

EDI and Doctors Nova Scotia

An Overview of the 2022–24 EDI Framework

Issues of equity, diversity and inclusion (EDI) have always been important considerations in medicine. Physicians and the health-care system at large hold considerable social power and must therefore consider how this power is wielded in caring for patients. Equity, diversity and inclusion should also be considered in the context of physicians' work and support systems.

Doctors Nova Scotia (DNS) is committed to supporting equity-deserving physicians and patients in the province by amplifying their voices and ensuring they receive the support they need to thrive.

Guiding principles for engaging in EDI work at DNS

1. **Community engagement:** Doctors Nova Scotia staff and members will educate themselves rather than relying on the labour of members of equity-deserving people. We will respect and prioritize lived experience. We create space and engage with community members in an inclusive and transparent manner.
2. **Inclusive and accessible language:** Doctors Nova Scotia commits to using accessible and inclusive language in its communications to reduce barriers to participation and create a sense of belonging.
3. **Social determinants of health:** The social determinants of health (SDOH) are critical to understanding health-care priorities and health outcomes among both physicians and patients, but health inequities are driven more by individual and systemic discrimination than by the SDOH. Doctors Nova Scotia will work to address the SDOH in ways that will have a positive impact on health inequities for equity-deserving groups.
4. **Power and privilege:** Individuals and institutions in the health-care system each carry their own privileges and powers in relation to other system players. Doctors Nova Scotia will leverage both personal privilege and institutional power to effect positive change.
5. **Learning journeys in brave spaces:** Doctors Nova Scotia recognizes its EDI work will continuously evolve. Doctors Nova Scotia commits to creating brave spaces for this learning to occur.

Priorities

To ensure that the association sets achievable goals for EDI advancement, DNS identified the following three priorities for its EDI work over the next two years.

1. **Social determinants of health:** The association will work to address the SDOH in Nova Scotia through the actions outlined in its *Social Determinants of Health Framework*. It includes DNS leadership on harm reduction, gender affirming care and poverty screening, and focuses on actions specifically related to the SDOH in the context of clinical care provided by physicians.
2. **Anti-racism:** Doctors Nova Scotia's anti-racism work will take a three-pronged approach:
 - a. **Working toward Indigenous reconciliation** – The association will work with Indigenous physicians and communities, and physicians providing care to Indigenous populations, to support Mi'kmaw self-determination in health-care delivery and ensure that care is culturally appropriate, as well as expanding learning resources for practising physicians.
 - b. **Addressing anti-Black racism** – Doctors Nova Scotia will work with Black physicians and populations in Nova Scotia to eradicate anti-Black racism and improve working conditions

for Black physicians and health outcomes for Black people in general and African Nova Scotians in particular.

- c. **Supporting international medical graduates** – International medical graduates (IMGs) provide essential medical care in communities across the province, often with minimal institutional support. Doctors Nova Scotia will continue working with IMG communities and system stakeholders to provide more appropriate, accessible support for IMG physicians new to practising in the province.
3. **Gender equity:** The association will focus its gender equity work on two priority areas:
- a. **Gender affirming care** – Doctors Nova Scotia commits to supporting transgender patients by endorsing the provision of gender affirming care and supporting physicians by working to improve the fee codes that cover the provision of that care.
 - b. **Gender equity in pay and practice supports** – Non-male physicians continue to earn less than their male counterparts, despite increasing numbers of female and gender-diverse physicians. Doctors Nova Scotia will work to adapt remuneration models for primary care, physician resource planning and physician wellness to better support these providers.

Evaluation

Doctors Nova Scotia recognizes that EDI work is continuously evolving, and that regular evaluation in cooperation with communities and stakeholders is crucial to ensuring that the work is meeting needs and appropriately resourced. Staff will present a progress report at each meeting of the Board of Directors and will prepare an annual year-end report; the workplan may evolve based on the findings of these reports.

Additional EDI resources

Doctors Nova Scotia has created a variety of resources to assist physician members with bringing EDI work into their practice.

EDI Toolkit

This [interactive toolkit](#) is intended to help physicians continue their learning journey with equity, diversity and inclusion and apply those principles to their work. These guidelines are a starting point for DNS members who want to understand how they can apply an equity lens to their work, decision-making and interactions with others.

Safe Space poster

Take a stand against bigotry and discrimination and set the tone for respectful interactions between patients, providers and clinic staff with this “Safe Space” poster. Just [download the PDF](#), print it out and hang it in your clinic.

Managing and De-escalating Discrimination and Bigotry from Patients

Discriminatory or bigoted actions from patients may make other patients, clinic staff and physicians feel unsafe. Managing these situations requires particular skills and resources. [This downloadable guide](#) is intended to be one tool that can help physicians create safer practice spaces.