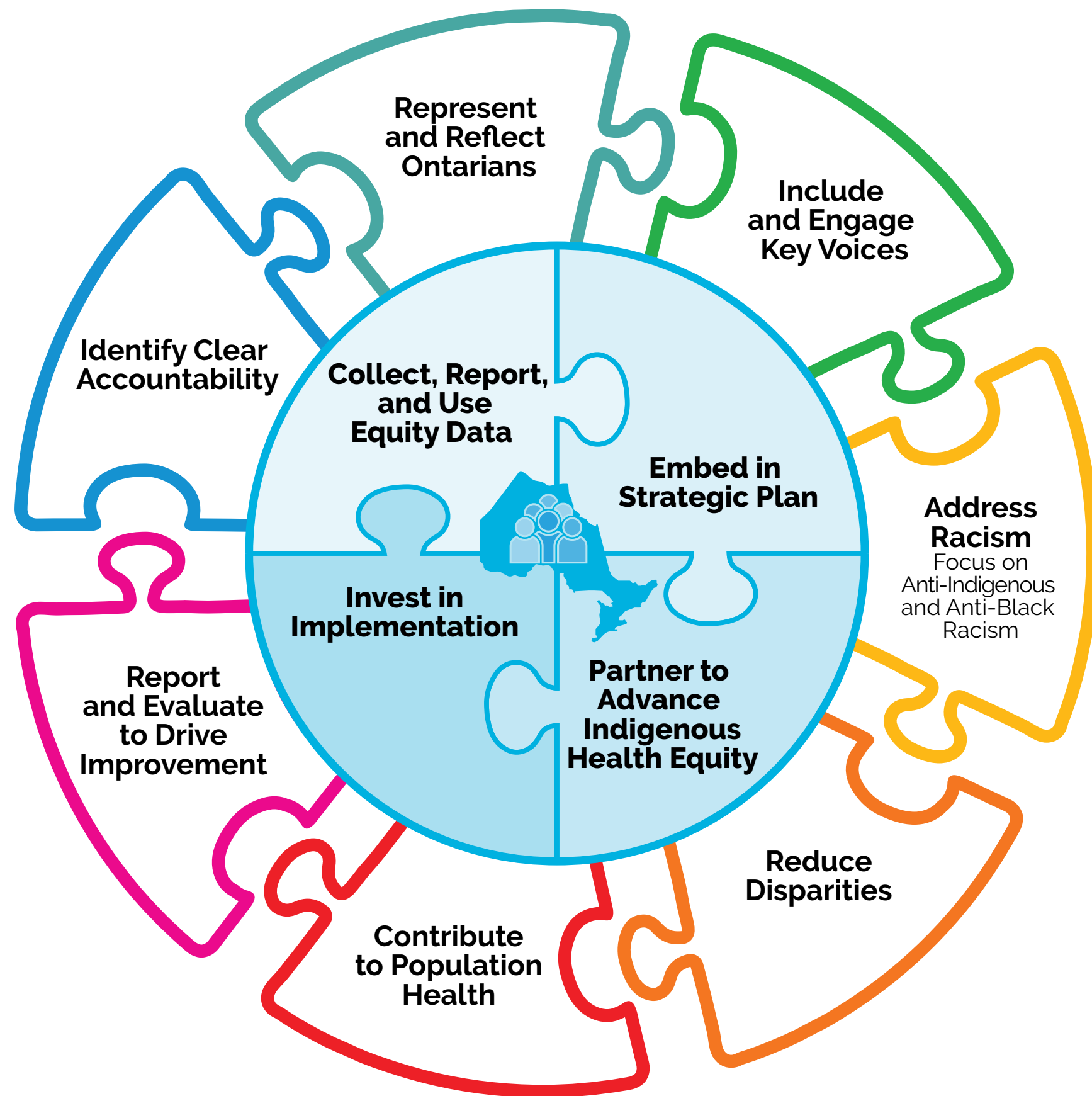


Ontario Health's Equity, Inclusion, Diversity and Anti-Racism Framework

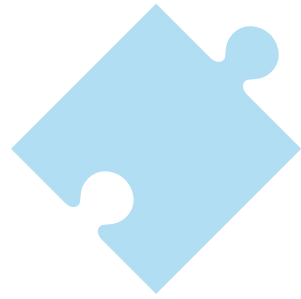
With a focus on addressing anti-Indigenous and anti-Black racism

11 Areas of Action

- 
Collect, Report, and Use Equity Data
 Set up systems and supports to collect, analyze, and use equity data to report findings and inform future decisions
- 
Embed in Strategic Plan
 Ensure efforts to address equity, inclusion, diversity, anti-Indigenous and anti-Black racism are at the highest priority for the organization
- 
Partner to Advance Indigenous Health Equity
 Recognize that strong relationships with Indigenous leadership and communities - founded on respect, reciprocity, and open communication — are critical in ensuring that the new health care system in Ontario reflects and addresses the needs of Indigenous peoples.
- 
Invest in Implementation
 Apply the financial and people resources needed for success and ongoing sustainability
- 
Identify Clear Accountability
 Establish and assign "who" is responsible for "what"
- 
Represent and Reflect Ontarians
 Strive for all levels of the organization to reflect the communities served
- 
Include and Engage Key Voices
 Listen to the staff and communities and include their ideas and feedback into the design, delivery and evaluation of programs and services
- 
Address Racism Focus on Anti-Indigenous and Anti-Black Racism
 Identify and address discriminatory practices and procedures in all forms and all levels using targeted approaches
- 
Reduce Disparities
 Use data and best practices to establish standards, identify disparities and implement corrective action through a focus on access, experience and outcomes for the population
- 
Contribute to Population Health
 Work with other arms of government and agencies in planning services to improve the health of the population
- 
Report and Evaluate to Drive Improvement
 Publish Framework metrics publicly with all reports including an equity analysis



For more information, go to: ontariohealth.ca



Building a Common Understanding

Ontario Health is committed to advancing equity, inclusion and diversity and addressing racism. In order to achieve better outcomes for all patients, families, and providers within Ontario's health system, we must explicitly identify and address the impacts of **anti-Indigenous** and **anti-Black racism** as part of our commitment.

This framework builds upon our existing legislated commitments and relationships with **Indigenous peoples** and **Francophone communities**, and recognizes the need for Ontario Health to take an **intersectional approach** to this work.

The definitions below help to provide a common understanding as we work together to create a shared culture focused on equity, inclusion, diversity, and anti-racism.

Anti-Racism

An anti-racism approach is a systematic method of analysis and a proactive course of action. The approach recognizes the existence of racism, including systemic racism, and actively seeks to identify, reduce and remove the racially inequitable outcomes and power imbalances between groups and the structures that sustain these inequities.

Anti-Black Racism

The policies and practices rooted in Canadian institutions such as education, health care, and justice that mirror and reinforce beliefs, attitudes, prejudice, stereotyping and/or discrimination towards Black people and communities.

Anti-Indigenous Racism

Anti-Indigenous racism is the ongoing race-based discrimination, negative stereotyping, and injustice experienced by Indigenous Peoples within Canada. It includes ideas and practices that establish, maintain and perpetuate power imbalances, systemic barriers, and inequitable outcomes that stem from the legacy of colonial policies and practices in Canada.

Diversity

The range of visible and invisible qualities, experiences and identities that shape who we are, how we think, how we engage with and how we are perceived by the world. These can be along the dimensions of race, ethnicity, gender, gender identity, sexual orientation, socio-economic status, age, physical or mental abilities, religious or spiritual beliefs, or political ideologies. They can also include differences such as personality, style, capabilities, and thought or perspectives.

Equity

Unlike the notion of equality, equity is not about sameness of treatment. It denotes fairness and justice in process and in results. Equitable outcomes often require differential treatment and resource redistribution to achieve a level playing field among all individuals and communities. This requires recognizing and addressing barriers to opportunities for all to thrive in our society.

Health Disparities

Differences in health access, experience or outcomes in a way that is systematic, patterned and preventable.

Inclusion

Inclusion recognizes, welcomes and makes space for diversity. An inclusive organization capitalizes on the diversity of thought, experiences, skills and talents of all of our employees.

Intersectionality

The ways in which our identities (such as race, gender, class, ability, etc.) intersect to create overlapping and interdependent systems of discrimination or disadvantage. The term was coined by Black feminist legal scholar Dr. Kimberlé Crenshaw and emerged from critical race theory to understand the limitations of "single-issue analysis" in regards to how the law considers both sexism and racism. Intersectionality today is used more broadly to understand the impact of multiple identities to create even greater disadvantage.

Structural Racism

Is a system in which public policies, institutional practices, cultural representations, and other norms work in ways to reinforce and perpetuate racial group inequity. It identifies dimensions of our history and culture that have allowed white privilege and disadvantages associated with colour to endure and adapt over time. Structural racism is not something that a few people or institutions choose to practice. Instead it has been a feature of the social, economic and political systems in which we all exist.

Systemic Racism

Organizational culture, policies, directives, practices or procedures that exclude, displace or marginalize some racialized groups or create unfair barriers for them to access valuable benefits and opportunities. This is often the result of institutional biases in organizational culture, policies, directives, practices, and procedures that may appear neutral but have the effect of privileging some groups and disadvantaging others.

**Definitions extracted from the McGill University Equity, Diversity and Inclusion Strategic Plan (2020-2025); the UHN Anti-Racism and Anti-Black Racism (AR/ABR) Strategy; and the 519 Glossary of Terms around equity, diversity, inclusion and awareness*

***Connecting Care Act 2019 (Link to: <https://www.ontario.ca/laws/statute/19c05>)*