



Abstract Title: Building a health equity agenda for people of African descent

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Introduction

Although Canadian studies on health equity pertaining to people of African descent have been emerging over the last 15 years (Hansson, Tuck, Lurie & McKenzie, 2012; Kisely, Terashima & Langille, 2008; Lebrun & LaVeist, 2013; Rodney & Copeland, 2009; Scheppers, Van Dongen, Dekker, Geertzen & Dekker, 2006), they have not resulted in equitable health policies and services for this population, or university curricula that speak to the health needs of this population. This presentation will build on the presenters' study findings by offering suggestions for building a *Health Equity Agenda for People of African Descent* through research, policy, university curricula, and services. The presenters will discuss some of the main issues that need to be considered in addressing the health and mental health experiences and needs of people of African descent by highlighting findings from their studies on Black women's survival strategies for succeeding in the face of racism, sexism and other forms of discrimination, struggles immigrants experience obtaining equal access to health services, and how representations of race, culture, gender, class, and other social identities shape psychiatric diagnoses for people of African descent.

Objectives

The presentation's main objectives are: 1) to examine research on health equity as it pertains to people of African descent; 2) to identify gaps in this research; and 3) to lay out the building blocks for a *Health Equity Agenda for People of African Descent* that is premised on research, policy, university curricula, and services that address the health and mental health needs of people of African descent.

Methods

The presenters will discuss their data collection methods, which includes interviews and focus groups. They will also discuss their data analysis and interpretation methods, including inductive coding through content analysis of interviews and NVivo.

Results

Results from the presenters' studies will be shared to provide insight into issues that must be considered in building a *Health Equity Agenda for People of African Descent*, including strategies for surviving discrimination, assimilation struggles experienced by immigrants, and the structural factors underlying mental illness in Black communities.

Conclusion

As this presentation will demonstrate, a *Health Equity Agenda for People of African Descent* must be premised on research, curricula, policies, and services that reflect the diverse histories, cultures, and experiences of people of African descent, and that address the historical, structural, systemic, and individual barriers and challenges this population experiences based on race, culture, gender, class, and immigrant status.

References

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