

Question 1: Sustained Financial Support for the ACPAC Initiative

The ACPAC Initiative's innovative "hub-and-spoke" model has revolutionized arthritis care across Northern Ontario, particularly for those in remote regions who feel underserved. Seeing firsthand my mother's experience in arthritis care has sensitized me to the dramatic difference that readily accessible specialist care can make for patients and families. I am dedicated to ensuring seeking and/or advocating for continued financial assistance and Phase 4 expansion of the ACPAC Project so that all Ontarians, regardless of geographical location, are able to achieve equitable access to essential treatment.

Question 2: Revamping the Ontario Drug Benefit Program

Timely access to effective medications is crucial for preventing irreversible damage and preserving quality of life for those suffering from inflammatory arthritis. My mother's ordeal highlighted the necessity of getting the right medications in a timely manner. I will fight for the modernization of the Ontario Drug Benefit Program so that it will have less restrictive special access criteria. By streamlining these processes, patients can get cutting-edge biologic and targeted synthetic disease-modifying anti-rheumatic drugs (tsDMARDs) in a more timely fashion to help them better manage their condition.

Question 3: Supporting Indigenous Peoples with Arthritis

The inequitable burden of arthritis on Indigenous Peoples and the stark absence of culturally responsive care are issues of grave concern. Seeing firsthand my mother's experiences has also heightened my awareness of the importance of patient-driven initiatives that are sensitive to cultural context (we were part indigenous or mestizo from Guatemala). I will strive to advocate for policies that offer culturally tailored assistance, including the use of Indigenous community-based patient facilitators. These initiatives are important to helping Indigenous Peoples access the healthcare system and receive coordinated arthritis care within their communities.

Question 4: Reinvesting Biosimilars Savings

The shift towards biosimilars offers an excellent opportunity to reinvest savings in the healthcare system. In my strong opinion, these funds need to be invested in facilitating greater access to novel medications and in increasing coverage for current treatments available for patients with inflammatory arthritis. Through this reinvestment strategy I agree, we can improve patient outcomes, decrease economic costs, and enable patients to receive the most advanced treatments so I would support it.

Question 5: Eliminating Unnecessary Emergency Department Utilization

Overcrowding in the emergency department, particularly in rural and remote communities, highlights an urgent need for improved chronic disease management strategies. My mother's experience inspired me to recognize that with appropriate support and resources, unnecessary attendance at emergency services can be prevented. I look forward to working with the arthritis community to develop strategies for mitigating unnecessary emergency department service use. Enhancing access to health care, delivering educational resources, and augmenting support services can reduce the burden on emergency medical services while enhancing the quality of life of individuals afflicted with arthritis simultaneously. As a PhD candidate in healthcare access, I know these issues are complex, and require collaboration, so I will initiate a dialogue with ACE, The Ontario Rheumatology Association (ORA) and Arthritis Health Professionals Association (AHPA), to learn about and discuss effective solutions, given my academic background I can participate directly in the discussions, learn, and advocate for what we determine is feasible and more likely to succeed.

Question 6: Ensuring Equitable Access to Virtual Healthcare

Virtual health care has the potential to revolutionize health care access but only when it is extended to all groups equally. Remembering that there are some communities with challenges in accessing virtual services in the most optimal way, I am determined to advocate for policies to promote continuity, upgrading, and equitable development of virtual health care. It includes investment in infrastructure, support to health care

workers in training, and reduction of socioeconomic and technology barriers preventing marginalized communities from accessing such an important service.

Along with these responses, I want to emphasize that the care of arthritis goes beyond policy responses—it is a deeply personal undertaking on my part. The experience of my mother with rheumatoid arthritis and growing up in a part-indigenous home (Guatemalan Indigenous) has provided me with a unique insight into the everyday difficulties and situations faced by patients and families affected by this condition. I am steadfastly dedicated to using my role to advocate for meaningful reforms for the improved prevention, treatment, and overall care of arthritis patients across Ontario.

I also believe in partnership. Working in strong partnership with organizations like yours, health providers, and community leaders is essential to the development of new solutions that address the diverse needs of individuals with arthritis.

Together, we can create a more responsive, compassionate, and effective healthcare system.

Thank you for taking the time to bring these important issues to light.

Should I win the election, you can rest assured I will be in touch.

Walter Alvarez-Badales, MPP Candidate for Simcoe North

