**Opinion** 

## Racism in health system

## Expert Working Group gets at factor sidelined at Sinclair inquest

By: Annette Browne

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Brian Sinclair died in the emergency department of Health Sciences Centre in Winnipeg in September 2008. He had been referred there by a family physician. After being ignored by emergency room staff for 34 hours, he died of complications of a treatable bladder infection.

This week, almost six years later, the inquest into his death is wrapped up. What recommendations will come out of the inquest remains to be seen, but problems with the process itself meant key issues did not get the attention they deserved. This is a shame, because this case provided an important opportunity to talk about an issue that is too often ignored: systemic

discrimination in our health-care system.



Exhibit: National Inquiry into Missing and Murdered Indigenous Women and Girls		
Location/Phase: Part 3: Toronto		
Witness: Karry Lavallee		
Submitted by: Meredith Porter Commission		
Add'l info:		
Date:J	UN 1 2 2018	
Intials	I/D	Entered
63		19

At a public forum held in Winnipeg this past April, it was clear the harmful assumptions and stereotypes that were a factor in Brian Sinclair's death are part of a widespread problem. Participants shared their own experiences as aboriginal patients in the health-care system. Health researchers explained discriminatory assumptions frequently have significant effects on the range of decisions made in health care, including diagnostic and treatment decisions, and argued it is

incumbent upon the health-care sector to acknowledge and counteract the effects of discrimination and racism in health care.

At the inquest, many of the emergency room staff called as witnesses repeatedly said they were confident racism was not a factor in how Brian Sinclair was treated because they "treat everyone the same." The problem with this statement is it ignores that racism is a foundational aspect of Canada's colonial history.

While some colonial structures have eased up or been somewhat rearranged, racist attitudes and beliefs about aboriginal peoples have largely remained. There is no reason the health-care system can assume it is exempt from all the racist stereotypes and judgmental attitudes toward aboriginal people.

The Brian Sinclair case is not the first or only time the health-care community has been implicated concerning its treatment of Métis, Inuit and First Nations peoples.

While Indian health services under the federal government have a long history of racially segregating and providing substandard health care for status First Nations peoples, provincial governments have a similar history of neglecting and racializing health care for Métis, Inuit and non-status First Nations peoples. This history has a profound legacy in our mainstream health-care system today, and cases in which First Nations patients are neglected, patronized and otherwise treated as if they do not belong make this clear.

Sadly, the failure to name and address racism in Manitoba allows for the repetition of this cycle and is often connected to a desire to make our past appear less violent and unjust than it really was.

In response to the narrow focus of the Brian Sinclair inquest, leaders from the aboriginal community, physicians and nurses, legal and academic scholars and health researchers have come together to form an Expert Working Group. Our goals are to raise awareness of systemic discrimination in health care and the harm this causes patients; engage health-care policy-makers, professionals and educators in addressing the impacts of racism and discrimination in the health-care system; and foster dialogue to promote greater health equity for all Canadians.

The Expert Working Group argues the inquest facilitated staff in the health-care system to vent their problems and working conditions, but it prevented aboriginal representatives from examining the racialized conditions that led to Sinclair's death.

The inquest continues to do so by continuously undermining an analysis of systemic discrimination/racism as a major factor in this case.

While problems with ERs are urgent, substantial and obviously must be addressed, these were not the only factors at work in Sinclair's death.

In the coming months, we will be developing recommendations to address the issue of systemic discrimination and build working relationships with health-care professionals, educators and students in medical and nursing schools.

We are determined to ensure the opportunity to learn from the tragedy of Brian Sinclair's death is not lost.

Dr. Annette Browne is a professor at the School of Nursing at the University of British Columbia. She co-authored this with Prof. Brenda Gunn, Dr. Emma LaRocque, Dr. Barry Lavallee, Dr. Josée G. Lavoie, Dr. Mary Jane Logan McCallum and Dr. Brenda Restoule, all members of the Expert Working Group.

Article can be found here: <a href="https://www.winnipegfreepress.com/opinion/analysis/racism-in-health-system-262987221.html">https://www.winnipegfreepress.com/opinion/analysis/racism-in-health-system-262987221.html</a>