

Health Echo

THE AYLMEER HEALTH COOP BULLETIN

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*The AHC volunteers, clinic staff and the physicians wish everyone
Happy Holidays and best wishes for... good health!*

What would Aylmer do without the AHC?

Many have expressed their disappointment because the Aylmer Health Coop's (AHC) clinic is open for only three hours on Saturdays and Sundays. AHC volunteers are aware that this is not enough and are working hard to improve the situation. It should be noted, however, that without the AHC, there would be no drop-in clinic open in Aylmer during the weekends. Have you thought about how things would be in Aylmer if the AHC had not been created?

- * The Aylmer-Lucerne Medical Clinic would still be there, staffed perhaps by six physicians working a limited number of hours.
- * New physicians would not have been recruited by active volunteer members of our community.
- * The only family physician waiting list on which you could be registered would be at the Grande-Rivière CLSC where people have been waiting for years. The waiting period would be even longer if all the AHC members were registered there.
- * No women's health programs would be offered for those women who still do not have a family physician.
- * You would automatically have to spend hours in a waiting room in a drop-in clinic in order to maintain your consultation priority.



The AHC was founded by a group of volunteers and physicians who were concerned about the fact that the Ministère de la santé et des services sociaux (MSSS) had not provided adequate service to Aylmer residents, despite its mandate to provide an equitable level of service to all sectors within its area of jurisdiction. We should applaud this initiative which is helping to alleviate the lack of health care resources in our sector of the city. But "alleviate" does not mean "close the gap". There is always more that can be done to improve the health care picture in Aylmer. You should know that if the AHC did not exist, there would be no volunteers working hard to improve the situation, bit by bit, with the resources available to them. Meanwhile, patience is the word, while we roll up our sleeves and work together...

Preparing for a gynecological examination

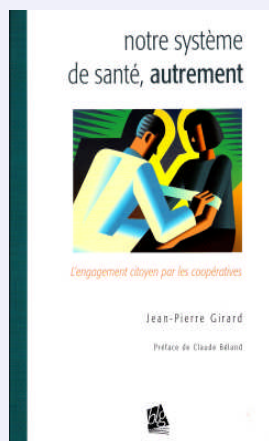
Before a gynecological exam, women frequently prepare mentally. In addition to this mental preparation, however, other factors can affect the outcome of the examination. Whether the examination will be performed by a woman's family physician or by a nurse in the Women's Health Program, several guidelines come into play:



- ✧ If it is at all possible, a woman should refrain from having this exam during her menstrual period.
- ✧ The use of a vaginal douche should be avoided for a period of 48 hours prior to the exam.
- ✧ Sexual intercourse should be avoided for a period of 48 hours prior to the exam..
- ✧ The use of tampons, contraceptive foam or gel, vaginal cream or medication should be avoided for a period of 48 hours prior to the exam.

For more information or to make an appointment for a Pap test, screening for sexually transmitted infections and blood-borne infections (STI and BBI) or for a consultation on contraception, please call Myriam Bartura, the nurse in charge of the Women's Health Program at the AHC (819-684-4964).

Public-private or public-citizen partnership?



Stories about public-private partnerships regularly appear in the media in the context of improving our health care system. Rather than relying on investors who are basically guided by a profit motive, the government should perhaps call on citizens for help. In the preface of a book entitled *Notre système de santé, autrement* (A new slant on health care), Claude Béland, past President of the Desjardins Financial Group, says “The State has no other hands but ours.” The author of the book, Jean-Pierre Girard, is a specialist in the development of community-based organizations in the health care sector. Girard maintains that “Our (health care) system would benefit enormously, in its organization, philosophy, practices and performance, from factoring in the participation of citizens everywhere,

especially through cooperative-type organizations.” Girard even cites the AHC as a Quebec-based example of the successful involvement of citizens. “In fact, until the next case study (the AHC) came on the scene, it was widely held that health care coops were helpful in meeting the need for access to health care services in rural or semi-rural areas, but not in urban areas.” Girard points out that the AHC is the first case in Canada where a medical clinic was sold to citizens by physicians who subsequently became involved as members in a coop project. Girard's book is widely available in bookstores. It is an eloquent and well-organized comment on the health care system and the enormous potential of cooperatives in the health care sector.

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You want to submit an article? You'd like to make suggestions? Contact me at annie_piergroulx@videotron.ca
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