

In This ISSUE:

President's Message - 1

Provincial News - 2 & 3

Health & Wellness - 4 & 5

Caregiving 101 - 5 - 8

OTIP - 9

EFG - 10

Notices - 11

CHAPTER 13/16 NEWSLETTER

ARM



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WINTER 2022

PRESIDENT'S MESSAGE

By Iain Beaton, President, Chapter 13/16

When you receive this newsletter, it will be only a month until the writ is dropped to begin the campaign period for the provincial election. Every election seems to be important, but rarely have the stakes been so high.

The Ford government has shown, both before the pandemic and during it, how it disregards others as it furthers its own agenda. In education, the environment, municipal governance, housing and health care, the Ontario Progressive (?) Conservatives have repeatedly ignored stakeholders, rewritten the law without due process, made empty promises to correct its failures, and have tolerated - and even sympathized with - a loud, abusive minority that is against authority, good science, and consideration of others.

(I'm thinking of the massive cuts to education announced in 2019, the assault on Toronto's municipal elections in 2018, the repeal of labour improvements as soon as

they came into office, the re-creation of the discredited OMB under another name (LPAT) and frequent use of Ministerial Zoning Orders, the curtailing of environmental assessments, the failure to do *anything* of substance to improve the conditions of residents in long-term care homes after the devastating first wave of COVID, the soft response to businesses ignoring COVID health mandates and to the truck convoy protesters, and the ignoring of expert health advice in favour of a mouthpiece for the Ford government (Dr. Kieran Moore). There's more, but I think you get the picture.)

While it is true that the Conservative government did a number of things right in response to COVID, they also got many things terribly wrong. And the token offerings of a minimum wage hike and cancellation of the license plate fee should not distract us from the continued attack on quality public education and

their desire to further privatize health care, including long-term care homes *and* hospitals.

I urge all of you to get involved in this election. At a bare minimum, become aware of the party platforms and candidates in your riding, and vote. In addition, you can talk to friends and neighbours about the issues. This can be difficult to do, but the democratic election process is too important to not have these conversations.

On top of that, make a donation to the candidate, or party, of your choice; put up a lawn sign; or better yet, volunteer to help on a candidate's campaign.

How can you decide who to vote for? OSSTF will be providing information on the parties' education platforms, and local candidates' positions on several issues. There may be all-candidates meetings you could attend (whether virtual or in-person).

Continued on Page 2

The ARM Newsletter is a publication of OSSTF ARM Chapter 13/16.



The opinions expressed in the newsletter are those of the authors and do not necessarily reflect the views/policies of OSSTF District 13 or District 16.



President's message continued from Page 1

If you want to end Ford's majority in the legislature, then that means identifying the candidate most likely to unseat a Conservative incumbent, of which there are several in York and Durham; usually, in Durham and York, that will mean a Liberal. Already, the District 16 Teacher/Occasional Teacher bargaining unit has endorsed Kelly Dunn, the Liberal candidate in Markham-Stouffville. If the ARM Chapter 13/16 Executive decides to endorse any candidates, we will inform you.

Chapter 13/16 also will be letting you know about any significant election events in either Durham or York. We may be contacting you to see if you want to help out in mobilizing members to get to the polls, and more.

But you can also get in touch with us. If you want to help with OSSTF's

election effort in any way, let us know by [email](#). Everyone has the right to choose who to vote for. But if you decide you want to prevent another Ford majority, and want to make your vote - and others' - count, get involved.

Why, after leaving it up to local school boards to determine what to do on most other pandemic responses, has the Ford government dug in its heels about the end of the mask mandate in schools? The requests for extending the mask mandate for at least a couple of weeks after March Break seemed quite logical and reasonable. (Recall the complete closure of schools after previous March Breaks?) What's a couple of weeks, after two years of pandemic restrictions? It's another case of Ford playing to the "base" rather than listening to local health units and the science advisory panel - better

to keep the anti-maskers happy than to keep everyone safe. Even if COVID numbers do not spike too drastically, it is likely a delay to lifting the mask mandate could have saved several lives, and the anxiety caused as students return to school could have been avoided.

Tuesday, April 12, 2022 is Equal Pay Day in Ontario. It marks the extra 3 1/2 months a woman must work in order to make the same wage as a man. OSSTF/FEESO members are encouraged to wear red on April 12 to support equal pay for women. The Equal Pay Coalition has organized an All-Party Leaders Debate on Women's Economic Justice, to be livestreamed on Facebook April 12 from 7 to 9 p.m. If interested, register [here](#).

PROVINCIAL NEWS

Provincial Election Update for Durham Region Ridings (District 13)

By Cyndie Jacobs, Communications

There are 5 main ridings that cover most of Durham Region and 2 ridings that contain small parts of Durham - one at the eastern edge of Durham and one that covers part of the northern area of Durham. Haliburton-Kawartha Lakes-Brock has long been a Conservative stronghold, being represented by Laurie Scott since 2003. Northumberland-Peterborough South, which is a relatively new riding, is also held by a Conservative - David Piccini.

The 5 main ridings covering Durham Region are as follows:

- Durham is held by Independent Lindsey Park (formerly a Conservative)
- Oshawa is held by NDP Jennifer French
- Whitby is held by Lorne Coe (Conservative)
- Ajax does not have a sitting MPP - Rod Phillips resigned his seat in mid-January. Without an incumbent, there is a better chance of electing an education-friendly candidate.
- Pickering-Uxbridge is held by Peter Bethlenfalvy (Conservative)

For most of us, as retired educators, we want to elect a government that cares about education - our students, their learning conditions and their future. We encourage all members of ARM to become involved, if possible, by working on campaigns, donating to campaigns and - most importantly - by casting a ballot. Jennifer French and Amber Bowen have been endorsed by District 13 and both could use your help. Information and dates for the advance polls will be available soon and will be shared with members through Mailchimp.

Other than in Oshawa, where we hope Jennifer French will be re-elected, the best hope of replacing the incumbents is with Liberal candidates. You can find information on the current Liberal candidates [here](#).

Durham: Granville Anderson (Liberal)

Oshawa: Jennifer French (NDP), incumbent

Whitby: No candidate yet

Ajax: Amber Bowen (Liberal) - currently an elementary teacher.

Pickering-Uxbridge: Ibrahim Daniyal (Liberal)

If you have some time and would prefer to help a candidate running for the NDP, you can find information on the provincial candidates [here](#).

Here's a thought: with the \$120 you will save **not** having to purchase a sticker for your license plate, you could donate that to a candidate and receive a tax credit for 2022!

Stay tuned for more information about the ridings covering District 13...

Provincial Election Update for York Region Ridings (District 16)

By John Pownall, Treasurer

There are ten ridings in York Region and every one is currently held by the conservatives.

That could change on June 2nd if enough education workers and their friends, family and supporters do something about it. As of this moment there are eight nominated Liberal candidates. In each of the ten ridings the Liberals stand the best chance of replacing the incumbent conservatives. Here's who they are:

Aurora-Oak Ridges-Richmond Hill—Marjan Kasirlou. She is an RN at Humber River Hospital.

King-Vaughan—Gillian Vivona. She is a retired OECTA district president. This is Stephen Lecce's riding.

Markham-Stouffville—Kelly Dunn. She is an OSSTF member. She teaches at SATEC in Scarborough. She is endorsed by OSSTF.

Markham-Thornhill—Sandra Tam. She is a retired City of Markham Business Development officer.

Markham-Unionville—Still waiting for a candidate.

Newmarket-Aurora—Dr. Sylvain Roy. He is a neuropsychologist in Toronto.

Richmond Hill—Roozbeh Farhadi. He is a banker and also the husband of Najva Amin, Chief of Staff to Steven Del Duca.

Thornhill—Laura Mirabella. Retired Treasurer and CFO of York Region.

Woodbridge-Vaughan—Steven Del Duca. Leader of the Ontario Liberal Party. He is endorsed by OSSTF.

York-Simcoe—Still waiting for a candidate.

Further endorsements by OSSTF are coming as we get closer to the election.

For updates on candidates, including links to biographies and where to donate, click [here](#)

HEALTH & WELLNESS

The Ontario Health Coalition Virtual Conference

By Rita Moore, ARM Member

In January, I attended a Zoom conference of the Ontario Health Coalition (OHC). The OHC is a group of dedicated people who work tirelessly to protect and grow public health care in our province. It is becoming abundantly clear that this group needs our support as they continue their very important work.

The last time I attended their Assembly was in 2020, shortly before all of our lives were changed by the pandemic. Having attended that meeting and hearing the conditions for staff and residents in long term care (LTC) homes, especially the for-profit ones, it was no surprise when news reports described how seniors in long term care were faring during the pandemic.

At this year's conference, a major focus was on the need to stop the creeping privatization of health care in Ontario. It is difficult, at times, to understand how this privatization happens and what effect it has on the system. New legislation has been passed for more long term care beds but the majority will be for profit. We know from the pandemic that for-profit institutions owe too much to their shareholders and not enough to the vulnerable people in their care. (For details of privatization and where it is happening, it is helpful to spend some time on the [OHC website](#).)

Also on the website, there are links to articles and analysis that help clarify the concerns for our public health care system. You can read what Bill 37 means for LTC in the coming decades. Besides long term care, you will find information about health care and threats to our public system in general, including: home care, hospitals and mental health care to name a few topics. The OHC has regional organizations and you can find them listed on the website. We must hope that if there is another pandemic we will be better organized to handle it.

Another concern raised in the conference was the predictable calls that will come for austerity after all the pandemic spending. The irony of this approach was well articulated by Alex Himelfarb. Years of underfunding public institutions, including health care and education, exacerbated the situation during the pandemic and led to the concern we heard daily of the 'system being overwhelmed'. It is not hard to overwhelm a system that has been neglected for years. He also discussed the difference between 'good debt' that creates and maintains strong public institutions and 'bad debt' that continues to use public funds to enrich the few.

In one of the workshops, Deena Ladd discussed approaches to organizing for change. Two things stayed with me from this presentation: the importance of using creativity and the importance of making alliances. Ladd, from the Workers' Action Centre, described using drama, song, art installations and symbols to encourage participation in actions to get better conditions for working people. She also emphasized the importance of connecting with groups who are like minded. Organizations working for the public good in health, education, childcare, housing and food security, for example, can support each other's efforts by coming to each other's events (on Zoom or in person) and by writing letters to politicians.

In Bob Hepburn's 2021 list of winners and losers for the Toronto Star, he listed as a 'winner', Natalie Mehta, the Executive Director of the Ontario Health Coalition, "*for playing a critical and unheralded role during the COVID-19 crisis in pushing for measures to address health inequities exacerbated by the pandemic and in highlighting continuing problems in long-term-care facilities.*"

I am grateful to her and to so many others who work for us all to ensure more equal access to needed services.

Taxation and Inequality - The argument for taxation as a social good

By Iain Beaton, President, Chapter 13/16

At the Ontario Health Coalition (OHC) Action Assembly on January 29, one of the workshops was on taxes, led by economic analyst Hugh Mackenzie - who may be best known for his work 25 years ago unpacking the Harris Conservatives' assault on education - and bestselling author Linda McQuaig.

McKenzie started off by describing the right-wing attitude toward taxes: tax cuts are good because it increases one's income after taxes; public services supported by taxes are always assessed by their cost, never by their value. The pandemic, though, has shown the tragic consequences of the underfunding of social programs, particularly in health care. Cuts to social spending have caused healthcare non-profit foundations to become dependent on the private sector for charitable donations, which can affect hospital priorities. Is the donation targeted toward what the hospital needs? A donor may fund a new facility, but where are the staffing and ongoing supports coming from? (Outsourcing of lab and other services is another way hospitals have responded to government underfunding.)

McKenzie said political courage is needed to make tax increases possible and palatable to the public, victims of the right-wing argument for the past 40 years. Politicians and government must persuade Canadians that there are values to public services worth paying for - social services, leaves, pensions ... the list goes on.

Natalie Mehra gave an example of the impact of tax cuts on inequality. Ontario has only half the number of hospital beds per capita as Europe. This is an example of Linda McQuaig's point that countries with higher tax rates have better social services than those (like Canada) that have been cutting tax rates. Mehra went on to provide data showing that from 1979 to 2019, real income of the bottom 20% of wage earners in Canada declined, while the top 20% saw income go up an average of 50%. Tax cuts means a huge loss in government income from the large income increases for the wealthy.

This was reinforced by McQuaig, who pointed out that, while the USA has a higher GDP/capita than other countries, this changes when the rich are removed from the calculation. When the top 1% are removed for both the USA and France, France's income/capita is higher than the USA. This is because income inequality is higher in the United States, which means the wealthy skew the overall average significantly.

Calls for a "wealth tax" have been growing. The NDP has advocated a flat 1% tax on wealth over \$10 million, which could raise \$10 billion per year. Polling has shown strong support for the idea in principle - 80% or higher - even a majority of conservatives! McQuaig regards the Luxury Items tax "a joke" since it is too limited. She says the wealthy can bear the burden of higher taxation, but at the moment Canada is not even keeping up with the Americans in this regard.



CAREGIVING 101

The Myth of Aging in Place with Dignity

By Colleen Ireland, Past-President, ARM Chapter13/16

In June 2021, our family began an arduous and trying journey within the healthcare system. We had always been fortunate with health care and counted ourselves as privileged with the benefits and various supports we had until it all became unmanageable with two significant events. A sudden complicating medical issue resulted in the hospitalization of my spouse (Parkinson's and Parkinson's dementia) for a week. He returned home, unable to walk, with no timely outside support. A few weeks later, a deadly illness and open heart surgery befell one of our daughters who had come to help with her father. Within one month, I was the home care support for two people. Another daughter had to come from out of province to assist until any supports were arranged and that is where this caregiver nightmare began.

Angered by the complete lack of meaningful and honest communication with our family by hospital discharge and support agencies, I wrote a "call to action" in August 2021 to numerous politicians, support agencies, media, and community health groups in an effort to make sense of a system that left caregivers floundering and exhausted with minimal to no supports. Three and a half months later, I received a stock reply from the office of the Minister of Health, Christine Elliott. In that time, I had not been idle. I had connected to all of the agencies and groups suggested by the Ministry of Health (MOH). It was a classic "pass the buck" answer. We were told at all levels that "the paperwork was done and you will have supports" - someone just forgot to confirm that help was actually available. Personal Support Worker shortages, COVID restrictions, siloed mind sets, and bureaucracy have resulted in a broken system. I learned that COVID was the easy scapegoat but the system was doomed before the pandemic and people simply said to themselves; "What can we do?" To quote a CBC representative who listened to our cause and interviewed us for a total of 4 1/2 hours, "We cannot find anyone to hold to account."

According to the MOH office representative, hospitals funded by the Ministry are deemed corporations but the Ministry does not "intervene in the care of individual patients." I received the following bits of advice from the MOH:

- a) "We encourage you to work with Home and Community Care Support Services Central East and your daughter's care coordinator as they are in the best position to help resolve any issues related to her home care." *No one took time to listen to our needs in a rural setting or to understand the physical demands placed upon us. It took over 2 weeks for me to get a call from anyone who would be coming to help.*
- b) "Any client or family member who is not satisfied with the services provided by a contracted service provider - including the quality or amount of home care received and the service decisions made by Home and Community Care Support Services - can file a complaint through Home and Community Care Support Services Central East's complaints process." *We did that and no one could be held to account. As long as the paperwork was done, individuals deferred to the next step of the process. Meanwhile, every waking hour was spent supporting our family members. We staged a "sit-in" at one point, refusing to allow hospital discharge of our daughter until we had confirmation that the life-saving PICC line supports were confirmed. Our visiting daughter stood her ground at the hospital while I waited for confirmation that her sister's home supports were in place. In the meantime, I was on 24/7 duty with my spouse who could never be left alone.*

- c) “You also have the option of contacting the Patient Ombudsman for help. The Patient Ombudsman’s mandate is to hear, understand and work to resolve your complaint by working with you and the relevant health organizations”. *This simply is not the case. The Ombudsman, as we were told, deals with issues of process administration not individual cases, and once again we were referred to Central East: Home and Community Care Support Services (CE:HCCSS).*
- d) “Your family may wish to contact The Ontario Caregiver Organization (OCO) if you haven’t already done so. “*Again, already done and while the organization provides multiple supports and resources, lobbying for individuals was not part of the mandate. Understandably, the job is too enormous. Yet again, we were referred to CE:HCCSS.*

The only person to reply in a timely fashion to our concerns expressed in my August “call to action” was MPP France Gelin, the NDP Opposition Health Care critic who recognized that we had been given “busy work”. At the post-Christmas opening of Queen’s Park, MPP Gelin mentioned our case in a list of others who have suffered health care disasters.

Summary:

According to the Ontario Caregiver Association, “*Spotlight on Caregiving 2021*”, caregivers save the government an estimated \$28.5 billion in health care costs. Fighting for supports was taking up all of my time and energy with no respite in sight. Families have been silent for too long.

We have learned a lot during the course of this battle to help my husband age in place with dignity. Primarily, caregivers are on their own and if you cannot afford private care at a minimum cost of \$17,000 /year for one day a week, then you fall victim to a bureaucratic entity which protects itself by shifting blame at every level. At one point, I was told by the patient relations representative at the hospital that she “had my back”. Those have never been encouraging words. I asked what she was going to do to ensure the lack of understanding and poor communication at the hospital level was addressed. That was six months ago and I still have not heard from her.

We have learned that hospitals, as corporations, are concerned with “patient flow”. The movement of individuals in or out of beds is a financial decision which can be reversed with a shift change on the floor. On one occasion, our daughter was told she would remain in the hospital for two more days, given her life-threatening infection and looming open heart surgery. Thirty minutes later that decision was reversed by another doctor because he believed we would have immediate home support. We were forced into combat mode.

We have learned that aging in place is a battle with the caregivers and those they support becoming the casualties. The glossy brochures and “let us help you” messages on voice mail are deceiving and are not in line with what truly happens. Doctors, nurses, PSWs, OTs and physiotherapists struggle within a hierarchy which shows minimal understanding of the impact on families when home supports are not immediately available. We need more voices to join the Ontario Health Coalition call for action and we need to be vigilant as the government attempts to privatize home care and decrease oversight of LTC facilities. Our family is not the only one suffering at the hands of a broken system and more voices are needed to keep the issue front and centre in these trying times.

"For additional coverage of the ongoing crisis in home care, including an interview with OHC Executive Director Natalie Mehra, click [here](#)."

A plea to the opposition critics

I am reaching out to opposition critics for several reasons:

Each of you represents demographics (Women & Seniors) or departments (Health Care), which are directly involved in the attached scenario.

The lack of oversight by provincial governments in regards to Long Term Care, Home Care agencies and the discharge process from hospitals has created, in part, the current fiasco experienced in all of these areas.

Equitable access to home care supports is not a reality and it wasn't before COVID-19. Unless families can pay \$20,000 or more per year for adequate private support, they are destined to resort to LTC, an option which you must admit is a less than ideal option even before COVID-19. Aging in place with dignity is not an option for everyone unless they can pay.

Hospital corporations and their processes are not the mandate of the MOH, according to the current Minister of Health. As such, the discharge process and patient care beyond hospital walls are left to numerous agencies all contracted to support home care. While doctors follow up in terms of medical care, they simply may not be aware of the gaps in care from hospital to home. As long as paperwork is done, the corporation washes its hands of the patient. Caregivers are left on their own trying to manage crucial health care supports alone.

Women carry the majority of the caregiver workload. In general, caregivers save the system an estimated \$28.5 B per year (Ontario Caregiver Organization Spotlight 2021) with no recognition or recompense for their significant efforts. Caregivers are burning out while saving governments billions of dollars in health care costs.

I urge you to put pressure on the current provincial government to take more immediate action in regards to the above issues.

Respectfully,

Colleen Ireland

OTIP

Spring is in the air – Road trip!

Spring is the perfect time to unplug, get out of the house and do some exploring. But you don't have to go far. Ontario is a big province with lots to offer—from beautiful nature scenes to bustling city centres. Plus, you may also be interested in knowing that Ontario residents planning a getaway in Ontario in 2022 could get back up to 20% on eligible accommodation expenses with the new, temporary [Ontario Staycation Tax Credit](#). Another way OTIP is here to help you find ways to save money.

Check out these Ontario road trip ideas that guarantee fun for all ages.

Niagara Falls

Niagara Falls is a popular destination for Canadian and international tourists alike. Horseshoe Falls—also known as “the Canadian side” of the Falls—boasts a 57-metre drop into a part of Lake Ontario known as the Niagara Gorge. Enjoy this natural wonder from one of several lookout points, or join the [Voyage to the Falls Boat Tour](#) for an up-close look at the famous Falls on the waters of the Niagara Gorge.



The Blue Mountains

Hitting the slopes in winter is always fun, but you can spend your day exploring the trails too. A wide range of terrain, difficulty levels, and vertical gains suit beginner to advanced alike at [Blue Mountain](#). You can then unwind at the [Scandinave Spa!](#)

Ottawa

It might be too late to skate along the capital city's famous [Rideau Canal Skateway](#) but you can still grab a [BeaverTail treat](#) at the [By-ward Market](#) in the morning. In the afternoon, visit one of Ottawa's [seven national museums](#), including the National Gallery of Canada and the Canadian Museum of History. For fans of Canadian politics, no trip to Ottawa would be complete without a visit to [Parliament Hill](#) or [Rideau Hall](#). Check out the [City of Ottawa's website](#) for more information on what's open for you to see and do during your visit to the nation's capital.

Maple Syrup Festivals

Spring brings warmer days and frosty nights, causing sap in sugar maple trees to flow up from the roots, and maple harvesting to kick into high gear. Check out the various [maple syrup festivals](#) near you.

Edvantage members save a minimum of 5% with [Landsby](#). Whether you're craving adventure, tranquility or the buzz of a vibrant city, Landsby is brimming with ideas to enrich, educate and inspire. From the stillness of our lakes to the majesty of our forests, to the colourful eclecticism of downtown Toronto, Landsby's team will guide you to the best that Canada has to offer.

Not all road trips can go as expected, so it's important to review your insurance policy ahead of time and know what you're covered for. You can then begin your next road trip adventure with the peace of mind that you and your loved ones are protected.





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NOTICES

Charitable donations from Chapter 13/16

The Executive of Chapter 13/16 has approved a motion to donate funds to four organizations that need support during these difficult times: two in Durham and two in York.

- In Durham: North House and Community Care Durham
- In York: 360 Kids and Blue Door



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SUBMIT YOUR RETIREMENT PHOTOS

If you have a photo you would like to showcase in the
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