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. Alika Lafontaine
President, Board of the Canadian Medical Association

May 4, 2022

(Cross-border and solidarity)

CMA Policybase - Canadian Medical Association
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. Katharine Smart
President of the Canadian Medical Association
March 28, 2022
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. Corky D. Burnam
President of the Canadian Medical Association
February 15, 2022

[Disclaimer: The text above is a transcription of the document image. Further details or context may be available in the original document.]
Recommendations for federal action to address Canada’s health care crisis

https://policybase.cma.ca/link/policy14468

POLICY TYPE               Parliamentary submission
DATE                      2022-02-15
TOPICS
Health systems, system funding and performance
Health human resources
Ethics and medical professionalism

Documents

CMA submission

Recommendations for federal action to address Canada’s health care crisis

Submission to the House of Commons
Standing Committee on Finance
March 15, 2021

Canadian Medical Association
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**

[Image of document]

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**Canadian Medical Association**

**Parliamentary submission**

**DATE**  2021-11-17

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

**Documents**

[Image of document]

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**Canadian Medical Association**

**Parliamentary submission**

**DATE**  2021-11-17

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

**Documents**

[Image of document]
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
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

Vaccine certificates

Policy position recommendation

1. The Canadian Medical Association (CMA) endorses vaccination for all eligible individuals as a critical measure to control and prevent the transmission of COVID-19. This includes healthcare workers, vulnerable populations, and those with medical conditions that increase the risk of severe illness.

2. Healthcare providers should integrate vaccination into routine healthcare practices, ensuring accessibility and convenience. Strategies should be developed to address barriers to vaccination, such as language, location, and cultural sensitivities.

3. The CMA supports the development of a comprehensive vaccination plan that includes education, outreach, and monitoring systems. This plan should be flexible and adaptable to changing circumstances.

4. The CMA encourages healthcare providers to prioritize vaccination for populations at higher risk of severe illness, including the elderly, pregnant women, and individuals with pre-existing conditions.

5. The CMA recommends that healthcare providers advocate for policies that support vaccination, such as workplace policies and incentives for vaccination.

6. The CMA supports the use of digital health tools to facilitate vaccination, including the use of digital health records and mobile vaccination apps.

7. The CMA encourages healthcare providers to engage in community partnerships to promote vaccination and address vaccine hesitancy.

8. The CMA advocates for research and evaluation of vaccination programs to inform policy and practice.

9. The CMA supports the development of a national vaccination strategy that includes coordination and funding across all levels of government.

10. The CMA encourages healthcare providers to continue to provide education and support to patients, families, and the general public about the benefits and safety of vaccination.

The CMA recommends that healthcare providers and organizations work together to ensure that all eligible individuals are vaccinated against COVID-19.
Mandatory COVID-19 vaccination of health care workers

Policy document

DATE 2021-08-21

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

Mandatory COVID-19 vaccination of health care workers

Facts and recommendations:
1. Every health care provider should be given the opportunity to vaccinate on a voluntary basis. This includes a wide range of health care settings, from hospitals to community clinics, and should be tailored to the needs of individual health care providers.
2. All health care workers should be provided with clear, accessible, and culturally appropriate information about the vaccine. This information should be provided in a language and format that is accessible to all health care workers.
3. Health care workers should be encouraged to share their personal experiences with vaccination with their peers. This can help to build trust and confidence in the vaccine.
4. Health care workers should be supported in their decision to vaccinate or not to vaccinate. This includes providing access to resources and support, as well as addressing any concerns or barriers.
5. Health care workers should be given the opportunity to participate in research studies related to vaccination and COVID-19. This can help to ensure that the vaccine is safe and effective for all populations.
6. Health care workers should be given the opportunity to share their experiences with vaccination with public health officials. This can help to ensure that vaccination strategies are tailored to the needs of the community.
7. Health care workers should be given the opportunity to share their experiences with vaccination with their patients. This can help to build trust and confidence in the vaccine.
8. Health care workers should be given the opportunity to share their experiences with vaccination with their families. This can help to build trust and confidence in the vaccine.
9. Health care workers should be given the opportunity to share their experiences with vaccination with their colleagues. This can help to build trust and confidence in the vaccine.
10. Health care workers should be given the opportunity to share their experiences with vaccination with their communities. This can help to build trust and confidence in the vaccine.

The Canadian Medical Association recommends that all health care providers be vaccinated against COVID-19. This includes all health care workers, regardless of their role or level of care. Health care providers should be supported in their decision to vaccinate or not to vaccinate, and should be given the opportunity to participate in research studies related to vaccination and COVID-19.
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

Documents

Global vaccine equity

FullyPositions

1. Uneven distribution of vaccine access to vaccine addicted, The Global vaccine shortage
   leads to unequal distribution of vaccine supply, which exacerbates health disparities and
   compromises health equity. The lack of access to vaccines, particularly in low- and
   middle-income countries, has a significant impact on the equitable distribution of
   vaccines and medical resources.

2. The allocation of vaccines to high-income countries has been prioritized, reflecting a
   broader trend in global health governance. This has led to a situation where
   developing countries have limited access to vaccines, which exacerbates health
   disparities and undermines global health equity.

3. The shortage of vaccines has highlighted the need for equitable distribution
   strategies, including the use of multi-lateral initiatives and the implementation
   of novel funding mechanisms to support vaccine access in low-income countries.

4. Recommendations
   - Increase the production of vaccines to meet global demand
   - Strengthen international cooperation and coordination on vaccine distribution

5. Integration
   - The prioritization of vaccine access in low-income countries is crucial for
     achieving global health equity. The equitable distribution of vaccines is
     essential to ensure that all populations have access to necessary medical
     interventions and promote health equity.

6. Conclusion
   - The Global vaccine equity is a complex issue that requires a multi-faceted
     approach, including increased production, improved distribution, and
     strengthened international cooperation. The CMA supports efforts to
     ensure that vaccines are available to all, regardless of income level.
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
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)

Full policy recommendation:

1. The CMA recommends, in consultation with federal, provincial and territorial governments, that the interchangeability of vaccines be regulated in Canada.

2. The CMA, in consultation with federal, provincial and territorial health authorities, recommends that a policy on interchangeability be developed that addresses the following principles:

   a. Interchangeability is defined as the ability to substitute a vaccine with another vaccine of the same class, meeting the same regulatory requirements.

   b. The interchangeability of vaccines should be assessed on a case-by-case basis, based on the available scientific evidence.

   c. The interchangeability of vaccines should be managed in a way that ensures public health and patient safety.

   d. The interchangeability of vaccines should be communicated to the public in a clear and accessible manner.

   e. The interchangeability of vaccines should be considered in the context of the overall vaccination strategy.

   f. The interchangeability of vaccines should be reviewed periodically to reflect new evidence and changing circumstances.

Interchangeability of vaccines

- Interchangeability of vaccines can be classified as follows:
  - Interchangeable: Two vaccines can be considered interchangeable if they have similar efficacy and safety profiles.
  - Incompatible: Two vaccines cannot be considered interchangeable if they have different efficacies or safety profiles.

- Interchangeability of vaccines can be assessed using the following methods:
  - Clinical trials: Clinical trials can be used to assess the interchangeability of vaccines.
  - Surveillance data: Surveillance data can be used to assess the real-world performance of vaccines.
  - Expert consensus: Expert consensus can be used to assess the interchangeability of vaccines.

- The interchangeability of vaccines should be managed in a way that ensures public health and patient safety.

- The interchangeability of vaccines should be communicated to the public in a clear and accessible manner.

- The interchangeability of vaccines should be considered in the context of the overall vaccination strategy.

- The interchangeability of vaccines should be reviewed periodically to reflect new evidence and changing circumstances.
Firearms Control (Update 2021)
https://policybase.cma.ca/link/policy14401

POLICY TYPE
Policy document

DATE
2021-07-15

REPLACES
Firearms control (Update 2001)

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

Documents

https://policybase.cma.ca/link/policy14443

POLICY TYPE
Policy endorsement

DATE
2021-06-24

TOPICS
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents


When a drug is prescribed on an individual basis, for personal use, it is a matter of health care and should be treated as such.

INTRODUCTION

The Canadian Medical Association (CMA) has repeatedly called for the decriminalization of drugs for personal use. This policy brief supports the decriminalization of drug use and possession for personal use, as it aligns with the principles of public health and human rights. The decriminalization of drugs would reduce the stigma associated with drug use and promote access to evidence-based harm reduction services.

EVIDENCE TO SUPPORT POLICY

The decriminalization of drugs has been linked to a reduction in drug-related harm. In jurisdictions where drug laws have been decriminalized, there has been a decrease in drug-related deaths, substance use disorders, and criminal justice involvement.

METHODS

This policy brief is based on a review of existing literature, focusing on the evidence supporting the decriminalization of drugs for personal use.

Recommendations

The CMA recommends that the federal government decriminalize the use and possession of controlled substances for personal use. This would involve the elimination of fines, imprisonment, and other punitive measures for personal drug use.

CONCLUSION

Decriminalizing drug use and possession for personal use is a necessary step to address the harms associated with the current legal framework. By decriminalizing drugs, we can focus on providing safe and equitable access to harm reduction services and treatment options.
The Future of Care for Canada’s Older Adults
https://policybase.cma.ca/link/policy14441

POLICY TYPE
Parliamentary submission

DATE
2021-06-23

TOPICS
Population health, health equity, public health

Documents
Appearance before the House of Commons Standing Committee on Finance
Bill C-30: The Budget Implementation Act, 2021
https://policybase.cma.ca/link/policy14437

POLICY TYPE
Parliamentary submission

DATE
2021-05-20

TOPICS
Population health, health equity, public health

Documents

Appearance before the House of Commons Standing Committee on Finance
Bill C-30: The Budget Implementation Act, 2021

Dr. E. Ann Gallant
President of the Canadian Medical Association
May 26, 2021

(Transcript not available)
Enhancing equitable access to virtual care in Canada: Principle-based recommendations for equity
https://policybase.cma.ca/link/policy14447

POLICY TYPE
Policy endorsement

DATE
2021-04-30

TOPICS
Population health, health equity, public health
Health information and e-health

Documents