

Strategic Plan 2026

Canadian Arthritis
Patient Alliance



What We Do

CAPA envisions a world where people living with arthritis can live well, without barriers to care, participation, or opportunity. The infographic on the following page introduces the Canadian Arthritis Patient Alliance (CAPA) and offers a snapshot of our role as a patient-led, national organization. It outlines our values, what distinguishes our approach, and the ways we work with partners to improve access to care, strengthen patient-oriented research, and support meaningful participation in decisions that affect people living with arthritis.

CAPA is more than an organization; it's a community. We bring together people living with arthritis across the country to amplify their voices and ensure their lived experiences drive meaningful change.

To learn about our accomplishments in 2025, watch this [10 minute video](#) featuring the CAPA President, Linda Wilhelm.

Who We Are

CANADIAN ARTHRITIS PATIENT ALLIANCE

PATIENT-LED. NATIONAL. EVIDENCE-INFORMED.

CAPA AT A GLANCE

FOUNDED IN
2022



PAN-CANADIAN
SCOPE

LIVED EXPERIENCE
AS EVIDENCE



PATIENT-LED,
PARTNERSHIP
DRIVEN MODEL

FOCUS AREAS
INCLUDE:

- RESEARCH
- POLICY
- EDUCATION
- LIVED EXPERIENCE

WHAT MAKES US DIFFERENT?

**PATIENTS AS PARTNERS,
NOT PARTICIPANTS**

We work with patients as collaborators, advisors, and co-creators.

**INDEPENDENT AND
PATIENT-LED**

CAPA is governed by people living with arthritis.

**EVIDENCE-INFORMED
ADVOCACY**

We combine lived experience with research and policy expertise.

**SMALL TEAM,
NATIONAL IMPACT**

We work strategically to influence systems, not just awareness.

WHAT CAPA DOES



**HEALTH POLICY &
ACCESS**

Improving access to care, treatments, and prevention



**PATIENT-ORIENTED
RESEARCH**

Embedding lived experience in research design and decisions



**EDUCATION &
KNOWLEDGE
TRANSLATION**

Sharing trusted, patient-informed information

OUR VISION

CAPA WORKS TO ENSURE THAT PEOPLE WITH LIVED EXPERIENCE HAVE THE OPPORTUNITY TO:



- Access appropriate healthcare, treatments, and support
- Participate in decisions that affect their health and daily lives
- Drive patient-oriented research and policy decisions



OUR SOCIALS

OUR NEWSLETTER



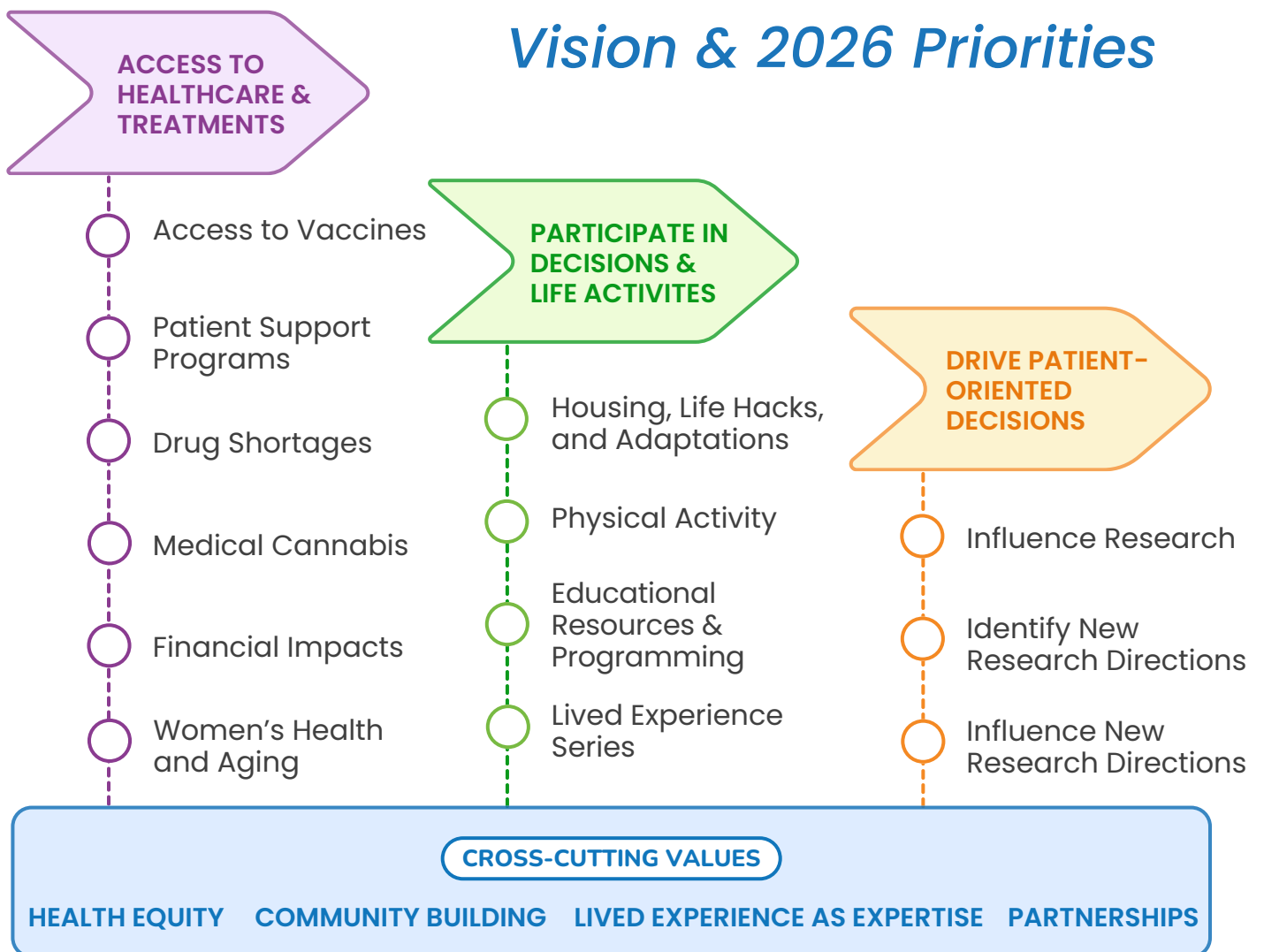
OUR WEBSITE



HELPING PEOPLE LIVING WITH ARTHRITIS FIND THEIR VOICE

Vision

The infographic below describes our 2026 priorities, projects, and activities that support our vision.



Strategic Context

People living with arthritis in Canada face growing and interconnected challenges that extend beyond access to clinical care. Long wait times delay diagnosis and treatment, and nearly one in ten Canadians lack a regular primary care provider—often the first point of entry for arthritis care. Even when care is available, it is frequently fragmented and poorly aligned with the realities of managing a lifelong, fluctuating condition.

Health system pressures increasingly shift responsibility onto individuals. People with arthritis are expected to self-manage complex treatments, coordinate care, and advocate for themselves, often without adequate support. These demands disproportionately affect people facing structural barriers, including women, older adults, those with lower incomes, people living in rural or remote communities, racialized populations, and people with intersecting disabilities, contributing to widening inequities in health outcomes and access to care.

The impacts of arthritis also affect daily life. Chronic pain, fatigue, and mobility limitations influence employment, housing stability, transportation, caregiving responsibilities, and the ability to live independently. Limited access to accessible housing, income supports, and community-based services can further worsen health and social outcomes, yet these broader determinants of health are rarely reflected in arthritis-related policy or program design.

Within this context, patient or community-based organizations play a critical role. Organizations such as the Canadian Arthritis Patient Alliance (CAPA) help bridge gaps between patients, health systems, and decision-makers by generating patient-informed evidence, supporting navigation and health literacy, and ensuring lived experience informs research, policy, and system design. As pressures on health and social systems grow, sustained investment in CAPA's capacity is essential to ensure patient voices meaningfully shape equitable, effective solutions that support people with arthritis not only in managing their health, but in living well.

Our 2026 Plan

Late in 2025, we held an **annual planning session** with our board of directors to identify our priorities for the upcoming year. These priorities and projects are described in the following tables.

Access to Healthcare, Treatments & Support

ACCESS TO VACCINES	<ul style="list-style-type: none">• Continue to advocate for access to protein-based vaccines to enable people with autoimmune arthritis to retain choices in accessing vaccines.• Develop educational resources about the vaccines and how to access them across Canada which will be informed by a survey about patients' experiences.• Continue to contribute to the Canadian Immunocompromised Advocacy Network.
PATIENT SUPPORT PROGRAM PROJECT	<ul style="list-style-type: none">• Continue to present the Patient Support Program survey findings and recommendations to different audiences.• Develop an environmental scan to inform a policy position paper on Patient Support Programs.

<p>SUPPORT DRUG SHORTAGES</p>	<ul style="list-style-type: none"> • Share final report summarizing key themes and recommendations following engagement with people with arthritis • Create patient-informed educational resources to provide support during drug shortages. • Continue to monitor drug shortages and communicate issues to policy makers and the CAPA community.
<p>MEDICAL CANNABIS</p>	<ul style="list-style-type: none"> • Share final report summarizing key themes from engagement with people living with arthritis. • Develop evidence-based written resources for patients about the appropriate use and access to medical cannabis.
<p>FINANCIAL IMPACTS OF LIVING WITH ARTHRITIS</p>	<ul style="list-style-type: none"> • Develop educational series to help families and specifically women of childbearing age access financial supports on both federal and provincial levels
<p>WOMEN'S HEALTH & AGING</p>	<ul style="list-style-type: none"> • Develop a series about women's health and aging including menopause, vaccines, and co-morbidities and arthritis.
<p>FRANCOPHONE SUPPORT AND EDUCATION</p>	<ul style="list-style-type: none"> • Continue to engage and support the Francophone Support & Resources Advisory Committee. • Continue to share the francophone support and resources action plan developed by the Francophone Support & Resources Advisory Committee. • Continue to adapt CAPA processes to offer education and support in French, including CAPA newsletters and webinars exclusively in French.

Participate in Decisions and Life Activities

<p style="text-align: center;">LIFE HACKS AND ASSISTIVE DEVICES</p>	<ul style="list-style-type: none"> • Share the action plan and find ways to create a community-vetted list of products and services that support independent living in arthritis. • Continue to work with the McMaster University School of Rehabilitation occupational therapy students to identify informal adaptations and life hacks used by people with arthritis.
<p style="text-align: center;">PHYSICAL ACTIVITY</p>	<ul style="list-style-type: none"> • Implement a peer support program to support people living with arthritis in making physical activity a part of their lives. • Continue to host virtual physical activity sessions to help people with arthritis integrate movement into their lives.
<p style="text-align: center;">EDUCATIONAL RESOURCES AND PROGRAMMING</p>	<ul style="list-style-type: none"> • Share information about our existing educational materials and expand our communications reach. • Advance our educational materials delivery with new tools and formats.
<p style="text-align: center;">LIVED EXPERIENCE SERIES</p>	<ul style="list-style-type: none"> • Continue to offer a lived experience series such as navigating health, getting on a biologic, and vaccines which feature people living with various forms of arthritis alongside healthcare professionals. A key component of this series is to create a space where people can connect with others living with arthritis and support their emotional well-being. • Continue to feature blogs written by health care professionals and people with arthritis on a range of practical topics.

Drive Patient-Oriented Research and Decisions

INFLUENCE RESEARCH	<ul style="list-style-type: none">• Continue to support and facilitate patient engagement in research through our support to researchers.• Write opinion and academic papers about key topics focused on patient experiences and perspectives.
IDENTIFY NEW RESEARCH DIRECTIONS	<ul style="list-style-type: none">• Publish and share the research undertaken by the CAPA community, such as the action plan about living independently with arthritis, the Photovoice project, and other projects led by and for people living with arthritis.• Develop a survey to identify experiences in taking vaccines for people with autoimmune arthritis, including barriers, adverse events, preferences, and future patient-identified research priorities.
INFLUENCE PHARMACEUTICAL AND OTHER POLICIES	<ul style="list-style-type: none">• Provide policy submissions for topics of interest to people living with arthritis, such as drug pricing, pain management, health policy regulation, public and private insurance, drug shortages, Canada Disability Benefit, medical cannabis, and other key topics.• Continue to participate in advocacy relating to federal and provincial priority areas and other related activities.• Provide patient input submissions for arthritis medications and other reviews to Canada's Drug Agency (CDA) and participate in consultations.• Attend and/or present at key health conferences like the Canadian Organization for Rare Diseases (CORD), Canadian Rheumatology Association, and other key health policy and research meetings in Canada and abroad.• Continue to participate in working groups and committees relating to health policy, such as the Best Medicines Coalition (BMC) drug pricing, rare disease, and pharmaceutical policy.

Foundational Enablers

COMMUNITY BUILDING	<ul style="list-style-type: none">• Continue to build on and offer capacity building opportunities to the CAPA network of patient partners and advocates so they can continue to speak up for themselves to decision makers.• Continue to develop and share newsletters to reach out and equip people with arthritis to learn to support themselves.• Develop and implement outreach and social media strategies.
LIVED EXPERIENCE AS EXPERTISE	<ul style="list-style-type: none">• Continue to match CAPA's network of patient partners to research and policy making opportunities.• Continue to offer opportunities and honorarium for patient partners to attend and participate in meetings, conferences, etc that align with CAPA priorities.
EQUITY & PARTICIPATION	<ul style="list-style-type: none">• Support meaningful engagement of diverse communities and lived experience voices.• Reduce barriers to participation through accessible processes and support.
GOVERNANCE & FUNDING	<ul style="list-style-type: none">• Strengthen the membership and role of Medical Advisory Committee in CAPA's governance structure.• Continue to diversify funding sources to include non-industry sources.• Update organizational policies, as needed.
COLLABORATION & PARTNERSHIPS	<ul style="list-style-type: none">• Continue to support cross-sector collaboration with researchers, policymakers, community organizations and others.