



Import



A WEEKLY REVIEW OF DEVELOPMENTS IN HEALTH AND HUMAN SERVICES

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Welcome to this edition of Import. In it you will find summaries of new and interesting issues and developments in health and human services, as well as "In My Humble Opinion," a short analytical article by an Agora Group affiliate. Please feel free to visit The Agora Group's web site, which can be accessed by pressing the "our affiliates" button on the Consultant Network web site: consultant-network.ca.

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ONTARIO RELEASES HOSPITAL INFECTION CONTROL AUDITS

On January 13 Ontario released the results of infection control audits completed in December and January by all hospitals in Ontario. The audits were ordered by Ontario's Minister of Health and Long-Term Care after several breaches of infection control that potentially endangered patients were made public late in 2003.

Although the audit results revealed that eight hospitals had experienced infection control problems, they also confirmed that all hospitals have done a thorough review of their infection control procedures and now have proper infection control measures in place.

The *Hospital Infection Control Audit* results are available as a 27 page PDF file at http://www.health.gov.on.ca/english/public/pub/ministry_reports/hosp_infec_control/hosp_infec_control.pdf.



YORK U. CREATES LISTSERVE ON SOCIAL DETERMINANTS OF HEALTH

York University's School of Health Policy and Management has established a listserv on social determinants of health – an international forum for exchange of e-mail messages about the latest developments in theory, research and practice regarding the social determinants of health. In announcing the new listserv its sponsors say:

“Social determinants of health are the economic and social conditions that influence the health of individuals, communities, and jurisdictions as a whole. Social determinants of health determine whether individuals stay healthy or become ill. Social determinants of health also determine the extent to which a person possesses the physical, social and personal resources to identify and achieve personal aspirations, satisfy needs, and cope with the environment. Social determinants of health are about the quantity and quality of a variety of resources that a society makes available to its members.... Since a social determinants of health approach sees the mainsprings of health as being how a society organises and distributes economic and social resources, it directs attention to economic and social policies as means of improving health. A social determinants of health approach is explicitly political.”

People can join the listserv by sending a message to listserv@yorku.ca and including these words in the message section: **subscribe SDOH firstname lastname**.

The listserv's driving force, Professor Dennis Raphael, points out that a number of Americans and Australians have already joined the listserv, increasing its value as an international ideas exchange.

BC BED AND BREAKFAST OPENS FOR THOSE WITH DIGESTIVE PROBLEMS

Vacations can be a major challenge for people with Crohn's Disease, Ulcerative Colitis, Irritable Bowel Syndrome or Celiac Disease, since it is often impossible to find carbohydrate-free meals. Natalie Pawlenko and her partner Yuri have made trips to Canada's west coast easier by creating Mayhill, a bed-and-breakfast specializing in special carbohydrate diets. Located on 18 rolling acres near the town of Duncan, one hour north of Victoria BC, Mayhill is the first such facility in North America.

Natalie is well known to many of our readers, since she worked for many years as a planner with the Toronto District Health Council before moving to BC as a lifestyle choice. Mayhill's web site is at <http://www.geocities.com/natpaw/Mayhill.html>.

WINNIPEG EMERGENCY CARE TASK FORCE NAMED

On December 16 Manitoba Health Minister Dave Chomiak appointed an Emergency Care Task Force for the Winnipeg Regional Health Authority (WRHA). The Task Force has been asked to report back with an interim plan by next week concerning its assignments:

- listen to patients and families who have concerns about their emergency care experiences
- work with emergency department staff, hospitals and the Office of the Chief Medical Examiner to develop further improvements to emergency care in Winnipeg



- oversee implementation of improvements to emergency care in all Winnipeg hospitals.

Chomiak has also written the chair of the National Health Council asking it to address emergency care wait times and standards as its first priority.

These moves come in the wake of a number of complaints, many from pregnant women in Winnipeg, about poor emergency service from Winnipeg hospitals, and the recent case of a woman who had a miscarriage after a six hour wait in the Victoria General Hospital emergency department. The Canadian Association of Emergency Physicians blames the delays on a shortage of hospital beds.

HALIFAX TO BOOST EMERGENCY SERVICES

On January 15 Nova Scotia's Health Minister Angus MacIsaac and Don Ford, president and CEO of Capital Health, revealed a 10-point plan to relieve emergency room pressures in the health district. Said Ford, *"Our health statistics are among the worst in the country and that, combined with our aging population, places more pressure on our hospitals than is viable or sustainable over the long term. The public and community health parts of our system now, more than ever, need our support."*

Capital Health has committed to ensuring that physician consultations take place by specialists within an hour and a half of a patient being seen by the emergency room physician. The district will also move forward with a request for proposals to design an expanded emergency room at the Queen Elizabeth II Health Sciences Centre (QEII), whose emergency room was originally built to accommodate 35,000 visits per year. This year more than 70,000 patients are expected.

The plans also call for more long-term care beds and faster home support for discharged emergency room patients. The main features of the 10 point plan are at <http://www.cdha.nshealth.ca/newsroom/NewsItems/NewsDetail.cfm?NewsID=77>.

Also on January 15, QEII opened a patient discharge lounge at its Halifax Infirmity site. Mobile patients ready for discharge but not able to be picked up for more than one hour will now have a place to watch television, read and relax in recliners and seating areas while they wait.

ALBERTA TO CREATE HEADACHE PROGRAM

On January 16 Gary Mar, Alberta's Minister of Health and Wellness, announced creation of the Calgary Headache Assessment and Management Program (CHAMP), to be based in the Foothills Medical Centre. The program, accessible through physician referral, will give patients suffering between 8 and 15 headache days a month quicker access to a health care team of neurologists, psychologists, occupational therapists, and nurses. The team will work with patients to help them manage the pain and stress of chronic headaches, rely less on drugs and emergency department visits, and reduce headache occurrence. Up to 25,000 Calgarians suffer the severe headache this program is intended to treat.

A media release on the initiative is at <http://www.gov.ab.ca/acn/200401/15757.html>.



SASKATCHEWAN: SCHOOLS TO PROMOTE IDLE-FREE ZONES

Saskatchewan, where 45% of personal greenhouse gases are emitted by vehicles, has introduced a program in schools to enlist students in creating “idle free zones”. Activities start with engaging student in monitoring vehicles parked at the school with idling engines. Schools are one site where engines are sometimes left running as parents pick up or drop off their children. Children are more vulnerable to the harmful effects of exhaust than adults because they breathe more quickly and inhale more air per kilogram of body weight.

Once students have eliminated vehicle idling, the school will be awarded an “idle free zone” sign to post in front of the school. More information on the campaign is at <http://www.climatechangesask.ca/Action-Idling.htm>.

There is no information yet on how Saskatchewan schools will deal with enraged semi-frozen parents who have just had their ignition keys stolen by mobs of eager young environmentalists bent on winning a sign for their school.

VANCOUVER: DOWNTOWN EASTSIDE PHONES DISAPPEAR

Sometimes an effort to clean up a blighted urban area only impoverishes the community further. Such may be the case in Vancouver, where police have persuaded a pay phone company to remove most of its phones in the Downtown Eastside, a rundown area that is home to many sex trade workers and drug users. Police say the pay phones are used by drug users to call dealers and arrange drug deliveries. The executive director of the Downtown Eastside Residents Association says the move has deprived many local residents, too poor to have their own phones, of easy access to an alternative. A representative of the pay phone company says pay phones in the Downtown Eastside are vandalized less often than phones in other areas of the city, in part because they are treated as essential community resources.

Pay phones have also been removed from areas of Surrey and New Westminster for the same reason.

STUDY: AMISH DON'T JUST DRIVE BUGGIES

University of Tennessee researcher and exercise science professor David R. Bassett and his colleagues recently completed a study of the health status, as well as selected lifestyle practices, of a group of Amish in Southern Ontario, and compared these findings against those from a more contemporary US population.

The study found that the Amish ate a high-fat, high-sugar diet – meat, potatoes, gravy, eggs, garden vegetables, bread, pies, and cakes – but they were remarkably fit. Only 4% were obese (compared to 31% in the general U.S. population) and only 26% were overweight.

Bassett asked 98 Amish men and women to wear a step-counting device for seven days, and the results showed a remarkably high level of physical activity. Men averaged 18,425 steps a day (equivalent to the steps taken by long distance runners), and women averaged 14,196 daily steps. The average American walks fewer than 10,000 steps per day. Amish men spent about 10 hours a week doing vigorous activities, and women about 3.5 hours (heavy lifting, shoveling or digging, shoeing horses, and tossing bales). Men



averaged 43 hours of moderate activity a week, and women about 39 hours (gardening, feeding farm animals and doing laundry).

Said Bassett in a media release, *"The Amish were able to show us just how far we've fallen in the last 150 years or so in terms of the amount of physical activity we typically perform. Their lifestyle indicates that physical activity played a critical role in keeping our ancestors fit and healthy."*

The findings appear in the January issue of *Medicine & Science in Sports and Exercise*.

YORK UNIVERSITY TAKES LEAD IN GLOBAL DISABILITY RIGHTS

For decades, advocates for the 10% of the world's population with disabilities have struggled to find a way to push the disabilities agenda to the forefront globally. One recent approach is to define disability issues as human rights issues. And within this human rights approach, two streams are emerging:

- creation of an international agreement on human rights for people with disabilities
- use of existing international agreements so they better promote the rights of people with disabilities.

The non-government organization Disability Rights Promotion International (DPRI), located at Toronto's York University, has moved this process forward by completing a Phase I study involving research to assess opportunities for disability rights advocacy in international and regional human rights systems, and to determine available monitoring and training resources and specialized resources needed. The study was funded by Swedish International Development Co-operation Agency. Its principal investigators and co-directors are Bengt Lindqvist, former United Nations Special Rapporteur on Disability, and Marcia Rioux, head of York University's School of Health Policy and Management, and also Graduate Director of the Master of Arts (Critical Disability Studies) at York. The coordination centre for the project is at York University. Lindqvist and Rioux are also the co-founders and co-directors of DPRI.

The Phase I study, entitled *Opportunities, Methodologies, and Training Resources for Disability Rights Monitoring* is available as an 86 page PDF file at http://www.yorku.ca/dрпи/files/DRPI_Phase_I_Report.pdf.

DPRI has already launched Phase II (Implementation) by building collaborations and partnerships with disability and human rights organizations and educators, law and policy associations, media organizations and others to develop training resources and monitoring tools and to field test them in several locations around the world. DPRI's web site is at <http://www.yorku.ca/dрпи/index.asp>.

US YMCA ARGUES FOR "AUTHORITATIVE COMMUNITIES"

Current thinking about healthy communities, social determinants of health and social capital follows a number of separate paths, and each path has its own "navigator's terminology". A phrase which is fairly new and which may become much more common in the next little while in the US, and by extension in Canada, is "authoritative communities".

The term was coined late in 2003 as part of the preparatory work for the report *Hardwired to Connect: The New Scientific Case for Authoritative Communities*, developed and written by the Commission on Children at Risk (a joint endeavour of YMCA of the USA, Dartmouth Medical School and the Institute for American Values). The report, released in September 2003, argues for a concerted effort in the US to support the



development and strengthening of authoritative communities to nurture child and youth development. The report defines authoritative communities as:

“groups of people who are committed to one another over time and who model and pass on at least part of what it means to be a good person and live a good life. Essentially, they are groups that live out the types of connectedness that our children increasingly lack. The family is (or at least should be) the most important authoritative community. Other core authoritative communities include youth organizations such as YMCAs, other community groups involved with children, religious congregations, and schools”.

The report posits ten key characteristics of ideal authoritative communities.

- They include children and youth.
- They treat children as ends in themselves.
- They are warm and nurturing.
- They establish clear limits and expectations.
- The core of their work is performed largely by nonspecialists.
- They are multigenerational.
- They have a long-term focus.
- They encourage spiritual and religious development.
- They reflect and transmit a shared understanding of what it means to be a good person.
- They are philosophically oriented to the equal dignity of all people and to the principle of love of neighbour.

The report marshals evidence to support its contention that such communities have declined over the past few years while rates of mental, behavioral, and emotional problems among American young people have risen. It offers 18 policy recommendations to strengthen authoritative communities as a “new paradigm”, and emphasizes a need to bolster such communities in poor and troubled neighbourhoods:

“Strengthening authoritative communities in our poorest and most troubled neighborhoods is particularly important and will be particularly challenging. It is particularly important because the children in these communities have the greatest needs and are most at risk. It will be particularly challenging for two reasons. In many of these neighborhoods, the network of authoritative communities that we take for granted elsewhere is badly depleted or even nonexistent. Further, a range of other problems in these neighborhoods — joblessness, poverty, crime, lack of medical and mental health care, and other difficulties — makes everything harder, including the critical task of revitalizing authoritative communities. Responding to this challenge must involve our society as a whole, not just government. But to be successful, this work of renewal will also require greater attention and investment from all levels of government.”



A 28 page PDF summary version of the report is at http://www.ymca.net/hardwired_report/HW_companion.summ.pdf.

OUR NEXT DOOR NEIGHBOUR IS EVERYONE: SWISS HEROES

Uriel Luft, in his 70's, is a former actor, a theatrical producer and president of ATMO Productions in North Hatley Quebec. The fact that he survived beyond childhood is a result of the bravery of Aimée Stauffer-Stitelmann.

In 1942, Uriel and his sister Hella were French Jewish children. Stauffer-Stitelmann was a seventeen year old Swiss Jewish school girl, experienced in smuggling Jewish children across the border into Switzerland in violation of Swiss law (since Switzerland was neutral during World War Two, it did not want to antagonize German authorities by becoming a haven for refugees). Stauffer-Stitelmann smuggled Uriel and Hella into Switzerland, where they lived with Swiss families until reunited with their surviving family after the war.

In 1945 Stauffer-Stitelmann was imprisoned in Switzerland for her child rescue work. Now, aged 79, she is the first Swiss citizen to seek pardon from the Swiss government for her "crime", making use of a Swiss law that came into effect on January 1 that allows such pardons to be given, but in a limited form. No compensation will be awarded to those who rescued Jewish and Roma (Gypsy) adults and children and who suffered because of the Swiss government's actions, and no pardon will be given to Swiss who served in the French resistance or in the Spanish Civil War.

Stauffer-Stitelmann's decision to seek pardon had little to do with her own past and much to do with her country's future. Said Stauffer-Stitelmann, *"I want to draw attention to the suffering of immigrants who are here without papers. I want the people of Switzerland to fight against falling into the same situation again without even knowing it."*

Stauffer-Stitelmann's child rescue work was the start of a long career in social activism. She later organized protests against apartheid in South Africa and the war in Vietnam, and took part in antiglobalization marches in 2003 in Evian, France, during a meeting of major industrial nations. After retiring as a schoolteacher in 1987 she helped establish an underground school in a Swiss church to teach French to children of illegal immigrants (the children were banned from attending public schools.)

Stauffer-Stitelmann was not the only Swiss citizen that risked imprisonment to save Jews, Roma and other refugees. Thirty-eight Swiss citizens (including pastors, nuns, farmers, business people, nurses, government officials, social service workers and doctors) have been designated by the Yad Vashem Holocaust memorial organization as "Righteous Among the Nations" for saving Jewish lives – a designation that may be far more significant than a pardon from the Swiss government for their activities.

Note: Stauffer-Stitelmann is not designated as "Righteous" because the award is limited to non-Jewish people who risked lives, freedom and safety to rescue Jews from the threat of death or deportation to death camps without monetary compensation. Over 19,000 people have received the designation from Yad Vashem.

One of the Righteous with an interesting Canadian connection is Gustav Schroeder, a German who was captain of the ship *St. Louis*, which in May 1939 sailed from Hamburg to the Americas with more than 900 Jewish refugees. Canada, as well as the US and Cuba, refused to accept the refugees. Schroeder refused



to return to Germany until he found a safe haven for his passengers. He developed a plan to ship-wreck the St. Louis off England's coast to force British authorities to act, but finally the passengers were allowed into Belgium. However, nearly half the passengers died in the Holocaust after Belgium was overrun by German forces.

In November 2000 twenty-five *St. Louis* survivors attended an Ottawa ceremony to receive apologies from Canada's Christian communities for the failure of Canadian churches to protest the turning away of the ship in 1939. At the ceremony Sarnia Baptist pastor Doug Blair, great nephew Frederick Charles Blair, the federal immigration director who turned away the St. Louis, said:

"I have come to beg your forgiveness for the deep, deep wrong that was done to you. I understand very well that my name is not one dear to your heart. . . . Will you forgive me and let me call you my friends?"

In what was a spontaneous gesture of reconciliation, the St. Louis survivors embraced Blair after his apology.

UK: SALVATION ARMY POINTS TO RESPONSIBILITY GAP

On January 13 the Salvation Army in the UK released *The Responsibility Gap – Individualism, Community and Responsibility in Britain Today*, which argues that gaps in care provision are widening between government, charities, the private sector and individuals, as confusion reigns over where responsibility lies. The report says this will lead to high numbers of elderly people having to care for themselves at home, low-income families without affordable childcare, informal caregivers receiving little or no respite, and people suffering from addictions having little or no access to treatment programs.

Says Commissioner Alex Hughes, leader of The Salvation Army in the UK, "*This report identifies that those in greatest need in 21st -century Britain are often the time-consuming, the unfashionable and the unrewarding. As part of the Christian Church, The Salvation Army will continue to speak out on behalf of the poor and marginalised: those who are falling through the responsibility gap.*"

According to the report, multiple social and economic drivers have led to severe 'time poverty'. For example, the benefit of more employment opportunities for women has resulted in the loss of a traditional source of care for extended family, neighbours and the vulnerable in local communities. The report says the rise of individualism is also a contributory factor: rather than overt selfishness or egotism, this trend is as much about citizens' sense of self-reliance and personal responsibility impacting on their willingness to accept responsibility for others.

The report says a sense of community is not dead, but has shifted from:

- communities of geography to communities of interest
- communities of necessity to communities of choice
- permanent communities to impermanent ones.

The report and related material are available at www.salvationarmy.org.uk/responsibilitygap.



US: INSTITUTE OF MEDICINE CALLS FOR NATIONAL HEALTH CARE

Ironically, on the same day President Bush signaled a potentially massive US investment in getting humans to the moon again and then to Mars, a panel of the US Institute of Medicine called for health coverage for all Americans by 2010. The report, entitled *Insuring America's Health: Principles and Recommendations*, does not endorse a method of achieving broad health coverage. It outlines options, including tax credits to help people buy insurance, expanding Medicare to those younger than 65, requiring employers to offer coverage or mandating that individuals carry insurance. The most controversial option, and one the institute says is most likely to achieve universal coverage, is a government-funded national health program.

According to the report, *"The benefits of universal coverage would enrich all Americans . . . in terms of improved health . . . greater economic productivity, financial security or the stabilization of communities' health care systems"*. The Institute says that being uninsured means patients get less treatment, 18,000 Americans die each year as a result, and it costs health providers \$35 billion a year for uncompensated care.

The report and related material is at <http://www.iom.edu/report.asp?id=17632>.

OUR READERS SAY.....

In response to an article in *Import 4.1* about a health ranking of US states, one Canadian reader who grew up in the US wrote:

"I read the America's State Health Rankings with great interest. If you had asked me to do a ranking without any reference to fact, I would have got it roughly right. It is this type of glance at regional disparity in the USA that reveals so much about it.

The New England states are: Maine, New Hampshire, Vermont, Massachusetts, Connecticut and Rhode Island. Five of these six states are in the top 10 ranked in this study and Rhode Island comes in at 13. Three of these states are profoundly rural (Maine, New Hampshire and Vermont) but enjoy excellent health care. Pockets of intense poverty do exist but are rare.

The states known as the "Deep South" are North Carolina, South Carolina, Georgia, Mississippi, Alabama, Arkansas and Louisiana. More mountainous but still more or less in the Deep South are Kentucky and Tennessee and West Virginia. Five of these states take up the five bottom rankings. The highest rank is North Carolina at 36 (a state which enjoys a strong economy, propinquity with wealthy Virginia/Washington DC, and a constant and large in-migration of people from all over the USA, both for military and recreational purposes).

If you superimposed a map of poverty by state it would look very similar to this map -- and then if you superimposed a map of Afro-American population proportions by state you would see the same patterns.

A Ugandan friend of mine, a Queen's University Ph.D. in political science now working in South Africa, had his first job as an assistant professor at the University of Louisiana at Shreveport. He visited the various rural areas of the state and said that the living conditions of the Afro-American



population there were very similar to those of his native Uganda. He wasn't kidding. No shoes, no electricity, no running water, no paid labour, little education, no access to decent health care.

Michael Harrington, the brilliant and humane American sociologist who died in the 1980s, wrote a book: 'The Other America'. Its title just about says it all."

On the same subject, another reader wrote:

"It is interesting that the 'healthiest' US states (Minnesota, New Hampshire, Utah, Vermont, Massachusetts) vote Democrat whereas the least healthy (Mississippi, Louisiana, South Carolina, Arkansas, Tennessee) vote Republican, regardless of the fact that he with the most votes loses 'down' there, also that there are now more uninsured Americans than there are Canadians 'period', also that prime American recruiting territory are the states with highest unemployment, that US military tend to vote Republican, and so on."

In response to an article in *Import 4.1* about repeal of the lifetime social assistance ban for fraudsters, one reader wrote:

"I have really mixed feelings on the suspension of lifetime welfare bans. What are we to do about the 'generational' welfare abusers? I stopped delivering Christmas baskets because I was disgusted to see where too many of them were going. It all too often appeared to be canny people who know how to work the system, as opposed to those truly in dire need. All you had to do was note the cases of beer, the new TVs, the new ATVs etc. How does one separate the wheat from the chaff???"

In response to *Import 4.1's* description of plans by Ontario's government to mount public consultations, a reader wrote:

"Although my tie tends to have more red than blue in it, I am watching with jaundiced eye what Dalton and his crew are up to. I was very interested in following your insightful comment."

Also in response to last week's editorial concerning the planned consultation, one citizen/reader cited his own personal experience (an experience any government would be well advised to heed):

"As you know, I have been permanently disabled for more than a decade and ask little of our health system except to attempt to keep me upright and on the green side of the grass. I do however get a drug card through ODSP [Ontario Disability Support Program] under special circumstances. We fill out a monthly income/ expense report and fax it in. In December we were told we did not qualify as my wife's income was too high. Upon examination, and a printout from the drug store it was shown that my drug cost for the 12 month period was \$19,600 while my wife's income was \$19,300. The lady at ODSP told my wife point blank 'Nobody spends that much on drugs!' We do send in documentation for everything plus a list of our daily living expenses. So far no reply.... If by some strange twist of fate they reinstate the drug card before they manage to kill me, I'll let you know..... Keep smiling."



IN MY HUMBLE OPINION: TRAILER TRASH

One of our readers (whose comments are included in the previous section of this week's *Import*) laid bare his own dilemma, but it is a dilemma our whole society faces: how to provide helping systems for people, while preventing abuse of the helping system. Our reader pointed out that he stopped delivering Christmas baskets because recipients often appeared to be canny people who know how to work the system, as opposed to those truly in dire need. I do not doubt our reader's comments, nor do I question his qualifications to speak. I know him. He has crafted for himself a lifetime of public and civic service. He is no charitable dilettante. He sees both sides of the social and ethical ledger, and I respect and admire him for it.

But what troubles me most are signs in our society that people are increasingly prodded to see only one side of the ledger – a side that treats the poor, the addicted, the strange, the mentally ill – as a dysfunctional moral sideshow. Within this view, the disadvantaged are trivialized. The disadvantages they face are their own fault, or produce amusing rascally behaviour on the part of the disadvantaged – not the tragedies and waste of human potential that the disadvantages more often produce.

A few of these toxic blooms have grown recently within our mass media, abetted because they are wrapped in humour – and to attack humour, however misguided it may be, labels us as censorious prudes.

Fine. Let me be censorious by critiquing three Canadian versions of the theme – the popular Canadian TV series *Trailer Park Boys*, the equally popular adult cartoon series *Kevin Spencer*, and the new French language TV series *Les Bougon*.

Trailer Park Boys, a "mockumentary" from Halifax, is set in Sunnyvale Trailer Park. Its males are stereotyped beer-swilling dope-taking jail-wise dead-enders. Its females are often sex-obsessed appendages of the males, whose worth is defined by their ability to sell sex to get money to feed the dysfunctions in the trailer park. Its mascot character "Bubbles" is an ineffective shell, frittering away his life on minor obsessions to make up for childhood abandonment by his parents. Not pretty, but successful: *Trailer Park Boys* has a Canadian cult following and BBC America will introduce it to the US in April.

Kevin Spencer is worse. The cartoon's main character is a chain smoking, cough syrup-addicted, alcoholic teenage sociopath from a welfare family, serving 25 years to life in adult prison. Funny, eh? In 1999 a fellow censorious prude complained to the Canadian Broadcast Standards Council about the CTV-produced series. The Council found no fault with the anti-poor satire in it (after all, satire is sacrosanct), but found CTV at fault for the show's violence: "*the theft and use as a plaything of a severed human head from an accident site, the display of Kevin's head in a pool of blood and the strewing of bloody body parts all over the street, when used as the basis for humour, had the effect of sanctioning, promoting or glamorizing violence*".

Les Bougon, immediately popular when its first episode aired recently in Quebec, portrays a family of "happy anarchists" that "screws the system before it screws them," says series creator François Avaré. As one reviewer said, "*While their personal hygiene is lacking and beer replaces orange juice as their favourite breakfast drink, they have no shortage of illegal shenanigans to make a living*", including drawing



multiple social assistance cheques – a scam made easier because they bribe the mailman to deliver the multiple cheques. Lovable rascals?

But a trip south of the border shows an example of cynicism toward the disadvantaged that even most fans of these TV series could not abide. California is home base for the *Bumfight* video series. The first video, *Bumfight 1*, was so successful that *Bumfight 2* is about to be released. The Bumfight web site describes the treat in store for those who buy the videos: "*You'll see real bums trade blows on the streets, chick fights, bum stunts, sick pranks, crime caught on tape, crackheads, streetfights and hands down the rawest most core ruckus ever filmed*".

The video makers paid homeless men and women to fight each other in front of the camera and to perform humiliating stunts. The "star" of the videos is 47 year old Rufus Hannah, a homeless army veteran billed as Rufus the Stunt Bum, who was filmed going down a flight of stairs in a shopping cart, running into a wall, ramming his head into a fast-food drive-through sign and pulling out one of his own rotten teeth with pliers supplied by the film crew. You can buy your own Rufus the Stunt Bum sweatshirt for a mere US\$34.95 through the web site. The videos also feature The Bum-Hunter who imitates the Crocodile Hunter as he wakes up and humiliates homeless men.

The videos inspire other young filmmakers. Recently four Chicago teenagers beat up and urinated on homeless people. In Cleveland teenagers roamed the streets shocking homeless men in their genitals with stun guns. Both incidents were videotaped.

The makers of these TV series and videos are not above claiming a social good from their work. Greg Lawrence, producer of *Kevin Spencer*, said in 1999 that "*what's best about all my characters is how much they are committed to their own beliefs regardless of how screwed up they are.*" Bumfight producers Ryan McPherson, Zachary Bubeck and Daniel Tanner, sentenced to three years probation and community service working with the homeless because of their acts, portray themselves as "little guy" martyrs fighting the law to bring you their little-house-on-the-skids version of reality. As one of them described homeless people in the videos, "*They want to be part of something. It's fun. It's a relief from their mundane lives. We've developed a close relationship with many of them. They consider us their friends.*" The video makers have even promised to donate part of the proceeds of video sales to charities supporting the homeless.

What these images represent, despite the guise of humour, is an expulsion of the disadvantaged from our midst, and their reintroduction as buffoons. It's easier to laugh at them than to address the problems that created their disadvantage in the first place.

We, the "enlightened", can ignore these images or dismiss them as bad-taste humour. Yet I remember myself as a young boy, listening to *Amos 'n Andy* on radio – a program author William Manchester called "a nightly racial slur". My first exposure to African Americans was through this show (although the actors and writers were white, pretending to be black). I was no dumber than the next kid. I accepted what I saw – people who were devious, funny, a bit dangerous, uncontrolled – inhabitants of a world vastly different from mine. Despite our joint humanity I felt no kinship with them.

John Butler, The Agora Group



FROM THE QUOTES VAULT

"The most important development at the beginning of the twenty-first century was the rediscovery of the nongovernmental sector of civil society, or as some call it, the voluntary or social sector. If the twentieth century was about the neglect, and even the systematic destruction of civil society through statist ideologies and destructive cultural influences, the twenty-first century may represent the era of its restoration...."

The social sector - consisting of families, neighborhoods, voluntary associations, and an endless variety of civic enterprises - is an essential and irreplaceable part of our democratic experiment. This sector performs thousands of essential functions in communities every day, from compassionate neighborly care, to maintaining public order and cleanliness, to meeting the recreational and social needs of residents.

Still more important than the practical functions of civil society is the role this sector plays in cultivating citizenship and generating values. Public in nature, though not governmental, the social sector provides public 'space' where people learn through practice such essential democratic habits as trust, collaboration, and compromise."

Don Eberly, *The Coming Social Renaissance: Restoring America's Civic and Moral Creed*,
excerpted from *The Soul of Civil Society*, 2002

"The United States is the world's undisputed military, economic, and technological leader, yet also leads the world in many categories of social pathology.... The emergence of civil society as a framework for progress means that simplistic reliance on either the state or the market as mechanisms for social improvement will give way to deepening interest in creative ways to expand the social sector. The people long for relationships that last, human exchange that is trustworthy, institutions that function, and civic communities that rely firmly on life-enhancing values."

Don Eberly, *Civic Renewal vs. Moral Renewal*, at <http://www.orthodoxytoday.org/articles/EberlyRenewal.htm>.