Promoting Health Equity:

Mental Health of Black Canadians Fund
Community Report 2018–2024

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The Promoting Health Equity: Mental Health of Black Canadians Fund (MHBC) Community Report was led by Natalie Bailey and was co-authored alongside Mathilde St-Louis-Deschênes. The authors gratefully acknowledge the contributions and guidance of the following colleagues from the Social Determinants of Health Division throughout the development of this report: Christine Soon, Ifrah Abdillahi, Jasmine Leroy, Khalid Said and, Mamadou Ndiaye, Manal Salibi, Sandrine Kankolongo, Sylvie Ngaleu, and Tolu Ogunyomi.

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Executive summary

Black people in Canada face significant social and economic challenges that have negative effects on their mental health. The Public Health Agency of Canada (PHAC)'s Promoting Health Equity: Mental Health of Black Canadians (MHBC) Fund supports Black-led, community-based projects that promote positive mental health. These projects aim to increase equity and address the factors that affect mental health, with a focus on anti-Black racism.

This report reflects the voices and mental health experiences of Black communities in Canada, using insights from:

- MHBC Working Group members
- the 15 projects funded by the MHBC Fund between 2018 and 2024

Funding recipients identified the 3 most important criteria for improving accessibility, mental health and wellness:

1. Sustainability
2. Access to mental health services from an organization with a similar cultural and racial identity
3. Projects with a cultural focus were also essential for developing trust with their participants

Projects with a cultural focus were also essential for developing trust with their participants.

The MHBC Fund has significantly enhanced the visibility of Black voices, creating change and opportunities for Black-led programming. It has helped to carry out mental health awareness initiatives that built relationships and raised awareness across Black communities by:

- delivering Black-led national conferences and community events
- creating Black-led, Black-focused, and Black-serving online networks

This has led to a rise in awareness of anti-Black racism and intersectional community-based initiatives.

Addressing mental health needs for Black communities in Canada, "which have been ignored and marginalized for several years"[1], extends beyond the MHBC Fund. This report recognizes the significance of collective endeavors to promote positive mental health across Black communities in Canada. The partnerships established through the MHBC Fund continue to play a role in shaping its current and future work.

[1] Act Now Conference Presentation 2023.

Empowering Black communities

The issue of mental health in Black communities is complex, and the report cannot fully capture the experiences of mental health among these communities. However, it does capture the urgency and attention needed to address their mental health needs.

The Promoting Health Equity: Mental Health of Black Canadians Fund (MHBC) supports Black-led, community-based mental health initiatives that aim to increase equity and address the underlying determinants of mental health, with a focus on anti-Black racism. This includes developing tools and resources that:

- can promote positive mental health
- are culturally relevant and decolonized
- respect individuals, family and community values and practices

The report highlights the impact of systemic inequities on the mental health of Black communities in Canada. It acknowledges the relationship between social determinants of health, particularly anti-Black racism and mental health outcomes. Mental health difficulties remain pervasive, and factors that act as a barrier to positive mental health will continue to severely impact Black communities. This is why funding initiatives that promote positive mental health in Black communities are crucial.

The MHBC Fund is the first federal program of its kind to target the unique mental health needs of Black communities in Canada. While the Fund aims to address this, the mental health needs of Black communities go beyond this program. This report acknowledges the importance of collaborative and collective efforts to help strengthen Black communities' actions towards positive mental health. It is critical that partnerships continue to expand on the work that the Fund has begun.

This report reflects the positive impact of what the Fund, and other mental health supports, can do for Black communities in Canada. It explains the impacts of community-based and community-led mental health initiatives and how effectively they support positive mental health outcomes. The report also presents different approaches that promote equity and address the underlying social determinants of mental health within the diverse Black communities across Canada.

Testimonials

These compelling quotes, shared by MHBC Fund project participants, illustrate the impact this Fund had on Black communities.[2]

> "I learned more about what it's like to be Black and also learned and heard other experiences. With what we talked about, I added changes/improvements to my life helping me cope and handle problems." — Project participant

> "As a larger-bodied woman, living with chronic immune illnesses, a big fear of mine attending the retreat was how were people going to perceive me, will I be able to do all the activities, will I feel, etc. And none of that happened. I felt welcomed and I felt loved. It was really discreet and authentic, and I really appreciated that because it reassured me that there was support if I needed it and there was no judgment. Everyone there made me feel safe and cared for and not like a burden. I am deeply grateful for that." — Project participant

> "I understand how systems of oppression influence our experiences, our mental health and our access receiving treatment—I think this will help me to navigate getting supports better. It empowered me to fight." — Project participant

> "I feel better already just from being in the room. I only cry in spaces with other Black people. If I cry, it's not because I'm sad, it's because I'm in my village and going back to existing." — Project participant

Background

Recognizing the unique challenges faced by Black people in Canada, including anti-Black racism and its impacts on mental health, the Public Health Agency of Canada (PHAC) launched the MHBC Fund in 2018.[3] This 5-year, $10 million investment[4] supported initiatives that aimed to increase health equity and address mental health and its determinants for Black people in Canada. Between 2018 and 2024, this investment supported 23 community-based projects across Canada.

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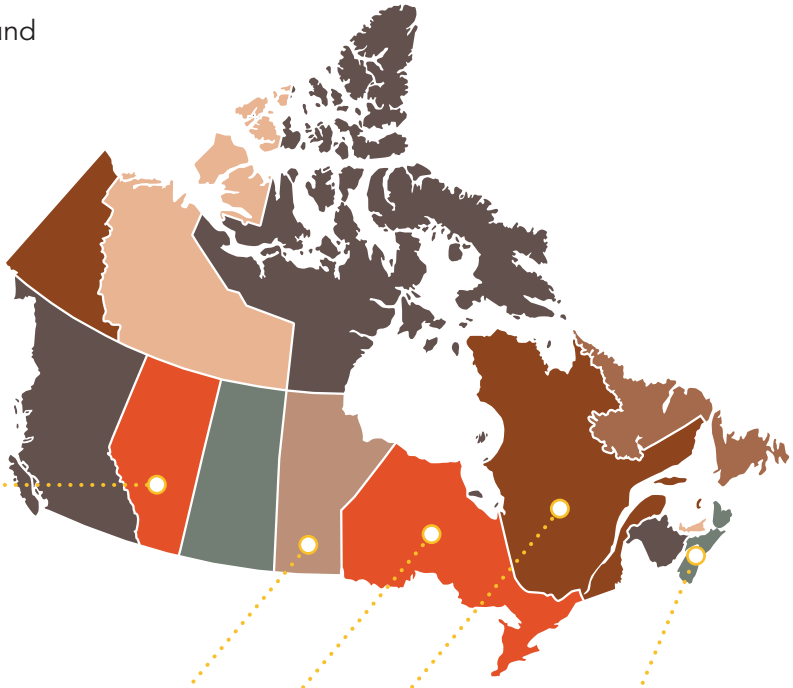
[2] Quotes are left anonymous to maintain confidentiality.

[3] Promoting Health Equity: Mental Health of Black Canadians Initiative—About the Initiative—Canada.ca

[4] The funding was redistributed and expended over a period of 6 years (2018 to 2024) to maximize impacts and support to Black Communities across Canada.

Diagram 1: Funded Projects Map

The various streams of the MHBC Fund have supported **23 projects across five provinces**.



Alberta

- University of Calgary
- Council for the Advancement of African Canadians (Africa Centre)
- Ribbon Rouge Foundation

Manitoba

- Barbados Association of Winnipeg Inc.

Ontario

- Kaleo Productions Inc.
- Aspire for Higher (2)
- Women's Health in Women's Hands Community Health Centre
- Black Creek Community Health Centre
- Black Health Alliance
- University of Ottawa
- TAIBU Community Health Centre (2)
- York University
- Across Boundaries—An Ethnoracial Mental Health Centre (in partnership with Adornment Stories)

Nova Scotia

- Dalhousie University
- African Diaspora Association of the Maritimes (ADAM)
- The Lesbian Gay Bisexual Youth Project Society (The Youth Project)

Quebec

- Regroupement des intervenant(e)s d'origine haïtienne
- Évènement Hoodstock (2)
- Université du Québec à Montréal
- Head and Hands / À deux Mains

The MHBC Fund created **2 funding streams:** the incubator stream and the implementation stream.

Through the **incubator stream**, 8 projects received short-term funding between 2019 to 2020. They supported capacity-building activities that helped design, develop, implement and evaluate projects that promote mental health and address its determinants for Black communities in Canada.

Through the **implementation stream**, 15 projects received funding between 2018 and 2024. They implemented, delivered and evaluated culturally focused, multi-year projects that promoted mental health and addressed its determinants for Black communities in Canada.[5] This included:

- 8 projects funded through Phase I
- 3 projects funded through the incubator stream that received additional funding to carry on to Phase II
- 3 projects funded through a sub-stream that focused on addressing the unique needs of Black 2SLGBTQIA+ populations

The implementation stream also funded a project through its Knowledge Mobilization Network sub-stream. This project supported knowledge mobilization and capacity building across all funded projects and within the broader community of Black practitioners, researchers, and organizations, and the people they serve.

In 2021, Budget 2021 allocated $100 million over 3 years to the Supporting the Mental Health of Those Most Affected by the COVID–19 Pandemic Fund. The Fund promoted mental health and prevented mental illness among populations disproportionately affected by the pandemic. This investment provided $4M to the MHBC Fund to support 9 more projects from previous applicants.

Learn more:

- The incubator stream
- The implementation stream
- The Black LGBTQI+ Canadians sub-stream
- The Knowledge Mobilization Network sub-stream
- The Supporting the Mental Health of Those Most Affected by the COVID–19 Pandemic Fund

[5] See Appendix B for a description of each funded project.

Objectives

The MHBC Fund aims to support community-based projects across Canada to develop more culturally-focused knowledge, capacity, and programs to improve mental health of Black communities in Canada. The objectives of the MHBC Fund are to increase:

- understanding of the unique barriers to and social determinants of mental health of Black people in Canada
- knowledge of effective, culturally-focused approaches and programs for improving mental health and addressing key social determinants for mental health of Black people in Canada
  - this includes a focus on youth, their families and community environments
- capacity within Black people in Canada to address barriers to mental health

Funding approach

Meaningful engagement and co-development with Black communities in Canada is a cornerstone of PHAC's approach to this program and for promoting health equity. When setting up the MHBC Fund, PHAC established the Mental Health of Black Canadians Working Group (MHBC Working Group). This group was comprised of 11 Black mental health practitioners, researchers, academics, and those with lived experience, all from within Canada.[6] Members have a range of experience and expertise with mental health and its intersections with anti-Black racism, and other social and economic issues facing Black communities.

This interdisciplinary group provided:

- strategic advice and recommendations on project funding through a co-development, decolonized approach
- guidance on capacity building activities
- knowledge mobilization support
- advice on strengthening evidence of mental health and its determinants for Black communities in Canada

[6] See Appendix C for the list of MHBC Working Group members

Program principles

The MHBC Fund is guided by the following fundamental principles, wherein anti-Black racism is considered an over-arching principle:

All projects funded under the MHBC Fund[7] were required to integrate these principles into their funding proposals and to report how they were implemented.

Learn more:

- Funded projects
- Objectives and principles of the Promoting Health Equity: Mental Health of Black Canadians Fund

[7] Promoting Health Equity: Mental Health Black Canadians Fund 2018–2024—Infographic (EN); Promoting Health Equity: Mental Health Black Canadians Fund 2018–2024—Infographic (FR)

Methods

This report reflects data and findings from the 15 implementation stream projects supported by the MHBC Fund. These projects had a specific focus on delivering and evaluating culturally appropriate mental health promotion interventions developed by and for Black communities across Canada. By narrowing the scope to this stream, PHAC aims to provide a focused analysis of projects actively engaging with Black populations. This approach ensures that the findings presented:

- are grounded in project activities and outcomes
- help to generate evidence on effective, community-led mental health strategies

Projects related to knowledge development, capacity building, or other ancillary streams have been excluded from this analysis to maintain clarity and thematic coherence.

This report shares a summary of results achieved and impacts of the 15 projects. It includes recommendations and areas for action reported by funding recipients to advance health equity and address the determinants of mental health for diverse Black communities across Canada.

PHAC used data and information from MHBC projects' annual, final, and evaluation reports from 2018 to 2024, as well as insights from working group members. The report examines data both quantitatively and qualitatively.

The quantitative approach focused on 5 key performance indicators. It facilitated understanding of who was reached through MHBC funded projects and the positive outcomes that were experienced.

5 key performance indicators

1. Number of participants engaged in MHBC Fund project activities
2. Percentage of project participants reporting increased knowledge about mental health and its determinants
3. Percentage of project participants reporting improved skills or ability to support positive mental health
4. Percentage of project participants reporting improvement in social environments to support positive mental health
5. Percentage of project participants reporting improvement of positive mental health

Qualitative approaches included an inductive thematic approach[8] in NVivo and literature reviews. These approaches included diverse perspectives in better understanding experiences of mental health among Black people in Canada. PHAC also identified experiences, feedback and testimonials from project staff and participants in project reports.

This report complements the work of TAIBU Community Health Centre's as part of their Amandla Olwazi—The Power of Knowledge project, funded under the MHBC Fund's Knowledge Mobilization Network.

[8] See Appendix A for the list of MHBC inductive thematic themes

Project **spotlights**

Anti-Racist Mental Health Care

Mental Health of Black Communities in the National Capital Region: Assessment, Prevention and Intervention Tools was led by Dr. Jude-Mary Cénat's research team at **The University of Ottawa**. In a publication about their project, the organization described it as "the first Canadian study on the prevalence and risk and protective factors associated with depressive symptoms among individuals from Black communities, exploring both the predictive roles of everyday racial discrimination and social support".[9] About 850 Black people between the ages of 15 and 40 took part in the first cycle of a longitudinal survey. As of March 2024, several scientific publications resulted from this longitudinal study and more are expected. Survey results outlined that among respondents:

- racial discrimination is the most important predictive factor for mental health issues, including:
  - PTSD
  - depression
  - anxiety
  - psychosomatic symptoms
  - suicidal ideation and behaviour
  - poor self-esteem

[9] Cénat, J. M., Kogan, C., Noorishad, P.-G., Hajizadeh, S., Dalexis, R. D., Ndengeyingoma, A., & Guerrier, M. (2021). **Prevalence and correlates of depression among Black individuals in Canada: The major role of everyday racial discrimination.** Depression Anxiety, 38, 886–895. https://doi.org/10.1002/da.23158

Kogan, C. S., Noorishad, P. G., Ndengeyingoma, A., Guerrier, M., & Cénat, J. M. (2022). **Prevalence and correlates of anxiety symptoms among Black people in Canada: A significant role for everyday racial discrimination and racial microaggressions.** Journal of affective disorders, 308, 545–553. https://doi.org/10.1016/j.jad.2022.04.110

Cénat, J. M., Dalexis, R. D., Darius, W. P., Kogan, C. S., & Guerrier, M. (2023). **Prevalence of Current PTSD Symptoms Among a Sample of Black Individuals Aged 15 to 40 in Canada: The Major Role of Everyday Racial Discrimination, Racial microaggressions, and Internalized Racism.** Canadian journal of psychiatry. Revue canadienne de psychiatrie, 68(3), 178–186. https://doi.org/10.1177/07067437221128462

- a majority face racial discrimination several times per month or almost on daily basis
- most racial discrimination is experienced in high school and university
- mental health is experienced differently according to identity factors, such as:
  - country of origin
  - gender
  - employment status

Dr. Cénat and his research team also developed several training modules as part of their project. The modules responded to an urgent need to provide education and awareness on anti-Black racism in Canada, especially in the context of the murder of George Floyd. As of April 2024, more than 100,000 members of the public have taken part in this training.

In addition, over 10,000 mental health professionals took the training "How to provide antiracist mental health care". This module taught mental health professionals about the needs of people from Black communities and how to provide anti-racist mental health care. Training evaluations suggest that 96% of participants increased their knowledge. The training is recognized internationally and is accredited by the American and the Canadian Psychological Associations.

> "I took your training on anti-racist CBT[10] practices. Then I took your on-line training. I realized that during my internships and my nine years of independent practice, I committed micro-aggressions against non-white clients. Sometimes I was even racist toward my clients, whom I liked and thought I was helping. The training is starting to make a real difference in the lives of my clients. My thanks to you and your team." — Psychologist, Montreal

Dr. Cénat's project also directly engaged Black youth and Black communities within the National Capital Region to discuss mental health during and after the COVID pandemic. Notable initiatives included:

- **Chatting in the City:** A podcast that opened the conversation about Black mental health and heard from Black youth.
- **My Mental Health, My Country and I:** A conference organized during Black Mental Health Week in 2022 and 2023. It sparked dialogue about mental health issues experienced by Black youth, and discussions around social, community and political participation. A high school participant spoke candidly about the challenges rooted in a history of discrimination and inequality that he and his peers face:

[10] Antiracist Cognitive-Behavioral Therapy (CBT).

> "Every day, I hear my parents say that I have to work twice as hard to have the same opportunities as my white classmates and friends. And sometimes, I'm just exhausted . . . We're all here today to ask the adults in our schools to remove racial barriers and obstacles. We're here because we believe Canada can do better." — Participant quote

- **The National Conference on Black Community Mental Health:** A conference that brought together community leaders and experts to share research and knowledge on Black mental health in October 2022. While the MHBC project ended in March 2024, a second conference was held in October 2024.

Learn more:

- How to provide antiracist mental health care
- Chatting in the City
- My Mental Health, My Country and I
- The National Conference on Black Community Mental Health

Restorative Justice Framework

21 Black men from the borough of Montreal-North participated in **Justice Hoodistique**, a restorative justice program by **Hoodstock**. This program aimed to constructively reintegrate into society Black people aged 18 to 64, who have been accused of a crime and have accepted responsibility for it. This project strengthened community ties and promoted personal accountability.

The project involved families and close acquaintances of both the accused and victims in psychosocial counselling, 2 healing retreats, the creation of a hoodistic circle, and mediation. Its core values were wellbeing, non-judgment, community, compassion and humanity. Using these values as a guide, the project helped participants rebuild their self-esteem and rehabilitate their self-image. The evaluation of the project, conducted in close collaboration with the SHERPA University Institute, highlighted many benefits of the project on participants and the community.

The healing retreats created a safe environment for self-reflection and experience sharing, especially through the warm welcome of the program staff and the kasàlà[11] workshop.

> "The fact that it's a Black environment […] We understand each other. We experience pretty much the same things day to day. Whether it's racism… we understand each other, we feel comfortable talking about it. There's no judgment. You understand." — Participant in the Justice Hoodstique Project

Some victims have agreed to actively participate in the mediation process. A project facilitator recounted how the project can touch the heart of victims and generate empathy.

> "What stood out, at the mediation, the same day, was really his wish that the accused be supported and helped in his healing process. Because what the victim was saying was that he had children who were almost the same age as the accused, so he just wanted him to get back on the right track." — Participant in the Justice Hoodstique Project

[11] The word kasàlà is used in a generic sense to refer to all panegyric poetry in Africa, addressed to oneself or to otherness.

Between the beginning and the end of the project, participants changed their practices to improve their mental health. Over the course of the project, they reported:

- to have stopped using alcohol or drugs
- consulting a psychotherapist or mental health professional (instead of doing nothing as stated at the beginning of the project)
- taking part in activities that makes them happy at the end of the project in a greater proportion
- an improvement in their mental health, especially for those who consider their health to be excellent, from 41% to 59%

After the project, one participant expressed the desire to give back to younger people and contribute to crime prevention in the community:

> "But for sure, as I was saying, also helping in the community, because I, like, I did some work in the end to make amends. I went, it's an organization I already knew, and I grew up there after all. It's [an organization], exactly, that's why I play basketball, it's for them, and it's a whole supportive community for young people. They have resources in place, day camps, things like that, so that really helps the young people. It's something I can give to the next person, to the future community." — Participant in the Justice Hoodstique Project

In the long term, Hoodstock hopes to include minors (12 to 17 years old) in their restorative justice program, and extend the reach to Greater Montreal and other Canadian cities.

Learn more:

- Hoodstock
- Justice Hoodistique

From Stress to Strength: Enhancing Black Youth Mental Health Through Physical Activity

The Aspire for Higher (A4H) Youth Mental Wellness Program is a culturally responsive initiative based in the Greater Toronto Area. It addressed the mental health challenges facing Black youth by integrating basketball into a holistic wellness curriculum. The program was developed in recognition of the social, emotional and systemic barriers Black youth face when accessing mental health support. It used basketball as an engagement strategy and a therapeutic tool, creating a safe and affirming space for youth to explore mental wellness, strengthen their coping skills, and build self-confidence.

From April 2021 to March 2024, the Youth Mental Wellness Program project successfully reached 423 youth between the ages of 11 and 16, including 194 Black-identifying participants. The program also trained 23 Black facilitators, ensuring the delivery of content was culturally aligned and relatable. Programming was delivered both in and out of school, allowing for greater flexibility and access. Youth attended weekly sessions that combined basketball training with discussions on mental health, emotional well-being and Black identity.

Basketball played a critical role in the success of the program. It was chosen not just for its popularity, but because it holds cultural and emotional significance within Black communities. Basketball resonates with Black youth as a familiar and accessible form of self-expression, a symbol of aspiration, and a source of community pride. It creates a natural environment for building trust, teamwork, and discipline: qualities that align closely with mental wellness.[12]

In the context of A4H, basketball was more than recreation. It allowed youth to safely explore difficult topics like stress, discrimination and emotional vulnerability. By embedding mental health education into the structure of physical activity, the program was able to reduce stigma and make wellness discussions more approachable.

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[12] Offley Woodbine, O. X. (2014). *Black gods of the asphalt: street basketball, power, and embodied spirit* (Doctoral dissertation).

Evaluation findings demonstrate that the Youth Mental Wellness Program had a measurable, positive impact on participants. Black-identifying youth reported improvements in both mental and physical health, with 87% saying their mental health had improved by the end of the program. Participants described feeling better able to cope with stress, more physically fit, and more emotionally resilient (Figure 1). In addition to mental health benefits, youth also gained knowledge about Black history, cultural pride, and the impact of systemic racism on their lives. These elements helped to foster a stronger sense of identity and personal empowerment.

Over 90% of Black-identifying participants agreed that the program was relevant to their experiences, and 96% said they would recommend it to their peers. Youth expressed particular appreciation for the safe, open space A4H created where they could engage in meaningful discussions, ask questions, and feel seen and understood. The combination of physical activity and culturally relevant mental health education created a unique environment that resonated deeply with participants. Facilitators, many of whom were also Black, served as trusted mentors and role models. This further reinforced the program's values of leadership, authenticity and community care.

A4H has demonstrated that culturally grounded, sport-based programs can be a powerful tool for improving mental health outcomes among Black youth. By leveraging the popularity and significance of basketball, A4H created an environment where youth could learn, heal, and grow in ways that were engaging, affirming, and impactful. The program not only helped participants strengthen their mental and emotional well-being but also contributed to their physical health, identity development, and community connection.

As the Youth Mental Wellness Program continues to evolve, its model offers valuable insights for future youth wellness interventions. The success of the program reinforces the importance of culturally relevant programming, early intervention, and creating safe spaces where Black youth can thrive. With continued support and expansion, initiatives like A4H Youth Mental Wellness Program can transform how mental health support is delivered in Black communities and is centered on the belief that healing is possible.

Figure 1: Mean Ratings for Mental Health-Related Items on the Pre-Survey and Post-Survey

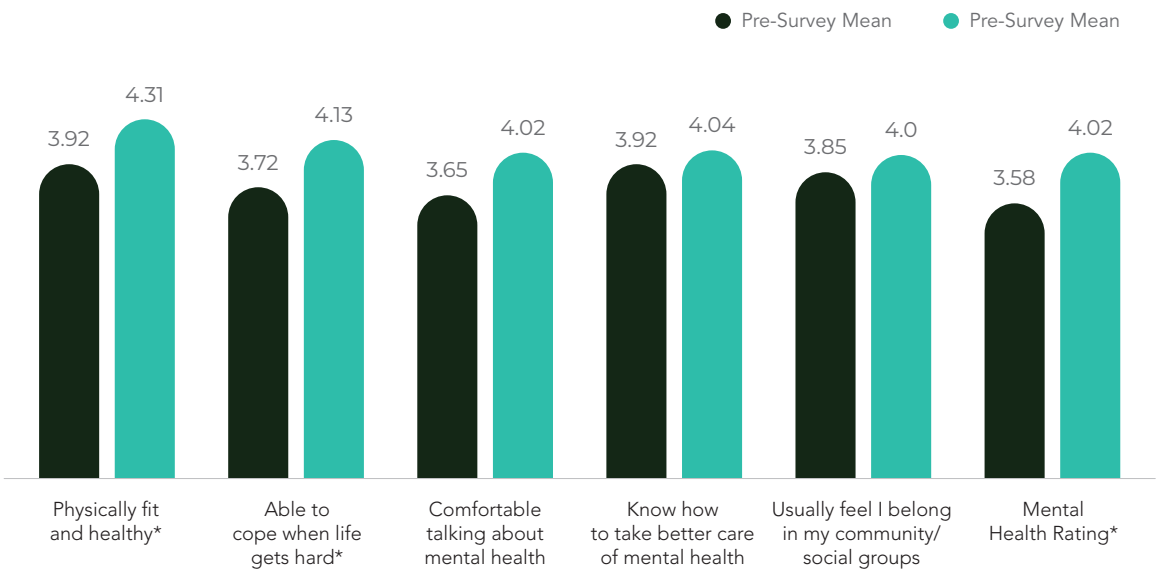


Figure 1 displays the means for the items that appeared on both the pre-survey and post-survey, with means ranging from 1 to 5, with higher means indicating greater endorsement of the item.

* Significant difference in scores on the pre- and post-survey.

> "I am physically fit and healthy, and I am better able to cope when life gets tough." — Participant quote

> "I liked that I got to learn about new mental health coping strategies and also how to deal with anti-Black racism." — Participant quote

Learn more:

- Aspire for Higher

Self-care for Black Women

Women's Health In Women's Hands is a community health centre for racialized women living in Toronto and surrounding municipalities. The health care team involved skilled professionals who specialize in the health and wellness needs of racialized women and prioritize those from African, Caribbean, Latin American and South Asian communities.

Their **Empowered African, Caribbean, and Black (ACB) Women's Wellness Gathering** project was funded from 2020 to 2024. This peer-led mental health intervention had a long-term goal of improving the mental health of ACB women and gender diverse participants that are 16 years and older. This project reached 481 ACB participants and included:

- successful series of community workshops
- collecting digital stories from peers
- creating a podcast series
- virtual talking circles with external guest facilitators
- submitting a book chapter to the University of Ottawa
- presenting at the University of Ottawa's Vulnerability, Trauma, Resilience and Culture Research Laboratory (V-TRaC) conference, about their book chapter called "Empowered ACB Women Wellness project"
- hosting an in-person event for participants to:
  - share the project overview and learnings
  - build community connection

The project recruited 36 ACB peer leaders and 9 advisory committee members. ACB women who participated in the project reported:

- improved knowledge of what affects their own mental health
- better understanding of the mental health needs of ACB women
- intending to use acquired knowledge in their professional activities regarding positive mental health and its determinants affecting Black people in Canada
- Increased accessibility to resources that support positive mental health

In reference to skills and abilities that support positive mental health, one participant shared:

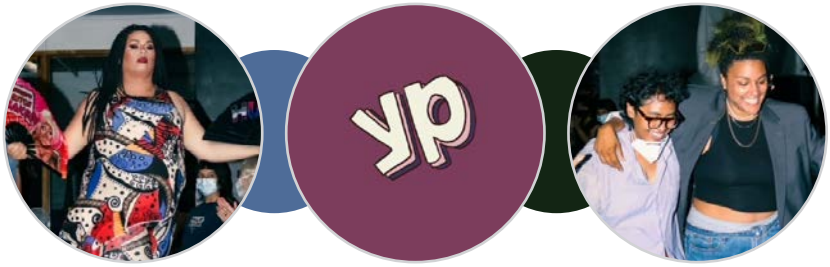
> "I really enjoyed the practice of gauging my current mental space or weak outlook. It provided a greater sense of self and allowed me to dig deeper into unprocessed emotions or feelings." — Participant quote

Some of the peer facilitators also expressed having gained confidence in facilitation skills. One stated:

> "It was such an affirming experience in that ... I think, prior to this, I was really doubting my facilitation skills. I was like, "Do I have it? But I got it!" And I think that through this experience, I was able to realize that this is something that I can do and not only can I do it, I'm pretty good at it. So, I would say that confidence was great." — Participant quote

Learn more:

- Women's Health in Women's Hands



Voices in Colour: Narrative-Based Mental Health Interventions for Black 2SLGBTQIA+ Youth

The **Ecosystems of Healing** project was led by **The Youth Project** and implemented from 2021 to 2024. It focused on promoting mental wellness and community resilience among African Nova Scotian and Black 2SLGBTQIA+ youth. The project was created in response to the systemic marginalization of Black 2SLGBTQIA+ people and the barriers to mental health resources they face, as well as over-consultation of these communities. The project centered creative expression, culturally focused interventions, and cultivating safe spaces.

The program engaged 440 participants in artistic, mentorship, and relationship-building activities across identity, age and experience. Activities included:

- multidisciplinary arts workshops
- a fashion show exploring intersectional identity (*The Myth of the Monolith*)
- community retreats
- culturally grounded events such as the "Beyoncé Sing-A-Long"

These activities allowed participants to process emotions, develop creative skill sets and build affirming peer networks. Facilitators removed barriers to participation by providing food, transportation and setting non-punitive attendance policies.

A significant outcome of the project was the development of new models for culturally focused mentorship and youth outreach, especially tailored to the needs of Black queer and trans youth. Project mentors and participants reported enhanced emotional regulation, increased confidence, and a stronger sense of community. They told us that having intentionally curated, closed spaces where Black 2SLGBTQIA+ youth could freely express themselves as transformative.

The project was also recognized at a municipal and provincial level. Notably, The Myth of the Monolith was honored in the Nova Scotia Legislature, an unprecedented moment of visibility for artistic programming led by Black queer and trans youth. Working with local artists, organizations and regional facilitators extended the project's reach into urban and rural communities.

Ecosystems of Healing was successful in creating community-led mental health interventions that are culturally and contextually meaningful. Participants overwhelmingly expressed a desire for extended and expanded programming. The project offers a compelling model for future youth mental health work that centers care, cultural focus and community trust.

Learn more:

- The Youth Project

Healing in Motion: ArTeMo and the Art of Afrocentric Mental Health

The **ArTeMo** project, spearheaded by **the Africa Centre** in Alberta, aimed to develop and test culturally informed interventions that:

- connect Black youth to their culture
- create a sense of belonging and identity
- enhance empowerment

The project also intended to increase cultural competency among organizations that provide services to at-risk Black youth.

From 2019 to 2022, the project hosted a variety of activities for Black youth and their families including:

- rap, paint, and poetry events
- engagement forums
- conversation cafes
- mentorship and employment support
- annual conferences

At the same time, institutional stakeholders like health and education service providers took part in training designed to reduce anti-Black bias and increase knowledge of mental health and its determinants.

Overall, the project reached 2,117 participants aged 6 to 65 years, online and in-person. The project worked with organizations such as 3 public schools in Edmonton, and the Alberta Black Therapists Network to deliver its programs. The Sexual Assault Centre of Edmonton also helped to create anti-Black racism tools and mental health education resources.

The project's outcomes demonstrate significant achievements:

- Africa Centre launched Western Canada's first free Black focused counselling clinic
- Over 90% of participants who completed post-event surveys reported learning new mental health skills

> For example, one youth participant reported applying the self-compassion skills acquired during the paint nights: "I learned this trick at one of the paint nights, the facilitator said this thing that stuck with me. So rather than saying "I suck at painting, or I suck at something", say "you are still learning, I am still learning, I am a learner of this skill" to kind of rephrase negative thoughts about yourself..."
> — Participant quote

- Conversation cafes and school-based guest facilitation sessions fostered safe, supportive environments that openly address racism and mental health
- 81% of conference attendees felt they have stronger social supports for mental health after attending the conference
- 77% of conference attendees acknowledged the conference helped decrease mental health stigma
- The mentorship program connected mentees with mental health mentors, resulting in tangible success stories including 2 mentees securing full-time employment
- 45 staff members received training to enhance support for 2SLGBTQIA+ youth, addressing intersectional needs within the community

The ArTeMo project shows how holistic, intergenerational and integrative mental health interventions can improve the psychological, emotional and social well-being of Black youth. Project learnings are being integrated into Africa Centre's counselling clinic to develop a more comprehensive mental health program.

Learn more:

- The Africa Centre
- The ArTeMo project (PDF, 3.1 MB)

MHBC Fund Knowledge Mobilization Network

The MHBC Fund's Knowledge Mobilization Network sub-stream funded the **TAIBU Community Health Centre's Amandla Olwazi—The Power of Knowledge project**. This project aimed to help share evidence and insights, and strengthen networks within and between Black communities.

Amandla Olwazi developed a website called the Black Wellness Network to support the program's knowledge mobilization initiative. This website mobilizes resources such as:

- more information on MHBC Fund projects
- the Project Stories Series and the MHBC Infographic Series, which were co-developed by PHAC and the TAIBU Community Health Centre
- centralized information and resources related to the mental health of Black communities

The project was guided by an advisory committee made up of staff and volunteers from MHBC Fund projects, as well as members of the research community and diverse Black communities. It was rooted in Afrocentric values and principles, and focused on connecting and exchanging knowledge between researchers, professionals, the public, and individuals seeking mental health supports. These exchanges were made through the Black Wellness Network website and during their annual ACT Now! conference held in March 2023 and March 2024.

The conferences aimed to bring together Black leaders, elders and youth, as well as academics, advocates and mental health professionals to address multifaceted mental health issues affecting Black communities. These exchanges fostered novel insights, resources and tools pertaining to the mental wellbeing of Black people across Canada. The conferences encouraged awareness and deeper comprehension of anti-Black racism and strengthening the fabric of communities.

In 2023, over 270 individuals attended the ACT Now! conference. The most represented sectors were:[13]

- mental health services (43%)
- community health (40%)
- grassroots organizations (32%)

[13] Act Now-Conference-Report-2023.pdf

In 2024, over 300 participants attended the ACT Now! conference, which included 260 in-person attendees and over 100 online attendees. The most represented sectors were:[14]

- mental health services (33%)
- community health (18%)
- social services (15%)
- primary care (7%)

95% of conference attendees reported applying or using acquired knowledge in their daily life. 89% of conference attendees demonstrated using or intending to use acquired knowledge in their professional mental health activities.

> "The conference brought people together from different corners of Canada. It's a great opportunity to engage, discuss, generate more knowledge, and seek solutions. We want to reiterate the "Black National Mental Health Strategy" one of the calls to action passed by the ACT Now conference participants. We strongly believe that the continuation of MHBC projects and the national knowledge mobilization and networking could help as a short to medium-term solution to Black mental health and well-being while transitioning to/seeking ways to turn these initiatives sustainable." — Conference participant

This project's activities played a significant role in knowledge mobilization by supporting:

- increased understanding of the unique mental health experiences of Black people in Canada
- the development of various knowledge mobilization products

MHBC Fund projects also led the development of their own knowledge mobilization products, such as training, reports, peer-reviewed articles, and toolkits[15] to encourage positive mental health change.

> "I've taken all the things we've done and sort of added them to my own toolkit."
> — Project participant

Learn more:

- Black Wellness Network
- MHBC project resources (Black Wellness Network)

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[14] Act Now-Conference Report-2024.pdf

[15] MHBC Project Resources | Amandla Olwazi

Knowledge to equip and empower Black communities

The MHBC Fund supported several grassroot initiatives and community organizations across Canada that worked towards promoting mental health in Black communities. These initiatives often addressed barriers to care by focusing on awareness-raising, education and empowerment. Projects promoted positive mental health, built strength and confidence, decreased trauma, and expanded knowledge of supports and services for Black people in Canada.

PHAC reviewed MHBC funded project reports and relevant literature to identify 4 key recurring themes:

- Addressing anti-Black racism as a social determinant of health
- Access to culturally appropriate mental health supports and services
- Adopting a decolonized approach
- Approaches toward health equity

These themes are central for fostering positive mental health within Black communities across Canada.

Addressing anti-Black racism as a social determinant of health

Health disparities are often a consequence of systemic inequities, and are closely intertwined with the pervasive effects of anti-Black racism. In response to these challenges, the MHBC Fund supported initiatives which aimed to improve mental health outcomes for Black communities. These projects were specifically designed to:

- address the inequities faced by these communities
- enhance awareness of mental health issues
- address the specific barriers that impede access to optimal mental health care

Funding recipients expressed that Black communities in Canada have suffered negative effects and harms as a result of anti-Black Racism in areas such as health, income and access to resources. Black communities in Canada face disparities in health outcomes and determinants of health arising from differential care, access and exposure to opportunities based on race.[16,17,18]

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[16] Supporting Black Youths' Mental Health, Education and Wellbeing Through Community-Based Interventions

[17] BUILDING A FOUNDATION FOR CHANGE: Canada's Anti-Racism Strategy

[18] Amandla Olwazi-Literature Review Final PHAC.pdf

Organizations also partnered with supplementary providers such as scholars, advocates, professionals and community members.

Feedback from funding recipients indicated the importance of addressing anti-Black racism. The mental health of Black people is profoundly affected by institutional racism and racial prejudice.[19] Knowing this, funding recipients developed diverse approaches to address anti-Black racism, including:

- revising, practicing and developing strategies to counteract anti-Black racism
- understanding how gender and sexuality are impacted by anti-Black racism
- perspectives on how the mental health of Black youth is affected by anti-Black racism
- educating and training participants on navigating anti-Black racism in structured systems
- leading from an Afrocentric and Ubuntu lens to combat anti-Black racism

Ubuntu's origin explained

Ubuntu embodies a principle of fairness and communal humanity, which can be succinctly interpreted as "I am because we are". An understanding of oneself and humanity via the reorganization and cultivation of others' humanity. The theory and practice of Ubuntu is prevalent in many of our funded MHBC projects. Ubuntu helped many participants identify their needs and strengthen their self-awareness to promote long-term positive mental health.[20]

> "I now understand that we don't exist as individuals, we thrive as a family and a community of people to support our well-being." — Project quote

Funding recipients expressed that anti-Black racism is a major factor influencing mental health and wellness in Black communities. MHBC Fund projects identified the need to address anti-Black racism and aimed to educate the community on this point.

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[19] Schouler-Ocak, M., & Moran, J. K. (2023). Racial discrimination and its impact on mental health. *International Review of Psychiatry*, *35*(3–4), 268–276.

[20] Gebremikael, L., Sicchia, S., Demi, S., & Rhoden, J. (2022). Afrocentric approaches to disrupting anti-Black racism in health care and promoting Black health in Canada. *CMAJ*, *194*(42), E1448–E1450.

According to one project, understanding the "barriers and challenges faced by Black youth and families that are rooted in and upheld by systemic violence and anti-Black racism [is crucial]."

Project findings supported funding recipients by making recommendations for professionals, service providers and the general public. MHBC Fund projects have reframed assessment tools and developed toolkits and certificates to educate program participants, professionals and service providers on anti-Black racism.

> "Through discussion and the training provided to youth, as well as their production of the video, youth developed a better understanding and analysis of anti-Black racism and how it manifests itself in their lives, including on their school experiences, their access to housing and jobs, and their mental health." — Project quote

Access to culturally appropriate mental health supports and services

Funding recipients worked with partners to offer culturally sensitive and relevant mental health services and interventions. Project interventions used traditional healing practices and community-based approaches that recognize the importance of addressing systemic inequities to address stigma, discrimination and anti-Black racism.

MHBC Fund projects enhanced equitable access to care and support for Black people in Canada through:

- collaboration with partners
- using a health equity framework
- a focus on cultural competency and safety

These principles acknowledge the necessity of challenging systematic injustices and delivering treatment that honors the cultural and social circumstances of Black communities in Canada.

Funding recipients partnered with Black community organizations and leaders to design and implement mental health interventions and to increase access to support. Community feedback was crucial for guaranteeing cultural competency and safety. Projects prioritized equitable access to opportunities and resources, and focused on attaining health equity by:

- providing training programs and toolkits
- adapting resilience tools to support and protect the cultural norms of certain populations

Guaranteeing safe, accessible and equitable healthcare for Black communities in Canada recognizes anti-Black racism and its effects on the health and wellbeing of Black people in Canada. Project participants were offered a secure environment and culturally customized services for learning and development.

> "We were able to share compelling data on the link between racial disparities and mental health, which increased knowledge within the community, particularly among young people, about the factors that affect mental health in Black communities." — Project quote

> "The ultimate goal is that the toolkit be integrated by organizations serving Black communities in Winnipeg, the province of Manitoba, and possibly nationally. The tool kit will address issues and topics relevant to a range of Black Canadian populations that organizations may be serving, including youth, adults, seniors, and newcomer." — Project quote

Adopting a decolonized approach

The stigma associated with mental health has arisen from historical, research, practical and policy shortcomings that have inadequately addressed the unique aspects of suffering within Black communities.[21] Projects embraced decolonizing frameworks to ensure the ethical, democratic, critical and community-oriented execution of mental health research and practice aimed at transforming mental health promotion for Black communities in Canada.

Despite ongoing efforts to enhance cultural sensitivity in mental health care, Western colonial paradigms remain the predominant basis for research, education and practice in these fields.[22] Funding recipients used Afrocentric research paradigms in their projects to address the lack of culturally pertinent and suitable research on Black mental health in their projects.

MHBC Fund projects that used decolonizing frameworks identified:

- the deficiencies in mental health service provision
- the restoration of wellness approaches as pathways for enhancing Black health services across Canada
- developing methods through which services can implement these transformations

Some projects addressed decolonization by focusing on fundamental concepts of mental health promotion and encompassing structural transformation. They also used Ubuntu principles[23] and culturally relevant mental health services.

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[21] Taylor, R. (2022). *A Qualitative Grounded Theory Study of Black Canadian Mental Health Service Use* (Doctoral dissertation, University of Windsor (Canada)).

[22] Moodley, R., & Osazuwa, S. (2020). Configurations of race and culture in mental health. In *The Routledge international handbook of race, culture and mental health* (pp. 9–18). Routledge.

[23] Gebremikael, L., Sicchia, S., Demi, S., & Rhoden, J. (2022). Afrocentric approaches to disrupting anti-Black racism in health care and promoting Black health in Canada. *Cmaj*, *194*(42), E1448–E1450.

Contextualizing Black mental health and wellbeing involves prioritizing Black interests and voices. The discourse surrounding decolonization shows that knowledge is shifting to prioritize and amplify the voices of Black communities. Health and mental health interventions led by Black communities are crucial for transformation.

> "While we knew that mental health was a priority, we came at it through food, employment, education. For these youth, with respect to the social determinants of health, they were all playing out at once. How do we solve these problems? The approach was to teach them these lessons of survival, to be very honest, so that they could incorporate them into their own lives." — Project quote

Approaches toward health equity data

An approach that addresses the social determinants of Black mental health requires community engagement, advocacy, education, targeted interventions and a health equity lens. Funding recipients aimed to create inclusive and culturally sensitive spaces that recognized and addressed these determinants to support the mental wellbeing of Black individuals and communities in Canada. This was essential for ensuring equitable access to mental health services and culturally sensitive care. Projects implemented these principles by continuously assessing their mental health strategies and services, and used health equity metrics to measure progress.

Research conducted by MHBC Fund projects complemented existing mental health promotion tools and improved their workplans to ensure they were culturally appropriate.

> "Many of our goals aim to address mental health inequities." — Project quote

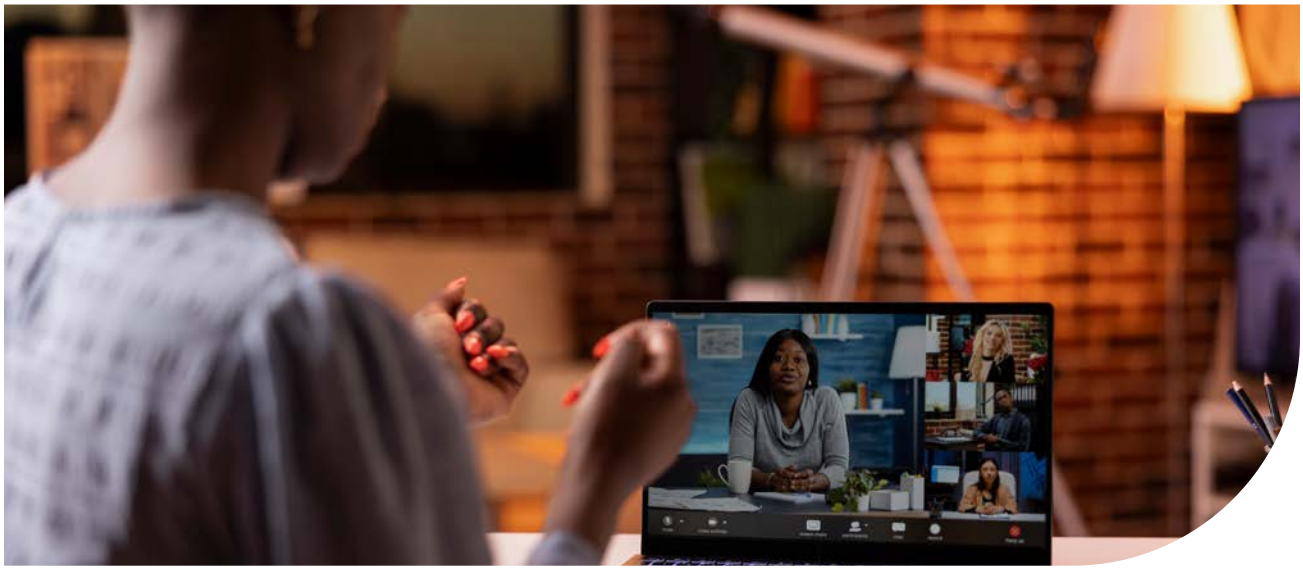
Funding recipients that have effectively implemented a health equity perspective in their projects have:

- provided mental health and wellness education to Black communities and Black youth
- made informational materials available to people with different education levels and linguistic backgrounds, such as:
  - peer reviewed articles and presentations
  - toolkits
  - meditation models
  - social networks
- increased general knowledge about mental health care of Black children and youth

> "This year we have addressed existing inequities in mental health through our creation and maintenance of an interactive geographic information system (GIS) map; translation of our systematic review into informational material in English and French; and sharing of summaries/briefings, infographics, fact sheets, and web resources on the Pathways to Care website, social media pages and blog posts, and a social media wellness series."
> — Project quote

Learn more:

- Pathways to Care



Program outcomes

All MHBC Fund projects had to measure outcomes that aligned with the program's logic model, as shown in Figure 2: Achieving Positive Mental Health: A Program Logic Model. Each project outcome focused on important elements that supported positive mental health for Black communities across Canada. These included:

- connecting Black people across Canada
- enhancing social settings
- expanding knowledge or developing skills and abilities
- exchanging best practices and lessons learned

Figure 2: Achieving Positive Mental Health: The Program's Logic Model

The MHBC Fund Logic Model displays the diverse outcomes the MHBC Fund achieved.

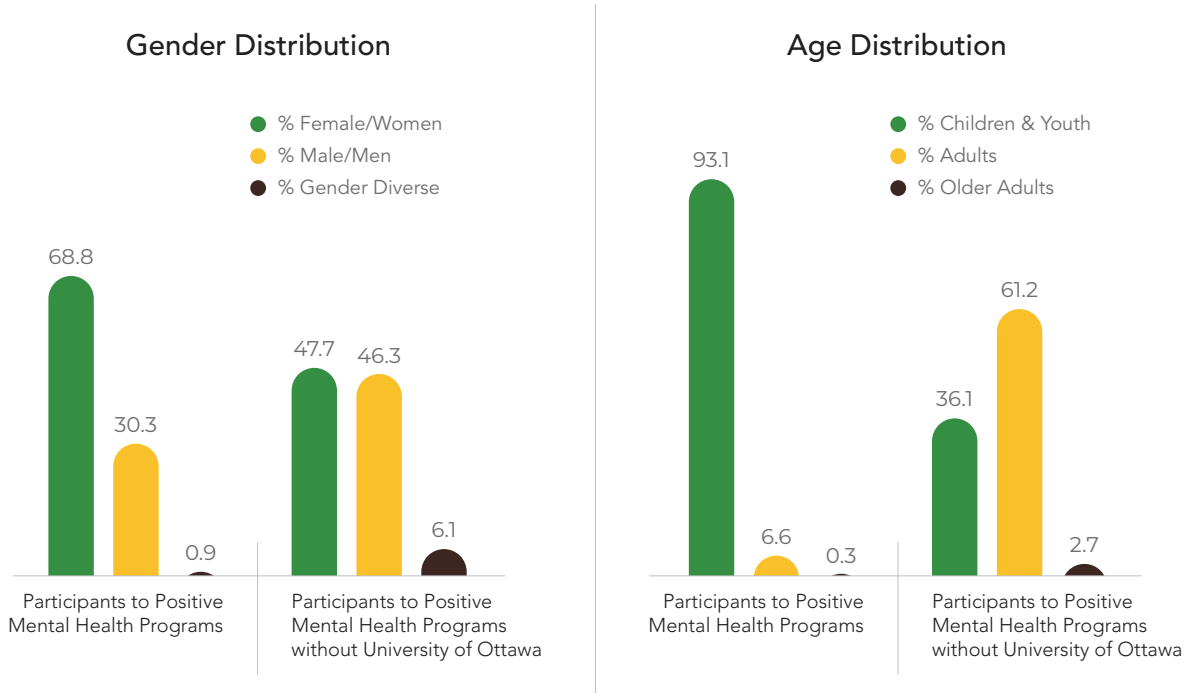
Participation in project activities

From 2018 to 2024, **144,649 project participants** took part in MHBC Fund project activities, including:

- **20,086 people** being supported by positive mental health programs for Black people in Canada[24]
- **124,563 people** taking part in activities that focused on the social environment of Black people in Canada, including:
  - mentors
  - parents
  - health professionals
  - staff
  - religious leaders
  - members of the public

[24] Although the majority of individuals reached were Black, we cannot precisely report the number of Black people in Canada reached by MHBC funded projects as this information was not systematically collected through reporting.

Figure 3: Demographic Profile of Participants in Positive Mental Health Programming.



Distribution of participants to positive mental health programs per gender and age group.[25] Since the University of Ottawa project reached the majority of participants (95 %) data is presented with and without this project.

Program reach

The MHBC Fund invites organizations across sectors to partner with Black communities across Canada in supporting positive mental health initiatives. By engaging community-led, culturally-grounded action, the Fund supports initiatives that strengthen capacity, build evidence, and deliver programs to reduce barriers and address the social determinants of mental health among Black people in Canada. Through the funded Implementation stream projects illustrated on the program map, the MHBC Fund aims to mobilize partnerships, elevate culturally-relevant knowledge, and foster sustainable community-driven change.

Learn more:

- Mental Health—Black Canadians—Funding Map

[25] Disaggregated data is useful in recognizing and addressing systemic racism, discrimination, and social injustices in mental health outcomes for Black communities in Canada. It also highlights significant gaps in the availability of race-based data.

Increased knowledge of mental health

On average, **82%** of project participants reported increasing their knowledge of mental health. Several projects intended to educate and raise awareness of mental health issues among Black communities. Projects delivered training activities, webinars, workshops and education sessions for Black people in Canada and their social networks (such as parents, mentors, health professionals, teachers and service providers).

Participants reported gaining a better understanding of mental health needs and challenges, and the effects of racism, micro-aggressions, and discrimination on their mental health. They felt more able to access information about mental health supports, and were more successful identifying myths and truths about mental health.

> "I feel very clear about social determinants of health. I understand how systems of oppression influence our experiences, our mental health and our access to receiving treatment." — Project participant

Increased skills or ability to support mental health

On average, **78%** of participants reported increasing their skills and abilities to support their mental health as a result of taking part in projects. Some projects used arts-based approaches (like painting, rap and poetry) to help participants express their experiences with mental health. Participants found these activities effective in:

- improving their mental health
- enhancing outcomes of cognitive behavioral therapy
- helping to develop coping mechanisms

Project participants also felt more confident in supporting the mental health of people around them, as well as taking action to improve their own mental health. For example, by seeking support, finding resources, and improving their ability to believe in themselves.

> "Peers who were able to be trained thus far have gained critical skills in mental health, cognitive behavioral therapy and transferrable skills including facilitation and communication which can be of benefit to themselves and their communities." — Project participant

Improvements of social environments

On average, **57%** of project participants reported improvements in social environments. A majority of the 15 projects funded under the implementation stream reported stronger social supports as a result of their project (such as someone to talk to or to help them). At the community level, this meant:

- establishing effective referral networks
- developing trust
- identifying community needs
- fostering partnerships between:
  - mental health organizations
  - grassroots organizations
  - leaders in the community
  - pertinent stakeholders

6 funding recipients reported participants having better access to resources, and 2 projects reported reduced mental health stigma as result of their projects.

Improving social environments is important because the community plays a large role in mental health outcomes. Community environments can create fear, grief and trauma for its members, and can cause communities to separate and no longer occupy the space they should. As a result, strengthening communities and bringing community members together is critical to improving and maintaining positive mental health outcomes.

Overall, MHBC Fund projects truly strengthened the fabric of Black communities and enabled positive responses to mental health challenges.

Improved mental health

On average, **68%** of project participants reported improvements in their mental health. It's essential for community members to work together to understand what affects their access to mental health supports. This collaboration ultimately leads to a strong sense of belonging and improved perceived mental health.

> "This retreat has definitely improved my mental health, it reminded me of the importance of getting away from work, and the city, providing me with activities that help me see what needs to change in my life so I can improve my mental health. This also connected me with an amazing community that I hope to continue to connect with in the future. I made friends and I was exposed to sound bathing, and felt like I could get through this winter."
> — Project participant

Worldwide events impacting MHBC fund projects

Several events impacted the mental health outcomes of Black communities in Canada during the implementation of MHBC funded projects. The most frequently reported were:

- the COVID-19 pandemic
- the murder of George Floyd
- the Black Lives Matter movement

The COVID-19 pandemic deepened socioeconomic disparities in Black communities across Canada, which led to continued lasting negative impacts. The trauma of the murder of George Floyd had a significant impact on mental health experiences and continues to do so.

> "[Black Lives Matter] is a movement, not a moment and mental health is an integral part of that." — Project participant

These events showed the need for initiatives like the MHBC Fund that help Black communities support their own positive mental health.

The COVID-19 pandemic

The COVID-19 pandemic disproportionately affected the mental health of Black people in Canada. Structural inequalities, racism, and pre-existing socioeconomic disparities adversely affected Black people in Canada, making them more vulnerable to the negative health effects of the pandemic.[26, 27]

Projects included efforts to address these effects by establishing mental health resources for Black people, using community links and educating participants on resilience and resistance. Materials and work plans used Afrocentric values, anti-Black racism strategies and Ubuntu principles while following COVID-19 protocols. Adopting a strength-based approach was also essential for prioritizing Black experiences in health discussions and support. COVID-19 caused barriers to project delivery, such as limiting in-person activities. This made it challenging to engage new target demographics and to build trust with them.

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[26] Amandla Olwazi—Literature Review Final PHAC.pdf

[27] Health-inequities-black-canadians.pdf

> "The COVID-19 pandemic for example, has accomplices such as chronic disease and racism which cause racialized communities to become more vulnerable and susceptible to exposure and transmission. Black Ontarians are among the most burdened by health inequities and experience increased prevalence of diabetes, obesity, and hypertension which increased risk for stroke. Anti-Blackness, then, must be addressed as it contributes significantly to the toxic stress and burden of disease encountered and experienced by Black people on a daily basis. Gaps in health, employment, and achievement negatively affect the mental health of the Black community and reinforces internalized racism." — Project participant

The murder of George Floyd and the resurgence of the Black Lives Matter movement

The murder of George Floyd in the United States of America in 2020 had a profound global effect. This brought renewed attention to issues of systemic racism, oppression, and the broader impact on mental health, particularly within Black communities globally. It started conversations about systemic racism across multiple MHBC Fund projects. It prompted thought-provoking discussions about mental health inequities for Black people in Canada, and resulted in the development of educational initiatives. This included topics on anti-racism and gun violence.

Black Lives Matter's global outcry following the murder of George Floyd highlighted the need for mental health supports for Black communities in Canada, as they still experience racism. This has led to a call to identify, recognize and tackle issues of racism and equity in health care institutions, mental health research, and mental health service delivery.

> "Without a doubt, the Black Lives Matter resurgence in summer 2020 was a social, cultural, and political factor that supported our activities and outcomes. With the enhanced focus on anti-Black racism, and structural and systemic racism we were approached by numerous organizations for partnership and implementation of our strategic framework. We also received a fair amount of media attention about our project and work which has broadened our reach and increased our visibility." — Project staff

Key learnings

This summary of key learnings uses information from various sources, such as:

- MHBC Fund projects' annual, final and evaluation reports
- learnings from the MHBC Working Group
- the special issue of PHAC's Health Promotion and Chronic Disease Prevention in Canada Journal, *Engaging in culturally responsive research and programs for Black communities*

Applying an anti-racist and intersectional lens, and enabling community resilience to address the needs of diverse Black people in Canada, requires a foundation of:

- Black representation in mental health programming
- building trust and relationships within Black communities
- including people with lived experiences

It was essential to embed equity considerations throughout the funding process, including in the design of funding application materials and the review process. This helped to remove barriers and made it easier for communities to access opportunities and resources.

Taking a holistic approach can lead to more effective outcomes. Such an approach should address underlying social, economic and environmental determinants of mental health and how they connect, as well as individual mental health needs. This includes efforts to address socioeconomic disparities, systemic racism and inequalities in mental health.

There are a unique history and pervasive nature of systemic racism against Black people in Canada. Given this history, authentic engagement with the MHBC Working Group and other diverse Black stakeholders:

- enabled a co-development approach
- increased the inclusion of Black peoples' voices
- built trust
- provided Black-led advice to help develop and the implement the MHBC Fund

It is vital to engage with Black-led organizations, mental health professionals, mentors and coaches. This increases knowledge of mental health promotion in Black communities in Canada, and improves awareness and use of the project's programs and services.

A critical step to addressing barriers in mental health is by developing and using the knowledge and expertise of Black communities. Projects held regularly engaged with Black communities and gather input on mental health services, barriers and needs. These partnerships between mental health organizations, community leaders, grassroots organizations and stakeholders helped to identify community needs, build trust and establish effective referral networks.

Programs and services increased their relevancy and responsiveness by:

- recognizing the knowledge and experience of Black communities
- prioritizing community-centered and community-relevant projects that responded to unexpected events and needs
- designing their programs and services with an anti-racist and intersectional lens

Community-led initiatives can address the unique needs and challenges of the local population, using community resources, strengths and cultural values.

Creating sustainable and impactful change requires partnerships and collaboration among stakeholders such as:

- mental health organizations
- community leaders
- researchers
- policy makers

These partnerships drove innovation and advocacy, and helped to develop comprehensive solutions.

Analysis of the data from MHBC annual and final reports and interviews illuminated 3 main themes:[28]

1. Facilitators of successes
2. Challenges
3. Lessons learned Recommendations for funders

[28] Salami, B., Tulli-Shah, M., Abdillahi, I., & Crichlow, W. (2025). An analysis of the Mental Health of Black Canadians Fund: facilitators of success, challenges and recommendations. *Health Promotion and Chronic Disease Prevention in Canada: Research, Policy and Practice*, *45*(4), 212–220. https://doi.org/10.24095/hpcdp.45.4.06

Facilitators included honorariums and incentives, participatory action research design, and Black leadership.

Challenges included:

- delays (for obtaining ethics approval and program implementation)
- impacts of the COVID-19 pandemic
- difficulties maintaining partnerships

Finally, lessons learned, and recommendations advised that funders provide:

- longer term and more flexible funding
- more Black representation and leadership within funding organizations
- greater support of cultural competency among mainstream service providers

Community participation helped raise awareness about mental health issues, reducing stigma, and promoting open discussions. By involving members from diverse Black communities, projects could openly address mental health concerns, fostering a supportive environment where people felt comfortable seeking support. Community participation fostered resilience by building social connections, promoting collective problem-solving, and enhancing community support networks. Projects implemented mental health initiatives and strengthened the fabric of the community, enabling it to respond more effectively to mental health challenges.

Facilitating relationships within diverse Black communities increased the awareness, exchange and use of resources, through:

- Black-led national conferences
- community activities
- project networking
- collaborations
- partnerships
- a Black-led, Black-focused and Black serving network

Conclusion

The MHBC Fund has been instrumental in boosting the visibility of Black voices, fostering change, offering Black-led guidance for mental health programs, and drawing attention to the importance of positive mental health MHBC Fund projects were able to make connections, raise awareness, and build relationships within diverse Black communities in Canada by:

- supporting Black-led national conferences and community activities
- developing Black-led, Black-focused, and Black-serving online networks

This, in turn, increased mental health awareness, knowledge exchange, and use of resources.

Increasing the relevance and responsiveness of services offered through the MHBC Fund projects was made possible by acknowledging the diverse knowledge and experiences of Black communities. The MHBC Fund prioritizes community-centered projects that are responsive to pertinent events and needs, and led by organizations that design their services through an anti-Black racist and intersectional lens.

For two years, Budget 2024 investments to PHAC have supported:

- projects that build on the successes of previously funded MHBC implementation stream projects
- new projects that seek to build organizations' capacity to develop and deliver programs that promote the mental health of Black people in Canada
- knowledge mobilization and exchange across Black communities in Canada

Limitations

To ensure the MHBC Fund's results are transparent, this report includes contextual information and verbatim quotes. However, these findings do not represent all Black communities in Canada. The quantitative results reflect the program outcomes among those who have responded to surveys and consent to participate in the project's evaluation. Consequently, the results may not reflect the experience of all participants reached through the MHBC Fund.

Some participants did not feel comfortable providing sociodemographic information or race-based data. In some cases, no data on race was collected. Disaggregated data would be useful in recognizing and addressing systemic racism, discrimination, and social injustices in mental health outcomes for Black communities in Canada. It would also highlight significant gaps in the availability of race-based data.

Acknowledgements

PHAC express gratitude to members of the Mental Health of Black Canadians Working Group for their leadership, guidance, reflection, and continued support, including the design and the implementation of the MHBC Fund. PHAC also recognize the leadership of the MHBC Fund's funding recipients for driving positive community change and enhancing collective efforts to achieve health equity.

Glossary of key terms and concepts

Anti-Black racism

Prejudice, attitudes, beliefs, stereotyping and discrimination directed at people of African descent and rooted in their unique history and experience of enslavement. Anti-Black racism is deeply entrenched in Canadian institutions, policies and practices. As such, anti-Black racism is either functionally normalized or rendered invisible to the larger white society. Anti-Black racism is manifested in the legacy of the current social, economic, and political marginalization of Black people in Canada, such as:[29]

- a lack of opportunities
- lower socio-economic status
- higher unemployment
- significant poverty rates
- overrepresentation in the criminal justice system

Afrocentric

An approach to knowledge, wellness and healing that centers African values, philosophies and worldviews. In mental health programming, Afrocentricity emphasizes culturally relevant care, community connection and historical awareness of systemic oppression.[30]

Black people in Canada

Generally includes diverse individuals, populations, and communities in Canada that identify as having African or Caribbean ancestry.[31]

Culturally focused

Mental health strategies that reflect the beliefs, customs, histories, and lived experiences of specific cultural communities. MHBC funded projects adopted culturally focused approaches to ensure services are responsive to the unique needs of Black people in Canada.[32]

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29 Archived—Ontario's anti-racism strategic plan | ontario.ca

30 Van Dyk, S. (2003). What is Afrocentric? *Afrocentricity and the Academy: Essays on Theory and Practice*, 176.

31 Promoting Health Equity: Mental Health of Black Canadians Initiative—Mental Health of Black Canadians Fund—Canada.ca

32 Government of Canada. (2019). *Building a foundation for change: Canada's Anti-Racism Strategy 2019–2022.* https://publications.gc.ca/collections/collection_2019/pch/CH37-4-29-2019-eng.pdf

Culturally relevant

The ability of organizations and professionals to understand, communicate with, and effectively interact with people across cultures. In the MHBC context, this includes incorporating culturally safe practices, values, and languages specific to Black communities in Canada.[33]

Decolonized

Strategies and practices that challenge and transform the Eurocentric foundations of mental health systems by centering Indigenous and African ways of knowing, healing, and community care. This includes rejecting deficit-based models and supporting Black-led mental health leadership.[34]

Disaggregated data

Disaggregated data is broken down into component parts or smaller units of data for statistical analysis. In the context of race-based data, this means breaking down the composite (aggregate) "racialized" category into its component parts such as Black, South Asian, East or Southeast Asian, Latino, Middle Eastern, and White.[35]

Discrimination

Treating someone unfairly by either imposing a burden on them, or denying them a privilege, benefit or opportunity enjoyed by others, because of their race, citizenship, family status, disability, sex or other personal characteristics.[36]

Equity

The absence of unfair, unjust, systematic, and avoidable differences in health status or social determinants of health. A health equity approach seeks to reduce inequalities and to increase access to opportunities and conditions conducive to health for all. Heightened efforts to address the needs of populations that are at higher risk for poor health outcomes can help reduce health inequities between different population groups.[37]

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[33] Geron, S. M. (2002). Cultural competency: how is it measured? Does it make a difference? *Generations: Journal of the American Society on Aging*, 26(3), 39–45.

[34] Lawrence, B., & Dua, E. (2005). Decolonizing antiracism. *Social justice*, 32(4), 120–143.

[35] Glossary | Data Standards for the Identification and Monitoring of Systemic Racism | ontario.ca

[36] Discrimination: Treating someone unfairly by either imposing a burden on them, or denying them a privilege, benefit or opportunity enjoyed by others, because of their race, citizenship, family status, disability, sex or other personal characteristics.

[37] Social determinants of health and health inequalities—Canada.ca

Intersectional lens

Acknowledges the ways in which people's lives are shaped by their multiple and overlapping identities and social locations. Together they can produce a unique and distinct experience for that individual or group, for example by creating additional barriers or opportunities. MHBC funded projects applied an intersectional lens to better serve diverse Black populations.[38]

Knowledge mobilization

The synthesis, adaptation, dissemination and active exchange of knowledge.[39]

Lived experience

The firsthand knowledge and insight gained from personal experiences of mental health, racism or marginalization. MHBC funded projects often centered lived experience to guide project development and implementation.[40]

Mental health

A person's state of psychological, emotional and social well-being. It is a necessary resource for living a healthy life and a main factor in overall health. It does not mean the same thing as mental illness. However, poor mental health can lead to mental and physical illness.

Positive mental health allows a person to feel, think, and act in ways that help them enjoy life and cope with its challenges. Mental health can be positively or negatively influenced by factors at the individual, family, community and societal levels, including:

- life experiences
- social relationships
- physical health
- social determinants of health

Positive mental health

PHAC defines positive mental health as "the capacity of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face". It is a key factor in individual and community health. It contributes to the function of individuals, families and communities. It also contributes to the social and economic prosperity of society.[41]

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38 NCCDH_Lets-Talk-Intersectionality_EN.pdf

39 Promoting Health Equity: Mental Health of Black Canadians Initiative – Knowledge Mobilization Network—Canada.ca

40 Lived experience/Living experience—Mental Health Commission of Canada

41 Positive Mental Health Surveillance Indicator Framework (PMHSIF)—Canada.ca

Race-based data collection

Race-based data captures how people self-identify their race based on social categories not biological traits. It reflects societal groupings tied to physical appearance and social experience. This data helps identify and address inequities caused by racism and systemic discrimination.

Key points:

- Individuals self-identify race and may select multiple categories
- Data is used to monitor and improve equity in services and outcomes
- Collection must respect privacy, consent, and ethical use
- Common race categories include Black, East Asian, South Asian, Southeast Asian, Middle Eastern, Latin American, White, and others[42]

Resilience

The ability of individuals and communities to recover from adversity, trauma or stress. MHBC projects used strengths-based approaches to build resilience among participants, particularly in response to COVID-19 and systemic racism.[43]

Safe spaces

Environments where people feel physically and emotionally secure, respected and free from discrimination. MHBC projects prioritized creating safe spaces for Black people to explore mental health topics and receive support.[44]

Social determinants of health

The social, economic and environmental factors that relate to a person's place in society, and that determine individual and population health. These include gender, race, income, education and employment.[45]

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42 Canadian Institute for Health Information. (2022, March 17). Race based and Indigenous identity data. https://www.cihi.ca/en/race-based-and-indigenous-identity-data

43 Resilience in Canada

44 Matute, A. A., & Tabi, E. (2024). Safe Spaces and Critical Places: Youth Programming and Community Support. *LEARNing Landscapes*, 17(1), 47–62.

45 Social determinants of health and health inequalities

Systemic or institutional racism

Patterns of behavior, policies or practices that are part of the social or administrative structures of an organization, and which create or perpetuate disadvantage for racialized people. These appear neutral on the surface but still have an exclusionary impact.[46]

Ubuntu principles

Ubuntu is a set of principles with roots in the Nguni Bantu languages, particularly Zulu and Xhosa. It is often translated as "I am because we are." It expresses the belief that individual identity and well-being are deeply interconnected with the broader community. This communal worldview emphasizes empathy, mutual respect, compassion, and collective responsibility. These values often stand in direct contrast to individualistic approaches found in Western models of mental health care.

In Black communities, where systemic racism, social exclusion and historical trauma have long contributed to mental health challenges, Ubuntu offers a culturally affirming framework for healing and resilience. By centering relationships and shared humanity, projects fostered Ubuntu environments help participants felt seen, heard, and supported. This is especially powerful in addressing mental health stigma, which can isolate those who are struggling.

Ubuntu encourages open dialogue, mutual support, and a shared responsibility for each other's well-being. This makes it easier for participants to seek help and express vulnerability without shame. Integrating Ubuntu into mental health interventions strengthened trust, increased participation, and built a sense of belonging, all of which are crucial for improving emotional and psychological well-being in Black communities. It transforms mental health care from a solitary experience into a collective journey toward healing, rooted in culture, connection, and compassion.

Some MHBC projects incorporated Ubuntu to guide relationship-centered mental health programming.[47]

Youth

Generally refers to people aged 15 to 24 years of age.

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[46] Ontario Human Rights Commission, "Policy and guidelines on racism and discrimination". Available from: http://www.ohrc.on.ca/en/policy-and-guidelines-racism-and-racial-discrimination/part-2-policy-framework

[47] Ajitoni, B. D. (2024). Ubuntu and the philosophy of community in african thought: An exploration of collective identity and social harmony. *Journal of African Studies and Sustainable Development*, *7*(3).

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Appendix A:
MHBC Fund inductive thematic themes

Thematic themes in qualitative research are patterns or recurring ideas identified in data that capture important concepts or topics related to the research question. They help organize and interpret the information by grouping similar meanings or experiences together.

Thematic themes were analyzed using NVivo.

Implementation of MHBC principles

- Leadership by Black Canadians
- Evidence-based
- Social determinant of health approach
- Health equity lens
- Cultural competency and safety
- Partnerships and collaboration

COVID-19

- Lack of resources
- Adaptability
- Restrictions
- Impact on project activities
- Impact on participants (such as participation and mental health)
- Impact on organizations
- Systematic gaps
- George Floyd
- Access to care
- Treatment options

Successes and achievements

- Challenges and difficulties
- Staffing
- Participant recruitment
- Evaluation

Lessons learned

- Honorarium

Intersectionality

- Project participation
- Type of audiences
- Gap between actual and expected reach
- Actions taken to facilitate participation

Project impact on participants: Skills or abilities that support positive mental health

- Type of skills or abilities
- Application of new skills or abilities in daily life
- Application of new skills or abilities in professional practices

Project impact on participants: Knowledge about mental health and its determinants

- Type of knowledge
- Application of acquired knowledge in daily life
- Application of acquired knowledge in professional practices

Project impact on social environments

- Organizational practices or policies
- Accessibility to resources
- Perception of discrimination
- Mental health stigma
- Social support

Project impact on participants: Mental health and well-being

- Sense of belonging to the community
- Perception of mental health
- Happiness
- Interest in life
- Satisfaction with life

Appendix B: Implementation phase MHBC funded projects

Implementation Stream: Phase I

African-Caribbean-Black (ACB) Women Living Life to the Full: Peer-Based Mental Health Promotion Initiatives for ACB Women

Lead/Recipient: Women's Health in Women's Hands Community Health Centre
Location: Toronto, Ottawa, Windsor, and Hamilton, ON
Start date: July 2019
Duration: 46 months

This project adapts the "Living Life to the Full" course, based on cognitive behavioural therapy, to be women-centered and culturally appropriate for ACB women. It focuses on marginalized groups such as newcomers, refugees, and those with complex health and mental health issues. It includes developing training materials, establishing peer facilitator networks, and engaging communities to address mental health barriers specific to ACB women, such as stigma and distrust of services.

ArTeMo Project

Lead/Recipient: Council for the Advancement of African Canadians (Africa Centre)
Location: Edmonton, Calgary, Fort McMurray, AB
Start date: November 2019
Duration: 36 months

The project is testing culturally informed interventions for Black Canadian youth, focusing on creating a sense of belonging, identity, and empowerment. It includes workshops, community forums, and mentorship for youth, and training for service providers to enhance cultural competency in supporting at-risk Black youth, particularly those facing social and economic challenges.

Jane-Finch Wellness Advocates for Youth (WAY)

Lead/Recipient: Black Creek Community Health Centre
Location: Greater Toronto Area, ON
Start date: October 2019
Duration: 23 months

The project focuses on improving the mental health and well-being of Black youth from the Jane and Finch area in Toronto by addressing social determinants like food security, housing, and employment. Mentors help youth navigate issues such as substance use and trauma, while also involving families and social service organizations.

Pathways to Care: Improving Mental Health and Addictions Services for Black Children, Youth, and Their Families in Ontario

Lead/Recipient: Black Health Alliance
Location: Greater Toronto Area, ON
Start date: July 2019
Duration: 45 months

This project aims to improve pathways to mental health and addiction services for Black children, youth, and families by developing culturally safe treatment protocols and best practices. It also builds capacity in families and communities to support mental health care needs, with a focus on French-speaking and Francophone Black Ontarians.

Mental Health of Black Communities in the National Capital Region: Assessment, Prevention, and Intervention Tools

Lead/Recipient: University of Ottawa
Location: Ottawa, ON
Start date: June 2019
Duration: 48 months

This project focuses on understanding the mental health needs of Black youth and their families in both French and English communities in the National Capital Region. It aims to create culturally adapted resources, distribute education materials, and involve youth in a longitudinal study.

STAY (Storytelling, Training, Advocacy, and Youth Drop-in): Strengthening the Ecosystems of Black Youth Facing Involvement with Child Welfare or Protective Services

Lead/Recipient: Head and Hands / À deux Mains
Location: Montreal, QC
Start date: October 2019
Duration: 36 months

This project develops programs to help Black youth in child welfare or protective services to express themselves and advocate for mental well-being. It focuses on creating safe spaces for peer support, as well as sensitizing organizations to the needs of marginalized Black youth.

The IMARA Generation Peer Leadership

Lead/Recipient: TAIBU Community Health Centre
Location: Greater Toronto Area, ON
Start date: June 2019
Duration: 46 months

The project co-develops a youth-focused, culturally appropriate mental health awareness and support program in collaboration with Black youth. It engages families to support positive parenting and mentorship, with a focus on groups at higher risk, including East African youth, Francophone youth, and 2SLGBTQIA+ youth.

Towards Positive Change to Promote Mental Health and Well-being for Black Canadians in Manitoba

Lead/Recipient: Barbados Association of Winnipeg Inc.
Location: Winnipeg, MB
Start date: October 2019
Duration: 24 months

This project aims to create a culturally appropriate mental health promotion toolkit for Black Canadians, based on community engagement. The toolkit will address issues relevant to Black populations in Manitoba and beyond, including youth, adults, older adults, and newcomers.

Implementation Stream: Phase II

Youth Mental Wellness Program

Lead/Recipient: Aspire for Higher
Location: Brampton, ON
Start date: April 2021
Duration: 29 months

This project implements a 12-week after-school health promotion program for Black youth, using an anti-Black racism lens. Facilitators aged 15 to 34 will deliver in-class learning and basketball sessions to youth aged 12 to 14, aiming to create a safe space for mental health discussions and improvement.

Justice Hoodistique

Lead/Recipient: Événement Hoodstock
Location: Montréal-Nord, QC
Start date: July 2021
Duration: 33 months

This pilot project promotes restorative justice for young Afro-descendants aged 12 to 35 involved in the justice system, incorporating a holistic approach that focuses on reparation, self-rebuilding, and community involvement. The goal is to expand the project's impact across Quebec and other provinces.

Promoting Black Students' Mental Health: A Pan-Canadian Research and Intervention Project on Social Determinants of Health and Equity in Canadian Universities

Lead/Recipient: York University
Location: Atlantique, Québec, Ontario, Prairies
Start date: August 2021
Duration: 35 months

This project conducts research and implements interventions to improve mental health for Black students in Canadian universities. The focus is on addressing the social determinants of health and developing culturally adapted psychoeducational interventions, while also tackling systemic barriers.

Implementation Stream: Black LGBTQI+ Canadians

Journey Mapping Across Canada: Black LGBTQ+ Justice, Sexual & Mental Health

Lead/Recipient: Ribbon Rouge Foundation
Location: Edmonton, AB
Start date: July 2021
Duration: 32 months

This project seeks to understand the barriers faced by Black 2SLGBTQIA+ individuals when accessing mental health, substance use, STBBI and justice services. The goal is to improve services and share interventions that positively impact the mental health and well-being of this community.

Our Stories, Our Voices: Mental Health Narratives and the Black LGBTQ+ Experience

Lead/Recipient: Across Boundaries—An Ethnoracial Mental Health Center
(In partnership with Adornment Stories)
Location: Toronto, ON
Start date: July 2021
Duration: 32 months

The project focuses on increasing understanding of the mental health needs of Black 2SLGBTQIA+ communities. It will provide leadership training, develop resources, and conduct workshops to promote positive mental health and build capacity within the community.

Sustaining Ecosystems of Healing: Creating Culturally Relevant Mental Health Resources for Black 2SLGBTQIA+ Youth

Lead/Recipient: The Lesbian Gay Bisexual Youth Project Society (The Youth Project)
Location: Halifax, Nova Scotia
Start date: July 2021
Duration: 31 months

This project uses a creative arts model to provide mental health resources for Black 2SLGBTQIA+ youth. It aims to examine barriers to mental health services through a Black-centric lens, while fostering resilience and collaboration within the broader African Nova Scotian and Black communities.

Implementation Stream: Knowledge Mobilization Network

Amandla Olwazi—The Power of Knowledge

Lead/Recipient: TAIBU Community Health Centre
Location: Greater Toronto Area, ON
Start date: October 2021
Duration: 20 months

This project develops a national knowledge network to support the Government of Canada's MHBC Fund. It focuses on addressing inequalities and social determinants of health through culturally responsive approaches and works to improve policies impacting Black Canadians' mental health.

Appendix C:
MHBC Working Group members

Asante Haughton

- Mental health advocate and motivational speaker
- Peer development and training manager, Stella's Place
- Co-founder, "Reach Out Response Network"
- Host and interviewer, "Cypher" web series
- Contributing editor, "Inspire Magazine"
- Freelance thinker and writer

Mr. Haughton is dedicated to building stronger communities. He is a peer worker, poet, thinker and speaker who believes in people, global interconnectivity and positive personal change. His peer work has brought him across Canada, to the United States, Colombia and Ireland. Mr. Haughton is also a two-time TEDx speaker and was recognized by the Center for Addiction and Mental Health as one of the top 150 difference makers in mental health in Canada. He was also featured in the most recent Bell Let's Talk prime time documentary special. Mr. Haughton's advocacy and drive for change helps him deliver the message of social awareness, justice, community betterment and hope.

Brooke Chambers

- Community mental health advisor, Pause Technologies Inc.
- Mental health consultant, speaker, and trainer with expertise in cultural inclusion and belonging, Herbert H. Carnegie Future Aces Foundation

In 1989, at the age of 19, Ms. Chambers was the youngest police officer hired by the Ontario Provincial Police and the only Black female at the time. In this role, Ms. Chambers served in traffic enforcement, accident investigation, officer training, community engagement, strategic policy and planning and fraud investigation. After 9 years, she left policing to pursue a career as a financial advisor working with institutions such as Investors Group and CIBC, where she managed assets of over $60 million. She has also served on the board of directors of the Herbert H. Carnegie Future Aces Foundation, a community organization founded by her late grandfather Dr. Herbert H. Carnegie, Canadian hockey icon. Ms. Chambers holds an Advanced Certificate in Policing from the Ontario Police College and Professional Financial Planning Designation from the Canadian Securities Institute.

Dr. Bukola Salami

- Full professor, Canada Research Chair in Black and Racialized Peoples Health, Department of Community Health Services, Cumming School of Medicine, University of Calgary
- Founder and lead, Black Youth Mentorship and Leadership Program, University of Calgary
- Vice president, Canadian Nurses Association
- Board member and health working group co-chair, Black Opportunity Fund
- Founder, African Child and Youth Migration Network

Dr. Salami's research program focuses on policies and practices that shape immigrant health. As of January 2019, she has been involved in 38 funded research projects. She is the lead on 17 of these projects with funding from national and international agencies.

Dr. Salami has published over 70 papers in peer reviewed journals over the last 7 years, as well as 2 book chapters and 8 reports. She has led research projects on parenting and mental health promotion practices of African immigrants and currently leads projects on mental health of African immigrant children and Black, African and Caribbean youths. She represents the University of Alberta on the steering committee of the Worldwide Universities Network Global Africa Group.

She also leads a 2019 to 2020 WUN-funded project with 20 scholars from 4 continents and 9 countries conducting a scoping review of the global literature on African child health. She has co-led the research committee for the Edmonton Local Immigrant Partnership and was a committee member of the Edmonton Community Foundation Vital Signs Report on the Social Inclusion of Immigrants. She is a council member of the Alberta College of Social Workers. In addition, she is the co-chair of the health caucus of the Black Opportunities Fund, a national initiative to raise funds to address anti-Black racism in Canada.

Dr. Salami has received several awards for research excellence and community engagement:

- 100 Accomplished Black Women in Canada
- Sigma Theta Tau International Honor Society of Nursing Emerging Nurse Researcher of the Year Award
- College and Association of Registered Nurses of Alberta (CARNA) Award for Nursing Excellence
- Alberta Avenue Edmonton Top 40 under 40

Dr. Carl James

- Jean Augustine Chair in Education, Community, and Diaspora and Professor, Faculty of Education, York University

Dr. James holds the Jean Augustine Chair in Education, Community & Diaspora in the Faculty of Education at York University, where he is also the Equity Advisor to the Dean. He was also the senior advisor on equity and representation in the office of the Vice President of Equity, People & Culture. In addition to teaching in the Faculty of Education, Carl holds cross-appointments in graduate programs in sociology, social and political thought, and social work. In addition, Dr. James:

- has served as Affirmative Action, Equity & Inclusivity Officer (2006 to 2020)
- was the founding director of the York Centre on Education & Community (2008 to 2016)
- was the director of the graduate program in sociology (2007 to 2008)

A distinguished research professor, James is known for his mentorship of students and colleagues.

Dr. James is a former youth and community worker with a PhD in Sociology. He is widely recognized nationally and internationally for his research contributions in the areas of race, racialization, racism, and inequity as they affect the educational, social, athletic, occupational and health experiences of Black community members. His work explores:

- the ways in which accessible and equitable opportunities in education and employment account for the lived experiences of racialized (particularly Black) community members
- the limits to the Canada's multiculturalism and its promise of equity
- the complementary and contradictory nature of sports in the schooling and educational attainments of Black youth
- the health situation and related access to healthcare of Black community members

In advocating for systemic changes in schooling and education, Dr. James brings attention to the difficulties, obstacles and barriers that stifle the interests, expectations, ambitions and dreams of Black youth at all levels of the education system in Canada. He has also researched and written on the experiences of Caribbean peoples in Canada, as well as on the education and inter-island migration patterns and experiences of people in the Caribbean.

Dr. Charmaine Williams

- Dean, professor, and Sandra Rotman Chair in Social Work
- Factor-Inwentash Faculty of Social Work University of Toronto

Dr. Williams has been a faculty member at the University of Toronto since 2002. On January 1, 2023, she was appointed Dean for a 5-year term. Professor Williams also holds the Sandra Rotman Chair in Social Work. Prior to taking on the role of Dean, Williams was the Vice-Dean of Students at the School of Graduate Studies, University of Toronto.

She has also held positions as the:

- Anti-Racism and Cultural Diversity Officer (2003 to 2004)
- Associate Dean Academic for Social Work (2009 to 2014)
- Provostial Advisor on Access Programs (2014 to 2015)

Dr. Williams' research focuses on health equity issues affecting various populations, including racial minority women, 2SLGBTQIA+ communities and families affected by mental illness. As a social worker in the mental health care system, Dr. Williams worked with individuals, families and organizations to help increase access to mental health services for racial and ethnic minority populations. She has extensive experience developing and delivering professional education in the areas of anti-racism, cultural competence, mental health and addictions.

Recent activities include serving on the Anti-Racism Advisory Panel that developed the Toronto Police Service's race-based data collection policy. She is the principal investigator for the Social Sciences and Humanities Research Council funded project titled, "United we stand, divided we falter: Advancing a family-centered agenda for research on caregiving."

Dr. Kwame McKenzie

- CEO, Wellesley Institute
- Full professor, Department of Psychiatry, University of Toronto
- Director of Health Equity, Centre for Addiction and Mental Health
- Practicing psychiatrist

Dr. McKenzie is a policy advisor, clinician and academic with over 200 papers and 5 books. Dr. McKenzie is an international expert on health equity and the social determinants of health, working across a broad spectrum to improve population health and health services. A Southampton University Medical School graduate, Dr. McKenzie trained as a specialist at the Maudsley Hospital, Institute of Psychiatry, London and Harvard University. He is a former Harkness fellow in Health Policy and a fellow of the Royal College of Psychiatrists (UK). His early clinical and academic work focused on developing community informed innovative strategies to increase access and quality of services. This led to advisory roles to the UK Government and election to the executive of the Royal College of Psychiatrists. His more recent work has investigated the social determinants of health and how they can be used to decrease illness and improve wellbeing.

Dr. McKenzie is also:

- a commissioner at the Ontario Human Rights Commission
- chair of the Research and Evaluation Advisory Committee for Ontario's basic income pilot
- special advisor to the ministers responsible for the basic income pilot

He also sits on advisory committees for the Ontario Ministries of Education, Health and Long-Term Care (Ontario) and the Anti-Racism Directorate in the Cabinet Office. Dr. McKenzie co-chairs the Population Health Leadership Table for Toronto Central Local Health Integration Network and Health Equity Advisory Committee for Health Quality Ontario. Nationally, he is also the chair of Community Food Centres Canada and a member of the National Advisory Council on Poverty. He recently co-chaired Canada's Expert Task Force on Substance Use. Provincially, Dr. McKenzie is co-chair of the Ontario Black Health Plan.

In addition to his academic, policy and clinical work, Dr. McKenzie is a past BBC Radio presenter and columnist for the Guardian and Times online. Dr. McKenzie holds an African Canadian Achievement Award for Science, the Dominican of Distinction Award and the Herry Jerome award.

Dr. McKenzie mentor residents, researchers, community members and young people of African and Caribbean origin who want to become doctors. His work has been recognized by the Harry Jerome award.

Dr. Myrna Lashley

- Associate professor, Department of Psychiatry, McGill University
- Adjunct researcher, Culture and Mental Health Research Unit, Lady Davis Institute for Medical Research
- Associate Dean, John Abbott College

Dr. Lashley is the first Black Associate Dean of John Abott College in Montreal, Quebec. She is a consultant and recognized as an authority in cultural psychology to institutions, including justice and security systems. She has been:

- a teacher and consultant to First Nations communities
- the Cross Cultural Trainer for the Grievance Committee office of the secretariat for McGill University
- a director of the Canadian Race Relations Foundation
- on the Comité consultatif sur les relations Interculturelles et Interraciales de la Communauté Urbaine de Montréal
- Chair of the Cross Cultural Roundtable on Security (2008 to 2017)
- vice-chair of the board of the École Nationale de Police du Québec (2004 to 2017)
- a member of the Comité expert en matière de profilage racial of the Service de police de la Ville de Montréal
- a member of the Comité-conseil sur l'organisation d'une consultation sur le racisme et la discrimination systémique
- the author of 2 training manuals on intercultural issues in the workplace[44]

She has won several awards, including:

- the 2015 Woman of Merit Award from the Playmas Montreal Cultural Association
- the Queen Elizabeth II 2012 Diamond Jubilee award
- the 2006 Friends of Simon Wiesenthal Award for Holocaust studies
- the 2004 Martin Luther King legacy award
- the 1995 Merit Award for the Kanawake Native survival school

Her current research focuses on the intersections of culture, terrorism and national security. She is currently Barbados's Honorary Consul to Montreal.

Pascale Kaniasta Annoual

- Art therapist and ethnopsychiatry practitioner
- Founder and director, Arts, Racine et Thérapies

Ms. Annoual is originally from Haiti and brings an understanding of life as complex world of class, power inequities and spiritualities. She uses identity and narratives to help practitioners comprehend how the interpersonal-cultural-disciplinary knowledge informs practice. Having studied the impact of oppressions on identity and on mental health, she:

- coordinated research, titled, "Developing A New Model of Service: Enslavement, Colonization, Racism, Impacts on Identity and Mental Health" (2008)
- works directly with the families and survivors of transgenerational traumas through creating spiritual self-care with engaged quilting and beaded prayers circles
- provided holistic health support and training for support workers and doctors in Haiti following the devastating 2010 earthquake
- developed the concept of capacity bridging as a method to attain cultural competence when working across cultures, disciplines, and various levels of governance
- published in the textbook: "Tapestry of Cultural Issues in Art Therapy"

She also founded Arts, Racines & Therapies, a holistic therapy center that integrates traditional cultures, spirituality and creativity into an integrated clinical practice. Her work extends into Kemetic Initiatic Training where she received the spiritual name of Kaniasta of the Boumaaktem generation.

Learn more:

- Arts, Racines & Therapies

Robert Wright

- Social worker and sociologist
- Director emeritus, consultant, and therapist, Peoples' Counselling Clinic
- Executive director, African Nova Scotian Justice Institute

Robert Seymour Wright is a queer, African Nova Scotian social worker and sociologist whose 35-year career has spanned the fields of education, child welfare, forensic mental health, trauma, sexual violence and cultural competence. He recently completed terms of service as the founding executive director of both the Peoples' Counselling Clinic (November 2017 to March 2024) and the African Nova Scotian Justice Institute (Fall 2021 to March 2024). He continues his work at the Peoples' Counselling Clinic as Director emeritus, consultant and therapist. Robert's identity and work are grounded in his integrated and activist spirituality.

Robert has served in developmentally critical and notable positions throughout his career. He was the first race relations coordinator for the Dartmouth District School Board, the executive director of Family and Children's Services of Cumberland County and the executive director of the Child and Youth Strategy of Nova Scotia. He was an early practitioner of what has come to be known as equity, diversity and inclusion work and he pioneered the introduction of impact of race and culture assessments, a specialized, forensic, clinical presentence report for people of African descent. This latter work has received national attention. In August of 2021, the Government of Canada funded to expand the implementation of these assessments nationally.

Dr. Sophie Yohani

- Registered psychologist and professor, Faculty of Education, Educational Psychology Department, University of Alberta

Dr. Yohani's research examines the mental health and psychosocial adaptation of refugee and immigrants influenced by pre- and post-migration experiences, and program and policy implications in education, healthcare and community settings. Dr. Yohani's focus on trauma and adaptation stems from over 20 years of clinical work in private practice and extensive community-based work with refugee and immigrant groups. Her work is integrative and resilience-focused, and guided by a number of theoretical orientations including ecological systems theory, theory (critical) of multicultural counselling and therapy, feminist and constructivist theories.

Dr. Wesley Crichlow

- Professor, Critical Race Intersectional Theorist, Criminology and Justice, Faculty of Social Science and Humanities, University of Ontario Institute of Technology (Ontario Tech University)
- Visiting scholar, Egale Canada
- Past Associate Dean (Equity), University of Ontario Institute of Technology (Ontario Tech University)
- Director for Youth in Foster Care Pathways to University (University of Ontario Institute of Technology)

Dr. Crichlow's scholarly and community work has focused on the challenges of implementing policies and practices that strengthen broader notions of equity, diversity, social justice and human rights within educational institutions and organizations across Canada. In particular, he foregrounds the intersections of anti-Black racism, race, gender, class and 2SLGBTQIA+ identities. His research interests include:

- Black and Caribbean 2SLGBTQIA+ rights
- queer criminology
- gender and Caribbean masculinities
- critical race theory and anti-Black racism
- decolonization and storytelling as pedagogy
- youth in foster care pathways to university

He is currently investigating the experiences of 2SLGBTQIA+ incarceration, victimization and reintegration. This project aims to understand the myriad of issues related to trauma and over-criminalization of 2SLGBTQIA+ people (especially of transgender, gender-fluid, non-binary and queer people), including:

- physical and sexual abuse while incarcerated
- a lack of 2SLGBTQIA+-affirming programming within carceral institutions
- inappropriate use of solitary confinement
- ineffectual services post-release

His current community engagement includes serving:

- on the Ministry of Community Safety and Correctional Service's Community Advisory Board (CAB) at the Toronto South Detention Center
- on the City of Toronto's anti-Black racism: Partnership and Accountability Circle
- as the director of Equity and Diversity for the Federation for the Humanities and Social Sciences
- as a member of the Equity Issues Committee for Canadian Sociological Association
- as vice-president of the Black Canadian Studies Association