

CAREA'S BLACK HEALTH STRATEGY & FRAMEWORK

Siyakubona:
We See, Respect
And Value You.

September 2022

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Pages For Good Health, Inc. in collaboration with local residents,
community, health care and social service leaders across Durham Region.

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Acknowledgements



Carea Community Health Centre is situated on the traditional lands of the First Peoples of the Mississaugas of Scugog Island First Nation.

We recognize the lands on which we gather are covered under the Williams Treaties, and rest within the traditional territory of the Mississaugas, a branch of the Anishinaabeg Nation, which also includes Algonquin, Chippewa, Odawa, Ojibway and Pottawatomi.

We acknowledge, with gratitude, this land and the Indigenous Peoples who have cared for and continue to protect Turtle Island (North America) and its resources. We commit to the responsibility of reconciliation and the work of increasing awareness and understanding of our shared history. We do so by recognizing the past and working towards a shared future as friends and allies.

Dedication



We dedicate this work to those of us who came here, and to the Americas, forcibly, and particularly those brought here, as part of the Trans-Atlantic Slave Trade.

We acknowledge the grave harm colonialism brought to these lands. In particular, we acknowledge the erasure of African identities and the persistent, present-day reality of anti-Black racism.



The greatness of a community is
most accurately measured by the
compassionate actions of its members.

– Coretta Scott King



Anti-Black racism, which is systemically embedded in our institutions, has resulted in poorer outcomes, for people of African descent, from health to education to wages.

African, Caribbean and Black people experience the greatest number of serious health disparities, that lead to higher rates of death from chronic diseases. We believe anti-Black racism is a primary reason for the disparities and inequities contributing to poorer health outcomes.

Carea Community Health Centre is not immune to anti-Black racism. To address these inequities, we are dedicating resources and power to shift Carea CHC toward a more racially equitable organizational vision.

Today, we recognize, honour, and pay tribute to the Ancestors, because their labour, sacrifices, bravery and contributions are an integral part of Canada's rich history and diversity.

Siyakubona: We See, Respect And Value You. A Message From The CEO



Dear friends and colleagues:

Prior to and throughout 2020, community health centres across Ontario have proven to be vital to the process of connecting diverse communities to the care they need.

The pandemic impacted daily routines, with the greatest impact being felt in local hospitals and throughout the health system. Carea, like other community health centres, continued to provide primary care services, reliable information, and vaccinations, acting as a lifeline for diverse and marginalized communities.

Recognizing the need for every member of our community to be seen, heard, and cared for with compassion and dignity, our community's African, Caribbean and Black (ACB) communities disproportionately faced barriers when accessing health services to support and maintain good health. However, this spotlight created a critical opportunity to address the structural barriers and social determinants of health for Durham's diverse African, Caribbean and Black individuals and communities.

As an organization, Carea initiated this anti-Black racism work locally, to better hear community voices, better understand the community's health needs, and to challenge barriers to access, and to determine how Carea can best serve the unique needs of Durham's ACB communities.

“I also recognize the need for every member of our community to be seen, heard and cared for with compassion and dignity.”

I am pleased to release Carea's first Black Health Strategy. This strategy, co-designed with Durham residents, local partners, our leadership team, and dedicated staff, represents a major component of Carea's commitment to health equity.

In the spirit of Siyakubona, we are sharing this resource as a tool to inspire the development of culturally appropriate health promotion and local services.

By working together, our work continues.

Sincerely,
Francis Garwe, CEO Carea Community Health Centre

Siyakubona: In the Zulu language, this greeting literally means, “We see, respect and value you.” More than words of politeness, Siyakubona reflects the importance of recognizing the worth and dignity of each person.

Executive Summary



The pandemic, combined with the Black Lives Matter Movement, especially in the early days following George Floyd's death offered community health organizations a unique opportunity to bring attention to health disparities, including access, services, and the experiences faced by Black, Indigenous and people of colour.

Like other community health centres in Ontario, Carea CHC re-confirmed its commitment to addressing inequities and unique health challenges faced by diverse African, Caribbean and Black communities in Durham.

Carea engaged the services of Pages For Good Health, Inc to initiate a community engagement process to inform the Centre's first Black health strategy and framework in April 2022. Following initial consultation, Carea brought together a cadre of more than 200 Durham Region residents, community leaders and health care service providers who provided input over two months.

Using surveys, meetings, consultations and focus groups, Carea's team inspired a critical dialogue to generate recommendations regarding a holistic approach to providing critical health and support services.

The recognition and incorporation of the framework's findings are vital to the development and provision of health care services for diverse Black individuals and communities living in Durham. Meeting the full spectrum of the community's health needs requires broad thinking about the necessary approaches to achieve health equity for all.

Conversations and recommendations evolved around five key pillars to guide conversations taking place in the communities of Ajax, Oshawa, Pickering, and Whitby, which represent Carea Community Health Centre's core service catchment area. Activities and initiatives were centered on education, building awareness regarding Carea's services, local partnerships, sustainability, research and data collection, community oversight and accountability, policy, advocacy, and Afrocentric approaches to care.

The proposed framework will not only assist Carea in building programs and services that are culturally affirming, but recommendations will serve as opportunities to generate greater access, engagement, and community trust. Furthermore, producing positive and long-lasting health and wellness outcomes for Durham's diverse ACB individuals and communities.

Lastly, this framework will support other community health centres across Ontario in developing and implementing their own Black health strategy.

Introduction



In April 2022, Carea Community Health Centre engaged the consulting services of Pages For Good Health, Inc to initiate a community engagement process and develop the centre's first Black health strategy. From May through June, over 200 respondents participated via survey, meetings, consultations and focus groups.

VISION

People who identify as African, Caribbean and Black (ACB) and who live in Durham Region, have comprehensive access to culturally affirming services that support better health outcomes.

GOAL

- Develop a culturally informed strategy with actions
- Prioritize community engagement
- Leverage existing anti-Black racism and health equity efforts
- Communicate effectively with stakeholders
- Empower community to encourage ownership
- Collect and share relevant data and information with community and decision-makers
- Maintain accountability and transparency

OBJECTIVES

1. To better understand the health-related issues and inequities impacting the well-being of diverse ACB communities and individuals living in Durham
2. To make informed decisions about health programs based on the unique health needs of diverse ACB individuals and communities across Durham.
3. To value diverse voices, experiences and perspectives.
4. To build a Black Community Health Strategy that serves as a blueprint for other social and health organizations in Ontario.



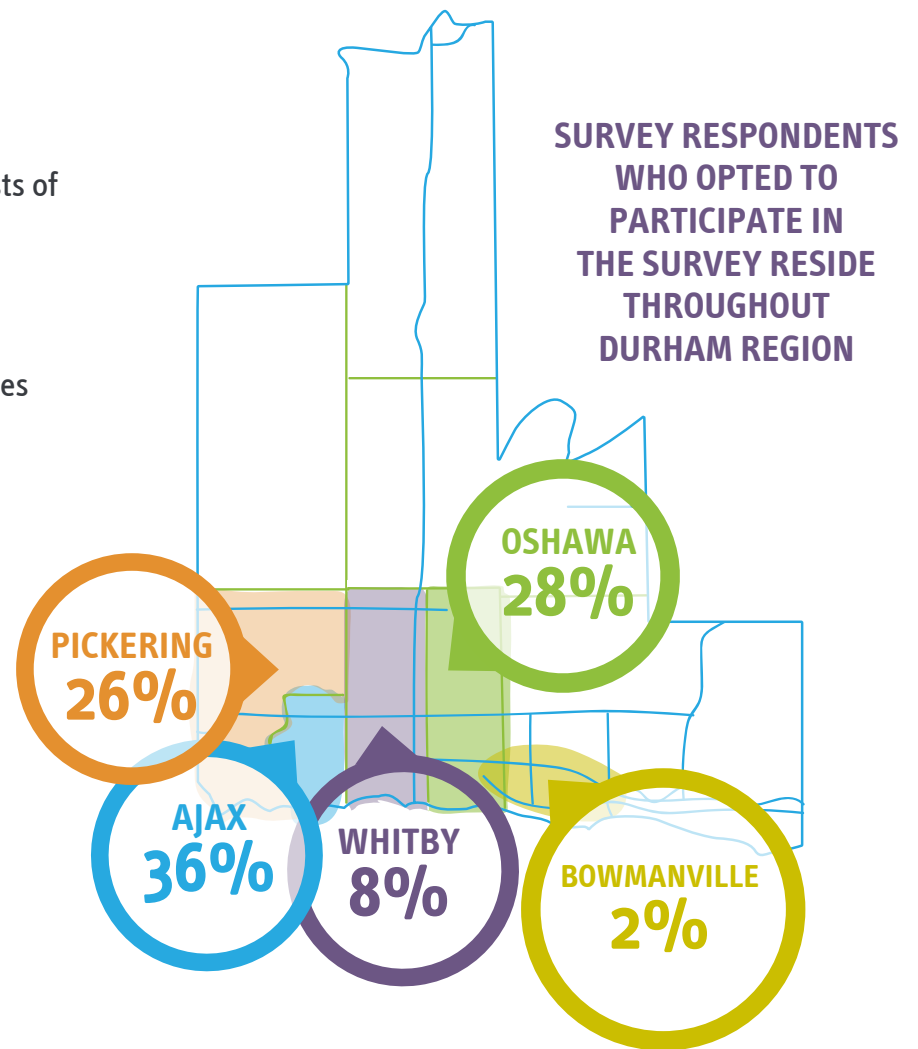
Even if we can agree, creating a compelling business case for health equity, or developing a local strategy to address anti-Black racism in Durham Region, won't matter if we don't do the work.

– Focus Group Participant

COMMUNITY SNAPSHOT

This strategy focuses on the needs and interests of the following groups from across Durham Region, specifically those in Pickering, Ajax, Whitby and Oshawa:

- ACB residents, business and community leaders Community organizations and services that serve diverse African, Caribbean, and Black individuals and communities
- Grassroots groups
- Youth
- Seniors
- Women and mothers
- Men and fathers
- 2SLGBTQI



ACB: People from African, Caribbean and Black (ACB) communities face multiple forms of stigma and discrimination. ACB communities are not a monolith. While ACB communities share commonalities, members within the community are not homogeneous. Each individual is unique. Diversity refers to the differentiation within groups.

2SLGBTQI: This acronym stands for Two-Spirit, lesbian, gay, bisexual, trans, queer and intersex people. Many in the 2SLGBTQI community experience higher rates of discrimination, harassment and violence. Discrimination in health care and community spaces may discourage many from seeking care or finding alternative services if turned away. This too, can result in delays or denials of medically necessary care when compared to cis (people who are not trans) and straight individuals.

WHY IS A BLACK HEALTH STRATEGY NECESSARY?

As Durham Region's ACB population grows, it is imperative that Carea Community Health Centre continues to:

- strengthen its relationship and ongoing work with diverse ACB individuals, families, businesses and organizations.
- make health equity a strategic priority.
- develop structures and processes to support health equity work.
- address anti-Black racism within the organization and local systems.
- develop partnerships with community organizations to improve health and equity.

“To truly reduce health disparities within our health care system, we need to start prescribing housing, food, transportation, and other goods required to live a healthy life. The culture in hospitals would also need to shift dramatically. All staff would need to take implicit bias and anti-[Black] racism training. And messages need to be reinforced through the words and actions of leadership.”

– Durham Healthcare Leader

WHY DOES DURHAM REGION NEED A BLACK HEALTH STRATEGY?

The COVID-19 pandemic has highlighted the severe degree of ongoing health disparities among marginalized populations, especially within Black and Indigenous communities across Durham.

WHY IS CAREA CHC LEADING THIS INITIATIVE?

We witnessed infection rates rise among Black people who worked as essential workers, but disparities in testing sites, vaccinations, infections, and even death have amplified the need to address health equity on a systemic level.

Advancing health equity beyond our pandemic response has never been stronger.

WHAT'S AT RISK IF CAREA CHC DOESN'T IMPLEMENT A BLACK HEALTH STRATEGY?

It has long been documented that anti-Black racism exists. . As a result, people of African and Afro-Caribbean descent experience health and social inequities that are directly linked to individual, interpersonal, institutional, and societal discrimination.

Social, economic, and political factors shape the conditions within which individuals grow, live, work, and grow old. These factors are vitally important for health and wellbeing.

The strength of Durham Region, as a community, is largely reliant on a healthy workforce which depends on an equitable health care ecosystem that allows for early treatment and diagnosis of health conditions before they develop into high-cost care.

Siyakubona: Our Guiding Principle



Siyakubona is a Zulu greeting from Southern Africa which translates to “We see, respect and value you.” This phrase has been on our tongues and in our hearts for much of this work. More than words of politeness, Siyakubona captures the importance of recognizing the worth and dignity of each person.

Like Ontario’s community health centre holistic approach to health care, the Siyakubona philosophy teaches us “We see the whole of you—your experiences, your passions, your pain, your strengths and weaknesses, and your future. You are valuable to me.”

As a lens for this work, Siyakubona acknowledges the importance of seeing the humanity and wellbeing of others. It is also infused with the belief that when others “see” us, then we exist. More than a greeting, it serves as a reminder to ensure community voices, experiences and engagement are always at the core of our actions, thoughts and decisions.

If we are to effectively challenge anti-Black racism, it is imperative to learn from this African-inspired principle by giving full attention and presence to diverse ACB individuals and communities living in Durham as we develop, implement, and evaluate this Black Health Strategy.

CORE VALUES

Siyakubona symbolizes a convergence of internal and external efforts to produce health outcomes that offer diverse ACB communities and individuals in Durham what they need to thrive.

As part of this process, we listened and defined our core values, which are grouped around ‘high quality care’ and a ‘sense of community’.

We define these core values as: inclusion, compassion, dignity, respect, and safety.

Our Strategic Pillars



Individuals and groups were asked to consider the following strategic pillars during consultations:

PUBLIC EDUCATION AND AWARENESS BUILDING

- How do we build awareness about community health issues at the local level?
- How do we stay better informed about the local services and programs available?

LOCAL PARTNERSHIPS AND SUSTAINABILITY

Are there opportunities for local organizations and groups to work together and share resources?

- Who are the partners?
- How do they work together?
- How do we ensure our efforts are sustainable?

RESEARCH AND DATA COLLECTION

- What kind of research can we conduct; or data can we collect to help us understand and support the community health needs of Durham's diverse ACB communities?

COMMUNITY OVERSIGHT AND ACCOUNTABILITY

- How will communities be engaged?
- What does accountability look?
- What does success look?
- How should we report and measure success?
- How can they hold systems accountable to ensure initiatives meet the needs of diverse ACB communities and individuals in Durham?

POLICY AND ADVOCACY

- How do we speak with a unified voice and build collective power to effect change?
- How do we contribute to the community and health care planning process?

AFROCENTRIC APPROACH TO CARE

- What does Afrocentric care look like in Durham?
- Do we have adequate representation, voices, services, programs and spaces for diverse ACB communities and individuals?

What We Heard: The Highlights



MENTAL HEALTH CARE

Mental health care was identified as an ongoing top priority for community health improvement by all community discussion groups, including concerns regarding insufficient local capacity- particularly for higher levels of care, and increased need for care resulting from the impact of COVID-19 isolation, such as anxiety, stress and loneliness.



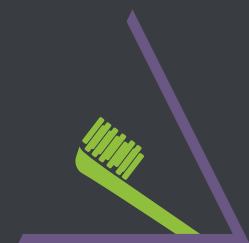
FOOD SECURITY

Food access was identified as a top priority in discussion groups. The impact of the COVID-19 pandemic on access to affordable, healthy food was also described as a trigger for added stress and anxiety.



DENTAL CARE

Access to affordable dental care was identified as a top priority by seniors and was described as an often-overlooked health consideration that contributes to quality of life.



FAMILY COUNSELLING

Participants expressed a need for culturally affirming resources and affordable access to counselling services for diverse ACB children, couples and families. It was also noted that while the need is high, ongoing stigma persists in certain settings, while gaps in culturally appropriate services and a lack of racial representation among counsellors, undermines the effectiveness of family counselling.



HEALTHCARE AND PRESCRIPTION COSTS

Community discussion participants identified health care costs and financial barriers to care as significant and ongoing health concerns. Cost is the most frequently mentioned concern among participants over the age of 65, when asked an open-ended question regarding 'one thing you would change to improve your health'.



COST OF LIVING

Affordable housing, living wages and access to affordable childcare were identified as the top resources required to support a healthy community that needs improvement. Access disparities were described as significant problems that existed pre-pandemic and worsened by the pandemic.



SOCIAL ISOLATION

Discussion group participants spoke about social isolation, loneliness separation, and anxiety. Much of this experience was attributed to COVID-19 lockdown.





COVID-19 EFFECT

The pandemic had a significant impact on family financial status, employment, food security, and the mental and physical impact of juggling work, childcare, remote schooling and family mental health. The impact of remote schooling on child mental health and academic progress seems to have been largely dismissed.



ACCESS TO PRIMARY CARE

Reduced access to health care and delayed health care were identified as significant barriers to access. Participants explained going without routine primary care or emergency care because they lacked access to childcare, transportation, time from work or virtual access to online care.



TECHNOLOGY GAP

Seniors identified difficulties navigating virtual visit technology. Additionally, they expressed concern regarding the inability to use technology to gain access to support and social groups. This lack of access to social interaction has proven to be detrimental to those with cognitive challenges.



LACK OF REPRESENTATION

Lack of representation, combined with reduced access to culturally appropriate social and health care spaces and services was identified as a consistent gap in Durham. Feedback reveals a high desire to access activities and health care in Durham that diverse ACB communities and individuals can trust.



LACK OF COLLABORATION

Community, health care, and social service leaders expressed a need to connect, collaborate, and share resources, working collaboratively to develop and support initiatives that promote the health and wellbeing of diverse ACB individuals and communities in Durham.



LACK OF AWARENESS

Word of mouth was identified as the most common source of information. Participants, when asked, could not reference any central or formal network to learn about projects, events or causes that support diverse ACB communities in Durham. As a result, sources in Toronto are relied upon for information about programs or services.



CULTURALLY AFFIRMING SPACES

Participants desired spaces that promote healthy and authentic connections, encouraged meaningful engagement, learning opportunities, and fostered a sense of belonging that validates the lived and historical experiences of ACB individuals and ancestors.



NEWCOMER SUPPORT

Racial bias, differential treatment, and access to services by ACB individuals, as compared to other immigrant populations, was highlighted as a concern. The immediate need for accommodation and affordable housing also ranked high. The need for established settlement, social and professional networks was identified as required to ease the transition, and to keep those new to Canada feeling active, engaged, and informed.



YOUTH ENGAGEMENT

Barriers and challenges were recognized and expressed across multiple systems, including mental health, education, health care and criminal justice. Feedback indicated a high need for culturally affirming spaces as well as employment, social, and recreational programs and services. Youth described themselves as being seen, but not heard. Participants suggested this contributed to increased feelings of anxiety as they tried to identify themselves as ACB, and what it means to be Black in Durham.



2SLGBTQI NEEDS

This group expresses a unique set of challenges including social stigma, discrimination, racism, rejection by friends and family, oppression, and violence, which prove to be detrimental to their physical and mental well-being. This group also expressed an increased risk of social isolation, depression, and attempted suicide, among other mental health concerns. There is a high need for access to holistic support and health services in Durham that affirm and support cultural identities, especially Black 2SLGBTQI children and youth.



HOMELESSNESS

Participants express a high demand for diverse and culturally responsive outreach workers. Homelessness and housing insecurity has increased during the pandemic. Participants also identify difficulty navigating systems of support as a concern. Racial bias was also identified as a barrier within systems designed to help individuals and families access appropriate housing.

Participants also expressed that simply finding 'housing' is not adequate, since the issues leading to homelessness are not addressed as part of a solution. Additionally, feedback acknowledges that programs and administrators must take a holistic approach, seeing the whole person and not just the circumstance of homelessness. Programs must see the whole person to address issues that led to homelessness.



DATA COLLECTION

Participants expressed concerns around the historical misuse of data, surveillance, privacy, and lack of access, especially regarding health matters. Data collection is critical to identify inequities as well as addressing them. Data collection serves as a pathway to better health for all. Must support data-driven action and accountability and measurable change.

How data is gathered is just as important as what data we choose to collect.

Are We Ready For Change?

12 Things To Think About....



What does it mean to say, 'I'm in favor of Black Health Strategy' when we haven't even reckoned with what the health equity or anti-Black racism looks like within our community and very own organization?"

Despite the very best intentions, not every community health organization is ready to address racial equity or to address their clients' diverse needs.

Following this in-depth consultation with a variety of stakeholders, Carea CHC's leadership team and Board of Directors must assess whether CAREA CHC has the capacity and readiness to move this Black health strategy forward.

The following questions will begin to identify whether and/or when a new or expanded commitment to health equity and anti-Black racism is realistic.

1. Who within Carea CHC is currently committed to taking racial equity work on?
2. Does Carea CHC possess effective approaches to developing organizational leadership?
3. Is there a common understanding about race and anti-Black racism within the organization?
4. Is Carea CHC intentionally building alliances with other Black-led or Black-serving organizations and diverse Black individuals and communities?
5. Are there other Black-led organizations and institutions serving Black communities that have identified a need for support or would ally themselves with Carea CHC on health equity and anti-Black racism?
6. Does Carea CHC have a strategic approach to weighing the costs and benefits of weighing risk against benefit of entering strategic coalitions?
7. Does Carea CHC have an approach to working with institutions or organizations with a racist or harmful history that negatively affected ACB communities?

In order to improve the health and well-being of diverse Black communities in Durham, I think we need to give Black people better health care.

– Focus Group Participant

8. Does Carea CHC expect internal or external resistance to explicit work around anti-Black racism?
9. Is Carea CHC prepared to resist tokenizing the ACB team members at Carea CHC?
10. How well is Carea CHC prepared to manage racist attacks? Has Carea CHC explored scenarios to apply this knowledge?
11. Is there a foreseeable resistance to more ACB team members joining Carea CHC?
12. Is the Carea CHC team prepared to work with racial analysis of data*? If not, how does Carea CHC expect to address this function?
13. How will Carea CHC overcome resistance to change and those wanting to avoid internal conflict or 'divisive' issues?

**Racial analysis: Race and racism can be investigated and analyzed in a myriad of ways. Racial analysis uses a system of historical and cultural tools to analyze and understand the social and economic circumstances facing diverse African, Caribbean, Black, Indigenous, and people of colour.*



BE AWARE. BE SINCERE. BE SENSITIVE.: While there was a high-level of community interest about exploring the health and wellbeing of diverse Black communities and individuals across Durham, many participants expressed fatigue in completing surveys and participating in focus groups without immediate follow-up or seeing relevant policies in action.

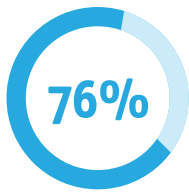
8% ▶

The Black population accounts for 8% of Durham Region's total population, compared to 4% of the provincial population.

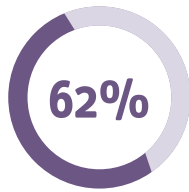
SURVEY HIGHLIGHTS



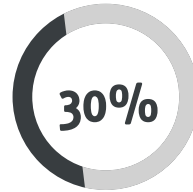
Black



Female



30-49 yrs old



Identified as a community member or volunteer

MAJORITY

- ▶ lived in Ajax or Pickering
- ▶ lived in Durham Region for less than 20 years
- ▶ worked in non-profit, education and healthcare sector



TOP 3 CONCERNS RESULTING FROM COVID-19:
anxiety, loneliness, and job loss



TOP 4 SERVICES NEEDED:
mental health support, family counselling, affordable housing, and affordable childcare.



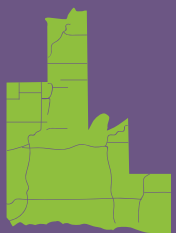
TOP 3 HEALTH CARE SYSTEM CHALLENGES IN DURHAM:
navigating health care systems, experiencing long wait times, accessing culturally appropriate services, and affording health care expenses



TOP SOURCES OF INFORMATION:
friends and family, internet and social media



TOP 3 COMMUNITY CHALLENGES:
mental health, low-income and immigration services



30% ▶

The ACB population makes up 30% of Durham's total visible minority population.

Strategy & Framework

By engaging stakeholders throughout its development, implementation and evaluation, Carea's Black Health Strategy and Framework serves as a roadmap for the development of Carea's community health and wellness plan to serve ACB individuals and communities in Durham Region.

STRATEGIC PILLARS

THE STRATEGIC PILLARS FORMING THE FOUNDATION OF THIS STRATEGY AND FRAMEWORK INCLUDE:

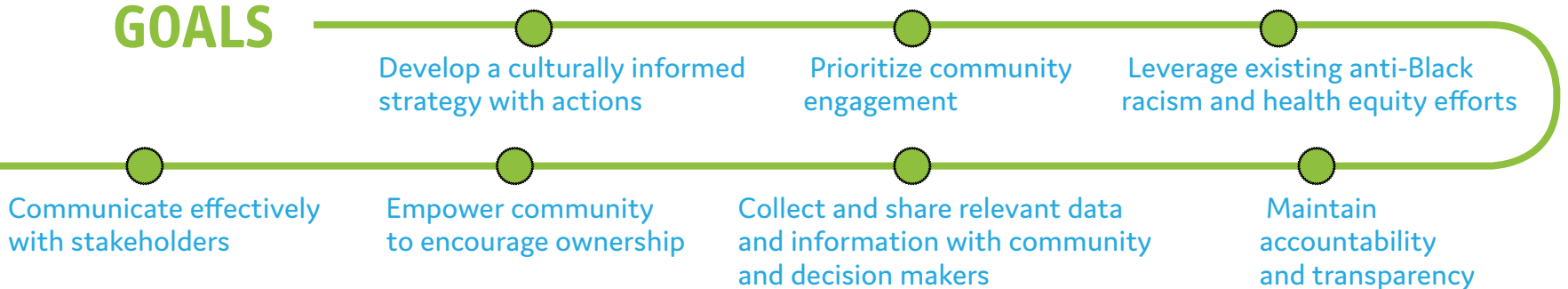
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| 1 Public education and awareness building | 4 Community oversight and accountability |
| 2 Sustainability through local partnerships | 5 Policy and advocacy to leverage and achieve collective goals |
| 3 Robust, race-based research and data collection | 6 Afrocentric approaches to care |



VISION

People who identify as **African, Caribbean or Black** and who live in Durham Region, have comprehensive access to culturally affirming services that support better health outcomes.

GOALS



CORE VALUES

- Inclusion
- Compassion
- Dignity
- Respect
- Safety



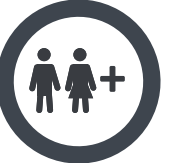
THEME



OBJECTIVES

- To better understand health-related issues and concerns affecting the health and well-being of diverse ACB individuals and communities living in Durham.
- To make informed decisions about health programs based on the unique health needs of diverse ACB individuals and communities across Durham.
- To value diverse voices, experiences and perspectives.
- To build a Black Community Health Strategy that serves as a blueprint for other social and health organizations in Ontario.

STRATEGIC FRAMEWORK CHART

	GOALS	STRATEGIES	RECOMMENDATIONS
 PROGRAM DELIVERY	IMPLEMENT CULTURALLY AFFIRMING SIGNATURE PROGRAMS, SPACES AND HEALTH EDUCATION TO ADDRESS HEALTH DISPARITIES.	Expand evidence-based programming related to diabetes, hypertension, STI screening, nutritional support, wellness checks, mental health referrals, and family counselling provided to African, Caribbean and Black communities.	<ul style="list-style-type: none"> • Black health and wellness clinic days, held monthly. • Black health and wellness resource guide. (Online and in print) • Weekly cultural programs serve the diverse, aging ACB population. • Therapeutic recreational activities to improve community health status. • Respite support for seniors and caregivers.
		Expand Carea CHC's capacity to improve access to care through mobile, after-hours or virtual health services for African, Caribbean, and Black individuals and families.	<ul style="list-style-type: none"> • Convert a Carea CHC van into a mobile care unit, and/ or improve access to care by offering clients transportation.
		Increase programs supporting Black youth, 2SLGBTQI communities, as well as mothers and families with young children and teenaged children.	<ul style="list-style-type: none"> • Enhance promotion about existing and culturally appropriate programs that support diverse groups
 VISIBILITY & OUTREACH	IMPROVE CAREA CHC'S VISIBILITY AND LOCAL BRAND RECOGNITION AS THE COMMUNITY'S LEADING RESOURCE FOR RELIABLE INFORMATION AND ACCESS TO CARE FOR DIVERSE AFRICAN, CARIBBEAN, AND BLACK INDIVIDUALS AND COMMUNITIES.	Implement a marketing campaign to expand Carea's brand and recognition as a professional and comprehensive community-based health organization with unique expertise in African, Caribbean, and Black individuals and communities across Durham Region.	<ul style="list-style-type: none"> • Dedicated page/section on Carea's website • Annual Black Health and Community Wellness Event
		Recognize the African, Caribbean, and Black community's awareness periods and days of significance (i.e., Emancipation Day and Black History Month)	<ul style="list-style-type: none"> • Social media plan, calendar and posts • Update dedicated page and homepage banner.
		Increase Carea's visibility at health policy, advocacy, community and local business 'tables'.	<ul style="list-style-type: none"> • Join local advocacy and community groups in Durham.
 INFRASTRUCTURE	ENHANCE STAFF CAPACITY BY IMPROVING THE CULTURAL AWARENESS AND EXPERTISE OF STAFF.	Become recognized as a local, regional and provincial voice on issues related to Black health, and anti-Black racism as it relates to Carea's mission.	<ul style="list-style-type: none"> • Black health and wellness resource guide (online and print).
		Gain commitments from organizational leadership regarding the importance of rolling out a Black health strategy.	<ul style="list-style-type: none"> • Establish an internal working group committed to dismantling institutional racism by identifying, preventing, and removing barriers in delivering care and employment at Carea.
		Expand and deepen Carea's capacity to engage with Black community members and health care leaders.	<ul style="list-style-type: none"> • Prioritize diversity and anti-Black racism training for staff.
 GROWTH AND SUSTAINABILITY	EXPAND PARTNERSHIPS AND DIVERSIFY REVENUE TO SUPPORT THE BLACK HEALTH STRATEGY & FRAMEWORK.	Focused and formalized approach to recruit health care providers and staff from diverse African, Caribbean and Black communities.	<ul style="list-style-type: none"> • Hire dedicated Black Health Navigator to support ACB clients' access to appropriate care programs and services.
		Collaborate with community members and health care leaders to develop, advise, implement and evaluate programs and services aligned with the Black Health Strategy & Framework.	<ul style="list-style-type: none"> • Establish a Black Health Advisory Committee at Carea CHC.
		Expand Carea's capacity, programs and operations to meet the needs of diverse African, Caribbean, and Black individuals and communities	<ul style="list-style-type: none"> • Develop and implement a detailed plan for action, sustainability and revenue development.
		Advocate for the development of provincial standards for the collection and reporting of race-based data.	<ul style="list-style-type: none"> • Incorporate strategies into policy development and objectives to address anti-Black racism, using race-based data collection and reporting.
		Strategically incorporate race-based data into program and service planning and assessment.	<ul style="list-style-type: none"> • Collect and incorporate race-based data from the intake process, client appointments, human resource processes, internal surveys and existing evidence-based research. • Highlight accountability measures and demographic data in proposals and public facing materials (i.e., annual report).

“It would be advantageous to see more cultural events and programs in the Region.”

– Focus Group Participant

GETTING STARTED

1. Get the community, board of directors and staff involved in the early stages of planning.
2. Develop metrics to measure efforts and establish accountabilities.
3. Start with addressing disparities or systemic racism within the organization.
4. Continue to pursue research that identifies gaps in access, to fill voids
5. Continue to do your research and identify the gaps in access so you can figure out how to fill those voids.

LESSONS FROM THE ONTARIO’S BLACK HEALTH STRATEGY:

Throughout this work, the Ontario Black Health Strategy presented by the Alliance for Health Communities (Alliance) was used as a guide to develop and localize CareaCHC’s strategy.

Influential directives include:

- Engage policy makers and government officials regarding the development of system responses to the inequalities experienced by Black communities.
- Partner with health and social service organizations, educational institutions, and professional organizations to design programs that improve the cultural competencies and understanding of anti-Black racism and its impacts on Black health. (i.e., development of training resources and tools)
- Scale-up and reinforce community health systems, using quality, timely, transparent, disaggregated race-based data.

“We must ensure there is [Black] representation at [Carea CHC’s] decision-making level.”

– Focus Group Participant



“We can only achieve health equity if we work together to solve the root causes of health inequities, like systemic racism and systemic oppression—and we’ll need a lot more than a Black health strategy to dig into those issues.”

– Focus group participant

- Prioritize the development of primary health care and social service spaces that are focused on improving the quality of preventative care and the integration of social services such as food insecurity, housing and employment support.
- Promote the development of Black-focused health services research and the adoption of research findings in peer CHC’s and Alliance member agencies.
- Identify, promote, and build upon good practice initiatives to prevent and reduce anti-Black racism in health care settings.
- Identify advocacy efforts to increase community-focused health outreach.
- Identify and create support services that effectively address limitations and barriers for French-speaking, refugee, immigrant, 2SLGBTQI and non-English or French-speaking Black communities.

Learn more about the Black Health Strategy
<https://www.allianceon.org/BlackHealthStrategy>

Read or download the Alliance’s full Black Health Strategy for Ontario <https://www.allianceon.org/sites/default/files/documents/black-health-strategy-2022-en.pdf>

The Alliance for Healthier Communities (Alliance) Black Health Strategy released in April 2022 emphasizes that addressing anti-Black racism is central to improving the health of African, Caribbean, and Black people in Ontario. Access is and essential to affirming their right to attaining and maintaining healthy lives and having access to health services without fear of racial discrimination.



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According to the last Canadian census, the African, Caribbean and Black population in Durham Region speaks more than 50 different languages.

Thank You



On behalf of Carea Community Health Centre, we wish to recognize and thank meeting participants for contributing to this document, and to those whose comments, questions, and critiques enriched the final version of this report.

CONTRIBUTING ORGANIZATIONS

- Ajax Anti-Black Racism Task Force
- Alliance for Healthier Communities
- Black Health Alliance
- Black Physicians Association of Ontario (BPAO)
- Black Student Union (Pineridge High School)
- Black Therapist Network
- Brock Community Health Centre
- Congress of Black Women (Ajax, Pickering Chapter)
- Diversity Advisory Committee (Durham Police)
- Durham Black Educators Network (DBEN)
- Durham Children's Aid Society (DCAS)
- Durham District School Board
- Durham Library
- Durham Mental Health Services
- DurhamONE
- Durham Region
- Health Commons
- Kujenga Wellness Project
- Lakeridge Health
- pflag Durham Region
- Pickering Anti-Black Racism Task Force
- TAIBU Community Health Centre
- The Welcome Centre
- Women's Multicultural Resource and Counselling Centre
- Womxn of Colour Durham Collective

ABOUT CAREA COMMUNITY HEALTH CENTRE

Carea Community Health Centre is a registered, charitable organization that provides free health services and wellness programs to community members across Durham Region. The expert, interprofessional team provides a wide range of medical, health care, mental health, and social services that are inclusive, equitable, and accessible to all.

Carea Community Health Centre's interprofessional staff team includes physicians, health care specialists, and mental health professionals, along with program and support staff.



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