

The Challenge of Rural and Northern Health Systems



INTRODUCTION

Adalsteinn D. Brown, DPHIL

Dean

Dalla Lana School of Public Health, University of Toronto

Editor-in-Chief, *Healthcare Papers*

Toronto, ON



CANADA'S RURAL AND northern health communities reflect and amplify the greatest challenges facing our health system today. Chief among these challenges is the continuing dramatic inequity in health between Indigenous and non-Indigenous peoples in Canada. Fittingly, this issue on rural and northern health systems features separate pieces on Indigenous health that transcend the rural and northern context.

But the challenges facing northern and rural health systems also bring into clear focus the immensity of Canada. Smaller communities, spread broadly across large geographies, do not have the ability to sustain and access the resources of dense urban settings. This means that health inequities are accentuated by access to the resources necessary to ensure the promise of access to care. A recent

paper by Young et al. (2016) with contributions from two of the authors in this issue (Chatwood 2018; Marchildon 2018) pointed to both the higher costs of access and lower performance related to access in our north.

For many years, the prevailing wisdom of healthcare politics has been *more is better*. More physicians, more nurses and more access to care. While more is definitely necessary in our rural and northern communities, it is clear that *more* will not be enough on its own. Real health reform that benefits rural and northern communities will depend on meeting the Calls to Action from the Truth and Reconciliation Commission. It will also depend on articulating new relationships between rural and urban centres, on the spread and scale of new ways of providing care that match the challenges of remote geographies and on educational and

resource-sharing strategies that embed the development of healthcare capacity in these communities, such as the Northern Ontario School of Medicine.

However, more care will not be sufficient to fix health inequities in our rural and northern communities; we will also need to pay close attention to the broader determinants of health and the justice that is reflected (or not) in our rural and northern communities. Once again, the Calls to Action are critical to improving health. But health across our rural and northern communities will depend on improving the broader determinants of health and our understanding of how health and health systems interact with policy in northern and rural communities. This issue also lays out a research agenda for improving health and health systems that will be necessary to create the policy context that improves both health systems and health itself.

The challenge of rural and northern health has always been a critical issue in Canada but, as healthcare changes along with the size and role of our rural and northern communities, this issue will become even more important. Without thoughtful action now, we will exacerbate challenges that will take decades to resolve.

References

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