



# EDI(R)A Framework

Fostering a health-care system that is equitable, accessible  
and reflective of Nova Scotia's diverse communities

DOCTORS NOVA SCOTIA | 2025



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# Land Acknowledgement

**D**octors Nova Scotia (DNS) acknowledges that we all live and work in Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq. At DNS, we honour and respect the Indigenous Peoples of this land.

The term “unceded” is important because it indicates that the Mi'kmaq did not give up their rights to their land or resources despite colonization. As Settlers in Mi'kma'ki, we are grateful for the Treaties of Peace and Friendship with the Mi'kmaq people, which set out long-standing promises, mutual obligations and benefits for all parties involved. Treaties are about rights and about how to build peaceful, long-term relationships with each other.

At DNS, we know that we have much more to learn and do to embrace the Calls to Action from the Truth and

Reconciliation<sup>1</sup> Commission. We encourage everyone to engage with the Commission's Calls to Action, reflect on their own role in reconciliation and take meaningful steps toward change.

Doctors Nova Scotia recognizes that statements and acknowledgments are symbolic in nature and must be accompanied by meaningful work and action. Doctors Nova Scotia is committed to working with the Mi'kmaq and African Nova Scotian leaders, the medical community, physicians and system partners to disrupt systemic racism and decolonize the health-care system to improve the health-care experiences of Indigenous people in Nova Scotia. This work requires building and sustaining relationships grounded in trust, respect, and accountability. We are all Treaty people.

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## Acknowledgement of African Nova Scotian History

Doctors Nova Scotia acknowledges the deep and enduring presence of African Nova Scotian communities, whose history in this province spans more than 400 years. This history begins as early as 1605, with the founding of Port Royal, and includes the arrival of small populations of French and English Black settlers in the 1700s. It also includes the arrival of 3,500 Black Loyalist refugees from the American Revolution, 600 Jamaican Maroons exiled by the British, and more than 2,000 Black refugees from the War of 1812. In the early 20th century, a few hundred Black Caribbean migrants also arrived, seeking work in the mills and mines of Cape Breton.

African Nova Scotians are not settlers. They are a distinct people who have endured and resisted generations of systemic racism, oppression and colonialism. Despite this history of exclusion, African Nova Scotians have made, and continue to make, significant contributions to the social, cultural, economic and political fabric of Nova Scotia.

Understanding and honouring African Nova Scotian culture, history and heritage is essential to addressing anti-Black racism and advancing meaningful and lasting change in our province.



# Introduction

Doctors Nova Scotia has been on a transformative journey to embed equity<sup>2</sup>, diversity<sup>3</sup>, inclusion<sup>4</sup>, reconciliation and accessibility<sup>5</sup> – or EDI(R)A – into its organizational fabric.

Staff led the development and implementation of the association's inaugural *EDI Framework* (2022–24), laying a strong foundation for advancing EDI within the organization. The framework delivered valuable insights, helping DNS begin to address systemic inequities within the medical profession and health-care system. As a result, the organization focused on diversifying its staff, re-evaluating governance structures and embedding an EDI lens into all aspects of its work. Highlights include:

- supporting internationally trained physicians (ITPs) with a mentorship program, providing resources to help ITPs transition into practice, and participating in the College of Physicians and Surgeons of Nova Scotia's (CPSNS) Welcome Collaborative
- revamping the Medical Student Bursary to better support individuals from equity-deserving<sup>6</sup> communities

- diversifying DNS staff and Board of Directors
- creating the Senior Diversity Advisor role

Doctors Nova Scotia has also reviewed governance practices and internal policies, reimagined the annual general meeting and motion processes, funded safe prescribing courses for physicians, hosted harm reduction-themed CPD sessions at the annual conference, embedded EDI(R)A principles in the Physician Leadership Development Program (PLDP), and facilitated EDI(R)A training and discussions for staff, the Board and the Section of Physician Leaders. Additionally, DNS has made strides in ensuring voices from equity-deserving communities, particularly women, are amplified and featured in its internal and external communications materials, including *doctorsNS*, the association's monthly member magazine. Efforts to highlight physician-led initiatives that positively impact patients and communities have also been made. But these changes are not enough.

Building on the momentum of the 2022–24 *EDI Framework*, DNS is now renewing its commitment to this work. The 2025 *EDI(R)A Framework* reflects a deeper integration of EDI(R)A principles into every aspect of DNS's operations, decision-making and advocacy work. This renewal emphasizes continuous reflection, education and accountability to ensure meaningful progress within the association and all the people it touches.

At DNS, we are committed to fundamentally transforming our organization and supporting our membership and staff by embedding EDI(R)A into every level of our work. This effort ensures that equity and inclusion remain at the forefront of all our decisions and actions. By advancing inclusive policy, providing education and advocating for systemic change, we aim to foster a health-care system that is equitable, accessible and reflective of Nova Scotia's diverse communities. We recognize this as an ongoing process – one that requires us to reflect on our history and continue striving for improvement. We remain resolute in our commitment to this work, understanding that true progress requires an unwavering focus on both the lessons of the past and the opportunities of the future.

Doctors Nova Scotia acknowledges the lasting impact of colonization and the role the medical profession has played in systems that have caused harm, from residential schools to medical neglect and the continued presence of systemic racism in health care. We are committed to meaningful action guided by the Truth and Reconciliation Commission's Calls to Action; the Calls for Justice from the National Inquiry into Missing and Murdered Indigenous Women, Girls, and Two-Spirit People; and the principles of the United Nations Declaration on the Rights of Indigenous Peoples, Jordan's Principle and Joyce's Principle.

The association also recognizes the long-standing realities of anti-Black racism in Nova Scotia's health-care system, and the specific harms experienced by African Nova Scotian communities. This work calls for continued learning, advocacy and a deep commitment to change across the system. A clear example of this legacy is the forced displacement and medical neglect of Africville residents, where physicians and health systems failed to provide even the most basic care, contributing to long-term health inequities and deep mistrust that still exists today.

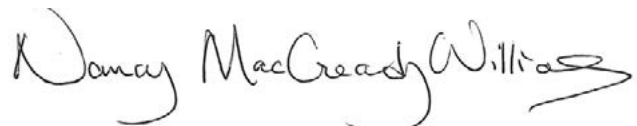
Doctors Nova Scotia recognizes that Truth and Reconciliation is distinct work and must be guided by respect, accountability and Indigenous self-determination. The association's Truth and Reconciliation work is separate from its EDI Committee, in recognition that reconciliation involves the transformation of relationships between Indigenous peoples, Settlers and institutions. It is not a subset of EDI, but a distinct and vital commitment. To acknowledge this, we are shifting our terminology from EDIA to EDI(R)A, placing reconciliation in parentheses to highlight its distinct importance and our responsibility to meaningfully engage with Indigenous communities. This language reflects our deepened commitment and accountability, particularly to the Mi'kmaw Nation and all Indigenous Peoples. Doctors Nova Scotia is com-

mitted to working in close relationship with the Mi'kmaw Nation, honouring principles of Nation-to-Nation relationship-building, and upholding the standard of "nothing about us without us" in all reconciliation efforts.

In 2025, the need for bold equity and inclusion work is more urgent than ever. Across North America we are witnessing the rise of anti-EDI rhetoric, largely fuelled by the current American president and his administration, who seek to dismantle these efforts. These narratives have real consequences, including increased anti-immigrant sentiment, rising hostility toward 2SLGBTQIA+ communities and efforts to pit marginalized groups against one another, including within our schools, workplaces and health-care spaces. As physicians and leaders in health care, DNS members have a critical role to play. Not only in caring for diverse patient populations, but in advocating for systems that uphold dignity, inclusion and access for all. Doctors Nova Scotia calls on its members to resist these divisive narratives, stand in solidarity with communities facing discrimination and actively support efforts to build trust, deliver culturally safe care and advance equity across the health-care system.

This framework weaves EDI(R)A principles into the fabric of the association's operations, advocacy efforts and community engagement initiatives. It serves as a guide for DNS to champion anti-racism<sup>7</sup>, anti-oppression<sup>8</sup>, equity and reconciliation by fostering a health-care environment that actively addresses systemic inequities and works to dismantle them. The framework prioritizes addressing systemic barriers and health inequities, focusing on how these are influenced by social and structural determinants of health. This work must be grounded in an intersectional approach that recognizes how overlapping identities and experiences shape inequities and access to care. Through this framework, DNS commits to establishing measurable goals with clear indicators and metrics to track progress, ensuring transparency and accountability to staff, members, partners and the communities we are dedicated to supporting.

Signed,



Nancy Macready-Williams, CEO



Heather Johnson, Board Chair



Basma Deef, Senior Diversity Advisor



## Areas of Focus

The areas of focus of the *EDI(R)A Framework* are central to the association's mission to drive systemic change and advance equity, diversity, inclusion, reconciliation and accessibility. Our work in these areas will aim to address disparities, promote inclusive practices and create a supportive environment for all. They reflect our commitment to fostering lasting and transformative change within the organization and the health-care system, ensuring that equity is at the core of everything we do.



The organization prioritizes comprehensive training that equips staff with the knowledge and tools needed to address systemic inequities, reframe their understanding and better support the evolving needs of diverse communities in Nova Scotia.

### Knowledge and awareness

Doctors Nova Scotia understands that the foundation of equity begins with knowledge. Building awareness and fostering understanding among staff, members and the wider community are essential for driving meaningful change and bridging knowledge gaps. The organization prioritizes comprehensive training that equips staff with the knowledge and tools needed to address systemic inequities, reframe their understanding and better support the evolving needs of diverse communities in Nova Scotia. This includes updates at staff meetings and curated “Monthly Minutes” (education brochures) that provide opportunities for reflection on significant equity-related events and their implications for the medical profession.

#### Doctors Nova Scotia will build knowledge and awareness by:

- **dedicating an annual staff connection day to EDI(R)A**, offering a deeper dive into critical topics in this space and underlining the importance of ongoing learning and engagement
- **developing a staff training plan** outlining regular staff training opportunities
- **encouraging ongoing staff development** and learning by including a performance goal focused on EDI(R)A in each employee’s annual evaluation, with a specific reflection question included in performance self-evaluations
- **creating and disseminating resources that empower physicians to implement inclusive practices**, including the development of a resource library (an EDI(R)A Toolkit, webinars addressing key topics, such as anti-racism, anti-oppression, culturally safe care, truth and reconciliation)

### Inclusive policies and systems

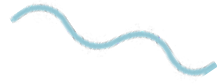
Achieving equity requires systemic changes to policies and practices that shape the organization and its interactions with the health-care system. Doctors Nova Scotia is dedicated to evaluating and reforming these structures to align with EDI(R)A principles.

#### Doctors Nova Scotia will develop and support inclusive policies by:

- **developing a member-led EDI(R)A committee**, which could help inform future work and the organization’s approach and response to future motions
- **continuing to improve workplace policies, governance policies and other key documents** to reflect the association’s EDI(R)A commitments
- **continuing to improve its recruitment and hiring process** by acting to minimize bias and setting association metrics and goals
- **advocating for the implementation of inclusive systems across health-care settings**. The organization is committed to working collaboratively with Tajiikeimik, Nova Scotia Health (NSH) and IWK Health to implement systems that allow physicians to communicate their unique needs, ensuring that health-care delivery is equitable and inclusive
- **advocating for the development and implementation of inclusive policy across health-care settings**, specifically, NSH, IWK Health and the Department of Health and Wellness (DHW)
- **building on lessons learned from the 2024 DNS AGM, the association will strive to make it easier for members to contribute to the AGM motion process** by working closely with the governance committee to review the process for submitting and debating motions at the AGM and considerations for members who may not be familiar with Robert’s Rules of Order







## Supporting physicians

A thriving health-care system depends on the well-being and success of its physicians. At DNS, we are committed to an equity-based approach to supporting all physicians, ensuring that the unique needs of those from Indigenous and equity-deserving communities and ITPs are addressed. Recognizing the critical role ITPs play in mitigating health-care workforce shortages and serving under-served communities, DNS prioritizes recruitment, retention and advocacy to equip all physicians with the resources they need to succeed, while fostering a culture of inclusion and belonging.

### Doctors Nova Scotia will implement these supports by:

- **collaborating with partners such as Taji-keimik, the CPSNS, NSH and IWK Health to advocate for effective recruitment strategies, comprehensive onboarding processes and equitable licensure pathways** that align with EDI(R)A principles
- **partnering with regulatory bodies, government and community organizations and the Mi'kmaq of Nova Scotia to address systemic barriers**, create sustainable solutions and offer tailored resources for career development and long-term success
- **advocating for transparent conflict resolution processes within the health authorities**, identifying the association's role in supporting physicians throughout these processes to ensure fair and equitable outcomes
- **advocating for ITPs to be treated equitably** in recruitment, contract obligations and accountability, and onboarding processes, while promoting cultural humility and culturally appropriate care to meet the diverse needs of Nova Scotia's communities
- **collaborating with key partner organizations, including Taji-keimik, NSH, IWK Health and the DHW, to develop inclusive operational policies** that directly impact our members. Additionally, DNS will support physicians in identifying and implementing practice tools and resources that foster sustainable and successful clinical practices both professionally and personally

# Doctors Nova Scotia EDI(R)A Governance Structure

## INTERNAL

- Senior Leadership Team (SLT)
  - Katie Mallam, Director of Policy and Physician Wellness
  - Basma Deef, Senior Diversity Advisor
- Internal Committees:
  - Equity, Diversity and Inclusion Committee (EDIC)
  - Truth and Reconciliation Committee (TRC)

## PHYSICIAN-LED

- Board of Directors
  - Policy and Health Issues Committee (PHIC)
  - Member EDI(R)A Committee (launching Fall 2025)
- Doctors Nova Scotia Sections
  - Section of Physicians for Indigenous Health
  - Section of Black Physicians

Doctors Nova Scotia recognizes that advancing equity and inclusion in the medical profession and health-care system cannot be done in isolation. Meaningful change requires collaboration, shared responsibility and strong partnerships.

While DNS leads this work within our organization and membership, we rely on community organizations, advocacy groups and government bodies to ensure our efforts are informed, responsive and impactful. Through ongoing engagement, knowledge-sharing and collective action, we hope to continue to amplify diverse voices, address systemic barriers, and drive lasting change toward a more equitable and inclusive health-care system.



### Advocacy work

Advocacy and action are essential components of DNS's commitment to driving systemic change and amplifying the voices of marginalized communities. By forging strong relationships with advocacy organizations and taking a proactive stance on equity issues, the organization aims to promote meaningful change across Nova Scotia.

#### Doctors Nova Scotia will advocate for systemic change by:

- **establishing and strengthening connections with Mi'kmaq communities and advocacy organizations** through the EDI Committee and initiatives aligned with the Truth and Reconciliation Committee's organizational Calls to Action
- **aligning our advocacy efforts with communities and partners, ensuring that DNS uses its influence to invite and amplify diverse voices**, and ensure everyone who needs to be there has a seat at the table
- **partnering with advocacy groups to support initiatives that align with priority work**, including writing letters of support, providing funding for community-driven projects and collaborating on initiatives that promote anti-racism, equity and inclusion. These partnerships will enable the organization to extend its impact and support systemic change at a broader level.
- **continuing to advocate for gender-affirming care, harm reduction and poverty screening**, which are critical aspects of the social determinants of health. Doctors Nova Scotia remains committed to advocating for equitable health-care access and addressing systemic barriers.
- **promoting gender equity in pay practices and supports**, ensuring that DNS applies an equity lens in discussions within the Fee Committee and during negotiation conversations. By embedding equitable practices into the process, DNS aims to reduce pay disparities and advance gender equity for physicians in Nova Scotia.

### Community engagement

Engaging with local communities is vital to fostering trust, collaboration and reconciliation. Doctors Nova Scotia is devoted to building meaningful relationships with diverse communities across Nova Scotia, the Mi'kmaq nation and African Nova Scotian populations, to ensure that health-care services are culturally safe and equitable.

#### Doctors Nova Scotia will develop relationships with communities by:

- **dedicating a percentage of its sponsorship funds to support initiatives that align with EDI(R)A values**, directing resources toward causes that support equity-deserving communities. Staff will also be encouraged to participate in volunteer opportunities that contribute to local communities
- **working with local organizations to celebrate cultural diversity** and promote shared learning

By building relationships with African Nova Scotian and Mi'kmaq communities, the association aims to support initiatives that deliver culturally safe care and address the unique needs of these populations.

### Accountability and transparency

Transparency and accountability are essential to the success of the *EDI(R)A Framework*. Doctors Nova Scotia is dedicated to tracking, evaluating and sharing its progress to ensure that its initiatives remain impactful and aligned with its goals.

To maintain alignment with these principles, the identified EDI(R)A work will be embedded in the association's annual business plan, which is approved by the Board of Directors and reported on annually. Regular updates will be shared with members and partners, fostering an environment where feedback is actively encouraged and incorporated. Transparency will be further strengthened through the publication of progress updates every two years as part of the *EDI(R)A Commitments and Accountability Report*. This comprehensive overview will highlight advancements and identify areas for improvement, ensuring a structured and impactful approach to the EDI(R)A Framework.

To drive meaningful progress, Doctors Nova Scotia will prioritize equity reviews on high-impact policies and programs, such as the Respectful Workplace Policy, Board governance policies and the development of a DNS Response to International Conflict Framework.

Doctors Nova Scotia will develop an evaluation framework to clearly outline measurable outcomes and the rationale behind them. This structured assessment will include audits conducted by the Senior Diversity Advisor, who will validate the organization's efforts, offer recommendations for future actions, and ensure accountability to DNS members and system partners, and the communities they support. To complement this process, an annual review schedule will be created, to ensure that organizational practices align with the values of equity and inclusion. Each year, the DNS Board of Directors is presented with a business plan that outlines the intended work for the year. The framework will be included in the annual report to the Board to ensure the commitments of the framework are being achieved.

Additionally, establishing clear feedback mechanisms will empower members and staff to share their experiences and suggest improvements specifically related to EDI(R)A initiatives. An inclusive recruitment strategy is also underway to attract and retain diverse talent, further strengthening the association's commitment to representation and fostering an equitable and inclusive workplace culture.

By embedding these principles into its operations, DNS is taking meaningful steps to address inequities, advance reconciliation, and foster a culture of respect, diversity and inclusion. This work is ongoing, and the organization remains steadfast in its dedication to building a better future for all Nova Scotians.





# Measuring Impact

## Policy audits

Doctors Nova Scotia will conduct comprehensive reviews of its internal policies to ensure alignment with EDI(R)A principles. This includes identifying and addressing historical disadvantages, systemic racism, gaps in equity, accessibility and inclusion, with updates communicated to the Board. Progress will be tracked through a detailed report that documents the percentage of policies updated to address equity, accessibility and inclusion gaps, with results shared with DNS leadership and members annually.

## Feedback mechanisms for members and staff

Doctors Nova Scotia will incorporate additional equity-focused questions into the biennial Member Satisfaction Survey, allowing members to anonymously share their insights on organizational practices and suggest areas for improvement. A summary of the feedback will be included in the final Member Satisfaction Survey report. The number of submissions will be monitored, with key themes identified and addressed in the annual reports.

An environmental scan was completed in early 2025, providing DNS with valuable insights into staff engagement and learning interests. The findings highlighted a strong appetite among staff to be more engaged in EDI(R)A efforts, with particular interest in topics such as unconscious bias, allyship and inclusive practices. Building on these lessons, DNS will continue to integrate feedback mechanisms into our ongoing work, including through the annual anonymous employee survey. Staff feedback will be consistently gathered and used to inform organizational improvements, recognizing the importance of both member and staff voices in shaping the association's work.

## Community engagement targets

By 2027, DNS will host an event in collaboration with local organizations, particularly those from the Mi'kmaw, African Nova Scotian, 2SLGBTQIA+, immigrant and refugee, faith-based, and persons with disabilities communities, to strengthen relationships and foster culturally safe and anti-racist care practices. Doctors Nova Scotia will also allocate annual funding to support four community-led projects focused on reconciliation and equity. Community-led projects will be evaluated biennially for their effectiveness, including the number of people reached and feedback from community members.





# Conclusion

The *EDI(R)A Framework* represents the association's unwavering commitment to embedding equity, diversity, inclusion, reconciliation and accessibility into the DNA of our organization. We are committed to taking intentional, transformative steps to integrate these principles into every facet of our work. This framework ensures that our dedication to these values deepens each year, with a focus on creating lasting change that will positively affect our members, staff and Nova Scotians. With each action, we move closer to a health-care environment where all individuals are not only welcomed but fully supported, empowered and honoured.

# Glossary



## 1. Reconciliation

Refers to Indigenous reconciliation. The effort made by individuals, groups, institutions and government to acknowledge past and ongoing effects of colonization on Indigenous Peoples and action to establish and maintain respectful relationships between Indigenous and non-Indigenous communities. In Canada, reconciliation is an ongoing process that involves addressing past harms and giving power back to First Nations, Métis and Inuit communities.

## 2. Equity

Where everyone is treated according to their diverse needs in a way that enables all people to participate, perform and engage to the same extent.

## 3. Diversity

Diversity is about the individual. It is about the variety of unique dimensions, qualities and characteristics we all possess, and the mix that occurs in any group of people. Race, ethnicity, age, gender, sexual orientation, religious beliefs, economic status, physical abilities, life experiences and other perspectives can make up individual diversity. Diversity is a fact, and inclusion is a choice.

## 4. Inclusion

Inclusion is creating a culture that embraces, respects, accepts and values diversity. It is a mindful and equitable effort to meet individual needs, so everyone feels valued, respected and able to contribute to their fullest potential. Where diversity occurs naturally, creating the mix in the organization, inclusion is the choice that helps the mix work well together.

## 5. Accessibility

Refers to whether a building, facility, structure, program, activity, resource or product is readily usable, or the extent to which it is readily usable by a person with a disability.

## 6. Equity-deserving

Refers to groups of people who have been historically disadvantaged and under-represented. These groups include but are not limited to the four designated groups in Canada – women, visible minorities, Aboriginal Peoples and people with disabilities – as well as people in the LGBTQ2+ community/people with diverse gender identities and sexual orientations. Equity-deserving groups identify barriers and unequal access and actively seek social justice and reparation.

## 7. Anti-racism

An active effort to eliminate all forms of racism.

## 8. Anti-oppression

Strategies and actions that actively challenge existing intersectional inequities and injustices.

*All definitions sourced from the Canadian Centre for Diversity and Inclusion's Glossary of IDEA Terms (v.2, May 2023), [ccdi.ca/media/glossary-of-idea-terms-en.pdf](https://ccdi.ca/media/glossary-of-idea-terms-en.pdf)*

