

Standards of Practice

Health Equity and Anti-Discrimination

For the purposes of this standard, **identity, culture, and individual characteristics** refer to an individual's personal traits and the communities to which the person belongs. This can include but is not limited to characteristics such as physical appearance, body size and shape, use of mobility aids, and identity factors such as religion, ethnicity, sexual identity, gender identity, or social group. All individuals inhabit more than one social location and possess a unique combination of identities and individual characteristics.

Standard

The physiotherapist demonstrates respect towards people of all identities, cultures, and individual characteristics and seeks to provide safe, equitable access to physiotherapy services incorporating an **anti-discrimination** approach to all aspects of physiotherapy service delivery.

Expected outcomes

Clients can expect that the physiotherapist will demonstrate respect and seek to provide care that is safe, equitable, and inclusive of the client's **identity, culture, and individual characteristics**.

Performance expectations

Reflective practice and education

The physiotherapist:

- Identifies, reflects on, and does not act on any stereotypes or assumptions they may hold about a client based on the client's identity, culture, or individual characteristics.
- Reflects on how their privileges, **biases**, values, belief structures, behaviours, and positions of power may impact the therapeutic relationship with clients.
- Responds to feedback on their own behaviour towards clients in relation to respect for the client's identity, culture, and individual characteristics.
- Participates in ongoing education on privilege, discrimination, systems of oppression, social determinants of health, **cultural safety** and **cultural humility**, and social justice.
- Learns about the negative effects of discrimination and trauma and their impacts on clients during health-care experiences.

Creating safe health-care experiences

- Works to identify, address, prevent, and eliminate discrimination within the practice setting and their sphere of influence.

- Takes appropriate action when they observe others acting in a discriminatory manner by:
 - Helping others to identify and eliminate discriminatory attitudes, language, or behaviour.
 - Supporting clients, colleagues, and others who experience and/or report acts of discrimination.
 - Reporting acts of discrimination to leadership and other appropriate authorities.
- Creates safe, equitable health-care experiences free from discrimination for the client by seeking to understand how the client's identity, culture, individual characteristics, values, and beliefs may affect their experience of care, incorporating this understanding in all aspects of physiotherapy service delivery.
- Treats clients with respect and empathy by:
 - Recognizing that bias (implicit and explicit) negatively affects client care and patient outcomes.
 - Acknowledging and respecting the client's identity, culture, and individual characteristics.
 - Being open to learning from the client and others, listening to and seeking to understand the client's lived experiences.
 - Treating clients and their families with compassion.
 - Providing the client with the necessary time and space to share their needs and goals.
 - Providing clear information about the physiotherapy options available, including information about what the client may experience during the health-care encounter.
 - Communicating information in a way that is understandable to the client.
- Adjusts their approach to address the client's physical, mental/emotional, spiritual, and cultural needs.
- Facilitates the involvement of the client's family and others when desired by the client.

Strengths-based and trauma-informed practice

- Works with the client to incorporate their personal strengths that will support the achievement of their health and physiotherapy goals.
- Recognizes the potential presence of trauma in a client's life and adapts their approach to be thoughtful and respectful of this, including seeking permission before engaging in assessments or treatments.
- Recognizes that trauma may affect how clients view, access, experience, and interact with the health-care system.

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Anti-discrimination is a form of action against discrimination, systemic racism and the oppression of marginalized groups. An anti-discrimination mindset is based on conscious efforts and actions to provide equitable opportunities for all people on an individual and systemic level.

Bias is prejudice in favor of or against one thing, person, or group compared with another, usually in a way considered to be unfair. This can include both explicit and implicit bias. Implicit bias refers to having attitudes, stereotypes, or prejudices towards people or groups without being consciously aware of them.

Cultural humility is a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience.

Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the health-care system. It results in an environment free of racism and discrimination, where people feel safe when receiving health care.

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Social justice refers to fairness as it manifests within society and includes fairness in health care. Social justice depends on four key principles or goals: human rights, access, participation, and equity.

Systems of oppression refers to society level norms or structures that give advantage or disadvantage to individuals or groups, regardless of whether individuals want or are aware of it. These systems can result in dire health effects. This can include but is not limited to racism, sexism, heterosexism, cisgenderism, ableism, classism, anti-Semitism, Islamophobia and anti-fatness. Individuals inhabit more than one social location, meaning that each person's lived experience includes a combination of intersecting systems of oppression.

Related Standards

- Communication
- Continuing Competence
- Indigenous Cultural Safety and Humility

Acknowledgment: this Standard is based on the Indigenous Cultural Safety, Humility, and Anti-racism Standard (2022) first developed by the British Columbia College of Nurses and Midwives and the College of Physicians and Surgeons of British Columbia.