

LISTOWEL WINGHAM HOSPITALS ALLIANCE EQUITY, INCLUSION, DIVERSITY AND ANTI-RACISM WORKPLAN



LWHA EQUITY, INCLUSION, DIVERSITY AND ANTI-RACISM (EIDA-R) STATEMENT

The Listowel Wingham Hospitals Alliance is committed to becoming an organization that honours and includes the diversity of the communities we serve, providing equitable and inclusive care. We value inclusion and diversity and will work to develop and maintain an organizational culture that is welcoming for everyone.



LAND ACKNOWLEDGEMENT

We acknowledge and give thanks for the land on which we gather as being the traditional territory of the Haudenosaunee (*Hode-en-o-shownee*)/People of the Long House and the Anishinaabe (*A-nish-in-ah-bay*).

We recognize the First Peoples' continued stewardship of the land and water, and that this territory is subject to the Dish with One Spoon Wampum under which multiple nations agreed to care for the land and resources by the Great Lakes in peace.

We also acknowledge and recognize the treaties signed in regard to this land including Treaty #29 and Treaty #45 ½. Our roles and shared responsibilities as treaty people mean we are committed to moving forward in reconciliation with gratitude and respect with all First Nations, Inuit, and Métis people. We commit to sharing resources that explore the



rights and diverse cultures, voices, experience and histories of First Nations, Inuit, and Métis people.

ABOUT THE ARTWORK & ARTIST Created by Tracey Anthony, Turtle and Seven Generations includes the image of a turtle. The feather on its back has seven segments, reflecting the Seven Generations principle that the decisions we make today should result in a sustainable world seven generations into the future. The four legs represent the “Four Directions” such as those found in the Medicine Wheel. Tracey Anthony’s mother is Mississauga (Ojibway) from the Mississaugas of the Credit First Nations reserve. His father was Delaware (Lenni Lenape) from the Six Nations reserve. In his artwork, Tracey incorporates Ojibway, Delaware, and Iroquoian influences.

COMMITMENT TO INDIGENOUS SOVEREIGNTY, TRUTH AND RECONCILIATION

The Listowel Wingham Hospitals Alliance (LWHA) recognizes and respects Indigenous sovereignty in Canada as recognized and affirmed in Section 35 of the *Constitution Act, 1982*, and is dedicated to truth and reconciliation with Indigenous peoples. LWHA will recognize and respect Indigenous peoples’ right to self-governance and ways of knowing.

We are committed to creating cultural safety by hearing, understanding and responding to the concerns of Indigenous peoples in order to co-create a new path forward that is grounded in trust, respect, reconciliation and partnership.

COMMITMENT TO EQUITY, INCLUSION, DIVERSITY AND ANTI-RACISM

The Listowel Wingham Hospitals Alliance (LWHA) is committed to becoming a safe, equitable and inclusive healthcare organization for ALL. We are committed to addressing all forms of discrimination, including, but not limited to, anti-racism, gender bias, and rights of 2SLGBTQIA+ communities.

As an organization dedicated to providing exceptional people- centered care, we must understand the experiences and views of every person who visits, works for, volunteers or receives care at our hospitals and make the necessary changes to ensure everyone’s needs are met and respected. A high-quality health care system starts with a culture that promotes equity and reduces disparities.

LWHA EIDA-R FRAMEWORK AND WORKPLAN

Our EIDA-R (Equity, Inclusion, Diversity and Anti-Racism) Framework is aligned with the Ontario Health Equity, Inclusion, Diversity and Anti-Racism Framework and is a long-term commitment, which requires hard work and challenging conversations. This workplan aligns with healthcare partners in the Huron, Perth and Area Ontario Health Team. It is a living document that will change based on our evolving knowledge and the feedback we receive from our patients, families, staff, physicians and the communities we serve. Annual LWHA “Action Plans” will be developed and posted on the LWHA EIDA-R section of our website. LWHA will continuously build upon our EIDA-R workplan and adopt best practices into our policies,

principles, structures, systems, programs, practices, training and operations and will utilize the strengths of our diverse workforce to:

- Improve recruitment, retention and inclusion of under-represented demographic groups
- Implement policies and processes to remove barriers and organizational practices that do not optimally promote, support or enable inclusion
- Create processes, structures and governance frameworks conducive to equity of opportunity, accessibility and EIDA-R best practice

This workplan will help contribute to better outcomes for patients, families and providers within LWHA and is an essential component of people-centered care. We cannot achieve people-centered care without addressing health equity in all that the system does. It needs to be integrated into culture, practice and policy at LWHA and by providers, system leaders and planners.

The development of this workplan strengthens and brings renewed meaning to our organization's values **Respect, Teamwork, Care Compassion, Communication and Professionalism** as we strive to be an organization where everyone feels safe, respected and valued. Together we will create an environment where everyone feels comfortable being themselves, are engaged and feel empowered to share their ideas and perspectives. Our capacity to deliver on our organizational vision of **"Enriching Life's Journey Together"** is dependent on our ability to provide an inclusive space for every person who visits, works for, volunteers or receives care at our hospitals.

MESSAGE FROM LWHA PRESIDENT & CEO

ESTHER MILLAR

I am proud to share our commitment to equity, inclusivity, diversity, and anti-racism expressed in our comprehensive plan. This initiative is crucial in creating and sustaining an environment that is supportive and welcoming to all. By fostering a culture of inclusivity, we ensure that everyone feels valued and respected.

Our plan is designed to advance equity, inclusivity, diversity and anti-racism. It is not just about policies and procedures; it is about embedding these values into the very fabric of our organization. This approach enables all who work here to fully contribute and develop, ensuring that each individual can thrive and reach their full potential.

Moreover, our commitment to these principles supports the provision of culturally competent care. By understanding and respecting the diverse backgrounds of our patients, we can deliver care that is not only effective but also compassionate and personalized.

Together, we can build a workplace where everyone feels empowered and where our collective efforts lead to exceptional care and service. Thank you for your dedication to making our organization a place where equity, inclusivity, diversity, and anti-racism are not just ideals, but lived realities.

LWHA will align our EIDA-R workplan with the following framework shared by Ontario Health

Overview of Ontario Health's Equity Framework

Ontario Health's Equity, Inclusion, Diversity, and Anti-Racism Framework is built around **11 areas of action** designed to promote equitable healthcare and eliminate systemic barriers. These areas will guide LWHA's EIDA-R work in embedding equity principles at every level.

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 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, and Indigenous and anti-Black racism are at the highest priority for the organization
- Partner to Advance Indigenous Health Equity**
Recognize and strengthen 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



Key Areas of Action:

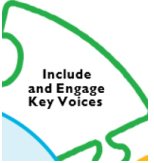

1. **Identify Clear Accountability:** Define roles and responsibilities for equity initiatives.
2. **Represent and Reflect Ontarians:** Ensure organizational diversity reflects the populations served.
3. **Include and Engage Key Voices:** Partner with communities to inform program design and evaluation.
4. **Address Racism:** Focus on anti-Indigenous and anti-Black racism using targeted interventions.
5. **Reduce Disparities:** Use data to identify inequities and implement corrective measures.
6. **Contribute to Population Health:** Plan services that improve health outcomes for marginalized groups.
7. **Report and Evaluate to Drive Improvement:** Publish metrics and equity analyses publicly.
8. **Collect, Report, and Use Equity Data:** Build systems to gather and analyze equity-related data.
9. **Embed in Strategic Plan:** Prioritize equity in organizational goals and strategies.
10. **Partner to Advance Indigenous Health Equity:** Build respectful relationships with Indigenous communities.
11. **Invest in Implementation:** Commit resources to ensure sustainable equity practices




LWHA EIDA-R STRATEGIC WORKPLAN



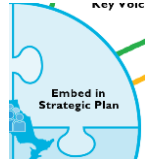
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Investment in EIDA-R Infrastructure and Implementation – Primarily, we must apply the financial and people resources for success and ongoing sustainability with clearly defined roles and responsibilities for all the set equity initiatives (**key action area #1 Identify Clear Accountabilities**). Similarly, we must emphasize the importance of education, relationship building and reconciliation to advance our commitment to creating an environment where everyone feels comfortable being themselves, are engaged and feel empowered to share their ideas and perspectives.



Key Area of Action	OH Framework	EIDA-R Strategic Priority	EIDA-R Strategic Priority Defined	Desired Outcome	Objectives and Deliverables
<p>Key action area #2 Represent and reflect Ontarians: Ensure organizational diversity reflects the populations served.</p> <p>Key action area #3 Include and Engage Key Voices: Partner with communities to inform program design and evaluation.</p>	 	Education and Training Program	Increase awareness of the benefits of EIDA-R across the organization in an effort to reduce attitudinal barriers and bias through development of and access to EIDA-R training resources for all staff / physicians / volunteers/ students.	Enhance awareness and knowledge among all of LWHA.	<p>Objective: Provide staff, physicians and leaders with opportunities to develop skills and competencies to act inclusively, manage diverse teams, and apply an EIDA-R lens to decision-making.</p> <ul style="list-style-type: none"> Deliverable: Research and provide access to EIDA-R training resources for all staff / physicians / volunteers/ students (unconscious bias, microaggression, cultural sensitivity, indigenous, LGBTQIA+ health, anti-black racism, ableism) Deliverable: Target education with staff, physicians and leaders around inclusive language, using the Huron Perth OHT guide. <p>Objective: Focus on promoting equity among all staff and departments, recognize all team members roles and efforts.</p> <ul style="list-style-type: none"> Deliverable: Recognition of all hospital positions throughout the year by month.

					Deliverable: Recognize on a monthly basis the religious and cultural celebrations of importance to staff based on surveying staff.
Key action area #4 Address Racism: Focus on anti-indigenous and anti-Black racism using targeted interventions.		Develop Inclusive Recruitment and Retention Practices	We will ensure fair and inclusive recruitment, retention, mentorship, performance and talent management and other workplace programs and strengthen anti-violence, harassment and other related policies and codes of conduct to foster respect and safety in the workplace.	Ensure hiring and engagement processes are barrier and bias-free and ensure language of publications and documentation (e.g. Policies, Procedures, Strategic Plan) are barrier and bias-free	Objective: Embed EIDA-R accountability and expectations in performance evaluations, and measurement tools. <ul style="list-style-type: none"> Deliverable: Ensure EIDA-R principles and inclusive language are reflected in: position descriptions, job postings, interview questions, composition of interview panels, onboarding practices Deliverable: Source and educate on a standardized tool to use when reviewing all policies, procedures and internal LWHA documents with an EIDA-R lens.
Key action area #5 Reduce Disparities: Use data to identify inequities and implement corrective measures.					
Key action area #6 Contribute to Population Health: Plan services that improve health outcomes for marginalized groups.		Data Collection for Strategic Planning	Data collection for strategic planning and analysis are critical to inform a comprehensive understanding of the experiences that may result from inequities, underrepresentation and exclusion. We will collect and analyze relevant baseline data to establish standards, develop targets	Foster an organization that eliminates inequities and is culturally sensitive in order to improve patient, family and staff experiences, and health outcomes.	We will use the following qualitative and quantitative data to measure, monitor, understand and report challenges and progress on EIDA-R issues: Staff / Physician Global Workforce Survey Huron, Perth and catchment area data to understand community profile <p> Objective: Encourage staff to complete the Global workforce survey to gather equity, diversity, and inclusion data as well as demographics data on staff. </p>

<p>Key action area #7 Report and Evaluate to Drive Improvement: Publish metrics and equity analyses publicly.</p>			<p>and identify gaps around systemic barriers to equity, inclusion, human rights and diversity.</p>		<p>7 • Deliverable: Data collection and analysis are critical to inform comprehensive understanding of the experiences that may result from inequities, underrepresentation and exclusion. We will collect and analyze relevant baseline data to establish standards, develop targets and identify gaps around systemic barriers to equity, inclusion, and diversity.</p> <p>Objective: Collect patient health equity data to better understand the makeup of our community, the disparities that exist and to inform program development and delivery of care.</p> <ul style="list-style-type: none"> • Deliverable: Research a process to collect health equity data that is inclusive, accessible and patient centered
<p>Key action area #8 Collect, report, and Use Equity Data: Build systems to gather and analyze equity-related data.</p> <p>Key action area #9 Embed in Strategic Plan: Prioritize equity in organizational goals and strategies.</p>	 	<p>Data Analytics and Reporting</p>	<p>We will continuously track and assess the experiences of our staff/physicians and the patients and families we serve related to EIDA-R, identify opportunities to improve and report our progress</p>	<p>Leverage EIDA-R principles to strengthen collaborative efforts and integrate diverse perspectives into LWHA structures and decision-making processes.</p>	<p>Data to be analyzed and reported to include:</p> <ul style="list-style-type: none"> ➤ Patient Experience ➤ Staff Experience ➤ Volunteer Experience ➤ Process data <p>Objective: Review and revise policies to remove biases and barriers in order to reflect and promote the principles of equity, diversity and inclusion</p> <ul style="list-style-type: none"> • Deliverable: Conduct a prioritization for policy review and implement revision plan <p>Objective: Promote dates that honour diverse groups within our communities</p> <ul style="list-style-type: none"> • Deliverable: Recognize and celebrate cultural and religious

					8 celebrations of importance to staff
<p>Key action area #10 Partner to Advance Indigenous Health Equity: Build respectful relationships with Indigenous communities.</p> <p>Key action area #11 Invest in Implementation: Commit resources to ensure sustainable equity practices.</p>	 	Engaging and Co-Design with Key Partners / Voices	To ensure our efforts reflect what is meaningful and matters to individuals experiencing inequities, staff/physicians and patients and their caregivers must be involved in shaping and evaluating programs and services. We will reach out to those who have lived experiences with inequities and partner with them to co-design an inclusive health system for all.	<p>Broden internal understanding of Indigenous Cultural awareness. We will adopt and follow the Ontario Health's First Nations, Inuit, Metis and Urban Indigenous Health Framework (see Appendix A)</p> 	<p>Objective: As a part of LWHA's learning and unlearning journey we are committed to the path of ongoing reconciliation with Indigenous and non-Indigenous peoples based on mutually respectful relationships.</p> <ul style="list-style-type: none"> • Deliverable: Role out education on land acknowledgements, focusing on developing understanding of the land in which our hospitals are situated and providing learning opportunities to foster personal reflection on the land and its stewardship. • Deliverable: Develop a smudging policy (Recognize aboriginal healing practices in our hospitals) • Deliverable: Commit to one or more of the health care specific Calls to Action included in the 94 Truth and Reconciliation Commission Calls to Action document prepared by the Canadian Federal Government. • Deliverable: Take part in an Indigenous Blanket Ceremony or a similar indigenous cultural practice

WHAT SUCCESS LOOKS LIKE

All people can achieve equitable health outcomes. Equity-deserving and marginalized patients/clients have health outcomes similar to population health outcomes when health inequities are reduced.

The strategies outlined in our workplace are things we believe must be addressed in order to position LWHA for future progress.

We will know we have been successful when:

- Care at LWHA is culturally informed, equitable and accessible for all people.
- Our leadership and workforce reflect the diverse communities we serve, and everyone feels comfortable being themselves, are engaged and feel empowered to share their ideas and perspectives.
- We have developed and implemented education and training resources. These resources will include tools to help us integrate health equity into our culture.
- Sustainable EIDA-R infrastructure exists across our alliance, and we have even stronger, more authentic partnerships with our communities and healthcare partners.

Learning and Development

Areas of focus for learning and development:

- ✚ Unconscious Bias / Microaggression
- ✚ Inclusive Language
- ✚ Ableism
- ✚ 2SLGBTQIA+ Health
- ✚ Anti-Indigenous Racism
- ✚ Anti-Black Racism
- ✚ Physical Bias including Weight
- ✚ Gender Diversity, Awareness, Respect and Inclusivity

TIMELINE

Here is how the general deliverables outlined in our EIDA-R strategic workplan will be executed over the next 3 years in order to achieve our overarching objectives for change.

2024 – 2027 EIDA-R Plan

Year 1- 2024-2025	Key Area of Action	Status of Action Item	
	1	✓	Create and EIDA-R committee and develop a terms of reference
	1	✓	Develop an EIDA-R statement for the alliance
	2	✓	Provide unconscious bias training to leaders
	2	✓	Initiate introductory EIDA-R learning for all staff
	3	✓	Research EIDA-R best practices in healthcare
	3	✓	Choose an EIDA-R framework
	3	✓	Develop a multi-year EIDA-R workplan
	8	✓	Collect equity, diversity, inclusion and demographics data from staff

	8 10 10	✓ ✓	Seek partnership with Indigenous contacts in Huron Perth Develop an LWHA land acknowledgement Provide education on land acknowledgements
Year 2- 2025-2026	2 2 4 5 5 6 9 10 11		Research and provide access to EIDA-R training resources for all staff / physicians / volunteers/ students- unconscious bias, microaggression Target education with staff, physicians and leaders around inclusive language, using the Huron Perth OHT guide. Commit to one or more of the health care specific Calls to Action included in the 94 Truth and Reconciliation Commission Calls to Action document prepared by the Canadian Federal Government. Source, educate on and use standardized tool when reviewing all policies, procedures and internal LWHA documents with an EIDA-R lens. Conduct a prioritization for policy review and implement revision plan Ensure EIDA-R principles and inclusive language are reflected in: Position descriptions, Job postings, Interview questions, Composition of interview panels, onboarding practices Research a process to collect health equity data that is inclusive, accessible and patient centered Monitor EIDA-R related 2025 Accreditation Standards Recognize and celebrate cultural and religious celebrations of importance to staff Take part in an Indigenous Blanket Ceremony or other indigenous cultural practice Develop a documented process to record, investigate and resolve inappropriate behaviour reports based on discrimination made to staff and / or patients related to EIDA-R
Year 3- 2026-2027	2 5 5 8 9 10		Research and provide access to EIDA-R training resources for all staff / physicians / volunteers/ students: any of cultural sensitivity, indigenous, LGBTQIA+ health, anti-black racism, ableism Implement transparent Patient Experience process and resources to support patients in equity-related concerns Conduct a prioritization for policy review and implement revision plan Electronic health record enhancements that align in EIDA-R best practices Embed EIDA-R accountability and expectations in performance evaluations, and measurement tools Recognize indigenous healing practice(s) in the hospital (or other cultural healing practice)

GLOSSARY

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. This is not a complete list of definitions, but has been created in the hopes that it will help with shared understandings around Equity, Inclusion, Diversity, and Anti-Racism and awareness as we embark on this very important work.

2SLGBTQIA+: Acronym that stands for Two-Spirit, Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Intersex, Asexual and additional sexual orientations and gender identities.

Allyship: Active, consistent and arduous practice of unlearning and re-evaluating, in which an individual in a position of privilege and/or power seeks to operate in solidarity with a marginalized group. An ally supports people outside of their own group.

Anti-Black Racism: 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: 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.

Anti-Oppression: Process of actively challenging systems of oppression on an ongoing basis. Anti-oppression work seeks to recognize the oppression that exists in our society and attempts to mitigate its effects and eventually equalize the power imbalance in our communities. Oppression operates at different levels (from individual to institutional to cultural) as does anti-oppression work.

Anti-Racism: 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.

Bias: Inclination to think something or someone is better or preferred, usually in a way considered to be unfair. Bias inhibits impartial judgement, thoughts or analysis.

Cultural Safety: Approach that considers how social and historical contexts, as well as structural and interpersonal power imbalances, shape health and health care experiences. The outcome of this approach is where the environment in which health care is delivered is free of discrimination and racism, and patients feel safe. Safety is defined by patients and may be described as what is felt or experienced by patients when their physician communicates with them in a respectful and inclusive way, when their physician empowers them in decision-making, and when they work together as a team to ensure maximum effectiveness of care.

Diversity: Practice or quality of including or involving people from a range of backgrounds and identities. We know that diverse groups of people make more well-informed decisions by including

different points of view and creating more opportunities for more people. We also know those benefits do not occur if people feel they need to suppress aspects of their identity. Diversity is about valuing and encouraging a range of experiences and perspectives.

Discrimination: Act, communication or decision that results in the unfair treatment of an individual or group by either imposing a burden on them, or denying them a right, privilege, benefit or opportunity enjoyed by others. Discrimination may be direct and intentional or may be indirect and unintentional, where rules, practices or procedures appear neutral, but have the effect of disadvantaging certain groups of people. Discrimination is best identified by those who experience it given that there is a difference between intent and impact.

Equality: Practice of ensuring equal treatment to all people, without consideration of individual and group diversities.

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.

Equity-Deserving Groups: Communities that experience significant collective barriers in participating in society. These could include attitudinal, historic, social and environmental barriers based on age, ethnicity, disability, economic status, gender identity, nationality, race, and/ or sexual orientation.

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

Health Equity - Focuses on the health system's ability to provide equitable health care and allows people to reach their full health potential and receive high-quality care that is fair and appropriate to them and their needs, no matter where they live, what they have or who they are.

Inclusion: Recognizing, welcoming and making space for diversity. An inclusive organization capitalizes on the diversity of thought, experiences, skills and talents of all of our employees.

Indigenous Sovereignty: Arises from Indigenous Traditional Knowledge, belonging to each Indigenous nation, tribe, first nation, community, etc. It consists of spiritual ways, culture, language, social and legal systems, political structures, and inherent relationships with lands, waters and all upon them. Indigenous sovereignty exists regardless of what the nation-state does or does not do. It continues as long as the People that are a part of it continue.

Intersectionality: Intertwining of social identities such as gender, race, ethnicity, social class, religion, gender identity and/or sexual orientation, which can result in unique experiences, opportunities and barriers. This theory draws attention to how different systems of oppressive structures and types of discrimination interact and manifest in the lives of marginalized people; for example, a queer black woman may experience oppression on the basis of her sexuality, gender and race — a unique experience of oppression based on how those identities intersect in her life.

Intersex - General term used for a variety of situations in which a person is born with reproductive or sexual anatomy that does not fit the boxes of "female" or "male."

Intersex-Inclusive Progress Pride Flag: The intersex-inclusive pride flag was designed by Valentino



Vecchietti in 2021 to better represent the intersex community. This flag honours the history of the pride flag and creates a pathway towards inclusivity. It includes the intersex yellow and purple circle added next to the transgender blue, pink and white colours. Yellow has long been seen as an intersex colour representing those who do not fit the binary. The purple circle represents the wholeness of the intersexcommunity free from colours like blue and pink that are commonly seen as male and female specifically.

Structural Racism: 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

Trauma-Informed Care: an approach to healthcare that considers the possibility that patients may experience trauma (e.g., abuse, neglect, discrimination, violence etc.) so their safety, choice, control and empowerment are prioritized.

EIDA-R RESOURCES

[Equity, Inclusion, Diversity and Anti-Racism | Ontario Health](#)

[Equity, Inclusion, Diversity and Anti-Racism - Huron Perth & Area Ontario Health Team \(hpaoht.ca\)](#)

Foundations of Indigenous Cultural Safety [F.A.Q. – IPHCC Learning Portal](#)

French Language training <https://flsonlinetraining.ca/>

[Hamilton Health Sciences 5 year Equity, Diversity & Inclusion Plan](#)

[HPHA's Guide to Inclusive Language](#)

[Indigenous Relationship and Cultural Awareness Courses](#)

[Introduction to Anti-Black Racism eLearning Module | Toronto Academic Health Science Network \(tahsn.ca\)](#)

[Intro to Gender Diversity - 2024 - Overview | Rise 360 \(articulate.com\)](#)

[LWHA Strategic Plan](#)

[Ontario Health E-Learning](#)

[Ontario — San'yas Indigenous Cultural Safety Online Training \(sanyas.ca\)](#)

2SLGBTQ Foundations [Course: 2SLGBTQ Foundations Course | RHO \(rainbowhealthontario.ca\)](#)

[LWHA website EIDA-R](#)

Appendix A

To support our broadened internal understanding of Indigenous Cultural awareness, we will adopt and follow the Ontario Health's First Nations, Inuit, Metis and Urban Indigenous Health Framework

First Nations, Inuit, Métis and Urban Indigenous Health Framework

