Environmental Sustainable Health Systems in Canada

RATIONALS

The Canadian Medical Association (CMA) endorses the principle that health systems in Canada should be environmentally sustainable and provide universal access to high-quality, integrated health care services.

The CMA also believes that health systems should be designed to allow for the protection and conservation of the environment and biodiversity.

The CMA further believes that health systems should be designed to ensure the health and well-being of all Canadians, regardless of their socioeconomic status, geographic location, or health status.

The CMA recommends that health systems be designed to promote health and prevent disease, and to be sensitive to the needs of all Canadians.

Health systems should be designed to be responsive to the needs of individuals and communities, and to be effective in addressing public health concerns.

Health systems should be designed to be sustainable and to be in keeping with the principles of environmental sustainability.

Health systems should be designed to be equitable, and to provide access to high-quality, integrated health care services for all Canadians.

Health systems should be designed to be efficient, and to be effective in meeting the needs of all Canadians.

Health systems should be designed to be responsive to the needs of individuals and communities, and to be effective in addressing public health concerns.

Health systems should be designed to protect and maintain the environment and biodiversity.

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Health systems should be designed to be sustainable and to be in keeping with the principles of environmental sustainability.

Health systems should be designed to be equitable, and to provide access to high-quality, integrated health care services for all Canadians.

Health systems should be designed to be efficient, and to be effective in meeting the needs of all Canadians.

Health systems should be designed to be responsive to the needs of individuals and communities, and to be effective in addressing public health concerns.
CMA 2023 Pre-budget Submission to the House of Commons Standing Committee on Finance
https://policybase.cma.ca/link/policy14490

Policy Type: Parliamentary submission
Date: 2022-10-06
Topics:
- Health systems, system funding and performance
- Health human resources
- Population health, health equity, public health

Documents

CMA submission
CMA 2023 pre-budget submission to the House of Commons Standing Committee on Finance
October 6, 2022

CMA Policybase - Canadian Medical Association
CMA Recommendations on Canada’s First National Adaptation Strategy: Addressing the health impacts of climate change
https://policybase.cma.ca/link/policy14484

POLICY TYPE
Parliamentary submission

DATE
2022-06-23

TOPICS
Population health, health equity, public health
Health systems, system funding and performance

Documents
CMA Letter to the Council of the Federation regarding the Council of the Federation meeting and Canada’s health funding priorities (health workforce, primary care, labour mobility)
https://policybase.cma.ca/link/policy14486

POLICY TYPE  Parliamentary submission
DATE  2022-06-22
TOPICS  Health systems, system funding and performance
Health human resources

Documents
CMA Recommendations on Vaccine Equity and Intellectual Property
https://policybase.cma.ca/link/policy14476

POLICY TYPE
Parliamentary submission

DATE
2022-05-13

TOPICS
Ethics and medical professionalism
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents
Appearance before the Standing Committee on Indigenous and Northern Affairs (INAN): Administration and accessibility of Indigenous Peoples to the Non-Insured Benefits Program

https://policybase.cma.ca/link/policy14474

POLICY TYPE  Parliamentary submission
DATE  2022-05-03
TOPICS  Population health, health equity, public health
Ethics and medical professionalism

Documents

Appearance before the Standing Committee on Indigenous and Northern Affairs (INAN): Administration and accessibility of Indigenous Peoples to the Non-Insured Benefits Program

Dr. Alisa Lafontaine
President, Canadian Medical Association
May 2, 2022

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Appearance before the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities
https://policybase.cma.ca/link/policy14472

POLICY TYPE
Parliamentary submission

DATE
2022-03-28

TOPICS
Health human resources
Health systems, system funding and performance

Documents

Appearance before the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities

Dr. Katherine Smart
President of the Canadian Medical Association
March 29, 2022

(Canadian Medical Association logo)
Federal Policy Options to Advance Pan-Canadian Licensure

https://policybase.cma.ca/link/policy14471

POLICY TYPE
Parliamentary submission

DATE
2022-02-22

TOPICS
Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents

Federal Policy Options to Advance Pan-Canadian Licensure

Improving health care by reducing interprovincial and interterritorial barriers
February 22, 2022

(CMA submission)
Study on Canada’s Health Workforce
https://policybase.cma.ca/link/policy14469

POLICY TYPE
Parliamentary submission

DATE
2022-02-16

TOPICS
Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents

Appearance before the House of Commons Standing Committee on Health:

Study on Canada’s Health Workforce

Dr. Caroline O’shaughnessy
President of the Canadian Medical Association
February 18, 2022
Draft against stenographer
Canadian Medical Association input in advance of the World Health Assembly Special Session

https://policybase.cma.ca/link/policy14461

POLICY TYPE
Parliamentary submission

DATE
2021-11-17

TOPICS
Population health, health equity, public health
Ethics and medical professionalism

Documents
New Criminal Code offence to protect health workers from threats and violence, including online
https://policybase.cma.ca/link/policy14463

POLICY TYPE
Parliamentary submission

DATE
2021-11-16

TOPICS
Population health, health equity, public health
Ethics and medical professionalism

Documents
The Lancet Countdown on Health and Climate Change - Policy brief for Canada, October 2021
https://policybase.cma.ca/link/policy14455

POLICY TYPE: Policy endorsement
DATE: 2021-10-20
TOPICS: Population health, health equity, public health

Documents
São Paulo Declaration on Planetary Health

https://policybase.cma.ca/link/policy14456

POLICY TYPE
Policy endorsement

DATE
2021-10-04

TOPICS
Population health, health equity, public health

Documents
Vaccine certificates

https://policybase.cma.ca/link/policy14448

POLICY TYPE  Policy document
DATE  2021-08-21
TOPICS  Population health, health equity, public health
Ethics and medical professionalism

Documents
Mandatory COVID-19 vaccination of health care workers

https://policybase.cma.ca/link/policy14449

Policy document

DATE 2021-08-21

TOPICS
Health human resources
Population health, health equity, public health

Documents
Vaccine acceptance
https://policybase.cma.ca/link/policy14450

POLICY TYPE  Policy document
DATE        2021-08-21
TOPICS      Health care and patient safety
            Population health, health equity, public health

Documents
Global vaccine equity

https://policybase.cma.ca/link/policy14451

POLICY TYPE
Policy document

DATE
2021-08-21

TOPICS
Ethics and medical professionalism
Population health, health equity, public health

Global vaccine equity

Policy recommendation:

1. Vaccine manufacturers should be held accountable for ensuring equitable distribution of COVID-19 vaccines globally, with a focus on low- and middle-income countries.
2. Immediate steps should be taken to ensure the timely deployment of COVID-19 vaccines in all countries, particularly in low-resource settings.
3. The Canadian government should support international efforts to promote equity in vaccine distribution, including through the provision of financial and technical assistance.
4. The CMA recommends that healthcare professionals advocate for equitable distribution of COVID-19 vaccines and support policies and initiatives that address global health inequities.

Background:

Vaccine distribution has been a critical aspect of the global COVID-19 pandemic response. Despite significant progress in vaccine development and production, equitable access to vaccines remains a major challenge, particularly in low-income countries.

In many countries, vaccine distribution has been hampered by limited production capacity, regulatory bottlenecks, and unequal access to vaccine doses. These factors have contributed to significant disparities in vaccination rates, with some countries achieving high coverage rates while others struggle to even begin vaccinating their populations.

The CMA is committed to ensuring global health equity and advocates for measures that will help to overcome these barriers and ensure that vaccines are distributed fairly and efficiently to all countries, regardless of their economic status.

Conclusion:

The CMA believes that equitable distribution of COVID-19 vaccines is a critical component of the global response to the pandemic. By working together with governments, international organizations, and vaccine manufacturers, we can help to ensure that vaccines are available to everyone who needs them, regardless of where they live.

The CMA recommends that healthcare professionals continue to advocate for equitable distribution of vaccines and support policies and initiatives that will help to address the global health inequities that have been exacerbated by the COVID-19 pandemic.
Return to school during COVID-19
https://policybase.cma.ca/link/policy14452

**POLICY TYPE**
Policy document

**DATE**
2021-08-21

**TOPICS**
Health care and patient safety
Population health, health equity, public health

**Documents**

Return to school during COVID-19

**Policy recommendation**

- The CMA recommends that school authorities and school boards, in consultation with local health units, develop and implement school-specific procedures that ensure the health and safety of students, teachers, staff, and other school community members during the COVID-19 pandemic.

   - **Interchangeability of vaccines (vaccine mixing)**

   - The CMA supports the interchangeability of vaccines for the COVID-19 pandemic. It is recommended that school authorities and school boards, in consultation with local health units, ensure that all students, teachers, staff, and other school community members have access to vaccines that are safe and effective.

   - **Public health measures**

   - It is recommended that school authorities and school boards, in consultation with local health units, ensure that all students, teachers, staff, and other school community members have access to public health measures that are safe and effective. This includes the implementation of physical distancing, the use of masks, and the provision of hand sanitizer.

   - **Health equity measures**

   - It is recommended that school authorities and school boards, in consultation with local health units, ensure that all students, teachers, staff, and other school community members have access to health equity measures that are safe and effective. This includes the implementation of equity-based measures that are responsive to the needs of vulnerable populations.

   - **Public health guidelines**

   - It is recommended that school authorities and school boards, in consultation with local health units, ensure that all students, teachers, staff, and other school community members have access to public health guidelines that are safe and effective. This includes the implementation of guidelines that are responsive to the needs of all students, teachers, staff, and other school community members.

   - **School-specific procedures**

   - It is recommended that school authorities and school boards, in consultation with local health units, ensure that all students, teachers, staff, and other school community members have access to school-specific procedures that are safe and effective. This includes the implementation of procedures that are responsive to the needs of all students, teachers, staff, and other school community members.

CMA Policybase - Canadian Medical Association
Interchangeability of vaccines (vaccine mixing)

https://policybase.cma.ca/link/policy14453

POLICY TYPE
Policy document
DATE
2021-08-21
TOPICS
Health care and patient safety
Population health, health equity, public health

Documents

Interchangeability of vaccines (vaccine mixing)

Policy position/Recommendation:
1. The CMA supports the recommendations made by the National Advisory Committee on Immunization (NACI). NACI has advised that alternative vaccines, including interchangeability of mRNA vaccines, be based on the best available evidence and ongoing research.
2. The CMA encourages healthcare providers to ensure that any vaccination opportunities are open to all and that families are made aware of the available options. This includes ensuring the accessibility of vaccines, including through providing information about vaccine availability and the importance of vaccination.

Interchangeability

1. Interchangeability of vaccines involves the administration of different vaccines without requiring additional testing or validation, provided that they meet certain criteria. This can improve accessibility and efficiency in vaccine distribution.

Implementation

Implementation of the recommendations will involve ensuring that healthcare providers have access to the necessary information and resources to facilitate interchangeability. This may include training programs, guidelines, and support materials for healthcare providers and patients.