

# Equity, Inclusion, Diversity, Anti-Racism

## 2023 - 2024 Highlights

PROVINCIAL EQUITY OFFICE | September 2024



**Ontario  
Health**

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# Equity, Inclusion, Diversity, and Anti-Racism Highlights 2023 – 2024

## Introduction

**Ontario Health’s 2023 - 2024 Annual Business Plan highlights the organization’s commitment to deliver on the Equity, Inclusion, Diversity and Anti-Racism (EIDA-R) Framework.**

Ontario Health is committed to advancing equity across the province, improving health outcomes for underserved communities, and reducing health and social disparities. This requires thoughtful and careful planning, implementation and evaluation for continuous quality improvement and expansion of successful initiatives that take a strengths-based approach.

Using Ontario Health’s EIDA-R Framework requires clear accountability and reporting. This report describes our progress over the past year in reducing systemic inequalities through ongoing, community-focused work. The highlighted initiatives will continue and develop over the coming years.

This report provides a snapshot of work related to EIDA-R, Indigenous Health, and French Language Services (FLS).

# Implement the Black Health Plan

The [Black Health Plan](#) outlines key recommendations, long-term priorities and areas of opportunity to advance health equity for Black communities across the province. Established in 2020, the plan was built on three pillars: equitable pandemic response for Black populations, equitable health system recovery with a focus on Black populations and sustained health equity for Black populations. In 2023 - 2024, the focus was on the third pillar – building upon the success of the Black Health Plan during the pandemic to sustainably improve health outcomes for Black communities.

## The following activities were completed to advance the third pillar over the fiscal year:

- Embedded Black health priorities into key provincial plans, including the Ontario Cancer Plan 6, Ontario Renal Plan 4, Ontario Health Preventive Care Program and the Ontario Health Primary Care Plan.
- Implemented a new estimated Glomerular Filtration Rate (eGFR) equation to eliminate the use of race correction in chronic kidney disease care in Ontario. The updated equation was developed in partnership with community and hospital laboratories and based on guidance from the Black Health Working Group and Chronic Kidney Disease Working Group.
- Improved clinical quality of care for Black communities through the following initiatives:
  - Implemented the Sickle Cell Disease quality standard, including the development of an Implementation Toolkit, a Community of Practice and quality improvement e-reports.
  - Published the Hypertension quality standard, developed in consultation with community partners to include specific recommendations around culturally responsive care. This standard supported providers in addressing disparities in hypertension prevalence and outcomes amongst Black communities.
- Expanded primary care access for refugees and asylum seekers with complex needs through the development of specialized clinical teams and clinics in Northwest Toronto, North York, Ottawa, Scarborough, Kitchener-Waterloo and London. Many Black newcomers and refugees to Ontario are not receiving care for their unmet health needs. In response, clinical teams and clinics in areas with higher proportions of newcomers and refugees will serve as the first point of contact and access for primary care services.
- Advanced health equity for Black children and youth through funding for pediatric mental health care, anti-racism capacity building in pediatric care settings and sickle cell disease initiatives for pediatric populations.
- Partnered with the Black Health Alliance and Black Physicians' Association of Ontario to directly engage Black communities through hosting 8 'Black Health Talks', 23 wellness clinics and 3 engagement forums. This included 2 engagements focused on improving supports for Black communities in Northern Ontario.

## Black Health Plan

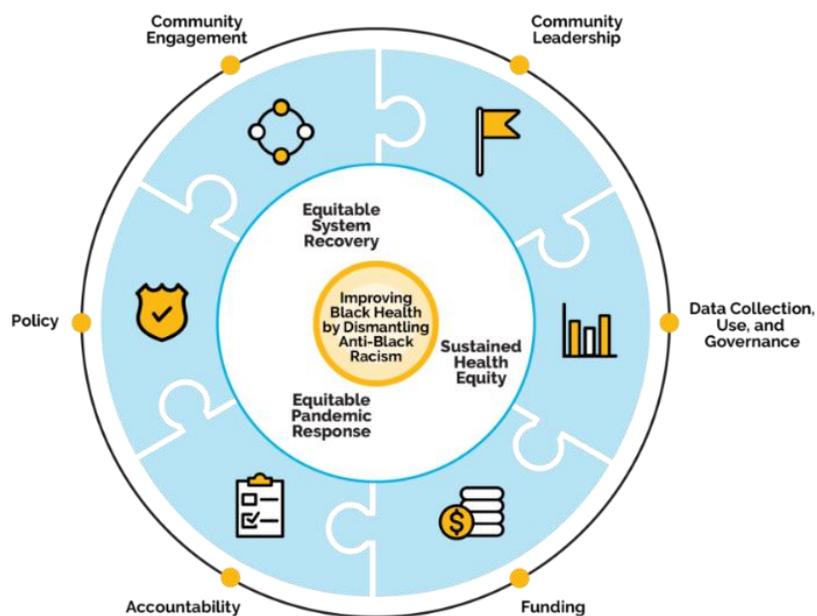


Figure 2. Key pieces of Ontario Health's Black Health Plan

### Launch of the Peel Black Health and Social Services Hub

The Black Health and Social Services Hub was designed to provide seamless and culturally responsive care and services to the local Black, African and Caribbean communities in the Peel Region. The Hub provides clients access to primary care, mental health and addictions services and social services to support early detection, early intervention and better overall care and outcomes for the Black, African and Caribbean communities. Formally launching in Summer 2024, the implementation of the Hub was led by Roots Community Services, Canadian Mental Health Association Peel-



Figure 1. Soft launch of the Black Health Hub in March 2024.

Dufferin and Lakeshore Multi-Area Service Project Community Health Centre in partnership with other health sector-focused organizations.

### ACHIEVEMENTS OF THE HUB TO DATE INCLUDE:

- Enhanced clinical care and service excellence through the recruitment of highly trained health and social service professionals to deliver holistic care and enable warm hand-offs within the Hub and beyond.
- Maximized system value through the implementation of evidence-informed, integrated primary care, social services and mental health and addictions services to enhance population health.
- Transformed care through a team-based approach to service delivery (i.e., in-house nurse practitioners, non-traditional referral pathways, seamless transitions between health and social services, etc.), with the person at the centre of care.

The implementation team conducted a soft launch of the Black Health Hub in March 2024 seeing approximately 30 individuals.

# Advance 2SLGBTQIA+ Care

Two-Spirit, Lesbian, Gay, Bisexual, Trans, Queer, Intersex, Asexual (2SLGBTQIA+) communities experience a range of barriers and gaps accessing health care that is rooted in a long-standing history of transphobia, homophobia, stigmatization, discrimination, and exclusion. As a result, many lack access to much needed 2SLGBTQIA+ affirming care providers, services and supports. Ontario Health has a leading role in health system planning that includes improving health outcomes for 2SLGBTQIA+ communities, as reflected within Ontario Health's Annual Business Plan. In 2023 - 2024, the foundational work included the following:

- Partnered with Rainbow Health Ontario to expand health system capacity and competency around 2SLGBTQIA+ health. Initiatives included:
  - Established an important knowledge base for health service providers with over 3000+ participants completing Rainbow Health Ontario's 2SLGBTQ Foundations Course.
  - Expanded system capacity and building critical networks to improve care for 2SLGBTQIA+ populations with over 500 health service providers participating in a mentorship program.
  - Promoted trans-inclusive health care through the launch of the [Rainbow Health Ontario podcast](#) with 600 streams in the first month, thereby successfully creating an asynchronous and accessible vehicle for knowledge transfer, sharing expertise and promotion of Rainbow Health Ontario courses and resources.
  - Developed and disseminated resources to support engagement with 2SLGBTQIA+ populations, including an internal 'Engaging 2SLGBTQIA+ Communities' toolkit, which mobilized the key recommendations from the Ontario Health East 2SLGBTQIA+ forum into a consistent and equitable community engagement approach.
- Developed internal guidance materials on the use of gender inclusive language in clinical and system-facing work to ensure all Ontario Health programs take a consistent and equitable approach to these communications.
- Developed a quality standard on Gender Affirming Care for Two-Spirit, Trans, Nonbinary and Gender-Diverse People.
- Delivered reliable and accessible mental health care for 2SLGBTQIA+ children and youth by establishing sustainable and targeted pediatric mental health resources.
- Updated eligibility criteria for the Ontario Breast Screening Program to broaden access to organized breast screening for people with breast implants and transfeminine people who have used feminizing hormones. The Ontario Breast Screening Program sites across the province also received guidance on providing safe and inclusive care for Two-Spirit, trans and nonbinary people.

## Inaugural Ontario Health West 2SLGBTQIA+ Health Forum

The 2023 – 2024 2SLGBTQIA+ Health Forum in the West Region provided a collaborative platform for providers and 2SLGBTQIA+ communities to identify factors contributing to inaccessible health care for these underserved populations. The forum structure was informed by a comprehensive gap analysis, summarizing factors driving inequitable access to health care for 2SLGBTQIA+ populations. The gap analysis was documented in a detailed report and environmental scan. Additionally, participants created a repository of 110+ service providers offering 2SLGBTQIA+ care in the West Region.

The West Region 2SLGBTQIA+ Health Forum attracted 176 attendees; it was supported by six health care service providers, including Quest Community Health Centre, Salisbury Psychotherapy and Hamilton Health Sciences' Trans Youth Clinic. Collaborative engagement across portfolios ensured productive discussion regarding 2SLGBTQIA+ health care barriers. This forum will inform future strategic priorities. The next phase of work will include engagement with Francophone 2SLGBTQIA+ groups and providers, with the aim to enhance understanding of health care needs and accessibility barriers faced by these populations. These efforts underscore the commitment to improving health care in the West Region, marking a more inclusive and supportive health care environment.

# Implement the High Priority Communities Strategy

The High Priority Communities Strategy (“the Strategy”) was launched in December 2020 to provide targeted pandemic supports to address long-standing gaps in the health care system that were exposed during the COVID-19 pandemic for communities with a high percentage of Black and other racialized individuals who scored high on the material deprivation dimension of the Ontario Marginalization Index and experienced high rates of infection with this virus. Through targeted programming in the 2023 – 2024 fiscal year, the Strategy focused on improving access to primary care, mental health and addiction supports, preventive care and wraparound supports. Since its inception, Community Ambassadors have been an essential part of all aspects of the Strategy. Through culturally responsive outreach, Community Ambassadors have effectively bridged social, cultural and linguistic divides, promoted chronic disease screening, provided COVID response and recovery supports, access to primary care and service navigation in a manner appropriate to their local community.

## Achievements in 2023 – 2024

- Collaborations continued with the three strategic partners (including the Black Health Alliance, Black Physicians’ Association of Ontario and Health Commons Solutions Lab), who engaged with communities and Community Ambassadors to develop and enhance preventative health strategies in alignment with the goals of the High Priority Communities Strategy.
- Lead agencies worked to strengthen relationships with Ontario Health Teams through joint health fair planning, clinical pathway planning and Community Ambassador engagement to improve access to culturally responsive care across the system.
- The Preventative Care Program was launched in partnership with 11 lead agencies and the Ontario Health Prevention Team to improve access to preventive care for equity deserving populations.
- The Open Door Program offered a range of services from community outreach, health information stations, health fairs,

pop-up tables at community events, group education sessions and, when possible, more formal clinical assessments utilizing nurses, peer health workers and Community Ambassadors. Interpretation services were also available. The goal of this program is to empower individuals to learn and advocate for themselves to take charge of their health.

## Goals for 2024 – 2025

- The successes and lessons learned from the High Priority Communities Strategy will be carried forward and embedded into the broader health care system and the work of Ontario Health Teams through Locally Driven Population Health Models. This will advance health system priorities and support equity deserving groups across the province.
- The expansion of Ontario Health’s Preventive Care Program will enable the work to continue to improve access to preventive care for equity deserving populations and reduce chronic disease incidence and complications.

## Launch of the Preventive Care Program

The Preventive Care Program offers clients an opportunity to co-develop a personalized preventive care plan with a Prevention Specialist. Participating lead agencies adapted the framework to meet the local needs of community members and accomplish the program goals of facilitating access to primary care and preventive programs and services, promoting health behaviours, and screening and understanding the impact of providing wholistic preventive care to improve well-being.

### THE 11 LEAD AGENCIES ACROSS 3 ONTARIO HEALTH REGIONS (CENTRAL, TORONTO, EAST) REPORTED THE FOLLOWING IN Q3 AND SUBSEQUENTLY LAUNCHED THE PROGRAM BY JANUARY 2024:

- **362** participants across equity deserving populations (e.g., newcomers, older adults, racialized populations, economically marginalized individuals).
- **357** preventive care conversations occurred in two delivery models: group sessions hosted by Prevention Specialists and one-on-one appointments between participants and Prevention Specialists.
- **318** Preventive Care Plans were developed including preventive priorities such as cardiovascular health, diabetes, cancer screening, chronic disease risk factors and/or primary care access.
- **459** connections were made to various health and social services (health education, screening programs, etc.).

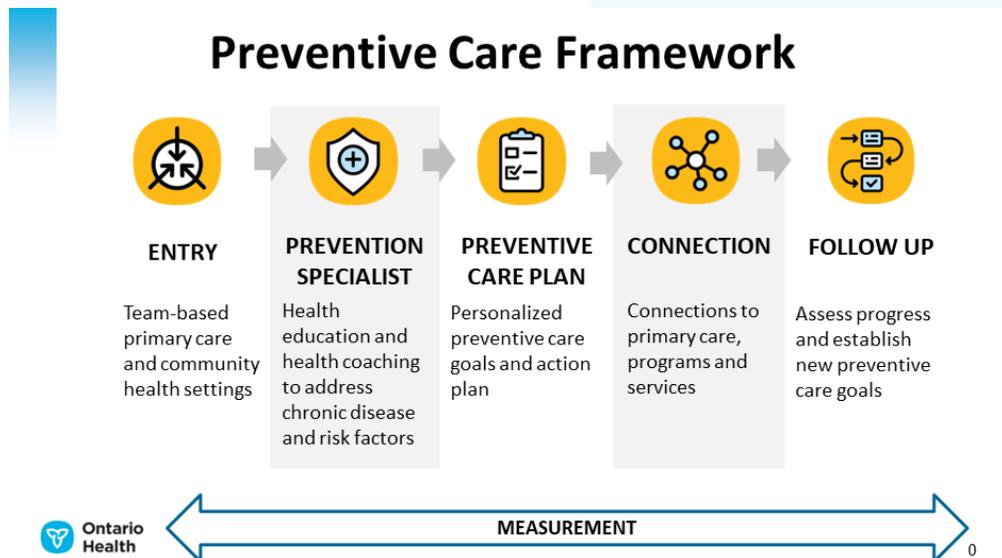


Figure 3. Stages of Preventive Care Framework

## Preventive Care Program in Action

Preventive care partnerships across regions expanded access to Cervical Cancer Screening through Mobile Clinics and workshops. Promotional education and awareness were conducted throughout the region. For example, a collaboration between Central Region and the Refugee Women’s Network led to the delivery of a virtual Cervical Cancer workshop in Farsi to raise awareness about preventative cancer care with women in marginalized communities.

“After speaking with the [Prevention Specialist] and finishing the preventive care sessions, I felt capable of taking control over my health goals.”

– A Participant from Punjabi Community Health Services.



Figure 4. HPCS Mobile Pap Smear Clinic



Figure 5. York Region Centre for Community Safety and Tony Wong Place partnered to bring a hybrid women’s health workshop focused on preventive cancer care.

# Advance French Language Services

As part of its engagement to work towards reducing health inequities, Ontario Health is committed to implementing its French Language Services Strategy to improve the availability of health services in French and working in collaboration with health system partners including the French Language Health Planning Entities (“Entities”), to achieve better health outcomes for Francophones across the province.

## Equitable Access to Health Services in French

- Eight major Ontario Health provincial initiatives received continuous FLS expertise to ensure that Francophones were engaged in the development of services in French for Health811, the Ontario Structured Psychotherapy (OSP) Program, Ontario Palliative Care Network, Breaking Free Online and Ontario Health Teams.
  - FLS provided advice to support the development of the Chronic Obstructive Pulmonary Disease Quality Standard, Ontario Health’s Health Equity, Indigenous Health & French Language Services assessments template for new projects and the recommendation report about Optimizing Ambulatory Systemic Treatment Models of Care.
  - A working group is developing Ontario Health guidelines regarding identification of Health Service Providers, the designation process and the review of compliance of designated Health Service Providers.
  - Ontario Health participated in the process to update the list of designated Health Service Providers in the FLS Act.
- Ontario Health’s FLS Regional Teams supported Ontario Health Teams in their implementation phase and Health Service Providers to:
    - Develop an active offer of health services in French.
    - Complete the designation process.
    - Review the compliance of designated Health Service Providers with designation criteria.

## Building Internal Bilingual Capacity and French Language Services Knowledge and Awareness

- Mapping internal bilingual capacity: 302 staff have provided information on their level of proficiency in French.
- Internal publications to celebrate Franco-Ontarian Day and International Francophonie Day provided information on Active Offer and about educational opportunities highlighting [Francophones and Cultural and Linguistic Sensitive Care \(fisonlinetraining.ca\)](#)
- Recurring meetings with some of Ontario Health’s Clinical and Quality Programs (including the Trillium Gift of Life Network and Cancer Care Ontario) as well as the Communications &

Engagement Team ensured continued French Language Services (FLS) harmonization with Ontario Health Regions.

- FLS Compliance Management Plans were successfully completed.
- A draft of Ontario Health’s FLS Policy was developed.

## Francophone Engagement

- The six French Language Health Planning Entities were engaged to give their feedback on priorities such as:
  - Ontario Cancer Plan 6.
  - FLS indicators.
  - Substance Use Disorders Integrated Care Pathways.
  - Ontario Health’s draft 2024 – 2025 Annual Business Plan.
- Ontario Health Regions engaged their respective Entities to advance FLS initiatives specific to the needs of their Francophone communities.
- A focus group tested accuracy and comprehension of the future state letters for the Ontario Cervical Screening Program.
- Senior leadership engagement included the Ministry of Francophone Affairs, the Ministry of Health, the FLS Commissioner, L’Assemblée de la Francophonie, the Special Advisor FLS to Ontario Health’s CEO and the Alliance for Healthier Communities.

## Accountability and Performance

- Ontario Health Regions oversaw the compliance of their entity’s agreement and implementation FLS plan.
- Ontario Health actively supported the Ministry of Health with the FLS annual reporting process for Health Service Providers. FLS reporting to the Ministry of Health and Ministry of Francophone Affairs was submitted on time and key performance indicators were monitored.

## Ontario Health Regional Highlights:

The Regions have been actively involved in addressing the needs of Francophones across the province to reduce health inequities. Some of these activities are featured below.

- **Northeast and Northwest Regions** evaluated the designation compliance of 16 Health Service Providers and created a FLS Capacity and Census Map that displays health service providers by FLS status and the percentage of Francophones by area.
- **Central Region** organized training sessions on active offer for five Ontario Health Teams.

### ONTARIO HEALTH FUNDED FIVE FLS PROJECTS:

- **Toronto Region** supported a Francophone Regional Navigation Project.
- **Central Region** supported the implementation of a FLS Community of Practice.
- **West Region** completed the coordination of seven Mental Health First Aid courses in French with over 85 participants and the expansion of the [Francophones and Cultural and Linguistic Sensitive Care training](#).
- **East Region** supported Hospital Montfort in recruiting and maintaining high human resource standards and address the development and translation of all training materials in French.

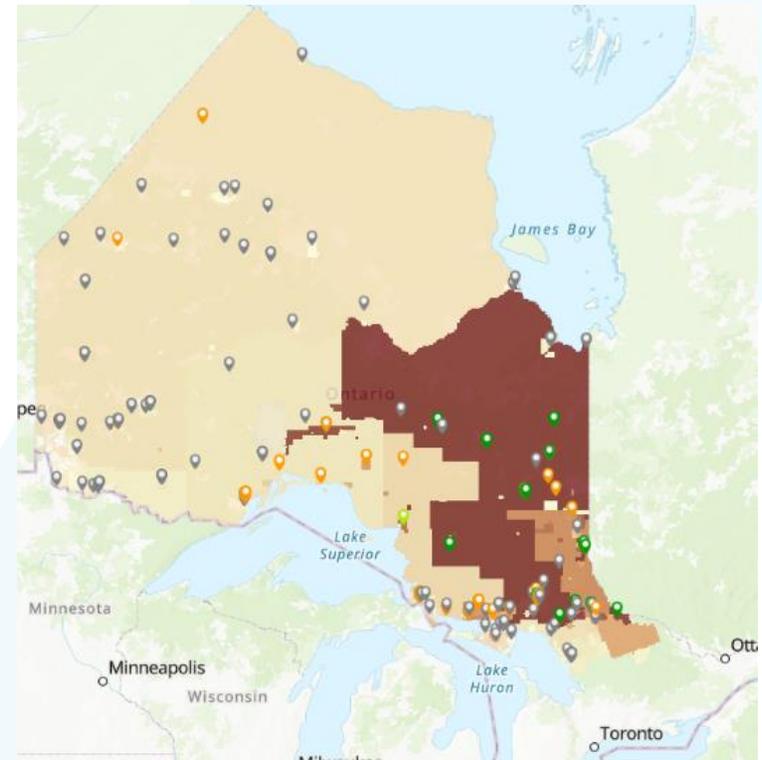


Figure 6. FLS Capacity and Census Map displaying health service providers by FLS status.

# Advance Indigenous Health

The work of the Indigenous Health Equity and Coordination Unit and the Indigenous Cancer Care Unit spans beyond equity issues to coordinate and align all First Nations, Inuit, Métis and urban Indigenous work across Ontario Health. An essential role that Indigenous Health Equity and Coordination and the Indigenous Cancer Care Unit provides at Ontario Health is to build and sustain relationships founded on mutual respect and trust with First Nations, Inuit, Métis and urban Indigenous leaders, organizations and communities and to advance First Nations, Inuit, Métis and urban Indigenous partner priorities at Ontario Health.

## In 2023 – 2024, partnering to advance Indigenous health included:

- Continuing to build relationships founded on respect and trust between Ontario Health and First Nations, Inuit, Métis and urban Indigenous leadership. This included ongoing discussions with First Nations, Inuit, Métis and urban Indigenous leaders and partners and discussions to formalize relationships through the development of formalized agreements. A relationship protocol agreement with the Ontario Native Women’s Association was finalized in 2023 – 2024 and five are in development with other First Nations, Inuit, Métis and urban Indigenous partners.
- Supporting the Joint Ontario Indigenous Cancer Committee. Established in 1997 as an information and advisory table on Indigenous cancer care in the province. In October 2023, the Joint Ontario Indigenous Cancer Committee approved an expansion of its mandate beyond cancer to include other Indigenous health priorities. The committee is comprised of First Nation, Inuit, Métis and urban Indigenous partners and is now the Joint Ontario Indigenous Health Committee (JOIHC).
- Implementing new local obligations for all non-Indigenous Health Service Providers in Ontario on ‘Advancing Indigenous Health Strategies and Outcomes.’ As of 2023 – 2024, all non-Indigenous Health Service Providers are required to complete an annual year-end report and workplan focused on building productive relationships and sustainable engagement processes with First Nations, Inuit, Métis and urban Indigenous partners, providing access to culturally safe care and increasing organizational Indigenous cultural competency. All Health Service Providers must also demonstrate that 100% of [executive level staff](#) have completed relevant Indigenous Cultural Awareness and Safety training.
- Working with First Nations, Inuit, Métis and urban Indigenous partners to develop and refine an internal Indigenous Data Governance Matters process. It aims to provide direction, accountability and standardized approaches to ensure the respectful use of First Nations, Inuit, Métis and urban Indigenous data at Ontario Health by working alongside and leveraging existing First Nations, Inuit, Métis and urban Indigenous governance models and processes to safeguard First Nations, Inuit, Métis and urban Indigenous data at Ontario Health. The process aims to ensure that Ontario Health projects respect First Nations, Inuit, Métis and urban Indigenous data sovereignty, benefit distinct First Nations, Inuit, Métis and urban Indigenous communities and

adhere to the recommended processes for respectful engagement with First Nations, Inuit, Métis and urban Indigenous partners.

- Updating Ontario Health’s Indigenous Relationship and Cultural Awareness (IRCA) courses. These are free of charge and are designed to help individuals working in the health care system with First Nations, Inuit, Métis and urban Indigenous peoples. The IRCA courses cover the history and culture of First Nations, Inuit, Métis and urban Indigenous peoples, including current events such as the Residential School grave sites and missing and murdered Indigenous women and girls.
- Working with hospitals to address anti-Indigenous racism and advance Indigenous cultural safety. This includes convening

quarterly meetings of Indigenous hospital leaders from 14 hospitals across Ontario (this number may increase) to provide a space for Indigenous leaders to share best practices, tools and resources to advance Indigenous health equity in their respective institutions.

- Working with Ontario Health Regions to advance Indigenous health equity.
- Regional Indigenous Leads and teams are now in place across all six Ontario Health Regions to support partnerships with Indigenous communities and providers.
- 112 Indigenous Health Service Providers are now funded by Ontario Health.

## Launch of First Nations, Inuit, Métis and Urban Indigenous (FNIMUI) Health Framework

The First Nations, Inuit, Métis and Urban Indigenous (FNIMUI) Health Framework was launched in January 2024 and provides a platform for addressing FNIMUI needs, issues and priorities across the health care system. It is built on five Areas of Focus identified by FNIMUI partners, which will serve as the foundation for developing a comprehensive FNIMUI Health Plan.

Ontario Health is committed to working directly with FNIMUI partners on the development, implementation and ongoing evaluation of both the Framework and the Health Plan. Engagement with FNIMUI partners is key to providing their individual and collective direction on the FNIMUI Health Framework and Health Plan to ensure it addresses their needs and priorities.

There is an urgent need for action to address the health outcomes and access to health care among Indigenous peoples in Ontario. Honouring our commitments to reconciliation by working together to address the health and well-being of Indigenous peoples, families and communities is a top priority. The Framework will provide a platform to build upon in the discussions with partners on the development of Ontario Health's FNIMUI Health Plan.

This Framework will support, enable and strengthen Indigenous communities, organizations and Nations to have control over the delivery of their own health services to their community members. Collaboration and partnerships between FNIMUI partners and health system partners mean ensuring FNIMUI partners are respected as experts on their own communities and consistently at the table when decisions are being made.

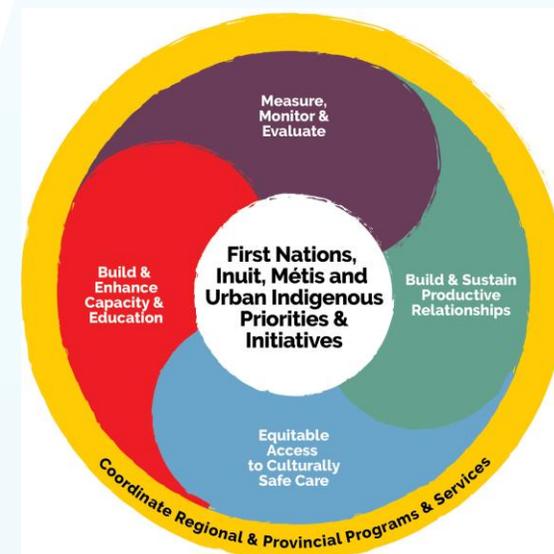


Figure 7. Key components of FNIMUI Framework.

# Advance Health Equity Data and Analytics Strategy

The collection of standardized sociodemographic data across the health system is vital for detecting inequities and designing initiatives to improve outcomes for equity deserving populations. Ontario Health is committed to mitigating these inequities and recognizes that the collection and utilization of sociodemographic data are crucial elements in the pursuit of equitable, accessible and quality care for all individuals. Ontario Health has created comprehensive guidelines and tools to outline the ethical use and management of data to identify inequities in terms of access, experiences and outcomes. Ontario Health's Equity Data and Analytics Strategy aims to develop deepened understanding of the challenges equity deserving groups face in Ontario and using data as a key driver to close equity gaps where and when they are identified.

## To advance Ontario Health's Equity Data and Analytics Strategy in the 2023-24 fiscal year, teams across the organization achieved the following:

- Established a set of Data Governance Principles, for the collection and management of sociodemographic data, incorporating best practices and expert consensus from subject matter experts across Ontario Health.
- Developed a Core Sociodemographic Data Standard for Ontario Health, which includes a set of 10 data elements, each with a corresponding set of standardized questions and response values for collecting individual-level, encounter-based sociodemographic data across Ontario Health data collection initiatives.
- Launched the Health Equity Analytics Toolkit (HEAT), which enables convenient access to small area level sociodemographic data for equity analytics at Ontario Health. It includes a set of tables with key sociodemographic data elements, primarily built from the Canadian Census and other analytics tools such as the Ontario

Marginalization Index (ON-Marg). It also contains a comprehensive user guide on how to conduct small area equity analysis for teams that are new to this area. The tables have over two dozen variables across the four axes of marginalization used to create the ON-Marg Index. These variables are available at the Forward Sortation Area (FSA) and the Dissemination Area (DA) level, allowing teams across Ontario Health to seamlessly incorporate equity analytics into their current workflows. Some key uses for the toolkit include equitable allocation of resources for health system planning, equity stratification of indicators in various scorecards, research looking into the geographic distribution of inequity as it relates to various health outcomes, etc.

- Central and Toronto Regions collaborated with the Ontario Community Health Profiles Partnership to develop local area/neighbourhood level sociodemographic data through Unity Maps. This enabled both Ontario Health staff and health service providers to leverage the data to inform planning and service delivery.

## Ontario Health’s Data Governance Principles and Core Sociodemographic Data Standard

The Data Governance Principles and Core Sociodemographic Data Standard are part of a comprehensive Health Equity Data and Analytics Strategy that sheds light on how access and outcomes of care can vary across sociodemographic lines.

The Data Governance Principles guide the approach to sociodemographic data collection, use and governance in a meaningful and systematic way. The overarching principle is *Ethical Treatment of Communities*, which is the foundation of all six principles referenced in figure 8.

The Core Sociodemographic Data Standard (figure 9) was created to ensure a uniform approach to collecting sociodemographic information across Ontario Health portfolios and programs to optimize use and comparison of the data. Health service providers have expressed great interest in these data elements, which are gradually being socialized with external partners who wish to collect these data in a manner that is consistent with Ontario Health.

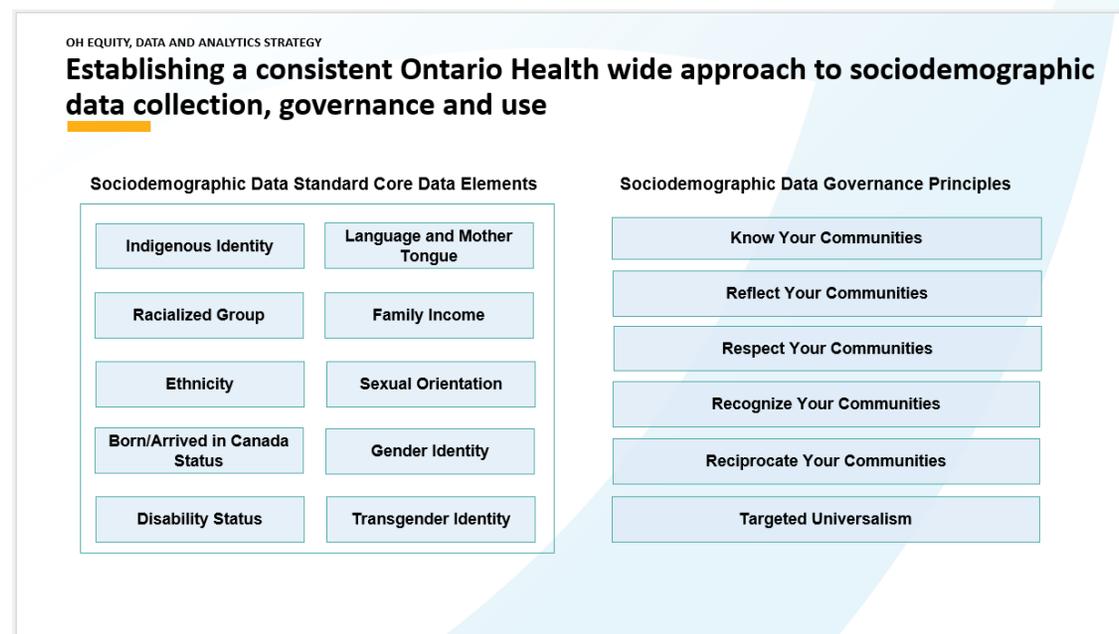


Figure 9. The Core Sociodemographic Data Standard



Figure 8. Ethical Treatment of Communities

# Promote Internal EIDA-R Plan

Ontario Health has made significant strides in promoting equity, inclusion, diversity and anti-racism within our organization. Ontario Health has fostered a shared commitment to these values by providing equity education and training options, enhancing recruitment processes to attract team members from equity deserving populations and supporting initiatives for dedicated staff time and participation in Communities of Inclusion. These efforts have cultivated a robust culture and commitment dedicated to advancing equity, inclusion, diversity and anti-racism across Ontario Health.

**In 2023 - 2024, Ontario Health team members were supported by the following:**

- Promoted Indigenous Relationship and Cultural Awareness education.
- Established connections with best practice organizations focused on building and sustaining internal equity.
- Expanded the recruitment of diverse applicants, broadening its reach and attracting a more varied talent pool.
- Enhanced the Employee and Family Assistance Program to better support the well-being of its staff. Additionally, the complaint investigation process has been refined.
- To ensure the longevity of Communities of Inclusion (COI) Ontario Health provided funding, dedicated release time and support for team member participation. This enabled the expansion of COIs, with three new communities established in 2023 – 2024 for a total of seven COIs that have senior leadership support.
- Successfully launched the inaugural cohort of the Communities of Interest mentorship program. This initiative paired leaders with team members to foster professional development and growth. This cultivated a culture of mentorship and empowerment across Ontario Health's workforce.

**IN ADDITION, A CULTURE OF INCLUSION WAS PROMOTED IN 2023 - 2024 BY THE FOLLOWING:**

- Black History Month was celebrated by hosting a series of events throughout February. This included educational activities highlighting contributions of Black Canadians, to a panel discussion with dynamic and engaging speakers across various health sectors, to imagining Black futures.
- Pride Month was celebrated by holding multiple events through June culminating with a discussion highlighting the perspectives of Two-Spirit and Indigiqueer people living in Northern Ontario.
- National Indigenous Peoples Day and National Indigenous History Month were recognized with virtual events and developing resources to increase staff knowledge and understanding of the rich history, heritage, and contributions of Indigenous communities in Ontario. This included a panel discussion with Indigenous staff from across Ontario Health reflecting on the importance of National Indigenous Peoples Day and actions necessary to foster meaningful change to advance Indigenous health and rights.
- Additional important occasions were recognized and celebrated throughout the year, including, but not limited to, International Women's Day and Lunar New Year.

## COMMUNITIES OF INCLUSION

Ontario Health upholds seven Communities of Inclusion (COIs) for equity deserving groups within the organization, engaging over 650 team members. These are staff-led groups that aim to foster safe spaces, connection and learning opportunities to further the organization's commitment to embracing and celebrating diversity. The existing COIs are:

- ARISE (supporting Black team members)
- East Asian Community of Inclusion (supporting East Asian team members)
- Jewish Community of Inclusion (supporting Jewish team members)
- Pride in Health (supporting 2SLGBTQIA+ team members)
- Nation to Nation (supporting First Nations, Inuit, Métis and urban Indigenous team members)
- South Asian Multicultural Alliance (supporting South Asian team members)
- Women in Motion (supporting cis and trans women, genderqueer and nonbinary team members)

Ontario Health welcomes to development of further COIs to meet the ongoing needs of staff and has made the process to creating new COIs clear and accessible to all staff.

COI-led activities have included:

- Programming to create safe spaces for team members to celebrate and commemorate occasions of significance.

- Flagship events that build organizational capacity and awareness (Pride Month, International Women's Day, National Indigenous History Month, Black History Month).

## Embedded equity requirements for health service providers:

Ontario Health embedded equity and Indigenous health equity obligations within Service Accountability Agreements for 23 – 24 and 24 – 25. This work included:

- Launching a guidance document, reporting template and evaluation framework to ensure that Health Service Providers have the tools to support equity planning and reporting, with accountability mechanisms to ensure compliance.
- Defining an evaluation approach in collaboration with regions to measure tangible outcomes and drive meaningful change across the health care system.

# Key Takeaways

## Key insights from this report are highlighted below:

- Embedding Black health priorities into key provincial strategies is fundamental to improving clinical quality of care for Black communities.
- Establishing partnerships, disseminating resources and supporting engagement to expanding health system capacity around 2SLGBTQIA+ health supported reducing barriers and narrowing gaps in access to health care services for 2SLGBTQIA+ populations.
- The lived experiences of Community Ambassadors contributed to their ability to successfully provide culturally responsive health system navigation and chronic disease prevention services.
- Raising awareness through training about health equity, priority populations and French Language Service requirements is key to understanding and addressing the needs of these equity deserving groups.
- Building and sustaining relationships founded on mutual respect and trust with First Nations, Inuit, Métis and urban Indigenous leaders, organizations and communities is essential to reducing risk of harm and to advance First Nations, Inuit, Métis and urban Indigenous health.
- Sociodemographic data must be collected in partnership with communities to ensure ethical governance, inform planning and implementation and measure performance.
- By providing opportunities to participate in Communities of Inclusion, Ontario Health is investing in team members and cultivating a robust culture and commitment dedicated to

advancing equity, inclusion, diversity and anti-racism across the organization.

## Lessons Learned

These overarching considerations should be embedded into health equity work from the idea to implementation stages to better meet the needs of equity deserving groups:

- Sustainable practices, funding and commitment to health equity initiatives in collaboration with community organizations is necessary to meaningfully impact underserved populations.
- Considerations for equity deserving groups must be integrated into the foundations of all initiatives as they emerge as opposed to being retroactive additions.
- Building a strong and equitable internal culture is critical to ensuring we can reflect the same values for the populations we serve.
- Partnerships and collaboration, across the health system and beyond, built around improving outcomes for equity deserving populations are critical to our success.
- Advancing equity throughout the health care system necessitates long-term, culturally responsive, community-led approaches that address intersecting health and social outcomes.
- Delivering on population-specific initiatives to advance health equity enables greater success than a ‘one-size fits all’ approach.

# Appendix

## Acronyms

Acronym	Full Form	Example of Use in This Report
<b>EIDA-R</b>	Equity, Inclusion, Diversity, Anti-Racism	Equity, Inclusion, Diversity, Anti-Racism (EIDA-R) Framework
<b>FLS</b>	French Language Services	French Language Services (FLS)
<b>2SLGBTQIA+</b>	Two-Spirit, Lesbian, Gay, Bisexual, Trans, Queer, Intersex, Asexual, Plus	Enhancing access and quality of care for the 2SLGBTQIA+ community
<b>eGFR</b>	estimated Glomerular Filtration Rate	Implemented a new estimated Glomerular Filtration Rate (eGFR) equation
<b>ON-Marg</b>	Ontario Marginalization Index	The Health Equity Analytics Toolkit (HEAT) includes a set of tables with key sociodemographic data elements, primarily built from the Canadian Census and other analytics tools such as the Ontario Marginalization Index (ON-Marg)
<b>FSA</b>	Forward Sortation Area	The tables have over two dozen variables across the four axes of marginalization used to create the ON-Marg Index. These variables are available at the Forward Sortation Area (FSA) and the Dissemination Area (DA) level
<b>IRCA</b>	Indigenous Relationship and Cultural Awareness	Promoted Indigenous Relationship and Cultural Awareness education among Ontario Health staff
<b>COIs</b>	Communities of Inclusion	Ontario Health upholds seven Communities of Inclusion (COIs) for equity deserving groups within the organization
<b>JOIHC</b>	Joint Ontario Indigenous Health Committee	The Joint Ontario Indigenous Cancer Committee approved an expansion of its mandate beyond cancer to include other Indigenous health priorities and is now the Joint Ontario Indigenous Health Committee (JOIHC)
<b>FNIMUI</b>	First Nations, Inuit, Métis and Urban Indigenous	The First Nations, Inuit, Métis and Urban Indigenous (FNIMUI) Health Framework was launched in January 2024
<b>HEAT</b>	Health Equity Analytics Toolkit	Launched the Health Equity Analytics Toolkit (HEAT)
<b>IHEC</b>	Indigenous Health Equity and Coordination	Working with First Nations, Inuit, Métis and urban Indigenous partners to develop and refine an internal Indigenous Data Governance Matters process
<b>IDGM</b>	Indigenous Data Governance Matters	Working with First Nations, Inuit, Métis and urban Indigenous partners to develop and refine an internal Indigenous Data Governance Matters process

Need this information in an accessible format? 1-877-280-8538, TTY 1-800-855-0511, [info@ontariohealth.ca](mailto:info@ontariohealth.ca).  
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