

# Ontario's healthcare crisis deepens as Ford's Tories accelerate privatization drive

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Ontarians go to the polls in Thursday's provincial election amid an unprecedented healthcare crisis. Dilapidated and understaffed hospitals, the chronic shortage of family doctors and the abandonment of key public health measures are part of a disastrous situation produced by the austerity policies of successive governments. Premier Doug Ford's Progressive Conservatives, who appear set to win a new majority, are exploiting the crisis to push ahead with healthcare privatization.

In an effort to spotlight the crisis, one of the largest unions in the sector staged a demonstration as part of a press conference outside the provincial legislature in Toronto, Queen's Park, on January 29. Speaking in front of a line of hospital stretchers, the Canadian Union of Public Employees Ontario Council of Hospital Unions (OCHU-CUPE) president Michael Hurley stated, "The entire healthcare sector is staggering. There is no end to the staffing shortages; ER closures, waits for surgeries or for long-term care beds or for a family doctor or for appropriate home care services."

The union declared that the stretchers would travel to communities across the province to draw attention to the dire conditions in the healthcare sector. The grim details catalogued on the OCHU-CUPE website include that 2.5 million people in the province of 16 million inhabitants are without a family doctor and 250,000 are waiting for surgeries, thousands of whom will die on the waitlist. Nearly 50,000 people are waiting for long-term care and some of those in palliative home care are dying without painkillers and medical supplies. Small towns are experiencing constant Emergency Room closures due to lack of resources and the number of people being treated in hospital hallways has more than doubled since Ford vowed to end the practice, labelled "hallway medicine," in 2018.

The Ontario Health Coalition (OHC) has published statistics that show the province maintained a lowly 2.33 hospital beds per 1,000 population in 2021. That is well below the average of most other provinces at 3.2 per 1,000 inhabitants and well below Newfoundland and Labrador at 4.43 per 1,000.

## The Ford government's privatization of public healthcare

These devastating figures have been long in the making. When Ford came to power after 15 years of Liberal Party rule in 2018, the province's public healthcare system was in deep crisis due to the Liberals' savage austerity measures aimed at balancing budgets at the expense of desperately needed social services. In the intervening seven years, Ford has presided over a murderous response to the COVID-19 pandemic, which has officially killed over 16,000 people in the province and driven the healthcare system to the breaking point. Many workers have left the sector or the province due to horrendous working conditions.

Ford and the Tories' drive to destroy public healthcare is a deliberate

policy. While the pandemic was raging in 2021, Ford took decisive steps to massively expand healthcare privatization. He issued licenses to allow private providers to offer eye surgery in January 2021 and redirected \$24 million of public funds to private providers later that year. Then in January 2023, Ford unveiled plans to open privately run day hospitals in three cities and redirect tens of millions more to private providers. He declared that half of all surgeries performed in the province could either be cut or privatized. According to the OHC, "thousands" of surgeries were redirected to the private sector during 2023.

Last year, the Ford government opened a new round of licenses to privatize MRI and CT scans in June. Two months later, it issued licenses for private providers to assume responsibility for 60,000 gastrointestinal endoscopies. At the same time, funding for private clinics rose by 200 percent during 2023 and 2024, while the government has consistently underspent its budget for the public healthcare system.

Another way the public healthcare system has been undermined is through the increased use of agency staffing services to fill the gaps produced by chronic understaffing. Private agencies charge exorbitant fees for nurses and other healthcare professionals, who enjoy far fewer rights and less job protection than they would in the public sector. As the OHC concluded in a 2024 briefing note, "The picture is clear: drive the public system into the ground and use the resulting crisis to privatize."

The government deliberately and consistently underspends on its annual allocations for public services. More than \$7 billion went unspent during 2022-23, including \$1.6 billion for healthcare. Of that, about \$416 million was shaved from public health, \$341 million from reduced COVID-19 testing and vaccines, \$279 million from the operation of hospitals and \$137 million from home care.

Almost a year ago, in April 2024, the Financial Accountability Office (FAO) of Ontario released a report detailing that Ontario's healthcare spending was the lowest in Canada per capita and below the average of other provinces in the 2022-2023 fiscal year. In Ontario, according to the report, healthcare spending per capita in 2022-2023 was 15.2 percent below the average of other provinces.

The report specifically noted that "Since 2008, Ontario's health spending per capita has consistently ranked at or near the lowest in Canada." This fact underscores that all three of the major parties in the Ontario legislature who have either governed directly, like the Progressive Conservatives and Liberals, or propped up a minority government, as with the New Democrats, are complicit in allowing the current state of affairs to develop.

In June of last year, the FAO released another report that stated the Ontario government had allocated \$3.7 billion less than what was needed in 2024-2025 to fund existing programs and its announced commitments for children, community and social services. The Ford government brushed off that report with its usual disdain for the agency's work, but it is an accepted fact that starving social services of funding leads directly to increased pressure on healthcare resources and therefor further

justifications for privatization.

While hospitals are bearing the brunt of the Canadian ruling elite's assault on healthcare provision, no area is being spared. The desperate shortage of family doctors in Ontario was summed up by the scene in mid-January in the town of Walkerton about 150 km northwest of Toronto. It was announced that a new family medicine practice would be accepting new patients in the town of 5,000. About a thousand people began lining up at 2 a.m. in -10 C weather on the registration day, but only 500 places were available. Those who weren't lucky enough to be at the front of the line had to make do with a spot on the waitlist, which quickly filled up with another 500 names.

The Ontario Medical Association expects the current figure of 2.5 million Ontarians without a family doctor to double in the coming years as more physicians retire.

The cancellation of the province's wastewater surveillance program last summer was the perfect example of the government's priorities when it comes to public health. The extremely cost-effective program, which was the largest in Canada and a world-leader in research, had the ability to rapidly respond to new COVID variants and identify developing infectious disease threats, including respiratory viruses and bird flu. The program was cancelled with the excuse that province's 58 monitoring sites were an unnecessary duplication of the 5 sites to be operated in the province by the Public Health Agency of Canada.

### **The complicity of the unions and Trudeau's Liberals in the destruction of public healthcare provision**

Ford has been able to proceed so ruthlessly because his government could count on the trade union bureaucracy to smother working class opposition to his onslaught on public services.

OCHU-CUPE's protest stunt cannot disguise the fact that CUPE and Unifor, the other major union in the healthcare sector, have together with the Ontario Federation of Labour (OFL) and other unions affiliated to the Canadian Labour Congress (CLC) systematically suppressed the class struggle in the face of Ford's attacks. In 2022, they were involved in derailing a burgeoning movement in the working class for a general strike in support of 55,000 education support workers who defied the Ford government's draconian preemptive ban of their strike.

Two years on, as the *World Socialist Web Site* noted in an article previewing the election, "important sections of the union bureaucracy, including many of the building trades unions and sections of Unifor, are now plumping for a vote for Ford and his Tories." Laura Walton, the president of the OFL, wants to establish a corporatist alliance with the Ford government and leading businesses in the province, which will be tasked with making workers pay to protect the interests of corporate Canada in the looming trade war with the US.

Although the healthcare crisis in Ontario is extreme, it is by no means exceptional. The Trudeau Liberal government, continuing where its hard-right predecessor left off, has imposed real-terms cuts on health and social transfers to the provinces since 2015, ensuring that Canada's public healthcare provision has been systematically eroded over the past decade. It worked closely with the provincial governments to enforce the "profits before life" pandemic policy to protect the profits of Canadian big business at the expense of workers' lives and wellbeing.

Throughout this period, the closest ally of Prime Minister Trudeau—who oversaw the redirection of the resources cut from healthcare and social programs to waging war around the world, rearming the military, and enriching the financial oligarchy—were the trade unions. They hailed Trudeau as a "progressive" ally in the fight against the likes of Ford and

other Conservatives. In keeping with this line, the union-sponsored New Democrats have propped up Trudeau's minority government since 2019.

The OCHU-CUPE represents 60,000 members in Ontario's hospitals, long-term care facilities, community care access centres and emergency services. They, along with four other unions including the Ontario Nurses Association, the Ontario Public Service Employees Union, Service Employees International Union Healthcare and Unifor represent more than 300,000 healthcare workers across the province. According to national employment service numbers, they are just some of the more than 900,000 people employed in Ontario's healthcare and social assistance sectors, comprising 12.1 percent of Ontario's total workforce in 2022.

Those numbers represent enormous social power in a sector that is in a state of crisis. But the unions have refused to call for the mobilization of healthcare workers alongside other sections of the working class to defend public healthcare in the face of Ford's privatization drive, and Trudeau's redirection of society's resources towards war and the oligarchy. They subserviently accept the application of the Hospital Labour Disputes Arbitration Act, which bans tens of thousands of frontline healthcare workers, including nurses, from taking strike action and mandates a government-appointed arbitrator to settle all labour disputes.

The fight to defend public healthcare in Ontario and across the country must be taken up as part of a struggle to defend all public services and worker rights against capitalist austerity and war. Healthcare workers must break from the straitjacket imposed upon them by the union bureaucracies by forming rank-and-file committees to prosecute their struggle in opposition to the rigged collective bargaining system that allows the gutting of public healthcare and the privatization of core services. Securing healthcare as a social right demands above all a political struggle for workers' power to redirect society's vast wealth to meet the urgent social needs of the vast majority of the population. This is the program fought for by the Socialist Equality Party.



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