

Toronto Public Health Newcomer Pilot Projects

Date:	November 14, 2011
To:	Board of Health
From:	Medical Officer of Health
Wards:	All
Reference Number:	

SUMMARY

The purpose of this report is to summarize the findings of Toronto Public Health's (TPH) two newcomer pilot projects. In addition, the report describes how establishing stronger links with newcomer settlement agencies supports TPH in meeting its mission to reduce health inequalities and deliver services that meet the health needs of Toronto's diverse communities.

The TPH newcomer pilot projects and the newcomer health research, which is reported separately, are part of the Toronto Newcomer Initiative (TNI), a corporate-wide initiative to enhance the City's capacity to meet the needs of newcomer communities through municipal programs and services. It was funded by Citizenship and Immigration Canada (CIC) and ran from August 2010 to October 2011.

The two pilot projects are:

1. the placement of settlement workers within TPH, and information dissemination and training with settlement workers through the Local Immigration Partnerships (LIP)
2. the Reunification and Adaptation Project (RAP), a partnership with ten settlement agencies to support residents affected by immigration-related family separation and reunification

While many TPH services and programs are designed and delivered to address newcomer needs, the pilot projects described in this report have assisted TPH to refine and accelerate our work with newcomer communities.

Enhancing TPH links with the settlement sector is an important step in including newcomers in building a healthy city for all. Settlement agencies are well-positioned to partner in this work as they have established and trusting relationships with newcomer

communities. Collaboration with the settlement sector will serve to expand the reach of TPH supports and services while increasing the capacity of the settlement sector to meet the needs of newcomers.

RECOMMENDATIONS

The Medical Officer of Health recommends that:

1. The Board of Health request that the Medical Officer of Health,
 - a. in partnership with the City Manager's Office and Social Development, Finance and Administration, meet with the relevant provincial and federal Ministries to:
 - i. share the findings of the newcomer pilot programs led by TPH; and
 - ii. explore ways to support stronger links between health and settlement agencies in any future federal-provincial-municipal agreements.
 - b. in partnership with City Manager's Office, meet with the Federation of Canadian Municipalities to discuss the findings of the TPH newcomer pilot projects and the health study *The Global City: Newcomer Health in Toronto* to discuss how health issues can be included in the emerging discussions about the municipal role in newcomer settlement.
2. The Board of Health urge the provincial and federal governments to ensure that settlement agencies are adequately funded to support linking newcomers to health services and the social determinants required for good health.

Financial Impact

There are no direct financial implications arising from this report.

DECISION HISTORY

On March 1, 2011, the Board of Health reaffirmed to the Minister of Health and Long-Term Care its support for the elimination of the three month waiting period for OHIP coverage for immigrants to Ontario, to enable timely diagnosis and treatment of communicable diseases including tuberculosis which pose a risk to the population of Ontario.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2011.HL2.2>

ISSUE BACKGROUND

The corporate-wide Toronto Newcomer Initiative (TNI) arose out of the 2005 Memorandum of Understanding (MOU) between the city and provincial and federal governments to formalize a collaborative partnership on immigration and settlement issues that affect Toronto. The MOU recognized the role of front-line municipal services

in successful newcomer settlement. Although some staff may have informal relationships with individual settlement agencies, until now, there hasn't been a formal opportunity to more directly link the City with the settlement sector.

In total, there are five pilot projects that focus on how well City Services as well as the broader human services system are serving recent immigrants to Toronto. The initiative is being coordinated by Social Development, Finance and Administration. The overall goal of the Toronto Newcomer Initiative is to develop a Toronto Newcomer Strategy and Action Plan. For more information about the Toronto Newcomer Initiative, see attachment #1.

To help communities better plan and coordinate services (both settlement and general human services) to support social and economic outcomes for newcomers, in 2009, Citizenship and Immigration Canada funded **Local Immigration Partnerships (LIPs)** in municipalities across the province. In Toronto, 17 LIPs were funded in a model that is neighbourhood-based and led by community-based organizations. In this process, settlement agencies and other newcomer service providers consulted with stakeholders and residents and produced strategy documents for their catchment areas, outlining their findings and action areas (www.toronto.ca/newcomer/neighbourhoods.htm).

In 2010, as part of the TNI, a City-wide Local Immigration Partnership table was formed to help coordinate the work of the local LIPs and synthesize the LIP findings. This partnership table is facilitated by Social Development Finance and Administration and will be an ongoing feature of the Toronto Newcomer Strategy. For more information about Local Immigration Partnerships, see attachment #2.

The findings from all of the TNI pilot projects will form the basis for a Toronto Newcomer Strategy and a new model for the City-wide Local Immigration Partnership. The health of newcomers was identified as an important issue and TPH is well placed to take a leadership role on the City-Wide Local Immigration Partnership and the Toronto Newcomer Strategy.

The Corporate initiative reflects a broad interest in the health of newcomers and the role of cities in newcomer settlement as articulated in recent reports.

- In October, 2011, *Toronto's Vital Signs*, (The Toronto Community Foundation) described Toronto's ability to attract and benefit from international populations and notes how many cities are turning to Toronto to learn how they can become more livable.
- In September 2011, The Federation of Canadian Municipalities released *Starting on Solid Ground: The Municipal Role in Immigrant Settlement*. The report describes the significant role of municipal services in meeting the needs of newcomers and calls for greater involvement of municipalities in policy and funding decisions.

- In June 2011, The Canadian Collaboration for Immigrant and Refugee Health published *Evidence Based Guidelines for Immigrants and Refugees*, the first clinical guidelines tailored specifically to immigrants and refugees.
- In May 2010, Health Nexus published *Growing up in a New Land: Strategies for Working with Newcomer Families*, a guide for service providers to help them understand the special needs of newcomer families with young children.
- In May 2010, The Council for Agencies Serving South Asians published *A Diagnosis for Equity: An initial analysis of South Asian Health Inequities in Ontario*. The report was the culmination of a series of roundtables and meetings with health care stakeholders and South Asian residents of Ontario.
- In February 2010, Peel Region published a series of five discussion papers about how existing services can be improved to better meet the needs of immigrants, including specific recommendations.
- In 2007, the Mayor of Vancouver convened a taskforce on immigration. Its final report included a series of eight recommendations to assist the City in addressing immigration-related issues at a local level.

Toronto Public Health delivers programs and services to address the health needs of Toronto's diverse communities. As the ethno-racial makeup of Toronto has changed through immigration, TPH has developed programs and services to address specific newcomer health needs. For example, the Peer Nutrition Program offers culturally specific, first language food and nutrition education to help newcomers adapt their food skills to living in Toronto. Another example is the Healthy Babies Healthy Children program in which Family Home Visitors provide culturally appropriate support to new mothers in their homes, often in their first language.

COMMENTS

Toronto has benefitted from several decades of consistently high immigration. Over the last ten years, 40% of all permanent residents settled in the Greater Toronto Area (GTA). Changes in immigration policies in the 1970's reduced barriers to immigration from some regions of the world and spurred the emergence of a racially diverse city. The GTA is the world's most global city region as measured by the percentage of foreign born residents (American Migration Institute, 2007). Through this period of change, public support for high immigration levels has generally remained strong (Reitz, 2011).

Immigration has been a key source of talent and new growth in Toronto. Immigrants stimulate the economy through population growth and increased demand for goods and services, especially housing. Immigrants pay more taxes than the value of the government services they use and thereby increase the revenue available for public services for all residents (Fang, Dungan and Gunderson, 2010). Immigration accounts for all net labour force growth in Toronto (Economic Development and Culture, Toronto, 2008).

Despite these successes, there are challenges in the settlement process that limit the contribution of newcomers and affect their health. This includes a differential in earnings, inadequate housing and an upward trend in poverty. In spite of immigration selection criteria that emphasize higher education, recent immigrants to Canada are earning less than earlier generations of immigrants and less than Canadians. In 2009, recent immigrants (in Canada for five years and less) with a university education had an unemployment rate of 13.9%, which is four times higher than that of Canadian-born workers with a university degree (3.4%), (Statistics Canada, 2010). This is reflected in the pattern of poverty in Toronto neighbourhoods, where newcomers are disproportionately located in apartment buildings in low-income neighbourhoods in the inner suburbs (United Way Toronto, 2011).

Although newcomers generally arrive healthy and resilient, their health often deteriorates the longer they live in Canada. This is largely due to a broad range of social factors including: high rates of unemployment and precarious employment, income insecurity, discrimination, social isolation and exclusion, housing insecurity, and barriers to services. The impact of these factors is compounded by the stress of settling in a new country. While some health needs are broadly applicable to many newcomers, others are unique to certain sub-groups including those defined by age, gender, sexual orientation, ethno-racial identity, migration experiences, income level, education and other factors.

The changing ethno-racial, cultural, linguistic and socio-economic composition of newcomer populations and their health status have important implications for the health sector. Health service providers need to understand and be able to provide tailored approaches to address newcomer health needs. There is a great need for services that are responsive to cultural and linguistic diversity.

Current information on the health of newcomers in Toronto is summarized in the report titled *The Global City: Newcomer Health in Toronto* (Toronto Public Health and Access Alliance Multicultural Health and Community Services, November 2011)

TPH Pilot Projects: Engagement with the Settlement Sector

a) Settlement Health Outreach Workers

In Toronto, approximately 90 organizations are funded by CIC to provide services at over 250 agency, school and Toronto Public Library locations. Settlement agencies often have roots in specific communities but have evolved to serve all newcomers in their catchment areas. For a description of the settlement sector, see attachment #3.

As part of TNI, 18 settlement workers were placed in City facilities. Toronto Public Health hosted four settlement workers from November 15, 2010 to March 15, 2011. The settlement workers were permanent employees of three settlement agencies and seconded to Scadding Court Community Centre, which acted as the lead agency for the project. Other settlement workers were placed in Parks Forestry and Recreation (PF&R)

community centres and in Children's Services (CS) daycares and shelters operated by Shelter, Support and Housing Administration (SSHA).

The objectives of the project were to:

1. improve TPH clients' access to settlement services,
2. increase awareness of TPH services in the settlement sector, and
3. enhance awareness of newcomer issues among TPH staff.

Placing settlement workers in City facilities reflects a practice adopted by Toronto school boards and the Toronto Public Library, who have been hosting settlement workers since 1999 and 2006 respectively. School and library based settlement workers are now common across Ontario and in many provinces.

Findings:

Over four months, the settlement workers worked with 129 families, almost half of whom arrived in Canada in the last two years. One third of their clients were referred by TPH staff, another third were referred by staff in other settlement agencies whose clients needed help accessing TPH services, and another third were identified by the settlement workers as they worked in TPH programs such as Peer Nutrition.

In addition to meeting with clients, the settlement workers attended 21 staff meetings across the city to promote their services and educate staff about newcomer health issues. Several themes emerged from the discussions with staff:

- unresolved settlement issues often make it difficult for clients to address health issues,
- links to settlement agencies should be strengthened,
- the recent reorganization of staff in several TPH programs into geographic teams can facilitate closer links between staff and settlement agencies in each community.

The settlement workers reported that they were largely unaware of TPH services prior to the pilot and that TPH programs and services are not well known in the settlement sector. However, after learning more about TPH programs, they recognized the importance of promoting them to settlement agencies. They noted the absence of a TPH communications product that comprehensively describes public health services for newcomers.

The settlement workers also remarked on the importance of making services as accessible as possible and identified the following barriers:

- Many newcomers are accustomed to in-person discussions about health issues, however, for many TPH programs, information and registration is primarily available online or over the phone.
- Although TPH staff can access telephone interpreters, most newcomers aren't aware of the service or how to request it.
- Some clients need direct support to make the initial contact and understand how the service works.

Although the settlement worker pilot ended in March 2011, engagement with the settlement sector has continued through the Local Immigration Partnership process.

b) Local Immigration Partnerships (LIPs) and TPH

To respond to the themes identified in the settlement worker pilot project and the LIP findings, TPH staff worked with three LIPs on knowledge dissemination and training projects to create templates for city-wide work. The three LIPs were Central South Etobicoke, North Etobicoke and South Scarborough. These LIPs had a significant focus on health in their strategies.

i. Promoting Health Services to Newcomers in Etobicoke

In their strategy documents, both the North Etobicoke LIP and the Central South Etobicoke LIP identified the need for timely information about and connection to health services. Two brochures were created: *New to Canada? Free health services in Central and South Etobicoke* and *New to Canada? Free health services in North Etobicoke*. Each provides information about ten key TPH and community health services that are immediately relevant to recently arrived newcomers. Many of these services are available without a health card. The brochures are being distributed by settlement agencies in each LIP. An evaluation of their effectiveness will guide the development of city-wide promotion of TPH services for newcomers.

The choice of the ten key health services was tested in three resident focus groups. The key findings were as follows.

- Participants were largely unaware of the available services. In one case, a participant knew about dental clinics in Peel Region but didn't realize similar services were offered in Toronto. New mothers expressed disappointment that they didn't know about services that could have helped them during pregnancy and in the early years.
- Describing sexual health services as a family planning and sexual health services makes them more accessible to some newcomers.
- The responsibility to report children's vaccinations to TPH is not well understood.

ii. Training – Navigating Newcomer Health Services in Scarborough

To facilitate greater knowledge in the settlement sector about TPH and community based health services for newcomers, staff supported a training program for Scarborough settlement workers. The event was organized in collaboration with the South Scarborough LIP, Scarborough Hospital, TAIBU CHC, Scarborough Centre for Healthy Communities CHC and The Scarborough Hospital. The program focused on how particular health services could directly or indirectly address issues identified in their LIP strategy. The issues were: maternal and infant health, family planning and sexual health, healthy food access, using a hospital, uninsured and primary care at community health centres, dental clinics and immunization reporting.

To help participants consolidate their learning and apply it to their day to day work with clients, a reference document was distributed. It describes why each of the services is important to newcomers, what the research says about each issue, the problems that clients often encounter and advocacy tips.

c) Health Content on the City of Toronto Immigration and Settlement Web Portal

As part of the Newcomer Initiative, the Immigration and Settlement Portal (toronto.ca/immigration) has been enhanced with new information and easier navigation features. It now includes information about key TPH services for newcomers. TPH has also produced a short video about four TPH services. The video will be posted on the City newcomer web site and promoted broadly. The video features a new mother who describes her call to TPH and how it lead to a home visit by a nurse and participation in a parent infant parenting skills program. The video also shows how to request an interpreter when calling TPH, and provides simple overviews of immunization reporting, dental clinics and family/planning and sexual health services.

Reunification and Adaptation Project

The Reunification and Adaptation Program (RAP) is a recently concluded partnership between Toronto Public Health and a consortium of ten community agencies under the leadership of SAFSS (Settlement Assistance and Family Support Services). From November 2010 to September, 2011, RAP supported families coping with immigration-related family separation and reunification (FSR) through information-gathering, peer support, mentorship, advocacy and other strategies.

An earlier version of the Reunification and Adaptation project (RAP) ran for 18 months in 2002-3 with funding from Ontario Works. The project validated the need for supports for families dealing with immigration related separation and reunification issues.

The project demonstrated effective ways to partner with newcomer agencies that might be applied to other health issues that focus on vulnerable segments of the population. The consortium approach, allowed RAP to focus on a particular health need and reach a broad number of participants from different geographic areas and ethno-cultural backgrounds in the city. This model might be applied to a smaller number of agencies or to multiple issues.

The RAP consortium partners were: SAFSS, Afghan Women's Organization, African Canadian Community Legal Clinic, Centre for Information and Community Services, Council of Agencies Serving South Asians, Culturelink, Heritage Skills Development Centre, Hispanic Development Council, Kababayan Community Centre, National African Integration and Family Association.

Background and Rationale

Historically, when immigrating to Canada, one family member often came first to assess opportunities, find a job, establish a foundation and send remittances back home. After this initial period, other family members followed from the country of origin. In recent

years, the forms of family separation and reunification have become more varied and prolonged than in the past.

Family separation can take many forms: a spouse comes to Toronto to work or leaves the family to find work overseas; an infant, child or youth joins his or her parent(s) in Toronto after many years apart; or a youth or adult comes to Toronto seeking safety or to study.

The length of separation is often beyond the control of the individuals concerned, as immigration laws, employment challenges and income issues often conspire to prolong it. The longer the separation, the harder it is to maintain strong family ties, roles and supports. Reunification can be joyful, but it can also be filled with tension, as family members adapt to each other anew after settling in a new country. Children and youth are particularly vulnerable, and may have difficulty maintaining and re-establishing their relationships with the separated parents.

While the legal issues dealing with family separation and reunification during immigration are well documented and understood, the emotional trauma, intergenerational, intercultural and integration issues are not as well known in the research, policy and service landscapes. Based on a review of the literature, family separation and reunification of newcomers as they immigrate to Canada is a relatively unexplored domain especially in terms of program development. RAP represents one of the first programs to work directly to address FSR as a way of supporting newcomers' mental health and well-being. The documentation of the program is a valuable contribution to the knowledge of these issues.

The settlement agencies provided various kinds of expertise in language skills, cultural knowledge, and connections to established networks and clients. TPH contributed its expertise in service coordination, synthesizing and documenting the project, leveraging City and community resources, facilitation, evaluation and supporting the lead agency.

To raise awareness about the implications of this issue for TPH and other programs, the project engaged staff internally at TPH and in the social service sector through meetings with representatives of a total of 23 organizations. RAP shared their work and findings with stakeholders at two conferences.

A toolkit was produced as a legacy of the project consisting of client stories, translated tip sheets based on advice from RAP clients (as opposed to subject experts), training plans, guidelines for FSR support and a review of the published research.

Findings

From November 2010 to August 2011, there were 4546 client contacts facilitated by 12 full time equivalent staff positions which were filled by 23 RAP staff. Participants were vulnerable to social isolation, depression and emotional issues associated with FSR. However, as a result of the program, they felt less isolated and more hopeful in managing FSR through improved social networks, knowing that they were not alone in

experiencing FSR and better understanding how FSR affects people. For more information, see attachment #2.

Implications for TPH and Newcomer Health Promotion

As Toronto continues to grow, it is expected that family separation and reunification will continue to be an issue. Immigration rates are projected to remain high as Canada continues to rely on immigration for economic and population growth. Immigration and other policies suggest that there will be an increase in the number of newcomer families affected by separation and reunification issues.

- Canada continues to expand its use Temporary Foreign Workers such as live-in caregivers who are not eligible to apply to bring family members until they have satisfied a 24 month residency requirement.
- There are continued challenges for newcomers to establish themselves in the workforce and to financially qualify for sponsorship of family members.
- Lack of child care supports adds incentives for people to seek other affordable, childcare solutions such as sending their children to their country of origin to be cared for by relatives.

TPH and RAP project staff engaged stakeholders from several sectors and mainly met with receptivity to the issue. Unfortunately, due to the short time frames and limited capacity there is no ongoing structure to build on these initial efforts, and long-lasting change to FSR-sensitive practices is likely to be limited. One exception may be the programs internal to TPH such as the parenting program, whose teams are currently in discussion to adapt practices to be responsive to families dealing with these issues.

Overall, the RAP project findings suggest ways for moving forward to better support the resiliency of newcomers affected by FSR in a multi-layered approach. The RAP project has identified promising strategies and supports for expanding understanding of issues across the system and for further developing and testing the effectiveness of supports for people dealing with FSR. Advocacy through further research and dissemination should also be considered. Program development, knowledge gaps and advocacy would benefit from a research agenda to determine the prevalence of the problem, the effectiveness and efficiency of different supports especially from the participant perspective, and how FSR fits with other settlement needs and adjustments that newcomers must make. Settlement agencies are willing and capable partners but funding and comprehensive, coordinated approaches are needed to sustain relationships.

Next steps

The next steps related to family separation and reunification will entail:

- a. working with the heads of relevant City Divisions and ABC's to raise awareness of the impact of immigration-related family separation and reunification on their clients and develop appropriate responses;

- b. in partnership with the City-Wide Local Immigration Partnership table, convening forums with settlement agencies, children's mental health agencies and other social service organizations, including school boards and police, to raise awareness about the health impact of immigration-related family separation and reunification, and to consider how TPH might collaborate with them to develop appropriate responses; and
- c. informing other Canadian urban public health agencies in large immigrant-receiving cities, alPHa and relevant provincial and federal ministries and agencies about the health impact of immigration-related family separation and reunification, and urging them to consider how they might:
 - i. collaborate to raise awareness of the issue;
 - ii. embed supports in existing public health and other social services;
 - iii. include family separation and reunification in mental health strategies;
 - iv. research prevalence and impact; and
 - v. develop specialized services for parents, children and youth.

Summary

It is clear that these pilot projects provided multiple insights into how to better serve newcomers. They demonstrated effective ways to partner with settlement agencies that might be applied to other health issues experienced by vulnerable segments of the population. The collaboration with the LIPs allowed TPH to link to a larger service planning process that involves many settlement agencies and other City divisions. As well, services were delivered in communities that could not be easily reached by staff. A foundation has been created for future collaboration and there is a shared legacy of knowledge about how to work together.

The pilot projects demonstrated that health is a settlement issue and that settlement is a health issue. Enhanced connections to settlement agencies will help TPH meet its strategic mission and make settlement agencies even more effective in helping newcomers navigate health-related resources, programs and services.

Finally, the results from these projects allow TPH to play an important role in the corporate-wide Toronto Newcomer Strategy to support cross-divisional and cross-sectoral approaches to support newcomer health, wellbeing and full participation in the life of the City.

CONTACT

Dr. Hazel Stewart
Director, Dental and Oral Health
Services
Tel: 416 392 0442
Fax: 416 392 0713
hstewart@toronto.ca

Peter Dorfman
Interim Manager, Newcomer
Initiatives
Tel: 416 338 7935
Fax: 416 392 1357
pdorfma@toronto.ca

SIGNATURE

Dr. David McKeown
Medical Officer of Health

ATTACHMENT

Attachment 1 – Toronto Newcomer Initiative
Attachment 2 – Background on Local Immigration Partnerships
Attachment 3 – Overview of Settlement Agencies
Attachment 4 – Reunification and Adaption Project

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