

Despite myriad challenges faced by Canadians, and with ongoing political issues, it is reassuring to see that our policy makers continue to stay focused on along the healthcare crises. This is a signal of how vitally we rely on our publicly funded system, how much it is woven into the fabric of our national identity and how much we are feeling the effects of a system at the brink. We also understand that health and healthcare are impacted by a broad range of factors that require adaptive and innovative solutions. As we look across the country, our editorial team continues to be inspired by this kind of leadership, and we are excited to highlight leading practices in each edition of *Healthcare Quarterly*.

We were delighted at the reaction to our recent call for papers related to holistic, people-centred and integrated healthcare and social care. The response from the field was tremendous and represented one of the highest volumes of articles submitted to a Longwoods' call for papers. We are currently reviewing the submissions with our colleagues at the International Foundation for Integrated Care – Canada. We look forward to publishing the first of these papers later this fall.

Meanwhile, in this edition, we continue the theme of mental health. With the support of our special co-editor Ruby Brown, we focused on the impact of the growing crisis of loneliness and isolation that has impacted so many Canadians, and a discussion of what leaders can do to support care in the community (Brown and Wojtak 2025). For our readers who are interested in the rapidly evolving field of data and information management, we are pleased to have the opportunity to share insights from an interview with Anderson Chuck, the chief executive officer (CEO) of the Canadian Institute for Health Information (CIHI). Also in this edition, we have articles on system transformation, the link between polypharmacy and planetary health, healthy aging and a reflection on learnings from vaccine messaging. In the last edition, we featured an article on supply chain management, and we continue that with the second part of a series on this topic. Finally, we have our regularly featured columns from CIHI, ICES and Neil Seeman. As we continue to develop our focus on special topics, including mental health and integrated care, we welcome suggestions from our readers on additional areas to explore.

### Social Prescribing and Loneliness

With mounting pressures on already overstretched mental health and health services, it is apparent that we need to explore solutions beyond existing approaches to referral and treatment. D'souza et al. (2025) describe the challenges facing different age and population groups as they struggle to build and maintain social networks, and the exacerbation of these

issues through the COVID-19 pandemic. Social isolation and loneliness can have significant negative effects on a person's overall health. Social prescribing offers proactive and preventative solutions by connecting individuals to non-clinical supports, such as community recreational and arts programs and peer networks.

Next, researchers at the Women's Age Lab at Women's College Hospital in Toronto describe their experience with launching a Canadian intersectoral collaboration on loneliness. Savage et al. (2025) outline how an intersectoral collaborative that included researchers, advocates, providers, policy makers and persons with lived experience identified approaches to broaden awareness of the complexity of issues and shared actions to address loneliness in older adults.

Lurie, a long-time advocate for mental health reform through the Canadian Mental Health Association, provides a valuable historical perspective in the article "Building Community Capacity in Mental Health" (Lurie 2025). He speaks to the causes for the deficiencies in community capacity to reduce hospitalizations and incarcerations, which have not changed to the extent that they should have in the past 50 years. The solutions to better care for those with mental illness are known, but the system falls short in properly funding, collaborating, implementing actions and reporting on the deliverables.

### System Transformation

In the forward-looking article by Mullie et al. (2025), three national experts in health economics and data-informed healthcare provide an exciting look into the potential benefits, including economic, of the transformation underway in Canada's health data landscape. Led by CIHI, as outlined in its 2022–2027 strategic plan (CIHI 2022), the move toward interoperable health data across provinces and health sectors will have many benefits in terms of health system planning, quality assurance, academic research, support of clinical trials, evaluation of medical and system interventions and as a comprehensive data source to facilitate the application of artificial intelligence (AI) in healthcare.

There is no doubt that public discourse related to data, information and evidence, while more critical than ever, is also more polarizing than at any time in recent history. In a companion piece to Mullie et al. (2025), our editorial team sat down with Anderson Chuck, who joined CIHI as the CEO in 2024. Now a year into his new role, he was not only candid about the mounting challenges facing organizations that produce data, but was also excited about the opportunities and potential impacts that CIHI can have on the health of Canadians. The conversation shines a light on where Canada and CIHI can expand our reach across new data sources and

increase reporting on and understanding of population health and health outcomes.

### Supply Chain Challenges

The second in a series of articles on building resilience into Canada's healthcare supply chain by Snowdon et al. (2025) underscores the need for a "Canada First" approach that prioritizes domestic growth and ensures quality and safety of patient care. To advance these goals, the Supply Chain Advancement Network in Health Community of Practice has supported the development of an AI-enabled search platform designed to automate the sourcing of products from Canadian companies and manufacturers. An evaluation of the platform demonstrated enhanced visibility of Canadian companies and their products, ranging from pharmaceuticals to personal protective equipment to medical devices. Given the dramatic shifts in global trade, the impact of tariffs and disruptions in traditional supply chain relationships, this is a valuable resource for helping overcome internal barriers to domestic procurement and supply.

### Planetary Health

Polypharmacy has been an ongoing theme in healthcare for several years. However, when we think of polypharmacy, we typically restrict ourselves to thoughts of the potential impact on the health or safety of individuals. The article by Fallis et al. (2025) provides a much more comprehensive review of issues related to polypharmacy, including matters of workload and environmental impact. Included are a categorized series of interventions that can be considered by healthcare organizations and institutions to address polypharmacy. This article serves as a useful guide for both clinicians and administrators in dealing with an issue that has a significant impact on health and the healthcare system.

### The Aging Population

As Canada's population ages, we are experiencing a concomitant rise in the prevalence of dementia. This is particularly relevant to the long-term care sector, where more than half to three-quarters of residents show signs of dementia (Brooks et al. 2025). The authors of this study provide the results of a mixed-methods evaluation of the Behavioural Supports Ontario program, which was developed to support care and systems capacity for persons with responsive behaviours in long-term care, with an emphasis on person-centred non-pharmacological approaches. The study identifies key success factors for the program and opportunities to continue building capacity in long-term care to improve care and support for residents and their families.

### Assessing Health Needs

Revolutionary advances in healthcare enabled by AI are just being realized. The article by Stein and Seeman (2025) describes a unique application of AI to vaccine messaging. For years, information on public opinion concerning vaccination has been dependent upon surveys or focus groups, leading to challenges with sample size, representation and timeliness. Social media, however, provides a real-time reflection of public attitudes toward vaccination, one that can be analyzed by a number of demographic factors. Using the plan-do-study-act approach and AI tools, social media posts regarding vaccination can be analyzed and messaging can be created to address issues related to vaccine hesitancy specific to various groups. Messaging can then be tailored and implemented, and its effects assessed, both by analyzing subsequent social media posts and by measuring changes in vaccine uptake.

### Quarterly Columns

Access to quality care is a growing concern for transgender and gender diverse individuals, with many barriers related to stigma. Researchers associated with the Centre for Addictions and Mental Health and ICES conducted a mixed-methods study in Ontario and found that poor experiences and lack of gender-affirming supports contribute to disengagement with the mental health system and care avoidance. Lam et al. (2025) completed a six-year comparative data analysis of transgender and gender diverse individuals with a mental health-related emergency department visit or hospitalization with a sample of cisgender patients with similar attributes, including age and mental health history. The results showed alarming differences in post-discharge follow-up that fall well below Ontario's quality standards for gender-affirming care.

This quarter's regular submission from CIHI (Cheng 2025) highlights the adoption of the interRAI reporting system to document seniors' care in the community and long-term care facilities. The adoption of this system will provide national, comparable, almost real-time data across the continuum of care for seniors. These data will have many benefits, as highlighted in the article: consistent language and definitions, clinically relevant core elements, standardized observation periods, revised outcome scales and clinical assessment protocols and improved consistency in assessing areas that affect quality of life.

### Neil Seeman: Quarterly Reflection

The topic of "trust" in healthcare is one we continue to revisit, particularly as a lingering impact of the COVID-19 pandemic. Neil Seeman's column delves further into this theme through his recent interview with Anthony (Tony) Sanfilippo (Seeman 2025). Sanfilippo is a cardiologist and former associate dean at

Queen's Medical School, who has a forthcoming book on trust in healthcare. Through the conversation with Neil Seeman, we learn what inspired Anthony Sanfilippo to explore this theme and hear his well-informed insights into some of the most

significant challenges in our system, including access to primary care, delivery of culturally safe and equitable care, morale in the healthcare workforce and the need for true leadership.

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## About the Authors

**Anne Wojtak**, DrPH, is a senior healthcare leader with more than 20 years of experience in the home and community care sector in Ontario. She is the co-lead for East Toronto Health Partners (Ontario Health Team), has a consulting practice focused on health system strategy and is adjunct faculty at the University of Toronto in Toronto, ON. Anne can be reached by e-mail at [annewojtak@adaptivestrategy.ca](mailto:annewojtak@adaptivestrategy.ca).

**Richard Lewanczuk**, MD, PhD, has been the senior medical director for Health System Integration at Alberta Health Services in Edmonton, AB, for the past six years and before that he spent 10 years as the senior medical director for Primary Care. He is professor emeritus in the Department of Medicine at the University of Alberta, where he was involved with establishing chronic disease management and social determinants of health programming. Richard can be reached by e-mail at [rlwancz@ualberta.ca](mailto:rlwancz@ualberta.ca).