing she is going insane in order to steal her inheritance. The term has since been used to explain the proliferation of "alternative facts" and a distorted reality presented by certain politicians and political actors. Gaslighting by definition 'is a tactic in which a person or entity, in order to gain and maintain power makes a victim question their reality.' It is a slow burn of consistent messaging that leaves the audience questioning their own reality to the point that they are led to believe the "alternative facts".

An example of this tactic is the provincial government's treatment of the health care reforms and the disregard of the facts. The average Manitoban does not have the time to embark on a critical discourse analysis on the information from their government officials. However, for me,

someone whose working life centres on reading, discerning and analyzing health care information, gaslighting of Manitobans is in full effect.

The most recent example of this tactic is the recently released assessment of the Phase Two health reforms conducted by Dr. David Peachey. On May 2, the government announced that Dr. Peachey had been contracted to this assessment. This announcement followed weeks of questioning from both opposition parties regarding problems like the closure of the ERs with no plan for the overflow of patients, understaffing at Concordia ER which led to the sudden closure of the ER and subsequent conversion into an urgent care centre, or the unsafe levels of overtime by nurses, just to name a few. The government responded by saying they are fixing a broken system.

The announcement of the assessment was puzzling given their staunch defense and support of the 'Health System Transformation: Blueprint for Change' plan. In the process of the assessment Dr. Peachey himself mischaracterized the interviews with nurses (the only frontline workers consulted). In an open letter to Peachey, the nurses stated they in fact gave Peachey a clear message that job cuts and ER closures were not helping the healthcare system. But the results of Dr Peachey's assessment as presented by the government

there is an alternative.

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in the Legislative Assembly were nothing short of glowing; some minor tweaks needed but overall the plan is going well.

And then on June 10, 2019 a week after the conclusion to the Legislative session, the full assessment by Dr. Peachey is released. The assessment details inadequate staffing, highly stressed staff, lack of planning and risk assessment, care for acute care patients at risk, quality of care at risk, inconsistent inter-facility communication, inadequate funding to St. Boniface, and no patient flow strategy, among others. It stated “confidence has been lost” in the Phase Two yet Dr. Peachey maintained the plan was right, but the timelines were off.

Minister of Health, Cameron Friesen explained that, “We published the report because we don’t have anything to hide. It is clear from this report that not everything went according to plan. I can tell you today it’s not the same system as the one that David Peachey first scrutinized again five weeks ago.” Let’s be honest: five weeks does not resolve the critical issues flagged by Dr. Peachey and front line workers. The Health Minister’s quote is a further example of the gaslighting that is taking place. If in fact they had nothing to hide why did they not release the full report all at once?

To further exasperate the confusion, just two days later, reports emerge of staffing cuts and shift changes reflecting the reality on the front line and the sudden departure of the Chief Medical Officer with the Winnipeg Health Authority. On June 12, an internal memo was sent to St. Boniface staff advising that patients would be temporarily redirected from the ER. The need to redirect patients falls just one week since the closure of the Concordia ER. When the memo was leaked, the WRHA CEO Real Cloutier and St. Boniface CEO Martine Bouchard downplayed the severity of the situation so much so it led emergency room physician Paul Doucet to speak out. In his interview with the Winnipeg Free

Press, he stated, “We were at a critical state in the emergency department... (Bouchard) characterized the memo as alarmist...but I’ve worked 32 years in emergency departments in Winnipeg and I was alarmed.” The fact is capacity is being taken out of the system with the closure of Concordia ER and the impending closure of Seven Oaks ER. We should all be alarmed. Our health care system is hemorrhaging and our government is hiding behind a self-imposed black out.

A government concerned with transparency would not withhold information to be released later, nor would it mischaracterize what is happening in our health care system. It is the duty of our elected officials to ensure information is accurate and not treat what is happening as ‘alternative facts’. Manitobans have a right to accurate information from their elected officials. And with that I say, you left the gaslight on.

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