

Inclusive Organizations

A Tool for Continuous Improvement in
Health and Social Service Agencies



An Integrated Organizational Approach to Diversity – Towards Full Inclusion of Ethno-Cultural Communities in Health and Social Service Agencies
Developed by Immigrant Women's Association of Manitoba Inc. with funding support from Canadian Heritage

Purpose of the Tool and How It Came About

This tool presents some ideas to assist health and social service agencies and organizations to meet their inclusion and equity goals with respect to Manitoba's increasingly diverse ethno-cultural and ethno-racial population.

In the development of the tool, the complexity of what is involved in organizational adaptation to an increasingly diverse ethno-cultural and ethno-racial population was brought to the forefront.

The tool suggests principles and promising practices that are consistent with the values of social equity, social justice and democracy. Promising practices are not a program, but a range of practices, processes and actions that while not proven, are demonstrating promising results.

The tool is based primarily on the findings of a 2002 literature review¹ that was carried out by the Immigrant Women's Association of Manitoba (IWAM) in partnership with the IWAM Network. The IWAM Network is a group of health and social service agencies, including government agencies.

Service barriers will only be eliminated when organizations are fully inclusive.

Building on the partnership model of the literature review, an inclusive participatory approach was used in the development of the tool. Following a June 11, 2005 Workshop attended by 65 people from health and social service agencies, federal, provincial and municipal government departments and ethno-cultural communities, several people came together in eight small sessions to draft the tool. New ideas that emerged from the discussions were incorporated into this work.

The literature review and this follow-up work originated from a barrier analysis conducted by IWAM which showed that immigrant women face multiple barriers in accessing health and social services. Based on the findings of the literature review that service barriers will be eliminated only when organizations are fully inclusive, the tool focuses on organizational development and change to integrate diversity at all levels of an organization.

¹Kaloo, Maureen and Paula Migliardi, (2002) *Laying the Groundwork for An Organizational Assessment Tool for Diversity Accountability*, Winnipeg: Immigrant Women's Association of Manitoba.



Acknowledgements

On behalf of the Immigrant Women's Association of Manitoba Inc. (IWAM), I would like to thank the many agency and organizational representatives and members from ethno-cultural communities who participated in the development of this tool.

Network members, June 11, 2005 Workshop participants and those who came together in working sessions following the Workshop all contributed to this work. We appreciate those who continued past the workshop, offering their talents and perspectives in the development of the tool.

Network members, comprised of members of community organizations, have been with us throughout the process. Some members started with us following the 1999 barrier analysis.² They provided support to go forward with this work. Other members joined the Network during the subsequent literature review.³ The Network continued to provide support throughout the development of the tool.

We thank the Status of Women Canada for setting us on this path with funding for the Barrier Analysis. We also thank the Multiculturalism Program, Canadian Heritage, for their encouragement and funding support for the literature review and for this follow-up work.

Thanks are extended to IWAM Board members who courageously accepted the challenge and moved forward with this work.

And to Maureen Kalloo and Paula Migliardi, project co-facilitators, who provided leadership and compiled the information from the literature review and discussions from the Network, the Workshop and the tool development working group, our sincere thanks.



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²Hakim, C and G. Angom (1999). *An Analysis of Barriers Facing Immigrant Women and their Families in Accessing Health and Social Services*, Winnipeg: Immigrant Women's Association of Manitoba.

³Kaloo, Maureen and Paula Migliardi, (2002), *Laying the Groundwork for an Organizational Assessment Tool for Diversity Accountability – Literature Review*, Winnipeg: Immigrant Women's Association of Manitoba Inc.



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Use of the Tool

This tool provides a range of promising practices that health and social service agencies may find useful in their efforts to meet the needs of an increasingly culturally and racially diverse population in Manitoba.

The material is organized to show promising practices for different aspects of the organization, e.g., Planning for Continuous Improvement, Governance, Policies, Workers and Volunteers, Provision of Culturally and Socially Responsive Services and Programs and Building on Successes. The material is intended to encourage and support organizations to build on diversity work they have been doing, or to get a start.

There are no prescribed ways of moving on the path to inclusion. Some organizations have started activities in one or more areas and may want to use their successes as steps to build in other areas. Organizations that have not yet initiated activities may want to assess what is in place in their organizations that fit with some of the promising practices. Small organizations may choose to develop a comprehensive plan and implement several activities at the same time. Large organizations may find it useful to work on identified areas in a specific department first to test out their plans before introducing new ideas or changes to the whole organization. Organizations may have other ideas on how to continue their progress towards inclusion or to get started. However organizations decide to work towards full inclusion of women and men, boys and girls from ethno-cultural, ethno-racial, religious and linguistic communities, we hope the material will be useful.

It was not within the expertise of the project coordinators or of the participating organizations to provide “how-to” in areas that require specific skill training, e.g., how to identify and remove biases in policies and in recruitment and hiring procedures, how to develop “cultural humility” and cultural competency, how to resolve conflict situations that arise from cultural differences. Many organizations are seeking supports for this type of training from experts in the training field. At an April 6, 2006 meeting of IWAM members, the IWAM Network and community stakeholders, recommendations were brought forward of the need for hands-on education and training for agencies and organizations in the health and social service system. Several models were presented. The models all contain variations

of a coordinated structure that would bring agencies together for training and the development of resources that could be used as templates for their own organizations. A partnership of community and governmental funding sources was seen as a means of support. These ideas will be brought forward to IWAM's board and to the IWAM Network for follow-through.

In the meantime, agencies and organizations are encouraged to start using ideas offered in this tool.

The tool is based on an integrated organizational approach to diversity. This approach recognizes the interrelatedness of parts of an organization and the more successful outcomes that can occur when all parts of the organization are inclusive.

Concepts of diversity, equity and anti-racism on which the tool has been developed are discussed. Within these concepts, gender considerations are discussed as a key element.

Information is provided on key issues that arise in undertaking organizational development and change, such as resistance to change and benefits of change.

In some instances, questions that individuals in organizations need to address are posed. For example, in Part III, Planning for Continuous Improvement, there are questions that leaders, champions, workers and volunteers and unions could ask themselves to check their readiness to move forward with improvements or changes. In other instances, exercises are provided. For example, in Part IV, On Becoming Culturally Responsive, there are some true-and-false statements that workers and volunteers can use to test their understanding of diversity and culture, thereby becoming more empowered to participate in developmental and change processes.

There are many more features in the tool that we hope organizations find exciting and useful. Some of these features may be known, some of them may be new. The importance of the tool is that it brings together a comprehensive package for use in organizational planning. Individual workers and volunteers may find it a useful reference in their everyday or volunteer work.

Glossary

Access – Programs and services delivered in a way that allows for equitable outcomes.

– Geographic and physical aspects of a service (accessibility) and dimensions of accommodation, affordability and acceptability.

– The removal of structural barriers to full organizational participation.

Culture – Shared values, beliefs, learned behaviours, practices and ways of life among a group of people.

– Complex and dynamic, comprised of the shared solutions to problems faced by the group.

– **Organizational Culture** - The way we act towards one another in our work environment, the manner in which we deliver services and the outcomes of these actions. These are based on shared values, beliefs, learned behaviours and practices.

Cultural Competency – Usually used in the context of service delivery to mean having the knowledge, skills, and approaches required to provide effective services to people from different ethno-cultural communities.

– In the context of other agency operations, means having the knowledge, skills and sensitivity to interact effectively with people from different ethno-cultural communities, recognizing that diversity exists within ethno-cultural communities.

– “A set of congruent behaviours, attitudes and policies that come together

in a system, agency or amongst professionals and enables that system, agency, or those professionals to work effectively in cross-cultural situations.” (Cross et al, 1989: iv, cited in Bowen, 2004:16).⁴

– An alternative to cultural competency is **Cultural Safety**, a concept that has emerged from Maori nursing in New-Zealand. It reflects an anti-racist approach. It recognizes the position of certain groups within a society, and focuses on how these groups are perceived and treated rather than the different things their members think or do. It provides the power to community members to indicate how safe they feel in their interaction with service providers. Culturally safe practices “recognize, respect and nurture”, and are defined by those who receive the service. In contrast, cultural competence is defined by those who provide it (Polaschek, 1998, cited in Bowen, 2004:43).⁵

– **Cultural Humility** - An approach aimed at redressing power imbalances in the patient-physician dynamic and developing partnerships with communities and a commitment to ongoing self-reflection and self-critique – has been suggested as a more appropriate goal than cultural competence (Tervalon and Murray-Garcia, 1998).⁶

Cultural Responsiveness

– Refers to the ability of individuals and systems to respond respectfully and equitably with people of all cultures, races, ethnic backgrounds, sexual orientations and faiths or religions in a manner that recognizes, affirms and values the worth of individuals, families, tribes and communities and protects the dignity of each.⁷

⁴Bowen, Sarah (2004) *Assessing the responsiveness of health care organizations to culturally diverse groups*. PH.D. Thesis, University of Manitoba

⁵Bowen, Sarah, id.

⁶Tervalon, M. & Murray-Garcia, J. (1998). “Cultural humility versus cultural competence: a critical discussion in defining physician training outcomes in multicultural education.” *Journal of Health Care for the Poor and Underserved*, 9 (2) 117-125.

⁷Bowen, Sarah, id.

– Used by Bowen (2004)⁸ to include both access and cultural competency with respect to the provision of appropriate and effective care for culturally diverse populations.

– A strategy for achieving a desired outcome (at the consumer level or at the level of the system).

Discrimination

– Differential treatment of an individual or group which disallows benefits, imposes disadvantages and limits access based on real or perceived personal or group characteristics.

– Treatment based on prejudicial or stereotypical assumptions of a person or group of people.

Diversity

– Refers to the variety of differences among people. Diversity includes many things, such as ethnicity, race, cultural traditions, religious expressions, age, gender, socio-economic status, geography, mental or physical ability and sexual orientation.

Equity

– Refers to practices designed to achieve equitable outcomes for all people at all levels of the organization and system through culturally responsive structures and methods.

– **Gender Equity** - Refers to the process of being fair to women and men. Often, gender equity means to compensate for disadvantages experienced by women.

Inclusion

– Refers to organizational norms and practices that promote an environment where diversity is of high value and people are safe, respected and non-discriminated to participate fully in all aspects of the organization.

⁸Bowen, Sarah, id.

Promising Practices – Often referred to as “best practices”: a range of practices, processes and actions that while not proven, are demonstrating promising results. These practices are consistent with the values of social equity, social justice and democracy.

Workforce Diversification – Refers to the creation of an environment that allows access to the talents of a variety of diverse cultural groups by removing barriers to organizational participation. It is not about proportional hiring; however, the implementation of a workforce diversification plan will result in increased representation of minority groups.

Part 1

A Framework for Working with a Diverse Ethno-Cultural Population

System Response to the Changing Demographic Make-Up of Manitoba's Population

Health and social service agencies and organizations make a vital contribution to the quality of life in Canada.

Health and social service agencies and organizations make a vital contribution to the quality of life in Canada. Their work is guided by their central values: to contribute to the improvement of the quality of life of individuals, families and communities, to be inclusive of all people and to work for social equity and social justice.

Changing demographic realities have brought about changes in the way the health and social service system in Manitoba is organized.

The system now includes:

- ♦ Settlement and immigrant-serving agencies which work with recent immigrants and/or refugees. These agencies have experience of the needs of new immigrants and refugees and are specialized in settlement-related issues, e.g., NEEDS Centre for War-Affected Families, Welcome Place, the International Centre of Winnipeg, Immigrant and Refugee Community Organization of Manitoba (IRCOM).

2 ◆ Inclusive Organizations

- ◆ Ethno-specific agencies which provide programs, services and supports to particular ethnic, religious and/or linguistic communities. These organizations are in touch with the needs of their constituents. They have the knowledge and skills to provide culturally responsive services, e.g., Islamic Social Services.
- ◆ Specialized units in mainstream agencies or organizations which provide culturally responsive programs and services to immigrants and refugees, such as the Immigrant Women's Counselling Services that operates under Nor-West Community Health Clinic and the Multicultural Wellness Program of Mount Carmel Clinic.
- ◆ Mainstream agencies or organizations which provide programs and services to meet particular community needs, such as the Society for Manitobans with Disabilities (SMD) and the Sexuality Education Resource Centre (SERC). They operate on the principle that their services are available to all people. The degree to which these organizations have built-in mechanisms to enable access by cultural, racial, religious and linguistic minorities vary.

Approaches used include:

- Being inclusive in their hiring practices.
- Matching staff and clients/patients/consumers of similar cultural backgrounds and/or language where preferred (usually referred to as ethnic matching).
- Cultural sensitivity training for staff and volunteers.
- Outreach to ethno-cultural communities to learn of their issues and solutions.
- Support to ethno-cultural and ethno-racial minority communities which provide support to their community members through community development approaches.
- Involvement of cultural, racial, religious and linguistic minorities on committees and boards.

An Integrated Organizational Approach to Diversity

As the population becomes increasingly culturally and racially diverse, health and social service agencies and organizations are searching for ways to respond to the service needs of a changing population. This tool presents some “promising practices” towards that end.

The tool has been developed on an integrated organizational approach to diversity and inclusion. It brings together concepts of diversity, equity, anti-racism and gender considerations into an Integrated Organizational Approach. The approach recognizes that changing demographics call for organizational change and that successful organizational change requires:

- ◆ An understanding of diversity, the removal of structural inequities based on power, privilege and oppression and systems that deliver equitable outcomes for all, regardless of race, ethnicity, religion, gender identity, ability/disability or economic status.
- ◆ Integration of equity goals into all aspects of the organization’s operations.

The approach also recognizes that:

- ◆ Inclusive structures, programs, policies and practices facilitate full civic participation and successful integration of ethno-cultural, racial, religious and linguistic minorities in communities and in community organizations.

An integrated organizational approach to continuous improvement that combines concepts of diversity, equity and anti-racism support these goals. Gender considerations are significant to facilitate equitable outcomes for women and girls, men and boys.

A culturally responsive organization integrates diversity and equity goals into all aspects of its operations.

Gender considerations accept that women and men are not all the same. Just as we recognize differences based on age, education, socio-economic status, ability/disability and sexual orientation within and among ethno-cultural communities, we also need to recognize gender sameness and differences.

An integrated organizational approach applies these principles to all parts of the organization. It recognizes the interrelationship of the different parts of the organization to one another, and to the whole. To become truly accessible and inclusive, the whole organizational culture must be culturally responsive.

A culturally responsive organization integrates diversity and equity goals into all aspects of its operations. This includes organizational mission, goals and objectives, policies and procedures, recruitment of staff and volunteers, service and program design, indicators of organizational success and public accountability. Partnerships with ethno-cultural communities in organizational planning, service and program design, the development of policies and procedures and evaluation are an important process towards equity and inclusion.

To become truly accessible and inclusive, the whole organizational culture must be culturally responsive.

Key Concepts

An Organizational Approach

- Recognizes that support from the “top” is key to continuous organizational development.
- Takes into account, at all levels of planning, policy and practice, the diversity that exists within the population and important issues that affect people’s health and well-being. These issues include: access to economic and health security, access to employment and education, social and physical environments, community supports for people living in impoverished conditions, social support networks, cultural values and beliefs, and gender implications.
- Makes diversity management and equity goals with respect to ethno-cultural, ethno-racial, religious and linguistic minorities an essential part of agency planning and integrates these goals into all aspects of the agency’s operations.
- Is proactive as opposed to reactive by moving the emphasis of organizational change away from the individual to the agency level.
- Uses a planned and continuous approach to developing diversity and equity goals and standards.
- Engages staff and volunteers at the outset, addressing the benefits of an inclusive organization and any resistance to change that might arise.
- Develops working partnerships with ethno-cultural communities and engages their full participation in the planning, implementation, monitoring and evaluation processes.
- Commits to organizational transparency.

- Has open systems of communication.
- Develops and implements systems of accountability to users of service, communities and the general public.
- Addresses issues of equity and coordinates efforts with other organizations within the system.

Diversity – Differences in people based on the interface of factors that make up our identities. These factors include values, ethnicity, cultural beliefs, health beliefs and practices, geography, sexuality, ability/disability, socio-economic status, religion, gender, sexual orientation, political and other life experiences. Some of these factors, such as cultural beliefs, socio-economic status and religion may change during a person's life-span.

Equity – Working to achieve equitable outcomes for all people at all levels of the organization and system through culturally responsive structures and methods. For example, this may mean provision of trained interpreters in some situations to facilitate clients/patients/consumers to speak for themselves (a client-centred approach), e.g., in the delivery of health care, in the courts with issues of domestic violence. With hiring practices, it may mean leveling the playing field by wording ads and interview questions in simple, unbiased language, using advertising and outreach approaches that reach ethno-cultural communities.

Anti-Racism – Identifying issues of power, privilege and oppression among various groups and taking measures to remove discriminatory practices that create inequities.

– Developing and facilitating strategies to improve systems, structures, policies and practices that will result in open access and equitable outcomes for all people.

Gender Considerations

- Putting in place structures that allow for the full participation of all citizens, regardless of race, age, colour, class, sexual orientation, gender and so on in the institutions in our society.
- Opening up access to services through culturally responsive structures and methods.
- Acknowledging and respecting that gender identity is an aspect of the diversity factors and that gender identity is the way whereby people identify their gender.
- Recognizing that the position of women and men, girls and boys within their culture is part of their cultural/gender identity and the implications of these for equitable outcomes.
- Recognizing that treating women and men, girls and boys the same does not ensure equal outcomes because women and men, girls and boys do not experience the same cultural, social and economic conditions.
- Recognizing cultural and other differences between women and men, girls and boys from mainstream society and diverse ethno-cultural communities, as well as among and within ethno-cultural communities.
- Understanding that gender-neutral policies, programs and services may not be adequate because they are based on the theory that all people are already equal.
- Recognizing the need to integrate gender considerations into all aspects of the agency's or organization's structure, policies, processes and programs and to apply a cross-cultural lens to these considerations.

For example, asking questions such as:

- ✓ Does this policy have negative impacts on women and girls, men and boys? How? Why? Does the same hold true for women and girls, men and boys from diverse ethno-cultural communities?
- ✓ Does the way this service is structured and delivered increase or decrease disparities between women and girls, men and boys? What is causing this outcome? Does the same hold true for women and girls, men and boys from diverse ethno-cultural communities?
- ✓ Are there other possible unintended outcomes?
- ✓ Have we disaggregated trend data by gender and ethno-cultural communities to identify similarities and differences in outcomes, explore reasons for these outcomes and develop strategies (structures, processes, policies and programs) to reduce disparities, e.g., in health outcomes?

Part II

A Snapshot of the Ethno-Cultural Make-Up of Manitoba

Overall Trend Canada

Throughout Canadian history, immigration has been an essential element in the social and economic growth of the nation.

Current demographic realities underline the importance of immigration to Canada's future social and economic growth.

Canada is a cultural mosaic of people from many different racial, ethnic, cultural and religious backgrounds. Within this mosaic, Aboriginal peoples, with their own diverse cultures and languages, are recognized as the original inhabitants.

Over the past century Canada welcomed more than 13.4 million immigrants. Between 1991 and 2000 alone, 2.2 million immigrants were admitted to Canada, the highest number for any decade in the past century.¹

The 2001 Census showed that 18.4% of the population was born outside Canada, the highest proportion in 70 years.

Twenty five years ago natural increase, that is, the difference between births and deaths, represented the majority of population growth in Canada. Now immigration accounts for an estimated 67% of population growth.² If Canada continues to experience limited growth due to natural increase,

¹Statistics Canada (2003) 2001 Census Analysis Series – *Canada's Ethno-cultural Portrait: The Changing Mosaic*.
Ottawa: Statistics Canada

²Statistics Canada CANSIM table 051-0004.

immigration will remain an important factor in Canada's population growth.

Immigration patterns since the 1960s show that immigrants and refugees now come from a wide variety of countries. Canada's population is much more racially and culturally diverse today than it was prior to the 1960s. Today, Canada is one of the most ethnically and culturally diverse nations in the world.³

Between 1961 and 1980, visible minorities accounted for 37.2% of all immigrants to Canada. Since 1981, visible minorities have comprised 70.5% of all immigrants.

Canada's population is thereby changing and aging and becoming more diverse.

**Overall Trend
Manitoba**

It is estimated that 62% of the population growth in Manitoba between 2004 and 2005 has resulted from immigration.

Data from the 1991 and 2001 census showed that Winnipeg was the destination of almost 79% of all immigrants to Manitoba.

In 2004, 7,427 immigrants made Manitoba their home. Approximately 79% of these immigrants located in Winnipeg.

In 2004, approximately 17% of the immigrants to Manitoba were considered refugees, having immigrated under the refugee class or having made a refugee claim. The number of refugees to Manitoba began to increase around 1999 with the average between 2002-2004 being 1,156.⁴

³Statistics Canada (2003), *id.*

⁴Immigration and Multiculturalism Division (2005) *Manitoba Immigration Facts 2004 Statistical Report*. Manitoba: Manitoba Labour and Immigration.

Top Ten Source Countries of Immigration to Manitoba

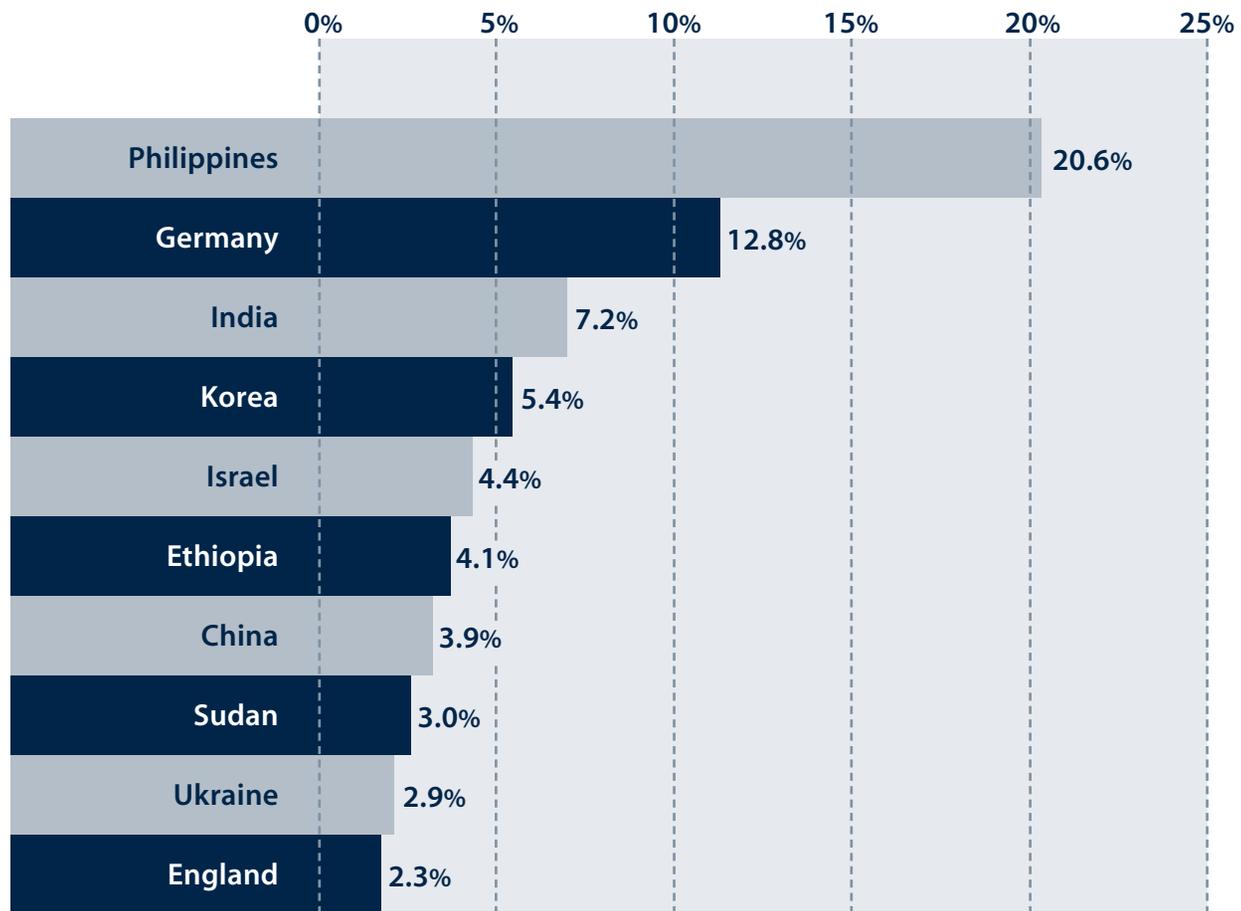
- ◆ In the last few years, the Philippines, Germany, India, Korea, Ethiopia and China have consistently been among the main source country of immigration to Manitoba.
- ◆ Table I shows, the top ten source countries of immigration in 2002, 2003 and 2004.
- ◆ Chart I shows the top ten source countries of immigration to Manitoba for 2004.

Table 1 – Manitoba Immigration by Source Country (Top Ten), 2002, 2003 & 2004⁵

Source Country	2002	% of total 2002	Source Country	2003	% of total 2003	Source Country	2004	% of total 2004
Total Immigration	4,621	100.0%	Total Immigration	6,492	100.0%	Total Immigration	7,427	100.0%
Philippines	764	16.5%	Philippines	1,200	18.5%	Philippines	1,529	20.6%
Germany	440	9.5%	Germany	862	13.3%	Germany	952	12.8%
India	319	6.9%	India	360	5.5%	India	536	7.2%
Korea	251	5.4%	Ethiopia	362	5.6%	Korea	398	5.4%
China	205	4.4%	Korea	312	4.8%	Israel	329	4.4%
Ukraine	167	3.6%	China	296	4.6%	Ethiopia	305	4.1%
Afghanistan	164	3.5%	Argentina	266	4.1%	China	290	3.9%
Ethiopia	123	2.7%	Sudan	230	3.5%	Sudan	225	3.0%
Vietnam	108	2.3%	England	175	2.7%	Ukraine	213	2.9%
United States	107	2.3%	United States	141	2.2%	England	170	2.3%

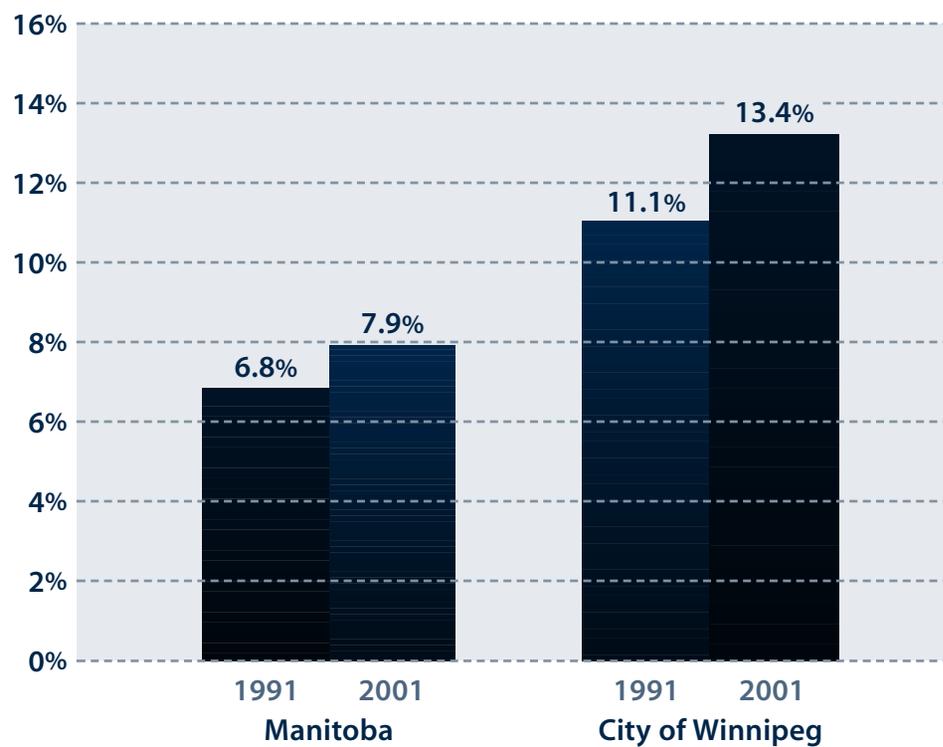
⁵Immigration and Multiculturalism Division (2005), *id.*

Chart I – Manitoba Immigration by Source Countries (Top Ten), 2004



**Increase in
Visible Minority
Population**

- ◆ In the period 1991 – 2001, there has been an increase of visible minority population in Manitoba and Winnipeg.
- ◆ In 1991 total visible minority population for Manitoba was 74,335. In 2001 it was 87,110, indicating a 7.9% increase.
- ◆ In 1991 total visible minority population for Winnipeg was 68,235. In 2001 it was 81,925, indicating a 13.4% increase.
- ◆ Chart II shows the visible minority population for Manitoba and Winnipeg in 1991 and 2001 as a percentage of the total population.

Chart II – Visible Minority Population as % of Total Population for Manitoba and Winnipeg

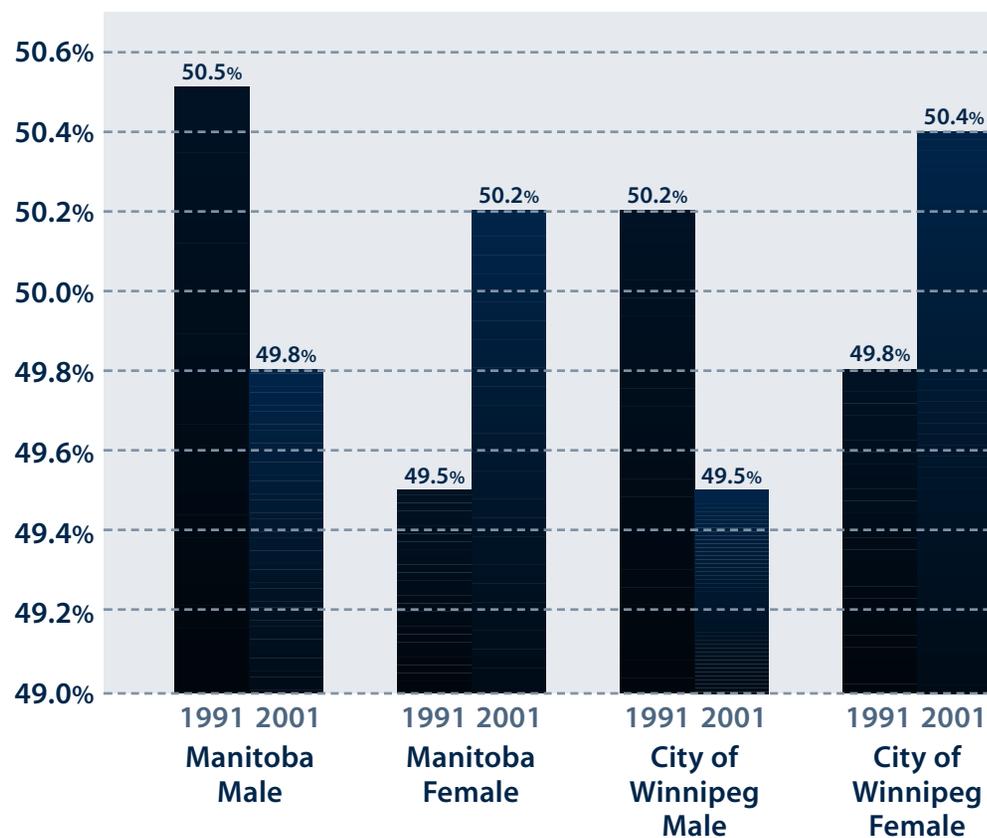
**Gender and
Age Structure**

- ♦ In line with the overall Canadian trend, the gender composition of immigrants entering Canada has changed over time. In 2001, immigrant women made up 51.8% of the immigrant population in Canada. Fifty years earlier, males comprised the majority of the immigrant population.
- ♦ Among new immigrants to Manitoba over the period 2002 to 2004, approximately half, 49% were females.
- ♦ Given the nature and dynamics of migration, the majority of the immigrant population are between 25 – 64 years of age. In 2001, more than 65% of immigrants in Winnipeg were 25 to 64 years of age compared with 54% of the total population.
- ♦ About half of new immigrants to Manitoba over the period 2002 to 2004 were between the ages of 25 and 49. Of the rest of newcomers over the same period, about 45% were under the age of 24.
- ♦ Since 1981, visible minorities have comprised 69.7% of all immigrants to Winnipeg.
- ♦ Winnipeg's 41,640 visible minority females comprised 50.4% of the visible minority population in 2001. 78% of all visible minority women in Winnipeg 15 years of age and over are immigrants.

Visible Minority Population by Gender

- ♦ As a result of differences in mortality, women tend to outnumber men among the overall population. Differences in gender composition of the population become more pronounced as the population ages. Over the past decade, however, male survival rates among seniors have begun to narrow the gap.
- ♦ Chart III shows the visible minority population by gender as a percentage of the total population.

Chart III – Visible Minority Population by Gender as % of Total Population for Manitoba and Winnipeg



Education ◆ Educational attainment is an important criterion in admission to Canada. Consequently, male and female immigrants are often more likely than the Canadian-born population to have a post-secondary education. Many immigrants also continue educational pursuits upon arrival in Canada.

Employment ◆ It is estimated that in Canada in 2017, for every 100 visible minority persons old enough to leave the labour force (the 55-64 age group), there would be 142 old enough to join the labour force (the 15-24 age group). In other words, for 1 visible minority person leaving there will be 1.5 visible minority persons ready to enter the labour force. In the rest of the population, there would be only 75 potential entries for every 100 potential exits.⁶

◆ Immigrant and visible minority men and women in Winnipeg often experience higher unemployment rates than Canadian-born citizens and are often employed in moderate or low-skilled occupations despite comparable educational attainment levels. For immigrants, participation in the paid labour force is an important part of the resettlement process.

◆ Immigrant women are more likely than Canadian-born women and immigrant men to be unemployed.⁷

◆ Immigrant women earn 74.3% of immigrant men's average employment income.⁸

⁶Bélanger, A. and Caron Malenfant, E. (2005) *Population Projections of Visible Minority Groups, Canada, Provinces and Regions*. Ottawa: Statistics Canada.
Accessed at <http://www.statcan.ca/english/freepub/91-541-XIE/91-541-XIE2005001.pdf>

⁷Tastsoglou, E. and Preston, V. (2006). *Gender, immigration and labour market integration: where we are and what we still need to know*, Policy Matters, 25.

⁸Tastsoglou, E. and Preston, V. id.

Visible Minorities Are More Likely to Experience Discrimination

- ◆ People in a visible minority group report experiencing discrimination or unfair treatment because of their ethnicity, culture, race, skin colour, language, accent or religion four times more often than those in the overall population. In the Ethnic Diversity Survey conducted in 2002, 20% of visible minority people aged 15 and over said they had experienced discrimination or unfair treatment sometimes or often in the previous five years because of one of these factors. This compared with 5% of their non-visible minority counterparts. At the same time, 64% of visible minorities said they had not experienced any discrimination or unfair treatment, while 15% reported they had rarely been discriminated against.
- ◆ Blacks experience discrimination more often than other visible minority groups. In 2002, 32% of Blacks said they had experienced some discrimination or unfair treatment in the previous five years, while the figures were 21% among South Asians and 18% among Chinese people. Another 17% of Blacks, 15% of Chinese and 13% of South Asians reported that these experiences had occurred only rarely.
- ◆ The workplace is the most common locale for discrimination or unfair treatment to occur.

Health of Immigrants and Refugees

- ◆ Relative to non-immigrants, immigrants, especially those recently arrived, are usually healthier. The health of immigrants tends to diminish over time.^{9,10}

⁹Pérez, Claudio (2002) "Health Status and Health Behaviour among Immigrants", *Supplement to Health Reports*, Vol. 13. Ottawa: Statistics Canada.

¹⁰Hyman, Ilene (2001) *Immigration and Health*, Ottawa: Health Canada. http://www.hc-sc.gc.ca/sr-sr/alt_formats/iacb-dgiac/pdf/pubs/hpr-rps/wp-dt/2001-0105-immigration/2001-0105-immigration_e.pdf

- ◆ Changes in health status are attributed in part to the adoption of new health behaviours.¹¹
- ◆ Refugees are at an increased risk of experiencing health problems, particularly related to mental health.¹² Other health concerns are certain communicable diseases such as tuberculosis, hepatitis B and C, and HIV/AIDS.^{13,14,15}
- ◆ Some studies suggest that factors such as underemployment and the lack of recognition of foreign credentials may have a strong impact on health, predominantly for immigrant women.^{16,17}
- ◆ Studies show underutilization of preventive health services and mental health services among immigrants.¹⁸

Reported Barriers that Immigrant Women Face in Accessing Health and Social Services in Winnipeg

- ◆ In a report done in 1999 on behalf of IWAM, Hakim and Angom¹⁹ identified multiple barriers faced by immigrant women in accessing health and social services. These included language barriers, fear of the system, lack of information about services, isolation, real or perceived discriminatory behaviours, cost factors, personal issues, cultural differences and lack of relevant services. Similar barriers were described in a recent study by the Winnipeg Regional Health Authority on refugee health in Winnipeg.²⁰ These are further addressed in Part VIII of this tool under Provision of Culturally and Socially Responsive Services and Programs.

¹¹Pérez, Claudio, *id.*

¹²Hyman, Ilene, *id.*

¹³Winnipeg Regional Health Authority (2004) *Population Health Profiles: Immigrants*, Winnipeg: WRHA.

¹⁴Pérez, Claudio, *id.*

¹⁵Magoon, Jennifer (2005) *The Health of Refugees in Winnipeg*, Winnipeg: WRHA

¹⁶Hyman, Ilene, *id.*

¹⁷Magoon, Jennifer, *id.*

¹⁸Hyman, Ilene, *id.*

¹⁹Hakim and Angom, *id.*

²⁰Magoon, Jennifer, *id.*

Part III

Planning for Continuous Improvement

The organization that continues on the path towards full inclusion of diverse ethno-cultural, racial, religious and linguistic communities in all aspects of its operations will be, and will be seen to be, responsive to cultural and racial minorities.

As organizations become more fully inclusive, the health and social service system also becomes more inclusive.

Emphasis on overall synergy where all parts of the organization are involved in developing and implementing diversity objectives will have greater results.

As leaders in their organizations, executive directors (ED), the chief executive officer (CEO), the board chair and/or president and committee chairs and managers have a primary responsibility for ensuring the health and well-being of the organization. They are expected to lead through commitment, action, mirroring expected behaviours and support to workers and volunteers. Support includes encouragement, time off for training and financial resources. In organizations that are unionized, they carry the responsibility for bringing the union on board.

Other people in organizations who are committed to inclusive practices can play a key role in bringing about change. These people are known as “champions.” Champions are more likely to promote organizational change when the organizational culture is open and cooperative than when it is not.

Leaders, management, unions, workers and volunteers who understand the

benefits of an inclusive organization are more likely to support organizational change efforts than those who do not.

Resistance to change in one or more areas of the organization or by one or more persons can stifle organizational progress.

When there is resistance, organizational leaders and managers need to create an organizational climate that minimizes resistant behaviour and encourages acceptance and support. Understanding the benefits of an inclusive organization will help to break down resistance.

When resistance is addressed and people in organizations embrace change, they become creative about what changes need to be made and how to go about making these changes.

To change anything requires the cooperation and consent of individuals and groups that make up the workforce and volunteer base of the organization.

Emphasis on overall synergy where all parts of the organization are involved in developing and implementing diversity objectives will have greater results. To change anything requires the cooperation and consent of individuals and groups that make up the workforce and volunteer base of the organization.

Promising Practices – Organizational Commitment

Leadership at the top

- Who?**
- ◆ The executive director, the chief executive officer, the board chair and/or president, committee chairs
 - ◆ In large organizations, where there are several divisions or departments, managers or supervisors of the different departments.
 - ◆ In unionized settings, the union representative(s).

**Some Questions
that Organizational
Leaders Need to
Address**

- ◆ Is our organization ready to move forward? Am I ready? Do I understand the need for change? Do I understand the benefits?
- ◆ Are we knowledgeable of the changing demographic trends, of race and gender issues and the implications for the organization?
- ◆ Who are the champions i.e., people in the organization who will promote the benefits of diversity within the organization, dispel myths and stereotypes and undertake to work on special projects?
- ◆ Are these champions encouraged and supported to promote diversity within the organization?
- ◆ Are champions and other supporters provided with necessary resources, e.g., opportunities to talk about their views at committee meetings, at staff meetings?

- ◆ What about staff? Are they supportive, or are they likely to be resistant? Are there signs of problems that exist in the organization evidenced by factors such as complaints about stereotyping and prejudice, resistance to working with or negative comments about people from other cultures, discrimination in promotions, pay and performance reviews, males occupying the managerial positions with women occupying clerical and lower level positions?
- ◆ How will resistance to change be addressed? How will we avoid sabotage of new efforts?
- ◆ How do I personally view diversity?
- ◆ Does the organizational climate encourage open discussion? Do people feel safe to express their views and engage in discussion with others?
- ◆ What do we need to do to develop our competencies to manage diversity? Will a review of our policies and procedures stand the test of adequacy with respect to issues of equity, inclusion and respect of cultural, racial, religious and linguistic minorities? How will we fill in the gaps? For example, do our policies include sexual harassment, gender equity in hiring practices and equity in promotions of people from ethno-cultural and ethno-racial backgrounds (both women and men) to decision-making positions within the organization?
- ◆ Have diversity goals and plans been discussed and developed into short-term and long-term plans, building on stages of development? Have gender differences, e.g., the caregiving roles of women, been considered? Have cultural differences in how care is given and received been taken into account?
- ◆ Have we developed output and outcome measures as part of the plan?

Is there a process in place for monitoring, evaluating and ongoing planning?

- ◆ Is cross-cultural competency a human resource requirement in our organization?
- ◆ Have we included educational and training opportunities in working with diversity a professional development requirement? Do I personally participate in these sessions and provide encouragement to others?
- ◆ As organizational leaders, can we say that we mirror values of equity, inclusion and respect in our behaviours and actions?
- ◆ Have we included diversity results in our public accountability mechanisms, e.g., in our annual reports and meetings, in newsletters, in the media?
- ◆ Do we have the right resources and supports available to lead the process of change to become fully inclusive?
- ◆ How do we as organizations get the resources that we require?
- ◆ How can we engage ethno-cultural communities in these processes, using a community development approach? Do we need to develop mechanisms for outreach and partnership-building? Are there staff members or volunteers who can play a role? Do we need to start a process whereby our staff and volunteer base can become more diverse, thereby bringing in added value in terms of diversity and inclusion (of resources, of creativity, in providing ideas from different cultural perspectives and so on).
- ◆ What mechanisms do we need to get input from diverse ethno-cultural communities, including the voices of women and girls, men and boys?

Champions

Who? ♦ Staff and/or volunteers within the organization who support diversity and inclusion initiatives.

**Some
Questions that
Champions Need
to Address**

- ♦ What do I know about this issue? Do I have an open mind? Am I aware of my own cultural beliefs and the effect of my interaction with others?
- ♦ What do I know about gender differences within the cultural context and their effect on equitable outcomes for women and girls, men and boys from ethno-cultural communities?
- ♦ Am I prepared to give diversity and equity my full attention, to make it part of my regular work?
- ♦ What support do I need to get from the organizational leaders? How do I go about doing this?
- ♦ Am I prepared to act as a liaison between staff and volunteers and the organizational leaders?
- ♦ What negotiations do I need to undertake with my manager or direct supervisor to ensure that I have support and can devote sufficient time to this?
- ♦ What do I need to become more proficient in this area? How can I get information and training?
- ♦ What is my relationship with staff and workers? Do I need to bring them on board? How do I go about doing this?

- ◆ What strategies will I use, e.g., informal discussion groups, putting the item on the agenda at staff meetings, providing information through articles, organizing sessions on inclusion and diversity?
- ◆ Who else in the organization can I bring on board to assist?
- ◆ What about people from the ethno-cultural communities? How can I reach out to them and have them be part of our discussion, e.g., as speakers, as participants?

Workers and Volunteers

Who? ◆ All workers and volunteers in the organization

Some Questions that Workers and Volunteers Need to Address

- ◆ How do I feel about organizational diversity and inclusion, particularly when it pertains to my organization?
- ◆ Do I feel resistant? Why do I feel this way? How can I learn more about this so that I can put my feelings into perspective? How aware am I of the benefits of having a diverse organization?
- ◆ How and in what forum can I express and explore my feelings and my opinions, e.g., at staff meetings, with my director?
- ◆ Am I open to listening to others' ideas, to trying new approaches?
- ◆ When will I be ready to come on board with others who are moving forward? What will be the disadvantages if I do not come on board? Am I prepared to accept these disadvantages?

Unions

Who? ◆ Union representatives, organizational representatives to the union

- Some Questions that Union Representatives Need to Address**
- ◆ How can we come on board with management?
 - ◆ In what ways can we accommodate new workers coming into the workforce or moving into senior positions without undermining collective agreements?
 - ◆ How can we respond to cross-cultural needs of workers in collective agreements, e.g., headdress of Muslim women, flexible hours of work for women who have caretaking roles, access to childcare?
 - ◆ How do we address issues of discrimination and harassment, e.g., racial slurs, sexual harassment of women of colour in our agreements?

Recognizing and Understanding Benefits of an Inclusive Organization

Benefits of an Inclusive Organization

- ◆ Attracting talented workers and volunteers from diverse cultural and racial minority communities (both genders, all cultures, all abilities).
- ◆ Gaining skills and expertise in working with clients/patients/consumers/stakeholders in a way that everyone finds equally accessible and responsive, regardless of literacy, language, ability, culture or other characteristics.
- ◆ Better return on investment in people. Every employee is empowered to contribute the best of what they have to offer; they are not held back because they “don’t fit in.”
- ◆ Improved community relationships. The community we serve is diverse. When workers, volunteers and clients/patients/consumers/stakeholders reflect that diversity, the organization enjoys enhanced status and positive relationships with ethno-cultural communities.
- ◆ Learning about people from diverse backgrounds first-hand; mutual sharing and understanding of gender differences in cultures; learning what is acceptable and what is not acceptable according to Canadian law.
- ◆ A good reputation for diversity and intolerance of racism, sexism and other ‘isms.’
- ◆ Access to a richer range of perspectives and approaches, resulting in better decision-making and increased innovation.
- ◆ Working partnerships with stakeholders in community decision-making.

- ◆ Lowered risks to the client, patient/consumer and to the organization.
- ◆ Reduced interpersonal conflict among employees of all backgrounds as respect for diversity increases.
- ◆ Improved productivity as more employee effort is directed at accomplishing tasks and less energy is spent managing conflicts.
- ◆ Prevention of legal difficulties based on discrimination, harassment and other human rights infringements.
- ◆ Aside from the tangible benefits, being an organization that is inclusive of diverse ethno-cultural and ethno-racial minorities is morally the right thing to do. It demonstrates a sense of social responsibility.
- ◆ Given the changing demographics, an aging population and low birth rates, it is also the smart thing to do.

**Disadvantages of
Unsupportive
Organizational
Culture**

- ◆ High turnover among diverse employees who may opt out in search of a more supportive work environment.
- ◆ Low morale among those who remain due to persistent culture clashes and ongoing conflicts among employees.
- ◆ Harassment and/or other human rights complaints filed by employees who feel they are not respected and are unfairly treated.
- ◆ Limited innovation due to over-reliance on “tried and true” methods.
- ◆ Under-utilization of the skills and perspectives of people from diverse cultures and backgrounds.

- ◆ Increasing inability to recruit the best and brightest new workers because of the agency's negative image and reputation in the employment market.

Recognizing and Understanding Resistance to Change

Indicators of Resistance

- | | |
|--|--|
| At the Individual Level | <ul style="list-style-type: none"> ◆ Agreeing verbally but not following through. ◆ Finding fault with, or discounting new ideas. ◆ Behaving in old, established ways. ◆ Discounting the need for change. ◆ Making those who are moving towards change feel guilty and failing to consider their position. |
| At the Managerial Level | <ul style="list-style-type: none"> ◆ Orientation more to the past than to the future. ◆ Recognizing obligations of ritual more than the challenges of current problems. ◆ Showing allegiance more to departmental goals than overall organizational goals. ◆ Not leading by example. |
| At the Departmental or Organizational Level | <ul style="list-style-type: none"> ◆ Excluding those who do not conform to the customary norms or organizational culture. ◆ An orientation more to the past than to the future. ◆ Continuing to do business in established ways. ◆ Discounting the need for change. ◆ Ridiculing those who make change efforts. |

Management's ability to achieve maximum benefits from renewed and continuous development depends in part on effectively creating and maintaining an organizational climate that minimizes resistant behaviour and creates acceptance and support.

Reasons for Resistance

- ◆ Misunderstanding of what diversity is about.
- ◆ Fear of change.
- ◆ Fear of "other" or "difference."
- ◆ Failure to see that there is a problem to be solved or an opportunity to be realized with respect to diversity.
- ◆ Habit – returning to a comfortable state. For example, following cross-cultural training, there may be more receptivity to doing things differently. With time, however, there is a return to accustomed ways.
- ◆ Selective perception and retention. People may respond to suggestions within the framework of their established outlook.
- ◆ Lack of confidence.
- ◆ Security of the past. The tendency to hold onto the familiar or even to return to some tried-and-true ways of the past.
- ◆ Conformity to norms - "This is the way we do things around here," i.e., organizational culture.
- ◆ Vested interests—the threat to economic or prestige interests of individuals.
- ◆ Holding onto that which is held sacred. For example, women as counselors, men as managers.
- ◆ Rejection of outsiders, i.e., people from outside the mainstream population.
- ◆ A person's social identity and relation to power.
- ◆ Discomfort with the content and perspective.
- ◆ Distrust of the process.

Promising Practices – Addressing Resistance to Change

- | | |
|--|---|
| Education and Communication | <ul style="list-style-type: none">◆ Communicating diversity goals throughout the organization. Making the process transparent.◆ Emphasizing the larger importance of the organization's mission.◆ Demonstrating the need for change by talking about benefits; sharing valid information on the reasons for change.◆ Holding discussions in the early stages of the change process and throughout the process.◆ Addressing people's fears.◆ Acknowledging that resistance is a given in any process of change. |
| Engagement of Stakeholders | <ul style="list-style-type: none">◆ Involving all stakeholders at the outset, starting with the discussion stages, openly communicating progress at all stages and inviting participation.◆ Sharing power through group decision-making and keeping the communication lines on development open. |
| Building on Achievements | <ul style="list-style-type: none">◆ Making change in steps.◆ Building on past achievements and/or successful initiatives. |
| Competency Training and Rewards | <ul style="list-style-type: none">◆ Providing opportunities for training and renewal in cultural responsiveness.◆ Fostering team feelings by recognizing and rewarding team efforts.◆ Publicly recognizing and crediting employees for improvements that come about as a result of their work. |
| Support Systems | <ul style="list-style-type: none">◆ Supporting champions.◆ Providing a mechanism for airing complaints.◆ Providing supports for implementing change. |

Part IV

On Becoming Culturally Responsive

Ethno-cultural, ethno-racial, religious and linguistic minorities are more likely to participate in organizations that have a reputation of being open and responsive to cultural differences and to change than those that are not. Organizations that are open are known to be culturally responsive or competent.

To benefit from and to serve an increasingly diverse population in Manitoba effectively and equitably, health and social service organizations must be culturally responsive at all levels of the organization: at the decision-making levels, at the administrative levels, at practice levels and at the group and individual levels within the organization. Behaviours and responses that demonstrate cultural responsiveness thus become an integral part of the organizational culture.

About Terms

Terms such as “cultural sensitivity”, “cultural competence”, “cultural appropriateness”, “cultural safety”, “cultural humility” and “cultural responsiveness” are now found in the literature on cultural diversity. These terms are used mostly in discussions on service provision, service outcomes, employment practices and engagement of ethno-cultural and ethno-racial minorities in community institutions.

The development of terms derive from the search for effective and responsive service provision and equitable outcomes for all.

The terms, “cultural safety” and “cultural humility”, are fairly new additions to the literature on diversity in the health field. They are important additions to understanding of cultural responsiveness in that they address the power dynamics in the provider-client relationship.

Cultural safety is a method of practice that transfers power from service providers to health care consumers by giving the power to the patient or family to define the quality of service on subjective as well as on clinical levels. It is a practice developed within Maori cultural reality. It began as a response to difficulties experienced in interaction with Western-based nursing. It is about power dynamics in all service delivery.

Cultural humility is based on the belief that participation on training utilizing a static concept of culture results in stereotypes that can potentially harm the patient. The most serious barrier to culturally competent care is not lack of knowledge of the details of any culture. It is the provider’s failure to develop self-awareness and a respectful attitude towards diverse points of view. Its focus therefore is on the practitioner valuing the patient’s agenda and

perspectives and using a less controlling, less authoritative style of interaction with patients.

“Cultural responsiveness” is the term that is used in this tool. The term incorporates the broadest range of cross-cultural knowledge and skills. It includes:

- Cross-cultural knowledge (through workshops and partnerships with ethno-cultural communities),
- Self-awareness and skill development (through workshops),
- Recognition of diversity within cultural communities and families, and
- Respectful practice (by having the consumer define his/her needs within his/her values, cultural beliefs, customs and practices and participate in decisions that affect his/her health and well-being, i.e., incorporating elements of “cultural safety” and “cultural humility”).

Test Your Understanding or Discuss with Others in Your Organization

Understanding the meaning of culture and diversity and related aspects is a first step in becoming culturally responsive.

1. Diversity is about the differences among various ethno-cultural groups.

True False

Diversity is about the variety of differences among people. Diversity includes many things, such as ethnicity, race, cultural traditions, age, gender, socio-economic status, geography, mental or physical ability and sexual orientation.

Ethno-cultural and ethno-racial groups share some similar beliefs, values and culture based on country of origin and/or history. There are also differences within groups and among groups. Factors such as ethnicity, socio-economic status, religious affiliation, level of education, the areas in which they lived, their cultural backgrounds and their experiences make for differences within groups. Over time, new experiences, societal influences and level of integration make for other differences. There may also be intergenerational or inter-familial differences.

Diversity then is the variety of differences among people. The term, "diversity," is often used in the context of culture.

2. Culture is about the foods, dress, dance and customs of a racial or ethno-cultural group.

True False

In the pure sense, culture is the integrated pattern of human behaviours

that includes thoughts, communications, actions, customs, beliefs, values and institutions of a racial, ethnic and/or religious group. Culture includes beliefs and values, norms or rules of conduct, social roles, spiritual beliefs, language, art, food and dance.

3. Culture is static. People's culture remains with them forever.

True False

Culture is not static. As people grow and interact in the larger society, they may adopt other behaviours or customs as their own. Or they may adjust to form a new culture or cultural traits. Or they may choose to retain some of their original beliefs and practices while adopting and integrating new behaviours.

4. When as individuals or organizations we respond respectfully and equitably to women and girls, men and boys, children, families and communities of all cultures, races, ethnic backgrounds, sexual orientations and faiths or religions in a manner that recognizes, affirms and values their worth and protects their dignity, we are being culturally responsive.

True False

When we hold cultural differences and diversity in the highest esteem, when we interact respectfully without bias, prejudice or pre-judgments, when we incorporate new knowledge and experiences into organizational policies, structures and operations, we are being culturally responsive. This means looking beneath the surface features such as food, music and clothing. It involves exploring and understanding below-the-surface features, such as

values, beliefs, customs, roles that communities may share, as well as differences within and among communities. When value and belief systems conflict with Canadian values of human rights and human dignity, we need to explore with communities and individuals the implications of new value systems resulting from life in Canadian society. For instance, these implications may involve the positive management of changes in gender roles and women's and girls' position in Canadian society due to newfound opportunities and legislation that uphold equality of women and men, girls and boys.

5. We can become culturally responsive by having speakers from different racial or ethno-cultural groups share information about their culture with us.

True False

Having speakers from different ethno-cultural or ethno-racial groups share information about their cultures and experiences helps us to understand common values, beliefs, customs and roles that communities may share. Culture specific information provides useful insights and knowledge; however, we need to also look at differences within communities. These differences may be based on factors such as gender, age, level of acculturation, experiences, educational level, geographic differences in country of origin and so on. The commonalities that ethno-cultural and racial groups and families share, and the ways in which they differ, are important considerations in cross-cultural communications and interactions. Cultural responsiveness goes beyond cultural awareness or sensitivity. It includes the possession of knowledge and respect for different cultural perspectives, as well as having the skills to use them effectively. It means the ability to interact respectfully with women and girls, men and boys, children, families and communities of diverse ethno-cultural and ethno-racial backgrounds. It means recognizing biases and prejudices in written materials and in actions in

order to replace these with ones that will bring about more equitable outcomes. It means learning how to rebalance the power structures within our organizations and the system to be inclusive and respectful. Skills in cultural responsiveness include exploring our own cultural beliefs and the effect of our interactions with others.

6. Having a diverse staff and volunteer base enriches the organization, provides a positive image and enhances its capacity to work with a diverse population.

True False

A diverse employee and volunteer base provides a broader and richer foundation from which to plan, develop and deliver services for an increasingly culturally and racially diverse population. Staff and volunteers contribute to the decision-making processes from a wide range of experiences and expertise. Where the organization is open and friendly, interaction among staff and volunteers provides a learning environment. The organization also gains an image of being accessible to ethno-cultural and ethno-racial minorities, thereby attracting more volunteers and clients/patients/consumers. Organizations that are seen to be inclusive and welcoming also find it easier to create working relationships with ethno-cultural communities than those that are not.

7. Gender considerations within the social and cultural context of people from ethno-cultural communities help organizations to address differing needs of women and girls, men and boys, as well as to plan for equitable outcomes.

True False

Women, girls, men and boys are not a homogeneous group. Gender considerations take into account the physiological, health, social and economic factors that, unless recognized and addressed, result in unfair conditions and unequal outcomes for women and girls. Particularly important are the social roles accorded to women and girls and men and boys in society and in communities. Commonalities as well as differences within and among communities must be explored. While women and girls from ethno-cultural communities may share some common issues with women and girls from mainstream communities, there may also be differences based on cultural norms, values, customs and practices. For example, women of all cultures usually carry the caring roles. Women's health practices however, may differ within and among communities. Open breastfeeding and attitudes towards this practice is an example. An equity and diversity approach must incorporate women's and girls' issues as experienced within their social and cultural identity, while maintaining Canadian laws. For example, domestic abuse and sexual harassment are unlawful in Canada.

8. Partnerships with ethno-cultural communities in designing systems, structures, policies, programs and services, as well as in evaluation, value the communities' perspectives and share power, control and ownership with them.

True False

Engagement of women and girls, men and boys, leaders and grassroots, empowers ethno-cultural communities to identify their issues and to be part of solutions. Organizations and communities alike gain knowledge through the exchange of information and through joint decision-making. Mutual respect is gained. The focus is on the organization's valuing of the communities' perspectives and enabling communities to

take better care of themselves by building on the communities' strengths and addressing concerns that conflict with Canada's position on human rights.

Promising Practices – Becoming Culturally Responsive

- ◆ Having speakers from diverse cultural backgrounds, e.g., at brown bag lunches, hosting community knowledge and learning sessions.
- ◆ Reaching out to, and including members from diverse racial, cultural, religious and linguistic minorities on boards and committees (decision-making processes).
- ◆ Reflecting the population being served and/or the surrounding community in staffing.
- ◆ Having staff and volunteers who speak languages of clients/patients/consumers/stakeholders.
- ◆ Using communication methods that facilitate connections and partnership building with ethno-cultural and ethno-racial minorities, e.g., advertising jobs in ethnic newspapers, translating information in different languages and placing them in locations that will reach people, such as in doctors' offices, groceries and pharmacies in local communities.
- ◆ Providing workshops with skilled trainers who help organizational leaders, workers and volunteers gain skills and confidence, e.g., in exploring their own

prejudices in carrying out cultural assessments and in identifying biases and barriers in policy and practice documents as well as in attitudes and practices.

- ◆ Matching people of similar ethnic backgrounds or first language with clients/patients/consumers where possible and preferred (commonly known as ethnic matching); vice-versa, offering alternatives based on client/patient/consumer preference.
- ◆ Coordinating and collaborating with other agencies in learning of successful diversity practices.
- ◆ Establishing interpreter pools and providing interpreter services as needed.
- ◆ Joint planning and sharing of resources, e.g., interpreters, training workshops, staff discussions, outreach to ethno-cultural communities.

Part V

Governance

Inclusion and meaningful engagement of members from diverse ethno-cultural communities on boards, committees, task forces, commissions and coalitions bring diverse views to the table thereby enriching the decision-making process.

Health and social service organizations run the gamut from non-profit, unincorporated entities to non-profit, incorporated charitable organizations to quasi-public organizations to totally public organizations. Non-profit and quasi-public organizations are usually governed by volunteer boards. Volunteers may be involved in other aspects of the organization, such as on working committees, ad hoc groups and task forces. Public organizations often engage communities in an advisory capacity through appointments to boards, on public enquiries or on committees.

Coalitions of individuals and/or organizations are sometimes formed to be a platform on identified issues and to advocate for changes to public policies and systems. Such groups are usually unincorporated entities, which nevertheless can have a powerful voice.

The governing board is the legal entity and authority in the non-profit organization. The chief executive officer usually carries the management authority in the public organization.

Committees, ad hoc groups and task forces operate within the mandate of the organization. They report to the board or the management authority.

Many non-profit, charitable health and social service organizations are membership based. As such, they reach out to other organizations and community members.

Inclusion and meaningful engagement of members from diverse ethno-

cultural and ethno-racial communities on boards, committees, task forces, commissions and coalitions bring diverse views to the table thereby enriching the decision-making process.

Promising Practices – Governance

- The Board**
- ◆ The board reflects the demographics of the community: ethno-cultural and ethno-racial diversity, socio-economic status, gender balance, religion, etc.
 - ◆ Board recruitment involves outreach and consultation with community organizations and ethno-cultural communities.
 - ◆ Board protocol requires respectful communication and enabling processes that allow all voices to be heard.
 - ◆ Participation at board meetings is accommodating of members who cannot participate during work hours. Other factors that facilitate participation, e.g., childcare needs, transportation, location, structure and processes are taken into account.
 - ◆ The setting and structure of meetings are conducive to open discussion.
 - ◆ There is ongoing awareness-raising about diversity and inclusion issues among board members.
 - ◆ Board orientation includes information on current initiatives, plans and strategies for integrating diversity at all levels of the organization.

- ◆ Reports to the board include the changing demographics, related issues and the implications for the organization.
- ◆ The board requires that the executive director is able to articulate the agency's position with respect to cultural responsiveness and inclusion, and is able to manage a diverse workforce.
- ◆ The board requires that the executive director put diversity and inclusion plans into practice and promote diversity and inclusion practices in the broader community.
- ◆ Champions of diversity and inclusion in the organization are invited to present equity and inclusion principles and practices to the board, commissions, task forces and coalitions.

**Committees,
Commissions,
Task Forces and
Coalitions**

- ◆ Committees, commissions, task forces and coalitions reflect the demographics of the community.
- ◆ Recruitment involves outreach and consultation with community organizations and consultation with ethno-cultural and ethno-racial communities.
- ◆ Protocol and arrangements for board meetings also apply to committees, commissions, task forces and coalitions.
- ◆ Committee members are oriented to the organization's goals and directions with respect to diversity and inclusion. They consider diversity and inclusion principles in all of their activities and decisions.
- ◆ Champions of diversity and inclusion in the organization are invited to take part in orientation sessions.

Methods commonly used to reach out to ethno-cultural and ethno-racial communities include identifying and connecting with formal and informal community leaders, making enquiries from agencies that work with ethno-cultural communities, advertising in ethnic newspapers and word-of-mouth. Members of ethno-cultural communities may also reach into agencies that are known to be inclusive.

Part VI

Policies

Health and social service agencies develop policies to provide direction to the work that they do. Policies formalize the organization's mission, values, priorities, service philosophy, operating principles and communities to be served. Procedures usually form part of the organization's policy package.

Informal policies and procedures also exist within an organization. These are the unwritten rules and practices that occur wittingly or unwittingly. They become part of the organization's culture. To the degree that they are consistent with the organization's service philosophy and value orientation, they are acceptable. When they are at odds with the organization's service philosophy and value orientation they give mixed messages and may create misunderstandings or conflict among people in the organization. For example, an organization may explicitly state that women and men from ethno-cultural communities will be represented on its board and given equal voice, when in practice this does not happen.

An organization that values diversity, inclusion and equity will make these values explicit in its mission statement, guiding principles and policies. Procedures will also reflect these values.

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Promising Practices – Policies

- Policies**
- ◆ The organization’s mission statement, policies and procedures recognize the increasing diversity in the population and the need to be inclusive. The new populations are specifically mentioned. Ways to include ethno-cultural communities without displacing other cultural or racial communities are found, e.g., mentioning several communities as examples.
 - ◆ Its mission statement, principles, beliefs, policies and procedures make explicit the organization’s commitment to be culturally responsive in all aspects of its operations.
 - ◆ Current policies and other materials are reviewed for bias and exclusionary practices. Detected biases are removed and replaced with statements that express inclusion, equity and anti-discrimination.
 - ◆ Written policies and procedures on anti-racism, sexual harassment, workplace discrimination and employment equity are developed and communicated within the organization and in the broader community.
 - ◆ Statements on gender equity and the need to be cross-culturally responsive are developed, e.g., positions on childcare for meetings, flexible hours of work to accommodate women’s caring roles.

- Procedures**
- ◆ Stakeholders, including members of ethno-cultural communities, are engaged in the development of policies and procedures.
 - ◆ Procedures are in place for making a complaint without penalty.

- ◆ Procedures to resolve conflicts and complaints of issues such as racist slurs, workplace discrimination, sexual harassment, and pay equity for women of colour are developed.
- ◆ Complaints are dealt with promptly, respectfully and confidentially, without bias or prejudice and in a timely manner.
- ◆ Resources are allocated for cross-cultural training, including gender analysis. Time off is provided for such training.
- ◆ Procedures manuals are reviewed to incorporate new ideas and to remove biases.
- ◆ Manuals on diversity, inclusion and equity are developed and communicated within the organization and in the broader community.
- ◆ Expectations regarding respectful behaviour in the workplace are developed and communicated within the organization and in the broader community.

Part VII

Workers and Volunteers

In order to remove workplace barriers, they must first be identified and discussed. Barriers may be found at the organizational level as well as at the individual level.

A workforce and volunteer base that reflect the composition of the population at all levels of an organization validate an organization's openness to inclusive practices. When all workers and volunteers are given equal voice in planning and operational functions within the organization, organizational valuing of diversity and equity is demonstrated.

Special initiatives and programs facilitate progress towards workforce diversification. Workforce diversification is about creating an environment that allows access to the talents of a variety of diverse cultural groups by removing barriers to organizational participation.

Employment equity is an example of a promising practice to achieve goals of workforce diversification.

In order to remove workplace barriers, they must first be identified and discussed. Barriers may be found at the organizational level as well as at the individual level.



Examples of Barriers

These two checklists provide a means to assess your workplace climate, identify existing barriers and open up discussion on strategies to remove them.

Workplace Barriers to Participation by Ethno-cultural Minorities at the Organizational Level		
Yes	No	
		A general unconcern about diversity
		Organizational barriers that lead to perpetuation of the status quo
		Resistance to change
		Exclusion of women and men from ethno-cultural and racial minorities in one or more aspects of employment, e.g., hiring, compensation, promotion and career advancement
		Exclusion of women and men from ethno-cultural communities in decision-making processes, e.g., limited power and status within the workplace; lack of voice and representation at different levels of the organization
		Qualifications and work experience earned in immigrants' home countries not recognized
		Lack of workplace supports such as informal and formal mentoring, flexible hours for women with young children

		Wage discrepancies between immigrant women and men; lower wages paid to ethno-cultural and racial minority workers
		Lack of information about the benefits of workplace diversity
		Lack of information about the changing population demographics
		Inadequate skills and know-how in removing biases from policies, procedures and programs

Workplace Barriers to Participation by Ethno-cultural Minorities at the Individual Level		
Yes	No	
		Workplace discrimination evidenced by individual and/or group behaviour
		Negative stereotypes, prejudice and overt or covert racism
		Lack of trust and respect among racial and ethnic groups
		Group behaviour and dynamics that make the workplace uncomfortable for ethno-racial minorities
		Isolation and marginalization of ethno-racial minorities from other workers
		Avoidance of discussions about race, discrimination, diversity and related issues
		Resistance to change

Examples of Organizational Goals and Promising Practices: Towards an Inclusive Workforce and Volunteer Base

Goal	Promising Practices
<p>Full inclusion of ethno-cultural, racial, religious and linguistic minorities at all levels in the organization</p>	<ul style="list-style-type: none"> ◆ Understanding of the demographics and the variables within the broad demographics, such as age, disabilities, level of education, employment, salary levels, health outcomes and differences between women and men ◆ An employment equity policy and program that considers relevant factors for both women and men from ethno-cultural and racial minority communities ◆ Inclusion of ethno-cultural and racial minorities of both genders, including persons with a disability, on organizations' boards, committees, task forces, commissions and ad hoc committees ◆ Engagement of ethno-cultural and racial communities in decision-making processes, including women's voices ◆ To get women's perspectives, outreach and engagement of women in separate processes with necessary supports, such as childcare, transportation, confidentiality, etc.

Goal	Promising Practices
Equitable outcomes for women and men	<ul style="list-style-type: none"> ◆ Comparison of the impact of policies, programs and practices on women and men from mainstream and ethno-cultural communities, including persons with disabilities, e.g., vulnerability to workplace harassment, differences in remuneration for jobs of equal value, failure of women to achieve seniority positions despite merit, inability to accommodate persons with a disability ◆ Engagement of women representing diverse ethno-cultural, racial, religious and linguistic backgrounds and educational and economic circumstances in the examination of policies, programs and practices ◆ Policy and practice changes for equitable outcomes

Goal	Promising Practices
Cultural competency of directors, managers, supervisors, other employees and volunteers	<ul style="list-style-type: none"> ◆ Training and personal development supports for CEOs, executive directors, managers, supervisors, staff, board and volunteers ◆ Diversity and equity performance criteria incorporated into performance appraisals, e.g., awareness of the population diversity, ability to work with people from diverse racial and cultural backgrounds, response to conflict situations, understanding that differences may exist within and among cultural communities and between and among women and men, girls and boys in those communities

Goal
Risk management

Promising Practices

- ♦ Established codes of conduct that include minority women’s and men’s rights to be treated with dignity and respect
- ♦ Existing policies that uphold human rights, e.g., equitable treatment of immigrants with HIV in the immigration process
- ♦ Formal complaints framework in place
- ♦ Openness to working in new ways
- ♦ Identification of potential situations that can create conflict, harassment, lawsuits
- ♦ Policies in place to address discriminatory practices and practices that have the potential to create adverse workplace conditions, e.g., a respectful workplace policy, unfair hiring practice/removing biases from employment policies and practices, accommodation for time off for religious holidays, an anti-harassment policy
- ♦ Processes in place to address conflict situations and complaints of adverse workplace conditions promptly and respectfully when they arise

Goal
A respectful workplace

Promising Practices

- ♦ Everyone’s ideas and contribution treated with respect
- ♦ People feel welcomed and valued
- ♦ Respect of cultural differences

- ◆ Prompt action taken when conflict situations, harassment and other issues are suspected or are brought to attention

Goal
Achieving success

Promising Practices

- ◆ Organization being known as an equal opportunity employer in the community
- ◆ Partnerships with ethno-cultural communities
- ◆ Partnerships with unions
- ◆ Informal and formal mentoring for employees in new positions
- ◆ Special measures to increase representation of ethno-racial and cultural groups where lacking, with attention to gender balance
- ◆ Annual objectives
- ◆ Measures of success
- ◆ Ongoing monitoring of progress against annual objectives.
- ◆ Annual evaluation
- ◆ Corrective measures built into annual plans during next planning and implementation cycle
- ◆ Leadership from the top - board, executive, executive director and CEO
- ◆ Champions supported by leadership

Goal
Full support of the organization's leadership, viz., the board, the CEO, the executive director, departmental managers and supervisors

Promising Practices
<ul style="list-style-type: none"> ♦ Allocation of resources ♦ Collaboration and coordination with other organizations to share resources, e.g., cultural competency training ♦ Support and time off for staff training ♦ Participation in training with staff ♦ Assumption of authority/accountability for annual plans, monitoring and evaluation, performance appraisals and outcomes

Goal
Union support and partnerships

Promising Practices
<ul style="list-style-type: none"> ♦ Negotiations with union ♦ Understanding built into contracts

Goal
Partnerships with ethno-cultural, racial, religious and linguistic communities

Promising Practices
<ul style="list-style-type: none"> ♦ Outreach to formal and informal leaders as well as the grassroots level (both women and men) from ethno-cultural, racial, religious and linguistic communities ♦ Active engagement of women and men at the leadership level and at the grassroots level in the development of policies and practices ♦ Organizational participation in cultural events and ceremonies

- ◆ Collaborative planning and community development approaches to develop solutions in issues of importance to communities

Goal
Collaboration and coordination within the health and social service system, the broader community and government

Promising Practices
<ul style="list-style-type: none">◆ Pooling of resources, e.g., cultural competency training, information sessions on demographics, outreach to communities, information sessions on services and planning to include new communities, e.g., private sponsors may not know about available services for new immigrants, or of government policies and expectations

Promising Practice – Employment Equity

Employment equity is a strategy, program and practice that shows promising results in removing inequities in recruitment, hiring, recruitment and promotion practices.

Philosophy

Employment equity is a systematic process of removing workplace practices that act as barriers to the employment and promotion prospects of historically marginalized groups.

Employment equity is based on merit.

The process of change involves, on the one hand, the identification and removal of systemic barriers in the employment practices of an organization. On the other hand, it involves the implementation of active measures such as goals and timetables to alleviate the results of historical discrimination.

Employment equity underscores the need to be inclusive in recruiting, hiring, promoting and retaining qualified staff to available positions within the organization. It recognizes that in a diverse community, it is to the organization's benefit to have a diverse workforce.

Employment equity recognizes differences that exist within and among ethno-cultural and racial minority populations, including ability/disability, gender, gender identity and sexual orientation.

By linking employment equity activities with other organizational change efforts, employment equity is seen not as an isolated program but as an

Employment equity is a strategy, program and practice aimed at removing historic workplace barriers to full participation of designated groups, viz., visible minorities, Aboriginal people, persons with disabilities and women.

integral part of the organization's inclusion and diversity activities.

An employment equity policy formalizes the process towards workforce diversification.

An employment equity action plan sets goals based on demographics.

An employment equity policy and action plan communicate that the organization is moving towards workforce diversification through concerted action and measurable goals.

Misconceptions About Employment Equity

- ✗ Employment equity is reverse discrimination.
- ✗ Employment equity hiring will lower the quality of work being done.
- ✗ Employment equity means that white people will be fired to make way for women and men from ethno-racial and cultural communities.
- ✗ Employment equity will create division in the union movement and among employees.
- ✗ Workplace diversification will happen naturally over time.

Laying the Groundwork – Action Steps

Leadership Makes Commitment

- ◆ The board is culturally, racially and linguistically diverse; if it is not, it has developed a strategy to become diverse, with a timetable for doing so.
- ◆ Board members develop a common understanding of employment equity.
- ◆ The board expresses its commitment to employment equity with respect to ethno-cultural, racial, religious and linguistic minorities through an approved board policy.
- ◆ The board's commitment is communicated throughout the organization and to the community.
- ◆ The board decides on a course of action to develop and implement an employment equity plan. Board members discuss ideas and steps to be taken, e.g., an employment systems review (i.e., a review of employment practices), policy review to remove biases in recruitment, hiring and promotion policies and procedures and the engagement of members from ethno-racial and cultural communities in the process.
- ◆ A timetable is established to get the process underway.
- ◆ Timelines are established for progress reports to the Board.
- ◆ Where applicable, unions are brought into the discussion.

The Organization Gets Employees' Buy-in

- ◆ Employees understand the reasons for having an employment equity policy and plan.
- ◆ Management discusses with them the need to redress historical disadvantages accorded designated groups in our society (people of colour, Aboriginal peoples, persons with disabilities and women), the changing demographics and the benefits of an inclusive organization.
- ◆ Employees understand that employment equity is based on qualifications and merit.
- ◆ Their concerns and fears are addressed, e.g., fears of losing their jobs or opportunities for promotions.

- ◆ They trust the organizational practices and processes. Where there is distrust, their issues are discussed with them, their opinions are heard and steps are taken to rebuild trust.
- ◆ Employees are included in the developmental processes.
- ◆ They are kept informed of ongoing developments.
- ◆ A climate of teamwork and support is created among employees.

Policy and Procedures – Action Steps

Board Sets Clear Policies and Procedures

- ◆ Board policy clearly states that the organization is an equal opportunity employer. A definition or description is included in the organization's promotional materials.
- ◆ Practices and procedures that are consistent with the mission of inclusion and equal opportunity with respect to ethno-cultural and racial minorities are formalized.

These include:

 - Removal of biases in job descriptions, screening and interviews,
 - Outreach methods that reach ethno-cultural and racial minorities,
 - Involvement of ethno-cultural and racial minorities in the development of processes and procedures, as well as in the screening, interviewing, hiring and evaluation processes,
 - Training and supports,
 - Workplace accommodations,
 - Conflict resolution,
 - Complaints of incidents of discrimination, and
 - Special programs.

Performance Appraisals – Action Steps

Organization Develops Measures of Success

The organization develops:

- ♦ Indicators of diversity and inclusion.
- ♦ Indicators of inclusive practice.
- ♦ Clear guidelines whereby staff are facilitated to provide services in an inclusive manner.
- ♦ Indicators of inclusive practice that form part of staff performance appraisals.
- ♦ Indicators of diversity and inclusion that are included in evaluating the performance of the organization against equity and diversity goals and objectives.

The power of informal systems must be safeguarded against if boards are to achieve equality for all people. Policies, procedures, processes and practices may appear to be equitable and objective; however, the values and expectations underlying them may be culturally-biased and have an adverse impact on minority populations.

A Useful Step – An Employment Systems Review

- What is an employment systems review?** ♦ It is an examination of formal and informal personnel policies, procedures and processes.
- What is its purpose?** ♦ Its purpose is to check whether any of the organization's policies, procedures and practices create barriers or could result in any intentional or unintentional (systemic) inequities.
- What should be included in the review?** ♦ Both formal and informal policies and procedures.
♦ Actual organizational practices, organizational culture and entrenched attitudes that might perpetuate inequities.
- What are some of the important areas to be reviewed?** ♦ **Goals and timetables:** the degree to which workforce goals and timetables reflect the population, communities being served and target communities and populations.
♦ **Recruitment:** outreach, advertisements, job postings, where posted.
♦ **Selection:** application forms, screening criteria, interview panels, the interview process, interview questions, tests.
♦ **Training and development:** opportunities, skills and supervisory training, formal and informal mentoring.
♦ **Promotion:** paths to promotion, selecting and grooming potential candidates, screening and support systems.
♦ **Compensation:** fairness, pay equity, informal vs. formal reward systems.
♦ **Employee benefits:** leave, vacation, religious holidays, childcare.
♦ **Employment conditions:** of access to premises, facilities for persons

with disabilities, working hours, organizational culture.

- ◆ **Monitoring and evaluation:** measures of success: criteria of success for CEOs and executive directors, managers and supervisors.
- ◆ **The planning cycle:** frequency of reviews, planning and implementation.

What are some of the criteria that can be used to determine whether systemic inequities exist in a policy or practice?

- ◆ **Legality:** Is the policy or practice legal? Does it conform to employment or human rights laws?
- ◆ **Adverse Impact:** Is there an adverse impact? Could the policy or practice result in unintentional discrimination against members of the designated group or any group?
- ◆ **Objectivity:** Is the policy or practice objective, or does it allow too much subjectivity?
- ◆ **Job Relatedness:** Is the policy or practice job-related? If so, is it based on genuine occupational requirements?

What are some of the barriers to look for?

- ◆ Recruitment practices that exclude or limit employment applications from ethno-cultural and racial minorities, e.g., outreach limited to mainstream newspapers, or by word-of-mouth, by employees or friends.
- ◆ Job qualifications that are excessive, e.g., inflated experience requirements beyond that which is needed for the job.
- ◆ Overlooking equivalent credentials, skills and experience gained in other countries.
- ◆ Interviews that are insensitive, e.g., illegal questions asked about family status, country of origin, number of young children, religion.
- ◆ Leaning towards candidates who fit the interviewer's or panel's image.
- ◆ Screening out candidates due to unfamiliarity with credentials from a foreign institution.
- ◆ Rigid interview processes, without flexibility for differences in communication styles.
- ◆ Looking for candidates who fit the style of the organization rather than

the competencies to do the job.

- ◆ Organizational norms and common practices that are based on unwritten codes of practice that stereotype, e.g., bypassing a qualified female senior staff of colour for an acting managerial position to a less experienced, younger white male staff; overlooking an Asian person with a disability with the required credentials and experience who has been with the organization for many more years for a promotion in favour of younger, less experienced staff.
- ◆ Mindsets that create barriers to equal opportunity hiring, e.g., holding interviews at a site that does not have ramps and adequate elevators to provide access to persons using wheelchairs; failing to provide job-related information in alternative format for persons with visual impairment; overlooking women with young children for promotions.

What are some ways of identifying discrepancies between policies and practices?

- ◆ Individual and group interviews with staff.
- ◆ Attitude surveys or focus groups with management, staff and community stakeholders.
- ◆ Informal discussions with staff and volunteers.
- ◆ Collection and analysis of workforce data.

What information is being sought in interviews, attitude surveys and focus group discussions?

- ◆ Discrepancies that may exist between what the organization expects its employment practices to be and what is actually happening.
- ◆ Discrepancies between what the organization says its employment practices are and what employees have experienced firsthand.
- ◆ When and how employees have experienced barriers, discrimination or harassment and from whom.
- ◆ What supports are in place and how these are working from employees' perspectives.
- ◆ What employees think equity should be like and what they recommend to achieve their vision of equity.

- ◆ What barriers or discrimination stakeholder communities have experienced.
- ◆ What stakeholder communities perceive to be barriers.
- ◆ What stakeholder communities think equity should be like and what they recommend to achieve their vision of equity.

**What information
will workforce data
produce?**

- ◆ The number of staff who comprise members of the designated group(s).
- ◆ The frequency of employment transactions, such as hiring, promotions, transfers and terminations.

Chart your workforce data

Snapshot data tell how many people from ethno-racial and cultural communities are currently working in the organization. This can be broken down by ethno-cultural and racial categories, gender, gender identity and disabilities in departments and by occupational groups.

Flow data tell about the frequency of employment transactions, such as hiring, promotions, transfers and terminations for a determined period of time. Flow data can be used to update snapshot data regularly. If flow data is not collected, snapshot data should be collected every year.

Indicators that Human Resources Development Canada Uses to Rate Employers Under the Federal Employment Equity Act:¹

Indicator 1 – Representation

Measures the representation of designated groups in the employer's workforce against the labour market availability of the designated group. Availability data are used as an external benchmark for the employer. Its calculation is based on Canadian census data for provinces and CMAs (City Metropolitan Areas) in which the employer has employees. Shares of designated groups in an employer's workforce are compared against the labour market availability for each designated group.

Indicator 2 – Clustering

Tests clustering, showing the degree to which designated groups are equitably represented in occupational groups. It measures the extent of concentration of designated groups in the occupational groups by weighing their representation and percentage share in each occupational group and calculating an occupational equity index. The objective is to determine whether members of a designated group are concentrated in particular types of jobs that tend, for example, to offer lower salaries and less chance of advancement than those held by the rest of an organization's employees.

Indicator 3 – Salary Gap

Compares average full-time salaries of the designated groups against the control group. The objective is to determine the distribution of designated group members among the various salary ranges to determine the extent

¹Human Resources Development Canada (2003). *Annual Report, Employment Equity Act 2002*, Ottawa: Her Majesty the Queen in the Right of Canada.

to which their salaries differ from those of the control group. Three salary ranges are used: under \$30,000, \$30,000 to \$49,999, and over \$50,000.

Indicator 4 – Hirings

Measures hirings of designated groups against their labour market availability. The percentage of a designated group out of all hiring activities by an employer is compared to labour market availability of the designated group.

Indicator 5 – Promotions

Shows whether designated groups receive a fair share of promotions commensurate with their representation in the workforce. It compares the representation of the group in the employer's workforce with the share of promotions that the group's members received. Since the number of promotions tends to decrease as people go up in the hierarchical structure of a company, different types of promotions have different impacts in terms of salary and status in the company. This bias is corrected by adjusting the total number of promotions that all groups received with weights ranging from 1 to 6 depending on the occupational group in which they occurred.

Indicator 6 – Terminations

Measures whether designated groups are adversely affected by the employer's termination activities. It compares the percentage of terminations of each designated group as a proportion of the group's representation in the employer's workforce to the percentage of total terminations divided by the total number of employees. The expectation is that designated groups are not disproportionately terminated compared to their representation in the organization.

Part VIII

Provision of Culturally and Socially Responsive Programs and Services

Health and social service organizations are people oriented. Their purpose is to preserve or improve the quality of life for individuals, families, groups, communities and the larger community. They intervene before or after problem situations arise. They care for and provide support to people in communities through an array of programs and services. They support healthy conditions and solutions.

The increasing cultural and racial diversity of Manitoba's population is challenging organizations, workers and volunteers to become culturally responsive in meeting community needs.

The increasing cultural and racial diversity of Manitoba's population is challenging organizations, workers and volunteers to become culturally responsive in meeting community needs. Organizations have become increasingly aware of the relationship of cultural dynamics to service response and quality of service outcomes.

Adapting programs and services to meet the needs of a population that is made up of many diverse ethno-cultural communities and identities is an ongoing process that is well served by community development processes. Ethno-cultural communities are key sources of information in these processes.

Notwithstanding, Canadian values and expectations of human rights and respect for human dignity apply. For example, violence against women and sexual harassment are against the principles of Canadian human rights and are unlawful.

Becoming Culturally Responsive: Attributes

- ◆ An appreciation and valuing of diversity and equity
- ◆ An understanding of diversity within and between cultures
- ◆ Capacity for self-assessment
- ◆ Awareness of the dynamics inherent when different cultures interact
- ◆ Ability to conduct cross-cultural assessments, understanding the needs and concerns of the client/patient/consumer
- ◆ Use of language that is respectful of people from diverse racial and cultural communities
- ◆ Practice behaviours that share power and knowledge with the client/patient/consumer through respectful communication
- ◆ Hearing not only the words but also being able to understand and interpret the cultural nuances of what is being communicated
- ◆ Capacity to assess the need for skilled interpreters

Important Considerations in Planning and Developing Culturally Responsive Programs and Services

Understanding the barriers that impede access to services is useful as organizations adapt programs and services or design new ones. The IWAM barrier analysis reported individual factors as well as structural barriers in the system from immigrant women's experience.

Individual Barriers

- ◆ language barriers,
- ◆ fear of the system,
- ◆ lack of information about services and lack of knowledge about Canadian laws,
- ◆ isolation,
- ◆ cultural patterns of help-seeking (minority groups may resist seeking services, fear of being seen accessing certain types of services),
- ◆ lack of funds for childcare and transportation and in some instance for services,
- ◆ lack of confidence, and
- ◆ discomfort with male staff, particularly in relation to personal issues.

Structural or Systemic Barriers

- ◆ lack of services in minority languages and lack of trained interpreters in mainstream organizations,
- ◆ problems with inter-cultural communication,
- ◆ lack of relevant services,
- ◆ real or perceived discriminatory behaviours by service providers, e.g., discriminatory attitudes of physicians and other health workers, overt or covert displays of prejudice and discrimination towards "diverse clients,"
- ◆ lack of culturally sensitive services (the manner in which services are delivered may be inappropriate for persons from particular cultural groups),
- ◆ organizational culture (impersonal services, general failure to assess the community's needs, failure to involve the community in planning and

decision-making processes, lack of formal and informal policies or practices to address the concerns of ethnic and racial minorities, and

- ◆ service availability factors such as inflexible hours of services, location, complex structures of physical facilities.

Useful Steps and Questions in Adapting Programs or Designing New Ones

Know Your Community

- ◆ Who lives in the community? What are their characteristics, e.g., ethnicity, country of origin, age, gender, education, culture – i.e., the demographics of the community?

Understand the Community You Want to Serve

- ◆ Who in the community are we here to serve, i.e., what is our target population? Is it a particular segment of the population, or is it the population at large?
- ◆ What are the unique characteristics of the segment of the population or the larger population that we want to serve? What is their demographic make-up? Their ethno-cultural make-up?
- ◆ How well do we understand their needs, their cultural beliefs and values, the type of structures that are comfortable to them, their communication styles, their language proficiency, their issues and their preferred solutions?
- ◆ What are our information sources – community leaders, the grassroots level, census data, program information?

Establish, Design or Re-design Your Programs

- ◆ How do we develop partnership with ethno-cultural communities and other community resources, e.g., agencies that work with immigrants, refugees and/or ethno-racial and cultural communities?
- ◆ Now that we understand the communities, how we can serve them more effectively?

- ◆ Do we need to use different approaches in our programs and services, e.g., more of a community development approach, structures that feel more comfortable, different ways of communicating and interacting?
- ◆ In what ways and how do we involve members from ethno-cultural communities (women and girls, men and boys) in program planning and development?
- ◆ How do we ensure that diverse opinions within the ethno-cultural communities are taken into account?
- ◆ Have we developed success indicators for each program and/or service (outputs and outcomes)?
- ◆ What is our timetable for making planned changes and for service and program evaluation?
- ◆ How will we monitor progress?
- ◆ Have we decided the mechanisms for program evaluation? Who will be involved in this process – staff, program participants, outside consultants?
- ◆ How will the results be used? By whom? For what purpose?

**Review Policies,
Procedures and
Standards of
Practice**

- ◆ Will our current policies, procedures and standards of service stand up to new or refined programs and services?
- ◆ What changes do we need to make in our policies, procedures and standards of service to guide program development and service delivery?
- ◆ What is our timetable for making planned changes?
- ◆ How will we monitor progress?
- ◆ To whom, and how will changes be communicated?

**Deliver Services
and Programs
in Culturally
Responsive Ways**

- ◆ What is our understanding of culturally responsive programs and services?
- ◆ How can we mirror this in our behaviour/practices and attitudes?
- ◆ What training have staff and volunteers had?
- ◆ What other ongoing training would be useful to staff and volunteers? Who decides? How?
- ◆ How can training be accessed? What does the organization see as its role in trying to get the needed training? Is this something that can be

done in partnership with other organizations? Who will take the lead? Who will decide? What mechanisms will be used to make this decision?

- ◆ What components will training include, e.g., self-awareness, building trusting and respectful relationships, identifying biases, recognizing and eliminating barriers, empowering communities?
- ◆ How will new staff and volunteers be brought on board? Will we need to provide training to them as well?
- ◆ How will we plan for this?
- ◆ Can we provide appropriate supports to enable respectful service provision, e.g., interpreter services? Is this possible within our current resources? Is this something that needs to be explored in partnership with other organizations as a systems issue, e.g., accessing funds?

**Measure and
Use Results for
Program and
Service
Refinements**

- ◆ What tools (program monitoring) do we have in place to measure results, e.g., client data, satisfaction surveys, records of complaints, client feedback?
- ◆ What mechanisms do we have in place to collate and study the results?
- ◆ What happens to the information collected? Who reviews it? When? How often?
- ◆ What do the results tell us? How do these measure up to our success indicators? Do we need to make refinements to get better results? When and how will that be done?

Examples of Monitoring and Measurement Methods

- ✓ Statistical information/client profile e.g., number of clients served reported by gender, type of communities, age, etc.
 - ✓ Personal experiences of staff and volunteers
 - ✓ Experiences of members from ethno-cultural communities
 - ✓ Focus group discussions
 - ✓ Surveys
 - ✓ Feedback forms
 - ✓ Feedback sought following group sessions
 - ✓ The number and type of biases removed from policy, program and procedures.
 - ✓ Informal comments
 - ✓ Data on who were denied service and the reasons
 - ✓ Complaints received, the nature of the complaints and from whom
- 

Promising Practices – Culturally Responsive Programs and Services

- ◆ Programs and services are developed in partnership with the target and client populations. Efforts are made to reach into ethno-cultural and racial communities and to include not just the known leaders but also those affected in the discussion and decision-making processes.
- ◆ Cultural and linguistic needs and expectations as indicated by the communities are considered in program design, e.g., approaches to services, standards of service.
- ◆ Steps are taken to remove barriers to access, e.g., when and where programs and services are provided, childcare, transportation, one-stop centres that provide a range of services.
- ◆ Interpreter services are provided as required by trained interpreters. Protocols of who provides translation services and under what circumstances are developed. Family members or friends are called upon to provide interpretation only when specifically requested by the client or patient.
- ◆ The environment is comfortable and inviting.
- ◆ Processes are open, accommodating and inclusive; people feel comfortable and welcome.
- ◆ Whether in a one-on-one situation or in a group program, interaction is respectful. The client, patient or group participant feels free to express himself/herself, in his/her own way, contributing to the discussion and to the decisions that are made. The practitioner listens actively, using empowering techniques, enabling the client, patient or participant to share power in decisions.

- ◆ New ideas are heard without prejudice or bias.
- ◆ The practitioner builds trust and mutual respect by being objective, hearing new ideas without pre-judgment.
- ◆ The practitioner does not assume that he/she knows the person based on group culture. He/she checks customs, beliefs and practices and accommodates to individual cultural needs, e.g., in the provision of health care.
- ◆ The practitioner provides information and education to enable the client, patient or group participant to make his/her own decisions, while providing necessary supports.
- ◆ Clients are matched to practitioner by language, ethnicity etc. where preferred. There is recognition by the organization that this practice may not work for, or be desired by everyone. Where this is the case, accommodation is made and another practitioner more suitable to the client or patient is provided.
- ◆ Gender considerations are taken into account, e.g., women, because of cultural or religious beliefs and/or the nature of presenting condition or situation may prefer a female doctor or counsellor.
- ◆ Where desired, communities are supported to provide local resources and supports.
- ◆ Staff reflect the make-up of the people being served.
- ◆ The communities being served participate in the evaluation process. They also participate in decisions on how the evaluation results will be used.

Part IX

Building on Successes

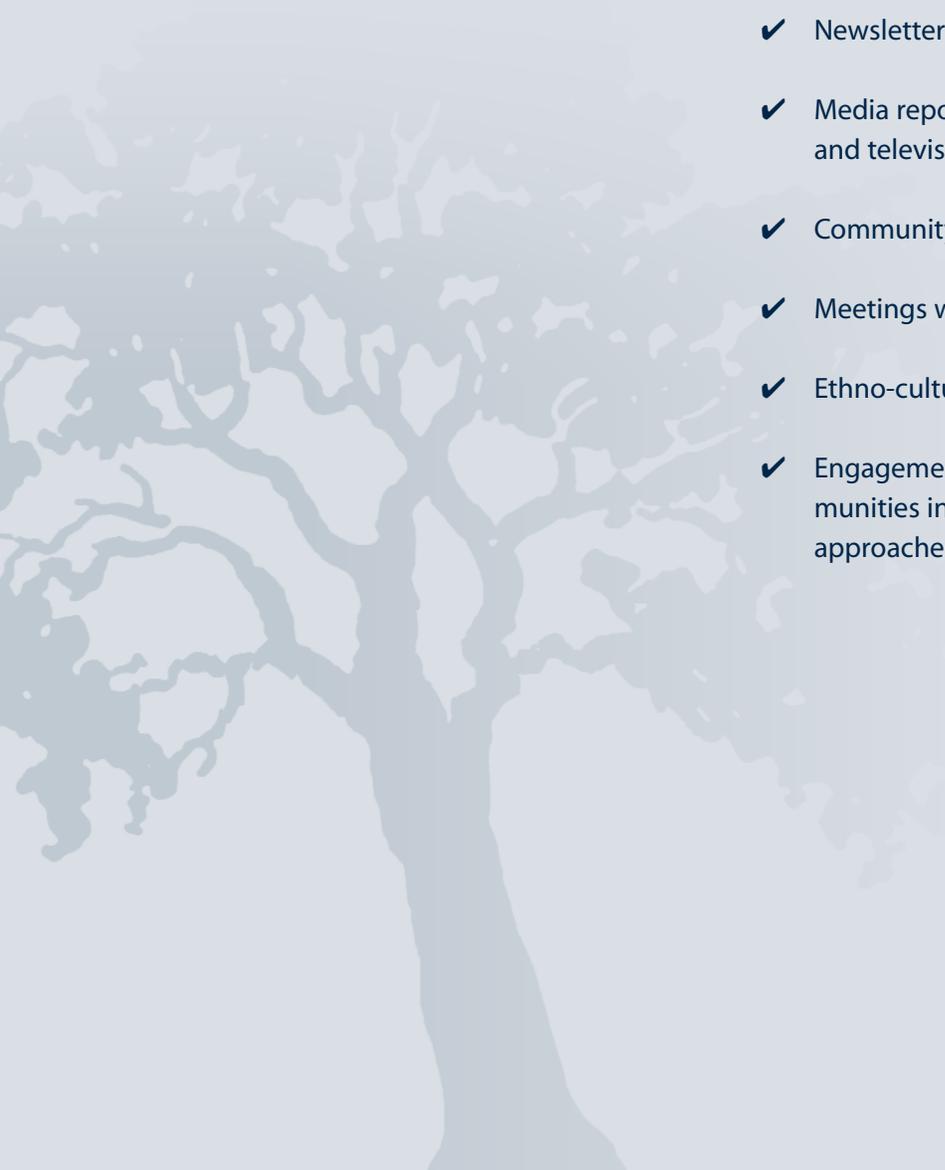
Sharing and celebrating successes internally give encouragement and support to workers and volunteers. Sharing and celebrating successes externally with other organizations, with ethno-cultural and racial communities and with the larger community convey the value and benefits of diversity and inclusion. Such activities further identify the organization as being open and inclusive. Other organizations learn of successful practices that they too can try.

Types of Information that are Useful to Share

- | | |
|---------------------------------------|---|
| Diversity Goals and Objectives | <ul style="list-style-type: none"> ◆ plans in place ◆ changes within the organization (staff composition, population served, accessibility features, etc.) ◆ follow-through on plans, results ◆ success stories |
| Policy and Program Directions | <ul style="list-style-type: none"> ◆ new policy and program directions and expected outcomes, e.g., a more representative staff, more effective service outcomes |
| Partnerships | <ul style="list-style-type: none"> ◆ partnerships with other organizations, with ethno-cultural communities and/or with organizations in the larger community |
| Representation and Engagement | <ul style="list-style-type: none"> ◆ on the board, on the executive committee, on the advisory committee ◆ on committees ◆ on staff |

- ◆ in other areas of the organization, e.g., engagement in developing organizational plans, in designing programs, in evaluating results
- Clients/Patients/Consumers**
- ◆ plans to reach out to, and serve ethno-cultural and racial communities
 - ◆ services provided
 - ◆ numbers and proportion of clients/patients/consumers from ethno-cultural and racial populations
 - ◆ interpreter services provided
 - ◆ client satisfaction
- Outreach**
- ◆ outreach to ethno-cultural and racial communities
 - ◆ consultations and partnerships with ethno-cultural and racial communities, including community development activities and results
- Training**
- ◆ cross-cultural training, participation by staff and volunteers, results
- Location**
- ◆ openness and accessibility

Ways of Sharing Successes

- ✓ Special celebratory events
 - ✓ Annual reports; Annual General Meetings (AGMs)
 - ✓ Newsletters
 - ✓ Media reports – ethnic newspapers, mainstream newspapers, radio and television, talk shows
 - ✓ Community events
 - ✓ Meetings with ethno-cultural and racial communities
 - ✓ Ethno-cultural events
 - ✓ Engagement of people from ethno-cultural and ethno-racial communities in sharing plans and successes/community development approaches
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 NEEDS Centre for War-Affected Families
 Mount Carmel Clinic and Women's Health Clinic
 CARICOM Arts & Crafts Inc.
 Local Investment Toward Employment (LITE)
 International Centre of Winnipeg
 Citizen Equity Committee, City of Winnipeg
 Guyanese Association
 Success Skills Centre
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 Success Skills Centre
 Nine Circles Community Health Centre
 Social Planning Council of Winnipeg, Committee for the
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 Winnipeg Child & Family Services
 Society for Manitoba with Disabilities
 Prairie Women's Health Centre of Excellence
 Manitoba Women's Advisory Council
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**IWAM
Network**

Organization

Addictions Foundation of Manitoba
 Canadian Human Rights Commission
 Citizen Equity Committee, City of Winnipeg
 Community Legal Education Association (CLEA)
 Employment Projects of Winnipeg
 French Immigrant Women Committee
 Hospice & Palliative Care Manitoba
 Immigrant and Refugee Community Organization
 of Manitoba, Inc. (IRCOM)
 Immigrant Women's Association of Manitoba (IWAM)
 Immigrant Women's Counselling Services, Nor'West
 Community Health Co-op
 International Centre of Winnipeg
 Legal Education Action Fund (LEAF)
 Manitoba Association of Rights and Liberties (MARL)
 Manitoba Ethno-cultural Advisory and Advocacy
 Council (MEAAC)
 Manitoba Human Rights Commission
 Manitoba Interfaith Immigration Council & Committee
 for the Elimination of Racism and Discrimination, Social
 Planning Council of Winnipeg
 Manitoba Multicultural Resources Centre
 Manitoba Women's Advisory Council
 Mount Carmel Clinic

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Women's Health Clinic	Jennifer Howard
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Useful Resources

Affiliation of Multicultural Societies and Services Agencies of British Columbia (AMSSA). *Community and Anti-Racism Resources*.

<http://www.amssa.org/>

Canadian Human Rights Commission. *Employment Equity Resources*.

http://www.chrc-ccdp.ca/publications/employment_equity-en.asp

Donner, Lisa. 2003. *Including Gender in Health Planning A Guide For Regional Health Authorities*. Winnipeg: Prairie Women's Health Centre of Excellence.

<http://www.pwhce.ca/gba.htm>

Manitoba Human Rights Commission. 2004. *Guidelines for Reasonable Accommodation*. <http://www.gov.mb.ca/hrc/english/publications/reasonableaccommodation.pdf>

Social Planning Council of Winnipeg. *Anti-Discrimination Policy*. Winnipeg: Social Planning Council of Winnipeg.

<http://www.spcw.mb.ca/>

Status of Women Canada. *Gender-Based Analysis Resources*.

http://www.swc-cfc.gc.ca/resources/gba/index_e.html

Van Ngo, Heui. 2000. *Cultural Competency: A Self-Assessment Guide for Human Service Organizations*. Calgary: Cultural Diverse Institute.

http://www.calgary.ca/docgallery/bu/community_strategies/fcss/cultural_competency_self_assesment_guide.pdf



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Inc. (IWAM), Winnipeg, Manitoba, Canada (July 2006).**

Principles and approaches contained in this tool may be applicable to other geographies and disciplines. Organizations are encouraged to use the information contained in this document to eradicate systemic barriers to workplace access by Canada's ethno-cultural, ethno-racial, religious and linguistic minorities.

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Inclusive Organizations

A Tool for Continuous Improvement
in Health and Social Service Agencies

