



Engaging Canadians: Leadership for Change

Speaking Notes for

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1. Introduction

Good morning everyone. It's great to be with you today.

I want to thank the good folks at Providence Care, particularly CEO Dale Kenney and Conference Host Lauri Prest for their kind invitation to join you. And a special thanks to Gord MacDougall and St. Lawrence College for sharing this beautiful campus with us today.

I want to congratulate them for modeling what they teach by bringing together such a wide variety of people to explore critical questions through collaborative thinking. And also for their willingness and yours to step out of our traditional "comfort zone" and engage in a World Café.

I've read a little bit about the World Café, and I very much like its metaphor of "cross-pollination" of ideas. We know that we are, as a country, facing a number of urgent challenges. If we hope to resolve them in a way that will build a stronger Canada in the 21st century, then we're going to have to find new ways of engaging with each other, having meaningful conversations, asking the right questions and seeking answers that will lead to change.

I should also say that it is a particular pleasure for me to join you in historic Kingston. For purposes of today's gathering, it's perhaps germane to note that the St. Lawrence Iroquoians, who lived in this area for several hundred years, established a strong trading empire built around people sitting down together in lengthy discussion sessions and asking simple, but important questions like: What do you have that we need? What do we have that you need? How can we exchange goods and information in a way that will benefit our society and enable our mutual survival?

The participants in today's session come from many different sectors – you're involved in Health Care, Children and Youth Services, Community and Social Services, Justice, Environment, Labour, Transportation, and Natural Resources to name quite a few. Some of you work in government, others are from the academic world – faculty and students here at St. Lawrence College and at Queen's University.

One thing that you have in common is that you are all in some way leaders in your respective communities. Leadership that plays out day-to-day on the public stage, but also from what we do in our communities each and every day.

As we know, true leadership is always vital, but it is rarely easy. Someone once said that when you're a leader, there are days when you wake up feeling like the javelin competitor who won the toss of the coin and elected to receive. Believe me, I know that feeling, as I'm sure you do. Many of us have the scars to prove it.

2. The Concept of Leadership

The concept of leadership has been much discussed. Books have been written – seminars held, yet, it remains somewhat elusive to define.

For example, the great baseball philosopher Casey Stengel once described leadership as “the art of keeping the five people who hate you away from the 20 who are still undecided.”

Consumer activist Ralph Nader, not surprisingly, took a very different approach. He said, “I start with the premise that the function of leadership is to produce more leaders, not more followers.”

But the quote I like the best comes from anthropologist, Margaret Mead, who offered these inspiring words about leadership for change, “Never doubt that a small group of thoughtful, concerned citizens can change the world. Indeed it is the only thing that ever has.”

For me, this speaks to the potential of citizen engagement as a force for transformation.

And, today, more than ever, citizens are demanding the right to be involved in making the decisions that are shaping their world. They are sceptical of the notion of elites – whether political, institutional, corporate or any other forms – making decisions for them.

So, they are sending a very loud and clear message that leadership in the 21st century is no longer about “command and control” but about “inform and engage”. Those who ignore this message, do so at their peril.

Here's a good example. We are on the threshold of a national election, or were until yesterday. Still, it could come sooner or it may be later.

Our leaders should be looking at this event as a significant opportunity to discuss the challenges that we collectively face as a nation, and then to make some major choices of direction.

But instead, it seems that people are increasingly turning away from the political process because they feel that the political process has turned away from them.

Moreover, trust in Canadian government and public institutions seems to be declining. You'll recall that in the last federal election the participation rate was about 59% – the lowest in Canadian history. Participation rates in provincial and municipal elections are even lower and most noticeably the lowest is among Canadian youth – our future.

We have a challenge on our hands.

3. Engaging Canadians

So how do we engage Canadians – especially young Canadians – in a discourse about our country's future? How do we ensure that this discourse results in real public policy changes that will improve the quality of life for Canadians?

Well, we start by asking the right questions. What's really important to us? What matters most? How do we hold on to our uniquely Canadian values of caring and compassion, community and cooperative action, diversity and discourse – instead of succumbing to the siren call of individualism – as the cure-all?

And, this debate – these questions – must begin with Canadian values. Understanding them and building policy upon them. For me, what lies at the heart of positive leadership and good public policy change is a strong commitment to core Canadian values.

After all, values are what define us. They provide guideposts for how we can move forward as a society – how we overcome challenging times, how we can inspire our citizens, and how we can be confident that the decisions we make and the paths we choose reflect our vision as a society.

Values-based policies enable us to overcome the many challenges facing our nation while strengthening who we are as individuals or what we aspire to be. Values provide us with a sense of connectedness and grounding that enable us to deal with an ever-changing world.

4. The Royal Commission

I've had some experiences that have shaped my belief in values as the foundation of good public policy.

When I had the privilege of being appointed Commissioner on the Future of Health Care in Canada, I made two promises to Canadians. The first was that I would engage them in a broad national dialogue – because medicare ultimately belongs to the Canadian people. The second was that my recommendations would be values-driven and fact-based.

Of course, I wanted to test my own biases; to see if they were still relevant; to see if the values that shaped Canada's national narrative and that I have believed in so strongly all my life were still the values of Canadians.

So, early in my mandate, I challenged those with other values – those who believed more in individualism and in the primacy of the marketplace – those whose values pointed them to health-care solutions like user fees, medical savings accounts, greater privatization, or a parallel private health care system – to show me evidence that their approaches would improve and strengthen our health-care system. And, that these solutions were consistent with our society's values.

Friends, that evidence simply wasn't forthcoming – then or now. Because on both counts – it simply doesn't exist.

What was forthcoming, however, was Canadians, in city after city and province after province, making it very clear to me that they still strongly supported the core values on which our health system was premised – equity, fairness and solidarity. They reflected our society.

And so, when I brought forward my final recommendations they were built around charting a course for renewing, strengthening, and sustaining medicare in a way that was consistent with Canadian values and consistent with the evidence.

A course that would transform our health care system from one in which a multitude of participants, working in silos, focus primarily on managing illness – to one in which they work collaboratively to deliver a seamless, integrated array of services from prevention and promotion to primary care, to hospital, community, mental health, home and end-of-life care.

A course that would focus us on the broad determinants of health.

It was my responsibility to chart a clear and unambiguous course. And I did. Many will agree with you. Some may not and, most certainly, you'll hear about this group – sometimes on your morning radio.

Leadership also means that sometimes you have to go through fire if you want transformational change. That's a lesson that President Obama and his congressional supporters clearly learned this summer. And it's the same lesson Tommy Douglas learned in Saskatchewan when he created North America's first universal program of health care.

But friends – in the end – history will judge and vindicate visionary leaders who pursue programs based on the values of society.

5. The CIW

Friends, these ideas of renewal based on Canadian values and focusing on determinants, are ones that have dominated my thoughts and my actions since I finished my work as Commissioner.

A few years ago, I was asked by the Atkinson Charitable Foundation to take on a new leadership role as Chairman of the Advisory Board for the Institute of Wellbeing. This past June, we officially launched the Institute along with its signature product, the Canadian Index of Wellbeing or CIW.

Our mission is to regularly and publicly report on the quality of life of Canadians; encourage policy shapers and government leaders to make decisions based on evidence; and empower Canadians to advocate for change that responds to their needs.

The Canadian Index of Wellbeing has begun tracking and providing unique insights into the quality of life of Canadians – in eight interconnected categories that matter. These are – our standard of living, our health, the vitality of our communities, our education, the way we use our time, our participation in the democratic process, the state of our arts, culture and recreation and the quality of our environment.

Our ultimate goal is to be able to convert all eight areas into a composite index, much like the GDP or the TSX or Dow, including a single number that will go up or down to provide a quick snapshot of how our quality of life is changing, for better or worse.

And, I must say that Canadians can be very proud of the fact that our country is at the leading edge of a global movement that is creating new and more holistic ways of measuring societal progress.

The OECD and many individual countries have committed themselves to this effort. I spoke 2 years ago in Istanbul at the OECD 2nd World Forum on Measuring and Fostering the Progress of Societies about our project. About 18 months ago, President Sarkozy of France appointed a commission that included two Nobel laureates – one being Joseph Stiglitz – to recommend more balanced and comprehensive ways of measuring wellbeing.

They released their report earlier this week and President Sarkozy has promised to champion a similar revolutionary new approach to quality-of-life issues – one that puts them on equal footing with GDP. In fact, he said he intends to raise the issue at the G-20 meeting next week.

Given the nature of our discussions today, it may interest you to know that our work in Canada grew out of a simple question that was posed nearly a decade ago at a meeting of about 50 community advocates who got together to talk about long-term solutions for increasing social and economic justice.

One person at the meeting posed the question, “What if every time Canadians heard about GDP, TSX or DOW, they also got quantitative data about a wide variety of other social, economic and environmental factors?”

The idea was based on the very astute observation that what we count matters. What we count helps shape the dialogue in this country – on the factory floor, around the water cooler, in the media and in the corridors of power. What we count often influences the policy agendas and decisions of governments.

After all, as the legendary Canadian economist, John Kenneth Galbraith said, “If you don’t count it, it doesn’t count.”

Returning to our June launch, we issued our first report, summarizing our findings in three categories – Living Standards, Healthy Populations and Community

Vitality. The title of the report was in the form of a question: *How are Canadians Really Doing?*

First, our *Healthy Populations* study clearly showed that while Canadians are living longer, we are not living healthier.

The good news is that a Canadian born in 2005 could expect to live to over 80-years old – an impressive jump from 75 years in 1979. Women still live longer than men though men are catching up.

The bad news is that when we take into account the limitations brought on by disease and disability, the number of years Canadians live in full health peaked in 1996 and has dropped since. And, while women may live longer than men, often they do so in poorer health.

One reason for all of this is that we're putting on weight – and it's making us sick. Excess weight is the single most important cause of diabetes, and diabetes rates have almost doubled over the past 10 years. I find that pretty shocking when you consider that the consequences of diabetes can be heart attacks, blindness, limb amputation and even death.

Canadians' rating of their health status has also declined across the board in recent years and the sharpest drop has been among youth – the group we think of as the healthiest in our society and our hope for the future.

In 1998, more than 80% of 12–19-year-olds reported “excellent” or “very good” health, but by 2005 this had plunged to 67%. We're also seeing a steady increase in the number of teenagers reporting problems with everyday functions like memory, thinking and mental wellbeing.

But even worse, is the health situation among Aboriginal Canadians. The Aboriginal life is a tragically short life. While we're starting to see some small progress, the health gap between Aboriginals and non-Aboriginals is still unacceptably large. Diabetes rates are several times the Canadian average and rates of other chronic diseases are considerably higher. Most worrisome is that the leading causes of death for Aboriginal peoples aged 44 and under are suicide and self-injury. This is a national shame!

Our findings on the *Living Standards* of Canadians are just as bleak. During the so-called “boom period” from 1981 to 2007 it turns out that the lion's share of the

benefits went to the wealthiest 20% of Canadians. Inequality increased, with the rich getting richer, the poor staying poor and the middle class muddling through.

Now, with the current recession, it's largely poor, middle-class and unemployed Canadians who are being hit the hardest. And, that's what happens during recessions.

While it's somewhat comforting to know that the recession may be starting to end – at least from a technical point of view – the reality on the ground is that it will be many years before Canada returns to the unemployment and poverty levels that existed before the recession. In fact, after the recession of the 1980s, it took seven years for Canada's unemployment rate to return to pre-recession levels.

As we know, when unemployment goes up, so does poverty, but it takes even longer to come down. During the last recession, unemployment rose by about 4 percentage points, as did the poverty rate. But even after unemployment started falling, poverty kept rising for another three years.

Our *Community Vitality* study brings more optimistic news. Canadians have strong social relationships. Volunteerism and membership in organizations is growing. Compassion for others is growing. We report high levels of social support, extending assistance to family, friends and neighbours.

Crime is down. The national crime rate dropped by 30% between 1991 and 2006. Personal and violent crimes are both down.

Trust is relatively high. A majority of people in every province and territory believe that people can be trusted.

We feel we belong. Canadians express a strong attachment to their local community.

But, visible minorities still report discrimination. Despite these good news stories, visible minorities report feelings and acts of discrimination – a worrisome finding in a country proud of its tapestry of newcomers from around the world.

So, we know what faces Canada today and what public policies need to be implemented to look after our citizens.

As I said earlier, one of the goals for our new Institute is to break out of the straightjacket imposed by silos. Because the types of things that I've just talked about

don't happen in a vacuum. They aren't isolated from one another. And until we start connecting the dots, we're just going to be spinning our wheels.

In broad strokes, our first reports re-affirmed earlier studies that the wellbeing of Canadians is very much related to their income and education levels. People with higher incomes and education tend to live longer, are less likely to have diabetes and other chronic conditions, and are consistently more likely to report excellent or very good health.

The stark reality is that household income continues to be the best predictor of future health status. The formula is straightforward: more income equals better health, less income equals worse health. This is true in all age groups and for both women and men.

The health-wealth link explains, at least in part, the increased health problems we're seeing among young people. Their unemployment rate is now about 20%. Among those working, the percentage in low-paid jobs has skyrocketed.

When we then add on the large debts with which many students are graduating from post-secondary education, we have to wonder if we're not depriving an entire generation – or at least the better part of it – of a chance for economic and health security.

As this suggests, poverty isn't an equal-opportunity condition. Some groups are far more likely to be poor than others: lone parents, unattached individuals aged 45-64, recent immigrants, persons with work-limiting disabilities, and Aboriginal people together add up to 62% of persistent low-income persons, even though they make up only about 25% of the population.

We've also connected the dots between past public policy decisions and changes in the quality of life of Canadians, some for better, others for worse.

As an example, the expansion of child benefits through the Canada Child Tax Benefit (CCTB) and the National Child Tax Supplement (NCBS) has helped reduce the incidence and depth of poverty in Canada.

On the other hand, changes to Employment Insurance have made this program less generous in terms of required qualification period, coverage, and duration of benefits. These changes have increased the financial risks to economic wellbeing. Hopefully, parliament will act quickly on this.

Financial risks have also increased in Ontario due to the delisting of certain medical services and the huge cost of prescription drugs. The cost of out-of-pocket spending on health care has shot up from \$2.3 billion in 1981 to \$16.5 billion in 2007 – mainly due to prescription drugs: more of them and more costly – outside of our medicare. We need action, here, too.

Friends, if one lives in a world of silos then you see low income, poor health and high medical costs as three different problems. But once you start connecting the dots, we see that they are all parts of a vicious cycle: poor people have more health problems, they need more medical services, they can't afford them so they cut back on medications or diagnostic tests, or they pay for them by cutting back on other things like nutritional foods or sports equipment for their kids, which of course leads to more illness and lost time at work, which in turn results in lost income and jobs, which creates more poverty.

Again, it's pretty clear what Canada should be doing.

Good public policy can break this cycle. But we have to take a holistic and integrative approach that sees the full person and full problem. You have to separate cause from effect and focus on upstream solutions instead of downstream symptoms. It's more sensible, more effective and in the long-run much cheaper.

That's the big national picture. You may be asking yourselves, where do I fit into it? What can I do in my community? How can I lead?

6. Conclusion

Now, more than ever, we need to root ourselves and our work in the values that have shaped this great country: values – fairness, diversity, equity, inclusion, health, safety, economic security, democracy and sustainability.

Now, more than ever, we need leadership that is informed by sound, trusted, and regularly reported information about how we are really doing and what's really going on in our communities.

Now more than ever we need to engage people in the process of change, to end their feelings of isolation, alienation and helplessness. Now, more than ever, is the time to recapture the moral and political strength to see ourselves in our own place, in our own time, informed by our own values, and within our own actual narrative, as an

independent nation, worthy of the respect of a world that needs an even better Canada. That's our task and I know we can do it, together.

Thank you again for inviting me to be with you today. I wish you the best of luck in your work today, and beyond.