



MUSKOKA
ALGONQUIN
HEALTHCARE

ANTI-RACISM FRAMEWORK 2026–2036

Building a More
Inclusive, **Diverse**,
Equitable, and
Anti-Racist MAHC

ABOUT THIS FRAMEWORK



A 10-year **roadmap**
to identify, address,
and eliminate
systemic racism.



Guides our **governance**,
workforce practices,
patient care, quality
improvement, and
organizational culture.



Grounded in **partnership**,
lived experience,
and evidence-informed
approaches.



Supports **accountability**,
measurable progress,
and continuous
improvement.

TOGETHER, WE ARE CREATING A MORE **INCLUSIVE**, **DIVERSE**, **EQUITABLE**, AND **ANTI-RACIST** MAHC.

Message from the Board of Directors

At Muskoka Algonquin Healthcare (MAHC), we believe that every person deserves to receive care and work in an environment that is safe, respectful, equitable, and inclusive. As a healthcare organization, we recognize that racism and discrimination continue to exist within society and healthcare systems, contributing to inequitable experiences and outcomes for many individuals and communities.

The Board of Directors is committed to ensuring that MAHC actively addresses systemic racism and promotes culturally safe care throughout our organization. This commitment is rooted in our responsibility to provide high-quality, compassionate care and to foster an environment where patients, families, staff, credentialed staff, volunteers, learners, and community partners feel valued, respected, and supported.

The Anti-Racism Framework represents a significant step in our journey toward becoming a more inclusive and equitable organization. It establishes a clear roadmap for action, accountability, and continuous improvement while aligning with Accreditation Canada requirements, Ontario Health priorities, and our organizational values.

We recognize that meaningful change requires partnership, learning, and sustained commitment. Through this framework, MAHC will continue to listen, learn, and work collaboratively with our communities to identify and remove barriers that contribute to inequity and discrimination.

Together, we can build a healthcare system that better serves all people and contributes to healthier, more inclusive communities across Muskoka and the surrounding region.

Board of Directors
Muskoka Algonquin Healthcare





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Purpose of the Framework

The MAHC Anti-Racism Framework establishes a structured and long-term approach to identifying, addressing, and eliminating systemic racism within our organization and the healthcare services we provide.

The framework has been developed in response to evolving healthcare standards, including Accreditation Canada's governance requirements related to systemic racism and Indigenous-specific systemic racism. It provides a roadmap for embedding anti-racism into governance, leadership, workforce practices, patient care, quality improvement, and organizational culture.

The framework recognizes that racism is not solely the result of individual actions or attitudes. It can also exist within policies, processes, systems, and structures that create or reinforce inequitable outcomes. Addressing these challenges requires intentional action, measurable accountability, and ongoing collaboration with the communities we serve.

The purpose of this framework is to:

- Establish a clear organizational commitment to anti-racism.
- Promote culturally safe and equitable care.
- Strengthen accountability across all levels of the organization.
- Guide decision-making, planning, and quality improvement activities.
- Support ongoing learning and continuous improvement.
- Foster meaningful partnerships with Indigenous communities and equity-deserving populations.

This framework serves as a living document that will evolve over time as MAHC continues to learn, grow, and strengthen its approach to anti-racism and health equity.



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Statement Against Racism

At Muskoka Algonquin Healthcare (MAHC), we acknowledge that racism exists within our society and within healthcare systems, and that it has caused real and lasting harm. We recognize that historical and systemic inequities—including those experienced by Indigenous, Black, racialized, 2SLGBTQIA+, and other equity-deserving communities—continue to shape health outcomes and access to care today. We accept our responsibility to understand this history and its ongoing impacts so that we can make informed and accountable decisions at individual, organizational, and system levels.

MAHC stands firmly against racism, discrimination, and all forms of oppression. Every patient, family member, staff member, credentialed staff member, volunteer, and learner deserves to be treated with dignity, compassion, and respect. Discrimination has no place within our hospitals, clinics, or workplaces.

We are committed to fostering an environment where everyone feels safe, valued, heard, and included. Equity, diversity, inclusion, and anti-racism are fundamental to delivering high-quality, person-centred care. We recognize that culturally safe and inclusive healthcare environments improve patient experiences, strengthen trust, enhance collaboration, and lead to better health outcomes.

Through education, community partnership, transparent accountability, and continuous improvement, we will work to identify and address inequities within our organization and throughout the communities we serve.

Together, we can create a healthier and more inclusive future for all.





Research show that racism contributes to:

- Delays in care seeking
- Lower trust in healthcare institutions
- Poorer maternal, chronic disease, and mental health outcomes
- Workforce burnout and underrepresentation
- Intersections between race, geography, poverty, and access

Anti-racism must be embedded in all priorities, not a standalone initiative.



We acknowledge:

- Racism exists in healthcare
- Racism is structural and systemic
- Racism impacts health outcomes

Being anti-racist requires actively challenging and changing systems.

Why Anti-Racism Matters in Rural Healthcare

Muskoka Algonquin Healthcare serves diverse rural, remote, and seasonal communities across the Muskoka region. These communities include Indigenous peoples, Francophone populations, newcomers, racialized communities, and many other individuals and groups with unique experiences and healthcare needs.

While discussions about racism and health equity are often associated with large urban centres, the impacts of racism and systemic inequities are also present within rural healthcare systems. Geographic distance, transportation barriers, workforce shortages, service availability, and limited access to culturally safe care can amplify inequities experienced by patients and families.

Research demonstrates that racism contributes to lower trust in healthcare institutions, delays in seeking care, poorer health outcomes, increased barriers to accessing services, and negative experiences within healthcare environments. These impacts are often compounded by other social determinants of health, including poverty, housing insecurity, education, language, and geography.

For healthcare organizations, anti-racism is not only a moral and ethical responsibility—it is also a quality and patient safety imperative. When individuals experience discrimination or barriers to care, health outcomes suffer. When people feel safe, respected, and included, trust grows, engagement improves, and health outcomes are strengthened.

By addressing systemic racism and inequities, MAHC aims to improve patient experiences, strengthen workforce wellbeing, and support healthier communities throughout the region.



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Our Anti-Racism Vision and Mission



Our Vision

Working collaboratively with partners, communities, patients, families, and staff, MAHC will identify and address systemic racism and inequities embedded within policies, practices, and organizational culture. We will embed anti-racism and cultural safety into governance, clinical care, leadership, quality improvement, and decision-making processes to support equitable outcomes for all.



Our Mission

To ensure that Muskoka Algonquin Healthcare is an actively anti-racist, culturally safe, equitable, and inclusive organization for patients, families, staff, credentialed staff, volunteers, learners, and community partners.



Together, our vision and mission establish the foundation for this framework and guide our ongoing commitment to building a healthcare system where everyone experiences dignity, respect, belonging, and equitable access to high-quality care.

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Understanding Anti-Racism in Ontario Healthcare

Anti-racism is the active process of identifying, challenging, preventing, and eliminating racism, policies, behaviours, and systems that create inequitable outcomes for Indigenous, Black, racialized, and other equity-deserving populations.

Anti-racism extends beyond being “not racist.” It requires deliberate and sustained action to examine and change the structures, policies, practices, and behaviours that perpetuate inequities. Within healthcare, this means recognizing how historical and contemporary systems can influence access to care, patient experiences, workforce opportunities, and health outcomes.

For Indigenous peoples, anti-racism also requires acknowledging the ongoing impacts of colonization, residential schools, systemic discrimination, and barriers that have contributed to significant health disparities. Addressing Indigenous-specific systemic racism is an essential component of reconciliation and culturally safe care.

At MAHC, anti-racism work is grounded in four key principles:



1 ADDRESSING STRUCTURAL RACISM

Reviewing policies, care pathways, and decision-making structures to remove barriers and advance equity.



2 CULTURALLY SAFE LEADERSHIP

Embedding equity in governance and executive accountability to lead with inclusion and anti-racism.



3 LISTENING TO LIVED EXPERIENCE

Meaningful Indigenous and community engagement to understand experiences and co-create better care.



4 ACTION & ACCOUNTABILITY

Setting measurable equity goals tied to quality and safety metrics and transparently reporting progress to drive improvement.

Definitions

A shared understanding of key concepts is essential to advancing anti-racism and health equity across MAHC.



Anti-Racism

Anti-racism is the active process of identifying, challenging, preventing, and eliminating racism, policies, behaviours, and systems that create inequitable outcomes for Indigenous and racialized peoples.

Healthcare Examples

- Reviewing patient outcome data to identify disparities.
- Implementing mandatory anti-racism education.
- Creating safe reporting pathways for discrimination.
- Co-designing services with Indigenous and racialized communities.



Diversity

Diversity refers to the presence, representation, and valuing of differences among people. These differences may include race, ethnicity, culture, language, gender identity, sexual orientation, age, religion, ability, socioeconomic status, lived experience, and perspectives.

Healthcare Examples

- Recruiting a workforce reflective of the communities served.
- Providing interpretation and language services.
- Ensuring diverse representation on committees and advisory groups.



Equity

Equity means providing fair and just access to opportunities, resources, care, and outcomes by recognizing that different people experience different barriers and starting points. Unlike equality, equity acknowledges that some individuals and communities require additional support to achieve comparable outcomes.

Healthcare Examples

- Transportation assistance for rural patients.
- Culturally safe prenatal care programs.
- Flexible approaches to discharge planning and appointments.



Inclusion

Inclusion is the active creation of environments where all people feel welcomed, respected, valued, safe, heard, and able to fully participate. Inclusion ensures that diversity is not only present but meaningfully supported.

Healthcare Examples

- Gender-inclusive policies and forms.
- Psychologically safe workplaces.
- Diverse patient and family engagement in service planning.

The Role of the Board of Directors

Anti-Racism & Indigenous-Specific Systemic Racism



GOVERNING BODY ACCOUNTABILITY

The Board must ensure the organization provides culturally safe, equitable, and anti-racist care across all services and operations and specifically address Indigenous-specific systemic racism in governance, policy, and service delivery.



ADDRESSING SYSTEMIC RACISM

REQUIRED ACCREDITATION ELEMENTS



Recognized
Anti-Racism
Framework



Organization-
Wide
Action Plan



Mandatory
Board
Education

CAPTURED IN FRAMEWORK GOVERNANCE EXPECTATIONS



Community partnership
and co-design



Measurable accountability
structures



Board-level education
and oversight



Policy and operational
integration



Continuous monitoring
and public learning



ADDRESSING INDIGENOUS- SPECIFIC SYSTEMIC RACISM

REQUIRED ACCREDITATION ELEMENTS



Indigenous-
Specific
Framework



Indigenous-
Specific
Action Plan



Mandatory
Indigenous
Focused
Education



Policy &
Accountability
Requirements

CAPTURED IN FRAMEWORK GOVERNANCE EXPECTATIONS



Indigenous partnership
and co-design



Distinction-based
approaches



Policy integration and
accountability



Ongoing education
and monitoring



Transparent public reporting
and shared learning



The Board provides leadership by setting direction, allocating resources, monitoring progress, and ensuring accountability for anti-racism and Indigenous-specific systemic racism across the organization.



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The Role of the MAHC IDEA Committee

The MAHC IDEA Committee plays a vital role in advancing anti-racism, inclusion, diversity, equity, and accessibility across our organization. The Committee provides strategic guidance, oversight, and collaboration to ensure that our values are reflected in our policies, practices, and culture.

IDEA stands for: **Inclusivity**, **Diversity**, **Equity**, and **Anti-Racism**.



1 ADVISE

Senior leadership on anti-racism, inclusion, diversity, equity, and accessibility priorities, barriers, and opportunities across MAHC.



2 REVIEW

progress, provide recommendations, and support implementation of the IDEA Framework, workplan, and related initiatives.



3 FOSTER

engagement with patients, families, staff, physicians, and community partners to inform and strengthen equity-focused actions.



4 PROMOTE

awareness, accountability, and continuous improvement by monitoring outcomes, reporting progress, and supporting Board and leadership decision-making.





Partnership and Community Engagement

MAHC recognizes that **meaningful anti-racism work cannot be achieved by one group or organization alone.**

The development of this framework was informed through consultation and engagement with a diverse range of internal and external partners, including:



Barrie Area Native Advisory Circle (BANAC)



MAHC IDEA Committee



MAHC Leadership Team



MAHC Senior Leadership Team



Patient and Family Advisory Committee (PFAC)



Quality Council



Indigenous communities and leadership



Public health partners



Community agencies and
social service organizations



These partnerships bring **valuable perspectives, lived experience, expertise, and accountability** to the framework.



As implementation progresses, **MAHC will continue engaging** patients, families, staff, physicians, volunteers, Indigenous communities, and community partners to **identify opportunities, monitor progress, and co-design solutions.**



Sustainable change is built **through collaboration, trust, transparency, and shared responsibility.**

By working together, we can **create a healthcare system** that is more **inclusive, culturally safe, equitable, and responsive** to the needs of all communities.



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Our 10 Stages of Building an Anti-Racism Framework

A collaborative, inclusive, and accountable approach to creating lasting change.

Building an anti-racism framework is an ongoing journey. These 10 stages provide a roadmap for meaningful action, accountability, and continuous improvement at MAHC.



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Board Oversight

The Board will monitor long-term outcomes, public reporting, community trust indicators, and organizational sustainability.



Measuring Success

Achieving meaningful change requires ongoing measurement, evaluation, and accountability. MAHC will establish a performance monitoring approach that tracks progress across governance, workforce, patient experience, community engagement, and organizational culture.

Measures will evolve as the organization advances through the maturity model and may include:



Governance

- Board education completion.
- Regular Board reporting.
- Progress against framework commitments.



Workforce

- Workforce demographic information.
- Staff engagement and belonging indicators.
- Recruitment, retention, and promotion trends.
- Participation in anti-racism education.



Patient Experience

- Patient feedback and experience data.
- Complaints and compliments related to equity and inclusion.
- Access and service utilization patterns.



Community Engagement

- Community participation in engagement activities.
- Indigenous partnership initiatives.
- Co-design project outcomes.



Quality and Safety

- Equity-informed quality improvement measures.
- Discrimination-related incident reporting.
- Identification and reduction of service inequities.



The purpose of measurement is not only to demonstrate progress but also to identify opportunities for learning, improvement, and accountability.

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Conclusion

Muskoka Algonquin Healthcare recognizes that addressing racism and advancing health equity is an ongoing journey rather than a destination.

This framework establishes a long-term commitment to identifying and addressing systemic racism, strengthening cultural safety, and creating more equitable healthcare experiences for all people who interact with our organization.

Success will require courage, accountability, humility, partnership, and continuous learning. It will require us to listen to diverse perspectives, challenge existing systems, and work collaboratively to remove barriers that contribute to inequitable outcomes.

By implementing this framework, MAHC commits to building a healthcare system where every patient, family member, staff member, credentialed staff member, volunteer, learner, and community partner feels respected, valued, safe, and included.

Together, we can create a healthier, more equitable future and strengthen the wellbeing of the communities we serve.





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