



Diversity and Inclusion in Our Unions

Anti-Black Racism

March 2022





The National Union of Public and General Employees (NUPGE) is a family of 13 Component unions. Taken together, we are one of the largest unions in Canada. Most of our 425,000 members work to deliver public services of every kind to the citizens of their home provinces. We also have a large and growing number of members who work for private businesses.

The office of the National Union of Public and General Employees is on the traditional and unceded territory of the Algonquin peoples and is now home to many diverse First Nations, Inuit, and Métis peoples.

We recognize the crimes that have been committed and the harm that has been done and dedicate ourselves as a union to moving forward in partnership with Indigenous communities in a spirit of reconciliation and striving for justice.

Bert Blundon, President

Jason MacLean, Secretary-Treasurer



Anti-Black Racism

Though it is less discussed here than in the United States, anti-Black racism is present in Canada. While we are quick to pride ourselves on being the final destination of the Underground Railroad that helped Black slaves escape to freedom, we often forget that slavery existed in Canada too. In Canada, both Black and Indigenous people were used as slaves by British and French settlers, as well as by other Indigenous people.

In their paper, "Race and Incarceration: The Representation and Characteristics of Black People in Provincial Correctional Facilities in Ontario, Canada," Akwasi Owusu-Bempah, Maria Jung, Firdaous Sbaï, Andrew S. Wilton, and Fiona Kouyoumdjian breakdown the myth of Canadian history being free of anti-Black racism:

Common sentiment suggests that the violence, segregation and oppression experienced by Black people in America have not been a feature of the Canadian experience. In contrast with this rosy view, slavery was practiced in the colonies that would become Canada for over 200 years, and the subjugated status of Black people persisted long after its abolition. Canada's first prime minister, John A. Macdonald, rationalized keeping the death penalty based on the supposed threat that Black men posed to White women. In 1911, prime minister Wilfred Laurier signed an Order in Council prohibiting Black immigration to Canada. As successive Canadian governments sought to restrict Black immigration, the small population of Black people in Canada experienced discrimination, including segregation (both legal and de facto) in education, employment, and housing. This history has set the stage for the experience of more recent Black immigrants by creating a pervasive framework of anti-Black Racism.¹

Anti-Black racism persists in present day Canada. Statistics Canada's newest report on police-reported hate crime in Canada states that in 2020, the number of police-reported crimes motivated by a hatred of a race or ethnicity increased 80%, from 884 to 1,594.

Hate crimes targeting Black people saw the biggest increase, at 663 incidents (up from 345 in 2019), and they remain the most common kind of police-reported hate crime, at 26% of all hate crimes.² A recent study conducted by the Institute for Social Research, York University, in partnership with the Canadian Race Relations Foundation, found that 70% of Black Canadians face racism regularly or from time to time.³

Microaggressions and unconscious anti-Black racism

It's impossible to talk about anti-Black racism without talking about microaggressions. All people of colour face microaggressions in their daily lives. Black women in particular frequently encounter them in the workplace with regard to their hair styles (though Black men can also experience prejudice about their hair). Studies have shown that Black women face a stigma about natural hairstyles, as they are viewed as less professional than smooth hair.⁴ In the United States, California recently became the first state to legally protect the natural hair of Black students.

Currently, no organization is tracking instances of microaggressions or unconscious anti-Black racism, but examples are apparent in all areas of life. When instances are brought into the public eye, it has become common to label them "[insert situation] while Black." An example of running a business while Black occurred in Toronto in 2020.

Elias Restaurant, owned and operated by a Black couple, specializes in Afro-Caribbean food, and the majority of their clientele are Black people. In May 2020, the restaurant owners were served an unexpected notice of termination from the landlord and property manager. After unsuccessful attempts to negotiate, the restaurant owners took their case to court.

The lower court and Court of Appeal both found that the property owners' reason for terminating the lease was due to unconscious anti-Black racism. The restaurant owners had never missed a rent payment, even through the pandemic when only takeout service was offered. In addition, they were paying a substantially higher rent than the proposed amount for a prospective tenant the landlord and manager were planning to house in the Elias Restaurant space. Another example of the unconscious anti-Black racism in the case was that the landlord and manager testified that, compared to other businesses in the plaza, the restaurant didn't attract "like-minded family-oriented customers," but couldn't explain what they thought of as like-minded.⁵

Police checks and carding

Black people in Canada face an abundance of racism and microaggressions in their everyday lives. The practice of police checks or carding—where police stop citizens supposedly at random and collect their personal data (including details of physical appearance, address, and contact information)—disproportionately affects Black people. Though Ontario legislation implemented in 2017 prevents the police from conducting random checks, anti-racism advocates argue that the legislation doesn't go far enough, as police can always say they're collecting these details to gather evidence or investigate a crime. There is also nothing stopping police from collecting personal details when they pull someone over for a traffic stop.⁶

The legislation ensured that police chiefs are required to submit an annual report on carding (which was recommended to be released to the public within 6 months), but the *Toronto Star* found that more than half of Ontario's 47 police forces did not publish a 2017 or 2018 report with carding data. 24 forces across the province did not make their annual reports available for either year. Of the remaining 23, only 15 have reported both years; meaning only 15 out of 47 police forces are currently complying with the legislation and recommendations. Given the inconsistencies in the availability of reports, and the differing methodologies among police forces, it's unclear as to whether any real effort has been made to stop targeting Black people and other people of colour with carding.⁷

Black people overrepresented in arrests and prisons

In 2019, Public Safety Canada's annual report, *Corrections and Conditional*

Release Statistical Overview 2019, stated that, from 2014 to 2015, Black people made up 8.3% (1,895) of the total prison population, and in 2018 to 2019, it was 7.2% (1,692).⁸ The percentage of Black people in Canada is approximately 3.5%, meaning Black people are overrepresented in arrests and prisons.⁹ Unfortunately, there's no way to see more detailed data on the subject, as the only racial or ethnic data Statistics Canada collects is on Indigenous people in prison.¹⁰

In his book, "The Skin We're In: A Year of Black Resistance and Power", Desmond Cole shares statistics pertaining to Ontario's Special Investigations Unit (SIU), the independent civilian agency with the power to both investigate and charge officials with a criminal offence. In 2016 and 2017, the SIU conducted 296 investigations and charged officers in 17 cases, meaning 94% of officers involved in the incidents did not face charges. In its 32-year history, the SIU has laid charges of culpable homicide 19 times; only 1 of those charges resulted in a conviction. Additionally, until 2017 the SIU threshold for "serious injury" was so high that thousands of police-inflicted injuries were never investigated. Governments do not keep comprehensive data about police killings or police-inflicted injury. And the SIU is not obligated to inform the public (and chooses not to) on most of its active investigations, which makes it difficult to get a complete picture of police violence.¹¹

Since governments do not collect statistics on the race of people placed under arrest, and the police often feel no obligation to release their data, we are forced to look at data from other countries. Comparable data from the US tells us that cannabis use is similar across racial groups.¹² However, when Akwasi Owusu-Bempah and Alex Luscombe compared police data from 5 capital cities in Canada, they found that Black and Indigenous people are overrepresented amongst those arrested for cannabis possession (with the exception of Halifax, where only Black people were overrepresented).¹³ In 2019, the federal government created a program to pardon Canadians with criminal records for simple marijuana possession. As of October 2021, only 484 people have been pardoned.¹⁴

Anti-Black racism in health care

Canada lags significantly behind other western countries when it comes to collecting race-based data, particularly race-based data in health care and health research. But pretending a problem doesn't exist due to a lack of data doesn't make the problem go away. A recent study reported that 91% of Black Canadians think racism is a problem within the health care system.¹⁵

A 2019 study reviewed 1,921 papers for data on breast and cervical cancer in women. Only 23 of the papers reviewed included health data specific to Black women. In her essay, "Black women's health matters," Caitlin Dunne wrote:

Black women in Canada faced barriers to health care predominantly related to lower screening rates rather than access to treatment. This is concerning because data from the United States and the United Kingdom indicate that Black women are more likely to die of cancer than their White counterparts.¹⁶

Cancers aren't the only health condition where we see discrimination towards Black people. In their paper, "Black-White health inequalities in Canada," Gerry Veenstra and Andrew C. Patterson found that Black-white health inequalities in Canada are remarkably consistent with research on Black-white health inequalities in the United States. Some of the conditions more prevalent in Black populations were diabetes and hypertension:

We conclude that high rates of diabetes and hypertension among Black Canadians may stem from experiences of racism in everyday life, low rates of heart disease and cancer among Black Canadians may reflect survival bias and low rates of fair/poor mental health among Black Canadian women represent a mental health paradox similar to the one that exists for African Americans in the United States.¹⁷

Barriers to affordable, healthy food are one of the contributing factors to poor health. Food insecurity (being without reliable access to a sufficient quantity of affordable, nutritious food) affects 1 in 8 households in Canada and disproportionately affects Black households. 28.4% of Black households are food insecure, and 36.6% of Black children live in food insecure households.¹⁸ Over time, food insecurity can be linked to the increased likelihood of developing physical and mental chronic diseases.¹⁹

Anti-Black racism impacts both directly on the health of Black people by contributing to poor health but also acts as a diagnostic barrier that prevents Black people from getting proper treatment for their conditions. In the study, "Behind the times: revisiting endometriosis and race," Olga Bougie, Jenna Healey, and Sukhbir S. Singh describe the

historical bias of treating endometriosis as a disease experienced by white women living in high-income families. This bias contributed to years of misdiagnosis for Black women.²⁰ In the study, “Endometriosis in the black woman,” D.L. Chatman found that in a sample of 190 Black women, many of whom had been diagnosed and treated for pelvic inflammatory disease, 21% actually had endometriosis.²¹

The very health of Black people is impacted by systemic racism in Canada. Liben Gebremikael, Executive Director at TAIBU Community Health Centre in Toronto, said

biological determinants are insufficient to explain these (health) disparities. They result from long-standing systems of oppression and bias which have subjected people of colour to discrimination in the healthcare setting, decreased access to medical care and healthy food, unsafe working conditions, mass incarceration, exposure to pollution and noise and the toxic effects of stress.²²

Biases about Black pain

Many Black people are used to hiding their pain or masking their reactions in order to be taken seriously in hospital settings. Serena Thompson, vice-president of the Sickle Cell Association of Ontario, has shared that, even when experiencing severe pain from the condition, she still gets out of her pyjamas and brushes her hair before the ambulance arrives. She stated: “I would notice that we don’t get treated right. They wouldn’t give us the right medication, or the right dosage, because they think we’re going to get addicted.”²³ The assumption that Black sickle cell patients—or any Black patient—is only at the hospital because they’re a drug addict is an example of systemic racism.

Because we don’t have access to a full spectrum of Canadian data, we must turn to US sources to learn more about racial bias in health care. A 2016 study surveyed medical students’ beliefs about biological differences between Black people and white people. Disturbingly, 20% of participants believe that, compared to white people, Black people have less sensitive nerve endings, 39% believe Black people’s blood coagulates more quickly, and 58% believe Black people’s skin is thicker.²⁴ These biases contribute to why Black people seeking pain medication are more likely to be judged as drug addicts. Even if medical professionals don’t consciously assume most Black people are drug addicts, medical beliefs they think are factual come into play; i.e., Black people’s skin is thicker and their nerve endings are less sensitive, therefore they don’t feel pain as strongly as white people, and so, they must not really need pain medication for pain.

Government and leaders in health care cannot pretend that the idea of inequality in health care is a new revelation. The Ontario Human Rights Commission published a paper detailing racial inequality in access to health care services in 2004:

The evidence of inequality in the health sector is generally very subtle. The challenge, then, is to distinguish between all the factors at play in ethnocultural health differences.

Though access to health care poses subtle discrimination problems, such problems can often be more difficult to remedy than overt discrimination. As Mock and Laufer have stated: "Racism is systemic. The individual need not personally or consciously do anything to maintain institutional racism but if nothing is done to actively oppose racism, nothing will change."²⁵

Studies detailing specific, pervasive examples of anti-Black racism in health care have been in publications for decades. The regular collection of race-based health data would make the inequality more obvious, which is precisely why it's needed. But given how data collection has historically been used to persecute equity-seeking groups, the data collection must be done in partnership with Black researchers and Black professionals in key decision-making roles in all parts of the data collection process. Furthermore, the data should contribute to bettering the entire continuum of care so Black people face no barrier in any part of health care.

Anti-Black racism and mental health

Mental health discussions are often pushed aside in favour of treating physical health, but the inequalities Black people face when trying to access mental health services cannot be overlooked. Overt forms of anti-Black racism are an obvious stressor on Black people's mental health. But on a more insidious level, systemic racism also plays a role. It's due to anti-Black racism that Black people are more likely to face barriers in education, housing, and employment, which all affect mental health.

A study of 4,707 Black people living in Canada found that, between 2001 and 2014, only 38.3% of participants who self-rated themselves as having poor or fair mental health used mental health services in the past year, compared with 50.8% of white people in the same self-rated categories and who live in Canada. The authors of the paper speculated that the reluctance of Black people (and other racialized people living in Canada) to seek out mental health services may be due to shame and stigma, a lack of culturally sensitive mental health material, and institutionalized racism.²⁶ Another limiting factor may be income, as Black people are statistically more likely to be working in low-income or precarious jobs that don't have a benefit plan and/or don't pay enough to access mental health services.

A 2005 study conducted in Montreal found that Afro-Canadian patients admitted to the hospital with psychosis were more likely than their Euro-Canadian or Asian-Canadian counterparts to be brought to emergency psychiatric services by police or ambulance. The study also stated that the findings could not be explained by age, gender, marital status, or number of psychotic symptoms.²⁷ Dr. Christopher Morgan, founder of the Black Health Alliance, has pointed out the discrepancy in wait times between Black and non-Black patients for access to mental health services. Morgan found that, “whereas people outside of the Black community with similar conditions have typical access points to mental health services within 3–6 months. In the case of Black folk, it’s often 16–18 months and it’s often through police incarceration.”²⁸

A 2018 survey of 328 Black Canadians found that 35.4% were experiencing significant psychological distress, 34.2% of whom never sought mental health services. The same survey found that 60% of participants would be more willing to use mental health services if the mental health professional were Black, and that 95.1% felt that the underutilization of mental health services by Black Canadians was an issue that needed to be addressed.²⁹

In their report, *The Case for Diversity: Building the Case to Improve Mental Health Services for Immigrant, Refugee, Ethno-cultural and Racialized Populations*, Dr. Kwame McKenzie, Dr. Branka Agic, Andrew Tuck, and Michael Antwi examined Canadian published research on the mental health of immigrants, refugees, ethno-cultural and racialized peoples in Canada. They found that

most other service use and incidence data in Canada mirror findings from the United States and the United Kingdom. Therefore, there is no reason to believe that the results stemming from persistent disparities in mental health would be any different in Canada than in either of these countries.

. . . International research demonstrates that targeted, culturally adapted programs and psychotherapies can help reduce overall costs. Furthermore, programs that take into consideration the diversity of their participants are beneficial because they increase client satisfaction and compliance and produce better health outcomes. Ultimately, by working to reduce disparities in access to services, the appropriateness of services used and mental health outcomes, Canada can reduce overall system costs.³⁰

Code-switching as a survival technique

Code-switching was first coined by sociolinguist Einar Haugen in 1954, but it was alluded to by W.E.B Dubois in his 1903 book, *The Souls of Black Folk*.³¹ *The Harvard Business Review* defines code-switching as

adjusting one's style of speech, appearance, behavior, and expression in ways that will optimize the comfort of others in exchange for fair treatment, quality service, and employment opportunities. Research suggests that code-switching often occurs in spaces where negative stereotypes of black people run counter to what are considered "appropriate" behaviors and norms for a specific environment.³²

Code-switching can have many advantages for members of equity-seeking groups. It can increase the likelihood of getting hired and getting promoted, and distance the individual from negative stereotypes about their race and gender identity, etc. Many Black people use code-switching at work, but research and anecdotal evidence demonstrate that code-switching can have negative psychological effects.

It can be exhausting to constantly modify one's behaviour, appearance, voice, posture, and facial expressions, etc. This mental load can cause poor performance at work and burnout. Many Black people have also reported feeling a sense of shame or disappointment that they can't be their "authentic self" in the workplace.³³ It can also lead to unpleasant accusations of "acting white" or being a "race traitor" from fellow Black people in the workplace who do not employ code-switching. Black people working in majority white or majority non-Black workplaces must individually decide whether code-switching is worth it, or how much or how often they are willing to code-switch.

In an interview with *The Globe and Mail*, Jefferson Darrell, founder of the consultancy group Breakfast Culture, spoke about his feelings about code-switching: "I feel angry with myself about it because I am sick and tired of adjusting my behaviour for the comfort of others, yet I am expected to sit in discomfort when people are 'casually racist' or 'casually homophobic' or other forms of xenophobia." In the same interview, Taheelah Cameron, a Black Toronto-based writer, describes code-switching as a tool to obtain autonomy:

To have been immersed in these environments where I needed to assimilate to have access proves how much power white people have. It's this idea that Black people cannot be multi-faceted. We're reduced to either 'good Blacks' or criminals, so I've code-switched as a means to protect myself. . . When I code-switch, it is not only about survival, but it's also about having autonomy, ownership and freedom.³⁴

Combined with mentally preparing to experience anti-Black racism and microaggressions, the act of code-switching can make the mere act of going to work exhausting for Black people.

Anti-Black racism in employment

Anti-Black racism is present in all aspects of life, including work life. A recent study found that 96% of Black Canadians believe racism is a problem in the workplace, with 78% believing it's a very serious problem in the workplace.³⁵ The old adage that one only needs to work hard to be successful in life does not capture the reality of people who face discrimination. A 2-year study conducted by researchers at the University of Toronto found that approximately 40% of racialized jobseekers *whiten* their resume by Anglicizing their names and downplaying their experience with racial groups so that their resumes aren't rejected by biased screeners.

The study created fake candidate profiles based on real candidates and submitted them to companies looking to hire. Only 10% of Black applicants with African names and experience with Black organizations received callbacks. When those same resumes were whitened by Anglicizing the names and removing their experience with Black organizations, the callback rate climbed to 25.5%. Even with companies that advertised claims of being pro-diversity, the odds of getting a callback were higher with whitened resumes.³⁶

In 2016, 21% of the Black population aged 25 to 59 lived in a low-income situation, compared with 12% of people of the same age group in the rest of the population.³⁷ This is due in part to racist hiring practices, the wage gap persisting, and the Black population having a higher unemployment rate (10%) than that of non-Black women (at 6%) and non-Black men (at 7%).

In 2016, the median wage gap between Black men born in Canada compared to non-Black men born in Canada was \$15,000. The median wage gap for Black women born in Canada compared to non-Black women born in Canada was approximately \$3,500 to \$7,200.³⁸ A low-income limits where people can live and whether they can buy property. It affects their physical health, access to healthy foods, access to mental health services, and whether they can afford post-secondary school for themselves or their children. It can also determine whether they can afford to aid their children with purchasing real estate, etc.

Multigenerational impact of low wages

When people have low wages, it affects future generations. In 2016, although 94% of Black youth aged 15 to 25 said that they would like to get a bachelor's degree or higher, only 60% thought that they could. While Black youth are as likely as other youth to have obtained their high school diploma, a gap becomes evident in post-secondary school data. In 2016, only 51% of Black men aged 23 to 27 had a post-secondary qualification, compared to 62%

of non-Black men in the same age group. Similarly, only 34% of Black women aged 23 to 27 had a post-secondary qualification, compared to 41% of non-Black women in the same age group. In their report, Statistics Canada stated that “for most socioeconomic variables, Black youth were at a disadvantage compared with other youth.”³⁹

For many Black people, this disadvantage continues into their senior years. In a paper produced by the Canadian Centre for Policy Alternatives, called *Colour-Coded Retirement: An intersectional analysis of retirement income and savings in Canada*, they reported that Black seniors’ average total income is \$36,700 for men and \$29,200 for women. This puts senior Black men’s income at 31% lower than senior white men’s income, and senior Black women’s income at 14% lower than senior white women’s income. This discrepancy also exists for senior Black immigrants whose average income is 25% lower than that of senior white immigrants.⁴⁰ This leaves many Black seniors with very little income to help their families or with few assets to pass onto them after death.

COVID-19 and anti-Black racism

Though the availability of data is not uniform across the country, there has been some research done regarding COVID-19 and Black people. The data from cities like Toronto and Ottawa shows that Black people living in Canada are far more likely to get sick and be hospitalized for COVID-19 than non-Black people living in Canada. Data from Toronto found that from May 20 to July 16, 2020, Black people accounted for 21% of COVID-19 cases, despite being just 9% of the city’s population.⁴¹ There is also anecdotal evidence to suggest that some Black people had poor health outcomes because they were told to stay at home unless their lips turned blue, something that does not happen to Black people.⁴²

There are a number of reasons for these results. Black people are more likely to be front-line workers who face public exposure and don’t have the option to work from home. They’re also more likely to work multiple low-wage jobs to make ends meet. As discussed in the previous section, Black people are more likely to have pre-existing medical conditions that make them more susceptible to COVID-19.

It has been well documented that the pandemic has exacerbated existing inequalities. Unfortunately, this means that Black people are experiencing more inequality, while at the same time they’re at higher risk of contracting COVID-19.

However, Black people with jobs that allow them to work from home have reported facing less racism and microaggressions in their daily work life due to reduced contact with their co-workers. Thus, as pandemic restrictions are lifted, some Black people may dread returning to in-person work. However, working from home also means fewer opportunities for casual conversations with employers that could highlight worker accomplishments and lead to career advancement.⁴³ As COVID-19 restrictions are lifted and workplaces reopen, employers should use this as an opportunity to listen to Black workers and other racialized workers and commit to eliminating racism from the workplace.

Environmental racism

The study of environmental racism is not new, but more of the general public are becoming aware of the concept given the focus on the environment and climate change. Dr. Ingrid Waldron describes environmental racism as

the idea that marginalized and racialized communities disproportionately live where they are affected by pollution, contamination, and the impacts of climate change, due to inequitable and unjust policies that are a result of historic and ongoing racism and colonialism. Furthermore, marginalized communities often lack political power for resisting the placement of industrial polluters in their communities through their exclusion from many environmental groups, decision-making boards, commissions, and regulatory bodies.⁴⁴

Canada is full of examples of environmental racism, both in the past and in the present, and primarily in ways that discriminate against Indigenous and Black people. A well-known example is Africville, where the City of Halifax erected several health hazards like a tar factory and fertilizer plant in the community. The city also approved a railway extension through the community, which endangered the residents' physical safety and created pollution. Africville residents paid taxes but were denied municipal services like garbage collection and public transportation.⁴⁵

But the damage to predominantly Black communities in Nova Scotia extends far beyond Africville. Dr. Waldron has research spanning from the 1950s to the present that shows Black communities in Shelburne, Lincolville, and the Prestons have higher rates of cancer, liver and kidney disorders, diabetes, heart disease, respiratory illnesses, skin rashes, and physiological stress — all linked to environmental hazards that predominantly Black communities have been near for decades.⁴⁶

The impacts of environmental racism are also linked to climate change. Research shows that BIPOC, people with disabilities, people living in poverty, and the elderly are particularly vulnerable to the effects of extreme weather and environmental disasters. This is partially due to the ability people have to evacuate and to pay for temporary accommodations, and whether they require health care services or medication in order to relocate.⁴⁷ Other possible links could be due to where low-income housing is built, the types of material used, and how often it undergoes maintenance.

Bill C-230, *An Act respecting the development of a national strategy to redress environmental racism*, would require the government to develop a national strategy to promote efforts across Canada to advance environmental justice and to assess, prevent, and address

environmental racism. Specifically, the strategy would be required to include a study of the reported links between race, socioeconomic status, and information and statistics relating to the location of environmental hazards. It would also require the involvement of community groups in environmental policy making.⁴⁸

First introduced in February 2020, and then brought back in September 2020, Bill C-230 died when parliament was dissolved for the 2021 election. In his 2021 mandate letter to the Minister of Environment and Climate Change, Prime Minister Justin Trudeau required Minister Guilbeault to “recognize the ‘right to a healthy environment’ in federal law and introduce legislation to require the development of an environmental justice strategy and the examination of the link between race, socio-economic status and exposure to environmental risk,” but did not specifically mention Bill C-230.

What can unions do?

The scope of anti-Black racism in Canada goes far beyond what has been discussed in this paper. Unions must play a part in eliminating anti-Black racism in Canada. NUPGE is dedicated to continuing the fight against overt racism and to educating its members on the pitfalls of microaggressions—which includes calling out and identifying microaggressions within our unions—so that every worker feels comfortable in their workplace. This includes re-evaluating union practices and traditions that might *other* members or prevent them from fully participating in the union or joining union management.

As individuals—both in our work lives and our personal lives—we must evaluate our thoughts and actions in a socio-historical context. Too often we do things or think a certain way just because it’s the way we’ve always done it. We must work to challenge our own conscious and unconscious biases that have their basis in anti-Black practices. Dr. Onye Nnorom, a family physician specializing in public health, said it best: "People saying that they are colour blind is not helpful at all, because it denies the inequities we experience as Black people in Canada."⁴⁹

In broader society, unions must support Black-led organizations (in their own communities and nationally) and advocate for policy changes that confront anti-Black racism and enrich the lives of Black people living in Canada. Anti-Black racism is not limited to using racist slurs when referring to Black people; it is also the passive support for, or tolerance of, ideas and policies that discriminate against Black people.⁵⁰

Unions have a duty to participate in dismantling racist systems that disadvantage Black people, Indigenous people, and other people of colour. Many of these systems have been in place longer than Canada has been a country and work together in both obvious and unconscious ways to discriminate against Black people living in Canada. If left as is, future generations of Black people in Canada will continue to be disadvantaged.

All policy changes, legislation, and research, etc. must be done in collaboration with Black professionals and Black communities. Non-Black people may have the best intentions, but all decisions that affect Black people must be informed directly by Black people. Black people as a group are not a monolith and are comprised of many different cultures. Black people are also part of other equity-seeking groups, such as LGBTQI2S+ communities, people with disabilities, women, immigrants, and refugees, etc. A one-size-fits-all solution will not work.

However, the task of identifying anti-Black racism and developing solutions must not be placed solely on Black people. Having to educate non-Black people about anti-Black racism can be exhausting and traumatizing to Black people. All efforts to combat anti-Black racism must be done in partnership with Black people but without overburdening them. How this partnership will work will differ depending on the scenario, the organization, and individuals involved.

Notes

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- ¹⁰ Owusu-Bempah. “Race and Incarceration: The Representation and Characteristics of Black People in Provincial Correctional Facilities in Ontario, Canada.”
- ¹¹ Desmond Cole, *The Skin We’re In: A Year of Black Resistance and Power* (Canada: Doubleday Canada, 2020).
- ¹² German Lopez, “Black and white Americans use drugs at similar rates. One group is punished more for it,” *Vox*, October 1, 2015, <https://www.vox.com/2015/3/17/8227569/war-on-drugs-racism>.
- ¹³ Akwasi Owusu-Bempah, Alex Luscombe, “Race, cannabis and the Canadian war on drugs: An examination of cannabis arrest data by race in five cities,” *International Journal of Drug Policy* vol. 91 (2021) <https://doi.org/10.1016/j.drugpo.2020.102937>.
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