

OPH RECONCILI-ACTION PLAN

GOAL: To become a culturally safe and humble organization through systematic quality improvement efforts that enable individual and collective actions that promote Indigenous health equity and reconciliation.

GUIDING FRAMEWORK: [OPH 2019-2022 Strategy](#) / [Ontario Public Health Standards](#), including [Relationship with Indigenous Communities Guideline, 2018](#)

- [UN Declaration on the Rights of Indigenous Peoples](#) / [Truth & Reconciliation Commission \(TRC\) - Final Report](#) / [What Have We Learned? Principles of Truth & Reconciliation](#) / [TRC Calls to Action](#) / Consultations with Indigenous Elders (Nov 2016; Sept 2017); ongoing feedback from First Nations, Inuit and Métis partners ([2018](#), [2019](#), [2020](#)) / [OPH Reconcili-ACTION Evaluation Framework](#); [National Inquiry on Missing and Murdered Indigenous Women & Girls](#) (MMIWG) and [MMIWG Calls for Justice](#)

TRC CALL TO ACTION Adapted for public health	OPH ACTIONS In consultation/collaboration with First Nations, Inuit and Métis Elders and partners...
<p>#14-iii - Promote respect, and First Nations, Inuit and Metis cultural continuity, through actions that facilitate the preservation, revitalization and strengthening of the diverse knowledge, languages, traditions & protocols.</p>	<ol style="list-style-type: none"> 1. Acknowledge traditional Algonquin Anishinaabe territory and honour First Nations, Inuit and Métis peoples at meetings/events (internal & external); display a land acknowledgement in Algonquin, English and French in strategic locations across the organization; <u>support activities that promote understanding of the significance of the land acknowledgement, the true history of the territory, and an awareness of the diversity of First Nations, Inuit and Métis peoples in Ottawa.</u> 2. <u>Arrange activities that facilitate the establishment and strengthening of the relationship with the Algonquin Anishinabeg Nation.</u> 3. Encourage employees to apply/promote Indigenous knowledge, languages and cultural teachings as appropriate through service delivery, social media and resource adaptation (<u>e.g. Resources for First Nations, Inuit and Métis Community Members</u>).
<p>#18 – Publicly acknowledge and raise awareness about the direct relationship between residential schools, (and other government policies), and the current state of First Nations, Inuit and Métis health.</p>	<ol style="list-style-type: none"> 1. Raise awareness about historical injustices against First Nations, Inuit and Métis peoples and the direct/indirect impacts on First Nations, Inuit and Métis health (e.g. <u>Reconcili-ACTION at OPH Communication Strategy</u>; OPH Diversity & Inclusion Plan; <u>Wellness@Work activities</u>). 2. Encourage OPH employees and Board of Health (BOH) members to be better allies to First Nations, Inuit and Métis peoples by reading the UN Declaration Rights of Indigenous Peoples, TRC report, MMIWG report (and other key reports), and by meeting regularly with Indigenous partners and Elders, in order to advocate for public health action to promote Indigenous health equity. 3. Acknowledge (and address) the root causes of Indigenous health inequities: past & present policies; ideologies of <u>anti-Indigenous</u> racism and colonization (<u>e.g. through Board of Health reports and motions; Reconcili-ACTION at OPH Communication Strategy</u>).

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<p>#19 - Establish measurable goals to identify and close the gaps in health outcomes between Indigenous and non-Indigenous communities / Publish annual progress reports and assess long-term trends.</p>	<ol style="list-style-type: none"> 1. Establish actions, targets and implementation strategies to address locally-identified First Nations, Inuit and Métis health and wellness priorities (<u>e.g. Ottawa Urban Indigenous Health Strategy; City of Ottawa Reconciliation Action Plan</u>). 2. Support the development and implementation of culturally appropriate data collection methods and analysis (e.g. OCAP principles) related to Indigenous health in Ottawa (e.g. social determinants of health data collection initiatives; <u>Indigenous-led COVID-related research</u>). 3. Continue to monitor OPH-specific First Nations, Inuit and Métis health and wellness initiatives; provide annual progress reports to the Ottawa Board of Health (<u>2017-2020</u>) and the City's <u>Aboriginal Working Committee</u>.
<p>#20 - Address the distinct health needs of First Nations, Inuit and Métis peoples living off-reserve.</p>	<ol style="list-style-type: none"> 1. Coordinate <u>regular</u> touchdowns with First Nations, Inuit and Métis Elders and partners to identify local health & wellness needs, synergies and opportunities (<u>e.g. bi-annual meetings</u>). 2. Support the ongoing efforts of the Ottawa Urban Indigenous Health Strategy Alliance (i.e. local Indigenous and non-Indigenous health partners). 3. <u>Collaborate with Indigenous partners on the collection, analysis and dissemination of Indigenous-specific evidence and wise practices.</u> 4. <u>Systematically implement</u> identified wise practices, cultural protocols, and principles of engagement to facilitate collaboration on urban Indigenous health and wellness priorities (e.g. clear roles & responsibilities; referral process). 5. <u>Consistently</u> apply an Indigenous health equity/cultural safety lens when planning, implementing and evaluating programs and services. 6. <u>Continue to support the cross-departmental OPH Reconcili-ACTION Network to facilitate the sharing of knowledge, resources and lessons learned, to ensure continuous quality improvement of OPH programs and services for First Nations, Inuit and Métis community members; enhance capacity and impact by combining efforts with Wellness@Work Committee.</u> 7. Explore opportunities to collaborate with non-health sector partners re: initiatives that address the social determinants of <u>Indigenous</u> health (<u>e.g. Community & Social Services; Housing and Education partners; Ottawa Public Library; Ottawa Police Services; Crime Prevention Ottawa</u>).
<p>#21 - Advocate for equitable, sustainable funding for existing and new Indigenous healing centres and culture-based care, to address the physical, mental, emotional and spiritual harms caused by residential schools (and other government policies).</p>	<ol style="list-style-type: none"> 1. Continue to support Indigenous partners, as requested, in their efforts to establish culturally safe health & wellness treatment and support services in Ottawa, <u>including accessible, distinctions-based healing programs and support for all children of missing and murdered Indigenous women, girls and 2SLGBTQQIA people, and their family members</u> (e.g. Akausivik Inuit Family Health Team; Minwaashin Lodge's Residential Treatment Centre for Women and Children; Tungasuvvingat Inuit's Mamisarvik Healing Centre; Wabano Centre for Aboriginal Health; Indigenous-specific Assertive Community Treatment teams). 2. <u>Identify and share funding opportunities with Indigenous partners as appropriate.</u>

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#22 - Recognize the value of Indigenous knowledge and healing practices and use them when working with Indigenous clients.	<ol style="list-style-type: none"> 1. Tailor OPH programs and services to incorporate Indigenous knowledge and the principles of trauma- and violence-informed care (i.e. when feasible and appropriate to do so). 2. Collaborate with traditional knowledge keepers, Indigenous interpreters and system navigators (i.e. when appropriate and feasible to do so). 3. Be familiar with local, culture-based programs and services and refer First Nations, Inuit and Métis clients as appropriate.
#23-i - Increase the number of Indigenous professionals working in the public health field / #92 – Ensure that Indigenous Peoples have equitable access to jobs, training and education opportunities in public health.	<ol style="list-style-type: none"> 1. Collaborate with/consult Indigenous employment services and City partners, on the review/revision of recruitment resources and initiatives to ensure culturally safe, inclusive content and support for Indigenous applicants (e.g. targeted campaigns; inclusive recruitment videos/website). 2. Engage Indigenous youth at local career fairs, and/or through Indigenous youth groups or student resource centres, to promote public health mentoring/practicum opportunities (e.g. participate in 2-3 job fair opportunities/year at local colleges/universities; proactive recruitment strategy for designated Indigenous student placements). 3. Develop and implement an evidence-informed Indigenous employment equity and inclusive training strategy at OPH (e.g. incorporate assessment tools and implementation strategies identified in the Organizational Cultural Safety Framework; align with City employment equity targets). 4. When possible, actively recruit First Nations, Inuit and Métis peoples for public health positions; ensure that supportive human resources policies are in place to facilitate mentoring opportunities for leadership roles. 5. Support City partners in their efforts to update and disseminate an Employee Engagement Survey that incorporates wise practices related to First Nations, Inuit and Métis self-identification (i.e. in consultation with Indigenous partners).
#23-iii - Provide Indigenous cultural safety training (ICST) for all health professionals.	<ol style="list-style-type: none"> 1. Continue to collaborate with/consult First Nations, Inuit and Métis and City partners on the development, implementation and evaluation of ICST, including content specific to Indigenous women, girls and 2SLGBTQIA people, and anti-Indigenous racism (e.g. online training, webinars, interactive workshops, facilitated knowledge exchanges). 2. Facilitate access to ICST for OPH employees and BOH members (e.g. through the establishment of a systematic mechanism to communicate learning opportunities; integrate ICS training measures into annual employee performance review discussions). 3. Share and promote reflection activities related to reconciliation and cultural humility for implementation at the team/program-level (e.g. activities related to power & privilege; anti-racism/discrimination; facilitated talking circles). 4. Develop a system to track ICST and evaluate impact on client services (e.g. standard question in OPH Client Satisfaction Survey).
#55 – Provide annual progress updates related to Reconcili-ACTION	<ol style="list-style-type: none"> 1. Establish annual Reconcili-ACTION performance measures based on feedback from First Nations, Inuit and Métis partners, and a systematic process whereby all OPH teams report on their progress on a quarterly basis (e.g. 2021 performance measures). 2. Provide annual progress reports to BOH, including updates on actions that address the MMIWG calls for justice.



MISSING AND MURDERED INDIGENOUS WOMEN AND GIRLS: CALLS FOR JUSTICE

ALL NEW CONTENT

“All Calls for Justice are aimed at ending genocide, tackling root causes of violence, and improving the quality of life of Indigenous women, girls and 2SLGBTQQIA people. This is the only way forward...”

Essential Principles of Change:

- A human & Indigenous rights-based approach
- A decolonizing approach
- Inclusion of families and survivors
- Self-determined and Indigenous-led solutions and services
- Recognition of distinctions (e.g. self-identification, geography, residency)
- Cultural Safety
- Trauma-Informed Approach

MMIWG CALLS FOR JUSTICE Adapted for public health	OPH ACTIONS In consultation/collaboration with First Nations, Inuit and Métis Elders and partners...
2.6	<ol style="list-style-type: none"> 1. Build public health capacity to confront/eliminate, racism, sexism, homophobia, and transphobia by providing reflective learning opportunities for OPH employees and members of the BOH (e.g. mandatory anti-racism training). 2. Collaborate with Indigenous and City partners to include anti-racism/anti-sexism actions in the Diversity & Inclusion Plan to help end racist and sexualized stereotypes of Indigenous women, girls, and 2SLGBTQQIA peoples (i.e. with actions that target public health, other City employees and the general public).
3.1 / 3.2 / 3.3 / 3.5 / 3.7	<ol style="list-style-type: none"> 1. Demonstrate a commitment to learn about and provide trauma- and violence-informed care (TVIC) as an integral part of OPH programs and services (e.g. establish a TVIC working group to review related resources; facilitate tailored TVIC learning opportunities for OPH teams/programs; invite Indigenous service providers to join sessions as appropriate). 2. Advocate for equitable and sustainable funding for Indigenous-centred, community-based health and wellness services that are holistic, accessible, distinctions-based, culturally appropriate, and meet the health and wellness needs of Indigenous women, girls, and 2SLGBTQQIA peoples, including support for First Nations, Inuit, and Métis communities to call on Elders, Grandmothers, and other Knowledge Keepers to establish TVI-programs for survivors of trauma and violence. 2. Collaborate with Indigenous and non-Indigenous health sector partners in the development of a culturally safe, Indigenous-led crisis response team in Ottawa, to meet the immediate needs of First Nations, Inuit or Métis individuals, families, and/or community after a traumatic event (murder, accident, violent event, etc.).
7.3 / 7.4 / 7.9	<ol style="list-style-type: none"> 1. Support Indigenous-led health and wellness prevention and protection initiatives related but not limited to, programming: for Indigenous men and boys; on suicide prevention strategies for youth and adults; sexual trafficking & exploitation awareness for child, youth and adults; safe and healthy relationships; mental health awareness; sex positivity and 2SLGBTQQIA issues. 2. Facilitate knowledge exchange activities with First Nations, Inuit and Métis partners and the collaborative development of culturally appropriate resources (e.g. on topics as noted above).

MMIWG CALLS FOR JUSTICE Adapted for public health	OPH ACTIONS In consultation/collaboration with First Nations, Inuit and Métis Elders and partners...
15.1 / 15.2 / 15.3 / 15.4 / 15.5 / 15.8	<ol style="list-style-type: none"> 1. Encourage OPH employees and Board of Health (BOH) members to be strong allies to First Nations, Inuit and Métis women, girls and 2SLGBTQIA peoples, by developing a better understanding of the past and present injustices experienced (e.g. read the MMIWG report; explore multimedia resources on the MMIWG website; share ally resources with colleagues, friends and family). 2. Facilitate, promote, participate and collaborate with Indigenous and City partners on learning opportunities related to MMIWG (e.g. ICST; Indigenous anti-human trafficking; anti-Indigenous racism; local language, culture, health and healing practices; Reconciliation Learning Day and other City events; OPH Grand Rounds). 3. Denounce and speak out against violence - stand up for and amplify the voices of MMIWG, survivors and their families as appropriate (e.g. promote the Moose Hide Campaign and other anti-violence initiatives; build awareness and participation at local MMIWG commemorative events and initiatives). 4. Publicly address and support actions against racism, sexism, homophobia and transphobia (e.g. BOH motion on racism; OPH webpage; social media). 5. Hold all governments accountable to act on the Calls for Justice and to implement them according to the essential principles of change as noted above.



For the 2021 evaluation of the OPH Reconcili-ACTION Plan, OPH has selected one performance measure from each of the four principles: Respect, Relationship, Reciprocity, and Reflection. These performance measures highlight some of the important work OPH is doing to promote reconciliation¹. [All teams will be expected to report on these activities on a quarterly basis.](#)

Principle	Short-Term Outcome	Link to TRC	Measures	Target Population	Data Source	Annual Target
Respect	Increased awareness and understanding of colonial history and systemic racism and its impact on Indigenous health	18	% of OPH employees and BOH members who have completed the online Indigenous Cultural Safety Training and/or training that includes a focus on anti-Indigenous racism	OPH employees and BOH members	Survey	50% of employees
Relationship	Engagement with Indigenous Elders and partners	20/22	% of OPH teams who met with Indigenous Elders and partners <ul style="list-style-type: none"> – Did your team meet with Indigenous Elders and partners when planning, implementing and/or evaluating your programs and services? Yes, No Explain the outcomes of the meeting and how your team considered an Indigenous perspective when planning, implementing and evaluating your services	Indigenous Elders & Partner	Survey	25% of teams
Reciprocity	Address the distinct health needs of Indigenous community members through shared knowledge and service delivery	20	% of OPH teams who have initiated joint planning with Indigenous organizations <ul style="list-style-type: none"> – Did your team collaborate with Indigenous partners when planning/ revising your programs and services? Yes, No Describe how your team collaborated with Indigenous partners to address the distinct health needs of First Nations, Inuit and Métis community members	OPH teams	Survey	20% of teams

¹ Over the coming years, OPH will continue to select and measure Indigenous-informed annual performance measures as part of the evaluation of the long-term goal of improving health outcomes for the First Nations, Inuit and Métis peoples in Ottawa.

Principle	Short-Term Outcome	Link to TRC	Measures	Target Population	Data Source	Annual Target
Reflection	Culturally humble employees through a commitment to lifelong learning	23iii	# of opportunities for OPH employees to share lessons learned and application of knowledge from Indigenous cultural safety learning opportunities Describe opportunities that your team had to reflect, share lessons learned and apply knowledge from Indigenous cultural safety learning opportunities (e.g. Talking Circles, internal communications, social media)	OPH employees	Survey	2 opportunities to share knowledge / team