



Canadian Centre for Victims of Torture



Environmental Scan Report

for

East Downtown Toronto Local Immigration Partnership

Funded by:



Citizenship and
Immigration Canada

Citoyenneté et
Immigration Canada

Prepared by:



Design & Layout: Ermelina Balla, LIP Program Manager

© Canadian Centre for Victims of Torture. All rights reserved. This publication may not be reproduced in any form without permission from the publisher.

East Downtown Toronto Local Immigration Partnership

Objectives of East Downtown Toronto LIP:

1. To improve access and coordination of immigrant integration services (settlement, language training, labour market integration, health and education supports) in the community through the establishment of a partnership council;
2. To enhance service delivery coordination to newcomers, resident within east Toronto, so that programs complement and build towards a common goal of settlement and integration;
3. To build a community of practice which shares learning from each other and from resident newcomers;
4. To strengthen local awareness and capacity to integrate immigrants through the engagement of a broad range of local stakeholders and residents in the formation of the settlement strategy;
5. To help members develop best practices and create a forum for learning and sharing.

Canadian Centre for Victims of Torture (CCVT) is the lead agency that has assumed the responsibility to coordinate and advance the Local Immigration Partnership Initiative in the East Downtown Toronto area.

CCVT's Mandate

The Canadian Centre for Victims of Torture (CCVT) aids survivors to overcome the lasting effects of torture and war. In partnership with the community, the Centre supports survivors in the process of successful integration into Canadian society, works for their protection and integrity, and raises awareness of the continuing effects of torture and war on survivors and their families.

The CCVT gives hope after the horror.

For more information please contact:

194 Jarvis Street, Second Floor

Toronto, ON, M5B 2B7

Tel: 416-363-1066

Fax: 416-363-2122

Website: <http://ccvt.org/>

ACKNOWLEDGEMENTS

The East Downtown Toronto Local Immigration Partnership (LIP) would like to thank all member agencies in the East Downtown Toronto neighbourhood for contributing their time and effort to this project.

We would also like to thank the Steering Committee for their hard work and support on this project. The East Downtown Toronto LIP Steering Committee is comprised of the following member agencies:

- AIDS Committee of Toronto
- Asian Community for AIDS Services
- Black Coalition for AIDS Prevention
- Canadian Centre for Victims of Torture
- Dixon Hall
- Family Service Toronto
- Fred Victor Centre
- Sherbourne Health Centre
- Sojourn House
- Women's Health in Women's Hands

Table of Contents

EXECUTIVE SUMMARY	1
LITERATURE REVIEW	6
OVERVIEW	6
INTRODUCTION	6
LANGUAGE	7
DISCRIMINATION	8
POVERTY AND UNEMPLOYMENT	9
HOUSING.....	11
INFORMATION AND ACCESS TO SERVICES	13
HEALTH.....	15
MENTAL HEALTH	17
IMMIGRANT WOMEN	17
IMMIGRANT YOUTH	19
SENIOR IMMIGRANTS	20
PRECARIOUS IMMIGRATION STATUS.....	21
STATISTICAL HIGHLIGHTS	23
GENERAL INFORMATION.....	24
EAST DOWNTOWN TORONTO AGES	25
FAMILIES.....	26
IMMIGRATION PERIOD OF ARRIVAL AND VISIBLE MINORITY IDENTITIES	26
LANGUAGE	28
EDUCATION	29
EMPLOYMENT.....	30
INCOMES.....	34
BIBLIOGRAPHY	37

Executive Summary

The following report includes a literature review and statistical highlights and focuses on issues that affect immigrants in the East Downtown Toronto area. The literature review draws on research into the challenges and opportunities facing immigrants as they attempt to successfully settle. The statistical highlights use data from the 2006 census and focuses on immigrants living in East Downtown Toronto. Taken together, the information highlights potential individual and system-level barriers facing immigrants, and has implications for the settlement service sector in terms of supports, priorities and gaps. The next step in the process will be a community consultation to validate this information and provide a deeper understanding of issues facing immigrants and settlement services in the East Downtown Toronto area.

Immigrants arrive in Canada for a variety of reasons, from a diversity of circumstances and experiences, and with a range of priorities and needs that vary over time. As the research makes clear as well, the experiences of immigrants are often shaped by various and intersecting identities and factors. Not all immigrants face the same challenges, and some may experience a relatively smooth settlement and integration process. However, the research does alert us to the fact that immigrants, in general, may face some consistent challenges and barriers. The trends observed in the environmental scan are generally consistent with the research. Overall, immigrants in East Downtown Toronto are facing a number of challenges, particularly in terms of finding employment commensurate with their education and income. Generally, recent immigrants in East Downtown Toronto are doing better in terms of settlement than recent immigrants in the Toronto Census Metropolitan Area.

Both the literature and the census data highlight ‘length of stay’ as an important variable affecting immigrants. Recent immigrants that migrated within the last five years of the census, tend to be among the more vulnerable populations in the area with regards to challenges such as language, employment, and income. As well, the literature reviewed points out that recent immigrants tend to be more vulnerable in terms of discrimination, housing, service access and health.

These issues are especially important for the East Downtown Toronto area which has a relatively high proportion of recent immigrants, compared with the Greater Toronto area. While recent immigrants live in every neighbourhood in East Downtown Toronto, over half of recent immigrants live in two East Downtown neighbourhoods – Regent Park and St. Jamestown.

On a broader level, these issues are important because they can affect the long-term settlement of immigrants. The research reviewed suggests that over the last three decades, immigrants to Canada have faced more and more challenges as they attempt to settle. While it has always been common for immigrants to face challenges when they first arrive, the ability of immigrants to overcome these challenges has slowly deteriorated over time. More and more immigrants are finding it harder to get out of those first years of hardship. Evidence from East Downtown Toronto indicates that these hardships can persist for over 15 years for some immigrants. These findings are particularly problematic in light of the fact that Canada’s immigration policy accepts immigrants based on criteria like education and qualifications. There is a clear disconnect between the policy and the reality facing immigrants as they attempt to settle.

The following sections summarize key findings from both the literature review and the environmental scan on the topics of language, discrimination, employment and poverty, housing, information and access, health

and mental health. It also summarizes findings on immigrants who are also women, youth and seniors and immigrants with precarious status.

Language

Not surprisingly, the literature reviewed highlights language as one of the most pervasive challenges for immigrants. Language barriers can be significant for all immigrants regardless of period of immigration.

Language barriers can prevent access to settlement services as well as more mainstream services such as health care and mental health supports.

In addition, language barriers were identified as a key challenge for immigrants trying to obtain employment. In the case of employment, the research points out that the labour market appears to demand a high level of proficiency and fluency, beyond basic language skills. The research reviewed indicates that those refugees and those sponsored by “economic” immigrants (the principal applicants) tend to face the greatest language challenges. In East Downtown Toronto, data demonstrates that recent immigrants face considerable language barriers. Seven percent of recent immigrants are not able to speak English.

These language barriers are, however, generally lower than in other parts of the Greater Toronto area and this is likely due to a large and growing South Asian population that speaks English. There are also robust enclaves in the area, with large and concentrated populations that speak Chinese in the east end of the East Downtown area and Italian and Portuguese in the west end. These settings contribute to the large number of more settled immigrants who have not acquired English and who, in fact, live and work entirely in another language.

Discrimination

Over 79% of recent immigrants and 66% of all immigrants in East Downtown Toronto identified themselves as visible minorities. The research reviewed shows that discrimination towards immigrants can lead to an exclusion from mainstream services and some settlement services because of the complexity of immigrant issues and insufficient cultural understandings.

Race and gender discrimination are closely connected with employment and poverty. Women and visible minority immigrants have higher unemployment and underemployment issues than male and non-visible minority immigrants. The unemployment rates in East Downtown Toronto for visible minorities are higher than the average unemployment rate for the area of 8.1%. Generally while qualification recognition is an issue for many recent immigrants, race is the better indicator of whether or not an employer accepts those qualifications. In East Downtown Toronto, unemployment by period of immigration is consistent with the proportion of immigrants who are visible minorities. The higher proportion of visible minorities, the higher the unemployment rate. Discrimination also appears to limit the type of work that immigrants can obtain based, with disproportionate numbers of immigrants finding employment in a narrow range of jobs and industries.

Employment and Poverty

Major employment challenges revolve around language, education and the recognition of credentials. Immigrants coming to Canada are expected to have high levels of education, but upon arrival, these qualifications and credentials are often not recognized. This holds true in the East Downtown area.

Recent immigrants in the East Downtown Toronto are more educated than the average East Downtown area resident, with half of recent immigrants having completed a university degree. The vast majority of these degrees were obtained outside of Canada. Despite these high levels of education, recent immigrants have higher unemployment rates. In 2006, recent immigrants in East Downtown Toronto faced a 10.8% unemployment rate, and research indicates that the recent economic recession had a greater impact on those that immigrated in the last 10 years. Unemployment appears to be both worse and more persistent for recent immigrants than for those who arrived in earlier periods.

Many immigrants facing low employment turn to “survival jobs” to make ends meet. These jobs are a result of underemployment and tend to be in the manufacturing, transportation, construction, and education sectors. Survival jobs are represented in East Downtown Toronto through manufacturing occupations that account for 14% of recent immigrant jobs. The recession has likely led to greater unemployment for these sectors. Besides having jobs that pay low wages, many survival jobs are not stable or reliable. Recent immigrants are more likely than the average East Downtown Toronto resident to not be able to find full-year, full-time employment. Survival jobs tend also to be jobs that offer little opportunity for advancement and are rarely relevant to the skills and qualifications of the immigrants who hold them. Immigrants driven to survival jobs by economic need often lack the spare time to pursue the training and certification that could lead to more lucrative and successful employment over the long term.

Low employment and underemployment both contribute to low incomes and poverty issues in East Downtown Toronto. Poverty is exacerbated by issues related to accessible, affordable childcare and transportation. These cycles of poverty present stresses that can become further impediments to career development and stable employment. Median individual incomes for recent immigrants in the area low at just over \$17,000. Low incomes appear to be becoming more persistent. Only immigrants that arrived in Canada prior to 1986 have reached the median income levels of non-immigrants in East Downtown Toronto at \$29,000. As a result of low incomes in the East Downtown area, about 44% of immigrants that arrived in Canada after 1991 are living below the Low Income Cut-Off.

Housing

Finding housing is often a top priority for immigrants upon arrival, however there are a number of challenges for immigrants finding suitable housing due to high costs of housing, low vacancy rates, and limited affordable housing in Toronto.

Many immigrants rent their homes. Immigrants who are unemployed face additional challenges around housing applications and payment of first and last month rent. Other immigrants have identified discrimination around income, race, language and having families as leading to challenges in finding suitable housing. Immigrants appear to be having more difficulty moving to homeownership in recent years, staying in rental accommodation longer. Despite that, some immigrants move too quickly into buying homes without sufficient financial means, in an effort to provide a more suitable home for their family, and establish themselves in the community.

In East Downtown Toronto, 78% of people are living in high density apartments. This is likely connected to the low incomes in the area.

Research suggests that refugee claimants face the greatest housing challenges in most part because of application requirements of providing source of income and identification. Refugee claimants are also at greater risk for homelessness. Refugee families can find themselves in Toronto’s family shelter system because they arrive in the city with no resources, no housing, and a lack of supports to meet immediate

needs. Increased use of family shelters in the city are often connected to changes geopolitical conditions and immigration policies that lead to more refugees in the city.

Homelessness is a threat for some recent immigrants, often driven by low incomes, lack of employment, and a shortage of suitable housing. Immigrants who are homeless are more likely to be visible minorities, women, married, and have children than non-immigrants.

The supports available for addressing housing issues for immigrants are insufficient. The literature points towards service gaps around housing supports and services through settlement services. Immigrants are turning to social networks for housing supports where information around housing rights can be inaccurate.

Information and Access

Immigrants face significant challenges in the process of settlement around discrimination, language, employment, and housing, however some settlement services and supports remain inaccessible to many of those in need. Generally, immigrants do not access as many services as are available to them. Challenges to accessing settlement services include language, costs, cultural appropriateness of services, lack of childcare and transportation. Geographic accessibility of services is also an issue for immigrants that may have to travel far outside of their neighbourhood to reach settlement services. A social inclusion perspective should be incorporated to settlement services by making services more accessible and inclusive of different languages and cultures, and offering a range of services in various locations. Settlement services tend to exclude immigrants that have been in Canada for longer than 3 years. However, the process of settlement can take much longer in terms of addressing the stresses of migration and discrimination. There is a significant gap in services for this population. There is also a perceived lack of services for immigrants who are now citizens, because many services are directed towards permanent residents and refugees.

Service infrastructure in East Downtown Toronto is better than average for the GTA. Service providers appear to be better connected to each other and more aware of the options available, but service volumes remain insufficient and service networks remain too ad hoc and informal to be as beneficial as newcomers require. Immigrants may also rely heavily on informal services or social networks to connect to settlement services. While these connections can be helpful, information can be inconsistent or inaccurate as information on services changes over time and for different circumstances. Certain social networks are also more helpful than other social networks that might stigmatize some services and impede access to relevant supports.

Health and Mental Health

Social determinants of health including discrimination, language barriers, low income, housing, and employment are evident in the East Downtown area and are likely leading to poor health and mental health outcomes for immigrants. Further issues of stress and exhaustion arising from the above challenges can exacerbate already uncertain circumstances. Immigrants tend to face greater challenges for each of the determinants of health identified. The social determinants of health factors are cited as responsible for the “healthy immigrant effect” (immigrants tend to arrive in Canada with better health than Canadian-born residents, but their health declines over time to below Canadian-born levels). Because of the impact of the social determinants of health, policies and services geared towards addressing health issues need to address the structural conditions that lead to the decline in immigrant health. Barriers to accessing health services are also a challenge for the health of immigrants. Major barriers include the three months of residency required before receiving health insurance, and the shortage of culturally appropriate services. Language barriers are also significant as they prevent immigrants from receiving information and access to health

services. Other cultural differences may prevent immigrants from approaching services because of a negative connotation of that service in their country of origin.

Women, Youth, and Seniors

Research has shown that immigrant women tend to face the greatest language barriers and are less likely than immigrant men to speak English. Language barriers also linger longer for women and it is not uncommon for immigrant women in some communities to not learn English. This is likely most relevant for Chinese women in East Downtown Toronto where 14% of recent immigrants speak Chinese most often. Language barriers can be connected to traditional culture and norms where women might be expected to prioritize child-rearing and other gendered expectations over language development. Language and cultural barriers also affect women more than men when it comes to accessing health services. Immigrant women also face additional challenges finding employment because they are searching for work in a racialized and gendered labour market. As a result, female recent immigrants have higher unemployment rates than men (12% for women compared to 10% for men). As a result women are more likely to be working dangerous jobs, and earn lower wages than their male counterparts. Immigrant women isolated from family or social supports, and who face a fear of deportation may also be especially vulnerable to domestic abuse.

Immigrant youth may also face particular challenges associated with finding themselves in unfamiliar settings and adjusting to new educational and social systems. Youth make up 14% of recent immigrants in East Downtown Toronto, a comparatively small proportion of the population. East Downtown Toronto also has a relatively small population of children, caused in part by smaller family sizes in the Chinese population in the eastern area of the East Downtown. Education is considered a major determinant of successful integration. The importance of education for youth is evident in East Downtown Toronto where few youth are participating in the labour market and have higher than average rates of educational attainment.

The statistical data indicates that senior recent immigrants are largely coming to Canada as sponsored family members of the primary applicant. Only 2% of East Downtown Toronto recent immigrants are seniors, and of these seniors, only 12% of senior recent immigrants are living alone meaning that many seniors are living in multi-generational households. Among the challenges facing recent immigrant seniors, research has pointed out that language barriers, loss of autonomy, being disconnected from former social networks and living with other family can be a significant cause of isolation for senior immigrants.

Precarious Status

Of all recent immigrants, those without official immigration status or precarious status are generally facing the most difficulties finding employment, housing, and accessing to services. Challenges with employment have led many precarious status immigrants seek low-paying jobs in settings that can be exploitative, unsafe or even abusive. Despite greater challenges for precarious status immigrants, there are fewer services that they are eligible to access because of their status. Don't Ask Don't Tell policies allows for access to certain services without documentation but also fails to provide need statistics on the size of this population. This information could be a potential source of advocacy.

Literature Review

Overview

East Downtown Toronto Immigrant experiences are shaped by a variety of complex factors such as gender, ethnicity, race, and citizenship. These complex factors clearly indicate that immigrants in East Downtown Toronto may have different experiences of immigration; however, research demonstrates that newcomers are subject to a number of similar barriers and challenges. Recent research about immigrants to Canada emphasizes a number of issues immigrants will generally encounter during the process of settlement and integration such as language, discrimination, poverty, unemployment, access to information, housing, health, and mental health. The barriers and challenges encountered by immigrant women, youth, and seniors and immigrants with precarious immigration status are also explored as the research indicates that these populations are generally more vulnerable to the challenges that immigrants face. This review explores the various ways immigrants are excluded from their new communities and identifies the resources that can facilitate successful inclusion, settlement, and integration. Overall, the literature indicates that immigrants today are more skilled and educated, yet face greater challenges than immigrants in the past.

Introduction

For the purposes of this report the term “immigrant” refers to any individual born in a country other than Canada who has either moved to Canada and currently resides in Canada, not including visitors who intend to leave Canada or foreign students who intend to leave Canada. The terms “immigrant” and “newcomer” are used interchangeably throughout this document, as the various sources use either one or both of the terms more or less synonymously, though the term “newcomer” is generally used to refer to immigrants that arrived in Canada within the last 10 years.

Various intersecting institutional, personal, and environmental factors may influence an immigrant’s settlement and integration into a new community. This review explores some of the shared challenges and barriers that consistently prevent immigrants as a group from participating fully in society. The sources considered in this review include peer-reviewed journal articles, government documents, and other materials. The various sources tend to provide different information about this topic: government documents tend to provide information about and insights into some of the broader trends impacting immigrants; peer-reviewed journal articles tend to focus on findings from studies about specific groups distinguished by age, gender, or ethnicity, and about specific topics (for example, care-giving, labour market participation, mental health, cultural identity, and language). Though some of the research was conducted among populations that live in Toronto, little of the literature focuses specifically on immigrants to East Downtown Toronto.

Generally, the research uses settlement and integration as indicators of success when discussing immigration processes and outcomes. The term “integration” denotes a process of facilitation involving both immigrants and residents of the host country. Anisef and Lanphier (2003, citing Breton 1992) define this process as that “by which newcomers become part of the social, cultural, and institutional fabric of the community or society.” The Canadian Council for Refugees defines “settlement” as the “acclimatization and the early stages of adaptation when newcomers make the basic adjustments to life in a new country, including finding somewhere to live, beginning to learn the local language, getting a job, and learning to find their way around an unfamiliar society” (1998). It may take months or even years to make these basic adjustments. Much of the research reviewed for this report noted that settlement and integration are ongoing processes. The needs

of immigrants often extend beyond the initial arrival period. For Mwarigha settlement can extend over three broad phases: immediate, intermediate and long-term (2002).

Anisef and Lanphier use the concepts of “social exclusion” and “social inclusion” to help understand the process of settlement and integration of immigrants (2003). The term “social inclusion” refers to a broad “equality of opportunity and life chances of individuals...” (Wayland and Agrawal 2008, citing Sen 2001). Immigrants subject to social exclusion may encounter economic, social, cultural or other barriers to participation that block their ability to fully participate in society. Both social inclusion and exclusion can occur at various levels including the individual and systemic levels.

Language

Language is one of the most significant barriers that can impede immigrants when attempting to access and navigate resources and services, secure employment, and settle into their new communities. One study found that immigrants consistently identified language information and language learning information among their top settlement needs regardless of period of immigration (Caidi 2008). In their discussion of the human service needs of newcomers, Wayland and Agrawal point out that language is the largest single barrier to accessing community and government services including health care, education and legal services (2008). Without knowledge of French or English, immigrants often find it difficult to communicate with service providers outside of the settlement service sector.

Under Canada’s immigration system, language proficiency in either English or French is considered during the application process for “economic” immigrants, a category that includes skilled workers as the principal applicants and their spouses and/or dependents. Language proficiency is not considered a requirement for admission for the other two main categories: “family” and “refugees.” Consequently, those entering Canada under the “family” and “refugee” categories tend to be less likely to speak either English or French. The emphasis on language proficiency at the time of immigration is an indication that “economic” immigrants are facing fewer language barriers. According to the CIC, among individuals granted permanent residency in 2008, of those entering the country as principal applicants, 91.3 percent spoke either English or French. By contrast, only 63.6 percent of their spouses and/or dependents spoke either official language. Among those who entered the country under the “family” and “refugee” categories, only 67 percent and 53.9 percent, respectively, spoke either English or French. Because women comprise 60 percent of the total number of immigrants who enter the country under the “family” category and 57 percent of the total number of applicants who enter as the spouses and/or dependents of “economic” immigrants, the CIC figures suggest that the level of an immigrant’s language proficiency may be connected to gender (CIC 2009). CIC information does not include information on language proficiency of refugee claimants, foreign workers, and students.

In recognition of the language challenges of some immigrant populations, federally-funded settlement services will offer language services and supports. However, there are a variety of needs, programs, and policy barriers that impede immigrants from learning one of Canada’s two official languages. These barriers have been explored by Wayland (2006), who states that since 1996 federal funding for settlement and language services has not been increased, which has resulted in long waiting lists, poorly paid instructors, and inflexibility in scheduling language courses. Furthermore, federally-funded settlement programs are available only to permanent residents and convention refugees; temporary workers, refugee claimants, and immigrants that have already become citizens are not entitled to receive these programs (Alboim 2009). Children and youth usually participate in English and French language classes at their public schools. Again, though, cuts or flat funding have adversely impacted these programs in all provinces. According to People

for Education, an organization in Ontario that supports public education, the number of ESL teachers at elementary schools in urban areas in Ontario has declined by 15 percent in the period from 1997 to 2005, despite a 13.5 percent increase in the number of immigrants to these areas (Wayland 2006 citing People for Education 2005).

The importance of language to social inclusion can not be underestimated. A study by Kilbride et al. (2002) about the experiences and concerns of immigrant youth notes that learning a new language and being able to communicate and have oneself understood in a new language requires more than learning new words and how to construct sentences, because language “tends to be embedded in the traditions, values, and cultural understandings of a society.”

Language barriers can affect immigrants in a variety of ways. The literature demonstrates that language is a major barrier to employment; higher employment earnings in Canada have been linked to the level of a person’s proficiency in either English or French (Wayland 2006). While language is linked closely with employment earnings, it is not the only challenge for immigrants looking for stable employment that matches their skills and qualifications. The literature indicates that a number of issues overlap to create barriers to finding stable and suitable employment.

Research focusing on immigrants’ access to health services demonstrates the barriers to settlement and integration resulting from lack of proficiency in either of Canada’s official languages (see for example Bowen 2001, Guruge et al. 2009, AAMCHC 2005, Pottie et al. 2008). An extensive review of research into language barriers in relation to health care access revealed that language barriers impede the delivery and quality of health care services in numerous, compounding ways (Bowen 2001). Evidence suggests that language barriers may prevent immigrants from accessing health services in a timely manner, and impede immigrants entirely from using other health services including health promotion and prevention programs (Bowen 2001, Pottie et al. 2008). Beyond access to health care and prevention, Bowen references a number of studies that demonstrate how language barriers negatively affect the outcomes of health care services. Language barriers were found to increase the risk of hospitalization and adverse drug reactions and to affect the types of services accessed. For example, individuals who do not speak English or French do not tend to access mental health and counselling services as often as those who can speak English or French.

Discrimination

Discrimination is a key, over-arching, factor that can create barriers for immigrants in a number of ways and seriously impede the process of settlement. Discrimination occurs at different levels and is not always apparent, but can exist in “subtle and elusive” forms (Noh et al. 1999). Discrimination may be defined as “intentional acts that draw unfair or injurious distinctions, that are based solely on ethnic or racial basis and that have effect favourable to in-groups and negative to out-groups” (Jackson et al. 1998: 110 cited in Noh et al. 1999). Discrimination based on race or ethnicity is especially important in discussion of social inclusion and immigrants. Discrimination is often cited as a pervasive barrier facing newcomers, especially in the labour market (Reitz 2005), but also in the education system (Kilbride et al. 2001), in the housing market, and in mainstream human services. Issues of discrimination are particularly relevant to immigrants because evidence demonstrates that an increasing number of immigrants are racialized. According to Teelucksingh and Galabuzi, for example, 75 percent of recent immigrants are members of racialized groups (2005).

Poverty and Unemployment

Poverty and unemployment are endemic among immigrants in Canada. A recent publication by Social Planning Toronto (2009) found poverty rates of 46 percent among recent immigrants to Toronto. Research has found that living with poverty can have a number of negative consequences for peoples' lives, including negative health outcomes. In broad terms, poverty limits the choices people are able to make, preventing them from participating fully in society (AAMCHC 2005). Poverty can also impede the ability of people to access the very resources and services that could help them get out of poverty. For example, poverty can make it difficult for individuals to access the services they need to find employment: immigrants without the resources to pay for services like childcare or transportation may have problems accessing employment support services and securing a job (Mawani and Hyman 2008).

Race and gender are also associated with poverty and employment challenges (AAMCHC 2005 citing Galabuzi 2001). Immigrants who are not of European descent are more likely to earn less and it is more likely that their skills will not be recognized by employers (Reitz 2005). Immigrant women and refugees are more likely to be employed in more dangerous jobs and earn less money (Workers' Action Center 2007). Discrimination exists in the labour market when employers choose not to hire immigrants because of their race or ethnicity. In their research into the connections among race, immigration status, and employment opportunities and outcomes, Galabuzi and Teelucksingh (2005) examined a number of key indicators of labour market participation, including occupation status and sectoral participation, income levels, employment and unemployment rates, and access to professions and trades, which revealed strong patterns of "racially distinctive experiences." The authors concluded that racial discrimination is a major factor determining how employment opportunities are distributed in the Canadian labour market. Another study comparing the experiences of new immigrants from the territory of Yugoslavia and South Asia in the Canadian labour market found that the immigrants from Yugoslavia enjoyed a cultural advantage over their counterparts from South Asia because they were not discriminated against because of their dress or the colour of their skin (Bauder and Cameron 2002).

Other research has found that immigrants of specific ethno-cultural backgrounds often encounter stereotypes from employers that can determine the specific types of work assigned. A qualitative study by Kelly et al. (2009) found that despite their qualifications Filipino immigrants encountered specific ethno-cultural stereotypes that influenced people's expectations about the type of work they were suited for. These stereotypes and expectations also created advancement barriers in the workplace.

Discrimination is a key, over-arching, factor that can create barriers for immigrants in a number of ways and seriously impede the process of settlement. Discrimination based on race or ethnicity is especially important in discussion of social inclusion and immigrants.

Poverty does not only affect people who are unemployed, it can also be a reality for those who are working. Immigrants living in Canada for fewer than five years are three times more likely than their Canadian-born counterparts to earn less than ten dollars per hour and twice as likely to be employed on a temporary basis (Gilmore 2009). Immigrants employed in the knowledge sector tend to earn about 12-16 percent less than their counterparts already living in Canada, and those employed in other sectors earned about 25-34 percent less (Reitz 2005). Preston et al. (2010) found that after four years of employment, female principal applicants (i.e. "economic" immigrants) earned an average wage of \$18.70 per hour, compared to their male counterparts who earned \$21.43 per hour.

Not surprisingly, this disparity in wages paid to women increases for spouses and/or dependents of “economic” immigrants and for refugees.

Historically, immigrants to Toronto have usually experienced low incomes during the initial stages of settlement before making social and economic gains and eventually achieving parity with their Canadian-born counterparts. During the 1980s and 1990s this trend changed and immigrants’ earnings began to deteriorate (Preston et al. 2003, Wayland 2006, Omidvar and Richmond 2003, Picot et al. 2007). This downward trend in immigrants’ earnings continued in the 2000s: income rates among immigrants that entered Canada between 2000 and 2003 were lower than at any time during the 1990s (Picot et al. 2007). This trend is surprising given the progressively higher qualifications of immigrants to Canada since the early 1990s, when the point system began to give higher priority to skilled workers and professionals. Fifty percent of all immigrants and their dependents who came to Canada in 2005 were part of the Federal Skilled Worker Program (Alboim 2009), and the educational level of recent newcomers tends to be higher than that of the Canadian-born population (Weiner 2008).

Research has shown, however, that this policy shift toward admitting more highly educated immigrants has not led to higher incomes for immigrants (Picot et al. 2007). Picot et al’s (2007) study of the income dynamics among immigrants demonstrated that of immigrants entering Canada in 2000 and 2001 between 31 and 36 percent those considered impoverished in their first year continued to be impoverished three years later. In 2008 the Canadian Centre for Policy Alternatives calculated that for a family living in Toronto comprised of two parents and two children, both parents would need to make at least \$16.60 per hour on a full time basis to participate fully in their communities (Mackenzie and Stanford 2008). As of March 31, 2010, the minimum wage in Ontario will be \$10.25 per hour.

Proportions of Immigrants that Exits Low-Income after 1st Year and that Remains in Low-Income after 3 Years*

Year entering Canada	Proportion exiting low-income after first year	Proportion remaining in first low income spell after 3 years
1992	38.4 %	34.0 %
1995	38.1 %	33.1%
1997	40.0 %	31.3%
2000	38.1 %	35.9%
2001	34.9 %	36.2%
2002	33.9 %	---
2003	34.7 %	---

Adopted from Picot et al. 2007, 21.

The recent economic recession, which has affected immigrants to Canada and Ontario more than non-immigrants, has exacerbated the downward trend in net employment among immigrants. Across Canada employment rates for recent immigrants (less than five years since arrival) decreased by 5.7 percent, and employment rates for immigrants who have been in Canada between five and ten years decreased by 3 percent. By contrast, employment rates for Canadian-born workers declined only 1.5 percent decline (Grant and Yang 2009). Immigrants who have been in Canada for less than ten years were the only group that experienced a decline in net employment in the Toronto CMA between October 2008 and 2009 (Pitts 2009).

The disproportionately sharp decline in employment rates among immigrants is perhaps in part due to the fact that immigrants who cannot secure employment in their chosen field are forced to take “survival jobs” in the very industries most affected by the recession. In the manufacturing, transportation and warehouse, construction and educational services sectors – those sectors affected most adversely by the economic recession – recent immigrants to Canada have borne a disproportionately large share of the job losses. In the manufacturing sector, for example, very recent and recent immigrants account for 5 and 7 percent of the labour force, respectively, but have experienced 13 and 23 percent of the job losses (Pitts 2009).

Though many immigrants are accepted as immigrants to Canada based on their previous education and skill set, many find upon arrival in Canada that their credentials are not recognized. Between 1991 and 2001 25 percent of university-educated immigrants were employed in jobs which required no more than high school education (Weiner 2008). Recent evidence from the Longitudinal Study of Immigrants to Canada (conducted between 2001 and 2005) suggests that over a four-year period, the average immigrant was able to make only a modest improvement in their ability to find work commensurate with the skill level (Shields et al. 2010). Results from the Canadian Immigrant Labour Force Survey show that compared with their Canadian-born counterparts, a higher percentage of recent immigrants work in the manufacturing, professional scientific and technical services, and the accommodation and food services industries (Zeitsma 2007). Alternatively, immigrants tend to be under-represented in the fields of public administration, health care, and social assistance and educational services (Zeitsma 2007). According to Weiner (2008), the main barriers immigrants encounter when attempting to secure suitable employment include lack of recognition of foreign credentials and foreign experience; language and communication challenges; Canadian experience requirements of some employers and discrimination.

Immigrants attempting to gain certification in regulated trades and professions by professional associations are subject to a complex and costly bureaucratic process overseen by a fragmented professional regulatory regime. Immigrants seeking employment in non-licensed professions for which experience and education are required also experience challenges (Reitz 2005).

This persistent “de-skilling” of newcomers is considered by some to be a form of systemic discrimination (Kelly et al. 2009). Rasheed maintains that discourse about immigrants skills tends to emphasize their need for additional training and education, which implies that immigrants’ skills are not valued as highly as their non-immigrant counterparts or that immigrants are somehow deficient (2009).

Immigrants attempting to use employment service programs to secure better employment are not always having positive experiences. A survey of 432 internationally trained immigrants in Ontario found that many had poor experiences with the employment services they had accessed. These services included free programs provided by settlement agencies and courses at colleges and universities for which immigrants paid tuition. Immigrants reported that the programs were too generic, lacked individual attention and failed to place them in a position commensurate with their skills (Rasheed 2009).

Housing

When immigrants arrive in Canada one of their top priorities is to find suitable housing. Immigrants have widely different experiences when searching for housing in Canada depending on a number of variables, such as their social status and networks and their economic resources and the size of their households and number of dependents. Adequate housing is generally considered one of the main indicators of successful settlement, because it provides immigrants with a place in the community and enables them to access services, build social networks, and seek employment opportunities. Without stable housing, other

connections to services and employment can become more challenging. Successful settlement consequently facilitates a faster and more effective process of integration.

Despite a decline in their economic resources, a high rate of homeownership persists among immigrants (Hiebert 2009). A Longitudinal Study of Immigrants in Canada (2001-2005) exploring this incongruity shows that after three years of living in Canada, 52 percent of surveyed immigrants lived in homes they owned. Immigrants entering Canada under the “economic” category experienced the highest rate of homeownership after four years in the country at 73.6 percent, but even among those entering as “refugees” the rate of homeownership after four years was 19.3 percent. Immigrants, especially in large cities like Toronto, may be forced into homeownership as a result of low vacancy rates in the rental market (Hiebert 2009). Other experts claim that immigrants are “propelled into homeownership ‘prematurely’ because of the difficulty in finding rental housing suitable for children” (Rose 2009, 5).

A significant number of immigrants are not homeowners but renters, who often have trouble finding suitable housing because of low vacancy rates, high housing costs, and limited provision of affordable social housing. Unemployed immigrants and those with insufficient incomes who are seeking rental housing may find it difficult to pay deposits equivalent to a month’s rent, which is required in most provinces. Requests for references or guarantors or for documentary evidence such as bank statements or identification can create additional difficulties for immigrants seeking rental housing, which Rose (2009) suggests are factors that contribute to a higher concentration of immigrants in poorly-maintained housing for which there is less demand.

Because the economic resources of immigrants have diminished in recent years, it is perhaps not unexpected that an increasing number of immigrants have found themselves in “vulnerable” housing conditions, which results when more than half of their income is spent on housing (Murdie et al. 2006). More than half of Toronto’s homeowners and renters spending more than half of their income on housing are immigrants (Preston et al. 2006). These precarious housing situations are often intensified by language barriers and a lack of information about strategies for accessing housing and housing rights which their host country counterparts do not usually experience to the same degree.

Preston et al. have found that immigrants rarely understand their rights in the housing market (2006). This problem is exacerbated by immigrants’ inability to access the information they require when seeking adequate housing. Consequently, immigrants tend to turn to their social networks for help. Although social networks might seem helpful to immigrants who face language barriers and other problems accessing services, this strategy may not always help immigrants in their search for suitable housing (Rose 2009, Preston et al. 2006). Rose has found that immigrants who rely on friends and acquaintances for information “may not be getting nearly full and accurate information, compared to that which can be provided by specialized settlement agencies” (Rose 2009).

Homelessness is a problem among immigrants. One third of the participants in a recent study of 1000 homeless individuals were identified as immigrants. The study demonstrated that homelessness is a threat for recent immigrants in general and for refugees in particular. Chiu et al. (2009) describe the recent immigrants who participated in the study as “more likely to report insufficient income, lack of employment and lack of suitable housing as primary factors [leading to homelessness], and less like to report mental health, alcohol use or drug use.” These homeless immigrants are more likely than their host country counterparts to be facing the greatest discrimination and family challenges. Those immigrants most at risk are more likely to be visible minorities, women, married, and accompanied by dependent children (Chiu et al. 2009).

While refugees were identified in the literature as being more at risk of homelessness, little is known about the housing experiences of refugees. In Toronto, refugee families can find themselves in the family shelter system because they arrive in the city with no resources, no housing, and a lack of supports to meet immediate needs. Increased use of family shelters in the city are often connected to changes geopolitical conditions and immigration policies that lead to more refugees in the city. (City of Toronto 2009).

According to Wayland (2006), refugees experience the most difficulties when attempting to obtain housing suitable to their needs and the needs of their families. Rose (2009) claims refugees are far more likely than other immigrants to live in overcrowded housing as a means of reducing costs. Recent research comparing the housing experiences of sponsored refugees (i.e. those who already have refugee status upon arrival) to those of immigrants who claim refugee status upon arrival in Canada found that both groups rely heavily on

Adequate housing is generally considered one of the main indicators of successful settlement, because it provides immigrants with a place in the community and enables them to access services, build social networks, and seek employment opportunities.

informal social networks to assist them in the search for housing (Wayland 2006, Murdie 2008, Rose and Ray 2001, Teixeira 2006). Murdie (2008) found that sponsored refugees were able to find adequate housing much more quickly than refugee claimants, who were shown to be at greater risk for homelessness within the refugee population (Murdie 2008).

Lack of services, difficulties accessing services, and poorly coordinated services contribute to housing challenges for immigrants. Wayland claims that “few if any immigrant serving agencies are explicitly mandated to deliver housing-related services to the general immigrant population” (2007). Despite the variety of services available to immigrants in Toronto and the efforts of many agencies to support immigrants in their search for adequate housing, the needs of immigrants are not adequately addressed on a consistent basis. According to

Wayland, these problems are attributable to shortcoming in public policies: “There is very little connection [at the policy level] between housing and services to newcomers. Current immigrant settlement policies do not attempt to address housing needs in any systemic fashion” (2007, 7).

Information and Access to Services

In the settlement process, there are a variety of service needs and barriers that impact the success of integration. Successful settlement and integration depend largely on information about and access to education services, employment opportunities, and language programs, and a number of mainstream services including health services. Research suggests that immigrants do not access their “fair share” of services (Wayland and Agrawal 2008). Service barriers may include language, cost, culturally inappropriate delivery, and various factors that prohibit immigrants from travelling to the location of the services, such as an inability to access childcare and inadequate transportation. Even when immigrants do access these services, they may not be provided in ways that are culturally or linguistically appropriate (Wayland and Agrawal 2008 citing Reitz 1995). Furthermore, immigrants have experienced discrimination when accessing settlement services (Kithinji 2006, Reitz and Banerjee 2006). Immigrants may be subject to adverse conditions when seeking access to settlement services because of the complexity of their needs and an insufficient cultural understanding and lack of linguistic capacity on the part of settlement services agencies.

Wayland and Agrawal (2008) maintain that the most important features of services are availability, accessibility and adequacy. To meet these requirements, there should be a wide range of services offered at different locations, and these services should be designed for immigrants from various cultural and linguistic

backgrounds and with different physical needs. In its review of best practices for designing immigrant service programs, the United Way recommends using a variety of program formats, for instance drop-in programs, job shadowing programs, and train-the-trainer and on-line training programs (Sahay and Glover 2005). A “needs-based” approach that recognizes the different needs of immigrants of different ages, genders, and abilities and from different linguistic and cultural backgrounds would improve accessibility, availability and adequacy of services.

Successful settlement and integration depend largely on information about and access to education services, employment opportunities, and language programs, and a number of mainstream services including health services.

Immigrants often find it difficult to access these services. The objective of the services is to help facilitate immigrants’ settlement and integration into their new communities, but funding restrictions often mean that the organizations that administer these services (which are usually non-governmental and community-based organizations funded by the federal and provincial governments) are only able to address a limited range of immigrants’ needs (Wayland and Agrawal 2008). Accessibility is also an issue due to eligibility restrictions to receive certain services. For instance, most CIC-funded services are available only to permanent residents and Convention refugees. This indicates that immigrants who have obtained Canadian

citizenship are ineligible for these services. The focus on the first three years of settlement is a serious weakness in the settlement system (Omidvar and Richmond 2003). Even after their immediate survival needs have been met, immigrants may continue to experience stresses related to the process of migration, including discrimination, which may persist for years (Wayland and Agrawal 2008).

The current funding regime not only restricts certain immigrants from accessing services based on eligibility criteria, but it has also hindered service providers. Sadiq (2004) argues in his review of settlement services in Toronto and Ontario that the current funding system has created a structure of dependency comprised of large multi-service organizations dependent on government contracts and smaller ethno-specific organizations which lack the resources to compete for government contracts and therefore rely on large multi-service organizations for funding. This system of dependency has created a “spatial mismatch” between the location of these services and the places where immigrants live (see also Truelove 2000). This system of financial dependency forces the smaller, potentially more responsive, ethno-specific organizations to follow the policies of the large multi-service organizations Sadiq (2004), negating some of the benefits offered by the ethno-specific organizations, specifically their ability to address gaps in other services by locating themselves in suitable places (Agrawal et al. 2007 cited in Galabuzi and Teelucksingh 2008). Consequently, immigrants are often not able to access these services because they are not in the neighbourhoods in which they live. Location and specificity of information are especially important to recent immigrants that seek certain services upon arrival. Often, recent immigrants require information and access to a number of immediate supports to help them settle and overcome challenges of orientation, interpretation resources, and basic language training (Wayland and Agrawal 2008). George and Chaze (2009) maintain that recent immigrants require general information about daily life in Canada (i.e. places to shop, appropriate attire, important issues and events, and how to deal with formal institutions). Immigrants, like the rest of the population, also need access to basic public services like education, employment, childcare, housing, health and transportation (Wayland and Agrawal 2008).

Immigrants do not only need to access services, they also need information about how to access services. George and Chaze’s (2009) study about the ways South Asian immigrant women in Toronto access information may be instructive in the matter. The women who participated in this study cited access to

information and orientation as their most important needs and claimed that both formal and informal networks, including religious institutions and friends and relatives, were their most important sources of information about how to access social services. These findings about the important role of social networks in providing information about social services to immigrants could be used to help improve service delivery. Social networks in different neighbourhoods might be used as resources to ensure that services are provided in the proper languages and in a manner that is culturally-sensitive, more efficient, and less costly (Snowden et al. 1995, Galabuzi and Teelucksingh 2008).

Despite some promising findings as to the usefulness of engaging various social networks to help provide information to immigrants, as the research into housing suggested, social networks may not always provide the most accurate information. Immigrants often decide to settle near friends and family, who introduce them to social networks through which they may gain access to economic opportunities, informal services, and connections to the broader community. However, not all immigrants have the liberty to choose where they live: sometimes their decisions are a function of economic constraints. Immigrants who cannot live near friends and family and their social networks may not have the same economic opportunities or access to informal services enjoyed by those who are able to access social networks (Galabuzi and Teelucksingh 2008). At the same time, researchers have also suggested that social networks may constrain individuals in certain ways. Immigrants connected to social networks in neighbourhoods that reflect their culture and ethnicity may avoid seeking information and support from community and government agencies, perhaps because of cultural taboos attached to the issue they wish to address (i.e. mental health, abuse) (Wayland and Agrawal 2008). Galabuzi and Teelucksingh (2008) note that in some cases social networks may impede the integration of racialized immigrants into the broader community, making it more difficult for them secure employment and increase their socio-economic status.

Health

While information and access to settlement services can be a barrier to successful settlement, it can also impact immigrant health along with a complex array of interrelated factors. These factors, including language, discrimination, poverty, employment, and access to settlement services, have been found to influence health outcomes of immigrants. Upon arrival in Canada immigrants are usually in better health than their Canadian-born counterparts, however, the “healthy immigrant effect” is short-lived and immigrants’ health outcomes tend to decline over time (Mawani and Hyman 2008, Pottie et al. 2008, McDonald and Kennedy 2004).

Various social and economic factors impact immigrants’ health and access to health services (Dunn and Dyck 2000, AAMCHC citing Raphael 2004, Mawani and Hyman 2008). The main social determinants impacting immigrants’ health are unemployment or underemployment, poverty, inadequate housing, and discrimination. In its study of health outcomes in racialized communities, the AAMCHC cites a wide body of research that reveals links between physical and mental health and poverty, employment in dangerous jobs, stress, exhaustion, housing, and discrimination. The research on these social determinants suggests that policies designed to improve the health of immigrants will be effective only if they address the structural conditions that cause poor health outcomes among immigrant populations. Khanlou, who has researched the mental health of female immigrant youth, advocates for approaches that take into account the social contexts impacting individuals (2008). Other research demonstrates the importance of understanding the social determinants of health impacting the physical and emotional health needs of refugees before they immigrate to Canada (Gagnon, Hyman and Mawani 2008, Pottie et al.). The literature also explores the effects of discrimination on immigrants’ health (AAMCHC 2005 citing multiple sources). The National Population

Health Survey revealed that the declining health status of immigrants is only evident among those whose origins are other than European (Wayland 2006 citing Ng 2005).

Access to health services may be one of the most important social determinants impacting the health of immigrants. There are a number of barriers that limit immigrants' access to the health services they require. One of the main barriers in Ontario is the provision that requires immigrants to complete three months of residency in the province before they are eligible for provincial health insurance. Immigrants without legal status do not have any access to provincial health insurance. Cultural differences and a lack of culturally and linguistically appropriate services may also restrict immigrants from accessing health care services (Mawani and Hyman 2008).

In response to some of these barriers, a growing body of research has started to use the concept of "health literacy" (Zanchetta and Poureslami 2006, Simich 2009). Health literacy, according to Simich (2009), speaks to the idea that health services and health promotion activities have to be presented in ways that are understandable to diverse groups if these groups are to benefit from these services. According to Simich, "Having good health literacy skills involves understanding health issues, knowing how to use the health care system, having the ability to advocate for health care and having access to information and resources that help to promote physical and mental health in everyday life." Health literacy is a reciprocal or participatory approach involving both service providers and recipients. Simich (2009) maintains that effective health literacy must employ plain language, good translation practices, and the use of non-written forms of communication such as pictures, theatre, and video.

The main social determinants impacting immigrants' health are unemployment or underemployment, poverty, inadequate housing, and discrimination.

One important health issue affecting members of some ethno-cultural communities in specific ways is HIV/AIDS. 2002 figures from Ontario show that people from African and the Caribbean have disproportionately high rates of infection. While only 2.6% of the province's population were from Africa or the Caribbean, 11% of persons living with HIV/AIDS were from these countries (ACCHO 2006 citing Remis 2003). Women from these countries are over represented, accounting for 32% of AIDS related deaths among all women (Tharao and Massaquoi 2002 citing Remis et al 1998). Contrary to popular belief, members of the African and Caribbean communities that are living with HIV/AIDS are often

contracting it after arriving to Canada. 1999 estimates suggest that 30 to 40 percent of these infections were contracted while living in Canada (Tharao and Massaquoi 2002 citing Remis and Whittingham 1999). These figures are especially significant for Toronto as 76% of African and Caribbean born people in Ontario live in Toronto.

Through focus group research with women and service providers, Tharao and Massaquoi (2002) maintain that rates of HIV/AIDS infection among African and Caribbean women in Toronto cannot be understood as the result of individual behaviours (i.e. sexual activity or drug use). Rather women from these communities are particularly vulnerable because of socio-cultural and structural factors including economic factors. Their research found that economic marginalization, gender-based violence, and a generally limited linguistically and culturally appropriate health system (including prevention programs), contribute to African and Caribbean women's vulnerabilities. Other recent research on the experiences of African and Caribbean communities in Toronto have found that fear, stigma and discrimination are having multiple impacts on the early diagnosis, treatment and support that people with HIV/AIDS seek (ACCHO 2006). Women also

reported being afraid of how a positive test might impact their community as a whole, fearing that it would only increase the stigma and discrimination against their community.

African and Caribbean people living with HIV/AIDS in Toronto recommended the need for more education and awareness about HIV within their communities as well as the need for more diversity among the executives, staff and clientele at AIDS service organizations (ACCHO 2006). An important insight of Tharao and Massaquoi was that while standard HIV prevention strategies focus on individual aspects of safety, rights and choice, these strategies are not suitable for women raised in communally-oriented societies. The authors recommend that strategies be targeted to the whole community in order to “modify cultural values, beliefs, norms, and practices that increase risk of Black women to HIV infection.” (2002: 79).

Mental Health

Along with general concerns around immigrant health, practitioners and researchers have also begun to draw attention to access and navigation challenges around mental health issues. The Mental Health Commission of Canada Task Force defines mental health problems and illnesses as “clinically significant patterns of behaviour or emotions that are associated with some level of distress, suffering or difficulty functioning in society” (2008: 7). Research has shown that factors and outcomes associated with migration may also lead to mental health issues. According to the federal Task Force on Mental Health Issues Affecting Immigrants and Refugees discrimination, separation from friends and family, language barriers, difficulties finding good employment may all lead to poor mental health (1988). For some immigrants, particularly refugees, pre-migration events may also have an impact on mental health. Researchers have also discovered links between discrimination and a number of mental health issues such as depression, and anxiety (Wente 2008, Guruge et al. 2009, Noh et al.1999).However, studies have shown that immigrants are less likely than their Canadian-born counterparts to use formal mental health services (Mental Health Commission of Canada 2008). As well, the federal Task Force points out that immigrants and refugees are under-represented in mental health care as both practitioners and patients (2008).

In terms of accessing mental health services, researchers and practitioners maintain that cultural difference can present real barriers. For example, even though people from different cultural backgrounds may experience similar symptoms, how people describe and understand those symptoms can vary. At a broader level, research has also shown a mismatch between Western mental health systems and the values and expectations of immigrant and ethno-racial groups (Mental Health Commission of Canada 2008). Other issues found to prevent immigrants from accessing services include stigma attached to mental illness, language barriers, lack of awareness about the services offered and mistrust stemming from experiences of immigrants.

Immigrant Women

While many of the challenges described in the literature affect immigrants generally, some immigrant populations are likely to face greater challenges. Immigrant women are affected more by certain factors than their male counterparts. The settlement and integration of immigrant women may be hindered by factors including income, language, health, and domestic abuse.

Immigrant women are less likely than their male counterparts to speak either French or English upon arrival in Canada, and research shows that immigrant women have additional barriers to acquiring either official language. Pottie et al (2008) reference a study of refugees from Vietnam which shows that ten years after

their arrival in the country the women still had inferior language skills than men. Kouritzin (2000) argues that women are less likely to learn a new language because of persistent expectations that compel women to retain the family's traditional culture, values, and norms. Women are sometimes forced to prioritize their roles as mother, wife, and bread winner over other pursuits. A recent study that examined language

Immigrant women are especially vulnerable to domestic abuse. Estranged from their support networks in their former countries, they often find themselves isolated and vulnerable and unable to cope with the linguistic and cultural barriers that prevent them from participating in their new communities.

proficiency among Mandarin, Cantonese, Urdu and Punjabi speaking women in Toronto (the language groups identified as those consisting of the highest numbers of women not proficient in English at least five years after arrival), found in interviews and focus groups that finances, household work, family expectations, lack of information, and lack of childcare are among the barriers that prevented women from learning both conversational and advanced-level English-language skills (Guruge et al. 2009).

Research demonstrates that immigrant women – even those who enter as the principal applicants – earn less income than men. This indicates that immigrant women enter a labour market that is both racialized and gendered (Man 2004, Kouritzin 2007). De Wolff has found that, according to one manager of a non-profit agency in Toronto, some women will take any available job (including precarious employment) to financially support their male spouses while they try to secure employment

commensurate with their education and experience (de Wolff 2003). The professional advancement of these women is ignored in favour of their spouses' – sometimes for years.

Immigrant women are subject to cultural and language barriers that restrict their access to health care information and services. Women, like men, have culturally prescribed roles they may not be supported by the structures, institutions, and support systems available in Canada. Although immigrant women are often subject to the same cultural expectations they had before migration, the resources available to meet those expectations (i.e. family and friends, paid family help) may no longer be available. Women are often expected to maintain their roles as caregivers and retainers of their traditional cultures while working to support their spouses and children. Chundamala et al. (2007) suggest that these unreasonable expectations can increase the risk of stress and ill-health among immigrant women. A study of South Asian and Chinese immigrant women found that care-giving can be problematic for these women (Spritzer et al. 2003).

Immigrant women are affected more by certain factors than their male counterparts. The settlement and integration of immigrant women may be hindered by factors including income, language, health, and domestic abuse.

Immigrant women are especially vulnerable to domestic abuse. Estranged from their support networks in their former countries, immigrant women often find themselves isolated and vulnerable and unable to cope with the linguistic and cultural barriers that prevent them from participating in their new communities. In addition to the problems common to all women suffering from abuse, the barriers that isolate immigrant women from the rest of society can make it extremely difficult for them to access support services they need require. Moreover, immigrant women may fear threat of deportation if they report domestic abuse (CCSD 2004b).

Immigrant Youth¹

Immigrant youth find themselves in unfamiliar settings, often without their friends and family, and have to fit in to a new education system, a new social system, and adopt new norms and a new culture in addition to dealing with the problems common to all youth (Kilbride et al. 2001). Immigrant youth face a number of barriers that restrict their integration into their new communities, including discrimination, language, cultural differences, and poverty. Anisef and Kilbride (2000) have found that immigrant youth also have problems finding employment and accessing services.

It was widely believed in the past that the settlement and integration of immigrants was simply a matter of the amount of time they spent in their new country and that over a number of years their beliefs, values, and socioeconomic status would eventually converge with those of their host country counterparts (Anisef et al. 2008). This theory implied that immigrant youth should have an easier time assimilating to Canadian culture than their parents because they arrived at an earlier age. There are a number of problems with this theory. Mainly, the theory ignores diversity and assumes that immigrants from different cultural and linguistic backgrounds encounter the same progression towards full participation in society (Anisef et al. 2008). On the contrary, recent research into the experiences of second and third generation youth demonstrates that over the course of generations, integration may actually decline and social exclusion may increase. In fact, some second and third generation youth may have a more difficult time integrating into their new communities, partly as a result of experiencing higher levels of discrimination (Khanlou 2006, citing Reitz and Somerville 2004, Abouguendia and Noels 2001, Hall and Carter 2006).

Education is considered the key determinant in the successful integration of immigrant youth. However, immigrant youth face a number of challenges that put them at greater risk of dropping-out of school. Language and age at the time of entry into Canada are often cited in the literature as the key factors impacting the success of immigrants in school. Anisef et al. (2008) maintain that age at the time of migration is not itself a sufficient indicator for determining drop-out rates. Rather, they argue, a number of complex overlapping factors may determine whether immigrant youth are successful or unsuccessful in school. Region of origin was found to be a significant predictor of drop-out rates among immigrant youth; a number of other variables, including gender, age of entry into secondary school, family structure, and educational stream (i.e. academic or vocational), are also important. A qualitative study by the Ministry of Education and Training (Hospital for Sick Children 2005), which examined challenges experienced by first and second generation immigrant youth in Toronto and Kitchener-Waterloo who had either left school or were at risk of leaving school, found that the need to learn a new language and the difficulty of learning a new school system were major reasons for their youth disengagement schools. Stresses related to resettlement such as lack of acculturation, loneliness, isolation were also given as reasons for disengagement. More specifically, some participants said that they were disengaged because their prior education was not recognized and they were placed in an inappropriate grade and because they were given linguistic assessments based on their accents rather than their knowledge of the English language. Other research has found that some immigrant youth find ESL classes helpful, but others consider them a source of stigma and isolation (see also Kilbride et al. 2001). Another study found that immigrant youth may be subject to violence, bullying and extortion at school (Anisef and Kilbride 2000).

¹ Different authors use different age ranges in their discussion of youth. Anisef and Kilbride (2000) and Kilbride et al (2001) investigated youth aged 16-20, while the report by the Hospital for Sick Children (2005) defines youth as between the ages of 14-21, though it stresses that the range it considers is flexible.

The research in this section generally pertains to first and second generation immigrant youth born in a country other than Canada or born to parents who were born in a country other than Canada.

The level of youth engagement with the education system is cited as a large result of the experiences of their parents and their socio-economic status. The literature reveals that immigrant youth drop-out is dependent on parents struggling to find work in their field and taking survival jobs that require them to work long hours. These challenges lead to less parent supervision for youth, and perhaps increased responsibility at home. Another challenge around youth education was identified in focus groups with mothers. The focus group identified how they had lost power in their relationship with their children, and that children often felt upset with the decision to move to Canada (Anisef and Kilbride 2000). In some cases, immigrant youth take on roles as interpreters and intermediaries when English is a challenge for the parent but not for the youth (Anisef and Kilbride 2000).

Immigrant youth face a number of barriers that restrict their integration into their new communities, including discrimination, language, cultural differences, and poverty.

Cultural identity and self-esteem issues may also present impediments to the successful integration of immigrant youth. The process of acculturation may be different for youth than that of other age groups because they must attempt to distinguish the features of their families and cultures from the features of their new host society (Berry 2006). According to Berry, acculturation is “a process of cultural and psychological change that involves learning to live in new social and cultural contexts after one has been socialized into an earlier one” (2006, 50). An international study of more than 5,000 immigrant youth found that the process of acculturation for youth required developing identities based on cultural heritage from their country of origin and new identities developed in the host country (Berry 2006). Khanlou et al. (2006) demonstrated that immigrant youth in four distinct cultural groups (Afghanistan, Iran, Portugal and Italy) had complex, fluid cultural identities that were “significantly influenced by different contexts, including the broader socio-political context, in which [they were] constructed” (Khanlou 2006).

Senior Immigrants

Canada’s population is aging and the number of immigrants to the country is increasing. Senior immigrants are a diverse group. Almost 19 percent of all seniors (aged 65 and over) in Canada in 2005 are immigrants. The majority (68 percent) of these people migrated from Europe, 19 percent came from Asia, 5 percent from the United States, 3 percent from the Caribbean, and 2 percent from Central and South America and Africa (Durst 2005). Researchers are just beginning to understand the specific needs and issues that affect immigrant seniors. Durst warns that, “chronological age is a weak criterion for clustering or classifying newcomers” (2005, 2). In addition to age, gender, ethnicity, length of stay in Canada, and social networks are considered some of the more important needs and issues impacting immigrant seniors.

Immigrant seniors endure stresses related to their age, including loss of autonomy and estrangement from their social networks, which can be compounded by feelings of loneliness and isolation in their new and unfamiliar social settings.

Chundamala et al. (2006) reference a number of studies that identify challenges faced by immigrant seniors. Immigrant seniors endure stresses related to their age, including loss of autonomy and estrangement from their social networks, which can be compounded by feelings of loneliness and isolation in their new and unfamiliar social settings.

The factors that contribute to their isolation include language barriers, lack of information about their rights, and being ignored by their children, who lead busy, stressful lives as a result of working in numerous, and underpaid jobs. The loneliness and isolation of immigrant seniors occurs even though they are twice as likely as their Canadian-born counterparts to live in multi-generational families (Bernhard et al. 2008). A study of South Asian immigrant senior women indicated that feelings of loneliness and social isolation were worsened by language barriers and by feelings that they have been left out of their children's hectic lives (Chudamala et al. 2006 citing Choudhry 2001).

Precarious Immigration Status

Immigration status is an important determinant of social and economic well-being. Individuals and families residing in Canada with precarious immigration status who lack the rights associated with full citizenship, or the “nearly full” status and attendant rights of a permanent resident or convention refugee, are often referred to as “non-status immigrants” (Goldring et al. 2007). People with “precarious status” can include refugee claimants who are waiting to be recognized as convention refugees or whose claims have expired, family-sponsored immigrants who have separated from their spouses, and people who entered the country on student visas, visitor visas or temporary work permits which have since expired (Khandor 2004). Precarious status immigrants are excluded from accessing a number of services and support systems, such as, health care, education, social services and legal supports. Precarious immigration status therefore exacerbates the difficulties experienced by immigrants attempting to settle and integrate themselves into Canadian society (Bernhard et al. 2007).

During two focus groups facilitated by Women's Health in Women's Hands Community Health Centre (2009), immigrant women without legal status related some of the problems they encounter on daily basis. The women said that their lack of status forces them to work in low-paying, exploitive jobs and to live in cramped and insecure dwellings; they worry about not being able to provide for their children and not being able to access services and programs for their children, even if they had given birth in Canada (i.e. recreation programs, Child Tax Benefits, and RESPs).

An increasing number of immigrants with precarious status may be those who entered Canada under federal and provincial temporary foreign worker programs and stayed past the expiration of their visas. Until 2002, the federal Temporary Foreign Worker Program allowed employers to hire highly skilled specialists for specific jobs. There were also programs for live-in caregivers and seasonal agricultural workers. Since 2002, the federal government has allowed employers in a number of industries, such as the hospitality, construction, and manufacturing industries, to hire temporary workers (Contenta 2002). A series of articles in the Toronto Star in late 2009 reported the first-hand experiences of individuals who entered Canada under the temporary foreign worker program and have since been working in the city's underground economy (Contenta 2009). The immigrants in the article highlighted a number of reasons for leaving the jobs for which they came to Canada, including abusive working conditions, wages below what they had been promised, and employers going bankrupt during the recent economic recession.

Precarious status immigrants are excluded from accessing a number of services and support systems, such as, health care, education, social services and legal supports. Precarious immigration status therefore exacerbates the difficulties experienced by immigrants attempting to settle and integrate themselves into Canadian society.

Environmental Scan Report

It is possible for precarious status immigrants to become permanent residents through an application based on Humanitarian and Compassionate grounds (H & C). In 2009 Women's Health in Women's Hands CHC conducted two focus groups with immigrant women who either applied for permanent residency on humanitarian and compassionate grounds or considered doing so. These women believed that applying for permanent residency would provide them more opportunities in Canada and improve the lives of their families. The reasons given for not applying were mostly related to the "overwhelming" and expensive application process. The women stated that because their precarious immigration status enabled them to get only low-paying jobs, their family's basic financial needs made it difficult to pay the fees associated with the application process.

Provincial and federal government policies exclude immigrants with precarious status from accessing most services. One notable exception in Toronto is the provincially-funded system of Community Health Centres which do not restrict immigrants from accessing health care services (Goldring et al. 2007). The City of Toronto, for its part, argues that excluding residents (regardless of status) is outside the jurisdiction of municipalities. Under its "Don't Ask, Don't Tell" policy, the City of Toronto permits non-status individuals access to services funded solely by the municipality, though it cannot apply comparable access to services whose costs are shared by the province or whose governance is subject to provincial law. The table below gives examples of the services offered in the City of Toronto (2007) to which immigrants do and do not have access:

City of Toronto Accessible Services	City of Toronto Non-accessible Services
<ul style="list-style-type: none">▪ Libraries▪ Recreation programs▪ Fire and EMS▪ Public health/some CHCs▪ Children and youth programs▪ Information services▪ Public transit▪ Water and waste services	<ul style="list-style-type: none">▪ Ontario Works▪ Rent-geared-to-income housing▪ Subsidized child care▪ Homes for the Aged▪ Business licenses▪ Hospital care, most family doctors

Statistical Highlights

The following information was derived from 2006 Census data and focuses on immigrants living in the geographical area of East Downtown Toronto. The borders of this area are Bloor Street to the north, Lakeshore Boulevard to the south, the Don Valley to the east and Yonge Street to the west.



Data was obtained by census tract and compiled for the East Downtown Toronto area. Census Canada uses the term “immigrant” to refer to anyone born outside of Canada, regardless of the number of years they have been in Canada. However, the needs of immigrants change over time and immigrants that migrated more recently may face specific challenges and have particular settlement needs. The data from Census Canada does allow us to distinguish between immigrants according to period of arrival. ‘Recent immigrants’ refer to immigrants that arrived within the last five years of when the Census was taken.

Data on a number of key variables were cross-tabulated with immigration status and further refined according to period of arrival. Cross-tabulations were accessed with the support of the Canadian Council on Social Development. To understand if trends among immigrants and recent immigrants in east downtown Toronto were particular to this population or if they were the same as other populations, similar data was pulled for the entire population of East Downtown Toronto as well as for the Toronto Census Metropolitan Area (CMA) and recent immigrants living in the CMA.

Available data on recent immigrants is limited and does not address a number of populations, issues, and living circumstances in East Downtown Toronto including data on the Lesbian, Gay, Bisexual, and

Transgender (LGBT) communities, housing and homelessness. Despite these gaps in data it is acknowledged that there is a significant LGBT community in East Downtown Toronto.

General Information

The geographical area of East Downtown Toronto is home to 85,460 people. Of that total population, 42% are considered immigrants. There are 9,145 recent immigrants in East Downtown Toronto, representing 10.7% of the total population.

Recent immigrants are more concentrated in some areas of East Downtown Toronto. In the area that roughly corresponds with the neighbourhood of St. Jamestown (tract 65), recent immigrants comprise 37.8% of the population. The area that includes Regent Park (tract 31) has a recent immigrant population of 14.3%. These two tracts combined represent over half of the recent immigrants in the East Downtown Toronto area.

The geographical area of East Downtown Toronto is home to 85,460 people. Of that total population, 42% are considered immigrants. There are 9,145 recent immigrants in East Downtown Toronto, representing 10.7% of the total population.

Overall recent immigrants tend to have lower incomes and higher rates of unemployment than the broader population. Thus, it's not surprising that recent immigrants live in areas with similar economic profiles. For instance, the overall East Downtown Toronto area has an unemployment rate of 8.1%. Unemployment rates in St. Jamestown and Regent Park are higher. St. Jamestown has an unemployment rate of 10.9% and the area that includes Regent Park has an unemployment rate of 18.1%. The median incomes within these areas also tend to be lower at \$12,669 for Regent Park and \$16,361 for the area of St.

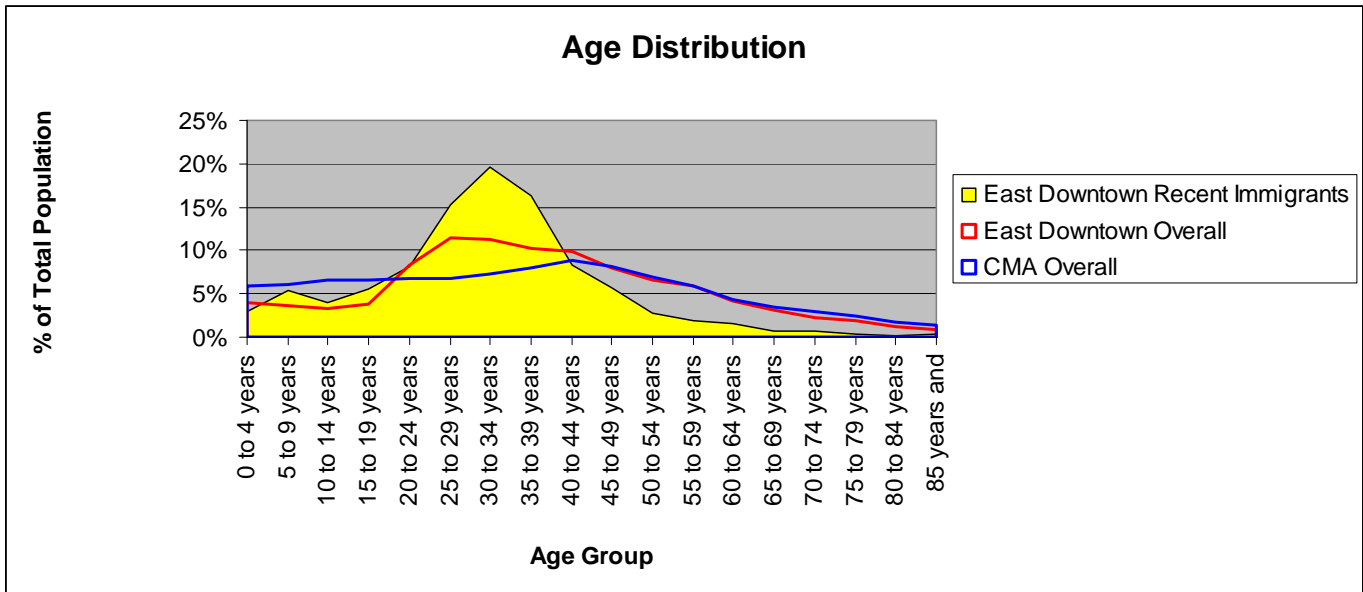
Jamestown. Both Regent Park and St. Jamestown are also areas where there are concentrations of social housing.

Despite the economic challenges facing recent immigrants in East Downtown Toronto, it's interesting to note that compared to recent immigrants in the CMA, recent immigrants in East Downtown Toronto are actually faring better in terms of economic outcomes.

Generally, people in East Downtown Toronto are more likely to be between the ages of 25 and 39, more likely to be single, more likely to have a university degree and earn a higher income than the rest of the CMA. Looking at just the recent immigrant population in East Downtown Toronto and the CMA, similar trends exist. Recent immigrants in East Downtown Toronto also tend to be between 25 and 39 years, more likely to have a university degree and have higher incomes than their counterparts in the CMA. However, it is important to note that not everyone is doing well. Looking beyond median income to other income measure reveals disparities among the immigrant population.

According to the stats recent immigrants tend to have lower incomes and higher rates of unemployment than the broader population.

East Downtown Toronto Ages



Census data revealed some interesting age distribution patterns among recent immigrants in East Downtown Toronto. Over half (51.3%) of all recent immigrants living in East Downtown Toronto are between the ages of 25 and 39. While it might make sense that people choose to migrate during their mid-twenties and throughout their thirties, this proportion is much higher than the recent immigrant population in the CMA. Throughout the CMA, 36.7% of recent immigrants are in this age group. This may be related to the high proportion of rentals and high rises in the area. In East Downtown Toronto 71.8% of homes are rentals compared to 32.4% of homes in the CMA. As well, in East Downtown Toronto, 78.7% of buildings are high rises (more than five storeys) compared to the CMA in which 26.6% of buildings are high rises.

Overall, people in East Downtown Toronto tend to be younger than the broader CMA. 33% of people in the area are between the ages of 25 and 39, compared to 22.2% in the CMA.

Children (ages 0 to 14) are another interesting age group. In the CMA, 18.8% of recent immigrants are children. However, within East Downtown Toronto, children only make up 12.4% of the recent immigrant population. This is roughly equivalent with East Downtown Toronto in general, where children make up 11% of the population. When looking at very young children, it appears that people in East Downtown Toronto are starting families at a higher rate than recent immigrants. Only 2.9% of recent immigrants are under the age of four, while within East Downtown Toronto 4% of children are under four. It may be that recent immigrants are waiting to become more settled before starting families. It may also be that recent immigrants with children are choosing to live in other areas of the CMA.

Youth (ages 15 to 24) also make up a smaller proportion of the recent immigrant population in East Downtown Toronto. In the CMA, 15.9% of recent immigrants are youth, while in East Downtown Toronto 13.7% of recent immigrants are youth. Overall, youth make up 11% of the entire East Downtown Toronto population.

East Downtown Toronto in general tends to be home to a smaller proportion of seniors (age 65 and over) than the rest of the CMA: 9.3% versus 11.9%. This trend is replicated in the recent immigrant population

with seniors comprising only 1.9% of the recent immigrant population in East Downtown Toronto compared to 4.1% among the recent immigrant population in the CMA. Unfortunately, the data does not give information about the circumstances under which immigrants arrive to Canada.

Overall, people in East Downtown Toronto tend to be younger than the broader CMA. 33% of people in the area are between the ages of 25 and 39, compared to 22.2% in the CMA.

Families

Along with being a relatively young population, East Downtown Toronto also tends to have a much higher proportion of single people than the rest of the CMA. This pattern repeats itself with the recent immigrant population in both areas though the gap is not as wide. While 56.3% of people living in East Downtown Toronto are single, 33.2% of people in the CMA are single. Among recent immigrants in East Downtown Toronto, 36.5% are single compared with 25.9% of recent immigrants in the CMA being single. Given the lower proportion of children in East Downtown Toronto, it's perhaps not surprising to find that people in East Downtown Toronto tend to be not married. Again, it could also be that people with young families

are choosing to live in other areas of the CMA.

Not surprisingly, families in East Downtown Toronto tend to be smaller than families in the CMA. In East Downtown Toronto, the average family has 0.8 children, while the average CMA family has 1.3 children. East Downtown Toronto has a higher proportion of lone parent families than the CMA, with 21.9% of lone parent families in East Downtown Toronto compared to 16.9% in the CMA. Figures on family composition among recent immigrants are unavailable.

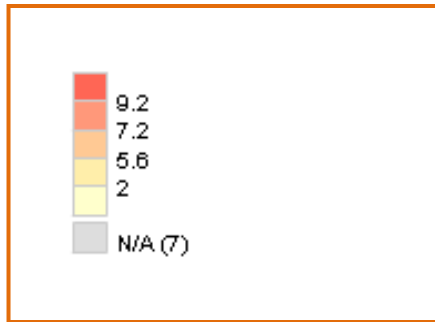
Immigration Period of Arrival and Visible Minority Identities

Immigrants in East Downtown Toronto tend to be recently arrived immigrants. Over 57% of immigrants in East Downtown Toronto arrived after 1991. Interestingly, the last five year period for which we have data has seen a significant increase in the proportion of recent immigrants in East Downtown Toronto. Over a quarter of all immigrants in East Downtown Toronto arrived between 2001 and 2006:

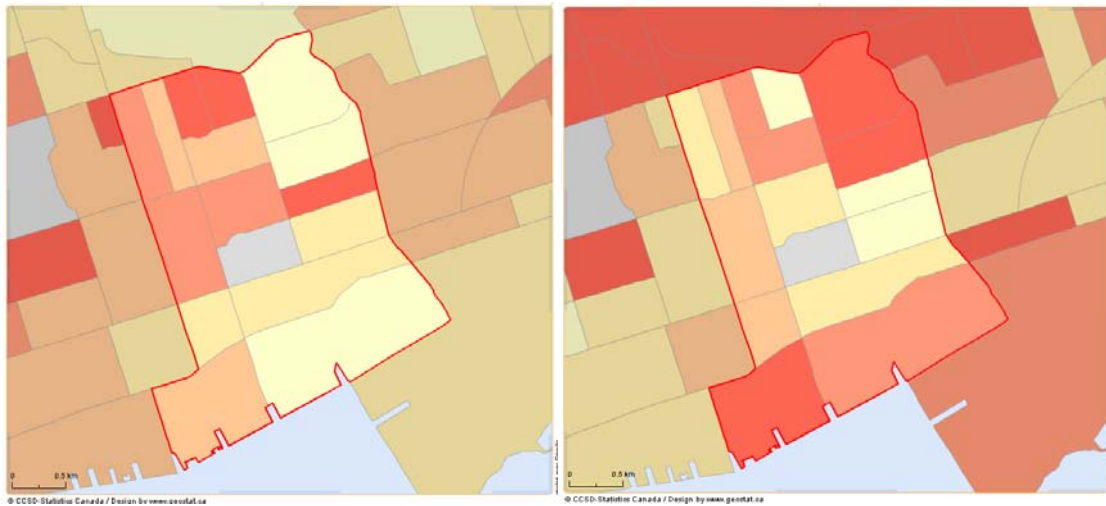
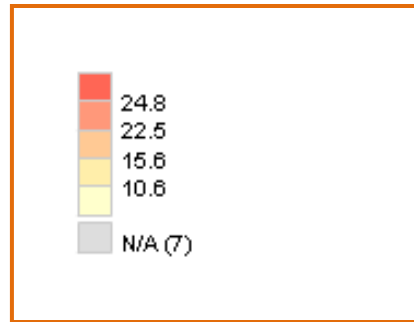
- 42.3% of immigrants arrived before 1991
- 16.7% of immigrants arrived between 1991-1995
- 15.7% of immigrants arrived between 1996-2000
- 25.3% of immigrants arrived between 2001-2006

Over the last three census counts, the recent immigrant counts have steadily declined. In 2006, there were 9,135 recent immigrants in East Downtown Toronto. In 2001, there were 10,415 recent immigrants in East Downtown Toronto and in 1996 there were 11,565 recent immigrants. As well, the high proportion of recent immigrants in the 2006 census is indicative of immigrants moving out of East Downtown Toronto after their initial arrival. By 2006, 48% of immigrants that arrived in the 1991-1996 period had left the area. In 2006, 45% of immigrants that arrived in the 1996-2000 period had left the area.

Immigrated before 1991 (in %)



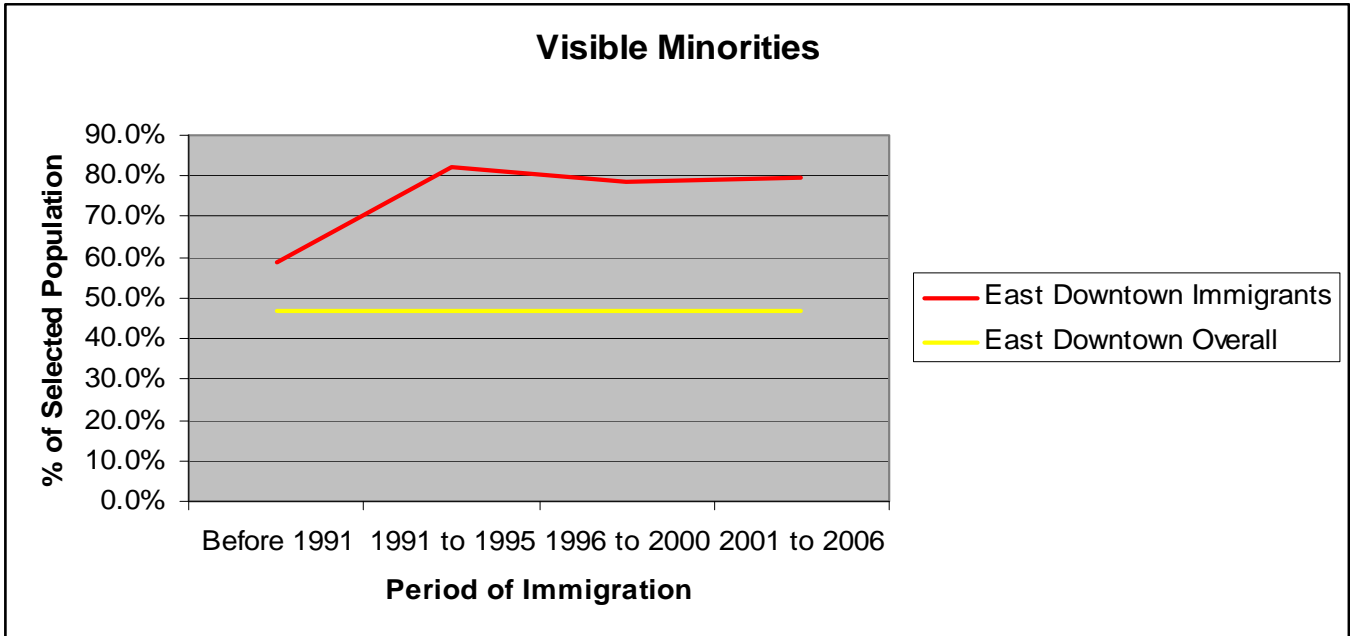
Recent Immigrants (in %)



The maps above indicate that recent immigrants are living in significantly different areas than the earlier immigrant population (the darker areas represent the areas of higher concentration).

Generally, East Downtown Toronto could be called a ‘diverse’ community. Though East Downtown Toronto residents are mostly of European ethnicity (English 18.2%, Irish 13.4%, Scottish 13.3%, Chinese 10.6% and French at 7.6%), the entire East Downtown Toronto area has a slightly higher proportion of people who identify as visible minorities (46.6%) than the CMA (43.0%). Of people who identify as visible minorities in East Downtown Toronto, 66.3% of them are immigrants.

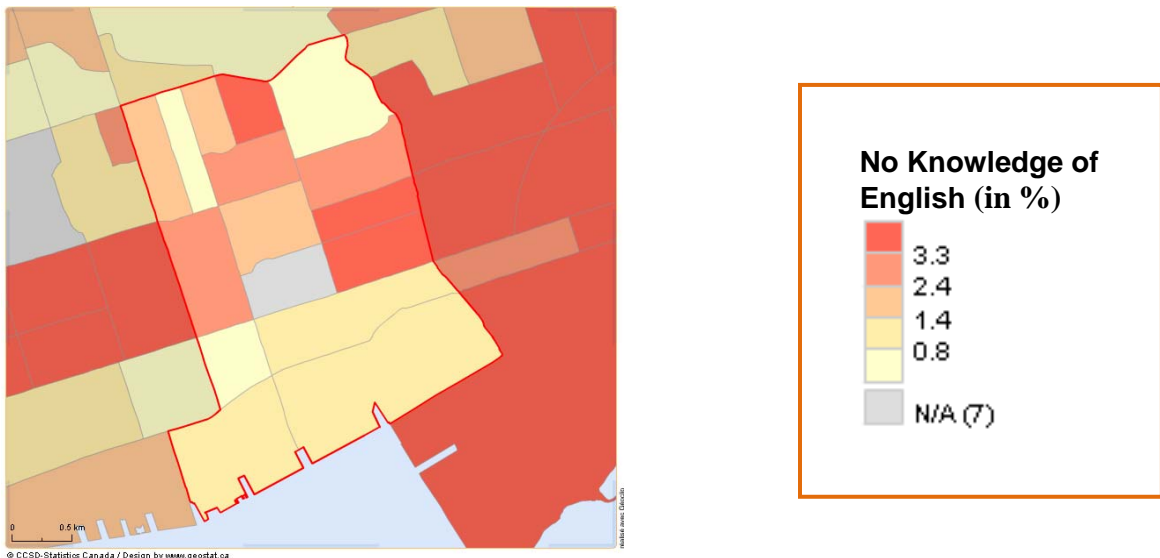
Of people who identify themselves as members of a visible minority group: 11% identified as Black, 10.1% identified as South Asian and 9.2% identified as Chinese.



Among recent immigrants, 79.4% identify as visible minorities. However, the last five years has seen a shift in the groups that are living in East Downtown Toronto. The top three visible minority groups among recent immigrants in East Downtown Toronto are: South Asian 24%, Chinese 18.2% and Black and Filipino each representing 10.7% of the population. Recent South Asian immigrants come mostly from India (7.0% of all recent immigrants), Bangladesh (5.7%), Pakistan (4.9%), and Sri Lanka (4.5%).

Language

Language is an important indicator of people’s ability to successfully settle and integrate. Without some knowledge of English, it could be very difficult for immigrants living in Toronto to access and navigate services, or find suitable housing and employment. Recent immigrants to East Downtown Toronto are more likely to have some knowledge of English or French than recent immigrants in the broader CMA. Compared to 10% of recent immigrants in the CMA, 6.6% of recent immigrants in East Downtown Toronto have no knowledge of French or English.



While these figures suggest that recent immigrants in East Downtown Toronto may be facing fewer language challenges than their CMA counterparts, it's important to remember that this measure only tells us about people who

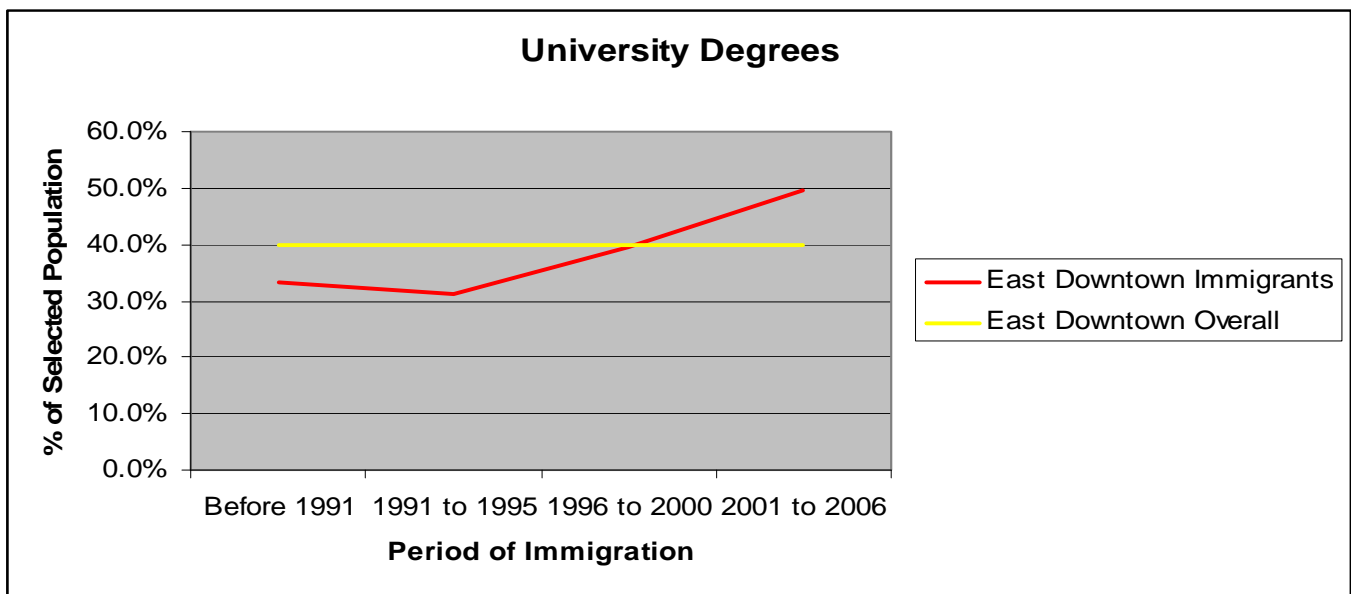
have absolutely no ability to communicate in either official language. It does not tell us to what degree people are comfortable in these languages, or the extent of their ability to communicate in them. English is the first language for only 17% of the recent immigrant population. While recent immigrants in East Downtown Toronto are more likely to speak English, they tend to be less likely than their counterparts in the CMA to speak English most often at home: 34% of recent immigrants in the CMA compared to 16.9% of recent immigrants in East Downtown Toronto list English as the language they speak most often at home suggesting a lower level of proficiency despite some knowledge of the language.

The top three non-official languages spoken at home in East Downtown Toronto are: Chinese (5.3%), Tagalog (2.01%) and Tamil (1.96%). Among recent immigrants the top three non-official languages spoken at home in East Downtown Toronto are: Chinese 14.2%, Tagalog 6.0% and Bengali 4.0%.

Education

Generally, education in Canada is considered to be an important indicator of people's earning potentials. East Downtown Toronto generally is home to a relatively high proportion of people with university degrees. At 40%, this proportion is significantly higher than the CMA, where 26.7% of the population has a university degree. This pattern holds true for recent immigrants in East Downtown Toronto as well, with 49.5% holding a university degree compared to 42.9% in the CMA.

The relatively high rate of university educated recent immigrants is not surprising. Immigration policy in Canada tends to favour people with university education and with each wave of immigration, and we see the results in the CMA. Across the CMA immigrants arriving in the most recent periods tend to be more likely to have a university degree. This proportion has steadily increased with each successive cohort.



A similar pattern is found in East Downtown Toronto. Nearly 50% of recent immigrants have university degrees. Of those who arrived between 1996 and 2000, 39.4% have degrees. Of those who arrived between 1991 and 1995, 31.3% have degrees.

Generally immigrants in East Downtown Toronto are more educated than immigrants in the CMA, and recent immigrants are more educated than the average East Downtown Toronto resident. However, as we see in the figures on employment, more education has not resulted in better paying, more secure jobs for immigrants. Eighty-two per cent of recent immigrants earned their degree in a country outside of Canada. One possible explanation as to why more education has not translated into better employment could have to do with difficulties having non-Canadian degrees recognized.

Employment

Despite their high levels of education, recent immigrants are not faring as well in the labour markets as their non-immigrant counterparts in East Downtown Toronto. While the participation rate is not necessarily an indicator of success in the labour market, other variables show that recent immigrants and immigrants that are visible minorities, are facing a more challenging labour market. These variables include unemployment rates, occupation and the proportion working full-time, full year.

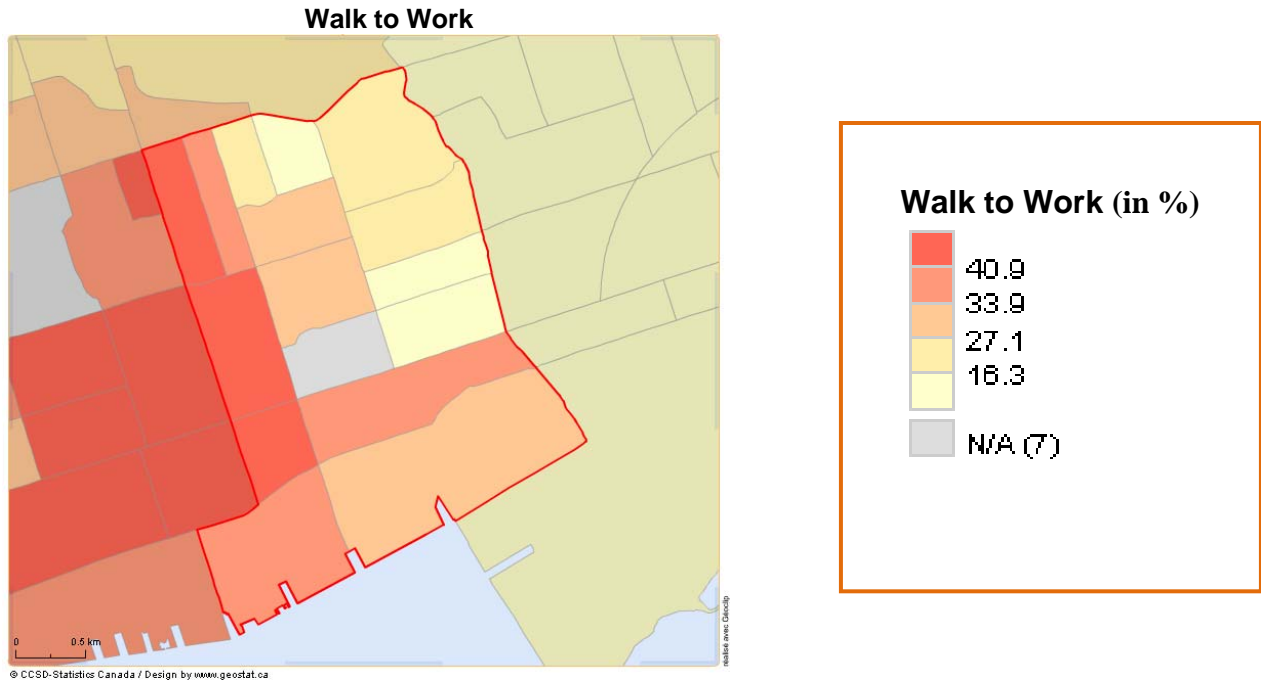
Despite their high levels of education, recent immigrants are not faring as well in the labour markets as their non-immigrant counterparts in East Downtown Toronto. Recent immigrants are likely facing greater economic challenges and need to enter into the labour market.

While recent immigrants have higher labour market participation rates than immigrants that arrived earlier, their participation rates are lower than non-immigrants in East Downtown Toronto. Within East Downtown Toronto the overall participation rate is 70.5% while the rate among non-immigrants is 76.5%, the rate among immigrants is 65.6%. Recent immigrant participation rates are slightly higher than other immigrants at 69.5%. Participation rates are likely higher as recent immigrants are likely facing greater economic challenges and need to enter into the labour market. Recent immigrants who are youth and those who are women have low participation rates compared to the average East Downtown Toronto resident. Among youth the participation rate for recent immigrants in East Downtown Toronto is significantly lower (47.2%) than the entire area (61.1%). Low participation of youth in the labour market can be an indication of youth who are in high school or who are seeking a post secondary degree. Participation rates are also generally low for women at 61.5% for recent immigrants in East Downtown Toronto compared to East Downtown Toronto average of 66.8%. The low participation

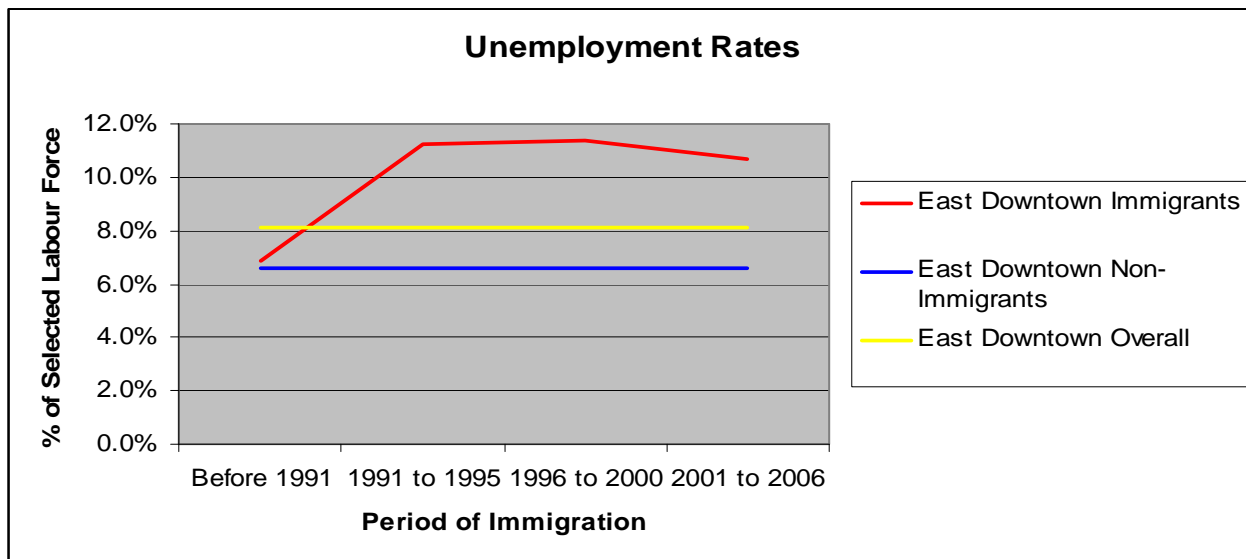
rates of youth and women may be driving down the participation rates of recent immigrants overall and are likely contributing to lower incomes in the area.

In terms of getting to work, recent immigrants are predominantly taking public transit. Of the recent immigrant population, 55.7% use transit to get to work. In general, residents of East Downtown Toronto are less likely to be taking transit than recent immigrants, but more likely to be using transit with 37.4% using transit compared to the CMA in which 22.2% of people use this mode of transportation. The high rates of transit are an indication of lower incomes for recent immigrants. East Downtown Toronto in general tends to have a high proportion of people who walk to work with 32.1% walking to work. However, only 22.2%

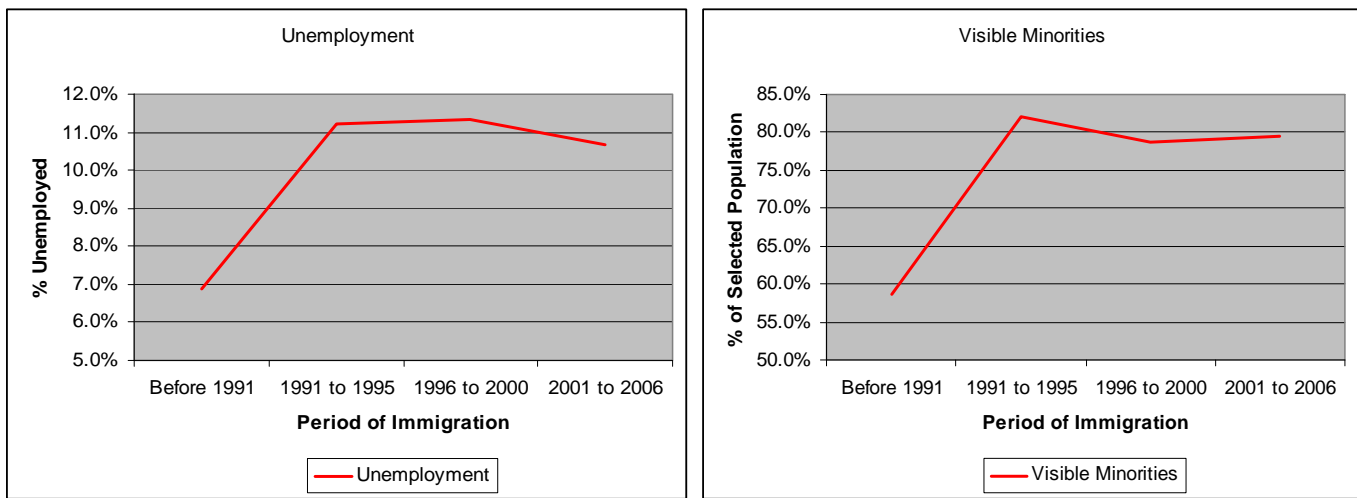
of recent immigrants walk to work, and 4.8% of people in the CMA. While walking to work tends to be correlated with the areas proximity to downtown, the lower proportion of recent immigrants walking to work is an indication that more recent immigrants are working outside of East Downtown Toronto area and taking transit to get to work. While there is a local economy in the East Downtown area, recent immigrants are less likely to be engaged in it than the average East Downtown Toronto resident.



Among those participating in the general labour market, the unemployment rates for recent immigrants in East Downtown Toronto are better than their counterparts in the CMA, with 10.8% unemployment for recent immigrants in East Downtown Toronto versus 12% of recent immigrants in the CMA. However recent immigrants face greater employment barriers than residents of East Downtown Toronto in general with an unemployment rate of 8.1%.



Contrary to what might be expected, recent immigrants in East Downtown Toronto have slightly lower unemployment rates than cohorts from earlier periods. This may be, in part, explained by higher levels of education of recent immigrants but is the opposite trend of what one might expect with other immigrant populations in Toronto. Regardless, unemployment rates for immigrants, with 10.8% for the period of 2001-2006, 11.4% for the period of 1996-2000, and 11.2% for the period of 1991-1995, are consistently higher than East Downtown Toronto average. The higher unemployment rates for earlier immigrants are possibly connected with mobility in the neighbourhood. Immigrants could be leaving East Downtown Toronto as a result of finding employment. Another explanation is that immigrants in East Downtown Toronto are confronting challenges associated with a racialized labour market. Unemployment trends are similar to trends in visible minorities as a proportion of immigrants: the higher the proportion of visible minorities in a period of immigration, the higher the unemployment rates.



However, it's also important to note that the unemployment rates in East Downtown Toronto are disparate among recent immigrants of different visible minority groups. While visible minorities that identify as South Asian and Filipino have been fairly consistent, the unemployment rates for visible minorities that identify as Chinese and Black are unexpected. Looking at the unemployment rates of different cohorts among different visible minority groups, we find that Chinese unemployment rates have improved for recent immigrants, while the unemployment rates for individuals who identify themselves as Black have increased:

Unemployment Rates

Period of Arrival	Chinese	South Asian	Black	Filipino
1991-1995	13.7%	14.8%	14.5%	6.7%
1996-2000	21.2%	14.7%	14.7%	7.2%
2001-2006	9.6%	14.4%	20.0%	8.7%

Environmental Scan Report

For visible minorities that identify as Chinese, it may be that tract 63.01 (the area South East of Yonge and Bloor) is skewing the numbers. In this area over half of the Chinese immigrants that arrived between 1996 and 2000 were unemployed. The high rate of unemployment there could be driving up the total proportion of unemployed for the period of immigration of 1996 to 2000.

Among the different visible minority populations, non-immigrants generally have lower unemployment rates than their immigrant counterparts. One exception is the Latin American population. The unemployment rate for this group is 14.3% among non-immigrants and 8.9% among immigrants. This is evidence that those facing the greatest employment barriers are visible minority immigrants that likely have fewer social networks and face more discrimination based on race.

In addition to generally high unemployment for East Downtown Toronto immigrants, underemployment is also a considerable issue. In terms of occupations recent immigrants tend to be over-represented in both the CMA and East Downtown Toronto in the lowest paying occupations of sales and service (with nearly 1 in 3 recent immigrants working in this field), as well as processing and manufacturing. These are likely “survival jobs” that may not match current skills and qualifications, but that recent immigrants are taking to meet basic needs. However, compared to their CMA counterparts, a smaller proportion of recent immigrants are working in these industries. Conversely, there are a smaller proportion of recent immigrants working in the highest paying occupation of management (8.8% compared to 12.5% for the average East Downtown Toronto resident) despite a higher proportion of recent immigrants receiving degrees in Business and Management (25.7% compared to 22.7% for the average East Downtown Toronto resident). This is an indication of underemployment for recent immigrants in senior, high paying occupations.

The following is a table of occupations ordered from the lowest paying to the highest paying occupations:

Occupation	East Downtown Toronto	Recent immigrants in East Downtown Toronto	CMA	Recent immigrants in the CMA
Sales and Service	24%	32.4%	22.2%	27.1%
Processing and Manufacturing	2.6%	5.3%	7.1%	13.7%
Primary Industry	.5%	.4%	1%	.4%
Business	21%	17.7%	21.4%	17.5%
Art, Culture and Recreation	8.9%	4.2%	3.9%	2%
Trades Transport and Equipment	4.6%	6.1%	11.9%	11.9%
Health	5%	6.9%	4.5%	4.3%
Social Sciences, Education, Social Services	12.3%	6.9%	12.3%	5.3%
Natural applied sciences	8.5%	10.5%	8.1%	11.1%
Management	12.5%	8.8%	11.6%	6.7%

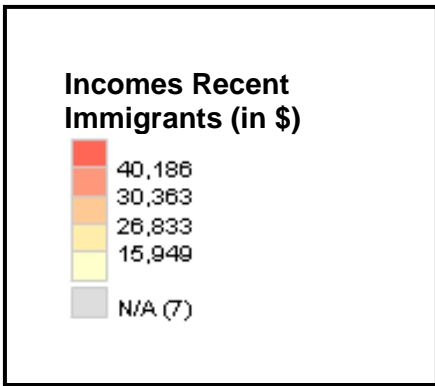
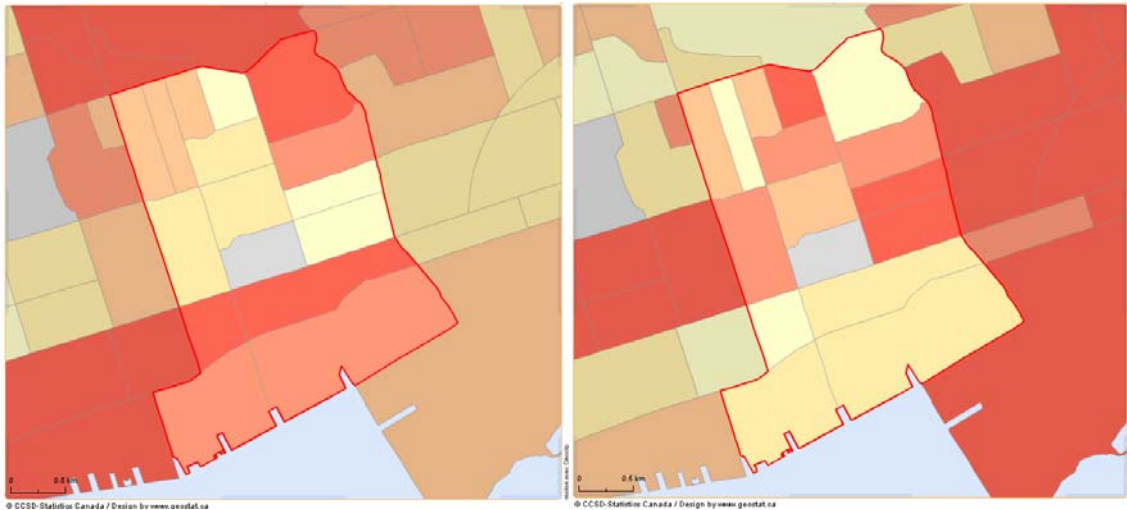
In terms of finding full-time, full year employment, immigrants in East Downtown Toronto are generally as able as their non-immigrant counterparts to work mostly full-time. However, recent immigrants are significantly less likely to be working full-year in a full-time capacity. Full-time, full-year jobs are indicative of more stable or career type employment. The challenges of finding stable jobs, combined with already high unemployment rates signifies that recent immigrants in East Downtown Toronto are struggling with unemployment, underemployment, and potentially temporary or precarious work conditions. The trend of finding full-time, full-year employment is more consistent with period of immigration than with unemployment and visible minority trends. The earlier the period of immigration, the more likely that immigrant is to have found full-time, full-year employment.

	Worked mostly full-time	Of those that worked mostly full-time, proportion that also worked full year
Non-immigrants	80.9%	70%
Immigrants	78.9%	63%
Before 1991	80.7%	70%
1991-1995	76.3%	64%
1996-2000	76.5%	61%
2001-2006	78.8%	50%

Incomes

As the figures on employment suggest, immigrants in East Downtown Toronto are generally struggling with income. The median income of East Downtown Toronto is \$29,806. This figure is slightly higher than the CMA’s median income of \$26,754. Again, we find a similar pattern between recent immigrants in the CMA and recent immigrants in East Downtown Toronto. The average median income of recent immigrants in East Downtown Toronto is \$17,461. This is higher than the median income of recent immigrants in the CMA at \$14,122, but still significantly lower than the East Downtown Toronto average.

The challenges of finding stable jobs, combined with already high unemployment rates signifies that recent immigrants in East Downtown Toronto are struggling with unemployment, underemployment, and potentially temporary or precarious work conditions.



On the maps above, low incomes are in the lighter areas on the left and areas of high recent immigration are in the dark areas on the right. The maps indicate that recent immigrants in East Downtown Toronto are living in areas where incomes tend to be lower. Period of arrival makes some difference on immigrant incomes, however, not enough to close the gap with the broader East Downtown Toronto population. The median income for immigrants within East Downtown Toronto who arrived between 1996 and 2001 is \$20,004 and \$20,469 for immigrants who arrived between 1991 and 1996.

The income challenges faced by recent immigrants could be connected with high unemployment figures, and high underemployment. Again these findings suggest that for recent immigrants, more education is not always connected with better employment and income outcomes.

As an indicator of income, median income tells us the mid-point of all incomes of a particular population. It includes the lowest incomes as well as the highest. What it doesn't tell us is the breadth of disparity between incomes. To get a more accurate income picture of recent immigrants in East Downtown Toronto, it is therefore useful to also look at low income figures. In both East Downtown Toronto and the CMA about 22% of people have incomes under \$10,000. However, recent immigrants in East Downtown Toronto (34.2%) are more likely than recent immigrants in the CMA (27.2%) to have an income of less than \$10,000. It may be that there are pockets of recent immigrants that are more financial challenges than their counterparts, and more challenges than the figures on median income reveal.

Another way of looking at income is to look at the number of people living below Statistics Canada's Low Income Cut Off (LICO). Looking at LICO reveals a very interesting trend in East Downtown Toronto. Despite a higher median income than the CMA, East Downtown Toronto as a whole has a much higher rate of percentage of people living below LICO: 18.4% versus 33.6%. Again this suggests that there are pockets of people doing far worse than what the median income would suggest.

Finally, figures around time of arrival and LICO reveal an interesting trend. Though median incomes improved for successive cohorts of immigration in East Downtown Toronto, LICO figures reveal that these

gains may not have been evenly distributed. This is consistent with East Downtown Toronto in general, which has a relatively high rate of people living below LICO (33.6%) compared with the CMA (18.4%).

Within East Downtown Toronto, 45.4% of immigrants that arrived between 1991 and 1995 lived below the LICO, 42.3% of immigrants that arrived between 1996 and 2000 lived below the LICO and 45.8% of recent immigrants lived below the LICO. In the CMA, 41% of recent immigrants live below LICO. The relatively high and consistent proportions of immigrants living below LICO combined with the increasing incomes by period of immigration indicates that there is a section of the immigrant population which continues to live with low incomes and pockets of immigrants in East Downtown Toronto that are living with significant wealth.

Unexpectedly, there has only been a small amount of improvement in the proportions of immigrants living below LICO among the three cohorts. Given the fact that over time, the populations of these cohorts have decreased dramatically, it may be that recent immigrants tend to live in certain parts of East Downtown Toronto as they start their lives in Canada, but later leave when their incomes improve. Conversely, many of those immigrants that stay in the East Downtown Toronto area are likely doing so because of continued economic challenges. This is further supported by the very high proportion of rented homes in the area.

Bibliography

Abouguendia, M. and K.A. Noels, 2001. General and Acculturation-related Daily Hassles and Psychological Adjustment in First- and Second-generation South Asian Immigrants to Canada. *International Journal of Psychology*, 36(3): 163-173.

Access Alliance Multicultural Community Health Centre (AAMCHC), 2003. *Best Practices for Working with Homeless Immigrants and Refugees*. Toronto: Access Alliance Multicultural Community Health Centre, Supporting Communities Partnership Initiative.

Access Alliance Multicultural Community Health Centre (AAMCHC), 2005. *Racialised Groups and Health Status: A Literature Review Exploring Poverty, Housing, Race-based Discrimination and Access to Health Care as Determinants of Health for Racialised Groups*. Toronto: Access Alliance Multicultural Community Health Centre.

The African and Caribbean Council on HIV/AIDS in Ontario and the HIV Social, Behavioural and Epidemiological Studies Unit, University of Toronto, 2006. *HIV/AIDS Stigma, Denial, Fear and Discrimination: Experiences and Responses of People From African and Caribbean Communities in Toronto*.

Agrawal, S.K. and M. Qadeer, 2008. *Faith-Based Ethnic Residential Communities and Neighbourhoodliness*. Research Report of 2005 CERIS-funded Project.

Alboim, N. and Maytree Foundation, 2002. *Fulfilling the Promise: Integrating Immigrant Skills into the Canadian Economy*. Caledon Institute for Social Policy.

Alboim, N., Finne, R., and R. Meng, 2005. The Discounting of Immigrant's Skills in Canada. *IRPP Choices*, 11(2): 1-23.

Alboim, N. 2009. *Adjusting the Balance: Fixing Canada's Economic Immigration Policies*. Maytree.

Anisef, P. and K.M. Kilbride, 2000. *The Needs of Newcomer Youth and Emerging "Best Practices to Meet Those Needs"*. Toronto: Joint Centre of Excellence for Research on Immigration and Settlement.

Anisef, P. and M. Lanphier, 2003. Introduction: Immigration and the Accommodation of Diversity. In *The World in a City*, edited by P. Anisef and M. Lanphier, 3-18. Toronto: University of Toronto Press.

Anisef, P., Brown, R.S., Phythian, K., Sweet, R., and D. Walters, 2008. *Early School Leaving Among Immigrants in Toronto Secondary Schools*. CERIS Working Paper No. 67.

Bauder, H. and T. Lusic, 2006. *Local, Regional and Transnational Networks and the Integration and Settlement Dispersal of Filipino Immigrants*. Research report of CERIS Working Paper.

Bauder, H. and E. Cameron, 2002. *Cultural Barriers to Labour Market Integration: Immigration from South Asia and the Former Yugoslavia*. Vancouver Centre of Excellence Research on Immigration and Integration in the Metropolis: Working Paper Series (02-03).

- Bernard, J.K., Goldbring, L, Young, J., Berinsten, C., and B. Wilson, 2007. Living With Precarious Legal Status in Canada: Implications for the Well-Being of Children and Families. *Refuge*, 101-114.
- Bernhard, J., Hyman, I. and E. Tate, 2008. *Meeting the Needs of Immigrants Throughout the Life Cycle*. Newcomer Strategy Group Discussion Paper.
- Berry, J. W., 2006. Acculturation and Adaptation of Immigrant Youth. *Canadian Diversity*, 6(2): 50-53.
- Boyd, M. and G. Grieco, 2003. *Women and Migration: Incorporating Gender into International Migration Theory*. Migration Policy Institute.
- Boyd, M., 1990. Immigrant Women, Language, Socio-economic Inequalities and Policy Issues. In *Ethnic Demography Canadian Immigration Racial and Cultural Variations*, edited by S. Hall, F. Trovata and L. Dreider, Ottawa: Carleton University Press.
- Bowen, S., 2001. *Language Barriers in Access to Health Care*. Health Canada.
- Caidi, N. and D. Allard, 2005. *Social Inclusion of Newcomers: An Informational Problem*. CERIS, Policy Matters, No. 23.
- Caidi, N., 2008. *Information Practices of Ethno-Cultural Communities*. CERIS.
- Canadian Council for Refugees, 1998. *Best Settlement Practices: Settlement Services for Refugees and Immigrants to Canada*. Canadian Council for Refugees.
- Canadian Council on Social Development, 2004a. *Nowhere to Turn? Responding to Partner Violence Against Immigrant and Visible Minority Women: Voices of Frontline Workers*, Canadian Council on Social Development.
- Canadian Council on Social Development, 2004b. *Nowhere to Turn? Responding to Partner Violence Against Immigrant and Visible Minority Women*, Canadian Council on Social Development.
- Canadian Race Relations Foundation, 2000. *Unequal Access: A Canadian Profile of Racial Differences in Education, Employment and Income*. Canadian Race Relations Foundation.
- Canadian Task Force on Mental Health Issues Affecting Immigrants and Refugees, 1988. *After the Door Has Been Opened: Mental Health Issues Affecting Immigrants and Refugees in Canada*. Ottawa: Minister of Supply and Services.
- Chiu, S., Redelmeier, D.A., Tolomiczenko, G., Kiss, A., and S.W. Hwang, 2009. The Health of Homeless Immigrants. *Journal of Epidemiology and Community Health*, 63: 943-948.
- Chundamala, J., Matsuo, T., and I. Peng, 2006. *Older Immigrant Women's Health: From the Triple Jeopardy Perspective to Cultural Competency*. Literature Review compiled for Health Status and Health Needs of Older Immigrant Women: Individual, Community and Societal and Policy Links.

Environmental Scan Report

Citizenship and Immigration Canada, 2006. *Facts and Figures 2008: Immigration Overview*. Ottawa: Minister of Public Works and Government Services Canada.

City of Toronto, 2007. *Access to City of Toronto Services for Residents without Immigration Status: Q & As*. City of Toronto.

City of Toronto, 2009. *2009 Streets Needs Assessment: Results and Observations*, City of Toronto.

Collins, E. and S. Guruge, 2008. Theoretical Perspectives and Conceptual Frameworks. *Working with Immigrant Women: Issues and Strategies for Mental Health Professionals*. Toronto: Centre for Addiction and Mental Health.

Contenta, S., 2009. How We're Creating an Illegal Workforce. *Toronto Star*, 1 November 2009.

Cresse, G., Dyck, I., and A. McLaren, 2006. *The Flexible Immigrant Household, Strategies and the Labour Market*. Vancouver Centre of Excellence Research on Immigration and Integration in the Metropolis, Working Paper Series No.06-19, 1-29. Vancouver: Research on Immigration and Integration in the Metropolis (RIIM).

De Wolff, A., 2006. Privatizing Public Employment Assistance and Precarious Employment in Toronto. In *Precarious Employment: Understanding Labour Market Insecurity in Canada*, edited by L. Vosko. Montreal: McGill-Queen's University Press.

Dunn, J. R. and I. Dyck, 2000. Social Determinants of Health in Canada's Immigrant Population: Results From the National Population Health Survey. *Social Science & Medicine*, 51: 1573-1593.

Durst, D., 2005. *Aging Amongst Immigrants in Canada: Policy and Planning Implications*. 12 Biennial Canadian Social Welfare Policy Conference: "Forging Social Futures".

Dyck, I. 2004. Immigration, Place and Health: South Asian Women's Accounts of Health, Illness and Everyday Life. *Research on Immigration and Integration in the Metropolis (RIIM)*. Working Paper Series No 04-05. Vancouver: Research on Immigration and Integration in the Metropolis (RIIM).

Fenta, H., Hyman, I., and S. Noh, 2007. Health service Utilization by Ethiopian Immigrants and Refugees in Toronto. *Journal of Immigrant Minority Health*, 9: 349-357.

Fogel, J., 2004. *Culture and Mental Health: Highlights of the 54th Annual Meeting of the Canadian Psychiatric Association*. Conference Report, October 14-17, 2004, Montreal, Quebec, Canada.

Fong, K., 2008. *Overcoming Structural Racial Discrimination: An Analysis of the Toronto Region Immigration Employment Councils' Approach to Improving Skilled Immigrants Labour Market Integration*. Current Issues Paper. Toronto: University of Toronto.

Gagnon, A. J. 2002. *Responsiveness of the Canadian Health Care System Towards Newcomers*, Commission on the Future of Health Care in Canada, Discussion Paper No. 40.

Galabuzi, G. 2001. *Canada's Creeping Economic Apartheid: The Economic Segregation and Social Marginalization of Racialized Groups*. Toronto: CJS Foundation for Research & Education.

Galabuzi, G. 2004. Social Exclusion. In D. Rapheal (Ed.) *Social Determinants of Health: Canadian Perspectives*, 235-251. Toronto: Canadian Scholars Press.

Galabuzi, G. and C. Teeluckshingh, 2008. *Social Cohesion, Social Exclusion, Social Capital*. Peel Newcomer Strategy Group Discussion Paper.

George, U. and F. Chaze, 2009. "Tell me what I need to know": South Asian Women, Social Capital and Settlement. *International Migration and Integration*, 10: 265-282.

Goldring, L., Berinstein, C. and J. Bernhard, 2007. *Institutionalizing Precarious Immigration Status in Canada*. CERIS Working Paper No. 61.

Guo, S. 2008. *Exploring Community Response to the Devaluation of Immigrant's Foreign Credentials and Prior Work Experience*. Online Proceedings of the Canadian Association for the Study of Adult Education 27th National Conference 2008, 159-164. Vancouver, BC, Canada: University of British Columbia.

Guruge, S., Berman, R., Tyyskä, V., Kilbride, K.M., Woungang, I. Edwards, S. and L. Clune, 2009. Implications of English Proficiency on Immigrant Women's Access to and Utilization of Health Services. *Women's Health and Urban Life*, 8(2): 21-41.

Grant, T. and J. Yang, 2009. Immigrants Take Brunt of Recession, Recover Less Quickly. *Globe and Mail*, last updated 10 Sept. 2009. Retrieved from: www.theglobeandmail.com/news/national/immigrants-take-brunt-of-recession-recover-less-quickly/article1231032/.

Heisz, A. and G. Schellenberg, 2004. Public Transit Use Among Immigrants. *Canadian Journal of Urban Research*, 13 (1): 170-191.

Hiebert, D., 2009. Newcomers in the Canadian Housing Market: A Longitudinal Study. *The Canadian Geographer*, 53(3): 268-287.

Hospital for Sick Children, 2005. *Early School Leavers: Understanding the Lived Reality of Students Disengageent from Secondary School: Final Report*. Toronto: Ontario Ministry of Education and Training, Special Education Branch.

Hou, F. and T. Balakrishnan, 1996. The Integration of Visible Minorities in Contemporary Canadian Society. *Canadian Journal of Sociology* 21(3): 307-326.

Hou, F. and G. Picot, 2003. *Visible Minority Neighborhood's Enclaves and Labour Market Outcomes of Immigrants*. Statistics Canada, Analytical Studies Branch.

Hou, F., 2004. *Recent Immigrants and the Formation of Visible Minority Neighbourhoods in Canada's Large Cities*. Statistics Canada. Catalogue no. 11f0019MIE2004221.

Hou, F., 2008. *Immigrants Working with Co-ethnics: Who Are They and How Do They Fare Economically?* Statistics Canada. Catalogue no. 11F0019M — No. 310.

Environmental Scan Report

- Hyman, I. and S. Guruge, 2002. A Review of Theory and Health Promotion Strategies for New Immigrant Women. *Canadian Journal of Public Health*, 93: 183-187.
- Hyman, I., Mason, R., and S Guruge, 2008. The Impact of Migration on Marital Relationships: A Study of Ethiopian Immigrant Couples in Toronto. *Journal of Comparative Family Studies*, 39(2): 149-163.
- Hyman, I., Guruge, S., Mason, R., Stuckless, N., Gould, J., Tang, T., Teffera, H., and G. Mekonnen, 2004. Post-migration Changes in Gender Relations Among Ethiopian Immigrant Couples in Toronto. *Canadian Journal of Nursing Research*, 36(4): 74-89.
- Hyman, I., Forte, T., Du Mont, J., Romans, S., and M. Cohen, 2006a. The Association Between Length of Stay in Canada and Intimate Partner Violence Among Immigrant Women. *American Journal of Public Health*, 96(4): 654-659.
- Hyman, I., Mason, R., Berman, H., Guruge, S., Kanagaratnam, P., Yoganathan, T., Tarcicius, R., and L. Manuel 2006b. Perceptions of and Responses to Intimate Partner Violence Among Tamil Women in Toronto. *Canadian Women's Studies*, 25(1 & 2): 145-150.
- Hyman, I., Forte, T., Du Mont, J., Romans, S., and M. M Cohen, 2006c. Help-Seeking Rates for Intimate Partner Violence (IPV) Among Canadian Immigrant Women. *Health Care for Women International*, 27(8): 682-694.
- Kelly, P.F., Astorga-Garcia, M., Esguerra, E. F., and the Community Alliance for Social Justice in Toronto, 2009. *Explaining the Deprofessionalized Filipino: Why Filipino Immigrants Get Low-Paying Jobs in Toronto*. CERIS Working Paper No. 75.
- Khandor, E., McDonald, J., Nyers, P. and C. Wright, 2004. *The Regularization of Non-status Immigrants in Canada 1960-2004*. STATUS Campaign.
- Khanlou, N., 2005. Cultural Identity as Part of Youth's Self-Concept in Multicultural Settings. *International Journal of Mental Health and Addiction*, 3(2): 1-14.
- Khanlou, N., 2006. Psychosocial Integration of Second and Third Generation Racialized Youth in Canada. *Canadian Diversity*, 6(2): 54-57.
- Khanlou, N., 2008. Young and New to Canada: Promoting the Mental Wellbeing of Immigrant and Refugee Female Youth. *International Journal of Mental Health and Addiction*, 6 (4): 514-516.
- Khanlou, N., Koh, J. G. and C. Mill, 2008. Cultural Identity and Experiences of Prejudice and Discrimination of Afghan and Iranian Immigrant Youth. *International Journal of Mental Health and Addiction*, 6: 494-513.
- Khosla, P., 2003. *If Low Income Women of Colour Counted in Toronto*. Toronto: The Community Social Planning Council of Toronto.
- Kilbride, K., Murphy, P. Anisef, E. Baichman-Anisef and R. Khattar, 2001. *Between Two Worlds: The Experiences and Concerns of Immigrant Youth in Ontario*. Toronto: Joint Centre of Excellence for Research on Immigration and Settlement.

- Klithinji, W. 2006. *African Community Services of Peel: An Inquiry into the Delivery of ISAP Settlement Services to the Black/African Community in Peel Halton Region*. African Community Services of Peel.
- Kouritzin, S., 2000. Immigrant Mothers Redefine Access to ESL Classes: Contradiction and Ambivalence. *Journal of Multilingual and Multicultural Development*, 21(1):14-32.
- Gilmore, J. 2009. *The 2008 Canadian Immigrant Labour Market: Analysis of Quality of Employment*. Ottawa: Statistics Canada. Catalogue no.: 71-606-XWE2009001.
- Li, S., 2000. Earning Disparities Between Immigrants and Native-born Canadians. *Canadian Review of Sociology and Anthropology*, 37(3): 289-311.
- Li, P., 2004. Social Capital and Economic Outcomes for Immigrants and Ethnic Minorities. *Journal of International Migration and Integration*, 5(2): 171-190.
- Mackenzie, H. and J. Stanford, 2008. *A Living Wage for Toronto*. Toronto: Canadian Centre for Policy Alternatives, Ontario Office.
- Man, G., 2004. Gender, Work and Migration: Deskilling Chinese Immigrant Women in Canada. *Women's Studies International Forum*, 27(2): 135-148.
- Mawani, F. N. and I. Hyman, 2008. *Initial Health Status and Needs of Immigrants*. Peel Newcomer Strategy Group Discussion Paper.
- Maytree Foundation, 2009. Abolish the Low-skilled Temporary Foreign Worker Program. *Policy in Focus*, Issue 10.
- McDonald, J. T. and S. Kennedy, 2004. Insights into the 'Healthy Immigrant Effect': Health Status and Health Service Use of Immigrants to Canada. *Social Science & Medicine*, 59(8): 1613-1627.
- Mental Health Commission of Canada Service System Advisory Committee, 2008. *Understanding the Issues, Best Practice and Options for Service Development to Meet the Needs of Ethno-cultural Groups, Immigrants, Refugees, and Racialized Groups*. Mental Health Commission of Canada.
- Milroy, B. and M. Wallace, 2004. *Ethno Racial Diversity and Planning Practices in the Greater Toronto Area*. CERIS Working Paper No. 18.
- Murdie, R., V. Preston, S. Ghosh and M. Chevalier, 2006. *Immigrants and Housing: A Review of Canadian Literature from 1990 to 2005*. Ottawa: CMHC Research Report.
- Murdie, R., 2008. Pathways to Housing: The Experiences of Sponsored Refugees and Refugee Claimants in Accessing Permanent Housing in Toronto. *Journal of International Migration and Integration* 9(1): 81-101.
- Mwarigha, M.S., 2002. *Towards a Framework for Local Responsibility: Taking Action to End the Current Limbo in Immigrant Settlement - Toronto*. Toronto: Maytree Foundation.

Environmental Scan Report

- Noh, S., Beiser, M., Kaspar, V., Hou, F. and J. Rummens, 1999. Perceived Racial Discrimination, Depression, and Coping: A Study of Southeast Asian Refugees in Canada. *Journal of Health and Social Behaviour* 40(3): 193-207.
- Omidvar, R. and T. Richmond, 2003. *Immigrant Settlement and Social Inclusion in Canada*. Perspectives on Social Inclusion Working Paper Series. Toronto: The Laidlaw Foundation.
- Ontario Council of Agencies Serving Newcomers, 2005. *When Services Are Not Enough: The Role of Immigrant and Newcomer Service Organizations in Fostering Community Leadership Development*. A Report Prepared for Ontario Council of Agencies Serving Immigrants.
- Pendukar, K. and R. Pendukar, 1998. The Colour of Money: Earnings Differentials Among Ethnic Groups in Canada. *Canadian Journal of Economics*, 31(3): 518-548.
- Picot, G., Hou, F. and S. Coulombe, 2007. *Chronic Low Income and Low-income Dynamics Among Recent Immigrants*. Statistics Canada. Catalogue No. 11F0019MIE.
- Pitts, J. 2009. *Impact of the Current Recession on Immigrants in Ontario's Labour Force*. Presentation at CERIS Seminar, December 4, 2009. Ontario Ministry of Citizenship and Immigration.
- Pottie, K., Ng, E., Spitzer, D., Mohammed, A., and R. Glazier, 2008. Language Proficiency, Gender and Self-Reported Health: An Analysis of the First Two Waves of the Longitudinal Survey of Immigrants to Canada. *Canadian Journal of Public Health*, 99(6): 505-510.
- Preston, V., Lo, L. and S. Wang, 2003. Immigrants' Economic Status in Toronto: Stories of Triumph and Disappointment. In *The World in a City*, edited by P. Anisef and M. Lanphier, 192-262. Toronto: University of Toronto Press.
- Preston, V., Murdie, M., and A. M. Murnaghan, 2006. *The Housing Situation and Needs of Recent Immigrants in the Toronto CMA*. Ottawa: CMHC Research Report.
- Preston, V., Damsbaiek, N., Kelly, P., Lemoine, M., Lo, L., Shields, J. and S. Tufts, 2010. *How Do Gender and Country of Birth Affect Labour Market Outcomes for Immigrants?* TIEDI Analytical Report 4.
- Progress Career Planning Institute, 2010. *The Power of Different: The race to bridge the skills gap in the Toronto region*, Internationally Educated Professionals Conference.
- Rasheed, N., 2009. *Understanding the Employment Service Needs of Internationally Trained Immigrants*. Colleges Integrating Immigrants to Employment.
- Raphael, D. (Ed.), 2004. *Social Determinants of Health: Canadian Perspectives*. Toronto: Canadian Scholars' Press.
- Reitz, J.G. and S. Somerville, 2004. Institutional Change and Emerging Cohorts of the 'New' Immigrant Second Generation: Implications for the Integration of Racial Minorities in Canada. *Journal of International Migration and Integration*, 5(3): 1-48.

Environmental Scan Report

- Reitz., J. G., 2005. Tapping Immigrants' Skills: New Directions for Canadian Immigration Policy in the Knowledge Economy, *IRPP Choices*, 11(1).
- Reitz, J. and R. Banerjee, 2006. *Racial Inequality, Social Cohesion and Policy Issues in Canada*. University of Toronto.
- Reitz, J. and R. Banerjee, 2007. Ethnocultural Communities: Participation and Social Cohesion. In *Belonging? Diversity, Recognition and Shared Citizenship in Canada*, edited by K. Banting, T.J. Courchene and F.L. Seidle. Montreal: Institute for Research on Public Policy: 489-546.
- Rose, D. and B. Ray, 2001. The Housing Situation of Refugees in Montreal Three Years after their Arrival: The Case of Asylum Seekers who Obtained Permanent Residence. *Journal of International Migration and Integration*, 2(4): 493-527.
- Rose, D., 2009. *Housing Issues Facing Newcomers to Canada*. Ottawa: Brief presented to Parliament of Canada Senate Subcommittee on Cities, May 6, 2009.
- Rose, D. and A. Charette, 2009. *Newcomer Families' Success to Affordable and Suitable Housing in Montréal: Front-line Service Agencies' Perspectives*. In the Context of the Local Housing System. Paper presented at 11th National Metropolis Conference, Calgary, 19-22 March. (Powerpoint). Retrieved from: http://canada.metropolis.net/events/11th_nat_conf/pdfs_e/A1.pdf. Accessed on 7 May 2009.
- Sadiq, K. D., 2004. *The Two-Tier Settlement System: A Review of Current newcomer Settlement Services in Canada*. CERIS Working Paper No. 34.
- Sahay, T., and C. Glover, 2005. *Newcomer Best Practices Review*. Prepared for the United Way of Greater Toronto.
- Snowden, L. R., Hu, Teh-wei, and J.M. Jerrell, 1995. Emergency Care Avoidance: Ethnic Matching and Participation in Minority-Serving Programs. *Community Mental Health Journal*, 31(5): 463-473.
- Simich, L. 2009. *Health Literacy and Immigrant Populations*, Policy Brief prepared at the request of the Public Health Agency of Canada, Ottawa.
- Shields, J., Phan, M., Yang, F., Kelly, P., Lemoine, M., Lo, L., Preston, V., and S. Tufts, 2010. *Do Immigrant Class and Gender Affect Labour Market Outcomes for Immigrants?* TIEDI Analytical Report 2.
- Siemiatycki, M. 2007. Invisible City: Immigrants Without Voting Rights in Urban Ontario. *Our Diverse Cities: Ontario*, No. 4: 166-168.
- Social Planning Toronto, 2009. *Toronto's Social Landscape: 10-Year Trends, 1996-2006*. Toronto: Social Planning Toronto.
- Spritzer, D., Neufeld, A., Harrison, M., Hughes, K., and M. Stewart, 2003. Caregiving in Transnational Context: "My Wings Have Been Cut; Where Can I Fly?" *Gender & Society*, 17 (2): 267-286.
- Teelucksingh, C. and G. Galabuzi, 2005. *Working Precariously: The Impact of Race and Immigrants Status on Employment Opportunities and Outcomes in Canada*. The Canadian Race Relations Foundation.

- Teixeira, C. 2006. Housing Experiences of Black Africans in Toronto's Rental Market: A Case Study of Angolan and Mozambican immigrants. *Canadian Ethnic Studies*, 38(3): 58–86.
- Tharao, E. and N. Massaquoi, 2002. Black Women and HIV/AIDS: Contextualizing their Realities. *Canadian Women Studies*, 21(2): 72-80.
- Walker, P. and G. Agatiello, 2008. *Step It Up! Young Women's Conversation Circle 2008*. Focus Group: You & Your Health, August 5th, 6th & 11th.
- Wayland, S. V., 2007. *The Housing Needs of Immigrants and Refugees in Canada*. Ottawa: Canadian Housing and Renewal Association.
- Wayland, S. V., 2006. *Unsettled: Legal and Policy Barriers for Newcomers to Canada*. Community Foundations of Canada and Law Commission of Canada.
- Wayland, S., 2007. *The Housing Needs of Immigrants and Refugees in Canada*. A Background Paper for the Canadian Housing and Renewal Association.
- Wayland S. and S.K. Agrawal, 2008. *Human Service Needs*. Peel Newcomer Strategy Group Discussion Paper 1.
- Weiner, N., 2008. Breaking Down Barriers to Labour Market Integration of Newcomers in Toronto. *IRPP Choices*, 14 (10).
- Wente, M., 2008. Discrimination Eats Away At You --- and Increases Your Chance of Mental Illness, *Globe and Mail*, 19 November 2008.
- Workers' Action Centre, 2007. *Working on the Edge*. Toronto: Workers' Action Centre.
- Wortley, S., and J. Tanner, 2006. Immigration, Social Disadvantage and Urban Youth Gangs: Results of a Toronto-area Survey. *Canadian Journal of Urban Research*, 15 (2): 18-37.
- Workers' Action Centre, 2007. *Working on the Edge*, Workers' Action Centre.
- Zanchetta, M.S. and I.M. Poureslami, 2006. Health Literacy Within the Reality of Immigrants' Culture and Language. *Canadian Journal of Public Health*, 97(Supplement 2), S26-S30.
- Zeitsma, D., 2007. *The Canadian Immigrant Labour Market in 2006: First Results from Canada's Labour Market Survey*. Ottawa: Statistics Canada. Catalogue no. 71-606-XWE 2007001.

East Downtown Toronto Local Immigration Partnership

What is Local Immigration Partnership?

Local Immigration Partnership (LIP) is a program developed by Citizenship and Immigration Canada in partnership with the Ontario Ministry of Citizenship and Immigration to strengthen the role of local neighborhoods in serving and integrating immigrants.

The East Downtown Toronto LIP has been created to support the objectives of the Canada-Ontario Immigration Agreement and complement efforts by Canada, Ontario and Toronto to improve immigration outcomes for immigrants and for Toronto as a whole.

LIP seeks to help communities put immigration on their overall planning agenda in order for communities to benefit from the successful social and economic integration of new immigrants. LIPs identify groups that coordinate and enhance service delivery to newcomers to avoid duplication and promote efficient use of resources.

LIPs also aim to provide a collaborative space for the development and implementation of sustainable local and regional solutions for successful integration of immigrants to Toronto.

The geographic boundaries for the East Downtown Toronto LIP have been established as North of Lakeshore, South of Bloor, East of Yonge and West of the Don Valley River.