

COMMITTEE ON BLACK HEALTH, INNOVATION AND ADVANCEMENT (BHIAC)

STRATEGIC ACTION PLAN





LAND ACKNOWLEDGEMENT

We acknowledge the Indigenous and Afro-Indigenous Peoples across Turtle Island who continue to thrive and resist colonial violence while striving for self-determination and decolonial futures.

We live and work in various territories that are home to many diverse First Nations, Inuit and Métis peoples, including the lands of the Huron-Wendat, Haudenosaunee, and Mississauga's of the Credit River; Cree, Oji-Cree, Dakota and Dene peoples, the Anishinaabe, and on the homeland of the Red River Métis Nation; Kanien:keha'ka and Mi'kmaq.

We remember our ancestors, forcibly displaced African peoples, brought to Turtle Island as a result of the Trans-Atlantic Slave Trade and the histories and legacies of colonialism that continue to impact African Peoples and the descendants of the Black diaspora around the world.

— Adapted from Black Health Education Collaborative

LETTER FROM COMMITTEE CHAIR AND VICE CHAIR

We are grateful for the opportunity to serve as Chair and Vice Chair of the recently established Committee on Black Health, Innovation and Advancement (BHIAC). This timely and necessary Committee was established by the AFMC Board to provide support and advice through the Standing Committee on Social Accountability (SCSA). As a pan-Canadian governance Committee with representation from Black-identified members, we will provide input on strategic and operational matters related to Black health and wellness in academic medicine.

Our committee aims to facilitate national collaboration among Canadian faculties of medicine and medical schools and institutions to equip faculties with best-practice tools and solutions to address systemic and structural anti-Black racism. We will also identify opportunities to illuminate anti-Black racism in academic medicine and advocate for learner competence in anti-racist, anti-oppressive, and culturally safe care through an intersectional lens.

We are committed to supporting the elimination of systemic barriers in the medical education system that sustain and perpetuate all forms of racism and marginalization. Bringing lived experience to the task, our Committee is current, creative, flexible, and adaptable. We also recognize the importance and need to be intentionally inclusive of the non-physician members of the Committee who live in the world of research, drive Black ingenuity, and are equally important members of the Academy.

As an advisory Committee, we want to acknowledge the critical need for Black advancement in leadership positions in medicine so that we can shape, and influence policy, practices, procedures, and effect structural change where anti-Black racism exists.

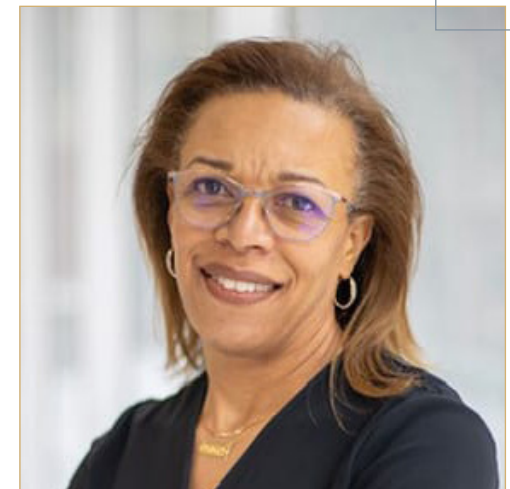
We take on our roles with a strong desire to create learning and practice environments where all voices are heard and considered and where differences are celebrated rather than marginalized. We welcome all who support the spirit, intention and focus of the AFMC committee on Black Health, Innovation, and Advancement to join us in building a united front that develops structures and policies that promote and advance Black health, innovation, and progress.

Kannin Osei-Tutu

Kannin Osei-Tutu, Chair, BHIAC
University of Calgary

Mireille Norris

Mireille Norris, Vice Chair, BHIAC
University of Toronto



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INTRODUCTION

This Strategic Action Plan has been developed to address the responsibilities in the Committee's Terms of Reference. It is aligned with the direction of the AFMC's Strategic Plan in its desire to be equipped with best-practice tools and solutions to address systemic and structural racism and to advance equity, diversity, and inclusion.

Our Strategic Action Plan is intentionally focused on developing and supporting priorities, processes and practices that are relevant to Black health, innovation, and advancement in Canada. The specific actions are centered around sharing knowledge, best practices and experience among Black health leaders, scholars, learners, allies and actively engaging decanal leaders.

Collaboration is a key enabler of our work, and we will engage those with synergistic goals and objectives. As part of our commitment to innovation and advancement, we are intentional in developing and implementing key performance metrics and evaluation frameworks to guide our work.

“This is a tremendous opportunity for Black physician leaders at their respective medical institutions to come together, build community, and ensure that the health and wellness of Black physicians, learners, patients, and scholars become an established medical education priority in Canada.”

Dr. Kannin Osei-Tutu, Chair, AFMC Committee on Black Health, Innovation and Advancement.

STRATEGIC GOAL:

The BHIAC aims to bring about positive change within the Canadian medical education landscape by uniting Black leaders at Canadian faculties of medicine and medical schools and institutions, collaborating with other medical education leaders, advocating for social justice and anti-racism, taking action to eliminate systemic barriers, and promoting inclusive and equitable health care environments for all.

“Anti-Black racism has always been present within the fabric of our health care system. This can be seen in the hierarchical nature of medicine, with deep roots in colonialism and patriarchal norms that persist today. We recognize the efforts present at University of Toronto to lessen the effects of anti-Black racism in medicine and also recognize that this will be a lengthy and difficult process, one that will not end anytime soon.”

Black Resident Physicians of Ontario in Black at Temerty Medicine: Addressing Anti-Black Racism at Temerty Medicine Accountability Report, February 2022

MISSION, VISION, AND VALUES

MISSION:

To lead national collaboration and action among Canadian medical schools that proactively and specifically address anti-Black racism while promoting the health and wellbeing of Black physicians, learners, patients, and scholars.

VISION:

A holistic, socially just Canadian health ecosystem where the medical education environment is inclusive, equitable and free from systemic and structural anti-Black racism, so that Black physicians, learners, patients, and scholars experience a sense of belonging and fair opportunities.

VALUES:

INNOVATION & EXCELLENCE: Encouraging and striving for creative solutions and forward-thinking approaches to effectively address anti-Black racism by continuously seeking out and implementing novel techniques and practices to dismantle systemic and structural barriers that lead to high standards in medical education that lead to enhanced practice outcomes for all, including those from Black communities.

EQUITY & SOCIAL JUSTICE: Committing to fair treatment, access, opportunity, and advancement for all Black individuals in the medical community while striving to identify and eliminate barriers that prevent the full participation of Black community members.

COLLABORATION: Building partnerships across Canadian medical schools and with other stakeholders in medicine, health and social sciences and other related disciplines (i.e. sociologists, psychologists, social workers) to create a unified voice for action against anti-Black racism in health care.

ADVOCACY & EMPOWERMENT: Actively championing policies, practices, and initiatives that advance the health, wellbeing, and opportunities of Black individuals in the medical field by ensuring they have the resources and opportunities to thrive and to support equitable access to appropriate care for patients from Black communities.

“Many stakeholders discussed a variety of concerns about the prevalence of prejudices and biases, often unconscious, among students, staff, and faculty at the College of Medicine and throughout the practice of medicine and healthcare system. Many people recommended education, such as anti-racism and anti-bias training, as a key remedy for these systemic forces.”

From The Case for a Restorative Response to Perceptions of Systemic Inequity at the University of Saskatchewan College of Medicine: A Systemic Investigation Summary Report, Saskatchewan Human Rights Commission



STRATEGIC PILLARS



POLICY & STRUCTURAL REFORMS

STRATEGIC OBJECTIVE: Advocate for policy, structural, and institutional changes within Canadian faculties of medicine and medical schools and institutions to tackle systemic barriers so that Black physicians, learners, patients, and scholars can experience a sense of belonging and fair opportunities.

ACTIONS:

- a) Advocate for medical institutions to create Black Health programs and/or initiatives with dedicated resources (e.g., funding, human resources).
- b) Develop a comprehensive policy framework that addresses anti-Black racism and promotes equity and social justice in faculties of medicines, medical schools and other institutions providing training in medicine, health sciences and other related disciplines.
- c) Promote the recruitment, retention, and promotion of Black leaders in the Canadian healthcare system. This includes Black medical students, residents, and staff as well as Black researchers, scholars, post-doctoral fellows, and others.

COLLABORATION & UNITY

STRATEGIC OBJECTIVE: To strengthen collaborative advocacy between Black physician leaders, scholars, and supportive organizations, as well as with allies across institutions, to recognize and strengthen the focus on Black excellence in academic medicine.

ACTIONS:

- a) Create a national digital platform where resources, ideas, and best practices can be shared among BHIAC members and their allies and stakeholders.
- b) Establish regular meetings to discuss progress, challenges, and future directions to maintain sustained focus on BHIAC's mission.
- c) Recognize and celebrate Black excellence in medicine and biomedical research through established partnerships with other mission-aligned organizations in Canada to support knowledge sharing and promotion of external work that advances shared goals.
- d) Promote mentorship and support for Black physician leaders, researchers, scholars, and learners and identify opportunities to celebrate and recognize their accomplishments.
- e) Identify opportunities to support Black Francophone and Allophone learners.
- f) Develop initiatives focused on leadership development and career advancement for Black physicians, researchers, scholars and learners.

“The health needs and experiences of Black Canadians are largely absent from medical and health sciences curricula, with little evidence of their inclusion in these disciplines.”

From The Black Health Education Collaborative's Black Health Primer

IMPLEMENTATION STRATEGY

1. **STAKEHOLDER & ALLY ENGAGEMENT:** Meet regularly with Medical School Deans and other decision-makers to ensure their commitment and support.
2. **RESOURCE ALLOCATION:** Identify necessary and dedicated/ ongoing resources (financial, human, technological) for each strategic pillar.
3. **COMMUNICATION AND OUTREACH:** Ensure transparent and open communication channels for all BHIAC committee members and their allies, allowing for feedback and innovative ideas.
4. **TRAINING & CAPACITY BUILDING:** Provide training sessions and workshops for BHIAC members and those engaged with its mission to enhance their skills and knowledge to effectively address the system barriers impacting fair participation.
5. **ANNUAL REVIEW:** Conduct a thorough review of the strategic plan's progress and effectiveness each year. Consider publishing a scorecard report.
6. **FEEDBACK MECHANISM:** Allow stakeholders to provide regular feedback, ensuring the strategic plan remains relevant and effective.
7. **REGULAR REPORTING:** Ensure transparency by providing regular updates to stakeholders, including challenges, successes, and any necessary adjustments to the strategy.
8. **IDENTIFY AND DOCUMENT** key individuals and entities working on related issues and work collaboratively to avoid duplication of efforts (e.g. Equity, Diversity & Inclusion (EDI) offices).

MONITORING & EVALUATION FRAMEWORK

Regularly evaluate the effectiveness of initiatives to ensure alignment with BHIAC's goals (e.g. annual report card).

ACTIONS:

- a) Conduct annual surveys to gather feedback from members, learners, and other stakeholders.
- b) Establish Key Performance Indicators (KPIs) to track the progress and impact of the Committee's work.
- c) Actively participate in the institutional reporting and feedback process on institutional reforms that address anti-Black racism across Canadian Faculties of Medicine, and medical schools and institutions including engaging with Deans of Medicine to discuss progress and challenges.
- d) Support collaborative and interdisciplinary engagement across disciplines to maintain momentum in addressing anti-Black racism.

“We who work in health care must acknowledge the existence of anti-Black racism in our systems and commit to meaningful, sustained change. We can do this by listening to the voices of Black Canadians, patients and health care professionals who have been grappling with anti-Black racism for generations, and by engaging with the many communities that have made recommendations for meaningful change to address the problem.”

From Time to dismantle systemic anti-Black racism in medicine in Canada article, OmiSoore Dryden & Onye Nnorom, CMAJ, January 11, 2021

METRICS AND KEY PERFORMANCE INDICATORS (KPIs)

- a) Anti-Black racism issues being discussed within the Canadian medical education system and attention being paid to curriculum, diversity of faculty, support for learners, physicians, and patients;
- b) Number of institutions with established and supported Black Health programs/ initiatives that address anti-Black racism;
- c) Number of policies influenced or implemented to combat anti-Black racism;
- d) Extent to which strategic anti-Black initiatives/programs are reflected in organizational structures;
- e) Level of participation in community-building initiatives and programs, including community partnerships and actively seeking participant feedback in the creation of the initiatives, programs, and partnerships;
- f) Number of research initiatives supported and their impact on Black health and wellbeing;
- g) Diversity of resources available to support Black health and wellbeing;
- h) Invitations to conferences, symposia, workshops to discuss anti-Black racism and its impact on Black health and well-being.
- i) Increased participation and engagement in leadership development programs and advancement opportunities



“I take on this role to help make the conditions for learners better than when I was in medical school, to make the practice environment more inclusive and safer and to make the future of medical education and Black health more fair and just.”

Dr. Mireille Norris, Vice Chair, BHIAC

IMPLEMENTATION TIMELINE

SHORT-TERM

2024

1. Advocate for the operationalization of anti-racism policies, ensuring there is a pathway for reporting and addressing issues related to racism—**this action step occurs in all timelines;**
2. Secure initial financial support to advance BHIAC strategic pillars, including securing protected time for Committee members to actively participate and build capacity;
3. Expand collaborations with national bodies doing related work, keeping in mind the unique needs of Quebec and the Northwest Territories.
4. Integrate Black health researchers in BHIAC activities.

MEDIUM-TERM

2024-2025

1. Establish local networks;
2. Develop national strategies and initiatives on Black health education;
3. Engage with Deans and secure more robust, ongoing financial support.

LONG-TERM

2025-2026

1. Consolidate all objectives, measure impact, and re-strategize as needed;
2. Initiate/Support the establishment of Black health initiatives.

COMMITTEE MEMBERS

CHAIR

Kannin Osei-Tutu, University of Calgary

VICE CHAIR

Mireille Norris, University of Toronto

MEMBERS

Lydia Angarso, BMSAC

Olufemi Ayeni, McMaster University

Samiya Abdi, BHEC

Magaly Brodeur, Université de Sherbrooke

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