

****For Immediate Release****

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From the Atlantic Centre of Excellence for Women's Health and the Canadian Women's Health Network:

\$1.25 million study looks at impact of racism, violence on health and well being of African Canadians

A team of African Canadian researchers is looking at the impact of violence – including the violence of racism – on the health and well being of members of Black communities in Halifax, Toronto, and Calgary. Dr. Wanda Thomas Bernard, Director of the School of Social Work at Dalhousie University is Team Leader for the five-year, \$1.25 million project funded by the Canadian Institute for Health Research (CIHR). Dr. Carl James from York University in Toronto, Dr. David Este from the University of Calgary, and Dr. Carol Amaratunga from the Atlantic Centre for Excellence in Women's Health are co-investigators on the project.

The Racism, Violence, and Health Project will be launched from the North Branch Library on Gottingen Street in Halifax on September 10, 2002, at 1:30 p.m. Bernard and community members will be available to talk about the project and how violence, particularly the violence of individual, collective, and systemic racism, affect both themselves and their communities. Everyone is welcome to attend.

“One of the key issues we will be investigating,” says Bernard, “is what happens when Black boys grow up surrounded by stereotypes that assume they are ‘trouble’, that they will eventually find themselves in conflict with the law. We want to know the impact of these stereotypes of Black masculinity on Black girls, women, and elders as well as on boys and men. We want to investigate the consequences of resisting and/or being caught in these stereotypes.”

A well-known member of the African Nova Scotian community, Bernard's previous work with the survival and success of African Nova Scotian men led to last year's international conference on Fatherhood in the African Diaspora held at the Dartmouth Sportsplex.

Susan Edmonds, co-chair of the Health Association of African Canadians (HAAC), is one of many community partners involved in the research. A nurse and community activist, Edmonds has been in the forefront of calling for the inclusion of racism as a determinant of health. “The repeated experience of being personally devalued coupled with a fear of speaking up takes a toll on an individual's sense of self and can negatively impact that individual's health,” Edmonds says.

“Academics in the past have come and gone from the Black community without creating lasting ties,” Edmonds says. “The resultant research tended to be paternalistic.” HAAC is encouraged that CIHR has supported the development of an African Canadian research team with members who live in and contribute to their communities on an ongoing basis.

Bernard says the project is action research – information is gathered and analysis is developed in order to provide community members, health professionals, and policy makers with a basis for taking action on issues of concern to the communities involved. As much as possible, research assistants will be hired from the Black community and services will be purchased from Black community members.

“This kind of research can only be successful if community members contribute their time, expertise, and resources,” Bernard says. “An ethical approach to research requires that most of the project resources go back to those communities.”

The African Canadian researchers and their research assistants will be working with African Canadian community members to document experiences of individual, community, and systemic violence. They will be meeting with people in various communities to discuss current concerns, complete a survey, and engage in in-depth interviews. They will also work closely with nine families over three years, looking deeply at family members’ experience of violence, and its effects not only on their health and well being, but that of their communities and of society in general. A national conference will be held in Halifax in 2003, an internet conference in 2004 and an international conference in 2006.

In each city, annual Community Forums will be held to discuss issues that arise from different research activities and explore how to address these issues in concrete ways. Four community-based projects will occur in the final year, projects that will build on the capacity of communities to heal from and work to prevent individual, community, and systemic violence. At least one of the projects will develop Africentric health education materials and workshops that focus on violence, gender, and health.

In Halifax, a Community Forum in the fall will pull together residents of the Central Halifax community, the community of professional African Nova Scotians working in HRM, and six semi-rural communities: North Preston, East Preston, Cherry Brook, Hammonds Plains/ Lake Loon, Timberlea/ Beechville, and Lucasville/ Sackville/ Cobequid Road.

General areas of investigation include the questions: How do African Canadian boys, girls, men, women, and elders experience violence in their lives? How does it affect their health and well-being? How does it affect the health and well being of their families and communities? What actions do community members already take to counteract the effects of violence in their lives? What other actions can individuals, families, and communities take that will increase their understanding of the root causes and terrifying effects of violence? How can we make sure that what we learn directly benefits members of African Canadian communities and has an impact on policy makers, program managers, and frontline workers?

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Racism Violence and Health Project

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Racism, Violence and Health Project

The Racism, Violence and Health Project will work with African Canadian communities to study the impact of violence – including the violence of racism – on their health and well being. It begins from the standpoint of those who have witnessed, experienced, and engaged in violence and who live everyday with the effects of violence on themselves, their families and their communities. It will continue with an emphasis on increasing the capacity of communities, families and individuals to counteract violence and increase well being. It will end with pilot projects that build on what has been learned over the five year period of the project.

In particular, the RVH Project will explore what happens when Black boys grow up surrounded by stereotypes that assume they are ‘trouble’, that they will eventually find themselves in conflict with the law. We want to know the impact of these stereotypes of Black masculinity on Black girls, women, and elders as well as on boys and men. We want to investigate the consequences of resisting and/or being caught in these stereotypes.

Over a period of five years, African Canadian researchers will be working with African Canadian community members to document experiences of individual, community, and systemic violence. We will be meeting with people in several different communities to discuss our current concerns, develop and implement a survey, and complete in-depth interviews. We will also work closely with nine families over three years, looking deeply at family members’ experience of violence, and its effects not only on their health and well being, but that of the their communities and of society in general.

We will hold community forums each year to discuss the issues that arise from different research activities and to explore how to address these issues in concrete ways. Four community-based projects will occur in the final year, projects that will build on the capacity of communities to heal from and work to prevent individual, community, and systemic violence. At least one of the projects will develop Africentric health education materials and workshops that focus on violence, gender, and health.

Throughout the research we will be asking questions such as:

How do African Canadian boys, girls, men, women, and elders experience violence in their lives?

How does it affect their health and well-being? How does it affect the health and well being of their families and communities?

What actions do they already take to counteract the effects of violence in their lives?

What other actions can individuals, families, and communities take that will increase their understanding of the root causes and terrifying effects of violence?

How can we make sure that what we learn directly benefits members of African Canadian communities and has an impact on policy makers, program managers, and frontline workers?

The Canadian Institute of Health Research has granted this project \$1.25 million over five years through the Institute of Gender and Health and New Emerging Team program. The research will take place in Halifax, Toronto, and Calgary, and will focus on both indigenous and immigrant African Canadians.