



## Coercive legislation

<https://policybase.cma.ca/en/permalink/policy8539>

Policy Type:	Policy resolution
Last Reviewed:	2013-Mar-02
Date:	2006-Aug-23
Topics:	Physician practice/ compensation/ forms
Resolution:	The Canadian Medical Association and its divisions staunchly oppose any form of coercive legislation in regard to the negotiation of working conditions and compensation of physicians.



## Canadian residency matching process

<https://policybase.cma.ca/en/permalink/policy8549>

Policy Type:	Policy resolution
Last Reviewed:	2013-Mar-02
Date:	2006-Aug-23
Topics:	Health human resources Physician practice/ compensation/ forms
Resolution:	The Canadian Medical Association urges that a transparent and timely consultation process, inclusive of all stakeholders including medical schools, students, residents, professional associations and government/organizations funding those positions, be followed prior to implementation of any changes to the Canadian residency matching process.



## Economic burden of medical education

<https://policybase.cma.ca/en/permalink/policy8556>

Policy Type: Policy resolution

Last Reviewed: 2013-Mar-02

Date: 2006-Aug-23

Topics: Health human resources

Physician practice/ compensation/ forms

Health systems, system funding and performance

Resolution: The Canadian Medical Association, working with its divisions and affiliates, will continue efforts to reduce the economic burden of medical education by advocating for interest-free government loans, regulation of tuition costs, expansion of bursaries and scholarships, financial assistance for residents in need, and education on debt avoidance and management strategies.



## Aboriginal patients

<https://policybase.cma.ca/en/permalink/policy8558>

Policy Type: Policy resolution

Last Reviewed: 2013-Mar-02

Date: 2006-Aug-23

Topics: Health human resources

Physician practice/ compensation/ forms

Population health/ health equity/ public health

Resolution: The Canadian Medical Association, working with its divisions and affiliates, in cooperation with Aboriginal associations, calls for medical schools to develop courses to educate physicians on: a) the history and culture of Aboriginal peoples in Canada, b) communication skills to enhance their care of Aboriginal patients, and c) their response to health issues of particular concern to Aboriginal patients and their communities.