Anti-Oppressive Principles to Guide Program Development

The CFD is using these principles as guidance in support of our strategic commitment to embodying principles of anti-racism and anti-oppression in all our program activities.

Decolonial

Raise the awareness of the histories of the colonized and use critical analysis to understand how power, sociopolitics, and history have produced ongoing and systemic oppression in contemporary health and higher education. Seeks for the learner to understand their place in history, and to disrupt systems of power that deny the reality, lived experience, and knowledge of colonized people.

**Becoming decolonial requires understanding the system of colonization, having a historical understanding of Indigenous people’s relationship to Canada and making sure Indigenous stories and knowledge are recognized as vibrant, ongoing, and as important as other forms of knowledge.**

Reflexive

“Recognize our position in the world both to better understand the limitations of one’s own knowing and to better appreciate the social realities of others. Challenge our own beliefs and assumptions about what is true and normal by first recognizing how these beliefs and assumptions are embedded in the social and cultural structures in which we were raised and trained and/or currently live and work.” (Ng, Wright, & Kuper, 2019)

**Reflexivity is an important idea to understand on its own, but it is essential to engage in reflexivity when thinking through all of the other principles in your work. Who you are – your lived experiences, your education, your biases – will all be a part of how you engage with any idea.**

Anti-Racist

Explicitly and actively highlight, critique, and challenge institutional racism. Address how racist beliefs and ideologies structure one on-one interactions and personal relationships. Examine and challenge how institutions support and maintain disadvantages and advantages along racial lines.
Accessible

“Identify and respond to the ways the design of our content, interfaces, and environments might impede a user’s ability to access, understand, or interact fully and productively. Accessible design precipitates inclusion and doesn’t create unnecessary barriers to privacy, dignity, and independence for everyone.” (See. Write. Hear., n.d.)

Inclusive

Nurture the climate and culture of the institution through professional development, education, policy, and practice. The objective is to create a climate that fosters belonging, respect, and value for all and encourage engagement and connection throughout the institution and community.

Collaborative

Generate opportunities for social connection with the view of nurturing a sense of community and mobilizing knowledge among participants and with the broader health professions and education community.

Community-Informed

Understand critical theories about how people learn, and the impact of race, power, legitimacy, cultural capital, poverty, disability, ethnicity, gender, age, language, and other factors on learning. Culturally aware educators rely on the expertise of the people they help, and connect their personal responsibility to the broader community and collective responsibility. This motivation to help community must extend the purpose beyond the self but also be meaningful.
References


