

- Present a few principles that reflect the lessons learned during SARS.

3. Hindsight

Everything said in this report is said with the benefit of 20-20 hindsight, a gift not available to those who fought SARS or those who designed the systems that proved inadequate in face of a new and unknown disease.

As Dr. James Young, Commissioner of Public Safety and Security, pointed out at the public hearings:

. . . when we called the provincial emergency, we were dealing with an outbreak where we did not know for sure that it was a virus, we did not know for certainty what virus it was, we did not know what symptoms and what order of symptoms SARS presented with. We had a vague idea that some of the symptoms might include fever and cough. We did not, for example, for some period of time, realize that about 30 per cent of patients also could present with diarrhea. We did not know how long it incubated for. We did not know with certainty whether it was droplet spread or whether it was airborne. We did not know when it was infectious. We did not have a diagnostic test for it and still do not have an accurate diagnostic test. We had no way of preventing it, we had no vaccine and we had no treatment. What we had was an illness with many unknowns and virtually no knowns.³

It is easy, with the benefit of what we now know, to judge what happened during SARS. It is easy now to say which systems were inadequate and which decisions were mistaken. That is the great benefit of hindsight. As one military historian noted:

Once a dramatic event takes place, it always appears to have been predictable because hindsight tells the historian which clues were vital, which insignificant, and which false. The unfortunate general who must act without the benefit of hindsight is much more likely to err.⁴

3. *SARS Public Hearings*, September 30, 2003, p. 34.

4. Steven E. Woodworth, *How Good a General Was Sherman?* North and South v. 7 no. 2, March 2004.

It is easy now in hindsight to see that systems were inadequate. It was harder to see their weaknesses before they were proved by SARS to be inadequate. A system that looks fine in normal times may prove wanting in the face of a new disease of unknown origin.

It is important to distinguish between the flaws of public health systems and the skill and dedication of those who worked within them. To demonstrate the weakness of Ontario's public health infrastructure is not to criticize the performance of those who worked within systems that proved inadequate in hindsight. The Commission recognizes the skill and dedication of so many individuals in the Ontario public health system and those volunteers from Ontario and elsewhere who worked beyond the call of duty. Twenty-hour days were common. They faced enormous workloads and pressures in their tireless fight, in a rapidly changing environment, against a deadly and mysterious disease.

It is my hope that those who worked on the front lines and in public health in Ontario during SARS will accept that I have approached the flaws of the system with the utmost respect for those who gave their all to protect the public. We should be humbled by their efforts.

Although it is unfair to use hindsight to judge individual behaviour, hindsight is a useful tool in the search for lessons to be learned. Hindsight helps us understand what went wrong and what went right. Hindsight includes knowledge and wisdom learned after SARS and it can help us avoid in the future the mistakes of the past. Indeed the Commission has been urged to use hindsight to this end. Dr. Richard Schabas said at the public hearings:

I want to make it clear and I will make it clear that I think hindsight is a very commendable and useful tool for this Commission.⁵

It is a defining feature of every investigation into a public crisis that the public interest is best served by a full account of what happened together with an account of the lessons to be drawn from the crisis and the events that led up to it. This necessarily involves the application of hindsight. Hindsight becomes suspect only when inferences are drawn that systems or people "should have" acted differently even though they lacked vital knowledge that became available only later.

5. *SARS Public Hearings*, September 30, 2003, p. 8.

In this interim report I have attempted to avoid, and I invite the reader to avoid, the unfair use of hindsight to judge the actions of those who struggled so valiantly in the fog of battle against the unknown and deadly virus that is SARS.

4. What Went Right?

Despite everything that went wrong SARS was eventually contained by the extraordinary personal efforts of not only front line hospital workers, and the public health workers in the field, but also by an exceptional group of scientists, doctors, epidemiologists, local Medical Officers of Health and other public health professionals who came forward when needed. SARS was eventually contained not by any central public health system but by the heroic work of those who stepped forward during the crisis.

The litany of problems listed in this report reflect weaknesses in central public health systems. These weaknesses hampered the work of the remarkable individuals who eventually contained SARS. The problems of SARS were systemic problems, not people problems. Despite the deep flaws in the system, it was supported by people of extraordinary commitment.

One observer, talking of the work of the Epi Unit, built from scratch as the outbreak unfolded, referred to the remarkable work done by those who pitched in quickly in order to plug the gaps in the existing systems:

I wanted to make what I hope will be a really strong point and that is that amazing work was done by a lot of amazing people. People who cared passionately about public health, who cared passionately about doing good work under very trying circumstances . . . We had great epidemiologists, we had incredible technical support people . . . And we had great communications with some people outside of the Ministry, with other levels of government, with other jurisdictions and I think that sheer force of will in some cases is why SARS was beaten in this province and I don't want that to be forgotten. So just to, give kudos and say thank you to people who actually never got any formal thank you's.

Another expert from outside Ontario, while quite candid about the problems in the Ontario public health system, remarked how despite all those problems, a large number of people worked very hard to contain SARS. He stated: