



ACROSS BOUNDARIES

Canadian Public Health Association 2019 Conference

Centering Anti-Racism/Anti-Oppression and Resisting Anti-Black Racism in the delivery of mental health and addiction services for racialized/marginalized communities

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Overview

Relevance of centering AR/AO/resisting ABR

Critical Practice Framework

Sharing Insights



Across Boundaries - Origins

- Ethnoracial Mental Health Coalition
- Racism and intersectionality of issues within health and mental health
- Funding application 1994
- Services began 1995
- Organizational growth – from 4 staff to 30 FTE



Centering racism anti-Black racism

“The continuous growth of social movements calling for racial justice remind us that these calls are by no means new. They serve as further reminders that **systemic racism** is deeply entrenched into our day-to-day lives and that we must ensure that the institutions we rely on for critical public services are free of systemic racism”

A BETTER WAY FORWARD
Ontario's 3-Year Anti-Racism Strategic Plan
(March 2017)

“The legacy of **anti-Black racism** lies in the current social, economic, and political marginalization of Black Torontonians. It is evidenced by a lack of opportunity, poor health and mental health outcomes, poor education outcomes, higher rates of precarious employment and unemployment, significant poverty, and overrepresentation in the criminal justice, mental health, and child welfare systems”.

The Interim Toronto Action Plan to Confront
Anti-Black Racism, June 7, 2017



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Across Boundaries recognizes that...

- Racism and discrimination impacts the physical and mental health of racialized communities.
- Individual and systematic racism is a barrier to accessing physical and mental health care for racialized communities
- There is an intersection of oppressions which also includes religion, language, ethnicity, class, gender, sexual orientation, disabilities, age, country of origin and citizenship status.

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Across Boundaries recognizes that...

- That racism and oppression can occur at individual, organizational and systemic levels; and intervention is needed at all levels.
- Black communities over represented in all systems of care and control
- Black communities overly psychiatrized and criminalized
- White supremacist ideologies, alt right movement, Islamophobia etc. exacerbates and normalizes marginalization



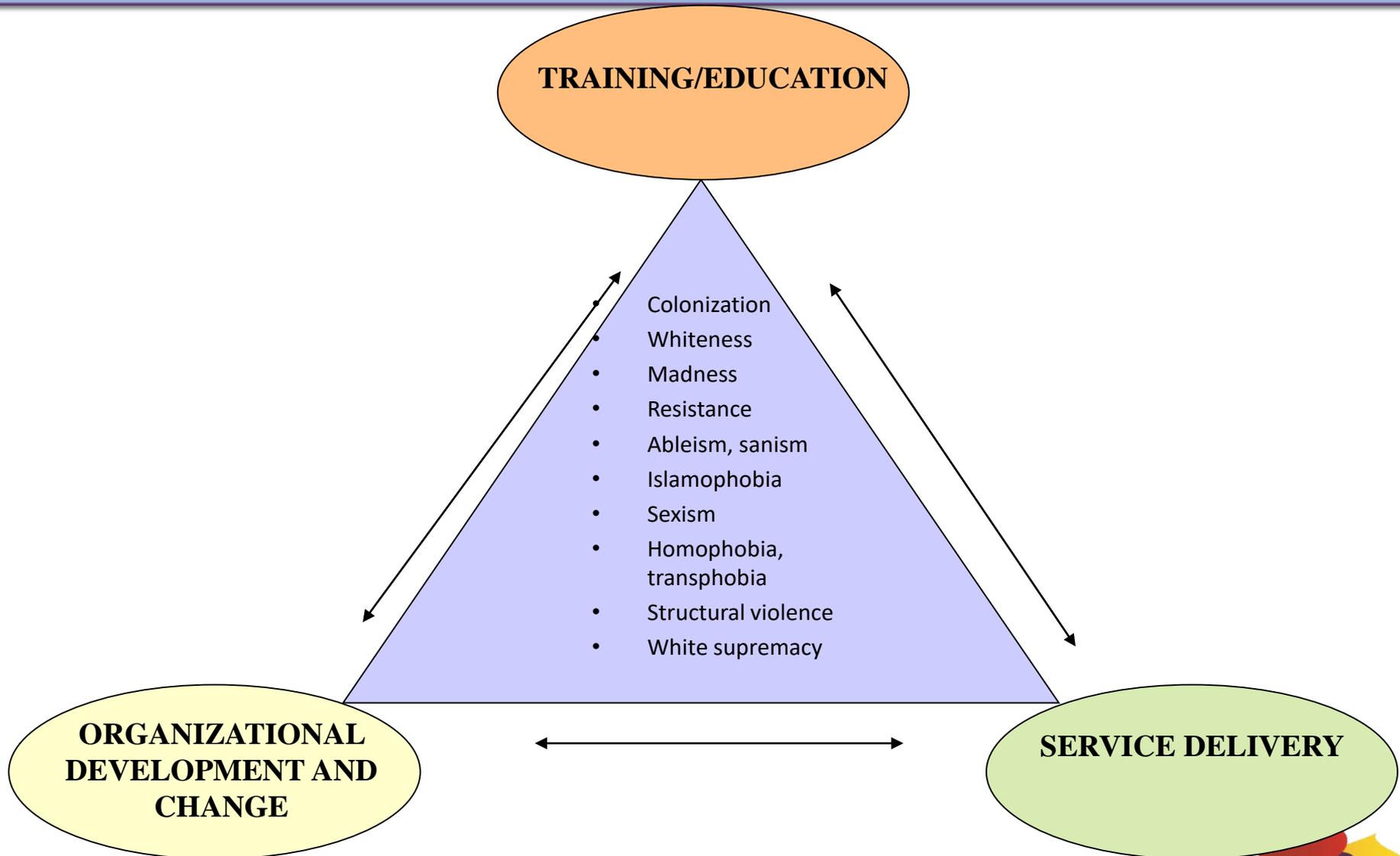
How We Do It

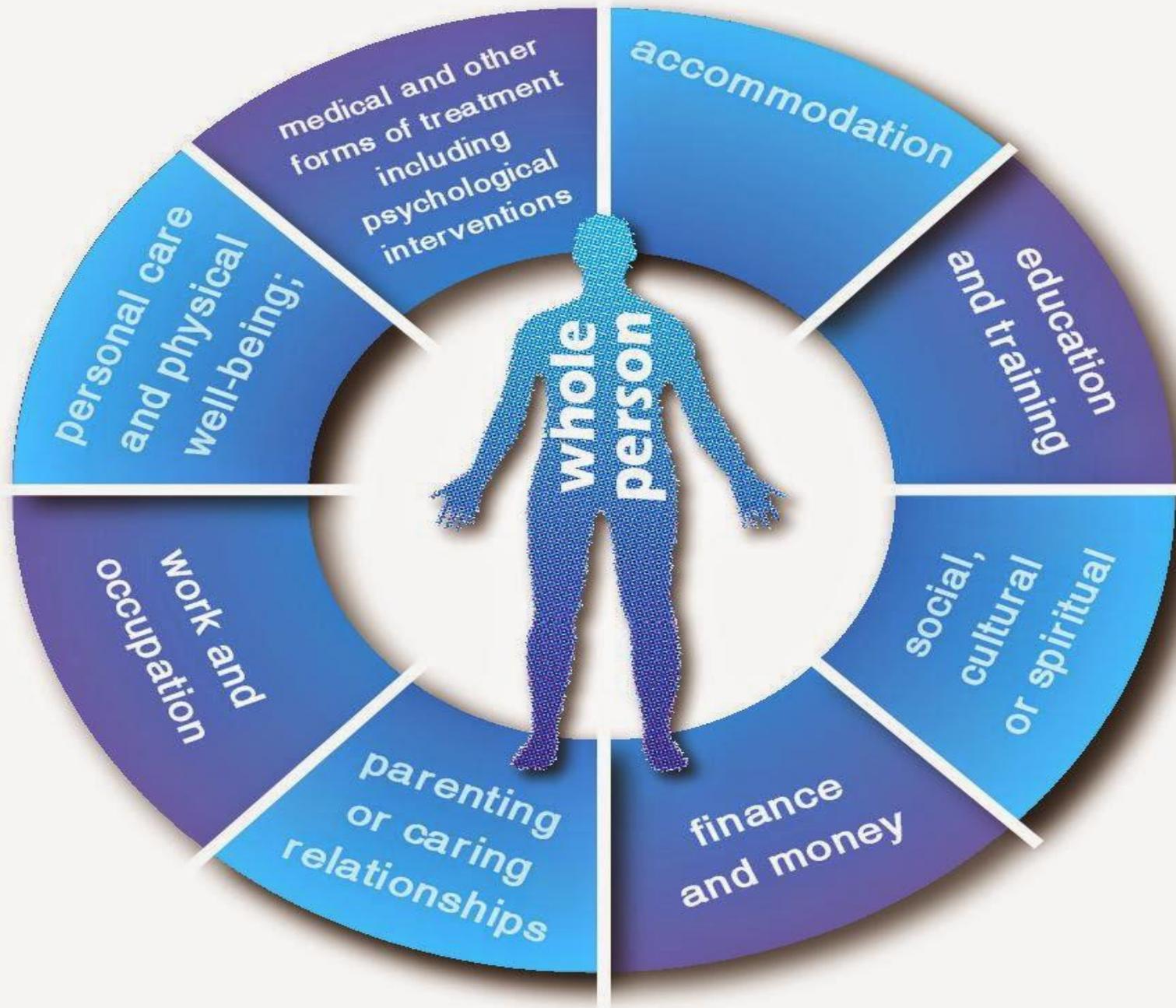
Service Delivery Approach

Unique to Across Boundaries



What is an Anti-Racism, Resisting Anti-Black Racism, Anti-Oppression Framework





"3-P" MODEL FOR AOP ORGANIZATIONAL DEVELOPMENT

CATEGORY	AREA OF INTERVENTION
POLICIES	Organizational purpose Organizational structure Organizational policy documents
PEOPLE	Organizational composition Organizational culture Organizational internal processes Organizational learning
PRACTICES	Organizational programs and services Organizational connections with local communities Organizational action in working for social change

- *Source: Barnoff, L., Abdillahi, I. & Jordan, B. Working for change: A framework for anti-oppressive organizational development in social service agencies. In S. Webhi & Parada, H. (Eds). Re-imagining anti-oppression social work: Reflecting on practice. Canadian Scholars' Press.*



AR/AOP/Resisting ABR Practices include:

- “Researchers have suggested that **open dialogues** about issues of race and ethnicity can promote an environment of trust that will ultimately **benefit the treatment process** ([Cardemil & Battle, 2003](#))”
 - (The influence of Race and Ethnicity in clients’ experience of mental health treatment <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4228688/>)
- “However, it is imperative that treatment protocols **integrate** steps to heal these hidden wounds. This does not require abandoning established treatment methods, but **incorporating effective strategies** to address racial oppression within standard operating procedures.”
- Creating Space for Race
- Validation
- Process of Naming Racial Oppression

(Healing the Hidden Wounds of Racial Trauma by Kenneth V. Hardy -

<https://static1.squarespace.com/static/545cdfcce4b0a64725b9f65a/t/54da3451e4b0ac9bd1d1cd30/1423586385564/Healing.pdf>)



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Risks & Challenges of Framework

- Resistance
- Current realities (US, Canada)
- Preference for other approaches – i.e Equity; Cultural competency
- Personalized
- Silenced
- Lack of uniformity in application
- Lack of financial and human resources
- Lack of support from leadership/changes in leadership



What can you do?

Acknowledge, Accept, and Address the existence of racism, oppression and anti-Black racism

1. Share power/resources/spaces through new and equitable models of funding
2. Collect race based data
3. Respect the leadership, knowledge, histories and the *Right* of racialized communities to:
 - Be an equal voice at service planning tables
 - Be included in monitoring and evaluation of services planned *and* funded
 - Provide healing practices and services as defined by them

Be an ally - Be a partner - Be willing to be led



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Resources

- Racial Equity Impact Assessment Guide
(<https://www.raceforward.org/practice/tools/racial-equity-impact-assessment-toolkit>)
- Health Equity Impact Assessment Tool -
<http://www.health.gov.on.ca/en/pro/programs/heia/>
- Anti-Racism Directorate
- <https://www.toronto.ca/city-government/council/2018-council-issue-notes/torontos-equity/equity-diversity-and-inclusion-within-the-city-of-toronto/>
- https://documents.ottawa.ca/sites/default/files/ei_lens_hb_en.pdf
- Mental Health Commission of Canada
https://www.mentalhealthcommission.ca/sites/default/files/2016-10/case_for_diversity_oct_2016_eng.pdf



THANK YOU!



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