

Season 8: Episode 1 | Jane Philpott | Spirituality in Health Care, a Journey of Faith

Hello and welcome to Scripture Untangled, a podcast by the Canadian Bible Society. My name is Joanna la Fleur. I'm a friend of the Canadian Bible Society and I'm going to be your guide for today's episode.

Today, Dr. Jane Philpott will be interviewed by veteran journalist Lorna Dueck. Our guest today, Dr. Jane Philpott, is best known for her time in the Canadian government from 2015 to 2019, where she served as federal minister of health and several other portfolios, Minister of Indigenous Services and President of the Treasury Board. Dr. Philpott is currently the Dean of the Faculty of Health Sciences and Director of the School of Medicine at Queen's University, and she's also the CEO of the Southeastern Ontario Academic Medical Organization.

So, on this episode of Scripture Untangled, Lorna Dueck interviews Dr. Philpott about her Christian faith and about her new book, Health for All, a doctor's prescription for a healthier Canada. Enjoy the conversation. You're listening to Scripture Untangled, a podcast by the Canadian Bible Society.

We know that the Bible can feel overwhelming, confusing, or hard to believe. Scripture Untangled brings you interviews with culture leaders, leaders in ministry, and Bible thinkers to help you be inspired to dive into the Bible and understand it. Visit biblesociety.ca for more resources.

Lorna Dueck: Well, Dr. Jane Philpott is advocating for an ambitious challenge to Canada. She is prescribing a once-in-a-generation reset of Canadian health systems, and Dr. Philpott joins us today at Scripture Untangled to share about her new book, *Health for All, A Doctor's*

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Prescription For A Healthier Canada. And there are many insights, both about health care and Dr. Philpott's own life in this book, including her relationship with the Bible.

So, she's a great fit for us at Scripture Untangled. And hello, Dr. Philpott. Where are we finding you today?

Dr. Jane Philpott: Hello, it's nice to see you.

You are finding me in Kingston at my office at Queen's University on campus.

Lorna Dueck: Okay, well, it's been a whirlwind tour for your book publicity, and it was in Kingston at the first launch. We heard about this at Scripture Untangled.

So, tell us why now? Why publish a new book, Health for All?

Dr. Jane Philpott: Well, I never thought I would actually write a book. It's one of those things a lot of people dream of, but it wasn't really in my expectations. But as we were getting further into the pandemic, and I was having a bit of time to reflect on all of the health care challenges, I also realized that I had a perspective that was a bit unusual because I have worked for almost 40 years as a family doctor, both internationally and in Canada.

I'd had experience in government. And now I've got experience as a medical educator here at Queen's where we train doctors and nurses. And that kind of gave me a bit of a multi-angle view of what was wrong with health systems, particularly as it relates to access to family doctors.

And I had opinions about that, and thought I would just start writing them down, and it turned into a book.

Lorna Dueck: Well, and we're thankful that you did write *Health for All*. You can't see it at home there, but those are little people lining up through the hands because this book is all about people.



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And wow, you've actually laid out four dimensions in this book that you think Canada's health care system needs to work on. Tell us about those four dimensions we need help on.

Dr. Jane Philpott: Well, the health sector is big and complex, and you can analyze it from a whole bunch of different angles.

But you're right, I chose four in particular. And so, I start with the clinical perspective on health, because many people think that's all that there is to health care is when you get to see someone in the health system. And I had some particular views about how we should improve the clinical systems part of health.

But it's always a mistake to avoid looking at the determinants of health. And I picked three other determinants of health. One which is commonly looked at now, which is the social determinants of health, things like housing and education and income security, etc.

Just to make sure that people understand that no matter how good your health system is, if people don't have those basics of life, they won't be healthy. I also have a section on the political determinants of health, because I believe that our health systems will never get better unless there is the political will to improve them. And then of course, the area that you might be most interested in, or your audience might be most interested in is I actually have a whole section on the spiritual determinants of health.

It's an area that I don't think very many health policy books have written about. And some people I speak about the fact that some people are more comfortable talking perhaps about mental wellness. But at the end of the day, it's about our spirits or our souls.

It's about what the deepest parts of our inner being. And that everything else could be great in the health system. But if people are not well in their souls, that they actually aren't healthy.

And I had a lot of thoughts about that and wanted to make sure that that was included in the book.



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Lorna Dueck: Well, you are right. That totally caught our attention because your entire chapters four to seven, you begin with this beautiful, deep dive on a spiritual prescription for Canada.

So, let's just before we start on that, let's just talk about your personal life a bit because you make that point very clear in the spiritual prescription that all of the other clinical aspects cannot be separated from who we actually personally are in our spiritual life. So, tell us a little bit about your personal faith. Like, I was very inspired about what you wrote about your encounter with the Bible as a medical student.

Dr. Jane Philpott: Yes, well, you know, obviously, you can't cover all of the whole story of your spiritual journey through life in a book that is trying to cover so many other things. But I describe in the book a little bit about my own story, about having grown up in a family where we have our family on both sides. My mom and dad had deep roots in the Presbyterian Church.

My dad was Presbyterian Church pastor. And I will get emotional talking about him because I just, my dad's not with us anymore. He died five years, six years ago now, actually, but probably had more influence on me than any other single person, someone I learned a lot from.

And I grew up in that home where church was a part of our culture and a part of who we were as a family. But it wasn't until I got to university, where, you know, young people are exploring all kinds of new ideas. And I'm not unlike many other young people who had to kind of be confronted with, well, who am I really? And those things that I was raised to believe, do I really believe them? And I describe in the book, making a more deliberate choice to say, yes, I do believe in the God who is described in Scripture.

And that is how I want to direct my life.

Lorna Dueck: And you, when you're, you write this amazing story about a huge party weekend and at university, but you decided in that crush of party and studies, you began to memorize what you describe in the book as large chunks of ancient letters Paul wrote, memorizing them. What impact did that have on you?

Dr. Jane Philpott: Oh, it had a big impact and I'm sure it still does.



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You know, surprisingly, even though I was in medical school at the time, I did spend probably more than any other season of my life. The amount of time I spent memorizing Scripture in medical school, was a lot. And I found that it was a really good way to be able to really understand what Scripture was about.

So, I would, for example, memorize the whole book of Philippians and, you know, several chapters of Romans. And as you're memorizing and going over it and over it and sinking it into your brain, you really come to understand the mindset of, in this case, the author was, was the Apostle Paul of a lot of the sections of Scripture that I memorized and his ways of thinking and his teaching through Scripture really become part of your psyche and a part of how you think and how you see the world.

Lorna Dueck: Well, and you then go on to write in the book that it actually, your scriptural view, your Christian view, begins to give you, you call it a prescription of hope.

And you feel a prescription of hope undergirds all our mental health. Explain that to us.

Dr. Jane Philpott: Well, I wanted to use a framework in the book about spiritual wellness, and I actually used a framework that was taught to me by Indigenous peoples.

It's called the First Nations Mental Wellness Continuum Framework. And it was something that was taught to me by an Indigenous scholar. And after studying with other First Nations leaders, they came to the conclusion that at the center of our mental wellness are the concepts of hope, belonging, meaning, and purpose.

And so, I used that as a framework to talk about mental wellness and specifically on the matter of hope. You know, it's a tough topic. I'm not a theologian or a philosopher.

So, I was trying to kind of explore where do people get hope from, and shared the fact that in my case, my hope comes from my faith and that hope, and faith are extrinsically linked and in a sense inseparable. And, you know, to have faith is to be sure of things that you hope for, to be certain of things that you can't see. And so, I shared the fact that that is where I get my sense of hope that allows me to be able to be mentally stable, you know, to the extent possible.



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Lorna Dueck: Okay. Well, and was it your Christian hope that was also part of your decision in 1990 for you and your husband, Pep, to go work at a mission hospital in Niger?

Dr. Jane Philpott: Very much so. You know, my husband, interestingly, also grew up in the Presbyterian tradition in his family in Ottawa.

And once we were married and had decided that we wanted to work somewhere abroad, we explored different options and decided that we wanted to go to work in sub-Saharan Africa with a faith-based organization. And we explored a few options but ended up working with SIM International for nine years.

Lorna Dueck: SIM. It is a very difficult and gripping read in chapter six about the tragic death of your two-and-a-half-year-old daughter, Emily, in Niger. And I'm going to just read here from page 108, where you write, it was the worst day of my life. It was the day that set the course for the rest of my life's work.

Can you tell us about the loss of Emily?

Dr. Jane Philpott: Well, it's a bit of a long story. And so, of course, the chapter goes through it in some detail, but it really was the worst day of my life. And I think my husband would say the same thing.

Our beautiful little two-and-a-half-year-old daughter woke up one morning with fever and vomiting. And we were living in Niger in West Africa, where things like malaria and other infectious illnesses are very common. It turns out what she had was something called meningococcemia, which is very rare in Canada, but still, unfortunately, is not rare in places like Niger.

And in a shocking way, she actually ended up dying as we were enroute to the hospital. We were a two-hour drive away from the hospital. And the only thing that could have saved her was to get injectable penicillin.



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And we were on our way to try to get her what she needed. And she died in the car as we were traveling. And it was a horrible, obviously, every parent's worst nightmare that that would happen.

But it also was one of the biggest lessons of my life and definitely shaped everything I've done since then.

Lorna Dueck: In that great grief journey, were there comforts from the Bible?

Dr. Jane Philpott: I mean, I think that the biggest hope was the hope that we will see her again. That it's not God's will that any one of his little ones should perish.

And the hope of a life beyond our life on Earth is absolutely the thing that keeps us going. To know that we will see her as well as other precious loved ones someday is part of how you cope with those horrible moments of grief.

Lorna Dueck: And you also write that that deep grief shaped the rest of your life's work.

How did that grief shape the rest of your life's work?

Dr. Jane Philpott: Well, I think I describe in the book that one of the things that allowed me to get perspective and to go on was recognizing that we weren't alone in our grief. And we were surrounded, in fact, by people who had experienced what we had experienced and then some.

Lorna Dueck: The Nigerians, the people in the villages, everyone knew what it was like to lose a child.

Dr. Jane Philpott: They knew what it was like. They came to greet us. They encouraged us to be patient.

And I thought, if they can go on and not be bitter and keep putting one foot in front of the other, then I can go on. And in fact, what I want to do when I go on is to be able to somehow make the world more fair, to try to help create the conditions that, as much as possible,



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toddlers won't die of treatable infectious diseases. And that I wanted to know that my life's work would actually make health care and health systems better.

Lorna Dueck: And you have this amazing persistence to make health care systems better. And so now let's jump way ahead to 2011. You're back in Canada as a family doctor.

How does the leap from being a family doctor to Canada's most known doctor as our Minister of Health, how does that political leap begin for you?

Dr. Jane Philpott: I actually think the link from medicine to politics is not as big of a leap as some people might imagine. Medicine is all about healing and taking care of people one by one. And the longer I went on in medicine, the more I realized that it was systemic issues that were making people sick or making people well.

And the way that you can actually improve entire populations is by essentially changing the way we structure society and making it more fair. And the people who actually get to make a lot of those rules or change the rules are politicians. And that I could go from healing people, caring for people one at a time to potentially caring for society.

If I got myself in a position where I could help to influence the laws and policies of the land. So it was actually a conversation with former Prime Minister Paul Martin that really encouraged me and said, you know what, if you can ever get yourself around the cabinet table, you can make extraordinary strides of all of the things that matter to you in health care.

Lorna Dueck: He said you could do it in 10 minutes. It was a very compelling part of your book health for all. OK, but let's talk about some of those. Let's just jump in on a few things, because as minister of health, you're guiding policy, which is legalizing marijuana in Canada.

So that's the 2015 liberal promise. Seems like a long time ago now, but it was a big, big deal then to legalize cannabis. And you had a guiding principle.

You asked yourself; can you explain your empathy rule that you think needs to be applied to controversial health care decisions, the empathy policy?



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Dr. Jane Philpott: Well, I think what you're getting at, and I describe this in the book is, you know, drug policy is a tough conversation. And sometimes I think for people of faith, it's particularly tough. And, you know, there's there are a lot of people who think we should just, you know, throw the throw the book of the law at people who are caught using substances.

But I, because of my experience with patients and getting to know individuals, have what I think of as a compassionate approach to drug policy. And I've known many, many people, mostly patients who are dependent on substances, who through really no fault of their own, through the traumas that they've experienced in life, that they get themselves addicted to medicine. And it's extremely hard to be able to, to deal with that.

And when I think about things, some of those policies that people find so challenging, like the access to supervised consumption sites, for example, my guiding principle, I think you're referring to, is I think about what would I want if this person who was addicted to substances was my sister, or my child, or my parent, I would want them to stay alive, most of all, and to hope that things will get better for them. And that's what I want for every single person in this country who struggles with addiction, is to be able to have people treat them with compassion as human beings, and to believe that their life is of sacred value.

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Lorna Dueck: All right, another issue you had to navigate.

Sacred values, but also the Canadian value of compassion. And it's now June 2016. You write about this 2016, June 2016.

And you're now Health Minister overseeing the Supreme Court's mandate that there is legislation required on doctor assisted deaths. And you warn as a gripping, it's still up on YouTube, it's a very powerful moment where you turn to the cameras, and you warn.

You say about Bill C-14. "This is a patchwork approach to the protection of the vulnerable as safeguards vary across the country." Are you still concerned about the implementation of made in Canada?

Dr. Jane Philpott: It was a really difficult piece of legislation to write.

I think that the version of the law that we tabled that was passed in June of 2016 was the best possible outcome under the circumstances. The Supreme Court had made it clear that if there wasn't a law, then they said people have to have access to medical assistance in dying. So, you have an opportunity now to write a law that will put those safeguards around it.

We worked very hard to try to make sure that people had that kind of access that they were asking for, but that we would respect the very serious risks to vulnerable people, including people with disabilities, for example. And so, I feel that we reached the best possible approach at that point. There were a few issues that we hadn't fully wrestled with because they were so complicated.

Things like access for people who have mental health issues. The government since I left the government, they've made some more changes. I continue to worry about the risks of expanding access.



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But as I said, I feel like the work that we did in 2016 was the best that we could do under the circumstances.

Lorna Dueck: Okay. You know, I want to put a plug in here.

Your work was very complex in government. And you also have a TEDx talk up about, it's called detours. It's very challenging about the realities of political life.

And so, let's go to a high profile detour you had. You were fired by the Prime Minister, by Prime Minister Trudeau over a disagreement he had with you on standing up for principles in the most significant bribery and corruption trial in Canadian business, the SNC-Lavalin Affair. Did your Christian faith inform that stormy time?

Dr. Jane Philpott: I would say that it did in the sense that the values of integrity that were instilled in me by, in part by my faith, but also to go back to my father.

My dad was, had just died the summer before, but I still remember the day that I made the phone call to the Prime Minister to say that I was stepping down from cabinet. I said to myself, what would my, what would my dad advise me to do? And he would say, you have to be true to your values. You have to maintain your integrity.

And that's what ultimately gave me the courage to make that very difficult phone call.

Lorna Dueck: While you write in your book about disagreements with the Prime Minister, you have a quote that stuck with me. You say there can be a cost to acting on one's principles, but a bigger cost to abandoning your principles.

I'm sure you still agree with that.

Dr. Jane Philpott: I do. It can be hard to stick to your principles and you pay a price.

Lorna Dueck: The price, Jane, I'm sorry, but it just seemed to continue in your career because I'm going to now go to 2019 in your story and you speak of the great, you write about this in the book, the great heartbreak when running as an independent now, you come in third in your



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riding to another local doctor running for the Liberals. She gets your seat. Where did the comfort of God come in, in such high-profile disappointment?

Dr. Jane Philpott: That's a great question.

You know, I really believe that all things work together for good to those who love God. And we don't always see or understand how it comes together for good, but I ultimately believe that very firmly. And we won't always see until the end of our lives when we look back and see how it all made sense and why it was the right thing that would happen.

But I still trust in the sovereignty of God.

Lorna Dueck: That's a beautiful connection to Scripture Untangled. Somehow Romans 8:28 and God working all things is working this out.

You probably wouldn't have had time to write a book if you would have stayed in those busy roles. And so I'm really glad we've got this pause together. Bottom line here, does the Bible address health care as you imagine it in health for all?

Dr. Jane Philpott: For sure it does.

I mean, the Bible is all about learning who God is, how much he loves us, how much he values us, how much he wants the best for the children of creation. And health care is about that. And so, I think the Bible teaches us, as I said earlier, the sacred value of every single human being, teaches us about how to work together and love one another.

Jesus teaches us more than anyone in the Bible about how to care for the needs of the vulnerable, those who are left as orphans or widows. And those are ultimately the values of health care that we continue to teach to our doctors and nurses of today.

Lorna Dueck: Yeah, it is a deeply Christian work to do health care well, deeply Christian.

It is the ultimate working out of love your neighbor, isn't it?

Dr. Jane Philpott: It sure is.



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Lorna Dueck: And there's also an educational component in health for all for me, because I think, well, of course there would be, but I like the challenge that you say, bottom line, well, I'm putting these words, it's summarizing the chapter here, but are elected officials in Ottawa have the ability to call the shots on repairing the broken provincial system of health care delivery? Is that correct?

Dr. Jane Philpott: You know, I just say in the book that health care is actually a shared jurisdiction. Our federal officials, elected officials, provincial, municipal, regional, they all have a responsibility for the well-being of those who put them in office.

And so, you know, I think that there's no elected official who can abdicate a responsibility for looking out for the health and well-being. They have different roles to play as it relates to health care. And, you know, we know in Canada, the federal government sets certain standards or expectations or principles around how health care should be delivered, whereas provincial governments operationalize those principles, but none of them can say that they don't have obligations to the people who elect them.

Lorna Dueck: And so, it's really our responsibility as citizens to be engaging, provincial and federal, to be engaging our ministers about this, isn't it?

Dr. Jane Philpott: Absolutely. I mean, Canadians, I think, need to speak up about what we expect for health care. We're not getting what we ought to get or could get in terms of delivery of health care.

And I hope that increasingly Canadians will expect more and ask for it.

Lorna Dueck: That's great. That's great.

Well, it's just a reminder for us to all say the business of politics, the business of health care is deeply loved. You're a neighbour. Be part of it.



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Yeah. Boy, I wonder if you could take a moment to give Christians like myself a prescription, Dr. Philpott, give us a prescription, as it were, to how might we move faith forward in a Canada that seems to me to be a little bit and sometimes a lot allergic to Christianity? How do you how do we navigate the goodness of faith in a public way in that kind of environment?

Dr. Jane Philpott: Well, that's a big question. But I think I would go back to what you just said is that ultimately the Christian faith is about loving our neighbour, loving those around us as God has loved us.

And I think that will always be a message that we can put forward and hope that it will take root. I think we sometimes make the mistake of trying to impose or share our religion or our ideology. But that's not what faith is.

Faith is that love for one another, that deep hope that others will have the best possible life both now and after our time on earth. And so, I think that the prescription would be keep loving people, sharing with them your deepest values, sharing with them what you understand about who God is and how much he cares for us. And it is the faith that will attract others who are looking for something to hope for and someone to hope in.

Lorna Dueck: Keep loving, keep loving. I'm thinking about the chapter in your book where you describe COVID. You had to just jump in, in COVID.

There was a small home for young adults with disabilities. Tell us what Canadians did for each other, specifically maybe start with what happened in your local town, this panic.

Dr. Jane Philpott: Well, I had quite an incredible experience early on in the days of COVID.

And it was during the time after I was in government, but before I started my job here at Queen's University. And there was a call for help that came from this group home, which was home to 42 severely disabled adults. And 40 out of the 42 had COVID.

And it was a scary time for everyone. And I said, my obligations as a physician, if not as a human being, were to go and do what I could to help. So, it was a tough time.



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I'm sad to say that there were six of those adults who died ultimately, because we had no treatment. And it was in the days before everything, before access to PPE and so many challenges that we faced. But I hope that we were able to prevent further suffering for many of those others who were suffering from COVID in those very early days.

Lorna Dueck: And I'm curious what spiritually is going through your mind, because while you're fully donned in PPE, you were, because you took your recent high profile as our health minister, now unemployed, volunteering in this crisis. And you talked to the media, the media didn't, the media was looking for COVID stories, and you just, you were, go to Jane, everybody was. But that's part of love one another too, isn't it? Sticking your neck out and being willing to risk and give some opinions.

Dr. Jane Philpott: And part of it is just using the fact that these are people who often aren't seen in society, right? So, one of our, the tragic realities in the early days of COVID is it was highly vulnerable people, older people, disabled people who suffered the most, and they had so little voice, so little opportunity to say help. And I knew that if I got involved, I could help raise awareness about the needs of that community. And I was gratified that once I got onto the media and was telling them what was going on, suddenly we literally had celebrities showing up at the door of the group home, delivering PPE.

And suddenly public health was calling us saying, what can we do to help? And it changed the narrative and brought resources into that group home. And as I say, I believe that that helps to save some lives of those people who really needed somebody to care for them.

Lorna Dueck: Yeah, bravo. Well done. Love one another in action. And I read this, and I joined something political after this.

It's just a little family council project, but it was just like, I just realized when I read *Health for All*, that Christian faith needs to be public. It needs to be public in the structures, doesn't it?

Dr. Jane Philpott: We need to be open to talking about who we really are.

Lorna Dueck: Yeah, absolutely.



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Okay. Who you really are is, you've announced you're not going to be seeking a second fiveyear term as Dean of Queen's Health Sciences. It's just a wonderful school.

And I was all excited about the health projects you guys are planning there and you're on the front line of training doctors and nurses, but you're not going to renew your term at the end of June 2025. What is next for you, Dr. Philpott?

Dr. Jane Philpott: Well, I don't know for sure, but I've had an amazing time here at Queen's and looking forward to the next year here. I feel like there's time for one more season of work of some sort.

I really, really care about healthcare in this country. I'm worried about the future of healthcare and I believe that I can take those ideas that are in the book and hopefully try to implement them. So, I don't know whether that will mean a return to politics or to public service in some other way.

I'm currently exploring options and hopefully sometime in the next year or so I'll have a bit more clarity of what that will look like.

Lorna Dueck: All right. Dr. Jane Philpott, thank you very much for being with Scripture Untangled.

Dr. Jane Philpott: Thank you for having me.



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