

OMA ADVOCACY STATEMENT

Approved by the OMA Board of Directors on April 24, 2025 (to be reviewed annually)

Preamble to the OMA Advocacy Statement:

These are complex times. Global challenges, rising misinformation and disinformation, and heightened public emotions are fueling uncertainty and confusion. As leaders and sources of hope in the community, the words of physicians carry weight, and they are often called upon to speak out on issues to lend their influence to the public discourse. As the representative body for Ontario's doctors, the Ontario Medical Association (OMA) receives requests to provide a public position on a wide range of issues. To ensure integrity in the decision-making process, the OMA Board of Directors has passed the following advocacy statement to ensure the OMA remains focused on its mission.

OMA Advocacy Statement:

The purpose of this advocacy statement is to articulate the principles, and the guardrails, that will guide the decisions that lead to public communications on issues impacting our members. Approved by the OMA Board of Directors, this principles-based framework affirms our commitment to professionalism, neutrality, and integrity in all advocacy activities.

Guiding Principles for Advocacy:

- 1. Alignment with OMA's mission, vision and strategy:** The OMA is a membership-driven organization with a core mission to advocate for and support doctors. Its mission is also to strengthen the leadership role physicians play in caring for patients and the broader health system in Ontario. Advocating on issues that fall beyond this and beyond the board-approved strategic plan are not consistent with this principle.
- 2. Benefits to physicians, patients, and the health-care system:**
OMA advocates for initiatives that improve the well-being of physicians, enhance patient care, and strengthen the health-care system. We are committed to evidence-based advocacy that promotes equitable, timely, and high-quality care for all Ontarians — regardless of race, ethnicity, socioeconomic status, geography, citizenship or immigration status, language, age, gender identity, sexual orientation, sex, disability, religion, or any other intersecting factor that shapes individual and community experiences.

While our core advocacy mandate is focused on Ontario, we recognize that some issues—such as labour mobility and the protection of publicly funded health care—are national in scope. In these cases, we support alignment with broader efforts, often through partners, to ensure Ontario's physicians and patients are represented in wider conversations. Though we are not positioned to lead on national files, we remain engaged and responsive to emerging priorities that impact our members' ability to practise.

The OMA does not advocate on geopolitical conflicts, partisan politics, or broader societal debates not directly connected to the practise of medicine in Ontario, even when these issues intersect with the lived experiences of individual members. This boundary exists to preserve our neutrality, protect our ability to influence health policy, and ensure that all advocacy remains mission-aligned and focused on the collective needs of Ontario’s physicians and patients.

We recognize that external events can deeply affect physicians, particularly when involving communities to which our members belong. These impacts may show up in clinical environments, academic settings, and personal well-being. While the OMA’s public advocacy needs to remain within defined boundaries, we are committed to supporting members through workplace advocacy, wellness supports, and ongoing dialogue—especially where systemic or identity-based harms intersect with the practice of medicine.

3. **Feasibility and Impact:** OMA advocates for positions that have the greatest potential to improve the lives of its members while strengthening the broader health-care system. In determining our advocacy priorities, we carefully consider the feasibility of our positions, including their potential impact, timing, and alignment.

This includes engaging with governments and key partners to ensure our advocacy is informed, strategic, and positioned for success. We also assess potential risks to other critical organizational priorities—such as the negotiations process—and remain mindful of how our positions could affect public trust in the profession, our organizational reputation, and our relationships with partners.

We recognize that our ability to influence is strengthened by consistency, integrity, and a thoughtful approach to balancing member needs with broader system impacts.

4. **Resources and Strategic Focus:** The resources required of staff and the organization to achieve advocacy objectives should be weighed against the benefits that can be accrued to our members, patients and the organization. Costs could be tangible, such as budgetary or intangible such as political capital or the capacity of physicians to lend their expertise to solutions.
5. **Risk management and Trust:** All decisions must account for reputational, political, financial, and strategic risks — including any potential impact on negotiations. Maintaining public trust is essential not only to preserve the profession’s reputation but also to enhance our influence and ability to deliver meaningful outcomes for members.
A loss of trust – whether among public, partners, or government – can limit our ability to lead within the health-care system, negotiate effectively on behalf of members, and advocate for the changes our members and their patients need. We recognize that trust is both foundational and fragile, and

our advocacy must reflect the professionalism, responsibility, and credibility expected of the OMA and its members.

Application and Authority:

This framework applies to all individuals authorized to speak on behalf of the OMA, including (but not limited to) the CEO, president, board chair, and constituency group executive members. These roles may include formal spokespersons or those engaging with external partners, media, or government on advocacy matters at the request of the OMA.

Advocacy is a key lever for delivering on the OMA’s Strategic Plan. While decisions related to advocacy rest with the operations of the organization, led by the CEO, and guided by this framework, the board provides strategic oversight to ensure alignment with long-term goals, responsiveness to member and stakeholder needs, and mitigation of reputational or relational risks.

In high-stakes or sensitive situations not covered by the operational plan, the CEO consults with the board to ensure decisions reflect shared priorities and uphold the OMA’s credibility and influence. This approach reflects a commitment to shared leadership and thoughtful governance, while supporting timely, coordinated action across the organization.

Values-Aligned Exceptions:

In rare and exceptional circumstances—where an issue, though not directly related to the practice of medicine in Ontario, presents a profound ethical imperative or serious threat to public health—the CEO shall seek board consultation to consider a limited, values-aligned advocacy response. Any such exception must align with the OMA’s mission, maintain organizational neutrality and professionalism, and demonstrate a clear connection to the health and well-being of Ontario physicians or the patients they serve.

Our Commitment:

By clearly articulating the scope and boundaries of our advocacy, we aim to uphold the trust of our members, partners, and the public. We reaffirm our commitment to equity, evidence, and professionalism—and to using our collective voice to strengthen Ontario’s health-care system and support the physicians who serve within it.

Board of Directors

Ontario Medical Association