



The Ottawa Aboriginal Coalition acknowledges that we are on unceded Algonquin-Anishinaabe territory

Backgrounder: Wabano Centre for Aboriginal Health Report on Anti-Indigenous Racism in Health Care

***Share Your Story* Highlights Widespread Racism, Failure of Champlain Region Health Care Organizations to Meet Needs of Indigenous People**

Indigenous-specific racism is deeply embedded in the history of colonization. It has led to the destruction of a way of life for Indigenous peoples in Canada. Most acutely, it has led to persistent racism and discrimination by health care providers and institutions across the country.

When it comes to accessing health care, Indigenous people continue to be denied services and kind and competent care. They're forced to wait much longer than their non-Indigenous counterparts. They experience abuse by the very hands—doctors and nurses alike—who are supposed to help and heal them.

In short, they cannot access good health care at the same level as other Canadians. These and other findings are explored in depth in a report authored by the Wabano Centre for Aboriginal Health in partnership with the Ottawa Aboriginal Coalition. *The Share Your Story research project: Indigenous-Specific Racism & Discrimination in Health Care Across the Champlain Region*, is a culmination of a five-year strategy undertaken by the Coalition and funded by Ottawa Public Health.

The report interweaves the stories of more than 200 Indigenous people and witnesses living across the Champlain region with the history and impacts of settler colonialism policies and practices. Despite the intent of Tommy Douglas, the founder of Medicare, that “the only test of our character that matters is how we look after the least fortunate among us,” key findings from the study of racism in the Champlain region highlight the widespread failure of the health care system in meeting the needs of Indigenous peoples. Of the 315 stories of anti-Indigenous racism collected in late 2018 and early 2019, **the stories of racism were further validated and 91% were rated by Wabano’s research interviewers as clear case of anti-Indigenous racism based on criteria they developed.** The participants themselves believe that negative stereotypes about Indigenous peoples shape how health service providers treat them.

The five common stereotypes are that Indigenous peoples are racially inferior; diseased, addicted, and mentally unwell; a burden; angry and aggressive; and bad parents.

Startlingly, the highest frequency of both overt and covert racism, negative stereotypes, and discrimination in the region occurs in hospital emergency departments and maternity wards (70.8% in Ottawa and 65.2% in rural communities), followed by community health clinic settings and paramedics.

Specific findings:

- 76% of participants felt they could have received better service if they were able to hide their Indigenous identity (of these individuals, 93% have felt this way sometimes to always)
- 26% of all reported incidents of anti-Indigenous racism also included one or more types of discrimination based on gender, sexual orientation, age, or disability
- 78% reported that they sometimes or always experience anti-Indigenous racism in the health care system
- 59% felt their experiences of racism and discrimination had negatively impacted their physical well-being
- 73% felt their experiences of racism and discrimination had negatively impacted their mental well-being
- 69% indicated they reduced using the health care system as a result of racism and discrimination

Collectively, the findings clearly show that discrimination and racism are “real and part of everyday interactions with health professionals working in clinics, emergency rooms, maternity wards, social service referral agencies, and paramedic services within the Champlain region.” The answer to combatting pervasive—indeed, escalating—anti-Indigenous racism is cooperative action between policy- and lawmakers; for these decision-makers to find and implement the following local and specific corrective actions:

- A review of the education, training, and associated learning materials for health care and service providers to identify and address any gaps in cross-cultural awareness and understanding of historic trauma, and to target areas for priority training;
- A review of hiring and promotion criteria and processes to ensure that Indigenous awareness is included and that racist and/or anti-Indigenous attitudes are identified; and
- A review of supervisory practices, performance oversight, and evaluation to ensure that racist attitudes and behaviours are brought to light and addressed, with clear and timely consequences, and that meaningful pathways to change are created.

Wabano Centre for Aboriginal Health—and its Coalition partners—are making this an Ontario election issue by calling on political parties to sign a declaration to end racism in the health care system as a top priority. As well, the report urges that there be collaboration among all the players to develop systemic solutions as the only way to counter systemic problems; to

incorporate and operationalize anti-racism goals as an integral part of service delivery. Ontario Health must work in partnership with local Indigenous leadership, Indigenous-led health organizations, and community members to review policies and procedures, and consider how to co-develop targeted initiatives to reduce harm and improve services to Indigenous clients. The report ends with a comprehensive list of recommendations, clustered under themes (each with their own list of suggested actions and/or specific steps or measures). For a list of recommendations and actions, see the declaration.

